



LOMA LINDA UNIVERSITY

School of Allied Health Professions

Radiation Technology

Medical Radiography
Program Handbook
& Policy Manual

A.S. IN MEDICAL RADIOGRAPHY

Programmatic Handbook & Policy Manual | ver. 3
Updated May 2020

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LOMA LINDA
UNIVERSITY
Medical Radiography Program

P R E F A C E

The purpose of this document is to provide guidelines and criteria for successful completion of the A.S. in Medical Radiography Program.

This document is detailed in nature so that it can be used to guide, counsel, and mentor faculty, clinical instructors, and students, and to provide a safe learning environment within the program.

The goal is that policies and procedures are enforced in a consistent and just manner. High ethical standards help assure that the rights of students, faculty, and staff are protected. These policies are to be fair, equitable, and consistently applied, with the goal to promote professionalism.

The procedure for creating these policies has derived from the need to document the decisions that are made on a regular basis so that everyone is aware of how the program operates. First, a policy is initiated based on need. Then the faculty discusses the purpose, definitions, description of the policy, and the Procedure. We also discuss the discrimination of information and who is impacted. This procedure for making policy was derived from the theories of policy creation and writing.

This is a living document. The reader of this document needs to know that changes will be made throughout the year, which will reflect updated policy and procedure.

To access the most current version, please contact the Program Director.

❖ *Meets the requirements for JRCERT Standard 1.1.*

Chapter
1

Program Leadership, Faculty, Clinical Instructors, and Staff

Our vision is to be known by our students, alumni, clinical instructors, faculty, professional community, and staff as the medical radiography program of choice. Additionally, we want the program experience to be known as “a close family” that is exciting, challenging, transforming, and fun.



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2020-2021 | LLU MEDICAL RADIOGRAPHY SITE LIST | SEE CLINICAL COORDINATOR FOR MOST UP TO DATE LIST OF CLINICAL INSTRUCTORS AT EACH SITE.

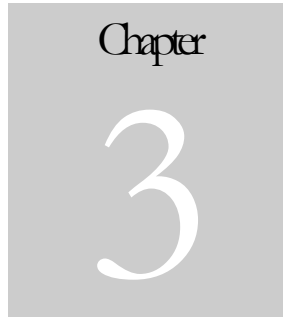
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Chapter

2

ASMR Curriculum

2020-2021 ASMR 60-UNIT CURRICULUM		
Year 1 - Fall Quarter		Units
RTMR 202	Orientation Lab (1 day/week)	1
RTMR 224	Legal Issues in Medical Radiography	1
RTMR 246	Professional Communication	2
RTMR 253	Med Radiography Procedures 1	3
RTMR 253L	Med Radiography Procedures Lab 1	1
RTMR 285	Principles of Radiography 1	3
AHCJ 326	Fundamentals of Health Care	2
TOTAL		13
Year 1 - Winter Quarter		Units
RTMR 221	Radiologic Patient Care	2
RTMR 254	Med Radiography Procedures II	3
RTMR 254L	Med Rad Procedures Lab II	1
RTMR 284	Radiation Protection & Biology	2
RTMR 286	Principles of Radiography II	3
RTMR 371	Medical Radiography Affiliation I (2 days/week)	1
TOTAL		12
Year 1 - Spring Quarter		Units
RTMR 255	Med Radiography Procedures III	2
RTMR 255L	Med Radiography Procedures Lab III	1
RTMR 283	Radiologic Physics	3
RTMR 247	Languages for Radiographers	1
AHCJ 328	Portfolio Practicum I	1
RTMR 372	Medical Rad Affil II (3 days/week)	2
RELT 423	Loma Linda Perspectives	2
TOTAL		12
Year 2 - Summer Quarter		Units
RTMR 373	Med Rad Affil III (5 days/week)	3
TOTAL		3
Year 2 - Fall Quarter		Units
RTMR 321	Radiographic Image Eval & Pathology	3 Fall 2020
(RTMR 322	Radiographic Pathology	1)
RTMR 305	Introduction to CT I	2
RELX xxx	Religion Course	2
RTMR 374	Med Rad Affil IV (4 days/week)	2
TOTAL		9(*7)
Year 2 - Winter Quarter		Units
RTMR 306	Introduction to CT II	2
RTMR 363	Comprehensive Review I	2
RTMR 375	Med Rad Affil V(4 days/week)	2
TOTAL		6
Year 2 - Spring Quarter		Units
RTMR 344	Professional Development & Service Learning	3
RTMR 365	Comprehensive Review II	2
RTMR 386	Medical Rad Affil VI (4 days/week)	2
TOTAL		7

A gray square graphic with the word "Chapter" in a serif font at the top and a large white number "3" in the center.

Recruitment & Selection Process

PROGRAM ADMISSION POLICIES

Applicants must complete a list of prerequisites, 8 hours (minimum) of career observation, references, volunteer service hours recommended but no required, transcripts, and an application essay. The application window is from October 1 to April 1, with an early-bird priority deadline of February 1. Published policies include letting applicants know about the need for a current American Heart Association CPR card, a background check, a possible drug screening, and the JRCERT and ARRT requirements. All prerequisites must be completed by the Spring/Mid-Summer term of the application year. Prerequisites in late Summer will be looked at, but applicants may be placed on an alternate list depending on the application pool.

SELECTION PROCESS

Students are selected based on the following factors:

- Application: The application requirements that are met by the deadline. Applications will not be reviewed if the application packet is not completed by the application deadline.
- GPA: We review four GPAs. None of these GPAs are to be below 2.5
- The interview: If a face-to-face interview is going to be granted, it is usually preceded by a phone screening interview. The interview process includes a scoring system based on different factors. Not all students will receive an interview. An interview is usually granted if the students meet the admissions, ethical, pre-screening, and GPA criteria.
- The interview panel: Applicants are screened and reviewed by 2-4 people: the program director, the assistant program director, the clinical coordinator, and the administrative assistant.
- The final decision always involved at least two faculty.
- Prerequisites: Students will not be considered for selection if prerequisites still need to be completed with a plan to finish by July 31 (unless other accommodations have been allotted with PD)

Loma Linda University and the Medical Radiography program are open to all individuals of any race, color, religion, gender, age, disability, national origin, and any other protected class. The selection is objective and subjective, but not discriminatory. We are looking for the best *person* to be a radiologic technologist, and we are looking for a good student who can successfully complete the program.

PROGRAM ADMISSION PROCESS

The process is non-discriminatory, just, and consistent. Here is a brief list of things that we go through:

- Application Window Oct. 1 – April 1.
- Academic Work-ups from Admissions (January-March)
- Review and screening of all applications (March-April)
- Interviews for only those who pass through the review and screening phase (March-May). Please kindly note that not everyone will get an interview....only the top candidates.
- Selection of a group of applicants will be made no later than June 1. Notice will be given if there will be a delay in this process.

This is a very competitive selection process, and it gets more so each year. We get many calls about requesting an interview, or asking why an interview has not been scheduled. We communicate with our applicants through email about the process.

All applicants will be considered using the same standards and selection criteria.

- ❖ *Meets the requirements for JRCERT Standard 1.12. and Standard 1.13.*

Chapter
4

Mission, Vision, Values

LLU MISSION
VISION &
VALUES

MOTTO

To Make Man Whole

MISSION

The mission of Loma Linda University is to continue the teaching and healing ministry of Jesus Christ.

VISION

The vision of Loma Linda University is to transform lives through education, healthcare, and research.

VALUES

Loma Linda University holds to seven core values:

Compassion—The sympathetic willingness to be engaged with the needs and suffering of others. Among the most memorable depictions of compassion in Scripture is the story of the Good Samaritan, which LLU has taken as a central symbol for our work.

Integrity—The quality of living a unified life in which one's convictions are well-considered and match one's actions. Integrity encompasses honesty, authenticity, and trustworthiness.

Excellence—The commitment to exceed minimum standards and expectations.

Freedom—The competency and privilege to make informed and accountable choices and to respect the freedom of others. God has called us not to slavery, but to freedom.

Justice—The commitment to equality and to treat others fairly, renouncing all forms of unfair discrimination.

Purity/Self-Control—Morally upright and moderate in all things with complete control over one's emotions, desires, and actions.

Humility—The willingness to serve others in a sacrificial manner; the self-respect that renounces haughtiness or arrogance.

❖ Meets the requirements for JRCERT Standard 2.1.

SCHOOL OF
ALLIED
HEALTH
PROFESSIONS
MISSION
VISION &
VALUES

MISSION

The School of Allied Health Professions is committed to educating students in the manner of Christ, in a world-class, globally-recognized learning environment that uplifts the mission of Loma Linda University through service, education, and research to make man whole.

VISION

The School of Allied Health Professions seeks to inspire and transform individuals to exemplary leadership, healing, and service to humanity.

VALUES

The School of Allied Health Professions holds to these core values:

EXCELLENCE — Our commitment is to unparalleled quality and performance that produces outstanding results of lasting value and distinction.

COMPASSION — We have a deep awareness of the needs and suffering of others and are dedicated to empathetically caring for the whole person.

INTEGRITY — We live as a positive example with honesty, authenticity, and trustworthiness.

HUMILITY — We willingly serve in a respectful, fair, sacrificial manner, where we appreciate the unique and diverse contribution of others.

SERVICE LEADERSHIP – We strive for an open, caring, collaborative environment where professionalism, structure, and organization underlie how we cooperatively work together.

INNOVATION – We tirelessly persevere toward the visionary and cutting-edge education, thus, encouraging an environment of creativity.

RESPONSIBILITY – We are dedicated to accountability and commitment in all we do, and understand affirming the importance primacy of lifelong learning.

MOTTO:

To Lead, To Heal, To Serve

- Through Excellence We Lead
- With Compassion We Heal
- In Humility We Serve

PURPOSE

The School of Allied Health Professions develops leaders to serve global communities by providing comprehensive learning experiences in collaboration with partners who share our values.

❖ *Meets the requirements for JRCERT Standard 2.1.*

DEPARTMENT
OF RADIATION
TECHNOLOGY
MISSION
VISION &
VALUES

OUR MISSION

The Department of Radiation Technology aims to be the leader in educating radiology professionals who will lead, heal, and serve throughout the world.

OUR VISION

Our vision is to be the University of choice by students, faculty, and alumni for radiation science education. Through our comprehensive selection of educational programs, we aim to provide students with a unique perspective that combines spirituality and whole-person care.

OUR VALUES

Academic & Clinical Excellence: Our students are exposed to current technology, and will graduate with a strong foundation of academic knowledge and advanced clinical skills so they can competently care for patients.

Whole Person Care: Our religious faith will be at the core of everything we do in order to compassionately and empathetically care for patients at the spiritual, psychological, and physical level.

Mentoring Relationships: Our faculty will provide an example of excellence, dedication, encouragement, and direction in order to create positive mentoring relationships with students.

Positive Learning Environment: Our programs will provide a cohesive, interactive, supportive, and challenging educational environment where students can safely explore and develop their academic and clinical skills.

Life-long Learning: Our students, faculty, and alumni will continually build on the strong foundation of knowledge, leadership, and professional collaboration in order to contribute to the standard of excellence within the field of radiation sciences.

❖ Meets the requirements for JRCERT Standard 2.1.

A . S . I N M E D I C A L
R A D I O G R A P H Y
P R O G R A M
M I S S I O N
V I S I O N &
V A L U E S

MISSION

The Medical Radiography Program at Loma Linda University School of Allied Health Professions provides a quality educational experience focused on the whole person, preparing students to be registry-eligible, entry-level radiographers, equipped with the knowledge, skills, values, attitudes, and behaviors appropriate for providing excellent patient care and safely managing radiation exposure.

VISION

Our vision is to be known by our students, alumni, clinical instructors, faculty, professional community, and staff as the Medical Radiography Program of choice. Additionally, we want the Program experience to be known as "a close family" that is exciting, challenging, transforming, and fun.

VALUES

We will accomplish our mission and vision by achieving high standards in the areas of core values, professional behavior, academic and clinical excellence, quality care, and collaborative success.

- ✓ **Core Values:** Our Program upholds the core values of the University and the School of Allied Health Professions in the following areas: excellence, compassion, integrity, humility, service leadership, innovation, justice, freedom, self-control, and responsibility.
- ✓ **Academic & Clinical Excellence:** Our Program aims for excellence in its academic and clinical education program by providing an organized and safe learning environment. Our students graduate with a strong foundation of academic knowledge and clinical skills in order to competently care for patients, provide responsible leadership, and positively contribute to society.
- ✓ **Professional Behavior:** Students, clinical instructors, faculty, and staff demonstrate professional communication, attire, ethics, etiquette, and an appreciation for culture and diversity.
- ✓ **Quality Care:** Students, clinical instructors, faculty, and staff are approachable, positive, responsive, and respectful. We protect the privacy of students while individually responding to requests, inquiries, and needs.
- ✓ **Collaborative Success:** Students, clinical instructors, faculty, and staff will work together as a unified, cohesive, and supportive team for personal and professional success.

❖ *Meets the requirements for JRCERT Standard 1.10 and Standard 2.1.*

Chapter
5

Outcomes & Objectives

Upon completion of the program, the graduate should be qualified to:

1. Complete all certification requirements of the American Registry of Radiologic Technologists and licensure requirements for the State of California.
2. Anticipate and render appropriate patient care, comfort, and education for a variety of radiologic exams.
3. Use principles of basic x-ray production to provide radiation protection that minimizes radiation exposure to the patient, to one's self, and to other members of the health care team.
4. Understand the scope and limits of equipment operation used in radiography, and recognize and report equipment malfunctions.
5. Exhibit clinical competence by properly using radiographic equipment, techniques, and procedures, and applying knowledge of human anatomy, function, and pathology to a variety of patient situations.
6. Demonstrate excellence in the application of knowledge and skills in order to maintain a high level of quality patient care.
7. Apply problem-solving and critical thinking skills when working with patients, performing exams, and evaluating radiographs for diagnostic quality.
8. Incorporate the values, ethics, and practices of the radiography professions in order to provide a service to humanity, and respect the dignity and diversity of all people.
9. Employ appropriate verbal, written, and interpersonal communication skills when relating to patients, coworkers, and other members of the health care team.
10. Utilize the highest professional behavior in all interactions.
11. Demonstrate collaboration and teamwork in the health care setting in order to meet the goals of the organization.
12. Defend the profession's code of ethics and work within the profession's scope of practice.
13. Construct a professional development plan for ongoing improvement in the knowledge and skills of the profession.
14. Understand the value of participating in educational and professional activities, sharing knowledge with colleagues, and investigating new and innovative aspects of professional practice.
15. Understand and apply Loma Linda University's philosophy of wholeness into one's personal and professional life.

❖ Meets the requirements for JRCERT Standard 1.10.

A S M R
B E N C H M A R K
A C H I E V E M E N T

The ASMR Program at Loma Linda University has measurable achievement goals in the following areas that are in accordance with JRCERT guidelines and that are specific to our Program's intent for Student Learning Outcomes:

- Students will demonstrate clinical competence by performing radiographic exams of diagnostic quality and apply patient care and practices for radiographic procedures at 85% or above.
- Students will communicate effectively by being able to clearly explain radiographic procedures to patients, communicate and work with the healthcare team, and adjust communication for diverse populations at 85% or above.
- Students will demonstrate of a competency in verbal and written communication and will rate 85% and above in our Program's Student Learning Outcomes assessment activities.
- Students will develop critical thinking and problem-solving skills by accurately interpreting and adjusting for different procedures and objectively critiquing and justifying conclusions about radiographic images to determine diagnostic acceptability at 85% or above.
- Students will demonstrate the values and attitudes of an entry-level radiography by constructing a plan for professional development, modeling professional behavior, and examining core values for personal application at 85% or above.
- Students will demonstrate a Program completion rate benchmark (from the entrance of the class of students to their graduation) at 85% or above, within three years of their start date.
- Students will demonstrate the satisfaction of the program coursework at 74% or above.
- Students will provide a positive contribution to employers, and that those employers in our Employer Satisfaction Survey will rate our Program 85% or above in satisfaction with our graduates, stating that our graduates are highly competent and an asset to the profession.
- Students will demonstrate an ARRT (American Registry of Radiologic Technologists) board pass rate for the average of the class of 85% or above for the last five years.
- Students will achieve a job placement rate at 85% or above of Program graduates, within six months after graduation.

❖ Meets the requirements for JRCERT Standard 1.10.

ASSESSMENT
& OUTCOMES

The accrediting bodies that our Program is responsible to require that clearly state the outcomes that are required by attending this Program. In addition, the Faculty must assess this learning and suggest improvements in order to reach a level of our achievement.

CRITERIA FOR ASSESSMENT

1. The Program will provide a list of Student Learning Outcomes (SLOs) that are reasonable, appropriate, and comprehensive. And the Faculty agrees on the explicit criteria for assessing a student's level of mastery of each outcome.
2. The outcomes describe how students can demonstrate their learning, and rubrics are developed to give examples of the varying levels of student performance for each outcome.
3. The coursework, grading, and curriculum are intentionally aligned with each outcome, and curriculum maps indicate increasing levels of proficiency.
4. The Program includes a multi-year assessment plan that describes when and how each outcome will be assessed and how improvements based on findings will be implemented. The plan is routinely examined and revised, as needed.
5. Program policy calls for the inclusion of outcomes in all course syllabi so that students are well-acquainted with their Program outcomes, and participate in the use of the associated rubrics. Students are to become skilled at self-assessing in relation to the outcomes and levels of performance.

❖ Meets the requirements for JRCERT Standards

LLU STUDENT
LEARNING
OUTCOMES
(SLO'S)

Outcome 1: Critical Thinking

Students demonstrate critical thinking.

1. Accurately interprets (analyzes and evaluates) information
2. Objectively justifies conclusions and assimilates content into honest and thorough presentation of findings

Outcome 2: Oral Communication

Students demonstrate effective communication skills in English

1. Demonstrate effective oral communication skills

Outcome 3: Written Communication

Students demonstrate effective communication skills in English

1. Demonstrate effective written communication skills

Outcome 4: Information Literacy

Students demonstrate information technology literacy appropriate for their chosen discipline.

Outcome 5: Quantitative Literacy

Students demonstrate quantitative literacy appropriate to their chosen discipline.

