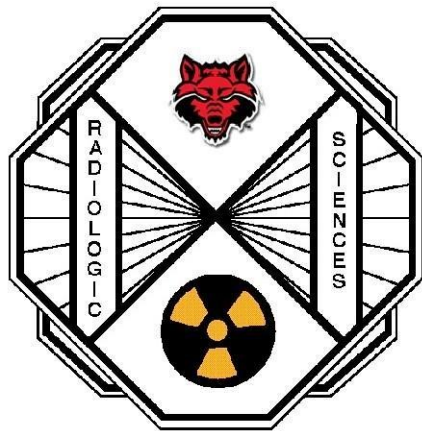


Radiography Program Student Handbook



2023-2024

Welcome

Welcome to the Arkansas State University Radiography Program. It is our sincere hope that you will find our program a rewarding and challenging part of your life. As part of a healthcare team, we are working towards one goal – to provide the best possible care to the patients who we are privileged to serve.

We hope that this handbook will acquaint you with the Radiography Program and provide an understanding of our policies. This handbook should help you realize what is expected of you as a student in a healthcare profession. It is the responsibility of the student to read the entire handbook.

Students enrolled in the Radiography Program are responsible for observing all policies and procedures stated in this handbook, in addition to any rules and regulations which are contained in the A-State Undergraduate Bulletin. Failure to read this handbook does not excuse students from the requirements and regulations contained herein.

Students are expected to adhere to the highest standards of professional ethics during all classroom, clinical, or school related activities. Any infraction of professional ethics will result in disciplinary action according to the Student Handbook and university policy. It is the student's responsibility to know the appropriate policies and procedures for classroom, assigned clinical settings, and other school related activities.

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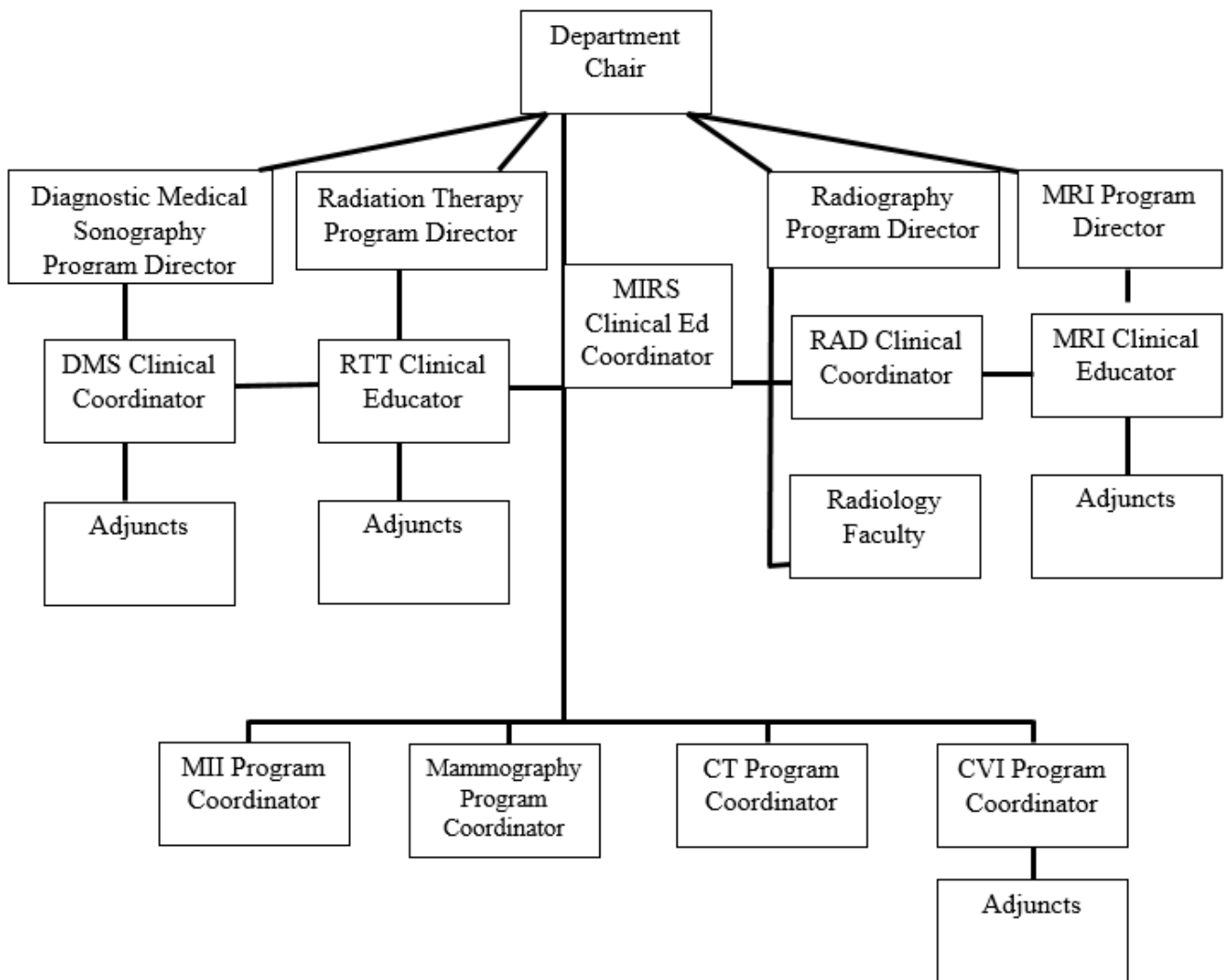
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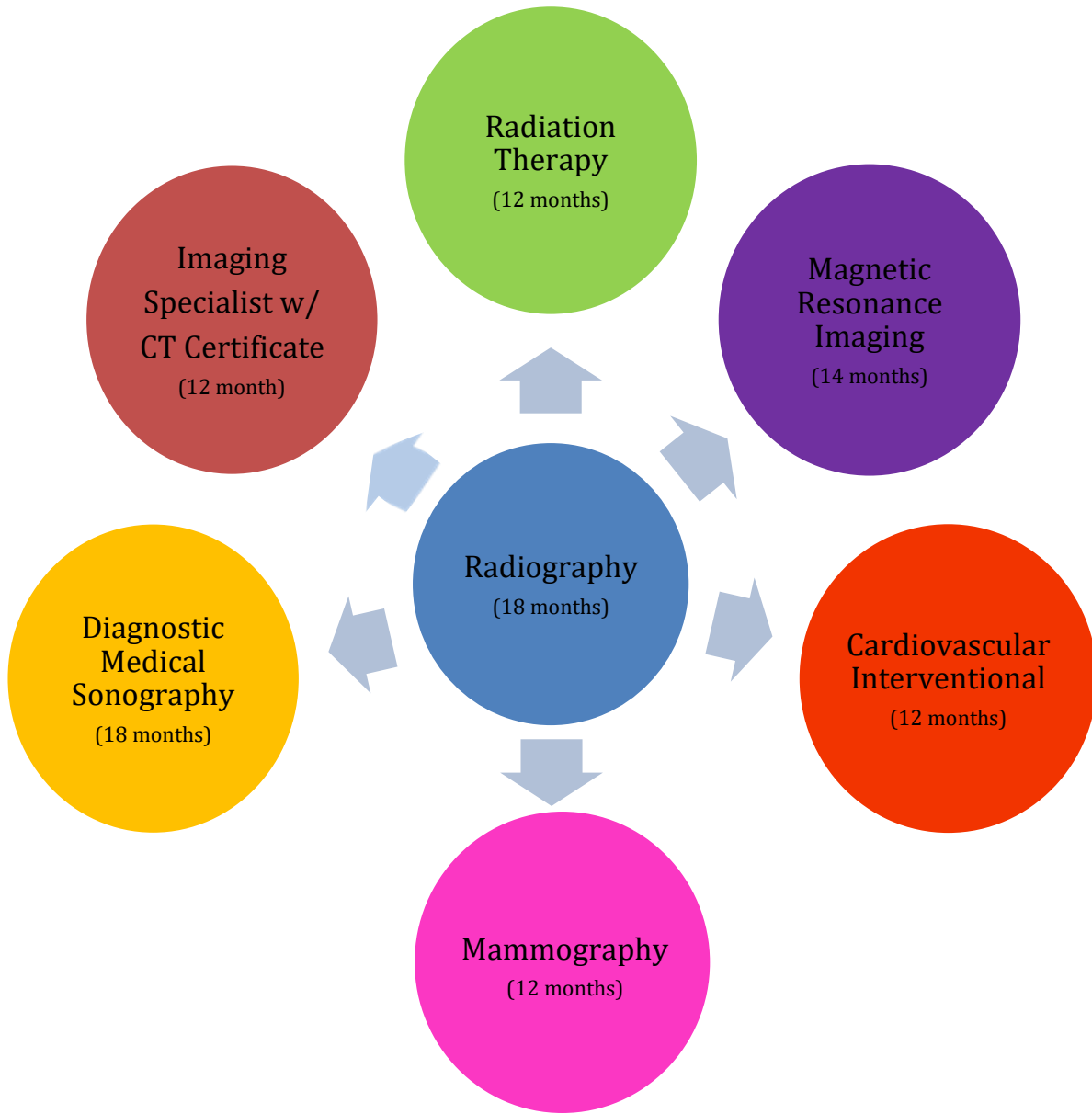
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- Program Website/Twitter: [A-State MIRS](#)

