

St. Francis Medical Center  
School of Radiologic Technology

STUDENT CATALOG  
2011

The **Standards for an Accredited Educational Program in Radiologic Sciences** are posted in the Radiology Classroom and available online at [www.jrcert.org](http://www.jrcert.org).

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## **IMPORTANT INFORMATION**

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### **ACCREDITATIONS**

*The School of Radiology is accredited by both the Joint Review Committee on Education in Radiologic Technology, 20 N. Wacker Drive, Suite 2850, Chicago, IL 60606-3182, (312) 704-5300 and the NJ State Department of Environmental Protection, Radiologic Technology Board of Examiners, PO Box 415, Trenton, NJ 08625-0415, (609) 984-5890.*

### **IMPORTANT WEB ADDRESSES**

<a href="http://WWW.JRCERT.ORG">WWW.JRCERT.ORG</a>	Joint Review Committee on Education in Radiologic Technology
<a href="http://WWW.NJ.GOV/DEP/RPP/TEC/index.htm">WWW.NJ.GOV/DEP/RPP/TEC/index.htm</a>	NJ State Department of Environmental Protection, Bureau of Radiological Health
<a href="http://WWW.ARRT.ORG">WWW.ARRT.ORG</a>	American Registry of Radiologic Technologists
<a href="http://WWW.ASRT.ORG">WWW.ASRT.ORG</a>	American Society of Radiologic Technologists

### **NOTICE**

*Program Effectiveness Outcomes and other consumer information regarding, examination pass rates, student retention, employment of graduates and crime statistics are available on the website and/or from the Program Director.*

### **DISCLAIMER**

*The information contained in this handbook is not to be considered an irrevocable contract between the student and the Program. St. Francis Medical Center School of Radiology Program Officials and faculty reserve the privilege of changing policies, curriculum, costs, and practices at any time.*

## The Mission Statement of the School of Radiologic Technology

In support of the mission and values of the Saint Francis Medical Center, The School of Radiologic Technology seeks to provide comprehensive quality radiologic technology education in an effort to graduate competent and compassionate radiographers who will provide excellent patient care and radiographer services to the communities in which they serve.

St. Francis Medical Center School of Radiologic Technology fulfills this mission through these **goals**. Upon graduation the student will fulfill these **goals**.

The graduate will:

1. demonstrate a well-rounded knowledge and understanding of Radiology by mastering the didactic and clinical competency based curriculum of the Program.
2. practice patient care with compassion, empathy, dignity and respect.
3. demonstrate knowledge of radiation protection principles to provide a safe medical imaging environment.
4. support the ASRT Code of Ethics and participate in professional activities to ensure continued educational development and growth.
5. apply effective communication, problem-solving and critical thinking skills as a member of the healthcare team.

## Code of Ethics

As developed by the American Society for Radiologic Technologists

1. The Radiologic Technologist conducts himself/herself in a professional manner, responds to patient needs and supports colleagues and associates in providing quality patient care.
2. The Radiologic Technologist acts to advance the principal objective of the profession to provide services to humanity with full respect for the dignity of mankind.
3. The Radiologic Technologist delivers patient care and service unrestricted by concerns of personal attributes or the nature of the disease or illness, and without discrimination, regardless of sex, race, creed, religion, or socioeconomic status.
4. The Radiologic Technologist practices technology founded upon theoretical knowledge and concepts, utilizes equipment and accessories consistent with the purpose for which they have been designed, and employs procedures and techniques appropriately.
5. The Radiologic Technologist assesses situations, exercises care, discretion and judgment, assumes responsibility for professional decisions, and acts in the best interest of the patient.
6. The Radiologic Technologist acts as an agent through observation and communication to obtain pertinent information for the physician to aid in the diagnosis and treatment management of the patient, and recognizes that interpretation and diagnosis are outside the scope of practice of the profession.
7. The Radiologic Technologist utilizes equipment and accessories, employs techniques and procedures, performs services in accordance with an accepted standard of practice, and demonstrates expertise in limiting the radiation exposure to the patient, self and other members of the health care team.
8. The Radiologic Technologist practices ethical conduct appropriate to the profession, and protects the patient's right to quality radiologic technology care.
9. The Radiologic Technologist respects confidences entrusted in the course of professional practice, protects the patient's right to privacy, reveals confidential information only as required by law or to protect the welfare of the individual or the community.
10. The Radiologic Technologist continually strives to improve knowledge and skills by participating in educational and professional activities, sharing knowledge with colleagues and investigating new and innovative aspects of professional practice. One means available to improve knowledge and skills is through professional continuing education.

## STUDENT REGULATIONS

Starting date for the School of Radiologic Technology is the first week in July. The program is 24 months in duration.

### **BEREAVEMENT**

In case of death of a close relative (father, mother, sister, brother, or spouse) 3 days of leave will be granted. One-day leave is granted for a relative such as aunt, uncle, or grandparent. This follows the Medical Center's Bereavement Policy.

### **BREAKS AND LUNCHES**

One half hour is provided for meals and 15 minutes are provided for a break. Students must have the permission of the supervising technologist before taking lunch or break.

### **CHEATING AND PLAGIARISM**

Students are expected to be honest and present only their work. *Any ideas or materials taken from others must be acknowledged, or it is considered plagiarism.* Students are also expected to cooperate and assist in the prevention of cheating and plagiarism. Both cheating and plagiarism are considered serious offenses and will result in disciplinary action as deemed appropriate. These actions may include a zero for the involved work, suspension and/or dismissal from the Program.

The ARRT Rules of Ethics are standards of minimally acceptable professional conduct for all Registered Technologists and candidates. The certification application asks students to respond to a question about violations or sanctions related to the academic honor code. Refer to the ARRT website for additional information.

### **CRIMINAL BACKGROUND CHECK**

Criminal Background Checks are required for all students. In order to take part in clinical experiences a student must not have been convicted of or pled guilty to a violent crime, illegal sale, use of or theft of controlled dangerous substances, or a sexual offense. A student whose criminal background check discloses a conviction or unresolved arrest for a crime or misdemeanor that could jeopardize the health, safety or welfare of any patient, employee, student or visitor may also be barred from clinical. The criminal background check will be conducted by an external service provider in compliance with the Fair Credit Reporting Act. (See appendix SC-A3)

### **DISASTER, FIRE, BOMB AND POWER FAILURE PLANS**

During the Medical Center's orientation the procedures related to disaster, fire, bomb and power failure will be explained to students in detail. After that the students will be expected to be alert to such and act in an appropriate manner, according to Medical Center and department procedures.

### **DRUG SCREENING**

All St. Francis Medical Center students must undergo and successfully pass a 10-panel drug screening prior to admission to the program.

### **EMPLOYEE ASSISTANCE PROGRAM**

The St. Francis Medical Center Employee Assistance Program (609-599-5015) is available to all students and their families. Referrals may be made through Program Officials or through self-referrals. This program is a hospital-wide referral service designed to direct individuals with stress related problems to the appropriate resource. Any problem that interferes with scholastic performance, i.e. marital difficulties, parent-child conflicts, school-related stress, substance abuse, depression, etc. is referable. Any contact with the Employee Assistance Program is strictly confidential. There is no charge for meetings with the EAP coordinator; however, students who require more extensive counseling sessions will be referred to community resources, which may result in a charge. Care-of-self is an important aspect of healthcare; students are encouraged to use this resource!

### **ETHICAL REQUIREMENTS FOR THE ARRT EXAMINATION**

Eligibility for the ARRT examination requires that the candidate comply with the Rules of Ethics contained in the ARRT Standard of Ethics. The Rules of Ethics are standards of minimally acceptable professional conduct for all Registered Technologists and applicants. One issue addressed by the Rules of Ethics is conviction of a crime, including felony, gross misdemeanor or misdemeanor, with the sole exception of speeding and parking violations. All alcohol and/or drug related violations are included. "Conviction," as used in this provision, includes a criminal proceeding where a finding or verdict of guilt is made or returned but the adjudication of guilt is either withheld or not entered, or a criminal proceeding where the individual enters a plea of guilty or nolo contendere. All potential violations are investigated by the ARRT in order to determine eligibility. A pre-application review by the ARRT is possible. (Source: ARRT Examinee Handbook.) **Students are strongly encouraged to investigate this requirement, if applicable, prior to enrollment in the Program.**

### **EXAMINATIONS**

All students are expected to be present for all scheduled examinations. No personal items will be allowed in the testing situation.

Exams will start promptly at the scheduled time. Students who are late more than 15 minutes will not be allowed to sit for the scheduled exam and will be required to take a make-up exam.

Course faculty will proctor all exams. If cheating is *suspected*, the proctor will intervene during the exam as deemed appropriate, which may include: verbal warning, moving the student, etc. If cheating is *observed*, the proctor will confiscate materials, the exam and answer sheet, and the student will be required to leave the testing area. Evidence of cheating will be referred to Program Officials for disciplinary action. Sharing exam information with individuals, who have not taken the exam or course, is considered a form of cheating.

Make-up exams must be scheduled with the course instructor. The exam will be scheduled at the discretion of the instructor and may be of a different form.

A student who misses more than two exams may be subject to course failure.

### **HOLIDAYS AND VACATIONS**

The Program observes the following holidays:

New Year's Day	July 4
President's Day	Labor Day
Good Friday	Thanksgiving Day
Memorial Day	Christmas

During each year of the Program three weeks of vacation are granted.

- One-week vacation during the week between Christmas and New Year's Day
- One-week is a scheduled spring break
- One-week vacation may be taken during the Summer 2 semester (July or August).

Students exceeding allotted sicktime will forfeit vacation time accordingly. See Attendance and Lateness Policy, Pg. 19.

### **HOSPITAL PROPERTY**

Any student proven through Due Process guilty of taking hospital property from any department without proper authorization, or found defacing hospital property is subject to immediate dismissal.

### LIBRARY FACILITIES

The Radiology Program has a library containing numerous up-to-date texts that are available for student use at any time during the normal Program hours. There are additional texts located in both the Program Director's and Clinical Instructor's offices. These texts are also available to students during normal Program hours. Students should notify the Program Director or Clinical Coordinator to borrow these texts.

The students are allowed to use the audiovisuals and texts in the Radiology Library or classroom after hours. Arrangements may be made in advance with Program Officials for after hour research.

### HEALTH SCIENCE LIBRARY – CREAN HALL

The Health Science Library is located on the ground floor of Crean Hall. The Library has almost 4000 books and subscribes to 250 periodicals. Electronic database searches are performed in house by a librarian or patron. These data bases are the counterparts to the printed form know as Index Medicus and the Cumulative Index to Nursing and Allied Health (CINAHL). (CINAHL) is available Full Text along with NRC (Nursing Reference Center). NRC is a comprehensive reference tool to provide relevant clinical resources to nurses directly at the point of care. NRC offers staff nurses, nurse administrators, nursing students, nurse faculty and hospital librarians the best available and most recent clinical evidence from thousands of full-text documents. The database provides in-depth content from top publishers covering areas including conditions & diseases, patient education resources, drug information, continuing education, lab and diagnostic detail and best practice guidelines. NRC and CINAHL (full text) are made available from EBSCO Publishing and can be accessed on any computer in the School and from your computer at home.

Through a database service, the librarian can access more than eighty other databases of various disciplines. Interlibrary Loan is available. The library is a member of an electronic mail network which allows requests to be placed on line. The average receipt time is 1 to 3 days. Fax and email retrieval is available when needed. Personal book purchases can also be arranged through the library's vendor.

The Library is open: Monday through Friday from 7:00 AM to 4:30 PM and can be made available other times with prior arrangement.

The librarian is in attendance during regular hours. You are requested to withdraw materials only when a staff member is present. An atmosphere of peace and quiet pervades in the library at all times. Any necessary conversation should be held in a low tone. The photocopy machine may be used at no cost.

A copy of all required books and readings will be held on reserve in the Library. Loan periods for materials are as follows:

Reference Books - no circulation

Periodicals - no circulation.

Reserve Books - overnight and weekends.

Professional and Technical Books - two weeks (a renewal will be granted unless another borrower requests the book)

Personal book purchases can also be arranged through the library's vendor.

### AUDIO VISUAL/COMPUTER ROOMS – CREAN HALL

Multiple Audio Visual/Computer Rooms are located in Crean Hall. The audiovisual, computer and interactive video holdings are printed in a guide to assist students. Students are encouraged to utilize this area to help develop learning skills. **Please follow all guidelines related to the use and care of all equipment. Abuse of equipment will result in loss of the privilege to use the equipment. There will be no food or drink in any computer room.** Students must comply with all aspects of the posted policies governing the use of

**computers and accessing computer networks and the Internet.** The computer labs are available for use from 8:00 AM until 5:00 PM Monday through Friday. If additional times are needed, please check with the School office. Every effort will be made to accommodate your schedule. Certain audiovisual and computer programs are available for overnight or weekend loan. See School of Nursing personnel for loan policies and procedures.

### LOCKERS

Lockers are provided to all students for their personal use. They are located adjacent to the radiology lounge. Combination locks will be provided for student use. After graduation, students are required to clean and remove all contents. Locks must be returned to the Program. Any materials left in the lockers will be donated to the Sr. Hyacintha Program.

### PARKING

Parking is limited; when space is available, students may park in the garage. **Students are not allowed to park in patient or handicapped areas. (This includes the entire first up-ramp of the garage.)** If parking on the street, be careful to check the posted restrictions for the block where you park. Please do not block driveways, fire hydrants or crosswalks. Be good neighbors.

### PERFORMANCE EVALUATION AND GRADE REPORTS

At the conclusion of each semester the student will receive a grade report for all clinical and didactic courses. Also at this time a conference will be held with Program Officials to discuss the student's status in the Program. A Professional Development Evaluation, completed by the Clinical Instructor, as well as an evaluation completed by the Program Director will also be completed. **Students may not progress to the next level course until prerequisite course requirements are met.**

### PHOTOCOPY MACHINE

The photocopy machine is located in the Radiology Department. Reasonable use is permitted as directed by Program Officials. If a student needs to make excessive copies (over 10 copies), permission must be granted by Program Officials and a .05 cent per copy fee may be collected.

### PROFESSIONAL BEHAVIOR AND CONDUCT

Professional behavior is to be displayed at all times. This includes stability, mature conduct, motivation, ability to cooperate and accept constructive feedback, neatness, personal pride in one's self and one's assignments, ability to interact with people, ability to work independently when proficient, ability to practice and uphold medical ethics, ability to demonstrate both logical thinking, common sense and integrity.

Radiology students are expected to adhere to the profession's Code of Ethics, all applicable federal and state laws and all related policies of the Medical Center. Students are expected to adhere to the Medical Center's Values in Practice (VIP) Standards of Behavior. Failure to comply may result in progressive disciplinary action.

The following behaviors are not considered professional and should be avoided. This includes discussing private lives with other students or staff in the presence of clients, eating in clinical areas, chewing gum, and argumentative behavior with clients, staff, faculty, or other students. Negative comments related to your education, the Program or the Medical Center are not acceptable in any area where others may over hear. This includes clinical areas, hallways, elevators, cafeteria, and such of St. Francis Medical Center and all affiliations. Remember that your negative comment can leave a lasting impression regarding you as a professional as well as the Program and the Medical Center.