ASMR GOALS &
STUDENT
LEARNING
OUTCOMES
(SLO'S)

Goal 1: Students will demonstrate clinical competence

Outcomes:

1. Students will perform radiographic exams of diagnostic quality
2. Students will apply patient care and practices for radiographic procedures

Goal 2: Students will communicate effectively

Outcomes:

1. Students will clearly explain radiographic procedures to patients
2. Students will demonstrate effective oral communication skills
3. Students will demonstrate effective written communication skills

Goal 3: Students will develop critical thinking and problem-solving skills

Outcomes:

1. Students will accurately interpret (analyzes and evaluates) and adjust procedures
2. Students will objectively critique and justify conclusions about radiographic images to determine diagnostic acceptability
3. Students will demonstrate quantitative reasoning
4. Students will demonstrate information literacy

Goal 4: Students will demonstrate the values and attitudes of an entry-level radiographer

Outcomes:

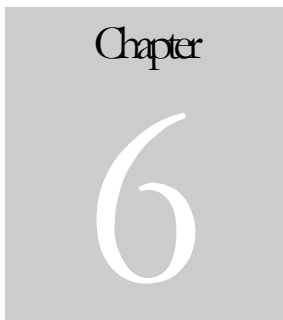
1. Students will construct a plan for professional development
2. Students will examine the core values and reflect on personal application

Goal 5: The Program will demonstrate measures of outcome in relation to its mission statement and goals

Outcomes:

1. Students will complete the program at a rate of greater than or equal to 85%
2. Students will demonstrate a satisfaction of the program greater than or equal to 85%
3. Students will meet the satisfaction expectations of employers greater than or equal to 85%
4. Students will pass the ARRT the first-time at a rate of greater than or equal to 85%
5. Students will secure jobs within 6-months of graduation at a rate of greater than or equal to 85%

❖ Meets the requirements for JRCERT Standard 1.10.



Program Accreditation

THE JOINT
REVIEW
COMMITTEE
ON
EDUCATION IN
RADIOLOGIC
TECHNOLOGY
(JRCERT)

In addition to the University's WSCUC accreditation (<https://www.wscuc.org/>), the programmatic JRCERT is dedicated to excellence in education and to the quality and safety of patient care through the accreditation of education programs in radiologic sciences. The JRCERT is the only agency recognized by the United States Department of Education (USDE) and the Council on Higher Education Accreditation (CHEQ) for the accreditation of traditional and distance delivery educational programs in radiography, radiation therapy, magnetic resonance, and medical Dosimetry. The JRCERT award accreditation to programs demonstrating substantial compliance with six standards:

- **Standard One: Integrity** - The program demonstrates integrity in the following: representations to communities of interest and the public, pursuit of fair and equitable academic practices, and treatment of, and respect for, students, faculty, and staff.
- **Standard Two: Resources** - The program has sufficient resources to support the quality and effectiveness of the educational process.
- **Standard Three: Curriculum and Academic Practices** - The program's curriculum and academic practices prepare students for professional practice.
- **Standard Four: Health and Safety** - The program's policies and procedures promote the health, safety, and optimal use of radiation for students, patients, and the general public.
- **Standard Five: Assessment** - The program develops and implements a system of planning and evaluation of student learning and program effectiveness outcomes in support of its mission.
- **Standard Six: Institutional/Programmatic Data** - The program complies with JRCERT policies, procedures, and STANDARDS to achieve and maintain specialized accreditation.

Information about JRCERT is :
20 North Wacker Drive, Suite 2850
Chicago, IL 60606-3182
312-704-5300 | mail@jrcert.org | www.jrcert.org

❖ Meets the requirements for JRCERT Standard 1.7.

F I L I N G A
J R C E R T N O N -
C O M P L I A N C E
C O M P L A I N T

If a student feels that there is a problem or discrepancy between the Standards and what the Program actually does, a student may file a complaint with the JRCERT and with Loma Linda University School of Allied Health Professions. If a student wishes to file a complaint about possible non-compliance with JRCERT Standards, the following procedure applies:

1. State your case as completely as possible in writing. Provide documentation of your case where possible (save all originals and provide copies only with your complaint).
2. Send one copy to the JRCERT with a letter of explanation and outlining the procedure which you are following. Provide a 2nd copy of the complaint to the Program Director of the Medical Radiography Program.
3. The Program will consider your complaint at the next Faculty meeting, giving you an opportunity to address the Faculty and provide details about the complaint.
4. The Program will then consider your complaint and provide a formal, written response of the Faculty's findings in regard to the complaint
5. A copy of your complaint and the Program's response will be given to the Dean of the School of Allied Health Professions for information and/or input as desired.
6. A copy of your complaint and the Program's response will be sent to the JRCERT.
7. A copy of your complaint and the Program's response will be kept on file in the Departments office.
8. Any needed or recommended changes resulting from such a complaint will be documented, or if no changes or problems are found, that information will be recorded as well.

JRCERT is located at:
20 N. Wacker Drive, Suite 2850
Chicago, IL 60606-3182
Tel (312) 704-5300
Fax (312) 704-5304
Website: www.jrcert.org

Chapter
7

Just Culture & Discipline Procedures

**E F F E C T I V E
D I S C I P L I N E**

Discipline is more than likely one of the most difficult aspects of any educator's job. It can be unpleasant, as well as hard.

If a philosophy and procedure of discipline is not clear then faculty and students could experience either a blame-free culture or a punitive culture.

When instructors effectively communicate rules, set high expectations and provided frequent feedback, the need for discipline will likely be infrequent.

The approach taken to the disciplinary action often determines its effectiveness.

Many traditional approaches to discipline are negative, punitive, and reactive, which all result in bad feelings for all parties involved.

A positive approach to discipline involves a process designed to solve performance problems and encourage good performance.

The basic theory behind the positive discipline approach is that when a student is treated as an adult who must solve a problem, rather than as a child who must be punished, the student is more likely to respond positively and correct the problem.

Before any disciplining action is required, an acceptance and understanding of the rules of conduct and the disciplinary system must be understood by both faculty and students.

Students need to know exactly what is expected of them and what the consequences will be if they do not meet those expectations.

The rules should be consistent and fair. Leadership will hold students to a high standard remaining tough but fair.

Discipline will be more effective when actions are consistent between all faculty and clinical instructors.

**THE MODEL OF
A JUST
CULTURE**

“People make errors, which lead to accidents. Accidents lead to deaths. The standard solution is to blame the people involved. If we find out who made the errors and punish them, we solve the problem, right? Wrong. The problem is seldom the fault of an individual; it is the fault of the system. Change the people without changing the system and the problems will continue.”

*Don Norman, Author,
The Design of Everyday Things*

A just culture is one where the design is for system and human reliability. The principle is that as humans are successful in their skills, environment, supervision, communication, and job, the amount of error will go down, fully knowing that humans will never be perfect.

In a just culture, the student has three duties: avoid causing unjustified risk or harm, produce an outcome, and follow a procedural rule. In a just culture, the organizational and individual values are as follows: safety, cost, effectiveness, equity, dignity, etc.

A just culture sees events as opportunities to improve our understanding of risk, not seeing events as things to be fixed.

When we deal with students, we can expect three behaviors:

- Human error, which is inadvertent action, which is inadvertently doing something other than what should have been done. It is a slip, a lapse, or a mistake.
- At-risk behavior, which is a behavioral choice by the student that increases risk where risk is not recognized, or is mistakenly believed to be justified.
- Reckless behavior, which is a behavioral choice to consciously disregard a substantial and unjustifiable risk.

HUMAN ERROR	AT-RISK BEHAVIOR	RECKLESS BEHAVIOR
<i>Inadvertent action. A slip, lapse, or mistake</i>	<i>A choice. A risk not recognized or believed justified</i>	<i>Conscious disregard of unreasonable risk</i>
Manage through changes in: processes, procedures, training, design	Manage through: removing incentives for at-risk behavior; creating incentives for healthy behaviors; increasing situational awareness	Manage through: remedial action or punitive action
CONSOLE	COACH	DISCIPLINE

In a just culture, students look for risks, report errors and hazards, help design safe systems, make safe choices that align with organizational values, follow procedures, and act ethically and transparently.

In a just culture, faculty turn events into a learning experience for understanding risk, design safe systems, policies, and procedures, and facilitate consoling, coaching, and punishing in order to lead to safe choices.

Ultimately, in a just culture, the duty and goal of all coaching and progressive discipline is:

- To avoid causing unjustifiable risk or harm

FOUNDED
PRINCIPLES
OF
PROGRESSIVE
DISCIPLINE

- To follow a procedural rule
- To produce an outcome

Progressive discipline is the process of using increasingly severe steps to work with a student to correct a problem of behavior, after the student has been given reasonable opportunity to do so.

The underlying principle of sound progressive discipline is to use the least severe action that is necessary to correct the undesirable situation.

The severity of disciplinary action is only increased if the condition is not corrected.

Below are some guidelines to consider:

- Thoroughly investigate the situation, which includes listening to the students explanation and story, and speaking with witnesses who observed the behavior or situation. The student can contribute names of people to talk to, in order to validate the claims.
- Document the process and results of the investigation.
- The goal is to modify the unacceptable behavior or improve the performance. The goal is not to punish the student but to more strongly alert the student of the need to correct the problem.
- There is no rigid set of steps, nor is there an inflexible rule that all steps must be followed before terminating an student. The circumstances of each case and your judgment as to the least severe action that is necessary to correct the situation will help determine which step to use.
- Early, less stringent, measures are skipped for serious offenses such as unethical behavior, illegal behavior, or violations of HIPAA or patient safety.
- All steps are typically used for attendance or general work performance or attitude problems.
- Conversations between a student and a Faculty that are supportive or corrective in nature can take place without a Faculty witness; however, disciplinary conversations involving written documentation and student and Faculty signatures must have a second Faculty member present..
- Under no circumstances are disciplinary conversations of a serious nature to be conducted without a second Faculty member present. If at any time the student or the Faculty are uncomfortable with the conversation, either party can request a second Faculty member to be present.
- It is highly recommended that the student tangibly acknowledge that conversations and progressive disciplinary steps are taking place, such as signing a form or replying to an email.
- It is recommended that input and guidance be given when discipline progresses, such as from the chair or members of previous grievance committees.

Disciplinary actions are often overturned completely or reduced to a lesser level when any of the essential elements of progressive discipline are missing:

- The student is explicitly informed of the unacceptable behavior or performance and is given specific work-related examples. It is not sufficient to assume that the student knows what the problem is.
- Explain acceptable behavior or performance standards and give the student reasonable time to comply. This may be a longer time frame if a skill needs to be learned or a shorter time frame if it is a behavior to be changed.
- The student is informed of the consequences of failing to comply. This is not a threat, rather it gives the student reasonable expectations of the consequences if change does not occur.

These three essential elements need to be present at each step of progressive discipline and are discussed prior to taking disciplinary action.

PROGRESSIVE
DISCIPLINE
PROCESS

Where it appears appropriate and effective, the faculty are encouraged to use a system of progressive discipline.

With progressive discipline, which includes conversations, a verification of facts, and a consistent application of corrective measures, the goal is for the student to regain a successful progression in their academic and clinical endeavors.

The goal is to be sure that the student understands the guidelines and rules for success, why the behavior is inappropriate or unacceptable, and specific changes that must be made in order to bring the student's behavior or performance to an acceptable level.

The progressive discipline principle allows the student to see the results of his or her actions, and encourages the student to develop the appropriate habits or behaviors.

Progressive discipline is not applicable in every instance where disciplinary action is warranted.

Some policy violations involve gross misconduct, such as actions which involve the violation of state or federal laws, accreditation-based codes of conduct, and actions involving workplace violence and disorderly conduct. In these types of instances, the student may not be eligible for progressive discipline. Instead, the student will be subject to more serious disciplinary action, up to and including immediate dismissal.

Below is an example of progressive disciplinary steps, which may vary at the sole discretion of the faculty and University, and will not necessarily be limited to those actions listed in this policy.

The progression of steps of discipline may include any or all of the following:

1. **Conversational Counseling (Multiple Steps):** Conversational counseling is a discussion by the CI/PD/CC with the student regarding the behavior that could result in progressive discipline. The discussion should be documented in the student's file. *Documentation will be kept for each step of the process along with Corrective Action Plan (CAP) written warnings and increased clinical evaluation when appropriate.*
2. **Dismissal:** This final step in the progressive disciplinary process requires both documentation of the rationale and circumstances and accompanying dismissal. Dismissals require consultation with the Department Chair and/or members of previous grievance committees, to determine if the action is just.

CIRCUMSTANCES
FOR
PROGRESSIVE
DISCIPLINE

A student may need progressive discipline under the following circumstances:

- Declining academic progress
- Chronic and/or excessive tardiness/absenteeism
- Behavior or performance problems in the clinic, lab, or classroom
- Struggling to perform essential functions of a Radiographer
- Struggling to successfully perform safe radiation protection practices
- Leaving the work area without authorization or not being in an

- assigned area as designated
- Profanity or harsh language with a supervisor, co-worker, student, patient, etc.
- Inability to progress at the recommended rate
- Inability to work within the scope of practice as a student

The melding of the principles of a just culture and progressive discipline would look like the following table:

CONVERSATIONAL COUNSELING	WRITTEN WARNINGS	RECKLESS BEHAVIOR
<i>Talk to the student. Listen. Be calm.</i>	<i>Outline the behavior and document the "at risk" behavior and the goal</i>	<i>Conscious disregard of unreasonable risk</i>
Manage through changes in: processes, procedures, training, design	Manage through: removing incentives for at-risk behavior; creating incentives for healthy behaviors; increasing situational awareness	Manage through: remedial action or punitive action
<i>First Offense</i>	<i>Repetitive Behavior</i>	<i>Create a plan to avoid the risk and produce an outcome in line with the environment</i>
CONSOLE	COACH	DISCIPLINE

**C I R C U M S T A N C E S
F O R P R O B A T I O N**

A student can be placed on probation under the following circumstances:

- University or SAHP School policy of probation
- Behavior or performance problems in the clinic, lab, or classroom, such as insubordination.
- Unprofessional behavior in the clinic or the classroom
- Unprofessional behavior in public websites/social media
- Inappropriate behavior involving the law
- Two write-ups for the either the same or different situations
- On-going time and attendance issues
- Performance of a critical incident (faculty discretion based on the severity)
- The first no call no show at the clinical site is an automatic probation
- Failure to successfully progress to the next milestone
- Dismissal from a clinical site
- Unable to perform essential functions of a Radiographer
- Unable to adhere to the Program policies
- Unable to successfully perform safe radiation protection practices
- Unable to adhere to the requirements for indirect and direct supervision as a student
- Unable to satisfactorily progress through the program
- Just culture infractions

Probation Guidelines

When a student is placed on probation, it is customary that a full investigation by the Program Director will be performed. Additionally, the Program Director, and/or one

other Faculty will meet with the student to explain the situation and provide the student with written documentation of the probation guidelines. The probation guidelines will include a timeline of milestones, including a date for a follow-up meeting. The Clinical Instructor will be notified of the probation guidelines.

If, at the end of the prescribed timeline, the student has met the Corrective Action Plan (CAP) criteria, the Faculty can either recommend to take the student off probation, continue probation, or transition the student to an Intentional Coaching Plan (ICP). If it is determined that the student did not fulfill the requirements of the corrective action, it is at the discretion of the Faculty to recommend continuation of the corrective action plan or recommend dismissal from the Program.

Students will be given an opportunity to respond in writing to the probation letter.

A C A D E M I C
P R O B A T I O N

A student, whose grade point average in any term falls below the minimum Program policy of 2.5 GPA, or receives a grade below a C+ in any course, is automatically placed on academic probation.

A student who is on academic probation and fails to make the minimum required grade point average the following quarter or fails to have an overall minimum grade point average after two quarters will have disqualified him/herself from the Program. **(LLU Catalog and Student Handbook)**

Probation Procedure

The following actions are to lead up to a student being placed on probation:

CONVERSATIONAL COUNSELING

Counseling is usually the initial step.

- Conduct the whole counseling session in a "low-key" manner. Be friendly, yet firm.
- This discussion should be done in private. Tell the student the purpose for the discussion.
- Identify the problem.
- Try not to be mechanical or read from a piece of paper. Have documentation available to serve as a basis for the discussion.
- Seek the input from the student about the cause of the problem.
- Where possible jointly identify a solution to the problem; otherwise, identify your desired solution.
- Clarify the student's understanding of your expectations concerning the situation.
- Let the student know that possible disciplinary action may follow if the problem is not corrected.
- Try to get a commitment from the student to resolve the problem.
- Schedule a follow up with the student. Provide feedback. Let the student know how he/she is progressing on solving the problem.

Counseling sessions are used to bring a problem to the attention of the student before it becomes so serious that it has to become part of a written warning and placed in the student's file.

The purpose of this discussion is to alleviate any misunderstandings and clarify the direction for necessary and successful correction. Most "discipline" problems are solved at this stage.

If some progress is seen, this counseling step can be repeated to allow the student full opportunity to correct the problem.

It is not required, but recommended, to document the counseling session as it is considered an informal step in progressive discipline. A brief statement confirming the subject matter discussed and the agreed upon course of action to correct the problem can be noted in a short memo to the student.

C O R R E C T I V E
A C T I O N P L A N
(C A P)

CAP: The Clinical Coordinator and the Clinical Instructor/Faculty will work with the student to develop a Corrective Action Plan in order to identify the steps necessary for a change in behavior. A deadline for correction is to be included in the CAP, and the student will have weekly meetings with the CI/Faculty for 4-8 weeks, as stated in the CAP. It is at the discretion of the Faculty to place the student on probation while the student is in a CAP.

Investigation: At this point, the Clinical Coordinator and/or another Faculty member will investigate the situation within 7 working days by talking with the student, the Clinical Instructor/Faculty, and other people who are involved as necessary. The student may contribute 1-3 names.

Intentional Coaching Plan (ICP)

ICP: Once the student completes the CAP, but more support is needed, the Program Director and/or ASMR Faculty reserve the right to transition the student from a CAP to a ICP. The Intentional Coaching Plan provides the student with intentional support to remain successful throughout the Program. The ICP could involve regular meetings (1-3 times a month) with the Program Director or faculty designee. It would also involve other activities as deemed necessary by the Program Director and the student. The goal of the ICP is to provide increased support for student success.

Situations When No Action Is Needed

If the student's behavior of concern is corrected after the verbal or written verbal conversations, no other action is needed.

S U S P E N S I O N &
D I S M I S S A L
C R I T E R I A

Suspension is an **OPTIONAL** step in the progressive disciplinary process.

Suspension is generally called for when it is necessary to remove a student from the clinical environment while decisions are being made on an appropriate progressive disciplinary step. Suspension can occur at any point in the progressive disciplinary process. Suspensions must be documented to the student's file.

When a student is on suspension, the student is not to be participating in any school or clinical activities.

Circumstances for Suspension

When suspension is necessary, the situation is to be discussed with the student first. The student's explanation is obtained and then a decision is made about the appropriate disciplinary step. The length of the suspension is not as critical as the step of suspension. One to seven days emphasizes the seriousness of the situation.