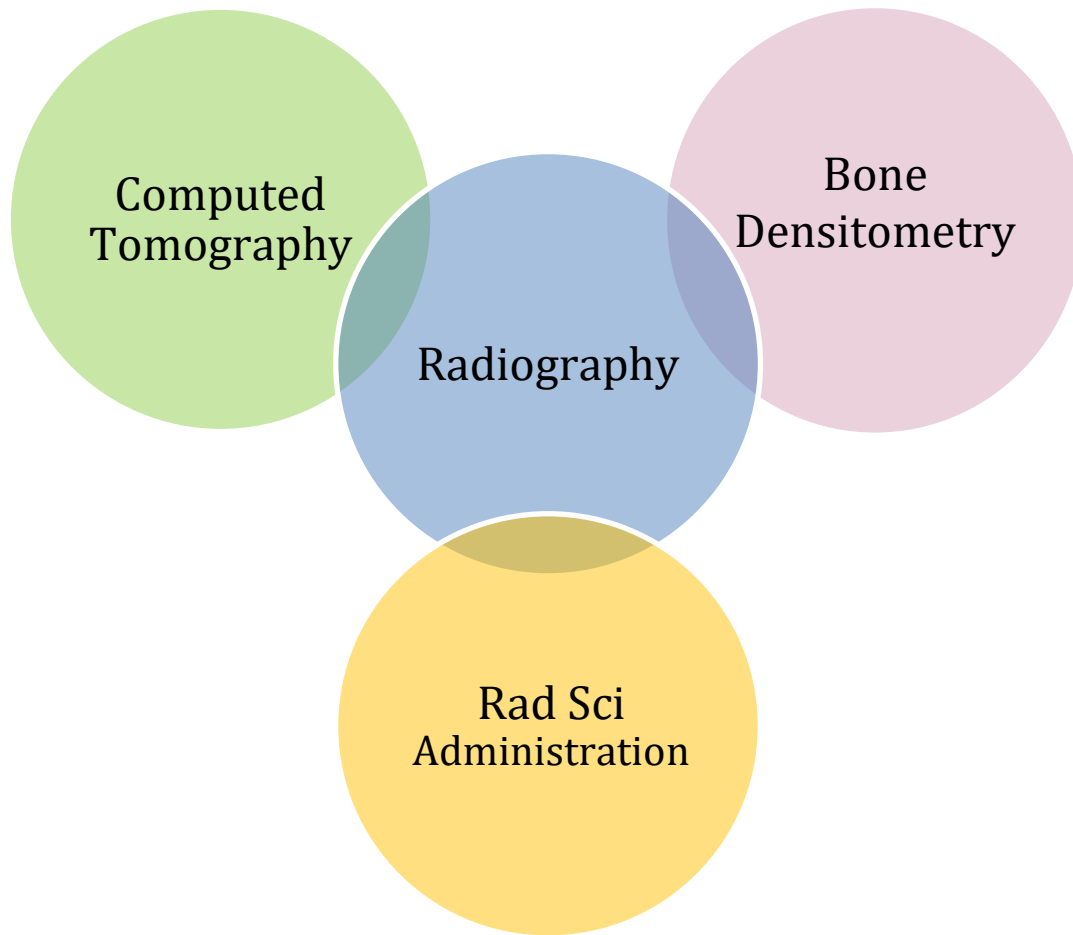
Organizational Chart



MIRS BSRS Flow Diagram



MIRS Certificate Flow Diagram



Mission, Philosophy, and Goals

University Mission

Arkansas State University *educates* leaders, *enhances* intellectual growth, and *enriches* lives.