Students are expected to cooperate with hospital personnel in keeping the Medical Center quiet. Loud talking or congregation in clinical areas should be avoided.

**Students are not permitted to sign or witness the signing of legal papers, or consents for patients.**

No newspapers, magazines, books or notebooks are to be read in the clinical areas during clinical assignments.

### **Privacy and Confidentiality**

St. Francis Medical Center is committed to protecting the privacy of all patients and protecting the confidentiality of their protected health information. All information of any client, at any clinical site is to be maintained in strict confidence. No discussion of any information about clients is to be held with any persons without need to know and who are not involved in the client's care. Refrain from discussions with other caregivers in the presence of any other persons in such public places as clinical areas, hallways, elevators, cafeteria, and any outside locations. Access to client information, via computer, is also to be treated with strict confidential practices. No student is to review reports via computer or paper, on anyone not assigned to the individual obtaining the information. Students will receive more information about the **Health Insurance Portability and Accountability Act (HIPAA)** during orientation. *A breach of confidentiality may result in dismissal from the Program.*

### **Socialization with clients**

Students may visit relatives and friends who are clients in the Medical Center in compliance with visiting regulations of the Medical Center and with permission from Program Officials. It is considered unprofessional and unethical for students to accept gifts from clients in return for care given and inappropriate to make social engagements with clients.

Clients are to be addressed as follows:

Mr. \_\_\_\_, Mrs. \_\_\_\_, or Miss \_\_\_\_, unless specifically requested to use first name or under 16 years of age.

Physicians, residents, and interns are to be addressed by the title Dr. \_\_\_\_.

When answering the telephone always say: "Hello, Radiology Department, (your name) speaking, how may I help you?"

### **PROFESSIONAL DRESS CODE**

It is imperative that the student maintains a professional image that inspires confidence and credibility. This requires that the student not only is capable, but looks capable. Professional attire, appearance, and manner are of high priority and reflect upon the program as well as the individual.

The uniform is a symbol of St. Francis Medical Center School of Radiology. Wherever the uniform is seen the observer thinks not only of the individual wearing it, but of the school of which it stands and the traditions which that school upholds in the profession of radiology. *The wearing of the uniform is therefore not subject to individual variation by the wearer.*

Students are expected to follow the Program's dress code at all times. Failure to do so may result in dismissal from the premises or other sanctions deemed necessary by Program Officials.

### **Uniform**

A Program uniform is required. The female student wears white uniform pants or a white uniform skirt with a green pinfeather uniform shirt. Male students wear white uniform pants and a green pinfeather uniform shirt. White jeans and jersey sweat pants are not appropriate. A Program laboratory coat, or white cardigan sweater is optional and can be worn when the student is in the clinical area. The Program insignia patch is to be sewn on the uniform, lab coat and/or sweater.

Accessories to the uniform include the name badge, Medical Center identification badge, right and left film markers (first set provided by Program), pen, and black felt marker. **Students are expected to be in full uniform, including accessory items at all times while in the clinical setting.**

### **Personal Appearance - Clinical Setting**

All uniforms must be neat, clean, ironed and keeping with a professional appearance. Uniforms are not to be worn when torn, stained or soiled. Buttons are to be sewn on.

#### **Hose and Socks**

White hose are to be worn with the dress. No knee-highs, leg warmers, anklets, or socks are to be worn with the dress uniform. Plain white socks, covering the ankle or white knee-highs are to be worn with uniform pants.

#### **Shoes**

Only clean standard white shoes with clean white shoelaces may be worn. Shoes are to be kept clean and in good repair. **Plain, white leather sneakers without colors may also be worn.** No sandals, hiking boots, work boots or platform soles are to be worn unless provided with a physician's certificate specifying limits. Clogs must have rubber soles with no more than a 2" heel. A backstrap is advisable. Clogs worn in the clinical setting must be white. All shoes must be skid proof.

#### **Identification Badge**

**All students must wear an Identification Badge on outer clothing, above the waist, where it will be clearly visible while in the Medical Center and other clinical affiliates.** Identification Badges will be issued to the student during the first week of the Program. **Additionally, the student's nameplate must also be clearly visible at all times.**

#### **Jewelry**

Small stud type earrings may be worn; no hoops or dangles greater than one inch may be worn. A maximum of two earrings per ear is allowed. Necklaces are not in good taste with the uniform. Rings should be limited to wedding, engagement and school rings. No facial jewelry, including tongue rings, is allowed.

#### **Manicures**

Fingernails should be short, clean and well manicured. Colored nail polish may not be worn due to the damage it can do to the cassette screens. Only colorless nail polish may be worn.

#### **Hairstyles**

Women and men's hair must be clean and well groomed. If long, hair must be appropriately pulled back and off of the shoulders in the clinical setting. Colored bows, barrettes and other such ornaments are not to be worn with the uniform. All facial hair must be shaped and neatly trimmed; all skin areas must be freshly shaven.

#### **Make-up and fragrances**

Make-up should be moderate. Lightly scented perfume or after-shave is permitted.

**Tattoos:** Tattoos should not be visible.

### **Personal Appearance - Classroom Setting**

The uniform may be worn or tasteful casual clothing clothes can be worn when the student is not assigned to the clinical areas. *Low cut, see-through garments, sweatpants, tee shirts tank tops, shirts with writing on them, shorts or miniskirts more than 3" above knee, spandex pants are not permitted.* Under clothes should not be visible through outer clothing. All clothing shall be kept clean, neat, pressed and in good condition. Clothing must not be tight fitting or revealing. Failure to follow these guidelines may result in your dismissal from the campus.

**For identification purposes, students must wear their SFMC identification badge over their street clothes when in the Medical Center. The ID badge must be clearly visible and worn above the waist.**

Students are expected to comply with the above uniform requirements. Any deviation must be corrected or the student will be marked absent and dismissed from the campus.

### **SEXUAL AND GENDER HARASSMENT**

St. Francis Medical Center School of Radiologic Technology is committed to fostering and maintaining an environment that is fair and free of any discrimination. Sexual or gender harassment of any kind will not be tolerated.

Sexual harassment is defined as any unwelcome physical or verbal behavior of a sexual nature that creates an intimidating, hostile, or offensive learning environment, or that makes individuals feel their status will be affected by their responses to such behavior, specifically when:

- submission or rejection of such conduct is made whether explicitly or implicitly a term or condition of an individual's status at the school; or
- such conduct has the purpose or effect of unreasonably interfering with an individual's educational performance.

Gender harassment consists of acts of verbal, nonverbal, or physical aggression, intimidation, or hostility based on gender, but not involving conduct of a sexual nature, that is sufficiently severe, persistent or pervasive to create a hostile environment.

Students should seek resolution of situations, which they consider to be sexual or gender harassment by contacting one of the following individuals:

1. Director of the School of Radiologic Technology, Theresa Levitsky – X5234
2. Director of the Schools of Nursing and Allied Health, Bonny Ross – X5192
3. Vice President of Mission Services – X5785

All discussions between alleged victim and the designated staff are held in confidence whenever possible. Discussions will not become part of the public institutional record. However, it must be understood that taking appropriate action may necessitate the sharing of some personal information; if so, it will be done discreetly and privately.

If the alleged incident of sexual harassment cannot be satisfactorily resolved informally, the complainant may then file a formal complaint with the Director of Human Resources at the Medical Center (X5081). Cases referred will be reviewed through procedures that are appropriate for the particular complaint, taking into account all rights of the complainant and the alleged offender. All complaints will be promptly and thoroughly investigated.

It is encouraged and expected that individuals can obtain appropriate action through internal procedures. If the issue is not satisfactorily resolved within the school, an individual may file a formal complaint through the US Government Equal Opportunity Commission or the New Jersey Division of Civil Rights.

### **SMOKING**

St. Francis Medical Center is a **SMOKE FREE CAMPUS**. Smoking of any kind (cigarette, cigar, pipe, etc.) by any person (patient, visitor, physician, employee, volunteer, salesperson, contractor, student, etc.) within the Medical Center campus is strictly prohibited. Smoking is prohibited in all areas inside and outside the Medical Center's buildings and on the entire campus of St. Francis Medical Center including the parking garage. Those found in violation are subject to progressive disciplinary action, according to the Smoke Free Medical Center Policy.

### **STUDENT HEALTH**

A Health program under the auspices of the Medical Center Health Service is provided to establish positive health, attitudes and habits, and to provide an opportunity for maintaining them. Each student must accept responsibility for his/her own health, and is expected to maintain high standards of mental, physical, and emotional health.

For the protection of students, clients, and employees, students are required to provide documentation of immunity to certain communicable diseases that can be prevented by immunization. Pre-admission physical examination records must be provided to the School of Radiology prior to arrival into the Program. No student will be permitted to participate in clinical rotations until health forms have been received. A full list of required immunizations and diagnostic testing can be found in the "Immunization/Diagnostic Requirements Policy" (SEE APPENDIX SC A-1.)

All students must have the required immunizations on admission, except hepatitis and maintain all immunizations and screenings throughout their attendance in the Program. Further immunizations and documentation may be required as administration determines necessary. Once enrolled in the program, the student will obtain a yearly PPD (TB) screening through the Employee Health Office.

All students are **required** to carry some form of health/hospitalization insurance. Students should check to see if they are covered by family insurance. Copies of insurance cards must be submitted to program officials prior to the start of the program. Students are responsible for health care costs.

The Employee Health Office is located in the main building on the ground floor of St. Francis Medical Center, in conjunction with the Adult Health Services Department. Hours of operation are available by calling the Employee Health Office at extension 5275. The health office nurse practitioner is available by appointment via the health office staff. If a student becomes injured when the health office is closed, the student should be taken to the Emergency Room for treatment.

If the student becomes ill during class or clinical experience, the student should inform the instructor and obtain permission to be dismissed. If a student is injured during class or clinical experience the student should inform the instructor and obtain permission to go to the Health Office. An occurrence report must be completed and accompany the student.

A student who is unable to attend class or clinical due to illness or injury should refer to the reporting requirements in the Attendance Policy. Any health condition, illness, communicable disease, injury that could affect the student's participation in the Program should be reported to the Program Officials immediately.

A return to clinical after three days or more of illness requires documented medical clearance. Any student with a questionable communicable disease will be sent to the Employee Health Office for clearance before being permitted to participate in clinical assignments.

#### **SUBSTANCE ABUSE/USE (SEE FULL POLICY – APPENDIX SC A-2)**

In compliance with Part 86 of Title 34 of the Code of Federal Regulations, St. Francis Medical Center School of Radiologic Technology maintains a DRUG-FREE CAMPUS. Students are specifically reminded of the laws pertaining to the possession and use of alcoholic beverages, narcotics, and controlled substances. Unlawfully possessing, using, distributing, or being under the influence of illicit drugs and/or alcohol by students on Medical Center property or on any premises during any activity while functioning as a School of Radiologic Technology student IS PROHIBITED. Drug and/or alcohol testing is an integral part of this policy. Students who violate this prohibition are subject to disciplinary action which will include at a minimum, enrollment in a program of treatment, rehabilitation and/or counseling; and at a maximum, dismissal for the School of Radiologic Technology and referral to civil authority for prosecution.

Substance abuse is a serious problem and can jeopardize not only the individual's health and welfare, but also the welfare of clients and the ability to provide quality care. Students with a substance abuse problem are encouraged to pursue rehabilitative treatment. The St. Francis Medical Center's Employees Assistance Program

(EAP) provides a confidential service free of charge to assist the student and/or family member to resolve these problems. A confidential appointment can be arranged with the EAP director by phoning (609) 599-5015.

### **SUPERVISION**

Radiology students are always under the supervision of a radiologic technologist when in the clinical setting. Permission must be granted by your supervising technologist to leave the department for break or lunch. To leave the department at any other time permission of Program Officials or other supervising staff is necessary.

The **Standards for an Accredited Educational Program in Radiologic Sciences** clearly define the parameters of direct and indirect supervision as well as the policies for repeating unsatisfactory radiographs. Students will be oriented to these policies during program and clinical orientation. These policies are strictly enforced and monitored. Any violation of these policies will be subject to disciplinary action. See **Clinical Catalog**, Clinical Plan for further details.

### **TELEPHONE CALLS**

Personal telephone calls are neither to be made nor received during Program hours. Important calls will be channeled to you. **Cell phones and other electronic devices are not permitted in any clinical area.** Progressive disciplinary action, up to and including termination from the program, will result if a student is found in violation of this regulation. Cell phones and other electronic devices must be silenced during all non-clinical program hours (classroom, library, etc.). Sending or receiving text messages is not permitted during class unless pre-approved by program officials or course instructor for emergency purposes only.

### **VISITORS**

Students are not allowed visitors during Program hours as, interruptions are not conducive to the learning process. Permission must be obtained from the Program Director to show guests through the radiology department. Students must be in uniform when escorting visitors through the Medical Center.

TITLE: <b>Non-Discriminatory Policy</b>		CODE: SC – 01	
REVIEWED:	REVISED:	SUPERSEDES:	
MAY, 2011	MAY 2009	MAY, 2006	
APPROVED BY:		PROGRAM	PAGE 1 OF 1
THERESA LEVITSKY		DIRECTOR	

**PURPOSE:** To ensure that the Program demonstrates integrity in representations to communities of interest and the public and in treatment and respect for faculty, staff, and students.

**POLICY:**

The St. Francis Medical Center School of Radiologic Technology admits students of any race, religion, color, creed, ancestry, national origin, sex, age, veteran's status, marital status, affectional or sexual orientation or preference, family status or disability to all rights, privileges, programs and activities generally accorded or made available to students at the School. It does not discriminate on the bases of race, religion, color, creed, ancestry, national origin, sex, age, veteran's status, marital status, affectional or sexual orientation or preference, family status or disability in the administration of its educational policies, admissions policies, scholarship or loan programs, or other School administered programs.

Any questions or grievances with this policy will be resolved utilizing the Grievance Policy and Procedure.

TITLE: <b>Advanced Placement Transfer of Credit Policy</b>		CODE: SC - 02
REVIEWED: MAY 2011	REVISED: MAY 2007	SUPERSEDES: May 2002
APPROVED BY: THERESA LEVITSKY	PROGRAM DIRECTOR	PAGE 1 OF 2

**POLICY:** To outline the procedure for advanced placement and transfer of credit.

**PURPOSE:** To ensure that the policies defining advanced placement and transfer of credit are clearly defined and published.

**PROCEDURE:**

Advanced placement and transfer of credit for required courses is available to students wishing to transfer prior educational coursework. St. Francis reserves the right to deny transfer of credit for any course not approved as meeting required course content. A determination of course equivalency will be made by the Admissions Committee.

**In order to transfer approved college courses, the following criteria must be met:**

1. The college must be accredited by the appropriate accrediting agency.
2. The course description must demonstrate that the course content is equivalent to that which is required by St. Francis Medical Center School of Radiologic Technology.
3. A letter grade of "C" or better was achieved.
4. An official transcript is submitted to the School of Radiologic Technology.

College level Science and Math courses, which were completed more than five (5) years prior to admission to the School of Radiologic Technology, are not normally transferable. General education courses have no time limit. The Admissions Committee upon written request of the student will evaluate individual situations.