The written record of the suspension is prepared after the discussion with the student. It specifies the start and end dates, emphasizes that it is a final warning, states the reason, and is given to the student at the start of the suspension so that the reasons for not being in the program are clearly understood.

A student may be placed on probation **and suspension** for any behavior that is considered "at risk" or "reckless".

Note: A second no-call-no-show in clinic will result in a 3-5 day suspension.

Dismissal Criteria

A student will be dismissed from the Program if the following occurs:

1. A student can be dismissed from the Program if a clinical site dismisses the student from that clinical assignment. In most cases another clinical assignment can be found. If another clinical site cannot be found, then the student will be dismissed from the Program.
2. Unprofessional conduct that threatens or causes harm to faculty, students, or patients. It is up to the faculty to recommend dismissal based on unprofessional conduct.
3. If a student has failed a class at less than and not equal to 74%. Rounding up is not permitted. If a student is on probation for any reason, and then fails a class the next quarter, the students has disqualified themselves from the Program.
4. If a student fails to make the minimum required quarterly GPA of 2.5 they will have disqualified him/herself from the Program.
5. It is ultimately up to Faculty discretion to grant Program promotion, or recommend probation and dismissal from the Program.
6. Failure to perform the essential functions of a Radiographer.
7. Continued no call no show attendance at the clinical site
8. Unable to adhere to the Program policies
9. Unable to successfully perform safe radiation protection practices
10. Unable to adhere to the requirements for indirect and direct supervision as a student
11. Ongoing time and attendance issues, including a violation of probation and corrective action plan requirements.
12. Any behavior that is considered a legal felony.
13. Performance of a critical incident (faculty discretion based on the severity of the incident)
14. Any behavior not mentioned that is considered unrepresentative of a health care professional student that has been progressively disciplined but not corrected.

Dismissal Procedure

If dismissal from the Program is recommended, the student will meet with the Clinical Coordinator, Program Director, and/or one other Faculty to discuss the dismissal procedure. The dismissal procedure must be in writing.

Students will be given an opportunity to respond in writing to the dismissal letter.

Appeal and Grievance Procedure

A student who wishes to appeal the dean's decision regarding academic discipline may use the School's Grievance Procedure (See Student Handbook). This will be submitted by the end of the subsequent term after being dismissed based on the policy.

Documentation Requirements

At each step of the way—from the initial conversations, to follow-up, to probation and dismissal, the Faculty, Clinical Instructor, and Clinical Coordinator are to document each encounter with the student in order to accurately and fairly document the process. Additionally, the student and/or a Faculty witness are to sign each of these documents as the process unfolds.

The faculty reserves the right to investigate all situations that could be leading to student dismissal. This includes, but is not limited to, investigating the situation with other students, CIs, technologists, faculty, and administration.

If a student is headed toward dismissal, faculty are encouraged to investigate the situation with witnesses involved with the situation. The student who is headed toward dismissal can suggest 1-2 witnesses with whom the faculty should talk to, so that all sides of the situation can be understood.

Ultimately, the decision for program dismissal is up to the discretion of the faculty.

Disciplinary Conversations

Conversations between a student and a Faculty that are supportive or corrective in nature can take place without a Faculty witness; however, disciplinary conversations involving written documentation and student and Faculty signatures must have a second Faculty member present. Under no circumstances are disciplinary conversations of a serious nature to be conducted without a second Faculty member present. If at any time the student or the Faculty are uncomfortable with the conversation, either party can request a second Faculty member to be present.

All disciplinary conversations that involve corrective action of the first or second offense must provide for a signature that the student has received the documentation, and a witness must sign the receipt of the written statement of corrective action.

GENERAL
REINSTATEMENT
CRITERIA

The Faculty in the ASMR Program believe that all students are to be provided a second opportunity to enter the ASMR Program after leaving the Program for the following reasons:

- Leave of Absence for personal/medical reasons
- Withdrawal from Program for personal/medical reasons

Academic and Disciplinary Reinstatement

Students who wish to re-enter the Program for academic, personal, or disciplinary dismissal will be considered on a case-by-case basis, subject to the current standards of the program and the current University bulletin for the current year. It is at the Faculty discretion to allow re-entry; re-entry is not automatic. If re-accepted, a reinstatement plan will be developed for the student, which could include a Corrective Action Plan (CAP), tutoring, and Faculty meetings.

Student who leave the program for reasons that are disciplinary or academic in nature will be required to write a 3-5 page reflective paper on why the faculty should consider the reinstatement.

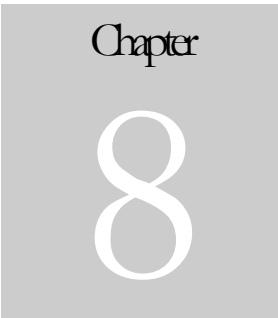
The student will also be required to stay in regular contact with the faculty while away from the program.

The student may also be required to repeat some courses, as determined by the faculty.

Reinstatement After a Grievance

For students who file a grievance with the Program after they have been dismissed, and the grievance is granted in favor of the student, the student is granted re-entrance into the Program. Refer to the Grievance policy in the student handbook.

For students who file a grievance with the Program after they have been dismissed, and the grievance is granted in favor of the Program, the student is not granted re-entrance into the Program. Refer to the Grievance policy in the student handbook. The Program reserves the right to not allow a student to be re-accepted into the Program after the Grievance Committee votes in favor of the Program.



Program Policies

**PROGRAM
REQUIREMENTS**

Prerequisites

1. It is expected that all students will complete Program prerequisites before starting the Medical Radiography Program...specifically by June of the year the student starts.
2. Students who have not finished any outstanding prerequisites, or any items on the Degree Compliance Report, by the end of the fifth quarter of the program will not be able to continue the final two quarters in the program until the DCRs are completed.
3. Students with outstanding prerequisites are not eligible to take the ARRT registry exam. The Program Faculty must certify that each student has completed all Program requirements before granting a Program completion status, which then allows the student to sit for the ARRT registry exam.

ARRT Ethics Requirements for Certification Eligibility

1. Eligibility for certification by the ARRT (American Registry of Radiologic Technologists) may be affected if the student has a prior conviction for a felony, gross misdemeanor, or misdemeanor, the only exceptions being speeding and parking violations.
 2. All alcohol and/or drug related violations must be reported. "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, deferred, or not entered; or the sentence is suspended or stayed; or a criminal proceeding where the individual enters a plea of guilty or no contest contender.
 3. Candidates are not required to report offenses that were committed as a juvenile and were adjudicated through the juvenile court system. The Rules of Ethics also address a military court martial.
 4. Students are required to report any legal offenses that occur within the program right away after an occurrence and review 1.2.6 below.
 5. Applicants to this Program who have questions about their eligibility should contact the ARRT directly to determine if they will be eligible for the ARRT exam(s). The ARRT phone number is (651) 687-0048 or you can find information on-line at www.arrt.org.
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6. Students must notify the Program Director if an ARRT Ethics issues occurs prior to admission to the program, or during the program so that appropriate steps can be taken to confirm eligibility for the ARRT exam.

Background Checks

1. All students enrolling at LLU must have a cleared background check at the time of initial entrance into any University Program. Background checks must be done by the provider specified by the University and at the student's own expense. Students are requested to provide a copy of their background check to the Program's Clinical Coordinator before they start clinical training so a copy will be available for the clinical site if requested.
2. JACHO, which is the accrediting body for Hospitals, has asked that all students in clinical Programs have background checks done. It is the policy of the University that all students complete a background check as part of their registration process. In all cases your information is kept confidential with a need to know required. If your BGC fails, it must go to review by the University legal department for your approval to continue in the Program.
3. Also be aware that the ARRT requires that they be told of any misdemeanors or felonies in your background. They decide on an individual basis if you are eligible for taking the registry. Don't think that if you do not say anything or that you have approval by the University to continue in the Program that the ARRT will not be interested. They will not allow you to take your license exam or they will take it away after the fact, if they discover you have something in your past. Let them know now so you do not waste your time and money for School.

Drug Testing

Drug testing is required in the Radiography program at the beginning of each year in the program. Drug tests are to be completed at student health in Evans hall on campus. A 10-panel dip test will be conducted on campus at student health, unless a specific clinical site requires the full panel, which is done by an off-site lab. Anything "non-negative" done on our in-house dips is sent for confirmation. If the lab testing shows a positive result then that triggers our internal protocol to see if there is a legitimate reason for a positive results for that substance. If there is a medically indicated reason, then you will received a letter clearing the student for clinical activities instead of a lab printout. If there is no legitimate reason, then the protocol will be followed regarding notification of the program that would lead to disciplinary action based on the LLU student and program handbooks. Behavior that would lead those in the clinic or classroom to feel like a student is under the influence of drugs or alcohol could lead to a drug test to be completed in addition to the clinical clearance to allow the student to be in good standing to return to clinic. This is handled on a case by case basis.

CPR Certification

All students are required to hold current **American Heart Association BLS** Healthcare Provider certification class before they start clinical

participation in the Winter quarter. Any student without a valid CPR card WILL NOT start clinic. The CPR card is to be kept current throughout the entire clinical period of training. CPR courses are available through Life Support Education at LLU. This certification will be paid for by the student and will be completed in the summer before starting the program. The student is responsible for renewal if the 2 year window is up during the program. The student will be removed from clinic until the renewal has been completed.

MRI Screening

The JRCERT objective 4.3 establishes a MRI safety screening protocol for students in the medical radiography program. Access to the MRI areas within your clinical site requires expansive screening of our students to ensure safety around the magnet (which is always on). A screening protocol will be provided at orientation. If any of the answers to those questions change during the program requires notice to the PD and CC. The program will defer to additional protocols at each of the clinical site for additional screening and following procedures there.

Screening items include:

Pacemaker
Aneurysm Clips
Heart Valve
Joint Replacements
Shrapnel
Metal in Eyes
Pregnancy (*check only as declared under policies within program)
Inner Ear/Eye Surgery
Programmable/Electronic Devices? (Internally or Externally)

Venipuncture Education

All students are required (CDPH Title 17) to complete at least 10 hours of venipuncture didactic instruction that will be completed online by an outside company. 10 sticks will be completed after the didactic on campus with faculty by mannequin. These sticks will not be performed live patients (i.e. peers or techs).

Students are responsible for the cost of this training.

State Requirements for Clinical Hours

The State of California requires a minimum number of clinical hours to total 1,850 hours (CDPH Title 17). The Program provides a minimum of 1,850 hours of clinical and lab experience, and the student completes the Program when they have completed the Program requirements.

State Requirements for Fluoroscopy Operation

The State of California (Radiologic Health Branch) requires a separate California board exam in the area of fluoroscopy. The Program provides didactic training in preparation for the board exam. This exam is provided by the ARRT and the results are sent to the State of California.

Student ID Badges

Students must carry their ID badges while on campus, preferably displayed in an easily visible location. An ID badge must be presented upon request. While in any hospital or clinical facilities, ID badges must be displayed prominently above the waist. *See LLU Student Handbook.*

Weapons Possession

In order to provide a safe environment for patients, students, faculty, staff, and visitors, no patient, student, visitor, faculty, or staff member shall be allowed to have in his/her possession while on the Loma Linda University premises any firearms or any illegal weapons as defined by the California penal code without specific University approval. All persons not in compliance with the above policy will be asked to leave the premises by campus security or be taken into custody by campus security, if a clear violation of the law can be established. "Possession" forth is policy is defined as on one's person or in one's motor vehicle, residence hall, or work area. Any suspected or observed violation of this policy should be reported to Security immediately. Students found to be in violation of the weapons possession policy will be subject to discipline up to and including dismissal. *See LLU Student Handbook.*

Weekly and Daily Length Requirements

Students are involved in the program for 40 hours a week, between clinic, lab, and classroom. Their daily schedule is not to exceed 10 hours a day, during the program.

Availability of Information

The program makes public accurate information about admission policies, tuition and fees, refund policies, academic calendars, clinical obligations, a clear grading system, graduation requirements, and criteria for transfer credit. This information is available from a variety of sources: the program website, the University website, the program policy handbook, the student handbook, and the university catalog.

❖ Supports the requirements for JRCERT Standard 1.4 and JRCERT Standard 1.9.

PROGRAM
LENGTH

Length of Program

1. The LLU Medical Radiography Program is 21 months in length, for a total of seven

- quarter, with no break during the summer quarter.
2. The Program provides a minimum of 1,850 hours of lab and clinical experience. These hours are completed during the length of the Program.
3. Students are required to remain in the program through to the last day of the Program.
4. The student does not hold the right to end the Program early when they feel they have completed the minimum of 1,850 hours of lab and clinical experience.
5. We advise not taking any time off from clinic in June, the last month of the Program

Time Frame for Program Completion

1. It is expected that students will maintain a full-time status while in the Program.
2. If a student encounters special circumstances that keep the student from fully participating in the Program, the Faculty reserves the right to extend the Program completion time beyond 21 months. The student must finish the Program within a length of time 150% of the Program length.
3. The student must make a written request to have their case considered.

ESSENTIAL
FUNCTIONS

A student must be able to meet and comply with the essential functions of being a Medical Radiography student, which prepares the student to enter the Medical Radiography profession.

It is advised that students disclose to the faculty any issues that could cause the student to not complete the program or cause harm to patients, due to not being able to perform the essential functions.

Physical Abilities

1. Able to participate in classroom or clinical activities for two- to four-hour blocks of time, with one or two breaks.
2. Able to independently move to, from, and in academic and clinical facilities.
3. Able to provide for one's own personal hygiene.
4. Able to manipulate and move items in the academic or clinic setting, including setting out exam items, opening containers, turning pages, open doors, etc.
5. Able to respond to and quickly provide a safe environment for patients in emergency situations, including fire, CPR, choking, shock, allergic reactions, etc.
6. Able to read the dials on instruments; visually monitor a patient's response; identify the patient's identification; visually assess a radiographic image; and read text and images on computer screens.
7. Able to make accurate judgments about speech and/or acoustic signals; hear patient responses; hear and understand directions and questions from other medical staff; and hear the signs that signal an emergency situation with equipment, patients, and department surroundings.
8. Able to use verbal skills to accurately and professionally communicate with patients, physicians, and staff in patient care, patient identification, exam completion, and emergency situations.
9. Possess the physical ability to stand, sit, (with or without lead) and walk for prolonged and/or extended periods of time of up to 2 hours; lift a 20-pound sandbag from the floor to 48 inches; carry 10-pounds for 20 feet; wear a 10-pound lead apron for up to two-hours; push a 250-pound patient in a wheelchair or gurney; pull an adult patient using a sheet or sliding board three to four feet; maintain balance in awkward positions while transferring patients; bend, stoop, or crouch to reach objects at a low level; twist the waist, trunk, and spine from side-to-side; able to reach overhead, forward, and side-

- to-side; and able to turn dials and knobs, push buttons, manipulate locks, rotate levers, and use computer equipment, such as a mouse and keyboard.
10. The ability to understand and successfully perform venipuncture.
 11. The ability to safely maneuver and operate portable x-ray equipment in and around objects and through hallways and doors.

Affective Abilities

1. Able to work effectively with diverse populations of people, in person and on the phone, and in one-on-one and group/team situations.
2. Able to make appropriate decisions, including the ability to critically think, evaluate, and appropriately problem solve without immediate supervision or specific direction.
3. Able to understand, respect, and appropriately respond to supervisory authority.
4. Able to make accurate self-assessments on performance and behavior.
5. Able to receive feedback from supervisory personnel and make necessary and timely changes.
6. Able to maintain professional workplace behavior in the areas of appearance, personal hygiene, interpersonal relationships, communication, teamwork, punctuality, and regular attendance.

Cognitive Abilities

1. Able to comprehend and read memos, reports, and policies.
2. Able to write and speak in English.
3. Able to independently analyze, synthesize, and interpret ideas and concepts in learning and diagnostic/clinic settings.
4. Able to understand and use technical information and equipment.
5. Able to maintain attention and concentration for sufficient time to complete academic and clinical activities, typically for two to four hours, with one or two breaks.
6. Able to repeat tasks that have been learned previously, and able to maintain growth and ongoing progression of learning.
7. Able to adequately and accurately self-assess and make the appropriate adjustments on a regular and ongoing basis.

❖ Supports the requirements for JRCERT Standard 1.2.

**PROGRAM
COMPLETION
AND EQUITABLE
LEARNING
OPPORTUNITIES**

Completing the Medical Radiography Program

It is the obligation of every student to adhere to all student policies and successfully:

1. Complete prerequisites and items on the Degree Compliance Report, which includes pre-requisites and the complete program curriculum*
2. Complete and pass each one of the courses in the Program at a “C” 74% and above
3. Address and complete any requirements for Program and academic probation(CAP)
4. Successfully pass each of the required clinical competencies
5. Successfully perform safe radiation protection practices
6. Adhere to the requirements for indirect and direct exam supervision as a student
7. Adhere to the requirements for supervision during repeat exams
8. Successfully pass each of the continuing competencies
9. Be in good academic standing with the University
10. Complete the Program’s requirements for a minimum of 1,850 clinical hours
11. Remain active in the Program until the last day of the Program
12. Successfully satisfy the requirements for the three Program Milestones
13. Comply with and perform essential functions throughout the Program

14. Maintain a minimum GPA of 2.5 each quarter throughout the quarter
15. Complete the University's service learning requirements
16. Operate within the just culture definition of duties

HESI
MOCK BOARD

** A HESI Mock Board will be given to every graduate. Not passing a HESI Mock exam after two attempts will put your grade in comprehensive review in jeopardy of failing the program based on academic disqualification. Passing a Mock exam lets the team here know you are ready to sit for boards. An ARRT application will be given only after a mock exam has been successfully passed with an 80% or higher. This means that you may be able to complete the AS degree but not be signed off to sit for boards until this requirement is completed. Delay will impact your ability to participate in CT completion and find a job after graduation. We are here to help, but you will need to put time in to fulfill this important requirement.*

EQUITABLE
LEARNING
OPPORTUNITIES
FOR ALL
STUDENTS

The program assures equitable learning opportunities for all students in the following ways:

1. Clinical opportunities and rotations are designed to be similar and equitable for each student at each clinical assignment.
2. Clinical Instructors engage in dialogue throughout the year to ensure that each clinical assignment is providing the exam competencies needed by each student
3. Any student who wishes to rotate to another site in order to complete exams that cannot be completed at the original site assignment can do so with the approval of the clinical instructor and clinical coordinator.
4. Equitability in the program is maintained by the consistent implementation of program policies and procedures.
5. Equitability in each course is maintained through course objectives, clearly defined grading procedures, and clearly communicated classroom policies.