College of Nursing and Health Professions Mission

The mission of the College of Nursing and Health Professions is to provide quality education to students, graduates and health care providers in a variety of health disciplines. To fulfill this mission we foster collaboration with our larger community in education, research and service. Recognizing its unique position in the lower Mississippi Delta region, the College provides educational programs that are designed to promote lifelong learning based on the expressed needs of its varied constituencies. The College assesses the attainment of this mission in terms of the contributions its graduates make to health and health care in the Delta region and beyond. Approved 2000-2001; revised 2019.

MIRS Department Mission

The mission of the Department of Medical Imaging & Radiation Sciences is to provide comprehensive, multi-skilled education preparing students for entry-level practice into the medical imaging and radiation therapy professions. This mission is accomplished through collaborative education, research, and service efforts with the health care community.

Radiography Program Mission

The radiography program at Arkansas State University exists to produce competent entry-level radiologic technologists for the practice of radiologic technology.

Program Philosophy

The philosophy of the Radiography Program is based on the concept that a curriculum in higher education should include coursework that will help students acquire knowledge, skills and attitudes that will contribute to an understanding of self and world, promote effectiveness in meeting civic, occupational, and personal challenges, enhance appreciation of the range and depth of human knowledge and experience, and encourage the desire and ability to continue learning. Within the boundaries of these precepts, the Radiography Program at Arkansas State University offers professional career preparation in the area of diagnostic radiography.

Program Goals

The goals of the program include personal as well as professional development. The curriculum is designed to develop excellence in all aspects of radiography and to promote an awareness of the patient and his/her unique needs.

Goals	Objectives
Students will be clinically competent	<ul style="list-style-type: none">● Students will provide appropriate patient care● Students will practice proper radiation safety● Students will produce and critique radiographs for quality
Students will demonstrate acceptable problem solving skills	<ul style="list-style-type: none">● Students will adapt varying clinical experiences and equipment● Students will critique images and recommend corrective action for sub-optimal radiographs
Students will demonstrate communication skills	<ul style="list-style-type: none">● Students will demonstrate written communication skills● Student will demonstrate oral communication skills
Students will model professionalism	<ul style="list-style-type: none">● Students will demonstrate professional work ethic● Student will be summarize the value of life-long learning

Code of Ethics

Ethical professional conduct is expected of every member of the American Society of Radiologic Technologists (ASRT) and every individual certified and registered by the American Registry of Radiologic Technologists (ARRT). As a guide, the ASRT and ARRT have issued a Code of Ethics for their members and registrants. By following the principles embodied in this code, Radiologic Technologists will protect the integrity of the profession and enhance the delivery of patient care.

Adherence to the Code of Ethics is only one component of each radiologic technologist's obligation to advance the values and standards of their profession. Technologists also should take advantage of activities that provide opportunities for personal growth while enhancing their competence as caregivers. These activities may include participating in research projects, volunteering in the community, sharing knowledge with colleagues through professional meetings and conferences, serving as an advocate for the profession on legislative issues, high standards of ethics and pursuing professional development opportunities. Radiologic technologists will demonstrate their commitment to quality patient care.

Code of Ethics:

- The radiologic technologist acts in a professional manner, responds to patient needs, and supports colleagues and associates in providing quality patient care.
- The radiologic technologist acts to advance the principal objective of the profession to provide services to humanity with full respect for the dignity of mankind.
- The radiologic technologist delivers patient care and service unrestricted by the concerns of personal attributes or the nature of the disease or illness, and without discrimination on the basis of sex, race, creed, religion, or socio-economic status.
- The radiologic technologist practices technology founded upon theoretical knowledge and concepts, uses equipment and accessories consistent with the purposes for which they were designed, and employs procedures and techniques appropriately.

- The radiologic technologist assesses situations; exercises care, discretion, and judgment; assumes responsibility for professional decisions; and acts in the best interest of the patient.
- The radiologic technologist acts as an agent through observation and communication to obtain pertinent information for the physician to aid in the diagnosis and treatment of the patient and recognizes that interpretation and diagnosis are outside the scope of practice for the profession.
- The radiologic technologist uses equipment and accessories, employs techniques and procedures, performs services in accordance with an accepted standard of practice, and demonstrates expertise in minimizing radiation exposure to the patient, self, and other members of the healthcare team.
- The radiologic technologist practices ethical conduct appropriate to the profession and protects the patient's right to quality radiologic technology care.
- The radiologic technologist respects confidences entrusted in the course of professional practice, respects the patient's right to privacy, and reveals confidential information only as required by law or to protect the welfare of the individual or the community.
- The radiologic technologist continually strives to improve knowledge and skills by participating in continuing education and professional activities, sharing knowledge with colleagues, and investigating new aspects of professional practice.

Source: American Registry of Radiologic Technologists, www.arrt.org

Accreditation

Accreditation is a process of voluntary, external peer review in which a non-governmental agency grants public recognition to an institution or specialized program of study that meets certain established qualifications and educational standards, as determined through initial and subsequent periodic evaluations. The goals of the accreditation process are to protect the student and the public, identify outcomes by which a program establishes and evaluates its assessment policies and procedures, stimulate programmatic self-improvement, and provide protective measures for federal funding or financial aid.

Accreditation is assurance of acceptable educational quality since accredited programs are required to meet national standards established by radiologic technology professionals and communities of interest.

The A-State Radiography program is accredited by the Joint Review Committee on Education in Radiologic Technology (JRCERT).

20 North Wacker Drive, Suite 2850
Chicago, IL 60606-3182
(312) 704-5300
Email: mail@jrcert.org
URL: <http://www.jrcert.org>

There are established standards a program must be in compliance with to achieve accreditation The Standards for an Accredited Educational Program in Radiologic Sciences (JRCERT, October 2013) are as follows:

- **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.

Compliance with JRCERT Standards Policy

The Radiography program strives at all times to be in compliance with the JRCERT *Standards for an Accredited Educational Program in Radiologic Sciences*, effective January 2014, revised October 2013. If an individual believes, at any time, the program is not in compliance with any standard, a complaint can be brought to the program’s attention by using the “JRCERT *Standards* Non-Compliance Allegations Reporting Form” located in the Forms section of this Handbook. The form used is derived from the form used by the JRCERT for direct reporting of allegations.

In order for one to make a non-compliance allegation, one must be aware of the standards. Copies of the detailed descriptions of each standard may be found in the program’s Master Plan of Education located in the program director’s office or located on the official website for the JRCERT.