Courses accepted for advanced placement will be recorded only as course credit earned toward graduation requirements; grades from these courses will not be calculated into the student's overall average.

Transfer of credit for required Radiography courses is available to applicants wishing to transfer into the Radiography Program. St. Francis Medical Center School of Radiologic Technology, at its sole discretion reserves the right to deny transfer of credit for any course, which is not equivalent to the SFMC course.

**In order to transfer approved Radiography courses taken through a hospital-based program, the following conditions must be met:**

1. The Radiography program in which the course(s) was taken must be accredited by the JRCERT.
2. The course content and contact hours must be acceptable to meet the requirements of St. Francis Medical Center School of Radiologic Technology.
3. A letter grade of "C" or better was achieved.
4. An official transcript is submitted to St. Francis Medical Center School of Radiologic Technology.
5. Successful completion of a course challenge exam may be required.

Radiography courses, which were completed more than five years prior to admission to the School of Radiologic Technology, are not transferable.

All students that are admitted to St. Francis Medical Center School of Radiologic Technology must complete a minimum of 10 months of study at St. Francis Medical Center School of Radiologic Technology in order to be eligible for graduation.

Final approval of transfer of credit for Radiography courses requires:

1. A written request from the applicant.
2. Review of course content by the appropriate St. Francis Medical Center School of Radiologic Technology faculty.
3. Recommendation of acceptance by the Program Director of the St. Francis Medical Center School of Radiologic Technology.
4. Approval by the Admissions Committee.

TITLE: <b>Attendance and Lateness Policy</b>		CODE: SC - 03
REVIEWED: MAY 2011	REVISED: MAY, 2007	SUPERSEDES: MAY, 2005
APPROVED BY: THERESA LEVITSKY	PROGRAM DIRECTOR	PAGE 1 OF 1

**PURPOSE:** The process of educating students to become professional radiographers requires them to be dependable and accountable healthcare providers. Attendance is important to the student's progress and development as a healthcare professional.

**PROCEDURE:**

**Attendance**

Students are expected to attend all class and clinical rotations and are accountable for all assignments missed due to absence. All class and clinical absences are recorded and become part of the student's permanent record.

**All absences and lateness** must be reported to the Program via the Clinical Instructor at 609-599-5164 before 7:30 AM. Failure to do so will necessitate disciplinary action. When reporting in sick, students are to call in personally if at all possible. Messages are not to be sent through other students. Students attending an outside clinical rotation are required to notify both SFMC and the outside rotation of their absence. All absences of three or more days will require a note from the student's family physician. A doctor's note will also be required for absences the day immediately preceding or immediately following a holiday or scheduled vacation. Absences due to extenuating circumstances will be reviewed on an individual basis by Program Officials.

Students are permitted a total of 5 clinical of absences per year. Students will be counseled regarding absenteeism on this basis. After the 3rd absence the student will receive a first (1<sup>st</sup>) written warning. After the 5th absence the student will receive a second (2<sup>nd</sup>) written warning.

Students are permitted a total of 2 classroom absences per course. Students will be counseled regarding absenteeism on this basis. Absences in excess of 2 days per course will result in a lowering of the student's final course grade by 2 points (see course syllabus).

Students who are absent more than 14 days in any year may be subject to dismissal. Re-enrollment will be at the discretion of Program Officials. This will require resolution of the issues causing the excessive absences and no further excessive absences.

Students are granted 2 weeks of vacation per year and spring break. Students with excessive sick time will forfeit their vacation days, Spring break or summer days off accordingly. All make-up time must comply with the New Jersey Radiologic Technology Board of Examiners Clinical Make up Policy.

If it is impossible for the student to makeup excessive absences prior to June 30th of the second year, the student's program will be extended. All absences must be made up and all other requirements completed prior to graduation and ARRT Registry eligibility. See Academic Progression Policy.

**Lateness**

Lateness of more than 3 occurrences of 30 minutes or more per semester will affect the student clinical grade via the Professional Development Policy. Lateness must be made up within three (3) days of the day it occurs and must be arranged with program officials. Students will be counseled as needed; if no improvement is made disciplinary action will follow.

TITLE: <b>School Closing Policy</b>	CODE: SC - 04	
REVIEWED: May, 2011	REVISED: MAY, 2006	SUPERSEDES: MAY, 2002
APPROVED BY: THERESA LEVITSKY	PROGRAM DIRECTOR	PAGE 1 OF 1

**PURPOSE:** To define the protocol for closing the Program for extreme inclement weather.

**PROCEDURE:**

Radiology students are studying to become healthcare providers who have a special obligation to provide care to the sick and injured.

If the School of Radiology were to close due to extreme inclement weather, a recorded message will be placed on the Program Director's telephone message system (609) 599-5234, by 6:45 AM, with the details of the closing.

**Should the Program remain open it will be left to the discretion of the student whether to report to school.**

Therefore, it is expected that all students stay informed of the progress and intensity of such situations and anticipate the need for making alternative plans in order to arrive to school safely.

If the Program does remain open, any time missed by a student, who is unable to report due to inclement weather, will be recorded as an excused absence. This will be counted towards the maximum of 5 absences allowed each year.

Any questions regarding this policy should be directed to Program Officials.

TITLE: <b>Academic Progression Policy</b>		CODE: SC - 05
REVIEWED: May, 2011	REVISED: MAY, 2009	SUPERSEDES: 5/2006, 5/2002
APPROVED BY: THERESA LEVITSKY		PROGRAM      PAGE 1 OF 1 DIRECTOR

**PURPOSE:** In support of the mission of the Program to graduate radiographers who are both competent and compassionate, this policy defines the parameters by which a student successfully progresses through the Program.

**PROCEDURE:**

Successful completion/graduation of the Program allows a graduate to sit for the ARRT National Registry Examination and/or the State of New Jersey licensing examination. Successful completion/graduation from the Program requires a student to successfully meet the following criteria:

1. The student must successfully complete the Program's 24-month duration, including all clinical and didactic requirements, as defined by this policy. Advanced Placement/Transfer students must be enrolled for a minimum of 10 months as defined by the Advanced Placement/Transfer of Credit Policy.
2. The student must maintain a "C" (85-88) average or greater in all didactic and clinical courses. (All clinical courses include a Professional Development Evaluation which assesses a student's performance in the cognitive, psychomotor and affective domains of learning.) No more than 5 individual course grades can be below a "C" (85-88), and no individual course grade can be an "F" (below 70%). In the event that these requirements are not met, remediation must occur prior to graduation and examination eligibility. See Academic Grading Scale, APPENDIX SC A-4.
3. In multilevel courses such as Radiographic Procedures, successful completion of the lower level course, as described above, is a prerequisite for progression to the next level.
4. In the event that any of these eligibility requirements are not satisfied within the 24 months of the Program, remediation must occur. Program Officials will develop a remediation plan suitable to the individual student's needs. The duration of the Program will inevitably be extended delaying both graduation and examination eligibility.
5. A didactic course may be repeated at its next scheduled offering, unless this causes a scheduling conflict with other didactic or clinical obligations. When a scheduling conflict occurs, the didactic course must be repeated after June 30<sup>th</sup> of the student's originally scheduled graduation date. Tuition costs will be determined at that time.
6. Students may use the Grievance Policy if they believe that their rights have been violated.

TITLE: <b>Clinical and/or Academic Assignment Policy</b>		CODE: SC - 06	
REVIEWED:	REVISED:	SUPERSEDES:	
May, 2011	MAY, 2009	MAY, 2006	
APPROVED BY:		PROGRAM	PAGE 1 OF 1
THERESA LEVITSKY		DIRECTOR	

**PURPOSE:** To ensure that required clinical and academic involvement for students does not exceed 40 hours per week.

**PROCEDURE:**

1. Assigned clinical and academic program hours vary by semester and typically result in approximately 35 hours of program involvement per week.
2. Students are required to make-up any outstanding clinical absences, which exceed 5 days per year as, defined by the Attendance and Lateness Policy.
3. Clinical absences that exceed 5 days at the end of Spring 1 semester will be made-up during the Summer 2 semester. The Summer 2 semester involves 3 clinical days per week. Students are required to be in attendance 5 clinical days per week beginning with the first unscheduled day of the Summer 2 semester until all excessive absences are satisfied.
3. Make-up time should be structured by the Clinical Coordinator to meet the needs of the student, especially related to outstanding competency requirements and shall not be used for disciplinary reasons. **Students will not be involved in clinical and/or academic assignments beyond 40 hours per week.**
4. Students enrolled at St. Francis Medical Center School of Radiologic Technology may be hired as radiologic aids, film librarians, darkroom technologist or radiologist's assistant, etc. during non-program hours. **They may not be employed as an acting radiologic technologist and may not take x-ray exposures. Additionally, they may not center a patient for a radiographic or CT exposure. This applies to all students regardless of the facilities' geographic location.** During the program, "a student is permitted to operate ionizing radiation producing equipment and perform radiological procedures only when the activity is part of the program's approved curriculum. Any activity outside of the program's approved curriculum is a violation of the Radiologic Technologists Act. Monetary penalties will be issued. Additionally, possible licensure sanctions by the Board may be issued." (Source May 2004 NJ Radiologic Technology Board of Examiners letter to Program Directors)

TITLE: <b>JRCERT COMPLIANCE</b>		CODE: SC - 07
<b>POLICY</b>		
REVIEWED: MAY, 2011	REVISED: MAY 2006	ORIGINAL: MARCH 2002
APPROVED BY: THERESA LEVITSKY	PROGRAM DIRECTOR	PAGE 1 OF 1

**POLICY:** The School of Radiologic Technology (Program) will assure timely and appropriate resolution of complaints regarding allegations of non-compliance with JRCERT **Standards**. The Program will maintain a record of such complaints and their resolution.

**PURPOSE:** The JRCERT requires that the School of Radiologic Technology be responsive to allegations against the program. The Program will investigate documented allegations of unfair practice in education or allegations of noncompliance with the **Standards**. Complaints against the program must relate to the **Standards** and be provided in writing. Any individual or group including students, graduates faculty, clinical staff or the public may submit a complaint.

**PROCEDURE:** The School of Radiologic Technology will enforce this policy in the following manner.

1. The allegation must be submitted in writing to the Program Director with a description of the alleged non-compliance. The specific **Standard** in question must be identified.
2. Upon receipt of an allegation of non-compliance with the **Standards**, the Program Director has 3 working days to investigate the allegation. This may include but is not limited to discussion with clinical staff, faculty, administration, and/or other persons involved.
3. The Program Director will issue a written response to the person(s) filing the complaint within 1 week of the date of the initial complaint. The response will include the Program's position regarding the alleged area of non-compliance. If the allegation of non-compliance is validated by the Program Director, the response will include an action plan to correct the issue. If the program denies the allegation, supporting documentation/evidence will be included in the response.
4. The JRCERT will be contacted by the Program Director for discrepancies in policy interpretation. Upon response of the JRCERT, a written explanation of the JRCERT's decision will be provided to the parties involved.
5. Complaints regarding the Program's compliance with the **Standards** can be directed to:

JRCERT	NJ Bureau of Radiologic Health
20 N. Wacker Drive	PO Box 415
Suite 2850	Trenton, NJ 08625
Chicago, IL 60606-3182	(609) 984-5890
(312) 704-5300	
6. The Program Director will maintain a record of such complaints and their resolution. The Non Compliance Resolution Log will be maintained in the Program's Systematic Plan of Evaluation.

Student awareness of policy:

- 1) Policy will be contained in the Student Catalog for student access.
- 2) Policy will be reviewed with the student during Orientation
- 3) A copy of the JRCERT **Standards** is posted in the classroom.

TITLE: <b>Grievance Policy &amp; Procedure</b>		CODE: SC - 08	
REVIEWED: May, 2011	REVISED: MAY 2011	SUPERSEDES: MAY 2002	
APPROVED BY: THERESA LEVITSKY		PROGRAM DIRECTOR	PAGE 1 OF 3

**POLICY:** It is the policy of the St. Francis Medical Center School of Radiologic Technology to "provide students an avenue to pursue grievances", defined by the JRCERT Standards as "a claim by a student that there has been a violation, misinterpretation, or inequitable application of any existing policy, procedure, or regulation." The Grievance Policy provides the process for conflict and/or complaint resolution, while protecting the rights of all parties involved.

**PURPOSE:** To uphold the rights of students to be heard when Academic/Professional matters of conflict arise that may jeopardize their status within the Program.

**PROCEDURE:** The Grievance Policy includes a Preliminary Process, a Committee Process and an Appeals Process. The objective is to resolve conflicts through discussion. Should the Preliminary Process not resolve conflicts, students may request a committee hearing. All committee decisions may be appealed through the Appeals process.

**PRELIMINARY PROCESS:** The function of the Preliminary Process is to resolve conflict through formal discussion and must be completed prior to the initiation of the Committee Process.

1. To initiate this process, the student is required to submit a written statement describing the complaint to a Program official within 3 days of an incident.
2. The Program official will respond within 2 days to schedule a meeting to formally hear the complaint. The Program official will notify the student of the location, date and time of the meeting. The meeting will be scheduled during normal Program hours. Program officials will keep written documentation of the process.
3. The meeting will include the student involved, the other involved party and a Program official if requested by the student. Both parties will have opportunity to present their case and give a rebuttal of evidence. Appropriate evidence such as Program policies or the student's file will be available.
4. Concerns that are not resolved satisfactorily on this level may be taken through the Committee Process.

#### **FILING A GRIEVANCE REQUEST:**

1. The student or unsatisfied party must submit, in writing, to the Program Director, a formal request to appear before the Grievance Committee. This written request must be submitted within 3 days of the conclusion of the Preliminary Process.
2. The written request must include:
  - a. identification of the rights/program/policy violated.
  - b. description of the situation

The student requesting the hearing is required to release, in writing, to the Grievance Committee members and party(ies) being grieved, access to his/her educational records.

## COMMITTEE PROCESS:

**Function:** To provide due process, assuring that the rights of all parties are not infringed upon and that the Program's policies are upheld.

**Structure:** The Grievance Committee is a standing committee of the Faculty Organization. It is composed of the Program Director, who serves as chairperson, and five voting members. They are:

1. Clinical Coordinator
2. Medical Advisor
3. Department Manager
4. 1 first year student and 1 first year alternate
5. 1 second year student and 1 second year alternate

Student members will be selected from the student body at the first Student Affairs Committee meeting in July.

**Meetings:** The Grievance Committee will hold a scheduled meeting each September, to review policy and procedures as a group. Further meetings will be held, as necessary, and will be scheduled by the Program Director.