❖ Meets the requirements for JRCERT Standard 1.2.

STUDENT
EMPLOYMENT

Employment During the Program

The educational and clinical aspects of the Program are considered rigorous to some students. Employment during the Program is discouraged; however, the Program does not mandate how much or where students can be employed. Student employment must not interfere with the normal student schedule or Program activities.

Please be safe if working and going to school. Call for a ride if you feel unsafe to drive after a full date of clinic and work.

Employment as a Radiographer

Students are not to be employed to perform the duties of a Radiographer (Radiologic Technologist) in their area of training until Program completion and the appropriate certification is obtained by state or national licensing and certification agencies.

Employment and Clinical Assignments

Students employed by a department where they are currently obtaining clinical training are NOT permitted by law to administer radiation for the purpose of medical diagnosis or treatment. In general, students should only perform auxiliary tasks (transporter, front desk, etc.) or tasks which they are certified to perform (limited permit, venipuncture, L.V.N., etc). It is the student's first responsibility to satisfy the clinical requirements of the Program, prior to receiving pay as an employee.

Clinical Site Assignment a Priority

The clinical site assignment takes priority over student employment, meaning that if a student is assigned to a clinical site and the clinical site offers the student a job while the student is still in the program, but the clinical site mandates that this employment is a conflict of interest so that the student will need to move clinical sites, the student will need to prioritize the clinical assignment.

The Program faculty are not obligated to move the student to another site so that the student can gain employment at the clinical site they are assigned to.

**ORGANIZATIONAL
STRUCTURE**

California Minimum Standards for Diagnostic Radiologic Technology

The teaching personnel at the Department of Radiologic Technology are organized according to California State and JRCERT specifications. The Minimum Standards for Diagnostic Radiologic Technology Programs direct the following for Clinical Coordinators and Clinical Instructors.

The instructors, Clinical Coordinator, and Clinical Instructors shall be holders of valid California Radiologic Technology (CRT) certificates.

Program Director

The Program Director is responsible for overseeing all of the activities in the Program, including the clinical Program and the didactic schedule.

The Program Director is to be knowledgeable of the Program goals and accreditation needs. The Program Director will maintain competency in imaging, instructional techniques, evaluative techniques, and leadership.

Clinical Coordinator

The Program's Clinical Coordinator is responsible for coordinating clinical education with didactic education as assigned by the Program Director. Clinical education effectiveness shall be evaluated and assured through a schedule of regular visits to the clinical education centers. The Clinical Coordinator's responsibilities shall include coordination, instruction, and evaluation. The Clinical Coordinator shall maintain current knowledge of imaging techniques and educational methodology through continuing professional development.

Clinical Instructor

The hospital's Clinical Instructor is responsible for day-to-day guidance and where required or appropriate, for direct supervision of the student assigned.

"Day-to-day guidance" means reviewing the requests for clinical procedures (radiographs), making a decision as to whether or not the student can perform the procedure safely and accurately, and checking of the radiographs performed.

The Clinical Instructor(s) shall be knowledgeable of the Program goals, clinical objectives, and clinical evaluation system. The Clinical Instructor(s) shall provide students with appropriate and adequate clinical instruction/supervision and shall evaluate student clinical competence. Performance of these responsibilities shall not be adversely affected by educationally unrelated functions. The Clinical Instructor(s) shall maintain competency in imaging, instructional, and evaluative techniques through continuing professional development.

C H A I N O F
C O M M A N D

The student is wise to follow of chain of command for addressing problems and issues in and about the Program. It is advised that the student attempt to solve the problem at the lowest level possible.

Classroom Environment

- Step 1: Talk to the person directly responsible for the issue or problem.
- Step 2: If unresolved at the first step, talk to the course instructor.
- Step 3: If unresolved at the first step, talk to the Program Director.
- Step 4: If unresolved at the second step, talk to the Department Chair.

Clinical Environment

- Step 1: Talk to the person directly responsible for the issue or problem. (Ex.: Do not talk to a tech when you have a problem with a CI, student, or teacher.)
- Step 2: If unresolved at the first step, talk to the Clinical Instructor.
- Step 3: If unresolved at the second step, talk to the Clinical Coordinator.
- Step 4: If unresolved at the third step, talk to the Program Director.

P R O F E S S I O N A L
C O N D U C T

Any behavior that is not consistent with professionalism, such as insubordination, cheating, disruption, or aggressiveness will lead to, at minimum, a conversation regarding your professional conduct.

Be Responsible

Students are asked to behave responsibly. When asked to perform an exam or an assignment, the student is asked to accept the task and follow through on work until the work is done. Students are asked to leave your work area clean, whether in the lab, the classroom, or at the clinical site.

Students are also asked to be responsible for all correspondence from the LLU email address, as well as courses posted on Canvas.

Communication

Professional communication is expected at all times. While students are in the Program, students may occasionally find that they have trouble getting along with another individual. How a student deals with this situation is of utmost importance. Remember that the other person is an individual that is to be treated with respect. Students are asked to do their best to resolve the conflict with the other person directly.

Under no circumstances should a student talk back, swear, or discuss problems in front of someone who is not directly involved with the situation (i.e.: patients, another tech, or a fellow student).

Students are asked to refrain from gossip.

Students are asked to follow the chain of command for addressing issues, as outlined in the Program's Organizational Structure policy.

Duties as Professional Conduct

The student has three duties: (1) The duty to follow the policies of the University, the School, and the Program, (2) The duty to perform the job of a radiography student, and (3) The duty to not cause harm to self or others.

Removal from Class

The instructor reserves the right to remove a student from class due to unprofessional behavior, which includes insubordination, cheating, in appropriate computer use, disruption, or excessive talking.

If a student is removed from class, the student will be marked absent for the day, and will not receive credit for any part of the class. Behaviors such as those listed above could also lead to further disciplinary action.

Depending on the circumstances and the number of times the student has been removed from class, the student could receive a failing grade in the course.

Classroom Behavior

Class Start Times: All classes begin on the hour and run for 50 minutes in length until the next break or when called to order by the instructor. Students are expected to be in their seats by the time class begins.

Talking During Class: To maintain an optimum-learning atmosphere, students will refrain from all talking during lecture presentations except for discussion or question periods.

Classroom Neatness: Students are asked to help keep the classroom neat and clean by keeping the seats in order, and by picking up papers and other trash from the floor.

Eating in Class: Food or drink is only to be consumed in the halls or student rotunda. All trash is to be picked up as you leave the classroom.

Electronic Devices: Electronic devices can only be used in class for educational purposes as approved by the instructor. Personal texting and cell phone usage is not permitted in class.

Communication Devices

All communication devices must be set to "silent" or "vibrate" during class, lab, clinic or chapel. Cell phones, pagers, PDA's, laptops, or other electronic communication devices may only be used in these settings with the direct approval of the Faculty member or Clinical Instructor in charge.

Computers and personal communication devices are permitted in the classroom for Program use and in clinical settings while performing patient care. It is recommended, that even if using personal communication devices for patient care, these devices not be used in the sight of patients. Surfing the internet during class is not considered class use.

Personal phone calls and texting are best conducted during breaks. The instructor reserves the right to remove a student from class due to phone and personal computer use in class. Under no circumstances are personal calls to be taken during patient care and performing imaging procedures.

Office/Department Area

Scheduling Appointments with Faculty: Please schedule appointments with the Faculty through the Administrative team, or directly with the faculty member.

Department Copier: The office copier is NOT for student use. All copying by students is to be done on the copier located in the ground level (A-level) rotunda for .15 a copy.

Department Phones: Office phones are NOT for student use. A phone in the hall near the men's restroom is to be used for your on-campus needs. For on-campus calls, dial the four-digit extension preceded by "4" for the University and Medical Center, "2" for the FMO and "6" for Loma Linda Community Hospital.

Department Fax: The office fax is NOT for student use.

Department Computers: The computers in the offices are for staff use only. PC's for student use are located in the School of Allied Health Professions computer room on the first floor of Nichol Hall across from the Dean's office (NH 1602) or at the Jorgensen Learning Center at the Del Webb Library.

Computer Printing: Students are responsible for printing their own papers from their computer printers. Please use the Student Computer Lab.

Waiting Area: The waiting area in the Radiation Technology department office is for visitors only.

Refrigerator: The refrigerator in the break room is for student and Faculty use. Please be considerate to following the etiquette posted on the door.

Breaks: Class breaks should be taken in the classroom, in the rotunda, in the break room, or outside the building. Students are asked to not sit or stand in the hall. In addition, students are asked to not talk after class about tests, as other classes and labs may be in session.

Radiology Library: Departmental library books are for your use. Most books can be checked out on a one-week basis. Overdue books are subject to fines. All books are to be checked out and returned to the Administrative Secretary. The periodicals may be used only in the department and may be checked out only for immediate copying.

Laboratories

Students are asked to handle all items with care in the lab. Most items used in the lab are very costly to replace, so follow common sense rules. A lab session is not considered complete until all items used are placed back in their storage areas. All debris or trash accumulated in the lab area should be placed in trash receptacles and not left strewn about the work area.

LLU Email and Canvas

Check your LLU email daily. All official correspondence between the University /School/Program will be conducted through your School email account and students are responsible for this communication. Students are responsible for all online class work and Canvas postings and communication. If students do not keep their LLU email update to date or delete or archive old emails, the inbox will become full, thus, making it impossible to receive new email.

Respect

It is expected that students will conduct themselves professionally toward other students and Faculty, in the classroom and at clinical sites. Students are to respect other students' needs to listen, learn, and study.

Examples of exhibiting respect could include:

- Eat outside of class
- Limit talking to class related topics
- Only use computers and electronic equipment for class-related assignments
- Avoid gossip and negative conversations
- Direct issues and complaints to the Faculty who have the ability to address the problem.

A C A D E M I C
I N T E G R I T Y

Academic Integrity is a large part of the professionalism we expect from our students. In the age of technology, there is a great wealth of information out there and you will need to navigate wisely to not get into a situation with academic integrity. Part of the academic integrity policy includes the responsibility to speak up when you see or hear about instances where this policy is being broken. The leadership team will work to validate all claims of violations of academic integrity and will keep the privacy of how we discover the issue private.

Plagiarism: Plagiarism is the unauthorized use or close imitation of the language and thoughts of another author and the representation of them as one's own original work. If you use language from a source, just identify the source.

Cheating: Cheating is defined by the following: copying another student's answer; copy-and-pasting answers from another person into your online quiz/exam or paper; writing answers on your hand, sleeve, hat, or paper and using those answers on a quiz/exam; receiving or sending electronic messages during a quiz/exam; or anything that appears to be falsifying information. This includes signing the attendance roster for another classmate, whether they show up for class or not. Cheating is a serious offense. The instructor reserves the right to remove a student from class if that student is caught cheating. If a student is caught cheating, that student may have dismissed themselves from the Program.

Dishonesty

Acts of dishonesty such as, but not limited to, theft, plagiarism, knowingly giving, obtaining, or falsifying information during exams or other academic or professional practice assignments can be cause for dismissal from School.

Disciplinary Action

Instructors and students are charged with the responsibility of reporting instances of such behavior to the department chair for investigation. Substantial violations are to be brought before the Dean of the School for disciplinary action. The minimum disciplinary actions to be taken include: plagiarism-(first offense) a failing grade on the assignment, (second offense) a failure in the course without possibility of withdrawal, cheating-failure in the course without possibility of withdrawal.

Please refer to the Student Handbook for more information, and the University Policy, page 76.

PROFESSIONAL Dress Code and Grooming

ATTIRE

The student is to follow the dress and grooming guidelines of the Program, School, University, and the Clinical site at all times. If the student is not aligned with these guidelines, the faculty and the clinical site reserve the right to send the student home to correct the issue.

All students in the Medical Radiography Program are required to **wear scrubs** to labs, classes, workshops, and clinical assignments. Scrubs are required beginning the second day of class, which begins on a Tuesday of the first week of class. Wearing scrubs on class days will be in effect until the end of the Program.

Daily grooming is expected when a student is in class and at the clinical site. This includes showering, facial and hair care, clean nails and hands, and wearing deodorant. Your hair must be clean and combed.

Hospitals and clinics, as well as the Department of Radiation Technology, follow a dress code congruent with the profession. In the medical profession, how a healthcare professional presents themselves through attire and grooming communicates so much to a patient. If a healthcare provider is groomed and wears a clean, modest scrub uniform, the patient is put at ease and feels more confident in the person providing care.

If an applicant is interviewed and accepted based on the profession grooming and attire evident at the time of the interview, but the student returns to start the program with a grooming and attire look that is not advised or permitted in the program, the student will be asked to make the changes. If the student refuses, acceptance to the program could be revoked.

FROM THE STUDENT HANDBOOK: University ID must be worn in a visible location above the waist at all times while student is on campus. All attire must be modest, clean, and pressed. Bare feet, bare midriffs, low-cut or deep necklines, and skin-tight clothing are not acceptable. Words, pictures, and/or symbols displayed on clothing should be consistent with a Christian institution and sensitive to a diverse student population. Underwear/undergarments of any kind must not be visible either under, around, or through clothing. In selected settings, professional attire, as defined by the setting, may be required. Professional attire includes: skirts or dresses of modest length or long pants (dress pants are recommended), or as specified.

Please refer to the Student Handbook

Grooming from the STUDENT HANDBOOK

- Haircuts, hairstyling, and personal grooming must be neat, clean, and conservative.
- Careful attention must be given to personal hygiene.
- Hair color must be natural in appearance.
- The wearing of hats and “hoodies” indoors is not permitted.
- Excessive makeup and fragrances are not appropriate.
- Visible tattoos and body piercing, such as facial and tongue studs, are not permitted.
- Rings should be low profile and limited to one finger per hand. Earrings are limited to small, simple studs, one stud per ear.

Consequences for Non-compliance With Attire Policy

If a student comes to class, labs, or clinical assignment in attire that does not meet the Medical Radiography Attire Policy, the Faculty and Clinical Instructors reserve the right to send a student home to change. The Faculty and CIs reserve the right to enforce this policy upon the first occurrence of non-compliance. Continued non-compliance could result in probation.

Scrubs

Scrubs must be clean, wrinkle-free, and cover the entire torso of the student (no bare stomachs). Scrubs can include pockets.

Scrub Colors and Styles

Students are to wear solid or print tops with solid pants, or solid sets. Scrubs can be in the following colors: Black, Dark Brown, Tan, Navy, Royal, medium blue, Dark Burgundy, Hunter/Forest Green, Dark Gray, Dark Purple, Red, or Orange. Pastel or white scrubs are often see-through so are discouraged.

Shoes

Students are to wear clean closed-toe tennis shoes, nursing shoes, clogs in any matching color. It is recommended that shoes be supportive and conducive to standing and walking. Since shoes worn to clinical assignments can get dirty with body fluids or contrast, it is advised that students choose shoes that will not be damaged or can be cleaned.

Socks

Students are to wear socks that are white, black, or a matching color as the scrubs. Socks are required for clinical affiliation.

Undergarments

Male students are required to wear a solid undershirt (white, black plain, or matching t-shirt or thermal) under the V-neck scrub top. The undershirt should not have words, pictures, or symbols. Long-sleeve thermals can show below the sleeves. Undershirts must be tucked in to scrub pants. The undershirt can show, but under garments must not show above the scrub pants. Some sites may have an OR policy where t-shirts are not to be worn. Students are to adhere to these policies if they are assigned to an OR rotation.

Tattoos

Tattoos must be covered at all times when on campus or at the clinical site. Tattoos on the hands, or any place where covering is not possible, is not permitted.

Jewelry

Students are to keep jewelry minimal and professional. For safety, dangling earrings are not recommended; however, a single-studded earring is allowed. Tongue, eye, lip, or nose ring/studs are not allowed. Any piercing on the face, other than the ear, cannot be visible. Necklaces or ties are strongly discouraged because a patient could grab these items and cause serious harm. Charms on a necklace or bracelet must be professional and appropriate to the LLU attire standards.

Hair

Hair must be neat, combed, clean, natural, and professional. Hair trends, such as bright highlights, extensions, “the messy look,” feathers, etc. may negatively impact a professional look, and may pose a health and safety issue, and are strongly discouraged. In most clinical sites, these types of styles are not permitted. Extreme styles, such as shaved designs, dyes, Mohawks, etc., are not permitted.

Men: Long hair on men may not be allowed at some clinical sites. Mustaches and beards must be neat and trimmed. Hair trends on men that bring undue attention to the individual will require that the

student cut or groom the hair to be within compliance of the professional hair policy. Facial hair, meaning mustaches and beards, must be kept neat, clean, and groomed. One-, two-, or three-day “shadows” are not considered professional or groomed. It is highly recommended that male students appear clean-cut.

Women: Long hair must be tied back. Trendy styles, such as hair color and head shaving, must be natural and not draw undue attention to the individual. Extreme colors, such as white, red, pink, green, yellow, blue, or purple, are not permitted. Hair styles must be natural and not draw undue attention to the individual.

Please refer to the University Policy.

Nails

Nails must be short, trimmed, and clean. Polish may be clear or neutral nude. No acrylics are allowed in the hospital setting.

Fragrances

Strong fragrances are discouraged. Many hospitals do not allow fragrances of any kind.

Make-up

Make-up should be modest and professional.

Hats

Hats are not to be worn in the classroom, clinic, lab, or official meetings or events, unless specifically discussed.

Wearing of hats during tests and quizzes is not permitted.

Dark Glasses

Wearing dark, non-prescription sunglasses indoors is not permitted.

Head and Facial Covering

The Program faculty respects the religious and cultural practices of all students. The Radiography progression does necessitate, however, that the faces of all students be visible, during the classroom, labs, tests, and clinical affiliations. Head coverings for religious and cultural reasons, are permitted in the classroom, labs, tests, and clinical affiliations.

**TIME AND
ATTENDANCE**

The LLU Medical Radiography Program has established a programmatic attendance policy that will help facilitate the learning of required knowledge, technical skills, and patient care vital to success in the medical imaging profession.

The program acknowledges that emergency circumstances (i.e. serious illnesses, deaths, and funeral of immediate family) can occur; such events will be taken under advisement by the Clinical Coordinator and the Program Director; however, students must provide the Clinical Coordinator and Program Director with documentation supporting the reason for being late and/or absent. **It is required that students notify their clinical coordinator and clinical instructor ahead of time if they will not be able to attend clinic, and their program faculty if they will not be**

able to attend class. A combination of email, phone, and text can be used depending on the preference of the individual. Phone calls and texts are not to be sent too late or too early in the day.

Department Phone: 909.558.4931 CC Phone: 909-583-3033

If the clinical site is not made aware based on the proper notification listed in this policy below, the student will subject to the administration action that goes along with a no call no show event.