Upon receipt of the allegation form, the program director will review it, and share it with the program to determine if the non-compliance issue exists. Within ten (10) business days after receiving the complaint form, a meeting will be scheduled with the individual filing the allegation to discuss the complaint. If the complaint is legitimate, the program faculty will develop a plan to bring the situation into compliance. If the party filing the complaint is not satisfied with the results, a meeting will be scheduled with the Department Head to determine if non-compliance still exists. This meeting will be scheduled within twenty (20) days of the original meeting. If the Department Head determines non-compliance is still present, a plan will be drafted to solve the non-compliance issue. If the results of this meeting are still unsatisfactory to the party filing the complaint, a meeting can be scheduled with the Academic Dean for the College of Nursing and Health Professions, and/or the JRCERT.

National Registry

The American Registry of Radiologic Technologists (ARRT) is the only examining and certifying body for radiographers in the United States.

To become a Registered Technologist in Radiography, R.T. (R)(ARRT), you will have to successfully complete the ARRT examination.

The ARRT examination is offered any day after your graduation. You will need to make an appointment to take the examination at your convenience. As a graduate of Arkansas State University Medical Imaging and Radiation Sciences department, it is suggested that you take the examination as soon as you graduate, within two months of your graduation. Examination dates will be scheduled on an individual basis.

One issue addressed for certification eligibility is conviction of a crime, including a felony, a gross misdemeanor, or a misdemeanor with the sole exception of speeding and parking violations. All alcohol and/or

drug related violations must be reported. All potential violations must be investigated by the ARRT in order to determine eligibility. Individuals may file a pre-application with the ARRT in order to obtain a ruling of the impact of their eligibility for the examination. This pre-application may be submitted at any time either before or after entry into an accredited program. The pre-application can be found by contacting the ARRT at:

ARRT
1225 Northland Dr.
St. Paul, MN 55120-1155
(651) 687-0048
www.arrt.org

Arkansas State Licensure

To work as a registered radiologic technologists located in Arkansas, you are required to hold a valid license granted by the state.

Successful completion of the American Registry of Radiologic Technologists (ARRT) examination in radiography and payment of a licensure fee will enable you to work at a facility in the state.

From the time you graduate the program until you pass the ARRT exam, you will be able to work under a temporary license. The temporary license is issued for a period of six (6) months with one (1) renewal of an additional six (6) months. Once you pass the ARRT exam, a copy of your ARRT card must be sent to the Arkansas Department of Health – Radiation Control Section. Graduates are advised to apply for a temporary license regardless of the date they expect to complete the ARRT registry or begin working.

Students engaged in radiologic procedures from an accredited program are exempt from the licensure law while at the Clinical education site (CES) for clinical radiography courses. Students may not perform radiologic procedures at the CES any other time than the scheduled clinical time.

Arkansas Department of Health
Radiation Control Section
Radiologic Technology Licensure Program
Freeway Medical Building
5800 W. 10th
Street, Suite 100
Little Rock, Arkansas 72204

Student Policies

Advising

Each Radiography student will be assigned to a faculty member who will act as his/her academic adviser. Each adviser will have regularly scheduled office hours which are posted and other hours by appointment.

If a student plans to seek employment in addition to carrying a full-time academic load, this should be discussed with his/her advisor. A realistic workload is recommended. Under no circumstances should employment schedules interfere with academic or clinical responsibilities.

Regularly scheduled classroom, laboratory, and clinical activities may not exceed 40 hours per week.

Academic Responsibilities and Standards

Textbooks

Each student is responsible for purchasing the required textbooks before the second meeting of the class. Because the same textbook may be used again in a later course, it is strongly recommended that before selling books, a student consult the Radiography faculty who will be teaching future courses.

Assignments

Each student is responsible for completing all reading, written, and oral assignments made by the faculty. If a student is absent from class for any reason, he or she is still responsible for the material disseminated in class.

Classroom Etiquette

Each student is responsible for learning the content of any course in which he or she is enrolled and for respecting the rights of fellow students in the classroom. The instructor has the right to request any disruptive student to leave the classroom. Continued misbehavior in the classroom is cause for disciplinary action.

Course Syllabus

Within the first two class meetings of the semester each instructor is required to provide each student in the course with a syllabus. The syllabus will contain a description of the course, the goals, and/or objectives of the course, the method of evaluating and grading students, make-up policy, and a description of written or oral assignments.

Evaluation and Grading

The program has established standards of grading that supersede the University's grading policy and that are consistent with the minimum passing score on the Radiography Registry. Each instructor is responsible for determining academic achievement for each student in the course.

Comprehensive Assessment for the Program (CAP) Exam

Comprehensive Assessment for the Program (CAP Exams)

The CAP Exam will be administered at the end of the second spring semester. The exam is designed to assess each student's level of learning and retention over the entire Radiography curriculum. The score for this exam will be heavily weighted and incorporated into the grade of a second spring semester course (based on curriculum offerings at the time). Failure to pass the course will result in dismissal from the program.

Curriculum

Sophomore Year – Spring		Credit Hours
RAD 3103	Introduction to Radiography	3
RAD 3113	Radiographic Procedures I	3
RAD 3111	Radiographic Procedures I Lab	1
RAD 3122	Radiation Physics and Imaging	2
Semester Total		12

Sophomore Year – Summer		Credit Hours
RAD 3233	Radiography Clinical I	3
RAD 3203	Radiologic Procedures II	3
RAD 3201	Radiologic Procedures Lab II	1
RAD 3223	Sectional Anatomy	3
Semester Total		10

Junior Year – Fall		Credit Hours
RAD 4103	Radiologic Procedures III	3
RAD 4101	Radiologic Procedures Lab III	1
RAD 3213	Image Acquisition & Evaluation I	3
RAD 4132	Radiobiology	2
RAD 4143	Radiography Clinical II	3
Semester Total		12

Junior Year – Spring		Credit Hours
RAD 3202	Imaging Equipment	2
RAD 4142	Radiographic Procedures IV	2
RAD 4141	Radiographic Procedures Lab IV	1
RAD 4113	Image Acquisition & Evaluation II	3
RAD 4203	Radiography Clinical III	3
Semester Total		11

Junior Year – Summer		Credit Hours
RAD 4213	Radiography Clinical IV	3
RAD 4123	Imaging Pathology	3
Semester Total		6

Technical Standards

To ensure patient safety and welfare, the student must demonstrate “with or without accommodations” in order to successfully complete the program:

1. Sufficient eyesight to observe teaching methods and patients, manipulate equipment and accessories, and evaluate radiographs for quality.
2. Sufficient hearing to communicate effectively with members of the healthcare team and patients, and hear various patient, equipment, and background sounds.
3. Sufficient gross and fine motor coordination to manipulate equipment and accessories, lift a minimum of 50 pounds, and respond promptly to patient’s needs.
4. Satisfactory intellectual and emotional functions to ensure patient safety to exercise independent judgement in the performance of assigned responsibilities in stressful situations.
5. Satisfactory verbal, written, and reading skills to effectively and promptly communicate in English.
6. The ability to work collaboratively and demonstrate ethical behaviors with all members of the healthcare team.