### The Hearing:

1. A hearing will be scheduled no later than 20 calendar days after the submission of the grievance request.
2. The Program Director, as chairperson, will provide written notification to the student of the date and time of the hearing.
3. The student will be allowed to continue in class and in clinical rotations until the committee decision is made, with the following exceptions:
  - The student's behavior meets the criteria for immediate suspension and/or dismissal.
4. Attendees at the hearing will be limited to:
  - a. the student, and if he/she so chooses, one representative of his/her choice, to assist him/her at the hearing. To have legal counsel present is not looked upon by the courts as being essential to fairness. The right to legal counsel present is a function of the complexity of the case and a cost to the student. In cases where criminal charges may follow, legal counsel for students is advised.
  - b. the party(ies) being grieved.
  - c. the official members of the Grievance Committee. In the event that a committee member is being grieved, that an alternate will replace committee member, designated by the Program Director.
5. The involved student or his/her representative reads the grievance request to the committee along with a brief description of the issue.
6. The party requesting the grievance and the party(ies) being grieved will both address the committee. Both parties are given the opportunity to present evidence that is relevant to the issue at hand and to question any evidence presented. Opportunity is also provided for committee members to question both parties.
7. In the event that witnesses are requested by the either party, they may be called into the hearing, at the appropriate time, to provide relevant information. Both parties, as well as committee members are given the opportunity to question any witness before the witness is excused.

8. A discussion will follow during which time all non-voting members except for the chairperson will be required to leave the meeting.
9. The decision will be based on a majority vote, by closed ballot. The Program Director will tally the votes.
10. The party requesting the grievance and the party(ies) being grieved will be notified in writing by the Program Director within 1 day of the final committee decision.
11. The party requesting the grievance and the party(ies) being grieved have the right to appeal this decision through the Appeals Process, within 3 days of notification of the decision.
12. Documentation of the proceedings will be maintained in a separate file in the Program Director's office.

#### **APPEALS PROCESS:**

The function of the Appeals Process is to provide the process for parties to appeal the Grievance Committee.

1. All Appeal requests are submitted to the Program Director.
2. The Appeal must be requested in writing within 3 days of notification of the Grievance Committee decision.
3. The Program Director will forward this request through the formal Grievance Committee procedures of the Medical Center.
4. The student will be notified, in writing, by the Program Director regarding the time frames established by the Medical Center's Grievance Committee.
5. The parties involved are bound by the Grievance Committee's decision, until the Medical Center's Grievance Committee reaches a decision on the Appeal.
6. The decision of the Medical Center's Grievance Committee is considered final.

#### **MISCELLANEOUS INFORMATION:**

If the Program is thought to be in noncompliance with the Joint Review Committee on Education in Radiologic Technology's **STANDARDS**, the Program officials will meet to investigate the issue and will take corrective action if necessary. The JRCERT will be contacted for any discrepancy in policy interpretation. An explanation of the JRCERT's decision will be announced to all parties involved. See JRCERT Compliance Policy for specific procedures.

The student may have access to his/her student file including all test papers, evaluations, etc. by making an appointment with a Program official at a mutually convenient time. The student will not remove any file contents. The entire student file will be present at any hearing and available to the student for use in his/her defense.

If the student is suspended, as a result of the above process, then the suspension will be considered an absence. See Attendance and Lateness Policy.

TITLE: <b>Student Records Policy</b>		CODE: SC - 09	
REVIEWED: MAY, 2011	REVISED: MAY 2011	SUPERSEDES: May 2005	
APPROVED BY: THERESA LEVITSKY	PROGRAM DIRECTOR	PAGE 1 OF 2	

**PURPOSE:** To maintain and release student's records in compliance with state and federal laws.

**POLICY:**

**I. Records Release:**

- b) St. Francis Medical Center School of Radiologic Technology, in accordance with the Family Educational Rights and Privacy Act (FERPA) of 1974, as amended, also known as the Buckley Amendment, allows its students to inspect their official educational records. These records are maintained in the Program Director's office. All questions regarding the implementation of the Act should be directed to the Program Director.
- c) Students wishing to review their School of Radiologic Technology education records must notify a Program official to arrange a mutually convenient appointment to do so. Records must be reviewed in the presence of the Program official, or designee. Students may exercise the right to copy documents contained in their record at their own expense. Copies of transcripts received from other educational institutions or agencies are not available from St. Francis. Such documents must be requested by the student from the original source or institution.
- d) The student has the right to add a letter of explanation to their permanent file, in regard to any conflict or discrepancy that may arise.
- e) The confidentiality of students' education records is strictly maintained. The Program believes in limited disclosures of information from students' files to third parties. Only members of the St. Francis School of Radiologic Technology faculty have access to students' files, for the purpose of education and guidance of students and for other legitimate school business.

Written permission from the student is required for transcripts and/or any other information from students' files to be released to any third party, (including the student's parents). A Release of Information Request form is available on the program's website:

[http://www.stfrancismedical.org/educationprog/educational\\_programs.htm#radtech](http://www.stfrancismedical.org/educationprog/educational_programs.htm#radtech)

- f) Limited access to students' records is afforded representatives of regulating agencies in conjunction with accreditation procedures.
- g) The right to inspect and review education records does not extend to applicants, to those denied admission, or to individuals who do not actually enroll in the School.
- h) Comments and complaints regarding students' rights under the FERPA may be submitted in writing to: Family Policy Compliance Office, U.S. Department of Education, Washington, DC 20202-4605.

## II. Records Retention

St. Francis Medical Center School of Radiologic Technology retains students' records as follows:

1. The Program secures student records in the Program Director's office. Students' entire record (including application materials, attendance materials, radiation monitoring reports, transcripts, test papers, evaluations, clinical competency evaluations) is kept 5 years.

The Medical Center's Health Office Department maintains all health-related records and reports on students during their enrollment.

2. After 5 years a student's radiation reports, transcripts, attendance information, and health records are maintained permanently, along with application and other identifiable information. Financial aid information and documentation are also maintained if applicable.

TITLE: <b>Radiation Protection for Students Policy</b>		CODE: SC -10	
REVIEWED: May, 2011	REVISED: DEC 2005		
APPROVED BY: THERESA LEVITSKY	PROGRAM DIRECTOR	PAGE 1 OF 1	

**PURPOSE:** To protect the radiology students from radiation.

**POLICY:**

The students at St. Francis Medical Center are under NO circumstances allowed to hold a patient for any x-ray exposure.

Students are required to wear lead aprons while "standing out" (in the room) for fluoroscopic examinations and while doing portable x-ray portable examinations.

The students are required to wear their radiation dosimeter at all times in the radiology department. Students are further required to notify a program official in the event of loss or damage to his/her dosimeter.

Student radiation reports are evaluated Bi-monthly by a health physicist. All abnormal readings are investigated to determine probable cause and action, including counseling, if needed. The most recent radiation reports are posted in the classroom for review by students.

Students are required to observe the basic principles of radiation protection for themselves and for patients while in the radiology department.

All students are issued two copies of their cumulative radiation exposure dose, as soon as feasible, upon graduation or termination from St. Francis. (See attached form).

RADIATION EXPOSURE REPORT

St. Francis Medical Center  
School of Radiology  
601 Hamilton Avenue  
Trenton, NJ 08629

MONITORING COMPANY: Landauer, Inc.  
2 Science Road  
Glenwood, Illinois 60425-1586

ACCOUNT NUMBER: 8033 ST

STUDENT'S NAME:

SOCIAL SECURITY NUMBER:

OCCUPATIONAL EXPOSURE:

PERIOD MONITORED: FROM: July TO: June

LIFETIME DOSE EQUIVALENT IN MREMS TO XRAY, GAMMA, BETA:

DEEP:  MREM  EYE:  MREM  SHALLOW:  MREM

REMARKS:

This report is provided to you under the provisions of the Nuclear Regulatory Commission regulations entitled "Standards for Protection Against Radiation" (10 CFR Part 20). You should preserve this report for further reference.

The information contained in this report is correct & complete to the best of our knowledge.

Karen Wheeler, MS, DABR  
Health Physicist

Date \_\_\_\_\_

Theresa Levitsky, MA, RT  
Program Director

Date \_\_\_\_\_

## POLICY OF THE NEW JERSEY RADIOLOGIC TECHNOLOGY BOARD OF EXAMINERS REGARDING STUDENT PREGNANCY

**PURPOSE:** To ensure that the Program complies with the Policy of the New Jersey Radiologic Technology Board of Examiners Regarding Student Pregnancy.

**POLICY:**

1. N.J.A.C. 7:28-19.8(e) requires all students to wear whole body radiation dosimeters (e.g. film badges or thermoluminescent dosimeters) when in the vicinity of radiation-producing machines.
2. If a student declared her pregnancy, the relative risk to the embryo and/or fetus from x-rays must be thoroughly explained to the student prior to her continuation of clinical education. United States Nuclear Regulatory Commission (NRC) Regulation 10 CFR Part 20.1208 "Dose Equivalent to an Embryo/Fetus" and National Council on Radiation Protection and Measurements (NCRP) Report No. 116 "Protection of the Embryo-Fetus" are suggested as references.
3. Program continuation options must be provided for the student. Provision shall be made for re-entry into the program if a leave of absence is taken by the student.
4. The New Jersey Radiologic Technology Board of Examiners (Board) recommends that adequate controls and monitoring be instituted to limit the dose to all students to as low as reasonably achievable. The Board recommends a total dose equivalent limit (excluding medical exposure) of 5 mSv (500 mRem) for the embryo-fetus. Once a pregnancy has been declared, exposure of the embryo-fetus shall be no greater than 0.5 mSv (50mRem) in any month (excluding medical exposure).
5. The Program Director and the appropriate institutional Radiation Safety Office shall periodically review student radiation exposure reports to assure compliance with the above dose limit.
6. All didactic, laboratory and clinical education hours as mandated by the Board and the program must be completed prior to graduation.

avo-1477

Reviewed May, 2011, 5/2009 (minor  
revision)  
Revised December 2005.

<b>TITLE: Student Pregnancy Policy</b>		<b>CODE: SC -11</b>
REVIEWED: MAY, 2011	REVISED: SEPTEMBER 2009	SUPERSEDES: May 2009
APPROVED BY: THERESA LEVITSKY	PROGRAM DIRECTOR	PAGE 1 OF 2

**PURPOSE:** To assure that Nuclear Regulatory Commission regulations regarding the declared pregnant student (declared pregnant worker) are published and made known to accepted and enrolled female students.

To assure that accepted and enrolled students have options for disclosure of pregnancy and for continuance in the program.

**POLICY:**

**I. General**

The Nuclear Regulatory Commission specifies in 10 CFR 20.1208 that it is the licensee's responsibility to ensure the dose to the embryo-fetus from occupational exposure of a declared pregnant worker not exceed 0.5 rem over the entire pregnancy.

The 0.5 rem limit to the embryo-fetus becomes applicable one the student declares the pregnancy in writing. The pregnant student need not declare her pregnancy if she chooses. The licensee is not required to restrict the dose to the embryo/fetus to 0.5 rem until written declaration of pregnancy is made. A note from the student's obstetrician, to include the estimated date of conception, will be required for the student to continue clinical rotation in the Radiology Department. The estimated date of conception will be necessary in the determination of the accumulated dose to embryo/fetus.

An estimate of the accumulated dose that the embryo/fetus may have received prior to the declaration of pregnancy will be subtracted from 0.5 rem to determine the dose the embryo/fetus will be allowed to receive during the remainder of the pregnancy.

The 0.5 rem dose limit shall be the sum of the deep dose equivalent to the declared pregnant student from external radiation sources and the dose from radionuclides in the embryo/fetus and or pregnant radiation student that have been ingested or inhaled due to **occupational** exposure.

**II. PERSONNEL MONITORING**

The declared pregnant student that is likely to receive in excess 50 millirem in a year must wear personnel monitoring device at waist level to record the most representative exposure to the embryo/fetus.

This will not result in a policy change for the radiation student who currently wears a personnel-monitoring device at waist level. However, for the radiation student who wears a personnel-monitoring device at the collar, a second personnel-monitoring device must be issued to be worn waist level. In this way, the most representative exposure to the embryo/fetus can be recorded while maintaining a consistency with previous records.

### III. RESPONSIBILITIES

A pregnant student has the following options:

1. The pregnant student opts **NOT to declare** the pregnancy (as described above), thereby not informing program officials.
2. The pregnant student opts **to declare** the pregnancy to program officials so that timely radiation safety advisement can be provided by the program's radiation physicist. The student who declares her pregnancy will also select one of the following options, in writing, for continuance in the program:
  - (1) The student may elect to continue the educational program **without** modification.
  - (2) The student may elect to modify the educational program as described below.
  - (3) The student may elect to resign from the program.

At the recommendation of the Medical Director/Advisor or the student's obstetrician, the student may be allowed to temporarily postpone those rotations that involve the possibility of higher radiation doses or increased physical exertion (portable radiography, fluoro and operating room rotations). This possible change in scheduled rotation(s) may require a lengthening of the student's program to ensure that all clinical requirements have been met prior to graduation.

The student is entitled to between four to six weeks both before and after delivery for leave of absence (or times as required and verified by the obstetrician). This is the same policy the Medical Center prescribes for technologists. This leave of absence will of course have to be made up by the student that will no doubt lengthen the student's program beyond the normal end of June graduation date.

It is the responsibility of the student to make up didactic work missed due to absence. Again, the program will inevitably extend past the end of June to ensure completion of all Program requirements.

In all cases of student pregnancy, the State of New Jersey, Board of Medical Examiners Policy regarding pregnant students will be strictly enforced.

Additional information regarding federal guidelines for prenatal radiation exposure may be found at [www.nrc.gov/NRC/08/08-013.html](http://www.nrc.gov/NRC/08/08-013.html).

TITLE: <b>Student Safety Policy</b>		CODE: SC -12	
REVIEWED:	REVISED:	EFFECTIVE: 6/5/98	
MAY, 2011	MAY 2008		
APPROVED BY:		PROGRAM	PAGE 1 OF 1
THERESA LEVITSKY		DIRECTOR	

**PURPOSE:** To ensure that the health and safety of students are safeguarded through documented policies and procedures.

**POLICY:**

In addition to the Radiation Protection for Students Policy, the following policy is for all radiology students at St. Francis Medical Center.

Under NO circumstances will any radiology student repair or attempt to repair any x-ray or other electrical equipment.

Under NO circumstances will any radiology student move or attempt to move any heavy equipment.

All radiology students will attend the Risk Management Lecture given by the Medical Center during orientation. After attending this presentation, they will abide by the suggested safety policies while in the radiology department, in the Medical Center or at any affiliates.

Students will immediately report any hazards to safety to the management personnel of the radiology Department. Any incidents involving students will be reported on the Medical Center Occurrence Report Forms. Any incident involving bodily injury to a student will be followed by the Emergency Room Physician and/or Health Office Physician.