Students who have ongoing time and attendance challenges are permitted to withdraw from the program at any time (refunds may be available) in order to address the challenges that are causing time and attendance issues. The student can reapply in a subsequent year by following the standard procedure for application and admittance.

CLASSROOM
ATTENDANCE

EXPECTED ATTENDANCE: Student are expected to attend every class for which they are scheduled and to arrive on time. Instructors will keep an accurate record of class attendance. Students are responsible for contacting their instructors when unavoidable absences occur and for maintaining contact every few days during any necessary extended absence. Continued absences and lateness may result in a lowered or failing grade. Students are responsible for the grade they earned in class.

20% RULE: Up to 20% of the course can be missed without receiving a failing grade; this means that two class periods can be missed, or one class period and two late arrivals (two late arrivals is equal to one absence). If a student misses two classes and is late one or more times, this exceeds the 20% rule, and a failing grade will be awarded.

COMMUNICATION: Missed instructional time is a serious deterrent to learning. A student is responsible for fulfilling the requirements of the course by attending all classes (including labs and clinical) and completing course assignments. **The student must maintain contact (email or office visit in person) with the instructor if there are extenuating circumstances such as an accident, illness, or death in the family.** Students may be absence for various reasons, but any absence from class is still considered an absence.

CLINICAL
ATTENDANCE

Many factors are in play when calculating clinical attendance, and clinical absence. Any clinical time missed WILL be documented on the student's clinical attendance record. The missed clinical time will be counted towards the percentage of absences, and toward the clinical grade.

10% RULE: Absenteeism, including late arrivals, and early leaves resulting in 10% of missed clinical time per quarter, will cause the student to be ineligible to continue in the program. A student cannot exceed missing 10% a quarter (two late arrivals is equal to one absence).

Quarter 1: 2 days a week in clinic; 10% is two (2) days

Quarter 2: 2 days a week in clinic; 10% is two (2) days

Quarter 3: 3 days a week in clinic; 10% is three (3) days

Quarter 4: 5 days a week in clinic; 10% is five (5) days

Quarters 5-7: 4 days a week in clinic; 10% is four (4) days

PROGRAM MINIMUMS AND MAXIMUMS: A student can miss a *maximum of 7* clinical days during the 21-month program in order to meet and exceed the minimum 1,850 clinical hours in the program. If a student misses 8 or more days during the program, the student is required to register for the summer clinical course at the end of the program. **EXAMPLE:** Let's say a student misses 7 clinic up to the maximum days a quarter for seven quarters, totaling 24 days, and still receive a passing grade. This means that it is possible to complete each clinical course and still be short on hours, which would require completing a summer clinical course at the end of the program, even if the student is only missing one or two days.

SUNDAY SWAP: Sunday swaps up to *three* (3) times a quarter are permitted without any effect on clinical grades, status in the program, or attendance records. This should be used when a day off is needed for personal business or medical appointments for yourself or family. This is a privilege and can be revoked by leadership based on inappropriate use outside of the intent (i.e. this is not meant to take a day to take the family to Disney land mid-week due to long lines).

ADJUSTED SHIFT: Adjusted shift time is only allowed during on the same day for an appointment requiring you to leave early or start late by a couple of hours. This adjustment cannot exceed a normal shift of 8 hours. If you site has multiple shifts that overlap, your CI can approve a shift change if you are able to talk a LLU classmate into changing shift with you to accommodate the time needed off that day. Make-up or Banking time is not permitted.

LAST QUARTER plus ONE: Students who maintain a perfect record of time and attendance during the **entire program** will be granted an additional day off without penalty in the final quarter of the program. The exact number of days will be determined based on how many days that have been missed due to funeral leave, jury duty, and clinical site removal due to external agency site visits. The leadership of the program have an expectation that you self-monitor your ability to be a productive student in clinic. Any time you run a fever or feel like you would be putting the clinic at risk to spread a cold means you need to stay home despite not obtaining the extra day off at the end of the program. The CI's will have the power to send you home if you attempt to attend clinic sick with the rationale that you have to be there to be eligible for this extra day off.

P R O L O N G E D
A B S E N C E S

Prolonged absences due to disabling illness, catastrophic events, or extenuating hardships will be considered by the Faculty. If the Faculty feels that the student has good and just cause for such absences, they will assist the student continuance in the Program by remaining in good standing on a leave of absence (LOA). The advice given and awarding of an LOA will be based on policy and on a case-by-case basis.

A D M I N I S T R A T I V E
A C T I O N S F O R
C L I N I C A L
A T T E N D A N C E :

Written Warning: If a student misses 5% of clinical hours through a combination of absences, late arrivals, extended break times, and/or early leaves during a scheduled clinical experience the student will receive a written warning.

Final Written Warning: If a student misses 10% of clinical hours through a combination of absences, late arrivals, extended break times, and/or early leaves during a scheduled clinical experience the student will receive a final written warning.

Program Dismissal: If a student misses >11% of clinical hours per quarter, through a combination of absences, late arrivals, extended break times, and/or early leaves during a scheduled clinical experience the student will receive a failing grade for the course.

Approved Make-up Time: Approved make-up time may be granted by the Program in only rare circumstances. Make-up time will **NOT** be granted for any extended health condition without a doctor's note, mental health days, bereavement leaves beyond the stated policy, jury duty beyond the stated policy, family vacations, personal trips, or any time off that could otherwise be scheduled during quarter breaks or after the completion of the program.

Extended Leaves: Extended leaves due to pregnancy, accidents, surgery, or life situations could lead to a leave of absence or dismissal from the program.

PROPER
NOTIFICATION
FOR CLINICAL
LATENESS /
ABSENCE

ADVANCE NOTICE: Students are expected to notify their clinical instructor at least **60 minutes** in advance of the clinical start time if they will not be able to attend clinical or anticipate a late arrival. A documented emergency will be taken under consideration by the program. Note: Both the clinical instructor and/or preceptor (if applicable) must be notified.

PROPER NOTIFICATION PROCEDURE: Failing to use proper notification procedures (“no call – no show”) for clinical absence/tardiness will be cause for administrative action. A pattern of this unprofessional behavior may result in course failure and/or dismissal from the program.

Note: Asking a classmate to inform the instructor that you will be late or absent does NOT constitute proper notification.

ADMINISTRATIVE
ACTIONS

Written Warning – 1st offense of “no call – no show” during the program

Program Dismissal – 2nd offense of “no call – no show” during the program

Note: A “no call – no show” is considered unprofessional, therefore, the Administrative Actions listed above accumulate during the program.

HOLIDAYS

The University recognizes the following holidays:

- New Year’s Day
- Martin Luther King, Jr. Day
- President’s Day
- Memorial Day
- 4th of July
- Labor Day
- Thanksgiving (Thursday and Friday)
- Christmas

ASSIGNMENTS
TESTS &
QUIZZES

Program Expectation for Tests and Quizzes

"It is expected that the student will take quizzes and examinations at the regularly scheduled time. To take an examination at a time other than when it is scheduled, the student must secure the consent of the instructor and the chairman of the department and must file with the instructor a permit obtained from the Office of the Dean. A fee is charged for a special examination." (\$50.00) **LLU Catalog.**

Missed Exams Due to an Absence

A single missed examination requires makeup **within 24 hours of return to class**, or at the faculty’s discretion. Multiple examinations missed require instructor scheduling. Examinations not made up within the specified time frame will require the \$50.00 School fee and 10% grade reduction. The following policies apply:

- Approved absence from examinations/per course:
 - First Occurrence -- No Penalty On Test.
 - Second Occurrence -- 5% Test Grade Reduction.
 - Successive Occurrences -- 10% Test Grade Reduction.
- Unapproved absence from examinations/per course:
 - First Occurrence -- School Fee (\$50.00) and a 10% Test Grade Reduction

- Successive Occurrences -- Letter Grade Reduction in Affected Courses
- An approved absence is granted for a verified illness or a prearranged situation. **Pre-arranged absences require a written request and departmental approval.** All other absences are unapproved.

Test Policy

All students in courses offered by the Radiation Technology Department are expected to pass each test at a percentage specified by the instructor.

Tests should not be retaken if a student receives a failing grade. In some cases, remediation will be applied based on the discussion of the faculty to ensure a student has learned the information in order to move onto the next module in a course. This will be limited in nature and not a way to continue to bail out a student struggling on tests.

A student who fails a test must see the Instructor to decide what remedial assignments are needed. **Any student who doesn't see the Instructor about a failed test score cannot take the next test until a discussion happens.**

It is NOT the instructor's responsibility to seek out students who have missed tests. When a student misses a test, they should meet with the instructor immediately upon their return to class to schedule when the test will be retaken. Failure to follow through on Department Policies regarding making up tests can lead to a ZERO (0) score being recorded for that component of the student's grade.

Students are not to schedule travel plans before the last day of each quarter. If students schedule travel plans before the completion of test week and the travel plans have not been requested and approved in writing by the Program Director, the absence is considered unapproved and the student will be subject to the fines and a reduced grade for not being present at the final. In some situations the student could receive a failing grade for missing the final exam.

Quiz Policy

It is very common that Faculty hand out quizzes at the beginning of class. Students arriving late to class may not be permitted to start a quiz if it has already been handed out. It is up to the discretion of the instructor to allow make-up quizzes, or to allow the starting of quizzes late.

When that window of time is closed, the quiz is considered late, and the online quiz will not be reopened by the instructor.

It is not the instructor's responsibility to seek out students who have missed quizzes. When a student misses a quiz, they should meet with the instructor immediately upon their return to class to schedule when the quiz will be reviewed to not miss out on content. Failure to follow through on Department Policies regarding making up quizzes can lead to a ZERO (0) score being recorded for that component of the student's grade. It is up to the instructor's discretion based on how the quiz is given to allow the student to retake the quiz. If the material was reviewed on the quiz the integrity of the quiz may not allow for a retake for points.

The primary objective of medical radiography training is to prepare entry-level technologists who will be competent in providing quality health care. It is the student's responsibility to learn the theory and professional practice technology of the profession at an acceptable level of competency. It is the Faculty's responsibility to establish and enforce criteria for development of professional standards.

Late Assignments

In general, late assignments are not accepted in the medical radiography program. **A late assignment with no prior notice to the instructor will receive a score of 0.**

For those assignments that are given an extension of time based on communication with the instructor prior to the due date will be reduced 10% within a week after the due date. Assignments turned in more than 2 weeks after the due date will be given a score of 0.

The professor in the course will have final control of the specific extensions past the original due date due to sickness or legitimate circumstances outside the control of the student. Consultation with the PD will be made for those cases that require it to provide consistent programmatic policy.

**G R A D I N G
S C A L E**

Letter Grades

Final grades will be assigned within the following percentage ranges based on the overall average of student's coursework:

A	95.00-100% (5)
A-	90.00-94.99% (5)
B+	87.00-89.99% (3)
B	83.00-86.99% (4)
B-	80.00-83.99% (3)
C+	77.00-79.99% (3)
C	74.00-76.99% (3)
C-	70.00-73.99% (4)
D+	67.00-69.99%
D	64.00-66.99%
D-	60.00-63.99%
F	59.99% and below

A grade lower than 77% "C+" can result in a review for academic probation.

**F A I L U R E T O
P A S S A C O U R S E**

A student who receives an unsatisfactory grade of 73.99% "C-" and below will be academically disqualified them from the program after leadership review.

M I L E S T O N E S

A N D

P R O M O T I O N

Promotion Criteria

Promotion through the Program is contingent on satisfactory academic and professional performance, and on factors related to aptitude, proficiency, and responsiveness to the established aims of the School and of the profession.

As an indication of satisfactory academic performance, the student is expected to maintain the Program policy of a 2.5 GPA, as well as pass through three milestones.

Possible reasons for failing to progress to the next milestone:

- Dismissal from a clinical site
- Failing a course at less than but not equal to 74%
- Unprofessional behavior
- Ongoing time and attendance issues
- Inability to adhere to Program policies, including the essential functions
- Non-compliance to the indirect and direct and repeat exam supervision policy
- Unable to perform safe radiation protection practices
- Functioning outside the scope of a student radiographer
- Performance of a critical incident
- Cause harm or danger to a patient, student, faculty, or coworker

Program Milestones

In addition to the Faculty reviewing each student's record quarterly, a student's progress is also reviewed at three key times in the Program. These key periods are called Milestones. Each Milestone is discussed below:

- **Milestone #1 - End of Year One:** At the end of the third quarter of the Program, in the May/June time frame, a student's progress is reviewed. The student's progress will be reviewed, and then the student will be notified at the end of the first year of the Program, in June. The criteria reviewed includes: academic standing; behavioral evaluations; lab performance and participation; clinical grades; Clinical Instructor evaluation; and Faculty evaluation. The student will also sign-up to meet with one or two Faculty members to talk about how the student's experience in the Program so far. The student will either progress to the next milestone, or be put on probation or terminated from the Program.
- **Milestone #2 - End of Fall Term:** At the end of the fifth quarter (the end of the Fall quarter), in September, a student's progress is reviewed. The Fall quarter is significant since the student is in their clinical rotation four days a week, and has completed the Summer quarter, which was five days a week. The criteria reviewed includes: academic standing; behavioral evaluations; clinical grades; Clinical Instructor evaluation; and Faculty evaluation. The student will either progress to the next milestone, or be put on probation or terminated from the Program. The student will be notified in November/December about promotion through this milestone.

Also part of Milestone #2 is input from the Clinical Instructors about the students' clinical performance and their nomination for a clinical award, to be made at the beginning of the Winter Quarter of the students' second year.

- Milestone #3 - Graduation Preparation:** One quarter before completion of the Program, in the final Winter quarter, a student's progress is reviewed to determine if the student will be a candidate for graduation. The criteria reviewed includes: academic standing; behavioral evaluations; successful completion of classes and prerequisites; clinical hours completed; clinical grades; Clinical Instructor evaluation; Faculty evaluation. Also included in this milestone is a class forum, so that the class has the opportunity to share with the Faculty prior to graduation about any observations, strengths, or concerns of the Program. The Clinical Coordinator will also review forms and hours to verify the satisfactory completion of clinical requirements.

C L A S S

O F F I C E R S

The new, incoming class is open to selecting class representatives/officers. The purpose of having class representatives is to provide an organizational structure when the faculty want to work with the class on planning events.

Officers

Officers will be selected at the beginning of the Program, usually during the first quarter.

Procedure

Students will be asked to volunteer to help. In November, the names will be gathered, and voting Yes/No for each name will occur.

Activities

Students are to be respectful of the Loma Linda University values and corporate identity (logo, colors).

Designs for t-shirts and signage **must be approved by the faculty** before it can be printed and/or used.

Official LLU logos are to be used. Changes to the LLU logo are not permitted.

O F F I C I A L

C L A S S E V E N T S

Medical Radiography students are expected to exhibit behavior of a Loma Linda University student. Students are to follow all LLU policies during on-campus and off-campus class events.

Supervision

Official student events and activities, whether on-campus or off-campus, will have Faculty attendance and supervision.

Guidelines

University guidelines for student behavior are to be followed. Please refer to the University policy in the Student Handbook. Additionally, the Faculty will develop guidelines for each student event. In general, students are not to engage in gambling, drinking of alcoholic beverages, or other behaviors that do not positively represent the University, School, or Program.

Students are to follow the University dress code at all official events.

Students are to follow the attendance requirements set by the faculty for all official events. Students can be counted tardy or absent at off-campus events if these events are considered official events of the program.

Guidelines for official class events also includes serving vegetarian food. No drugs or alcohol are to be present at official class events.

The conference features three concurrent educational courses for Program Faculty, clinical Faculty, and students.

Event Date and Time

The ACERT Conference is held every year in Las Vegas, NV, in February. The first meeting begins on Wednesday night, and meetings are then held all day on Thursday and Friday.

The program now provides funds for 2nd year students to attend. The program will pay for the student application fee. Once the student submits the ACERT application to the faculty, the student is held responsible for this fee if the student does not attend. Students are required to notify the faculty in writing THREE WEEKS prior to the meeting if the student is unable to attend. Effort will be made to get a refund; however, if a refund is not possible, the student is to pay the fee back to the department. Each student is to provide a signature promissory note to the department for the amount of the registration fee; If the student does not attend, they will owe the class fund the cost of registration.

Student Attendance

Second-year students are encouraged to attend this meeting; however, first year students are welcome to attend. Each student is required to attend a minimum of 10 hours of workshops **PLUS** the student bowl.

The Student Bowl is required. Stamps are collected for each session, and then the student is to turn in the attendance form for review by Faculty.

Second year students who will be attending the conference are permitted to depart for Las Vegas on Wednesday morning, in order to arrive in Las Vegas by the first meeting in the evening. Clinic is not required on Wednesday for 2nd Year students. The first meeting Wednesday night is required because it is the student bowl.

First year students who plan to attend must attend classes until the end of the day on Wednesday, unless the afternoon course instructors dismiss students from class. **Clinical Attendance – First Year Students**

If a first-year student chooses not to attend the ACERT Conference, the first-year student is required to be present at classes until the end of the class day on Wednesday and be in clinic the entire day on Friday. Clinic attendance is also required on Thursday.

Clinical Attendance – Second Year Student

If a second-year student chooses not to attend the ACERT Conference, the second-year student is required to be present at their clinical rotation the entire day on Wednesday and Friday. No classes are held on Thursday.

ACERT
CONFERENCE
ATTENDANCE

Required Assignment

Each student who attends the conference is required to fill out an attendance form.

A copy of the stamped form showing the lectures attended with a total of 10 hours PLUS the student bowl in attendance is to be stapled to the attendance form. Students are not to turn in this form at the conference. This form must be turned in to the Assistant Program Director for verification.

This form must be turned in within two weeks following attendance at the conference. If this information is not provided, 2 clinical days will be substituted for the missed clinical time. So if one day is missed, two days will be deducted.

Professional Conduct at Professional Conferences

Loma Linda University students are expected to conduct themselves at professional conferences as if they were on the LLU campus. Behavior, even though it occurs off campus, which does not represent a Loma Linda University student or the Radiography profession, may be cause for further disciplinary action. See the Program Policy on Class Event Behavior.

Students are to dress and groom themselves in a professional way, conducive of LLU policy. Students are not to wear hats to professional meetings.

Please see the policy for Official Class Events. The ACERT conference is an official class event.

P R E G N A N C Y

Declaring Pregnancy During the Program

Due to the well documented sensitivity of the fetus to radiation during the early stages of pregnancy, it is the policy of the Medical Radiography Program, sponsored by the SAHP at Loma Linda University, to give all incoming female students appropriate information concerning this subject area so they may make an informed decision should the need arise. Leadership will work on a plan for the time needed off from the program and will look to medical professionals to clear the student for return to clinic in the event of a C-section.