Performance Requirements

Students are advised of the following guidelines for working in the Radiography environment. Students are required to sign appropriate documentation indicating they can perform the following requirements:

STRENGTH & MOBILITY

- Walk several hours each day, either performing exams, patient transfers, or portable procedures.
- Assume varied postural positions (bending, kneeling, stretching) to work with equipment and patients.
- Lift heavy weight as necessary, either equipment or patients.
- Push/pull stretchers, wheelchairs, portable x-ray equipment, and supply carts as necessary.

MANUAL DEXTERITY & COORDINATION

- Use the thumb/hand/wrist and arm and hand movements to perform such tasks as venipuncture, positioning of the x-ray equipment, assisting patient movements, and operating a computer.
- Use the lower extremities to perform such tasks as manipulating foot table locks and operating foot pedal for fluoroscopy exams.
- Visualize objects distinctly and clearly with or w/o corrective devices.
- Hear sounds distinctly and clearly, with or w/o corrective devices.
- Possess sensory discrimination (understanding accurately what is seen, heard, felt, tasted, or smelled).
- Utilize protective clothing correctly, when necessary, such as gowns, masks, gloves, shoe covers when working with patients in isolation, lead aprons for self-protection from radiation, and surgical gowns, caps, gloves, shoe covers for surgery cases.

MENTAL ABILITIES

- Follow oral and written instructions correctly.
- Effectively communicate issues, concerns, or questions to the appropriate party.
- Adhere to the proper chain of command to resolve issues.

Academic Standards

When the cumulative, semester, or session grade point average falls below 2.00, the student in Radiography will be placed on probation. At the end of the next semester or session of enrollment the cumulative grade point average must be at least 2.00 for the student to remain in the RAD program.

A student who receives a grade below "C" in any of the RAD courses may not continue in the Radiography Program. The policy and procedure for readmission into the Radiography Program is clearly outlined in the A-STATE Undergraduate Bulletin. This handbook also has a readmission policy (Student Policies)

Clinical evaluations will be filled out each semester and may be used to set attitude and behavior goals for future clinical assignments. Unsatisfactory progress in meeting set goals can result in a failed clinical grade for that course.

Dismissal Policy

A student who meets any of the criteria below may be dismissed from the Radiography Program:

- Participation in academic cheating and/or unauthorized possession of an examination.
- Plagiarism
- The unlawful and/or unauthorized use, abuse, possession, distribution, transportation, manufacture, concealment, consumption, promotion or use of alcohol, illegal drugs, and legal drugs obtained illegally, controlled substance, or designer drugs.
- Illegal possession of weapons
- Lack of professional compatibility or unsafe clinical practice as identified by the Radiography faculty.
- Violation of repeat radiograph policy after written warning.
- Failure to meet academic standards
- Failure to demonstrate suitable progress in clinical practice
- Physical or emotional conditions affecting ability to attain curricular objectives.

A student WILL be dismissed from all Medical Imaging and Radiation Sciences programs for:

- Falsification of patient, affiliate, and/or program records
- Patterns of behavior jeopardizing patient safety, individual or group progress, and/or contract agreement with the clinical affiliate.

Dismissal will be based on the following:

1. Written documentation describing the offense(s).
2. Review of the student's performance records by the A-State faculty, clinical coordinator, and the Radiography program director.

A recommendation will be made in writing and discussed with the student and will become part of the student's permanent record. Any student wishing to appeal must follow the appeal process stated in the CNHP Student Handbook.

Withdrawal Policy

The following steps are necessary when withdrawing from the program.

1. The student should meet with the Program Director to discuss the withdrawal process.
2. The student should write a formal letter of resignation stating the reason for withdrawal. This letter will remain in his/her permanent file and will be considered in the event the student seeks readmission to the program at a later date.
3. The student will return the dosimeter that has been issued and any other material that may be on loan.
4. The student will follow University guidelines for completing the withdrawal process, securing the appropriate signatures when necessary.

If a student withdraws from a RAD professional course, the student must withdraw from the program. The student may not continue with courses and will only be allowed to return that semester of the following year.

Readmission to the Program

A student wishing to be readmitted to the program must make a formal application to the program and to the University, if concurrently enrolled. Readmission is granted on an individual basis, based on the student's previous records and the availability of space. Application for readmission for whatever reason will be granted one time only.

Readmission will be denied if:

1. Either cumulative or institutional grade point averages are lower than 2.00
2. The student has received a final grade lower than "C" in the same course, or has received a grade lower than "C" in professional courses in two separate semesters in the same program.

Petition for Reinstatement Policy

Failure to successfully complete a professional RAD course or continue in the established progression listed in the curriculum sequence in which a student is enrolled removes a student from the established enrollment in Radiography courses.

The enrollment of a student, who is repeating a Radiography course for re-entering the progression sequence, will be permitted on a "space available" basis, reinstatement will be granted only within one year of withdrawal or non-progression and with the Program Director's approval only. Enrollment space for a student cannot, there, be "reserved" or "guaranteed" for any subsequent semester. Specific faculty-student ratios are mandatory by the JRCERT; therefore, course enrollment must be carefully evaluated each semester.

A student who desires to repeat/re-enroll/re-enter/ a RAD course must fulfill the following criteria:

- Meet eligibility requirements to enroll in the University and in Radiography curriculum.
- Contact the Radiography Program Director at least six (6) weeks prior to the scheduled semester in which the student is requesting enrollment.
- Retake all didactic final exams and final lab practicals for those courses previously completed for credit.

College Student Academic Honor Code

Each student admitted to a professional program in the College of Nursing and Health Professions is charged with the responsibility of honorable academic conduct. A student is assumed honorable until his/her actions prove otherwise. An academic honor offense is defined as an act of lying/willful misrepresentation, cheating/unauthorized collaboration, plagiarism or facilitating academic dishonesty of others. Formal procedures exist for violations of the academic honor code.