## STUDENT TUITION AND EXPENSES

The Program strives to identify all tuition and expenses required of its students so that no hidden costs are incurred. The figures listed below are updated at each reprinting of the Student Catalog. These prices may increase and are the responsibility of the student. Itemized tuition and expenses for the total 24-month Program are as follows:

### FIRST YEAR

#### First Semester Tuition

St. Francis Medical Center Tuition	\$2250.00
Mercer County Community College Tuition (if applicable) (Per credit cost \$133.00, \$45.00 lab fee and \$25.00 registration fee, \$30.00 campus liability insurance)	\$632.00
Fall Semester SUBJECT TO CHANGE AS PER THE COLLEGE	
<b>First Year Program Tuition – First Semester</b> (Payable to St. Francis Medical Center School of Radiology, due the first week of the Program.)	<b>\$2882.00</b>

#### First Semester Expenses

Books	\$735.00
Uniforms (Cost varies depending on student preference)	\$200.00
Criminal Background Check & 10 panel drug screen	\$85.00
CPR Certification	\$65.00
Student Membership NJSRT	\$10.00
Student Membership PhilaSRT	\$10.00
Book for API and APLI: Anatomy & Physiology Text & Lab Manual (if needed)	\$319.00 (approximate)
<b>First Year Program Expenses – First Semester</b>	<b>\$1424.00</b>

#### Second Semester Tuition

St. Francis Medical Center Tuition	\$2250.00
Mercer County Community College Tuition (if applicable) (Per credit cost \$133.00, \$45.00 lab fee and \$25.00 registration fee, \$30.00 campus liability insurance)	\$632.00
Spring Semester SUBJECT TO CHANGE AS PER THE COLLEGE	
<b>First Year Program Tuition – Second Semester</b> (Payable to St. Francis Medical Center School of Radiology, due by the first week of the semester.)	<b>\$2882.00</b>

## SECOND YEAR

### First Semester Tuition

<b>Second Year Program Tuition – First Semester</b> (Payable to St. Francis Medical Center School of Radiology, due the first week of July.)	<b>\$2250.00</b>
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### First Semester Expenses

Student Membership American Society of Radiologic Technologists	<b>\$30.00</b>
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### Second Semester Tuition

<b>Second Year Program Tuition - First Semester</b> (Payable to St. Francis Medical Center School of Radiology, due the first week of January.)	<b>\$2250.00</b>
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### Second Semester Expenses

Corectec Online Review Course	\$80.00
Convention (optional, this estimated cost may be higher and the student would be responsible for this)	\$275.00
Registry Review Fee	\$125.00
License/Registry Examination Fees (2011 ARRT \$200.00)	\$260.00
Graduation Expenses	\$100.00
<b>Second Year Program Expenses - Second Semester</b>	<b>\$ 840.00</b>

### Total Program Tuition and Expenses

Total Program Tuition and Expenses with Mercer County Community College	<b>\$12,558.00</b>
Total Program Tuition and Expenses without Mercer County Community College	<b>\$10,975.00</b>

The student is required to pay for his/her own meals, the cost of transportation to and from the Medical Center and Mercer County Community College, and any other additional fees as required by the St. Francis Medical Center School of Radiology.

### Tuition and Expenses Payments

School of Radiology tuition and expenses must be paid in full during the first week of each semester. Students participating in Financial Aid will defer tuition costs pending receipt of financial aid awards.

Students who register for courses at Mercer County Community College (MCCC) through the School of Radiology will be billed at the current tuition rate for Mercer County residents regardless of their actual address. The charges for MCCC courses are included on the St. Francis tuition invoice. ***Do NOT pay MCCC directly.***

Any student unable to pay his/her outstanding balance in full by the first week of each semester must make an appointment with the Program Director to discuss the situation. The Program reserves the right to withhold services and/or impose sanctions in any case where the student has an unpaid balance. This may include prohibiting class and clinical attendance as well as withholding transcripts and other certifications.

### **Financial Aid Information**

The St. Francis Medical Center School of Radiology participates in the following financial aid programs, which can assist eligible students in meeting the cost of their education.

#### **Federal Pell Grant**

This federal program awards grants to eligible students who have not yet earned a bachelor's degree to determine if you are eligible, the Department of Education uses a standard formula, passed into law by Congress, to evaluate the information you report on your student aid application. These grants DO NOT have to be paid back, however you must file a new application for each academic year. The application form is known as the *Free Application for Federal Student Aid (FAFSA)*, which is processed by the federal central processing center. Please enter **code 014775**, for St. Francis Medical Center School of Radiology when completing the application. FAFSA's may be completed on line at <http://www.fafsa.ed.gov>. Paper copies are available directly from the US Department of Education toll-free telephone information center at (800) 4 FED AID or [www.federalstudentaid.ed.gov](http://www.federalstudentaid.ed.gov). Federal Pell Grants amounts vary based on need and enrollment status with the maximum for 2011-2012 being \$5,550.00 per academic year.

#### **Direct Loans**

Direct loans are low-interest loans for students to help pay for the cost of a student's education after high school. The lender is the U.S. Department of Education rather than a bank or other financial institution. These loans **MUST BE REPAYED** after you leave the Program. There are two types of Direct loans: Subsidized and Unsubsidized. Direct subsidized loans are for students with demonstrated financial need, as determined by federal regulations. No interest is charged while you are in school at least half-time, during your grace period and during deferment periods. Direct Unsubsidized Loans are not based on financial need; interest is charged during all periods. (Source: Direct Loan Basics for Students.) You apply for a Direct Subsidized and Unsubsidized Loan and other federal student aid by completing a Free Application for Federal Student Aid (FAFSA) as described above. You must also complete a Master Promissory Note (MPN) which is a legally binding agreement to repay your loan to the Department. Please see Program Director for annual loan limits.

#### **Veterans Benefits**

The School of Radiology is certified by the New Jersey Department of Education for the education of veterans. Contact your VA office for the necessary forms if you are eligible to receive educational benefits.

#### **Financial Aid Eligibility**

To be eligible to receive financial aid you must maintain satisfactory academic progress toward completion of the Program. Financial aid is awarded without discrimination on the bases of age, race, color, gender, religion, national or ethnic origin, marital status, sexual preference or disability. Students who withdraw from the program may be required to return unearned Federal Student Aid Funds to the appropriate sources according to established FA regulations.

For detailed information or assistance with Financial Aid matters contact the Program Director.

TITLE: <b>Tuition Refund Policy</b>		CODE: SC – 13	
REVIEWED:	REVISED:	SUPERSEDES:	
MAY, 2011	MAY 8, 2008	4/19/04	
APPROVED BY:		PROGRAM	PAGE 1 OF 1
THERESA LEVITSKY		DIRECTOR	

**PURPOSE:** To establish criteria for refunding student tuition.

**POLICY:**

Should a student withdraw from the Program for any reason, the following refunds will apply:

Student withdraws within the first two calendar weeks of the semester:	75% of tuition refunded
Student withdraws within the third calendar week of the semester:	50% of tuition refunded

No tuition refund is given after the third week in the semester. No refunds are given at any time for books or uniforms, or other related expenses.

Students participating in Federal Financial Aid Programs who withdraw from the program may be required to return unearned Federal Student Aid Funds to the appropriate sources. Students will be billed for any unpaid charges that result from the program's return of Title IV funds. See "Withdrawals and Return of Title IV Funds Policy."

## Curriculum

<b>Summer I - First Year</b>	<b>8 week semester</b>	
Introduction to Radiology	45 hours	3 credit equivalents
Radiographic Procedures 101	30 hours	2 credit equivalents
Clinical Experience I	2 days/week	<u>1 credit equivalent</u>
		6 credit equivalents
<b>Fall I - First Year</b>	<b>15 week semester</b>	
Patient Care I	30 hours	2 credit equivalents
Medical Terminology	30 hours	2 credit equivalents
Principles of Imaging I	45 hours	3 credit equivalents
Radiographic Procedures I02	60 hours	4 credit equivalents
Clinical Experience II	2 days/week	2 credit equivalents
Anatomy & Physiology I (College course)	60 hours	<u>4 credits</u> 17 credit equivalents
<b>Spring I - First Year</b>	<b>15 week semester</b>	
Radiation Physics I	30 hours	2 credit equivalents
Radiographic Procedures 103	60 hours	4 credit equivalents
Radiographic Procedures 104	30 hours	2 credit equivalents
Principles of Imaging II	45 hours	3 credit equivalents
Clinical Experience III	2 days/week	2 credit equivalents
Anatomy & Physiology II (College course)	60 hours	<u>4 credits</u> 17 credit equivalents
<b>Summer II - Senior Year</b>	<b>15 week semester</b>	
Clinical Experience IV	3 days/week	3 credit equivalents
<b>Fall II - Senior Year</b>	<b>15 week semester</b>	
Radiographic Procedures 201	45 hours	3 credit equivalents
Principles of Imaging III	45 hours	3 credit equivalents
Radiation Protection/Biology	30 hours	2 credit equivalents
Introduction to Computer Science & Digital Imaging	45 hours	3 credit equivalents
Computerized Tomography & Cross Sectional Anatomy	22.5 hours	1.5 credit equivalents
Special Procedures	30 hours	2 credit equivalents
Clinical Experience V	2.5 days/week	<u>2.5 credit equivalents</u>
		17 credit equivalents
<b>Spring II - Senior Year</b>	<b>15 week semester</b>	
Radiation Physics II	30 hours	2 credit equivalents
Patient Care II	30 hours	2 credit equivalents
Computerized Tomography & Cross Sectional Anatomy	22.5 hours	1.5 credit equivalents
Quality Assurance	45 hours	3 credit equivalent
Registry Review	45 hours	3 credit equivalents
Advanced Imaging Modalities	15 hours	1 credit equivalents
Clinical Experience VI	2.5 days/week	<u>2.5 credit equivalents</u>
		15 credit equivalents
<i>Senior Seminar</i>	<i>6 weeks - 3 days/week</i>	
TOTAL for Program		75 credits or credit equivalents

## COURSE DESCRIPTIONS

**RADINTRO:** Introduction to Radiology (3 credit equivalents)

Overview of the radiology profession. This course provides an introduction to the essential and supporting elements of the radiologic imaging process, communication, safety and basic radiation protection, equipment operation and legal and ethical responsibilities.

**RADPRO101:** Radiographic Procedures 101 (2 credit equivalents)

First in a series of courses dealing with principals, techniques and radiographic procedures in radiology. An introduction into radiographic procedures, including related terminology of the chest and abdomen. Laboratory simulation and evaluation are also conducted. The clinical education component provides the student with the opportunity to perform radiographic procedures in accordance with the clinical competency evaluation process.

**Co requisite:** Clinical Experience I

**RADCLIN1:** Clinical Experience I (1 credit equivalent)

Orientation to the Medical Center's radiology department and introduction to radiographic procedures and related terminology. The student's clinical experience is designed to correlate with Radiographic Procedures 101. This area will focus on radiography of the chest and abdomen.

**Co requisite:** Radiographic Procedures 101

**RADPC1:** Patient Care I (2 credit equivalents)

The purpose of this course is to help student radiology technologists meet the physical and emotional needs of the patient. This course design is to help the student acquire the technical and interpersonal skills needed to provide excellent patient care. Topics covered include ethics, professionalism, principles of body mechanics, therapeutic communication, medical and surgical asepsis, assessment, oxygenation, and elimination.

**Co requisite:** Health Care Providers Basic Cardiac Life Support

**RADMT:** Medical Terminology (2 credit equivalents)

An introduction course in Medical Terminology that requires no previous knowledge in the field. This course is designed to allow the student to master medical terminology especially related to the field of radiology. As a hybrid course, this course combines classroom instruction with a computer-based, independent learning approach. The course is organized by body systems with an emphasis on analyzing & understanding medical terms and relating them to human anatomy, physiology and pathology.

**RADIMG1:** Principles of Imaging I (3 credit equivalents)

This course is designed to develop a student's understanding of the acquisition of a radiographic image. The concepts of x-ray beam emission are explored and correlated with practical application. An introductory review of mathematical equations as well as ratio and proportion are included. Lecture, demonstration and lab experiments cover the following topics: mA and time relationships, Inverse Square Law, Direct Square Law, image receptors (film/screen and digital) intensifying screens, beam restricting devices, filtration and grids.

**RADPRO102: Radiographic Procedures 102 (4 credit equivalents)**

A continuation of radiographic procedures, including related terminology of the upper extremity and shoulder girdle and lower extremity and pelvic girdle. Laboratory simulation and evaluation are also conducted. The clinical education component provides the student with the opportunity to perform radiographic procedures in accordance with the clinical competency evaluation process.

**Prerequisites:** Radiographic Procedures 101 and Clinical Experience I.

**Co requisite:** Clinical Experience II

**RADCLIN1: Clinical Experience II (2 credit equivalents)**

The student's clinical experience is designed to correlate with Radiographic Procedures 102. This area will focus on radiography of the upper extremity including shoulder girdle and lower extremity including pelvic girdle.

**Prerequisites:** Radiographic Procedures 101, and Clinical Experience I

**Co requisite:** Radiographic Procedures 102

**Anatomy and Physiology I (College level, 4-credit course with lab)**

Systematic approach to the structure and function of the human body; general terminology and organization, cells and tissues, integumentary, muscular, skeletal, and nervous systems. Laboratory includes use of microscope and the study of human anatomy via computer software and preserved specimens.

**Prerequisites:** See college catalog

**RADPHY1: Radiation Physics I (2 credit equivalents)**

This course is designed to introduce the student to the fundamentals of electrical and radiation physics and the basic principles underlying the operation of x-ray equipment and ancillary devices.

**RADPRO103: Radiographic Procedures 103 (4 credit equivalents)**

A continuation of radiographic procedures, including related terminology of the cervical, thoracic, lumbar spines, sacrum, coccyx, bony thorax, including ribs and sternum and contrast studies. Laboratory simulation and evaluation are also conducted. The clinical education component provides the student with the opportunity to perform radiographic procedures in accordance with the clinical competency evaluation process.

**Prerequisites:** Radiographic Procedures 101 & 102 and Clinical Experience I & II.

**Co requisite:** Clinical Experience III

**RADPRO104: Radiographic Procedures 104 (2 credit equivalents)**

A continuation of radiographic procedures, including related terminology of the cranium and facial bones, paranasal sinuses, mastoids and temporal bones. Laboratory simulation and evaluation are also conducted. The clinical education component provides the student with the opportunity to perform radiographic procedures in accordance with the clinical competency evaluation process.

**Prerequisites:** Radiographic Procedures 101 & 102 and Clinical Experience I & II.

**Co requisite:** Clinical Experience III

**RADIMG2: Principles of Imaging II (3 credit equivalents)**

This course builds on the concepts mastered in Principles of Imaging 1 and covers topics including the radiographic qualities of density, contrast, detail and distortion. Image Processing including fundamental components of film processing as well as basic digital image processing are explored. Lecture, demonstration and class experiments are utilized so that students master imaging techniques based on sound principles and practices.

**Prerequisite:** Principles of Imaging I

**RADCLIN3: Clinical Experience III (2 credit equivalents)**

The student's clinical experience is designed to correlate with Radiographic Procedures 103. This area will focus on radiography of the bony thorax, spine, contrast studies and skull.

**Prerequisites:** Radiographic Procedures 101 & 102, and Clinical Experience I & II

**Co requisite:** Radiographic Procedures 103

**Anatomy and Physiology II (College level, 4-credit course with lab)**

Continuation of Anatomy and Physiology I, covering digestive, circulatory, urinary, reproductive, respiratory, and endocrine systems. Laboratory includes cat dissection, human anatomy study via computer software, quantitative studies of physiological processes.

**Prerequisites:** Anatomy and Physiology I

**RADCLIN4: Clinical Experience IV (3 credit equivalents)**

This is a continuation of the student's clinical experience. The student will continue to perform Initial Clinical Competency Evaluations.