While the Program encourages any female student who becomes pregnant during the course of the Program to declare her pregnancy in writing to the Program Licensee (Radiation Safety Office {RSO}) according to NRC guidelines (Federal Register, May 21, 1991, § 20.1003, 20.1208) this is strictly at the discretion of the student to do so.

Whether a student chooses to declare her pregnancy or not, the student will be treated equitably by the Program in all cases. (It should be remembered that a non-declared pregnant student is not considered to be pregnant and cannot ask for special considerations due to health status unless pregnancy is actually declared.)

In addition, the student has at any time after declaring her pregnancy the right to un-declare her pregnancy. That means even though she is showing signs of being pregnant or not she can un-declare her pregnancy and return to a not pregnant status.

The Program's pregnancy policy is consistent with the JRCERT Standard 4.2. It is also consistent with applicable federal regulations and state laws, made known to accepted and enrolled female students, and contains the following elements:

- Written notice of voluntary declaration,
- Option for student continuance in the program without modification, and
- Option for written withdrawal of declaration.

Radiation Safety Guidelines During Pregnancy

If a student chooses to declare her pregnancy to the Program, the student will be expected to abide by the following University radiation safety guidelines for the pregnant worker / student: (1) Go through a special radiation safety session provided by the Radiation Safety Office of the University (2) Wear two (2) radiation monitoring badges while at any clinical education setting during the duration of the pregnancy, and (3) abide by NRC dose limits to the embryo / fetus due to occupational exposure of a declared pregnant woman not to exceed 0.5 REM (5 mSv) during the entire pregnancy.

Program Continuation While Pregnant

Once a female student declares her pregnancy to the Program / Licensee, it will be up to the student, in consultation with the Program Director and RSO, to decide how she would like to treat the clinical portion of the Program during the course of her pregnancy. (*It is urged that the student provide the Program / RSO at the earliest possible date a written physician statement verifying pregnancy with an expected date of delivery and any restrictions in physical activity. Changes in the student's physical status should be updated from the student's physician as soon as applicable.)

Possible options that the student might choose to pursue include:

1. Continuation in the Program with no special consideration made in any way.
2. Rescheduling of potential high exposure rotations during the pregnancy taking into consideration other student's access to equitable clinical experience
3. Reduction / Change of clinical hours during the pregnancy per the student's physicians orders which will be completed following conception. With return to clinic to occur no later than one (1) year following the end of pregnancy of the Program reserves the right to require the student to demonstrate additional clinical and / or didactic competency as the student's situation warrants.
4. Take a Leave of Absence from the clinical portion of the Program for any desired portion of the pregnancy due to radiation safety / health concerns while completing Program didactic courses with the class of entrance. Completion of the clinical phase of the Program would be at the student's discretion beginning at the start of the next full academic term within at least one (1) year of the termination of pregnancy or the Program reserves the right to require the student to demonstrate additional clinical and / or didactic competency as the student's situation warrants.
5. Other options or combinations of the above will be considered in consultation between the student and Program Director / RSO as individual situations indicate.

However a female student chooses to handle the declaration of pregnancy, the Program is committed to the equitable treatment of all students in the Program no matter what their situation. Students will be expected to complete all clinical and didactic requirements of the Program to become eligible for graduation and State / National registry exams. Program and clinical requirements cannot be skipped or shortened due to pregnancy status.

Female students are to complete and sign the pregnancy form provided by the department.

❖ JRCERT STANDARD 4.2

G E N E R A L
A W A R D
C R I T E R I A

Students considered for all awards from the Program must demonstrate a minimum of a 3.5 GPA throughout the Program. Students nominated for these awards must also demonstrate professional behavior consistent with the mission and values of the ASMR Program and Loma Linda University.

The faculty reserves the right to gain feedback from the class.

Stilson Clinical Award

Performance

This award is given to up to three students in the Program for outstanding clinical performance.

Procedure

During Milestone #2, the Clinical Instructors, students, and faculty will be asked to identify the student who demonstrate outstanding clinical performance and progress.

At the beginning of the Winter quarter of the second year, this information will be reviewed at a faculty awards meeting. The ASMR Faculty and site visitors will then make a final selection from among the list of students nominated by the Clinical Instructors.

The final selection of students will be approved by the Program Director of the ASMR Program, and the names will be submitted by the CC to the graduation coordinator for printing in the graduation Program.

Faculty Award for Outstanding Performance

Performance

This award is given to up to three students in the Program for outstanding performance. Usually the students with the top GPAs are selected. The initial selection will start with the top 5 students in the class based on highest GPA. Final selection will be made based how the student has represented the University, School, and Program mission and values.

Procedure

At the beginning of the Winter quarter of the second year, the Program Director will review the GPAs of each of the second year students and make a selection to be presented to the ASMR Faculty at a regular monthly meeting. As a group we make the final selection.

The ASMR Faculty will then make a final selection from among the list of students nominated for highest GPA and academic performance.

The final selection of students will be approved by the Program Director of the ASMR Program, and the names will be submitted by the PD to the graduation coordinator for printing in the graduation Program.

Rising Star Award

Performance

This award is given to one student in the Program who demonstrates an above-and-beyond attitude. This student is also known to help Faculty on projects, and support the Program in a broad variety of ways. The student will hold a cumulative program GPA of 3.5 and above.

Procedure

At the beginning of the Winter quarter of the second year, the Faculty will review the students in the second year class, and make a nomination. The faculty reserves the right to gain feedback from the class. The ASMR Faculty will then make a final selection from among the list of students nominated. The final selection of students will be approved by the Program Director of the ASMR Program, and the names will be submitted by the PD to the Alumni Office for printing in the alumni banquet Program.

Program Awards for Outstanding Performance

Performance

These awards are given to up to 12 students in the Program for outstanding academic performance.

Categories

Student of the Year: Up to two (2) students can be selected from each class cohort, if warranted; however, one student is usually selected. This student is exemplary in grades, professional behavior, student mentoring, and clinical performance.

Clinical Stars: Up to four (4) students will be selected by the Faculty and CIs as students who perform at top capacity. These students are those who perform at a high level, but just under the performance of those students who were nominated for the Stilson Clinical Award.

Outstanding Growth and Accomplishment: Up to two (2) students can be selected for the Outstanding Growth and Accomplishment award. This award is given to the students who have demonstrated the most growth and change while in the Program.

Outstanding Achievement [with Children, PACS, Geriatrics, Leadership]: Up to two (2) students can be selected for this award. This student is selected for outstanding patient care.

Outstanding Teacher's Assistant: One student can be selected for this award. This student is selected for outstanding support of other students as a TA, LA, or tutor.

Procedure

At the beginning of the Spring quarter of the second year, the Program Director will review student performance with the Program Faculty and the Clinical Coordinators, and make a nomination for each category. The final selection of students will be approved by the Program Director of the ASMR Program. Certificates will be made for each student, and the certificates and gift cards will be awarded at the student celebration in May, just prior to graduation.

Honors Cords

The University awards honors cords for student how receive a program GPA of 3.50 and above. This GPA is not rounded. The official transcript after Winter quarter will determine this GPA. If a student is over a 3.5 GPA after the end of Winter quarter, the student will receive a cord to wear at graduation. If a student is under a 3.5 GPA at the end of Winter quarter, but does excel to achieve a 3.5 GPA and above after grades are posted at the end of Spring quarter, then the student will receive an honor cord, but will not wear the cord during the graduation services.

Lambda Nu

Lambda Nu is the professional society for radiologic technologists. Loma Linda University has a Lambda Nu chapter called Gamma Epsilon Tau.

To enter the Lambda Nu Loma Linda University Gamma Epsilon Tau chapter, the student must earn a cumulative program GPA of over 3.85 in the first four quarters of the program, as well as display distinguished behavior throughout the program.

Students in the honor society are given the opportunity to apply for a Lambda Nu scholarship.

The student must remain in good standing throughout the program in order to wear the honor cord at graduation. Those that do not have the required GPA of over 3.85 going into the final Spring Quarter will not be given honor cords for graduation.

It is the faculty's discretion to withdraw a Lambda Nu award before graduation if the student does not display distinguished behavior for the entire length of the program.

LAB RULES

The hours that the positioning lab is open are determined by the instructor of the positioning class. The lab is open during class. The lab is also open during defined open lab times. The lab will not be open when the instructor or a CRT/ARRT licensed Radiologic Technologist is not available to supervise. Radiation safety practices are in effect while using the energized lab on campus.

Radiation monitoring badges must be worn at all times while in the energized lab in Nichol Hall. (*meets JRCERT Objective 4.3*)

Open Lab

Open lab is typically during the lunch hour on defined class days. In addition, open lab can also be one hour following a lab. Open lab hours are determined by the instructor, and vary from week to week and quarter to quarter.

Supervision

The lab can only be open if supervision is provided. Supervision can be provided by the regular lab instructor, who is a CRT/ARRT licensed Radiographer.

The supervision provided must be, at a minimum, indirect supervision. Indirect supervision is intentional, but does not have to be in the room with the students.

With indirect supervision, the supervisor can open the lab, turn the tables on, walk out, but return periodically, such as every 5 to 10 minutes, to supervise the students.

The purpose of indirect supervision is: check to see that the students are doing ok; verify that the students are behaving appropriately; to insure that the energized radiation equipment is not being used inappropriately and without supervision, and to see if the students have any questions.

If the supervisor needs to leave the department for any reason for a period of time longer than 5 minutes, or the supervisor needs to leave for the day, the students are required to leave the lab.

The supervisor is responsible for turning off the power to the tables and locking the lab doors after the students leave.

Faculty Supervision

Supervision can also be provided by any Faculty in the Department of Radiation Technology who is a licensed and registered CRT/ARRT Radiologic Technologist and is willing to provide intentional, indirect supervision.

Any Faculty willing to provide supervision for students other than at lab times and open lab times, must notify either the lab instructor or the Program Director prior to providing supervision to students outside of lab time.

Student Requests

Students can request with the lab instructor to have the lab open at other times outside of lab classes and open lab.

Requests of this nature must be made to the lab instructor first. If the lab instructor is not around, the request must come to the Program Director.

Students are requested to go first to the lab instructor and then the Program Director. After the request is approved by either the lab instructor or the Program Director, appropriate supervision, by either the lab instructor, Program Director, or another faculty member who is a CRT/ARRT licensed radiologic Technologist will be assigned.

Students are not to go directly to a Faculty member without first making the request with the lab instructor.

**M I L I T A R Y
L E A V E**

Students who serve in the military reserves are usually required to work reserve duty once a month. It is the responsibility of the student to notify the Clinical Coordinator if their monthly reserve duty impacts clinical time. Students who serve in the military reserves are also usually required to work a two-week tour once a year. It is the responsibility of the student to notify the Clinical Coordinator when the two-week tour is scheduled. Students who are required to serve these two weeks in the reserves will be given consideration for their military service in the following ways.

Students in the reserves need to work the make-up week at the end of the Summer in order to make-up up to 40 hours of clinical time. If this is done, the Program will waive the remaining hours of clinical time taken while on the two-week reserve tour.

Students who are required by the reserves to take additional time out of clinical must notify the Clinical Coordinator of the military demands. Specific resolution will be determined on a case-by-case basis.

Active Duty

The situation of students who are transferred to an active duty status will be considered on a case-by-case basis.

R E S P O N D U S
M O N I T O R /
L O C K D O W N
B R O W S E R

Online Exams: This course may require the use of Respondus Monitor/LockDown Browser for online exams. Watch the following video to get a basic understanding of Respondus Monitor/LockDown Browser and the optional webcam feature (which may be required for some exams). Further instruction will be provided in Canvas. Video: <https://youtu.be/XuX8WoeAycs>

F E R P A

The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. § 1232g; 34 CFR Part 99) is a Federal law that protects the privacy of student education records. The law applies to all schools that receive funds under an applicable program of the U.S. Department of Education.

FERPA gives parents certain rights with respect to their children's education records. These rights transfer to the student when he or she reaches the age of 18 or attends a school beyond the high school level. Students to whom the rights have transferred are "eligible students."

Written Permission

The Program must have written permission from the parent or eligible student in order to release any information from a student's education record.

Disclosure Without Consent

FERPA allows schools to disclose those records, without consent, to the following parties or under the following conditions (34 CFR § 99.31):

- School officials with legitimate educational interest;
- Other schools to which a student is transferring;
- Specified officials for audit or evaluation purposes;
- Appropriate parties in connection with financial aid to a student;
- Organizations conducting certain studies for or on behalf of the school;
- Accrediting organizations;
- To comply with a judicial order or lawfully issued subpoena;
- Appropriate officials in cases of health and safety emergencies; and
- State and local authorities, within a juvenile justice system, pursuant to specific State law.

❖ Supports JRCERT Standard 1.5

Chapter 9

Clinic Specific Policies

CRITICAL INCIDENTS

It is the responsibility of the clinical site and program faculty to report and document any critical incident that is the result of a student's actions or inactions. Depending on the outcome of the critical incident investigation, the faculty will determine if the critical incident will result in probation, suspension, or dismissal. A critical incident could be any of the following:

- Patient identification errors
- Exam identification errors
- Recording/reporting errors
- Failure to follow policies and protocols
- Actions resulting in patient harm or danger
- Unsupervised actions outside an approved level of competency
- Completing exams without a doctor's order (immediate dismissal)
- Damage to equipment
- Actions resulting in increased equipment repair/maintenance
- Disruption in department flow
- Actions preventing timely results following exams
- Misrepresentation or miss-utilization of authority level
- Failure to behave appropriately and professionally, within the boundaries of a student and health care professional
- Actions outside of the student and radiographer's scope of practice
- Falsification of records, results, exams, notes, etc. (immediate dismissal)
- Failure to adhere to Radiography code of conduct and standards
- Failure to adhere to the Program clinical policies
- Failure to successfully perform safe radiation protection practices
- Failure to adhere to the requirements for indirect and direct supervision as a student
- Threats to do bodily harm to self, patients, students, faculty, guests (immediate dismissal)
- Violence or physical abuse (immediate dismissal)
- Verbal abuse and harassment
- Sexual harassment (immediate dismissal)
- Abandonment of duty or abandonment of patient
- Any issue that the clinical site or program would deem critical
- Behavior that goes outside the program or social media guidelines, such as violation of HIPAA (immediate dismissal)

Procedure

1. Critical incidents are to be documented, reported to the Clinical Coordinator, and discussed with the student.
2. A critical incident is to be reported on a Critical Incident form by the CI, provided by the Clinical Coordinator
3. Critical incidents require an investigation by the Program Director and/or the Clinical Coordinator
4. Depending on the nature and seriousness, a single incident may be grounds for dismissal from the Program
5. Depending on the results of the investigation, a student may receive a failing grade in a clinical affiliation course if a critical incident has occurred.

EDUCATIONALLY
VALID CLINICAL
EXPERIENCES

The A.S. in Medical Radiography at Loma Linda University has process in place to provide timely, appropriate, and educationally valid clinical experiences to all students admitted to the program. The following narrative describes how this will happen.

Sufficient Competency Achievement

Students will have sufficient access to clinical settings that provide a wide range of procedures for competency achievement including mobile, surgical, and trauma examinations. Clinical settings may include hospitals, clinics, specialty/imaging centers, orthopedic centers, and other facilities. Students will be provided the opportunity to complete required program competencies during clinical assignments, during the 1,850 hours of clinical affiliation.

Non-discriminatory Clinical Placement

Clinical placement is non-discriminatory in nature and solely determined by the program. We determine clinical placement on a number of factors, such as where the student lives during the program, where they plan to live after the program, the strengths of the student, the unique strengths of the clinical site, to name a few.

Students as Employees

Our clinical education plan assures that activities are educationally valid and prevents the use of students as replacements for employees. The maximum number of students assigned to a clinical setting is supported by sufficient human and physical resources. The number of students assigned to the clinical setting does not exceed the number of clinical staff assigned to the radiography department. The student to radiography clinical staff ratio is 1:1; however, it is acceptable that more than one student may be temporarily assigned to one technologist during uncommonly performed procedures.

Assignment to Advanced Imaging Modalities

Students assigned to advanced imaging modalities, such as computed tomography, magnetic resonance, angiography, and sonography, are not included in the calculation of the authorized clinical capacity (unless the clinical setting is recognized exclusively for advanced imaging modality rotations). Once the students have completed the advanced imaging assignments, the program must assure that there are sufficient clinical staff to support the students upon reassignment to the radiography department.

Other Task Assignment

The utilization of clinical assignments such as file room, reception area, and patient transportation must be limited, and considered minimal.

Evening Rotations

Students do participate in clinical education during evenings and/or weekends, but:

- A students' clinical clock hours spent in evening and/or weekend assignments must not exceed 25% of the total clinical clock hours.
- The program total capacity is not to be increased through the use of evening and/or weekend assignments.

Operational Hours

The JRCERT defines the operational hours of traditional programs as Monday - Friday, 5:00 a.m. - 7:00 p.m. There are times when an evening shift will go past 7 p.m., such as to 9 p.m. Students can complete their clinical time during these later hours as long as this schedule is not the routine schedule throughout the entire length of the program. The LLU program does not exceed 25% of the total clinical clock hours when scheduling students in the evening.

❖ Meets the requirements for JRCERT Standard 1.3.

**CLINICAL
CONDUCT**

Removal from a Clinical Site

If a clinical site asks to have a student removed from a clinical site for reasons that are considered serious and valid, such as causing harm to a patient, the student may have dismissed themselves from the Program. **Until the situation is investigated, the student will be suspended from clinic, but will remain in didactic classes.** If the student is asked to leave a clinical site due to incompatibility for any reason, the department will do all they can to find a new clinical assignment. **If a new clinical site cannot be located, the student may be removed from the Program.** Once a full investigation is conducted regarding the removal from the clinical site, the student could receive a failing grade for the incident and the removal from the site. This decision is at the faculty discretion. Removal from a clinical site or dismissal from the program for any reason could result in a failing grade for a clinical affiliation course, and possibly for all courses in the quarter, depending on the circumstances. An investigation and temporary suspension will occur to determine how to move forward.

Clinical Hours

All students are to attend clinic during the hours that they are scheduled. Be punctual. If you are going to miss a clinical day, please notify your CI and document the missed day in your time log and asmrtimeoff@llu.edu. If you need to contact the Program because of an emergency, please contact the Clinical Coordinator at 909-558-4931. A no-call-no-show could result in probation. See time and attendance policy within this document.