As a student in a health program, it is fundamental that you act in an honorable and virtuous way so that a community of trust is established among members of the college and your clients. Honor is a practiced ideal that will positively impact your relationship with fellow students, faculty, administrators, patients and other members of the community. As you live an honorable life, you will find that you cannot live without it.

All students in this college are bound by the Honor Code and all are needed to make it work. The atmosphere of trust and integrity that is created by an honor system enables the student to know his/her word will be taken as true, to compete fairly in the classroom and to keep what is rightfully his/hers. The system functions best when all members of the college not only take responsibility for their own actions, but hold their peers to the same standards.

As a student admitted to a health professions program, you must agree to live by and support the basic principles of honesty – no lying, cheating or stealing; be accountable for your actions; and share information about honor offenses. If you are not prepared to accept these responsibilities, you should select a program outside this college.

I have read the explanation of the College Student Code of Honor. I understand that as an admitted student in one of the programs in the college, I have accepted the pledge of honesty and will be expected to meet the standards as set forward.

Signature

Date

Note: Keep a copy of this page for your file. Submit the original to your advisor to be placed in your advising folder.

PROCEDURES FOR COLLEGE STUDENT ACADEMIC HONOR CODE

The College Student Academic Honor Code exists in addition to the University Code of Conduct and the Academic Integrity Policy found in the Student Handbook. An academic honor offense by the college code is defined as an act of **lying/willful misrepresentation, cheating/unauthorized collaboration, plagiarism, or facilitating academic dishonesty of others**. These terms are defined as follows:

Lying/willful misrepresentation - a false statement (written or oral) made with the deliberate intent to deceive; something intended to or serving to convey a false impression.

- Fabricating quotations and/or sources
- Fabricating, dishonestly adjusting, omitting, or otherwise misrepresenting research results and records, including information, data, statistics, research facts, and its analysis
- Engaging in selective reporting or omission of conflicting data for deceptive purposes
- Altering graded work, then resubmitting it for a new grade
- Providing false information about reasons for class absences or late work when requesting a make-up quiz or exam or an extension for homework
- Submitting the same paper in more than one class without the approval of the instructors involved
- Submitting a paper from a previous semester for a current class without the approval from the instructor
- Failing to provide required or requested information regarding academic performance or enrollments at previous institutions
- Intentionally obstructing or interfering with other students' academic work, or otherwise undertaking activity with the purpose of creating or obtaining an unfair academic advantage over other students' academic work.
- Altering documents affecting academic records, such as falsifying information on an official academic document, form, grade report, letter of permission, clinical record, student ID cards, or any other official document.
- Providing false information to others about academic performance, leadership activities, or membership in student organizations.
- Falsification of information records

- Recording hours not actually worked
- Submitting an altered or fabricated preceptor evaluation
- Altering a score, grade, or schedule change on an academic record.
- Forging the signature of an instructor, advisor, dean, or another student without proper authorization
- Video or audio recording lecture or private meetings without prior permission
- Creating false university, college, or other official correspondences (such as medical documentation)

Cheating/unauthorized collaboration - to practice fraud or deceit; academic fraud is a form of cheating and includes such things as plagiarism (including Internet resources), false citation, false data and submission of the same work to fulfill academic requirements in multiple classes.

- Using notes, books, calculators, phones, photos, computers, websites, tweets, social media, or other aids during a quiz or an exam when not allowed by the instructor
- Talking during a quiz or exam when told by the instructor talking is not permitted
- Looking at another student's exam or quiz during the testing period
- Continuing to work on a quiz or exam after the instructor has notified students that time for the test has ended
- Ignoring the guidelines specified by the instructor for an assignment or for a "take home" test and instead using materials or study aids that the instructor has forbidden
- Receiving help with homework, reports, labs, paper, data collection, or other activities when not allowed by the instructor
- Accepting credit for a group project without doing your share of the work
- Helping others with their homework or other assignments when not allowed by the instructor
- Allowing others to view your answers or copy part of your homework, lab, quiz answers, exam answers, or other related work when not permitted to do so by the instructor
- A group doing another student's work on a group project, lab, presentation, report, or other activity while presenting the work as if done by the entire group equally

Plagiarism – as defined in the 1995 Random House dictionary is the “use or close imitation of the language and thoughts of another author and the representation of them as one’s own original work.” Within academia plagiarism is considered academic dishonesty or academic fraud and offenders are subject to a number of penalties including course failure or other severe consequences.

- Using the words, sentences, arguments, rhetorical structures, and ideas of another without proper citation and acknowledgement
- Copying data, facts, graphs, computer programs, spreadsheets, images, photos, film/video, or other materials and using them without proper citation or acknowledgement
- Copying homework, quiz, or exam answers from an answer key, solution manual, textbook, web site, or other items from another student, thus presenting another’s work as your own
- Failing to use quotation marks properly or when needed
- Failing to give a source for quoted materials
- Failing to paraphrase language completely
- Failing to give a source for paraphrases
- Failing to cite sources correctly and completely

Facilitating Academic Dishonesty of Others – intentionally or knowingly helping or attempting to help others commit an act of academic dishonesty.

- Writing a paper for another student
- Allowing another student to use your past homework assignments, paper, labs, or similar items
- Sharing homework with another student when told collaboration is not allowed
- Allowing or helping another student to look at your exam or quiz during a test
- Sharing with other students your notes, books, calculators, phones, photos, computers, web sites, tweets, social media, or other aids during a quiz or an exam when not allowing by the instructor
- Completing another student’s exam or quiz by filling in the student’s scantron card or other answer sheet or by attending the exam in place of the other student
- Providing any materials, information, or assistance to another person with the knowledge or reasonable expectation that such would be used for dishonest purposes

- Stealing, reproducing, circulating, or otherwise gaining access to a quiz, exam, or homework materials prior to the time authorized by an instructor

These academic honor code violations apply whether they are performed individually or in groups. They apply to didactic, laboratory and clinical experiences of the program.

PROCEDURES:

If a student is aware of an honor offense, he/she should report that offense to either the faculty member of the class in question, the program director or the department chair. An investigation will result.

If there is evidence to bring forward, the student will be notified, in writing, of the specific charges, who the hearing body will be and the time and place of the hearing. Such notification will be delivered at least two working days in advance of the hearing. The date of the hearing, if possible, must be set within 10 working days from the date of notification to the student.

The College Code of Ethics Committee will hear the case. The Ethics Committee is comprised of five CNHP student representatives and two CNHP faculty appointed by the dean. Actions by the Ethics Committee may include: 1) dismissal of the case, 2) sanction the student, 3) refer the case to the Dean of Students, Student Affairs. Disciplinary sanctions by the committee may include educative, reprimand, restrictions and restitution. The committee does not have the authority to suspend or expel the student.