**Prerequisites:** Radiographic Procedures 101, 102, 103 and 104 and Clinical Experience I, II, and III.

**RADPRO201: Radiographic Procedures 201 (3 credit equivalents)**

A continuation of radiographic procedures, including related terminology of mammography, trauma and mobile radiography, pediatric radiography and additional imaging procedures including orthoroentgenography, arthrography and myelography. Laboratory simulation and evaluation are also conducted. The clinical education component provides the student with the opportunity to perform radiographic procedures in accordance with the clinical competency evaluation process.

**Prerequisites:** Radiographic Procedures 101, 102, 103 and 104 and Clinical Experience I, II, III & IV

**Co requisite:** Clinical Experience V

**RADIMG3: Principles of Imaging III (3 credit equivalents)**

This course is a continuation of principles of Imaging I and II and reviews the basic principles covered in those courses. Automatic Exposure Control and other specialized radiographic imaging techniques, as well as technique charts are also explored. Emphasis is placed on solving radiographic quality technique problems, as well as on determining the impact that technical exposure factors have on the finished radiograph. Students complete a project on a specialized imaging procedure currently being used.

**Prerequisites:** Principles of Imaging I, II

**RADPROTBIO: Radiation Protection/Biology (2 credit equivalents)**

This course is designed to give the student an understanding of the effects of radiation exposure, dose limits, and structural requirements. Topics included will be somatic and genetic effects of radiation exposure, measurement and principles of protection and safe operation of equipment. Emphasis is placed upon the importance of obtaining a diagnostic radiograph at the first exposure and avoiding unnecessary radiation exposure to other body parts.

**RADCOMP:**     **Introduction to Computer Science & Digital Imaging** (3 credit equivalents)

This course is an introduction to the medical uses of the computer with special emphasis on the application of computers in the field of Radiology. Topics include the basic components of computer systems, computer operations and the analog to digital conversion process. Digital radiography including both CR and DR are investigated. Guidelines for selecting exposure factors and evaluating digital images are explored. PACS, networking, QA and possible future technologies are also discussed.

**Prerequisite:** Senior Standing

**Co requisite:** Computerized Tomography & Cross Sectional Anatomy

**RADCT2:**     **Computerized Tomography & Cross Sectional Anatomy** (3 credit equivalents)

This course is designed to provide entry-level radiography students with principles related to computed tomography (CT) Imaging. Sectional anatomy and related pathology as visualized on CT imaging will be discussed.

**Prerequisites:** Radiographic Procedures 101, 102, 103, 104 and Clinical Experience I, II, III & IV

**Co requisite:** Introduction to Computer Science & Digital Imaging

**RADSP:**     **Special Procedures** (2 credit equivalents)

This course is designed to acquaint the student with the specialized and highly technical procedures in radiography. Diagnostic Angiography and interventional procedures such as angioplasty and stent placement as well as related pathologies are investigated. Specialized equipment, contrast media and the indication/contraindications for each procedure are explored.

**Prerequisites:** Radiographic Procedures 101, 102, 103, 104 and Clinical Experience I, II, III & IV

**Co requisite:** Radiographic Procedures 201

**RADCLIN5:**   **Clinical Experience V** (2.5 credit equivalents)

This is a continuation of the student's clinical experience. The student will continue to perform Initial Clinical Competency Evaluations. This semester marks the beginning of Continual Clinical Competency Evaluations. Two Continual Clinical Competency Evaluations in each category are required with the exception of the abdominal, surgical, mobile and pediatric categories which require one (1) Continual CCE. These total sixteen (16) Continual Clinical Competency evaluations. These can be performed on any study for which the student has already demonstrated initial competency.

**Prerequisites:** Radiographic Procedures 101, 102, 103 and 104 and Clinical Experience I, II, III and IV.

**Co requisite:** Radiographic Procedures 201

**RADPHY2:**   **Radiation Physics II** (2 credit equivalents)

This course begins with a review of the basic principles of Radiation Physics I. The x-ray circuit and the operating principles of radiologic equipment, especially image intensification and digital fluoroscopy are investigated. The production of x-rays and the fundamentals of photon interactions with matter are also explored.

**Prerequisite:** Radiation Physics I

**RADPC2:**     **Patient Care II** (2 credit equivalents)

This course is a continuation of Patient Care 1 and is designed to help student radiographers acquire the technical and interpersonal skills needed to provide excellent patient care. Covered topics include medications and their administration, dealing with emergency situations, contrast media administration and venipuncture, and patients with special conditions.

**Prerequisite:** Patient Care I

**RADQA: Quality Assurance (3 credit equivalents)**

This course covers both quality assurance programs and quality control procedures in Radiology. Fundamental concepts of quality assurance are presented including process improvement and the PDCA cycle. Devices and procedures used to ensure quality control of radiographic equipment, automatic processors and laser printers are covered in depth. Clinical correlation using densitometers, sensitometers will be provided. Repeat film analysis is also included both in classroom discussion and clinical experience. Students must integrate the findings of repeat film analysis into a performance improvement project. The State of New Jersey's Quality Assurance program is used as a model for this course.

**Prerequisites:** Principles of Imaging I, II, III

**RADREV: Registry Review (3 credit equivalents)**

The focus of this course is preparation for the ARRT examination. Attention is focused on the *Content Specifications for Radiography* as provided by the ARRT. A thorough review of the program's curriculum helps to identify strengths and remedy weakness. Successful exam preparation and testing taking strategies are also explored. Situation Judgment Testing is also incorporated to validate critical thinking and problem-solving skills. Five (5) standardized review exams are taken during the semester; subsequent reviews are planned based on the results of the exams and the needs of the students.

**Prerequisite:** Senior Standing

**RADADVIMG: Advanced Imaging Modalities (1 credit equivalent)**

Additional imaging modalities are explored including Nuclear Medicine, Radiation Therapy, and MRI. Radiographic pathology lectures are also provided.

**Prerequisite:** Senior Standing

**RADCLIN6: Clinical Experience VI (2.5 credit equivalents)**

This is a continuation of the student's clinical experience. The student will complete all Initial and Continual Clinical Competency Evaluations. April 1 marks the beginning of Terminal Clinical Competency Evaluations. All Initial and Continual Clinical Competency Evaluations are to be completed prior to beginning Terminal Clinical Competency Evaluations. One Terminal Clinical Competency Evaluations is required in nine (9) categories. A Terminal CCE is not required in the surgical category. These can be performed on any study for which the student has already demonstrated initial competency.

**Prerequisites:** Radiographic Procedures 101, 102, 103, 104, 201 and Clinical Experience I, II, III, IV and V

**School of Radiologic Technology  
Faculty of St. Francis Medical Center**

Patricia DiPietro, BS, RT(R)(M) ..... Clinical Instructor, Instructor  
Theresa Levitsky, MA, RT (R)(M)(CV)(QM) ..... Program Director  
Thomas Ponento, RT(R)(CT)..... Clinical Instructor, CT Instructor  
Gustavo Sanchez, MD.....Radiologist  
Vicki Tennesen, BS, RT(R)(M)(QM) ..... Clinical Coordinator  
Delores Grussler, MSN, RN .....Patient Care Instructor  
Fran Herman, MSN, RN .....Patient Care Instructor  
Karen Wheeler, MS ..... Physics Instructor  
Ethan Tarasov, MD ..... Medical Advisor

**Clinical Instructors – St. Francis Medical Center**

Cindy Beers, RT(R)(M)	Judy Langton, RT(R)(M)(CT)
Michelle Delgado, RT(R)	Dana Mitchell, RT(R)(M)
Jennifer Freed, RT(R)(M)	Doug Paul, RT(R)
Donna Gaines, RT(R)(RDMS)	Rose Povio, RT(R)

**Clinical Instructors – St. Mary Medical Center**

Delores Detky, RT (R)(M)	Dana Matarese, RT(R)
Maria Fahs, RT(R)	Matt Maurizi, RT (R)
Mary Gelles, RT(R)	Jennifer Tropiano, RT (R)
Colleen Iaquinto, RT(R)(M)	Erin McMichael, RT(R)
Donna Loglisci, RT (R)	Paula McTamany, RT (R)

Guest lectures are also arranged from various companies and other Medical Center departments, i.e. Speech Pathology.

**Required Textbooks**

<u>Medical Terminology Simplified</u> .....	Gyls
<u>Radiologic Science for Technologists</u> .....	Bushong
<u>Patient Care in Radiology</u> .....	Ehrlich
<u>Merrill's Atlas of Radiographic Positions &amp; Radiologic Procedures (3 Vol)</u> .....	Ballinger
<u>Radiographic Anatomy, Positioning &amp; Procedures Workbook (2 Vol)</u> .....	Hayes
<u>Radiography Prep</u> .....	Saia
<u>Introduction to Radiologic Technology</u> .....	Gurley
<u>Appleton &amp; Lange's Review for Radiography Examination</u> .....	Saia
<u>Comprehensive Radiographic Pathology</u> .....	Eisenberg

## Appendices

**ST. FRANCIS MEDICAL CENTER**  
TRENTON, NEW JERSEY  
**SCHOOL OF RADIOLOGIC TECHNOLOGY POLICIES AND PROCEDURES**

	<b>Immunization/ Diagnostic Requirements</b>	Policy Number: SC-A1
Revised By SON: May 2005, September 2010		Page 1 of 2

**POLICY:** Students are required to provide documentation of immunity to certain communicable diseases that can be prevented by immunization. Screening is required for TB and Varicella.

**PURPOSE:** To protect the student, patients and other employees from certain communicable disease.

**PROCEDURE:** I. IMMUNIZATION AND DIAGNOSTIC TESTING REQUIREMENTS

- A. All students admitted must have the required immunizations on admission and maintain all immunization requirements throughout their attendance in the program as outlined below.
- B. Further immunizations and documentation may be required as administration determines appropriate

II. REQUIRED IMMUNIZATIONS

- A. Measles virus vaccine (Rubeola)  
Each student must document immunity to Measles. Immunity is indicated by one of the following:
  1. Documented immunization of two doses of measles virus vaccine, live attenuated, or any vaccine combination containing measles antigen with the first administered on or after the student's first birthday.  
Born 1956 or earlier one dose of measles virus vaccine is required.
  2. Serologic laboratory evidence of measles immunity. (TITER)
- B. Mumps virus vaccine  
Each student shall document immunity to mumps. Immunity is indicated by one of the following:
  1. Documented immunization of one dose of mumps virus vaccine, live attenuated, or any combination containing mumps antigen that was administered on or after the student's first birthday.
  2. A history of a physician diagnosed mumps disease substantiated by a physician's statement.
  3. **THE MMR VACCINE MAY BE USED INSTEAD OF INDIVIDUAL MEASLES AND MUMPS VACCINES. TWO DOSES ARE NEEDED; THE FIRST DOSE AT 12 MONTHS OF AGE OR LATER.**
- C. Tetanus-Diphtheria-Pertussis (Tdap)
  1. Each student shall document a Tetanus-Diphtheria-Pertussis initial vaccination (ADACEL) within the last 10 years and a Td every 10 years thereafter..
- D. Hepatitis B Virus

Hepatitis B is highly infectious and is completely preventable by immunization.

1. All students **MUST** be vaccinated unless shown to be immune or medically at risk from the vaccination.
2. Any student who is unable to be vaccinated must have a signed declination form on file indicating refusal to be vaccinated.
3. Hepatitis B virus vaccine will be provided by Employee Health at no cost to students. The first of three (3) doses should be obtained prior to starting the program. The remaining two (2) doses may be taken once enrolled. A titer must be drawn after completion of the series to document immunity.

### III. REQUIRED DIAGNOSTIC TESTING

#### A. Rubella – TITER REQUIRED

Each student must certify immunity to Rubella. Immunity is indicated by serologic laboratory evidence of rubella titer. A history of the disease or record of immunization does **NOT** provide adequate documentation of immunity.

#### B. Tuberculosis screening

1. Each student will be tested for TB using the two-step Mantoux test (PPD) required by the State of New Jersey.
2. If the PPD test is positive a chest X-ray is required within one year of admissions.
3. Students who test positive for TB must be evaluated for the presence of active disease and possible prophylaxis through their private physician according to St. Francis Medical Center Policy.
4. Students with current pulmonary or laryngeal TB will be excluded from the classroom and clinical areas until treatment has begun and they are cleared by Employee Health.

#### C. Varicella Zoster

1. Each student must provide a physician substantiated history of varicella.
2. If the history is negative, a varicella titer must be obtained.
3. Students with a negative history and negative titer will need to be vaccinated

### V. EXEMPTIONS

- A. Students shall be exempt from receiving or documenting receipt of any required immunizations which are medically contraindicated. The conditions which comprise valid contraindication shall be those set forth within the most recent Recommendations of the Immunization Practices Advisory Committee published periodically by the Centers for Disease Control, Atlanta, Georgia 30333. Any such student will present a written statement from a physician licensed to practice medicine or osteopathy stating that a specific immunization is medically contraindicated, the specific period and the reasons for medical contraindication.
- B. Students shall be exempt from documenting the required immunizations on religious grounds under the following conditions: Any such student must submit a written statement to the School signed by the student and an official representative of the student's religious affiliation explaining the conflict with religious beliefs. This statement must include the name, address and phone number of the church official as further documentation may be required. Such statement is made part of the student's immunization record.

### VI. RESTRICTIONS

- A. In the event of a vaccine preventable disease outbreak, the School may in consultation with the State Department of Health, exclude each student with a medical or religious exemption to the specific relevant vaccine from attending class and other school sponsored activities.
- B. In the event that a clinical affiliate agency absolutely requires the immunization for which a student is exempt due to medical or religious contraindication the student with a medical or religious exemption to the specific required vaccine may be excluded from that clinical agency. If an alternate agency cannot be found, the student's ability to meet program objectives may be jeopardized.
- C. Any student exposed to rubeola, rubella mumps or varicella who are seronegative and unvaccinated will be restricted from clinical. **IT IS THE RESPONSIBILITY OF THE STUDENT TO NOTIFY THE SCHOOL OF ANY SUCH EXPOSURE.**

**ST. FRANCIS MEDICAL CENTER**  
TRENTON, NEW JERSEY

**SCHOOL OF RADIOLOGIC TECHNOLOGY POLICIES AND PROCEDURES**

	<b>SUBSTANCE ABUSE</b>	Policy Number: SC-A2
Revised: May 2007 Reviewed: May 2011	Established: May 2003	Page 1 of 13

**POLICY:** All students must comply with the Substance Abuse policy as a condition of enrollment. This policy follows the Medical Center Policy.

**PURPOSE:** To create an environment that fosters community, respects the inherent dignity of every person, promotes student participation and ensures safety and well being.

We at St. Francis Medical Center School of Radiologic Technology have a vital interest in ensuring a safe, healthy and efficient working environment for our students, employees, patients and visitors. The unlawful or improper presence or use of controlled substances or alcohol at the Medical Center presents a danger to everyone. For these reasons, we have established, as a condition of continued enrollment with the School, the following substance abuse policy. Drug and/or alcohol testing is an integral part of our policy. This policy applies to all students of the School of Radiologic Technology.

The School maintains a policy of non-discrimination and will endeavor to make reasonable accommodations to assist recovering addicts or alcoholics, and those having a medical history reflecting treatment for substance abuse conditions. We encourage students to seek assistance before their drug and alcohol use renders them unable to perform properly or jeopardizes the health and safety of themselves or others.