Work Needs

It cannot be assumed that clinical hours will be adjusted due to your personal work requirements; clinical hours are to take priority over work hours. Any changes to the clinical schedule are to be made in writing and approved with a signature by the Program's Clinical Coordinator and Program Director.

C L I N I C A L
E V A L U A T I O N

Clinical evaluation is an important part of your clinical education. Not only does the evaluation provide the student with feedback regarding clinical progress, it serves as a qualifying element for successful completion of the Medical Radiography Program.

The Medical Radiography Program is a competency-based Program. These competency evaluations are divided into the following basic categories by the ARRT:

1. CHEST and THORAX
2. UPPER EXTREMITY
3. LOWER EXTREMITY
4. CRANIUM
5. SPINE and PELVIS
6. ABDOMEN
7. FLUOROSCOPY STUDIES
8. SURGICAL STUDIES
9. MOBILE STUDIES
10. PEDIATRICS (age 6 or younger)

Comps can only be given by an ARRT Board Registered Radiologic Technologist with 2+ year's experience.

Clinical Grades

Clinical grades are given as letter grades.

Grading for Clinical affiliation is based on a combination of competency scores, behavioral evaluations, CI input, and the Program's site visitor evaluation.

Failure to hand-in the required documentation or complete clinical hours for the quarter could result in an unsatisfactory clinical grade. It is the student's responsibility to be sure all comps for the quarter have been turned in.

Academic or Program probation could impact a clinical grade.

Removal from a clinical site could result in a failing clinical grade.

When to Start Comping

Clinical competencies are required starting with Winter quarter during the first year of the program. A student is required to complete a minimum of 3 exams before being eligible to proceed with their pre-competency. When the student feels that they are able to do the pre-competency exam independently with minimal errors, they should approach the Clinical Instructor or supervising technologist and request to be tested. If the student completes the pre-competency and is signed off, then they may proceed to the initial-competency.

There is no set order for completing your competencies. The order that you complete them will depend on where your rotation is in the facility.

Clinical competencies should not be considered until the Clinical Instructor or supervising technologist has determined that the student can perform the exam independently under normal circumstances.

Understand that many clinical sites have slow times and that you need to complete competencies when they are available. Some of the mandatory and especially the elective exams can be difficult to acquire due to the infrequency of the exam being requested. It is important that you complete them when they are available.

What Does it Mean to Comp?

If a student has successfully completed a competency, it will be evidence that they are competent in that exam and are then allowed to complete additional exams.

Four Parts to a Comp

Each student's clinical performance will mainly be accessed through the use of clinical competency evaluations. The evaluations are divided into four parts:

1. Observed Exams (Each one to receive an initial from involved technologist) (no effect on grade)
2. Pre-Comp 1 (Must complete before advancing to initial comp) (Requires signature of Tech)
3. Pre-Comp 2 (This is sometimes required based on the exam)
4. Initial competency (counts towards clinical grade)

Each quarter the student must achieve a certain number of competencies and points. The student may select the competencies that they will complete according to their rotations.

Following the completion of a pre-competency evaluation, the student may elect to be evaluated for the initial competency. As with the pre-competency exam, the initial competency must be evaluated under direct supervision by the designated supervising technologist.

The evaluation for each observed exam, pre-competency and initial competency exam is broken down into the following components:

Evaluation of requisition & patient assessment	Anatomical part(s) & alignment
Room readiness	Overall speed & efficiency
Patient care and management	Radiographic technique
Equipment operation	Image identification & evaluation
Positioning skills	Number of images appropriate for exam
Radiation protection	
Imaging processing (CR & PACS)	
Patient Communication	

Initial and Continuing Competencies

The student must complete 46 initial competencies by the end of the Program, divided by quarters. The minimal number of initial competencies are to be completed each quarter.

A second category of competency is called continuing competencies, which will be required by the student during the last two quarters of the clinical Program in addition to the initial competencies.

The Clinical Instructor will decide and assign the four continuing competencies during winter and spring quarters. Four (4) are required during the winter quarter and four (4) during the spring quarter. The student must complete eight (8) continuing competencies by the end of the Program. The ARRT (arrt.org) controls the most up to date list of clinical competency requirements

Fall	1 initial competency
Winter	3 initial competencies (4 min. total)
Spring	7 initial competencies (11 min. total)
Summer	14 initial competencies (25 min. total)
Autumn	11 initial competencies (36 min. total)
Winter	11 initial competencies + 4 continuing (51 min. total)
Spring	<u>5 initial competencies + 4 continuing (60 min. total)</u>
Total	52 initial competencies + 8 continuing (60 total comp. + cont.)

If a student completes more than the minimal number of competencies in any quarter, the additional comps will be carried forward and count towards future quarters.

The ARRT requirements effective Jan 2017 require:

- Ten mandatory general patient care activities;
- 37 mandatory imaging procedures;
- 15 elective imaging procedures selected from a list of 34 procedures;
- One of the 15 elective imaging procedures must be selected from the head section; and
- Two of the 15 elective imaging procedures must be selected from the fluoroscopy studies section, one of which must be either upper GI or contrast enema.

Rotation Schedule

Each clinical affiliate may have several students training at the facility during the 21-month clinical phase of the Program. A rotation schedule will be available to the student showing areas of training for a given week. This will afford the student practice and training in all areas of Medical Radiography deemed necessary by our accrediting body.

The students will be rotated through the different areas of the department so that only one student will be assigned to an area at one time (unless the area can handle more than one student).

Since the students will be assigned to different areas at different times during the clinical phase, no student will acquire the same experience during the same quarter of the year.

At the completion of the 21 months, all students will have rotated through the same areas. Therefore, during some quarters of the clinical phase the student will be in areas where they will have more or less opportunity to acquire clinical competency evaluations than during other quarters.

The student must be aware of their rotation schedule so that during quarters in which they have ample opportunity to acquire clinical competency evaluations that they take advantage of this opportunity. Excess completed competencies will carry over to the following quarter. This should insure that the student does not fall short of the minimum number of competencies for any one quarter.

Clinical Performance Form

The quarterly Clinical Performance form looks at the areas of a student's behavior indirectly associated with those involved in performing an exam. It evaluates the student as an overall person and how their behavior affects their ability to function effectively as a student.

Areas that are examined are:

Initiative (self-starter)	Ability to repeat previously-learned skills
Attitude & professional conduct	Problem solving / Critical \ thinking skills
Teamwork (ability to work with others)	Self-confidence
Patient management skills	Dependability & follow-through
Communication skills	Consistent progress
Quantity of work	Appearance
Quality of work	Time and Attendance
Ability to follow directions	
Organization & work flow	

One behavior evaluations are required each quarter. The behavior evaluation is to be completed by the Clinical Instructor or the supervising technologist that the student worked with during that month. These evaluations are combined to yield a percentage for this aspect of the overall clinical grade for the quarter

Self-Evaluations

A self-evaluation str to be turned in once a quarter. Once the self-evaluation is done, the student is to discuss it with the CI prior to turning the form in. Turning a monthly Behavior Evaluations and a self-evaluation each quarter is important to your clinical grade.

Clinical Hour Sheets

Clinical Hour Sheets are due at the beginning of each month for the previous month. It is strongly recommended that time sheets are filled out daily. Time sheets must be legible. They will be filled out completely including the daily hour total and signed by the Clinical Instructor. Turning in your hour sheets is important to your clinical grade.

TRAJECSYS
ONLINE
SOFTWARE

Students will purchase a subscription the Trajecsys as a part of their initial clinical orientation course RTMR 202 in Fall of Y1. This resource will be used in each of the clinical affiliation courses in the program to track attendance, comps, evaluations, procedure counts, and allow communication in real time to the entire educational team. Students are responsible for making sure they keep their time log up to date with IN/OUT IN/OUT (2 pairs of clocks) each day that includes start of shift, lunch, and end of shift. Grade reduction will be made based on the clinical syllabus if there are too many manual clock exceptions within a quarter based on number of days in clinic.

CLINICAL
RADIATION
PROTECTION
RULES

The following safety rules for dealing with ionizing radiation during hospital observation and clinical education have been established for the protection of the patient, health care personnel, and Radiologic Technology students. These rules are a combination of State and Federal regulations and/or laws. These rules are mandatory and any exception must be reported to the onsite Clinical Instructor and Clinical Coordinator as soon as possible.

- **A dosimeter is required for all Radiography students.** This badge is to be properly placed and worn at all times during both the observation and clinical education phases. Failure of the student to wear a dosimeter during clinical observation and education will result in the student being dismissed from the clinical assignment and charged sick time until the badge available to be worn.
- When wearing a protective apron, the dosimeter must be placed outside the apron, at the neckline. A body icon on the dosimeter will indicate where the badge is to be worn.
- All dosimeters are to be turned in at the end of each month, and exchanged for a new badge. If you do not receive a badge each month, please notify the Administrative Staff in the Program.
- Avoid wearing the badge while radiographic procedures are performed on you. Do not place the badge in direct exposure to radiation.
- Avoid exposing your dosimeter to excessive heat, cold, or moisture.

- If the badge is lost, damaged, or possibly exposed to high doses of radiation while the badge is being worn or not, the student is to notify Program Administrative Staff, who will then notify the Office of Radiation Safety.
- Dosimetry results are sent to the Program on a monthly basis. Students can view their own radiation exposure results by contact the Administrative Staff for the Program. **Within 10 days of receipt of the prior months report, students are to view and initial their readings along with exchanging for the next months badge.**
- State regulations require that the exposures be kept low as reasonably achievable and must not exceed 5 rem/year. If a student's exposure exceeds 2% of the annual limit, the Office of Radiation Safety will send the student an "ALARA" memo to remind the student of exposure reduction methods.
- If exposure exceeds the annual legal limits, it is automatically reported to the State as an overexposure.
- Pregnant students are encouraged to declare pregnancy. A second "fetal badge" is provided and to be worn as specified by the icon on the badge, at the waistband. Students who will be wearing a fetal badge will receive training on badge usage, as determined by the Office of Radiation Safety.
- If a badge must be replaced, the first replacement is \$5, the second replacement is \$10, and the third replacement is \$15.
- **If you are leaving the program, you may request for the Administrative Staff to provide you with your dosimetry report.**
- **When an x-ray exposure is about to be made, students must:**
 - Leave the room, or
 - Get behind the lead shield, or
 - Wear the appropriate protection, such as during from surgery, portable exams, and fluoroscopic work.
- Students **must not hold or support** a patient during exposure, nor are you to hold or support a image receptor during exposure, per RHB policy. A family member should be the first to hold a patient. The nursing staff is second, and the rad tech employee is third.
- Students are not to observe the patient during exposure from an adjacent room or hall unless through a protective lead glass window. Students must not "peek" around a door or through a crack between door and wall.
- During an exposure or procedure, students are not to place themselves in direct line with the central ray, even though they are wearing a lead apron. Additionally, when walking in the hallways, students are not to pause in direct line with the tube or radiographic table when it is being used.
- Under no circumstances are students to permit themselves, or any other human being, to serve as "patients" for test exposures or experimentation.
- If, during fluoroscopic procedures, a student remains in the radiographic room, the following will must take place:
 - A lead apron must be worn at all times. If a lead apron is not worn, the student must remain behind an adequate lead protective shield.
 - The dosimeter must be worn above and outside the lead apron.
 - Students must stand as far from the patient and tube as possible, consistent with the conduct of the examination.
 - When practical, the student should stand behind the radiologist.
 - Students must wear lead gloves if proximity to the patient and/or tube dictates the use.

- During the orientation periods, students are not to actually make exposures on patients unless specifically asked to do so by the supervising technologist.
- Students may assist by helping patients onto tables, etc., but only under direct supervision of a staff technologist.
- When it is felt a student is competent to do so, a student may make exposures on patients, but only under the direct supervision and observation of a staff technologist. (This means that the staff technologist must be observing the student and the patient during exposure.)
- During the clinical phase of the Program, when the student’s experience equals the state requirements* and the student is permitted to make exposure on patients alone, students still require Direct Supervision by a staff technologist if the student is requested to repeat an unsatisfactory exam.
- With permission of the supervising staff technologist, student may make test exposures on inanimate objects. In so doing, all radiation safety rules must be followed as well as tube safety factors, etc.
- **When observing radiographic procedures in surgery and bedside portables:**
 - A lead apron must be worn.
 - A dosimeter must be worn at the neck line of the lead apron.
 - The student is to stand as far from the patient and tube as practical, and so that the central ray is pointing away from the student’s body.
 - Observe all regulations that apply to work in surgery, such as preserving sterile fields, wearing surgical garments, etc. (The staff technologist will provide details.)
- Before making exposures on patients students shall observe State and Federal regulations and /or laws regarding the use of ionizing radiation on patients. Permission to make actual exposure on patients shall be determined by:
 - The opinions of the onsite Clinical Instructors and the Clinical Coordinator.
 - The opinion of the supervising Radiologic Technologists.
 - A student’s own feeling of security and competence.
 - If a student is in doubt about practical procedures or practices regarding radiation protection, the student is to contact the onsite Clinical Instructor or the Clinical Coordinator for clarification or instructions.

D I R E C T A N D
I N D I R E C T
S U P E R V I S I O N

The primary responsibility of the Clinical Instructor is the supervision of student radiographers during the clinical phase of their education. Until a student achieves and documents competency in any given procedure, all clinical assignments shall be carried out under the direct supervision of qualified RT and CRT radiographers. There are two types of supervision: direct and indirect.

JRCERT Standard 4.4 Assures that medical imaging procedures are performed under the direct supervision of a qualified radiographer until a student achieves competency.

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

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

Students must be directly supervised until competency is achieved.

LLU-ASMR Interpretation – Students **MUST** receive direct supervision for ALL exams until the student achieves competency.

JRCERT Standard 4.5 Assures that medical imaging procedures are performed under the indirect supervision of a qualified radiographer after a student achieves competency.

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

LLU-ASMR Interpretation – Students MUST receive indirect supervision for ALL exams until the student is a ARRT certified technologist. Students MUST always have supervision immediately available in an adjacent room or location, where a certified/licensed radiographer can immediately respond when the student needs help. This means that students are to have immediately available help in OR, portables, ER, the department, and on an inpatient unit. In an OR situation, a student MAY be in the room by themselves ONLY IF the tech is right outside. If the tech is in an OR exam in the next room and is not available to the student for “immediate” help, the student MUST REMOVE themselves from the situation until a tech can be immediately available.

Assessment and Accountability: If a clinical site or student is found to be out of compliance with these JRCERT Standards, the students will be removed from the clinical site for a minimum of two weeks, or until a site can return to being in compliance with these JRCERT Standards.

It is the responsibility of the Clinical Instructor to review these standards with the technologists at each LLU-Clinical Affiliation at the beginning of each calendar year.

The Program will gather signatures of CIs, Students, and licensed technologist to show awareness of the policy, that it has been reviewed at least annually with each site.

Please notify the CC & PD immediately if you feel like this policy is not being followed at your site.

S U P E R V I S I O N
F O R R E P E A T
E X A M S B Y
S T U D E N T S

JRCERT Standard 4.6 Assures that students are directly supervised by a qualified radiographer when repeating unsatisfactory images.

Explanation: The presence of a qualified radiographer during the repeat of an unsatisfactory image assures patient safety and proper educational practices. A qualified radiographer must be physically present during the conduct of a repeat image and must approve the student’s procedure prior to re-exposure.

C O N F I D E N T I A L
P H I & H I P A A

Confidentiality has become an area of concern by the patient and the facility. Patients have the right to confidentiality of their chart and records, including images and related items. The Health Insurance Portability & Accountability Act (HIPAA) has set the standards for patient confidentiality. With digital storage and computer access, it makes information accessible to many people, those who have been given permission to view the patient’s information, and those who by skullduggery find the information illegally. In any case it is our duty to follow the confidentiality policy of the facility where you are placed.

All students are required to maintain the confidentiality of patient information obtained during the clinical or instructional experience at the Facility or Clinical Site. All information obtained from patients, their records or computerized data is to be held in confidence and no copies of patient records, images, etc., shall be made without prior permission. It shall be required of students and

that they not identify patients in papers, reports or case studies without first obtaining permission utilizing the patient confidentiality policies and procedures of the Facility.

This means that the use of Computer generated stickers are not appropriate to use and place on the clinical competencies. Also, be aware that your voice travels down the halls and around corners. There is the desire to talk about interesting patients and exams. Make sure you are not in hearing range of other patients or family. Do not discuss patients or exams in the elevators, during lunch in the cafeteria or any place where someone might overhear what you are talking about.

Students are not to post photos of patients on social media sites.

Students who violate the HIPAA or patient confidentiality policy of the program are subject to disciplinary action, which could include probation, suspension, and dismissal from the program. Violation of the HIPAA policy could also result in a failing grade in the clinical affiliation course, and possibly for all courses in the quarter, depending on the circumstances.

STUDENT
ACCIDENT OR
INJURY
SUSTAINED
DURING
CLINICAL
TRAINING

Students who incur a training related injury or illness during clinical rotation shall immediately:

1. Notify the Clinical Instructor at the clinical site and the Department of Radiation Technology, School of Allied Health. (909) 558-1000, Ext. 82368.

Students need to be expected to go to the Emergency Room at the clinical site. In some cases, students may be directed to the ER at Loma Linda University Medical Center in most circumstances involving student injury or exposure to certain illnesses or chemicals.
2. Before the student leaves the clinical site, the Clinical Instructor/Department Head will determine if the injury or illness is:
 - a. Minor, requiring simple first aid. First aid injuries include minor uncontaminated cuts, bruises, abrasions, and uncontaminated needle sticks.
 - b. More serious, requiring documentation on an incident report form and temporary release form training duty for medical assessment and treatment. More serious injuries include contaminated needle sticks and splashes, among other serious injuries, and require an incident report form.
3. If a more serious injury is sustained, fill out an Incident Report Form. Make two copies of the Incident Report Form before the student leaves the area. Original: Student to take to affiliate institution designated employee care area.
One copy: for Clinical Instructor
One copy: for Clinical Coordinator, SAHP, LLU
One copy: for LLU/LLUMC Risk Management

Students should be sent to the affiliate institution department that usually handles employee work-related injuries. The original copy of the Incident Report form and the Student ID should go with the student. Students report to the affiliate institution Emergency Department for major medical injuries.
4. At the designated Student care area:
 - a. Present a copy of the incident report.
 - b. Show Student ID, Make sure department realizes that this person is a student and not an employee.
 - c. Receive medical assessment and treatment. Express Care at LLUMC will provide follow-up care and treatment. Injuries/illnesses other than contaminated needle sticks may be referred to Student Health for treatment.
 - d. Obtain clearance for student to return to clinical training.