Student rights in this committee process are outlined in the ASTATE Student Handbook under the caption "Disciplinary Hearings". The student is entitled to one appeal rendered by the Associate Dean for Judicial Affairs. The process for appeal is in the section on "Appeal Process".

Revised 8-12-19

Disciplinary Action

The policies contained in this handbook are necessary in order to ensure consistency and orderly operation as well as to protect the rights and safety of all concerned. It is the desire of this program to assist all students so that we can achieve our objectives for the best education and finest patient care available. Willful or inexcusable violations of the policies in the handbook will be dealt with under a uniform policy that applies equally to all students. The Program Director, Clinical Coordinator, or Program Faculty from the A-State Radiography Program may provide verbal or written warnings of violations of policies.

Verbal Warning

This is informal notification to a student that they have violated a policy of the student handbook. If a repeated violation occurs, then a written warning will result. Documentation of the verbal warning will be placed in the student's clinical folder. **A verbal warning includes documentation provided and signed during orientation regarding the College of Nursing and Health Professions Honor Code and the department's lack of tolerance for dishonest or dangerous clinical practices.**

Written Warning

This is a formal notification to a student that they have violated a policy of the student handbook. Written documentation is prepared and entered into the student's clinical folder with signatures of all parties involved. Verbal and written warnings are cumulative throughout the professional program.

When a violation of policy warrants disciplinary action, the following actions will be taken. A meeting will be held with the Program Director and/or Clinical Coordinator. Based upon the severity of the findings, appropriate disciplinary action will be taken, including, but not limited to academic probation, failure of the course, or dismissal from the Radiography Program, including potential dismissal from the University.

Grievance Policy

A student disagreeing with the sanction issued should follow the Academic Grievance Procedure as outlined in the A-State Student Handbook.

Student Records

The Department of Medical Imaging and Radiation Sciences within Arkansas State University maintains accurate and confidential student records. It is the right of the students to have access to their education records, and it is the duty of the University and the MIRS Department to limit unauthorized access by others in accordance with existing guidelines and relevant laws. Student records, with certain exceptions, will not be released without prior consent of the student through written request.

Students have the right to review and question the content of their education records within a reasonable length of time after making a request for review. If there are any questions concerning the accuracy of appropriateness of these records that cannot be resolved informally, an opportunity to challenge a perceived inaccuracy or violation of privacy will be provided through the appeal mechanism.

Arkansas State University and the MIRS Department maintains student records in compliance with the Family Educational Rights and Privacy Act (FERPA) of 1997. In accordance with the University's Policy on Family Educational Rights and Privacy Act, information about a student generally may not be released to a third party without the student's written permission. Exceptions under the law include state and federal education and financial institutions, and law enforcement officials. The only records that will be released concerning students is that information considered "directory" information, such as: field of study, name, address, telephone number, participation in officially recognized activities and sports, attendance, degrees, and awards. The policy also permits students to review their educational records and to challenge the contents of those records.

With regard to clinical radiography course files, only the Radiography Program Faculty may remove files to be copied. Students may not remove or copy the file themselves. Any violation of the above will result in disciplinary action by the Radiography Program Faculty.

Expenses

In addition to the normal University tuition, fees, and book costs, a student in the Radiography Program will incur additional expenses. These expenses include, but are not limited to, the following:

Transportation:

Each student is responsible for transportation to the student's assigned clinical site. Transportation and all costs incurred for travel to clinic is the sole responsibility of the student. Clinical placement will not be modified for lack of transportation.

Uniforms:

Each student is responsible for providing the student's own uniforms. Uniforms include scrubs, shoes, lab coat, student ID, and lead markers.

Immunizations:

Up-to-date immunizations are required prior to entering any clinical site. Immunizations include, but are not limited to; Hepatitis B, varicella (chicken pox), TB skin test, and an annual influenza vaccine. Records are kept on file with the Clinical Coordinator.

Replacement Dosimeters (\$25/each):

Original dosimeters will be provided by the department for no charge to entering radiography students. However, the department is charged for each lost dosimeter. If the lost badge is a direct result of student action or inaction, then the replacement cost will be relayed to the student via his/her A-State student account.

TB Mask Fitting (annual)

Malpractice Liability Insurance (annual)

Online Clinical Reporting System (annual)

CPR/BDLS/ACLS or other certifications, as needed

Background Check (upon acceptance and as requested by clinical site)

Student Health

Report of Medical History

All students are required to provide completed confidential health records to include physical examinations and medical history to the Clinical Coordinator prior to entering their assigned clinical site.. *Students assigned and rotating through clinical sites for clinical education are not employees of the clinical site and will not receive monetary compensation or be covered by worker's compensation while completing clinical education hours.* If an injury occurs, it is the student's responsibility to consent or deny consent to medical treatment, convey the facility desired to receive medical treatment if treatment is desired, and provide documentation of insurance or provide payment upon arrival for treatment. Again, regardless of fault, neither A-State nor the clinical education site will be responsible for payment(s); the responsibility is directed to the student. Any injury, however minor, occurring while on duty at the hospital must be reported to the supervising technologists and the appropriate incident form completed with copies to the Radiography Clinical Coordinator.

The Student Health Center has an array of medical services from treating minor illnesses & injuries to providing physical exams, immunizations, female exams, health education, and pre/post-test HIV Counseling. The center can be reached at 870-972-2131.

Malpractice Liability Insurance

Proof of professional liability insurance is required before a student can begin clinical education. To get Malpractice Insurance on-line:

1. Go to <http://www.hpsso.com>
2. Choose "Get a Quote"
3. Choose "students" – scroll down to and select "individual"
4. Answer the remaining questions
5. Purchase

Health Insurance

Students are strongly encouraged to obtain individual health insurance coverage. Information on Student Health Insurance is available through the Office of Student Affairs in the Student Union. Professional liability insurance does not include health insurance coverage.

Background Checks

The Radiography Department at Arkansas State University is committed to ensuring public and professional trust and providing safe patient care. In order to meet this goal, background investigations of students can be authorized under this policy. The College of Nursing and Health Professions requires criminal background investigations of all students who attend clinical affiliates. Clinical affiliates have the right to accept or deny any individual admission into their facility based on the findings of a background investigation report. To comply with these requirements, students admitted to the Radiography Program must submit to a background investigation in order to ascertain the student's suitability for clinical rotations. Background investigations may also be performed periodically throughout the professional program. All information obtained from the background investigation report will remain confidential. Students will be responsible for paying for the background investigations.