Our policy was designed to protect an individual's privacy, to ensure the integrity and reliability of testing procedures and to protect the confidentiality of individual test results and medical histories. Questions regarding the meaning or application of this policy should be directed to the Director of the School of Radiologic Technology.

This policy represents management guidelines only and should not be interpreted as a contract. Failure to comply with this policy will result in disciplinary action, up to and including, immediate dismissal.

This policy refers only to the School's policy and not the eligibility requirements for the American Registry of Radiologic Technologist (ARRT) Examination. The ARRT eligibility requirements state: "One issue addressed by the Rules of Ethics is conviction of a crime – which includes felony, gross misdemeanor or misdemeanor, with the sole exception of speeding and parking violations. All alcohol and/or drug related violations are included. "Conviction," as used in this provision, includes a criminal proceeding where a finding or verdict of guilt is made or returned but the adjudication of guilt is either withheld or not entered, or a criminal proceeding where the individual enters a plea of guilty or nolo contendere."

**Definitions:**

- A. "**Alcohol**" means the intoxicating agent in beverage alcohol, ethyl alcohol or other low molecular weight alcohols including methyl or isopropyl alcohol.
- B. "**Alcohol Use**" means the consumption of any beverage, mixture or preparation, including any medication, containing alcohol.
- C. "**Alcoholic Beverage**" means beer, wine and distilled spirits as defined by the Internal Revenue Code of 1954.

- D. "**Canceled or Invalid Test**" is neither a positive nor a negative test. In drug testing, this means a drug test that has been declared invalid by a medical review officer. A specimen that has been rejected for testing by a laboratory is treated the same as a canceled test. In alcohol testing, this means a test deemed to be invalid under 49 CFR §§ 40.79 and 40.107.
- E. "**Certified Laboratory**" means a laboratory certified by the United States Department of Health and Human Services ("DHHS") which meets the DHHS' "Mandatory Guidelines for Federal Workplace Drug Testing Programs," as amended.
- F. "**Chain of Custody**" means procedures to assure the integrity of each specimen by tracking its handling and storage from point of specimen collection to final disposition of the specimen. With respect to drug testing, these procedures require that a chain of custody form be used from time of collection to receipt by the laboratory. Upon receipt by the laboratory of the specimen, an appropriate chain of custody form will account for the sample within the laboratory. Chain of custody forms must, at a minimum, include an entry documenting the date the specimen was taken, the purpose of taking the specimen, when a specimen or portion of the specimen is handled or transferred and identifying every individual in the chain of custody.
- G. "**Confirmation Test**" in drug testing, means a second test to identify the presence of a specific controlled substance or metabolite that is independent of the screening test and that uses a different technique from that of the screening test to ensure reliability and accuracy. We plan to use gas chromatography/mass spectrometry (GC/MS) or an equally reliable method to ensure reliability and accuracy of test results.
- H. "**Controlled Substances**" and "**Drugs**" are used interchangeably in this policy and mean marijuana, cocaine, opiates, amphetamines and phencyclidine (PCP) and their metabolites and any other substance included in Schedules I through V, of the Controlled Substances Act, 21 U.S.C. § 812. The terms "controlled substances" and/or "drugs" also include legal substances obtained illegally and/or used in an unauthorized manner, but does not refer to the proper use of substances authorized by law which do not affect job safety or performance.
- I. "**Licensed Medical Practitioner**" means a person who is licensed, certified, and/or registered to prescribe controlled substances and other drugs in accordance with applicable federal, state, local or foreign laws and regulations.
- J. "**Medical Review Officer or MRO**" means a licensed physician (medical doctor or doctor of osteopathy) responsible for receiving laboratory results generated by a drug testing program. The MRO must have knowledge of substance abuse disorders and appropriate medical training to interpret and evaluate an individual's confirmed positive test result, medical history and any other relevant biomedical information.
- K. "**Negative Test Result**" in drug testing means a result, reviewed by an MRO and determined to have no evidence of prohibited drug use. "Negative Test Result" in alcohol testing means a *confirmation* test result of less than 0.02.
- L. "**Positive Test Result**" in drug testing means a drug test result reviewed by an MRO and verified to have evidence of prohibited drug use. "Positive Test Result" in alcohol testing means a test result of 0.02 or greater.
- M. "**Reasonable Suspicion**" means that a school official or faculty member believes, based on specific observations, including but not limited to, the student's appearance, behavior, speech or body

odors, that the student has violated the prohibitions of this policy concerning alcohol and drugs. These observations may include indications of the chronic or withdrawal effects of drugs and alcohol.

- N. **"Refuse to Submit"** means that the individual (1) fails to provide blood, or an adequate amount of blood, for testing without a valid medical explanation after he or she has received notice of the requirement for alcohol testing in accordance with the Medical Center's policy; (2) fails to provide urine or an adequate amount of urine, for drug testing without a valid medical explanation after he or she has received notice of the requirement for urine testing in accordance with the Medical Center's policy; (3) engages in conduct that clearly obstructs the testing process; (4) fails to complete the drug and/or alcohol testing forms; or (5) does not report directly to the collection site after notification or delays the collection or testing process.
- O. **"Screening or Initial Test"** means for drug testing, an immunoassay screen to eliminate "negative" urine specimens from further consideration.
- P. **"Student"** means an individual enrolled in the School of Radiologic Technology.
- Q. **"School"** means a site for the performance educationally related activities. This includes, but is not limited to, all structures and surrounding properties at which the Medical Center conducts its business, any Medical Center vehicles or equipment whether owned, leased, or used, whether or not on Medical Center premises, and any other location in which Radiologic Technology education is conducted.

#### PROHIBITED CONDUCT

##### **A. Prohibited Conduct Concerning Alcohol and Illegal Drugs**

1. Students are prohibited from reporting for school or remaining in school with an alcohol concentration of 0.02 or greater.
2. Students are prohibited from consuming alcohol during school hours, including meal and break periods.
3. Students must submit to any drug and/or alcohol test required under the School's substance abuse policy.
4. Students are prohibited from engaging in the unlawful or unauthorized manufacture, distribution, dispensation, solicitation, sale, use, transfer or possession of controlled substances and/or alcoholic beverages during school hours, including meal and break periods, on Medical Center premises, in Medical Center vehicles, or while engaged in School activities.
5. Students are prohibited from reporting for School or remaining in School when using any drugs, except when the use is pursuant to the instructions of a licensed medical practitioner and such use does not create a danger of injury to the student or others.
6. Students are prohibited from continuing to participate in school activities if they have tested positive for drugs and/or alcohol.
7. A student is prohibited from using alcohol for eight hours following an accident/incident, or until he or she takes a post-accident/incident alcohol test, whichever occurs first.

##### **B. Prohibition On School Official or Faculty Member Permitting a Student to Participate in School Activities**

Any school official or faculty member who has actual knowledge that a student has engaged or is engaging in conduct prohibited in Section III A above, shall not permit the student to participate in school activities.

### **C. Prohibition Against Participating in School Activities While Using Any Medication Which Affects Safety Or Performance**

1. Use of any medication (therapeutic drugs) while engaged in School activities is prohibited to the extent such use may affect the health or safety of the student, other students or employees, patients and/or the public, or the student's performance of his or her duties. In addition, use of over-the-counter medications and other substances may result in a positive test result. Students will be given the opportunity to explain a positive test result to a licensed physician ("MRO") responsible for receiving laboratory results generated by the drug testing program, including the identification of recently used prescription or over-the-counter medications or other substances. The MRO has knowledge of substance abuse disorders and appropriate medical training to interpret and evaluate an individual's confirmed positive test result, medical history and any other relevant biomedical information.
1. A student using any medication that contains alcohol or a controlled substance has an obligation to inquire and determine whether the substance the student is taking poses a significant risk of substantial harm to the health and safety of the student or others. If the student is using such a medication, the student is required to obtain from the student's licensed medical practitioner a written statement which provides either that the medication does not pose a significant risk of substantial harm to the health and safety of the student or others or advises of any restrictions applicable to the student.
2. Any such information must be reported to the Director of the School of Radiologic Technology prior to commencing any duties, without disclosing the identity of the substance or the student's medical condition. The Director will contact the Medical Center's MRO. Students using such a medication must have the medication in its original container which identifies the medication dosage and other pertinent information which will be reviewed by the Medical Center's MRO in consultation with the student's licensed medical practitioner.
3. Depending upon the results of the review, the Director will consider whether the safety or health risk can be eliminated or sufficiently reduced by a reasonable accommodation, if applicable. A student may not be permitted to perform his or her duties unless such a determination, or a reasonable accommodation, if any, has been made.

### **REQUIRED TESTS**

The requirements provided below apply to all students of the School of Radiologic Technology.

#### **A. Reasonable Suspicion Drug and Alcohol Testing**

A student must submit to reasonable suspicion drug and/or alcohol testing when a school official or faculty member believes that the student has violated the drug and/or alcohol prohibitions contained in this policy. A reasonable suspicion determination must be based on specific, articulated observations, including but not limited to, the student's appearance, behavior, speech, or body odors. In addition, these observations may include indications of the chronic or withdrawal effects of drugs and alcohol.

1. The alcohol test should be administered within two hours, but no later than after eight hours, from the reasonable suspicion determination.
2. The school official or faculty member who makes a reasonable suspicion determination will not conduct the drug and/or alcohol test.
3. The School shall immediately transport or ensure transportation of the student to and from the collection site for the collection of blood and/or urine samples.

4. The student must submit to reasonable suspicion drug and/or alcohol testing upon request.
5. Documentation of the observations leading to a reasonable suspicion drug and/or alcohol test must be prepared and signed by the school official or faculty member making the observations.
6. The student will be removed from Medical Center property after the completion of the drug and/or alcohol tests, pending the test results. If the test results are negative, the student will be permitted to return to the Medical Center. The School also reserves the right to evaluate the conduct of the individual that warranted the reasonable suspicion drug and/or alcohol test to determine if the conduct in and of itself should warrant discipline, up to and including termination.

#### **B. Post-Accident/Incident Drug And/Or Alcohol Testing**

1. A student may be required to submit to post-accident/incident drug and alcohol tests, as soon as practicable following the accident/incident. An accident/incident is defined as when:
  - Any controlled substances are suspected of being missing, altered or substituted;
  - Any medications are suspected of being missing, altered or substituted;
  - Any student who is involved in or has caused an accident which results in personal injury to either an employee, student, patient, visitor or other individual working at the Medical Center or other clinical site and requires the individual to receive medical treatment by a medical professional or healthcare facility; or
  - Any student who has violated any written safety, health or work rules which involves a serious potential risk of harm to employees, students, patients, visitors or other individuals working at the Medical Center, Medical Center property or other clinical site..
2. In a post-accident/incident situation, the student must notify his or her school official or a faculty member who will contact the Program Manager or Administrator on call who will determine whether the student will be required to submit to testing. Students are obligated to follow the Program Manager's instructions and to submit to post-accident/incident drug and/or alcohol tests as soon as possible.
3. Post-accident/incident alcohol tests are required to be administered as soon as possible, but not later than eight hours, following the accident/incident. If a post-accident/incident alcohol test cannot be completed within such time frame, the School shall cease attempts to administer the test. Post-accident/incident drug tests are required to be administered within 32 hours, following the accident/incident.
4. A student who is subject to post-accident/incident testing must remain readily available for such testing or may be deemed to have refused to submit to testing. However, this "readily available" requirement does not prohibit a student from leaving the scene of an accident/incident for the necessary period to obtain assistance in responding to the accident/incident to obtain necessary emergency medical care and does not mean that necessary medical treatment for injured people should be delayed.
5. A student who is seriously injured and cannot provide a blood and/or urine specimen at the time of the accident/incident must provide the necessary authorization for obtaining medical reports and other documents that would indicate whether there were any controlled substances and/or alcohol in his or her system.
6. A student will be removed from Medical Center property after the completion of the drug and/or alcohol tests, until either the student has been medically released to return by the treating physician, or the School receives the test results, whichever occurs first. If the test results are negative, the student will be permitted to return to the School. The School also reserves the right to evaluate the conduct of the student that may have caused or contributed

to the accident/incident, to determine if this conduct in and of itself should warrant discipline, up to and including dismissal.

### C. Return-To-School And Follow-Up Drug and/or Alcohol Tests

Students who receive positive drug and/or alcohol test results who are not dismissed (Section VII) upon their return to the School must submit to return-to-duty drug and/or alcohol tests and must receive negative results. In addition, such students will be subject to unannounced follow-up drug and/or alcohol testing. The number and frequency of such tests shall be directed by the School. Such follow-up testing will be required in addition to all other tests required by this policy.

## I. SELF DISCLOSURE OF SUBSTANCE ABUSE PROBLEMS

If a student voluntarily discloses that he or she has a drug and/or alcohol problem and voluntarily requests assistance for such a problem before being selected for drug and/or alcohol testing required by this policy or violating this policy in any way, the School will refer such student to the Medical Center's Employee Assistance Program for evaluation and referral to an appropriate counseling, treatment or rehabilitation program, if recommended. The student must satisfactorily complete any assistance or rehabilitation program. The cost of rehabilitation or treatment is the student's responsibility. The student will be placed on a medical leave of absence. To the extent that the student is involved in providing or assisting in the provision of patient care, School will mandate that the student participate in the Employee Assistance Program and require that the EAP provider confirm the student's active participation. This will be required where it becomes necessary to protect the welfare of the community, in accordance with applicable law.

Students who are in rehabilitation are protected by the Americans With Disabilities ACT(ADA.) However, current substance abusers do not enjoy the protection of the ADA.

### DRUG AND ALCOHOL TESTING PROCEDURES

The School's drug and alcohol testing procedures are designed to ensure the integrity, confidentiality and reliability of the testing process, safeguard the validity of the test results and ensure that these results are attributed to the correct individual. Further, these procedures minimize the impact upon the privacy and dignity of persons undergoing such tests to every extent feasible.

#### A. Drug Testing Procedures

The drugs specifically being tested for include: marijuana, opiates, amphetamines, cocaine, phencyclidine (PCP), barbiturates, propoxyphene, benzodiazepenes, methodone, methaqualone and their metabolites. The Medical Center has established a chain of custody procedure for both drug sample collection and testing that will verify the identity of each sample and test result. All drug tests conducted pursuant to this policy shall be performed by laboratories which are DHHS certified.

##### 1. Confirmation and review of drug test results

- All positive drug test results will be confirmed by gas chromatography and mass spectrometry (GC/MS). All confirmed positive drug test results will be reviewed by an MRO to determine whether there is any legitimate explanation for the positive test result. This review may include a medical interview, review of the student's medical history, review of any other relevant biomedical factors or review of all medical records made available by the tested individuals.
- Students testing positive will be given the opportunity to discuss with the MRO any legitimate explanation for the positive test result. If the MRO determines that there is a legitimate medical explanation for the confirmed positive test result, the MRO will report the test result to the School as negative. If the MRO determines that there are

no legitimate explanations for the confirmed positive test result, the results will be verified by the MRO.