All bills for student medical care, with a copy of the incident report attached, should be submitted to:

Department of Risk Management
Attention: Student Health Insurance
PO Box 1770
Loma Linda, CA 92354

Contact Risk Management, Student Health Insurance at (909) 558-4386. All costs of initial and follow-up health care are paid 100% by Student Health Insurance, if ordered by Express Care and/or authorized treating physician, whether it happens at LLUMC or at an affiliate facility. If follow-up care is required post-graduation, a copy of

the incident report must accompany billing from Express Care. These items are then forward to SAHP, attention: Dean's Office. The Clinical Instructor/department head will send/Fax 2 copies of the incident report form to the Program Director, Will Edmunds, in the Department of Radiation Technology, Medical Radiography, School of Allied Health Professions, Loma Linda University , Nichol Hall, FAX (909) 558-4291. The Program Director sends copies of the incident report to Risk Management, attention: Student Health Insurance. A copy will be kept in the Department Student Injury / Accident / Illness file. Copies are not to be placed in the student file.

Chapter
10

University Policies

This is a general overview of some of the major University Policies. Please refer to the LLU website for the latest and most up to date version of these policies.

GENERAL
PRINCIPLES OF
PROFESSIONAL
CONDUCT

The health-related professions are proud of their traditional reputation for honesty and integrity. These virtues are essential for each member of the health-related professions if these professions are to continue to maintain their position of trust within our society. The establishment of codes of ethics, peer review committees, ethics committees, and other regulatory and/or advisory groups within the profession indicates a vital and continuing concern with maintaining high standards of integrity in the health-related professions.

Please refer to the Student Handbook for further discussion on professional conduct.

Loma Linda University articulates principles of conduct. These principles provide a means of educating and training future health-related professionals in areas of professional ethical activity, and are intended to aid in developing an ethical and moral awareness which will help the individual serve the public and the professions in an enlightened manner. In addition, the University seeks to broaden students' ethical perspectives by including a religious perspective not always found in ethical codes. By adding a spiritual foundation to the profession's ethical framework, it is anticipated that the professional's ethic will be a more completely informed ethic, one which not only reflects a proper concern for our fellow human beings, but one which also reflects an intimate relationship with our Creator and God.

Students must strive to conduct themselves at all times in a manner representative of their profession and School. Students share responsibility for maintaining an environment conducive to learning. Any activity which interferes with the learning processes vital to the practice of the chosen profession or which violates the integrity of the profession as a whole is not acceptable.

Violations to Professional Conduct

The following list is illustrative of the type of conduct which violates the University's expectation for student conduct and is cause for discipline up to and including dismissal. It is not an exhaustive or all-inclusive list, but is stated here for purposes of illustration.

1. Failure to respect individual rights. This includes (a) physically or verbally abusing any person or engaging in conduct that threatens or endangers the health or safety of others; (b) obstructing or disrupting the study of others; the performance of official duties by University personnel; teaching, research, disciplinary, administrative, or other

- functions of the University, or other authorized activities on University premises; and (c) slander and libel.
2. Disrespect for individual and University property including theft and vandalism.
 3. Refusal or failure to remediate documented unsatisfactory performance.
 4. Personal conduct which is incompatible with the standards of morality and propriety of the Seventh-day Adventist Church.
 5. Overt disharmony, subversion, or violation of the philosophy, objectives, and policies of the University, including those delineated in the Student Handbook.
 6. Gambling or betting.
 7. Failure to obey, honor and sustain civil law.
 8. Arrogance
 9. Patient abuse
 10. Violation of the Alcohol and Tobacco Policy, Drug-Free Worksite Policy, Research Misconduct Policy, Computer abuse Policy, Sexual Standards Policy, Sex Discrimination Policy, Policy Prohibiting Sexual Harassment, Weapons Possession Policy, or other policies of the University. **(Student Handbook)**

Professional Conduct with Patients

Professional ethics and the Christian understanding of the value and importance of all people should be reflected in the relationships students develop with each of their patients.

While clinical activities will rightfully be focused on learning, the patient's needs should always be the primary concern. Any activity which places the needs of the clinic student ahead of the needs of the patient is not acceptable.

Altruism must be learned and practiced from the earliest moment of the student's Program and reinforced in all aspects of the professional training. The well-being of patients subject to our care should always be of highest concern and patient abuse will not be tolerated.

Patient abuse includes any behavior or act which might jeopardize the health or well-being of a patient. Examples of patient abuse include but are not limited to:

- Unsupervised and/or unauthorized treatment of a patient
- Treating a patient while the student is under the influence of alcohol or drugs
- Failure to comply with clinic policies regarding patient treatment and financial arrangements
- Failure to comply with accepted protocols for infection control or transmission of disease
- Refusal to properly treat any patient for reasons of sex, race, color, creed, national origin, financial status, handicap, or disability
- Failure to report an observed incidence of patient abuse by fellow students
- Offering or asking for financial inducements related to the use of patients during state or regional board examinations
- Patient abandonment
- A breach of confidentiality as required by law or University policy concerning patient records or data, research data, or University procedures in which the participants are promised confidentiality

APPEAL AND
GRIEVANCE
PROCEDURE

A student who wishes to appeal the dean's decision regarding academic discipline may use the procedures outlines in the Student Handbook.

❖ Supports JRCERT Standard 1.6

STUDENT
DISABILITIES &
ACCOMMODATIONS

Section 504 of the Rehabilitation Act of 1973 states that: “No otherwise qualified person with a disability in the United States ... shall, solely by reason of ... disability, be denied the benefits of, or be excluded from participation in, or be subjected to discrimination under any Program or activity receiving federal financial assistance.”

Loma Linda University (“LLU”) supports the integration of all qualified individuals into the Programs of the University and is committed to full compliance with all laws regarding equal opportunity for all students with a disability. At LLU, students, Faculty, deans or dean’s designee, department chairs, and the Grievance Committee on Students with Disabilities all play a joint role in ensuring equal access to campus facilities.

It is the policy of Loma Linda University to fully comply with the provisions of the Americans with Disabilities Act and section 504 of the Rehabilitation Act. Requests for accommodations should be made to Mr. Chuck Dart, Assoc. Dean of Student Affairs, School of Allied Health Professions (Cottage 60), accompanied by appropriate documentation demonstrating that he/she is qualified as defined by the Americans with Disabilities Act.

Refer to the Student Handbook for a complete description of this policy.

STUDENT
SERVICES

Department of Security

The Department of Security maintains a communications office, open 24 hours a day, 7 days a week, located in the basement of the Medical Center in Room B-404. The administrative section of the department is located on the campus at 24690 University Avenue (on the Northwest corner of Campus and University) and is open Monday through Thursday between 0730 and 1800 hours, and on Friday between 0730 and 1400 hours.

Refer to the LLU website and the Student Handbook for more information.

The Department of Security patrols campus buildings, parking lots and ramp, and all other University grounds. Patrols are conducted by officers in marked patrol units, on bicycle and from time-to-time by officers on foot. The patrols are supplemented by closed circuit television cameras strategically located throughout the Medical Center and in some campus areas. Patrols of the campus are conducted 24/7.

The Department of Security maintains security officers, bike patrol, and K-9 teams on staff. Security officers provide escort for students, patients, visitors,

and employees to any destination on campus during night hours and in special situations as may be required. Call extension 44320 for a security escort. If you choose not to use a security escort, use the buddy system; never walk alone after dark.

Safety and Security Reference Numbers

Security, Fire, Medical Emergency	911 (Emergency)
Security Department - Service And Assistance	44320 (Non-Emergency)
Security Department - Administrative Office	44319 (Non-Emergency)
Security Department - Rideshare / Carpool	47433 (Hotline Number)
Risk Management	44999 (Safety Line)
Radiation And Hazardous Materials Safety	44913 (MSDS Hot Line)

Reporting Suspicious Activity

In order to make the University and Medical Center a safe community in which to live, study, and work, it is essential that all suspicious persons or activities on campus be reported to the department of security at extension 44320.

Vehicles

The department of security is responsible for enforcing the Loma Linda University traffic and parking regulations and the State of California Vehicle Code, as they apply to moving and stationary vehicles, pedestrians, and animals on the campus.

The Loma Linda University traffic and parking regulations are enforced under Section 21113 of the California Vehicle Code.

P A R K I N G
P E R M I T S

The Department of Parking & Traffic is responsible for all parking, parking permits, enforcement of regulations and traffic related issues for the organization. The security department will no longer be issuing parking permits. This will be an online registration process. <https://lluparking.lprpermit.com>

S T U D E N T
H E A L T H
S E R V I C E S

Student Health Service is committed to providing quality health care to the students within our University community. Our physicians and staff are dedicated to promoting a lifestyle that encourages a balance of physical, spiritual, emotional, and social well being.

Refer to the LLU website and the Student Handbook for more information.

Location

Student Health Service
Center for Health Promotion
Evans Hall Room 111
24785 Stewart Street
Loma Linda, CA 92350

Clinic hours

Monday - Thursday -- 8:00 a.m. - 12:00 p.m., 1:00 p.m. - 5:00 p.m.
Friday -- 8:00 a.m. - 1:00 p.m.

Contact information

Phone: (909) 558-8770
Fax: (909) 558-0433

Please call to make appointments. Current Risk Management insurance card may be required. Hours may vary during holidays.

Services (All services are confidential)

- Primary care services
- Immunizations
- Sports medicine clinic
- Women's health services
- Health education
- Counseling or referral to counseling services
- Referral to specialty services--as indicated
- Health team includes qualified physicians, nurses, and support staff to assist you with your specific needs

Fee

The professional outpatient services rendered in the Student Health Service are covered as a benefit by the student health plan. However, any ancillary services, such as lab work, x-rays, medical supplies, etc., are subject to all student health plan benefits, including deductibles, co-pays, preexisting exclusions, etc. Please refer to the student health plan for further information or call Risk Management at (909) 558-4386.

Emergencies

If there is a serious medical emergency, please go directly to the Loma Linda University Medical Center emergency department.

After hours

All services rendered outside of Student Health Service are subject to deductibles and co-pays in accordance with the student health plan. When Student Health Service is not open--after hours, weekends, and holidays--students can seek medical care at one of the following:

Emergency Department

Loma Linda University Medical Center
(909) 558-4444
Open 24 hours a day
Current Risk Management insurance card is required.

Urgent Care

Loma Linda University Medical Center East Campus

(909) 558-6644

Open 9:00 a.m. to 8:00 p.m. daily

Current Risk Management insurance card is required.

Out of town coverage

Please refer to the Student Health Plan or call Risk Management at (909) 558-4386 for information regarding out-of-town health coverage.

Pre-entrance health requirements

Students planning to attend Loma Linda University are required to fulfill immunization and health requirements. These requirements must be turned in to Student Health Service.

C O U N S E L I N G
A N D H E A L T H
S E R V I C E S

Our mission: Empowerment of students for lifelong personal wholeness

Hours

Monday: 8 a.m. to 6 p.m.

Tuesday: 8 a.m. to 8 p.m.

Wednesday: 8 a.m. to 6 p.m.

Thursday: 8 a.m. to 6 p.m.

Friday: 8 a.m. to 4 p.m.

Fees

- 9 free visits per academic year
- 15 additional visits with \$40 co-payment

About the Counseling Program

- Confidential
- Spiritually sensitive
- Help students find practical solutions to difficulties experienced in personal and academic life
- Competent professional counselors and advocates who are on your side
- Compassion and understanding for you and your needs
- Creative solutions to your problems
- A comfortable environment where you will feel at home
- Centered off campus but easily accessible for you as a student
- Culturally diverse counseling staff
- Getting started in counseling

Services

- Individual therapy
- Couples therapy
- Family therapy
- Premarital therapy
- Psycho educational testing

- Medication evaluation & management
- Counseling for: addiction, relational problems, stress management, test anxiety, anger management, depression, personal adjustment to academic life, adjustment to a new home

Contact Information

(909) 558-6028, on campus extension 66028
11374 Mountain View Avenue, Suite A (Dover Building)
Loma Linda, California 92354

S T U D E N T
A S S I S T A N C E
P R O G R A M

The Student Assistance Program is a second source of help for counseling services. The Loma Linda Student Assistance Program (LLSAP) provides professional and caring assessment and treatment for a variety of personal, family, work, and School-related issues. The LLSAP clinicians will develop a treatment plan that may include free short-term counseling. All LLSAP services are free of charge. If more extensive treatment is appropriate, the client is referred to a community therapist who specializes in the student's area of concern and who is covered by the student's health plan. All information is confidential. Community therapists and LLSAP clinicians will not release information without the written consent of the student, with the exception of matters that fall under mandatory reporting laws. The LLSAP, the only nationally-accredited student assistance Program in California, has provided state-of-the-art services to students since it was established in 1990. Appointments may be scheduled during office hours-on-campus extension, 66050; off-campus telephone, 909/558-6050: Monday through Wednesday, 8 a.m.–5 p.m.; Thursday, 8 a.m.–7 p.m.; Friday 8 a.m.–1 p.m. Additional appointment times may be available upon request. The Program is located in the Hartford Building, 11360 Mountain View Avenue, Suite A, Loma Linda, CA.

S T U D E N T
I N T E R N A T I O N A L
M I S S I O N
S E R V I C E
(S I M S)

Students for International Mission Service (SIMS) is a Loma Linda University Program that exemplifies the University's commitment to global service, incorporating international service opportunities into academic curriculum in order to 1) prepare health professions students for a career of effective global service and 2) promote the health of global communities. SIMS' mission is to provide LLU students with high-quality service-learning opportunities that empower them to become caring, competent, and socially responsible health professionals who value service as a lifelong process. Participants work in underdeveloped areas around the globe in communities with limited or no access to health care and health education.

This Program is right for you if:

- You care about the world around you
- You value service
- You want to experience another culture
- You are open-minded, flexible, and very adaptable
- You are independent and can take initiative
- You are ready to learn

SIMS Programs are designed to help you grow both personally and professionally. SIMS invites you to immerse yourself in another culture, experience health care in a new setting, and deepen your understanding of yourself and the world.

D I S C O U N T
T I C K E T S

Discount tickets are available at the Office of Student Affairs, Student Service Center, 11139 Anderson Street, Loma Linda, CA. No checks, ATM (debit), or credit cards accepted at this time. Students may charge to their student account or pay with cash. For students to charge, they must be currently enrolled and have their student IDs at the time of purchase. Employees pay with cash only. Examples: Disneyland, Car Wash, Magic Mountain, San Diego Zoo, Raging Waters, etc.

L I B R A R Y
S E R V I C E S

The library's mission is to provide students with relevant resources and supportive services to further their academic success, as well as provide them with skills to continue that success as practicing health-care professionals.

Information about the library (hours, borrowing privileges, etc.) and electronic resources are available on the library's Web site library.llu.edu. Computers are provided in the library for accessing electronic resources and any computer with an Internet browser may access available resources.

A log-on ID and password are required for off-campus access to subscription databases. Wireless access to the campus network is available throughout the library. Please visit the Web site and the library.

To ask questions, the campus extension of the reference desk is 44588, from off-campus dial (909) 558-4588. The University identification card is used as the library card and is needed for all library services.

Refer to the Student Handbook for information on all of the library services available on campus.

S E X U A L
H A R A S S M E N T

Sexual harassment is reprehensible and will not be tolerated by the University. It subverts the mission of the University, and threatens the careers, educational experience, and well-being of students, Faculty, employees and patients.

Relationships involving sexual harassment or discrimination have no place within the University. In both obvious and subtle ways, the very possibility of sexual harassment is destructive to individual students, Faculty, employees, patients and the University community as a whole. When, through fear of reprisal, a student, Faculty member, employee or patient submits, or is pressured to submit, to inappropriate sexual attention, the University's ability to carry out its mission is undermined.

Sexual harassment is especially serious when it threatens relationships between teacher and student, supervisor and subordinate, or clinician and patient. In such situations, sexual harassment exploits unfairly the power inherent in a Faculty members, supervisor's or clinician's position. Through grades, wage increases, recommendation for graduate study, promotion, clinical priority and the like, a person in a position of power can have a decisive influence on the future of the student, Faculty member, employee or patient.

While sexual harassment most often takes place in situations of a power differential between the persons involved, the University recognizes that sexual harassment may occur between persons of the same University status. The University will not tolerate behavior between members of the University community, which creates an unacceptable environment.

Prohibited Acts

No member of the University shall engage in sexual harassment. For the purposes of this policy, sexual harassment is defined as inappropriate sexual advances, such as requests for sexual favors, or other verbal, or physical conduct of a sexual nature. Harassment is considered to have occurred if:

- (a) Submission to such conduct is made explicitly or implicitly a term or condition of an individual's employment or status in a course, Program or activity;
- (b) Submission to or rejection of such conduct by an individual is used as a basis for an educational, employment or clinical decision affecting an individual;
- (c) Such conduct has the purpose or effect of unreasonably interfering with an individual's academic, work, or clinical performance or of creating an intimidating, hostile, or offensive environment for learning, work or therapy;
- (d) There are inappropriate or unwanted sexual approaches.

The complete policy can be found in the Student Handbook.

JURY DUTY

A student receiving a summons for jury duty should submit a copy of the summons to both the affiliate Clinical Instructor and to the department of Radiologic Technology as soon after it is received as possible. If the student is required to serve, clinical time will be granted for each hour served up to eight hours per day.

If the time served is less than four hours, the student is expected to return to the clinical assignment for the remainder of that day unless the driving distance involved is excessive. Court verification of jury duty served must be submitted to the Program's Clinical Coordinator immediately following the jury duty obligation.

Please do not ask the Faculty or Program Director to write a letter excusing you from jury duty. You may ask the Court for a postponement or to schedule an alternative date for jury duty, if you wish.

The Program can supply the student with a letter verifying their student status, if needed.

FUNERAL
LEAVE

Students will be granted up to three days off in the event of a death in the immediate family or spouse's immediate family.

Immediate family includes spouse, children, parents, brothers, sisters, foster parents and legal guardians. Any additional time needed will be coordinated with programmatic leadership.

Students are advised to discuss their needs with the faculty. It is up to the discretion of the faculty to extend funeral leave for immediate family, and to include funeral leave for other extended members of the family.

Guidelines for the University and School are to be followed. See Student Handbook.

CHAPEL
ATTENDANCE

Chapel attendance is required as a Loma Linda University student. Student must wear their LLU badge at all times, even for taking attendance at the weekly chapel.

In summary, **a student can miss two chapel programs without incident.** If the student misses a 3rd or 4th, the student will need to watch the chapel video and write a report on the program. If the student misses a 5th, disciplinary action will start.

For the School of Allied Health Professions, chapel records are handled through the Associate Dean of Student Affairs for the SAHP.

Refer to the Universities and Schools chapel policy.

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