- The MRO may verify a test as positive without having communicated directly with the student when:
  - a) The student expressly declines the opportunity to discuss the test; or
  - b) Neither the MRO nor the Program Manager or his or her designated representative, after making all reasonable efforts, has been able to contact the individual within 14 days of the date on which the MRO receives the confirmed positive test result from the laboratory; or
  - c) The Program Manager or his or her designated representative has successfully made and documented a contact with the student and instructed the student to contact the MRO and more than five days have passed since the student was contacted by the Program Manager or his or her designated representative.

## 2. **MRO may reopen verification**

If a test is verified positive under the circumstances specified in paragraph (c)(ii) or (iii) above, the individual may present to the MRO information documenting that serious illness, injury, or other circumstances unavoidably prevented the individual from being contacted by the MRO, the Program Manager or his or her designated representative or from contacting the MRO within the times provided above. The MRO may reopen the verification, allowing the individual to present information concerning a legitimate explanation for the confirmed positive test. If the MRO concludes that there is a legitimate explanation, the MRO will declare the test to be negative.

## 3. **Right to have split specimen analyzed**

All urine specimens shall be made as split specimens. Within 72 hours of being notified by the MRO of a verified positive test result, all students have the right to request that the split specimen be analyzed in a different DHHS certified laboratory for the presence of the drug(s) for which a positive result was obtained. If the split specimen does not confirm the presence of the drug(s) found in the primary specimen, or if the split specimen is unavailable, inadequate for testing or untestable, the MRO shall cancel the test and report the cancellation and the reasons for it to the Program Manager or his or her designated representative and the tested individual. The MRO will also notify the Program Manager or his or her designated representative and the tested individual if the split specimen confirms the presence of the drug(s) or drug metabolites. Any student who requests that the split specimen be tested must pay for the cost of the split specimen unless the results are negative.

## 4. **Inability to provide adequate amount of urine specimen**

The student must provide at least 45 milliliters of urine for a drug test. If the individual is unable to provide such a quantity of urine, the individual will be instructed to drink a set amount of fluids. The student must again attempt to provide a complete specimen after a set period of time. A refusal to drink the fluids as directed or to provide a new urine specimen will constitute a refusal to submit to testing and the student will be dismissed. If the student has not provided a sufficient specimen within a certain time period after the first unsuccessful attempt to provide the specimen, the Medical Center will direct the student to obtain as soon as possible, a medical evaluation from a licensed physician selected by the Medical Center. A determination by the physician that no legitimate medical explanation exists for the student's failure to provide an adequate amount of urine will constitute a refusal to test and the student will be dismissed. Students who provide negative dilute test

results may be required to submit to a new test at the discretion of the Medical Center. A determination by the physician that no legitimate medical explanation exists for the student's failure to provide an adequate amount of urine will constitute a refusal to test and the student will be terminated.

#### 5. **Altered or substituted urine specimens**

Procedures for collecting urine specimens allow an individual privacy unless there is a reason to believe that a particular individual may alter or substitute the specimen. In such cases, a specimen may be obtained under the direct observation of a same gender collection site person in accordance with such procedures. Specimens shall undergo validity testing to assure that samples have not been adulterated or substituted. Specimens found by a laboratory to have been adulterated or substituted shall be verified by the MRO, and students shall be afforded the opportunity to have a split specimen tested in that event.

### B. **Alcohol Testing Procedures**

The Medical Center's alcohol testing procedure is designed to provide accurate fast screening of potential abuse, protect students' confidentiality, and to take appropriate action based on a full investigation of all relevant information. The following steps will be followed when a manager, supervisor or faculty member, after appropriate consultation, reasonably suspects a student has violated this policy:

1. The school official or faculty member, or an appropriate designee, will escort the student to Employee Health Services. If Employee Health Services is closed, the student will be taken to the Emergency Department.
2. A trained employee of the Medical Center will take a blood sample.
3. If the results of the test reveal an alcohol concentration of 0.02 or greater the student will be removed from Medical Center property immediately.
4. The Medical Center will arrange for safe transportation to the student's home.
5. The student will not be allowed to return to the Medical Center until a complete investigation is conducted.
6. Disciplinary action, up to and including immediate dismissal, will be taken based on the results of the investigation. See Section IV A paragraph 6.

## **CONSEQUENCES FOR REFUSAL TO SUBMIT TO TESTS AND POLICY VIOLATIONS**

The School has established the following consequences for students found to have violated this policy.

### A. **Positive Test Results**

1. Any student who receives a confirmed positive drug and/or alcohol test result will be disciplined up to and including dismissal.

- **Temporary removal**

Any student who is required to submit to a reasonable suspicion drug and/or alcohol test pursuant to this policy will be temporarily removed from Medical Center property until the School receives the verified test results and, if requested in the case of drug testing, the split specimen test results. If the test results or the requested split specimen test results are negative, the student will be allowed to return to the School.

- **Additional discipline**

Any student who receives a positive drug and/or alcohol test result will be disciplined up to and including dismissal. The School, at its discretion, may choose not to dismiss a student who receives a positive drug and/or alcohol test result for the first time. Rather, the School may make as a condition of continued enrollment the successful completion of a drug or alcohol counseling, treatment or rehabilitation program, whichever is most appropriate as determined by the School after consultation with a medical professional. Such treatment will be at the student's own expense, or pursuant to coverage under a benefit plan. If the student either refuses to fully participate in the program or fails to successfully complete the program, as evidenced by withdrawal from the program before its completion, or by a positive test result after completion of the program, he or she will be dismissed.

Any student who receives an additional positive drug and/or alcohol test result will be disciplined up to and including dismissal.

**B. Refusal to Submit**

A refusal by a student to complete the drug and alcohol testing forms, to provide an adequate specimen, to report directly to the collection site after notification, or otherwise cooperate with the testing process in a way that prevents the completion of the test will constitute a refusal to submit to a test and the student will be disciplined up to and including dismissal.

**C. Altered or Substituted Urine Specimens**

Any student who alters or attempts to alter or substitute a urine specimen will be disciplined up to and including dismissal.

**D. Policy Violations**

If a student has violated this policy in any way (even for a first offense), other than for violations set forth in A, B, and C above, the student will be immediately removed from Medical Center property and will be subject to discipline, up to and including, immediate dismissal.

**NOTIFICATION OF TEST RESULTS**

Students will be advised of drug test results if the results were verified as positive. In addition, the student will be advised of which drug(s) were verified as positive. Students will be advised of alcohol test results if the results were positive.

**TESTING EXPENSES AND COMPENSATION FOR TESTS**

The Medical Center will pay for all drug and/or alcohol tests required by the Medical Center, including confirmation tests. Any test taken at the student's request will be at his or her own expense, including the analysis of the split specimen for drug testing. The Medical Center will reimburse a student if a test requested by a student produces a negative result.

**ACCESS TO RECORDS AND CONFIDENTIALITY OF TEST RESULTS**

The School and Medical Center will maintain records of its substance abuse program in a secure location with controlled access.

The laboratory may disclose drug test results only to the MRO. The MRO may disclose test results only to the individual tested, designated Medical Center representatives, a treatment program, or a court of law or administrative tribunal to the extent required by law.

In addition, a student, upon written request, may obtain copies of any records pertaining to the student's drug and alcohol use, including test records. The School and Medical Center will promptly provide the records requested by the student. The School and Medical Center shall not release such information to any outside party except as required by law or expressly authorized in writing by the student.

### **CONSENT OF STUDENTS**

All students are required to consent to drug and/or alcohol testing and/or inspections pursuant to this policy as a condition of enrollment. Consent to drug and/or alcohol testing and/or a search includes a student's obligation to fully cooperate. Upon request, such person must promptly complete any required forms and releases and promptly provide a sample for testing. A student's refusal to sign the consent and acknowledgment forms will result in dismissal.

### **XII. REASONABLE SEARCHES**

Where there is reasonable cause to believe that a student is under the influence of drugs or alcohol, or is engaged in the sale, possession or distribution of drugs or alcohol on Medical Center premises, the student may be asked to submit to reasonable searches of his or her personal effects including, but not limited to, lunch boxes, purses, packages and private vehicles parked on the premises. Such searches are for the purposes of determining whether the individual is in possession of or under the influence of drugs or alcohol and may be initiated by the School without prior announcements and will be conducted as such times and locations as deemed appropriate based on the School finding reasonable cause. Where the School has reasonable cause to conduct a search, the refusal of any individual to submit to a search may be considered a violation of established standards of conduct and may result in appropriate disciplinary action up to and including dismissal.

### **XIII. REQUIRED NOTIFICATION OF CRIMINAL CHARGES INVOLVING DRUG AND/OR ALCOHOL STATUES**

Any student arrested for, charged with or convicted of, violation of any criminal drug statute or any alcohol related offense (including DUI), whether in or out of school, must report such activity to the Director of the School of Radiologic Technology or designee 72 hours of the arrest, charge or conviction. The School shall evaluate such information and will determine the appropriate course of action that may include, but is not limited to, follow-up testing, suspension or dismissal. As a condition of continued enrollment, St. Francis Medical Center School of Radiologic Technology may request the student to successfully complete a drug/alcohol assistance or rehabilitation program and upon return to School shall be required to execute an agreement for continued enrollment which shall include the requirement that the student successfully pass any random or scheduled drug testing in accordance with section IV (C). Failure to report such arrest, charge or conviction within the time frame set forth shall result in disciplinary action up to and including dismissal.

### **XIII. COMPLIANCE WITH POLICY AS CONDITION OF ENROLLMENT**

All students are advised that full compliance with this substance abuse policy shall be a condition of continued enrollment. See Section VII for the consequences for a refusal to submit to tests and policy violations.

### **A Summary of Your Rights Under the Fair Credit Reporting Act**

The federal Fair Credit Reporting Act (FCRA) is designed to promote accuracy, fairness, and privacy of information in the files of every "consumer reporting agency" (CRA). Most CRAs are credit bureaus that gather and sell information about you -- such as if you pay your bills on time or have filed bankruptcy -- to creditors, employers, landlords, and other businesses. You can find the complete text of the FCRA, 15 U.S.C. 1681-1681u, at the Federal Trade Commission's web site (<http://www.ftc.gov>). The FCRA gives you specific rights, as outlined below. You may have additional rights under state law. You may contact a state or local consumer protection agency or a state attorney general to learn those rights.

- **You must be told if information in your file has been used against you.** Anyone who uses information from a CRA to take action against you -- such as denying an application for credit, insurance, or employment -- must tell you, and give you the name, address, and phone number of the CRA that provided the consumer report.
- **You can find out what is in your file.** At your request, a CRA must give you the information in your file, and a list of everyone who has requested it recently. There is no charge for the report if a person has taken action against you because of information supplied by the CRA, if you request the report within 60 days of receiving notice of the action. You also are entitled to one free report every twelve months upon request if you certify that (1) you are unemployed and plan to seek employment within 60 days, (2) you are on welfare, or (3) your report is inaccurate due to fraud. Otherwise, a CRA may charge you up to eight dollars.
- **You can dispute inaccurate information with the CRA.** If you tell a CRA that your file contains inaccurate information, the CRA must investigate the items (usually within 30 days) by presenting to its information source all relevant evidence you submit, unless your dispute is frivolous. The source must review your evidence and report its findings to the CRA. (The source also must advise national CRAs -- to which it has provided the data -- of any error.) The CRA must give you a written report of the investigation, and a copy of your report if the investigation results in any change. If the CRA's investigation does not resolve the dispute, you may add a brief statement to your file. The CRA must normally include a summary of your statement in future reports. If an item is deleted or a dispute statement is filed, you may ask that anyone who has recently received your report be notified of the change.
- **Inaccurate information must be corrected or deleted.** A CRA must remove or correct inaccurate or unverified information from its files, usually within 30 days after you dispute it. **However, the CRA is not required to remove accurate data from your file unless it is outdated (as described below) or cannot be verified.** If your dispute results in any change to your report, the CRA cannot reinsert into your file a disputed item unless the information source verifies its accuracy and completeness. In addition, the CRA must give you a written notice telling you it has reinserted the item. The notice must include the name, address and phone number of the information source.
- **You can dispute inaccurate items with the source of the information.** If you tell anyone -- such as a creditor who reports to a CRA -- that you dispute an item, they may not then report the information to a CRA without including a notice of your dispute. In addition, once you've notified the source of the error in writing, it may not continue to report the information if it is, in fact, an error.
- **Outdated information may not be reported.** In most cases, a CRA may not report negative information that is more than seven years old; ten years for bankruptcies.

- **Access to your file is limited.** A CRA may provide information about you only to people with a need recognized by the FCRA -- usually to consider an application with a creditor, insurer, employer, landlord, or other business.
- **Your consent is required for reports that are provided to employers, or reports that contain medical information.** A CRA may not give out information about you to your employer, or prospective employer, without your written consent. A CRA may not report medical information about you to creditors, insurers, or employers without your permission.
- **You may choose to exclude your name from CRA lists for unsolicited credit and insurance offers.** Creditors and insurers may use file information as the basis for sending you unsolicited offers of credit or insurance. Such offers must include a toll-free phone number for you to call if you want your name and address removed from future lists. If you call, you must be kept off the lists for two years. If you request, complete, and return the CRA form provided for this purpose, you must be taken off the lists indefinitely.
- **You may seek damages from violators.** If a CRA, a user or (in some cases) a provider of CRA data, violates the FCRA, you may sue them in state or federal court.

The FCRA gives several different federal agencies authority to enforce the FCRA:

<b>FOR QUESTIONS OR CONCERNS REGARDING:</b>	<b>PLEASE CONTACT:</b>
CRAs, creditors and others not listed below	Federal Trade Commission Consumer Response Center - FCRA Washington, DC 20580 1-877-382-4367 (Toll-Free)
National banks, federal branches/agencies of foreign banks (word "National" or initials "N.A." appear in or after bank's name)	Office of the Comptroller of the Currency Compliance Management, Mail Stop 6-6 Washington, DC 20219 800-613-6743
Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks)	Federal Reserve Board Division of Consumer & Community Affairs Washington, DC 20551 202-452-3693
Savings associations and federally chartered savings banks (word "Federal" or initials "F.S.B." appear in federal institution's name)	Office of Thrift Supervision Consumer Programs Washington, DC 20552 800-842-6929
Federal credit unions (words "Federal Credit Union" appear in institution's name)	National Credit Union Administration 1775 Duke Street Alexandria, VA 22314 703-518-6360
State-chartered banks that are not members of the Federal Reserve System	Federal Deposit Insurance Corporation Division of Compliance & Consumer Affairs Washington, DC 20429 800-934-FDIC
Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission	Department of Transportation Office of Financial Management Washington, DC 20590 202-366-1306
Activities subject to the Packers and Stockyards Act, 1921	Department of Agriculture Office of Deputy Administrator - GIPSA Washington, DC 20250 #202-720-7051

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School of Radiologic Technology

**Academic Grading Scale**

Letter Grade	Number Range	Level of Performance
A	93-100	Superior
B	89-92	Above Average
C	85-88	Average
D	70-84	Below Average
F	Below 70	Failure

**Student Acknowledgement:**

I have received and read a copy of the St. Francis Medical Center School of Radiologic Technology Student Catalog.

I understand the material contained within and agree to abide by the policies therein.

The rules and regulations of the Program are binding to all. The student must acquaint himself/herself with the information, and be prepared to justify any exceptions that occur.

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Applicant's Signature and date

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Program Director's Signature and date