Infection Control

Introduction

The policy guidelines herein are of a general nature and deal with HIV-related infections as well as other blood borne pathogens. They apply to all students/faculty in the College of Nursing and Health Professions (CNHP). Due to differences in the various programs, individual CNHP programs may have specific rules and/or guidelines that are modifications of those in the general policy, however, the specific policies of the various programs will be consistent in their intent with the guidelines noted herein. This policy shall be reviewed annually and modified as necessary based on the current information from the CDC and OSHA.

Admissions

The HIV/HBV (Human Immunodeficiency Virus/ Hepatitis B Virus) status of an applicant should not enter into the application process. Applicants applying for healthcare programs should, however, be informed that certain diseases may necessitate either a modification of their program, or in the extreme may necessitate their dismissal from a program if they cannot perform procedures and/or tasks that are considered essential to their educational experience.

Retention

If it is determined that a student is zero-positive for HIV/HBV or is clinically manifesting symptoms of either disease process, that student should receive counseling about personal health care concerns and about interaction with others, especially clients. The student should be counseled by a designated faculty member in his/her respective program. The function of the designated faculty member is to counsel the student as to whether the program of education should be modified, another educational program considered, or in the extreme, whether the student should be dismissed from a program because of the inability to perform procedures and/or tasks crucial to the educational program. When considering the possibility of modifying clinical experiences or whether to dismiss, the designated faculty member will request that the Infection Control Committee convene to consider the specific student situation.

Infection Control Committee

The Infection Control Committee will be comprised of one representative from each of the programs in the College of Nursing and Health Professions. The dean will be charged with appointing faculty to serve on this committee after consultation with chairs or directors of the various programs. Once the committee is established, a chair shall be elected by the members. In addition, a community member who is an expert in infectious disease will be designated as a consultant to the committee.

The committee shall function to consider the specific student/faculty situations outlined in the HIV/HBV Guidelines. In addition, this committee will function to review the HIV/HBV Guidelines on an annual basis. The committee will coordinate annual instruction on Standard Precautions for the faculty. This committee will also serve the programs by making recommendations for infection control policy that may impact both the student and faculty populations. Information regarding such policy will be included in the various program's *Student Handbook* and the *CNHP Faculty/Staff Handbook*.

When the Infection Control Committee convenes to consider specific student/faculty situations, a timely response is in order. Individuals will be provided a letter outlining the committee recommendations within a one-week period after convening. During this time period the student/faculty person shall not engage in direct client contact. Should an individual wish to appeal the decision of the committee, the established University Grievance process should be followed (See *A-STATE Student/Faculty Handbooks*).

Counseling

It is the responsibility of the programs to provide counseling to a student/faculty member who is determined to be zero-positive for HIV/HBV or who manifests symptoms of either disease process. The counselor interaction with the student/faculty member should be reported to the Infection Control Committee only when the person's health status necessitates a modification in the clinical program or dismissal. It will be the responsibility of the counselor to verify that the student is aware of options for testing, counseling and health care. In addition, the counselor will verify that the student has been provided with specific information that relates to client contact.

The following information is provided in order to refer students when necessary to outside agencies for assistance and follow-up. This information should be reviewed and updated annually.

HIV Infection Services provided by A-STATE Student Health Center:

Students at Arkansas State University who desire HIV testing may obtain this service free at the Wilson Student Health Center. The Center encourages appointments but will accept students on a walk-in basis. Pre- and post-test counseling is provided by certified CDC counselors. Specimens are sent to the Craighead County Public Health Department for testing.

The Student Health Center has developed a media library (videos, pamphlets) for persons coming in with questions about HIV infection. The Center is located directly across from the College of Nursing and Health Professions and can be reached at ext. 2054.

Services offered by the Public Health Department

The Craighead County Public Health Department is open from 8:00 a.m. until 3:30 p.m. for testing. The department offers pre- and post-test counseling as well as HIV testing. The Public Health Department can be contacted by calling 933-4585. Offices are located at 611 E Washington Ave Ste B, Jonesboro, AR 72401.

An individual who desires testing should allow about one hour for the procedure because pre-counseling is extensive.

Services offered by Northeast Arkansas Regional AIDS Network (NARAN)

This organization offers free confidential testing. Pre- and post-counseling is provided by certified counselors. They also provide direct care services to those persons who need them, including financial counseling. NARAN is also a network agency for persons living with AIDS. A referral can be made by contacting the office at 931-4HIV (4448). The office is located at 2919 E. Matthews Ave Suite A in Jonesboro.

Other

The American Red Cross office now advertises the Arkansas HIV/AIDS Network. The office can be reached at (870)268-1990 and is located at 1904-A Grant Ave in Jonesboro. The group is funded by the C.D.C. whose primary goal is to provide HIV education to Arkansans. However, the Red Cross will provide information to those who call.

The counselor should not neglect to refer the student/faculty member to his/her private physician for guidance.

Students and faculty outside of Craighead County should seek specific referral information from the Chair of the Infection Control Committee or from a faculty member designated as counselor at the distant sites.

Transmission Information

All CNHP students and faculty will employ Standard Precautions while in the clinical setting. CNHP students will receive instruction and annual evaluation regarding transmission of blood-borne pathogens and the use of

Standard Precautions. The Infection Control Committee will coordinate instruction on Standard Precautions for faculty on an annual basis. It will be the responsibility of faculty members to document annual instruction through the Infection Control Committee.

Policy

Students, faculty, and staff with HIV/HBV should be allowed equal access, as long as their medical condition permits, to university facilities or campus activities, including participation in clinical experiences or other academic and social activities offered by the university.

All confidential medical information is protected by statute and any unauthorized disclosure may create legal liability. The duty of the health care providers to protect this confidentiality is superseded by the necessity to protect others in very specific circumstances.

An infected student/faculty who is symptomatic may be excluded from providing direct client care, determined on a **CASE-BY-CASE** basis by the Infection Control Committee. In addition, should an individual sero-convert and express concern regarding clinical practice, the committee will convene to review the case.

Any student who has a positive history of HIV/HBV probably should not participate as a source partner in on-campus laboratories for procedures involving needle sticks or other forms of vascular access. For criteria related to laboratory participation, see the specific program handbook.

Exposure (Laboratory and Clinical)

Students and faculty in the College of Nursing and Health Professions may be exposed to blood borne pathogens such as HIV and HBV. In the clinical and classroom laboratory settings, students/faculty are expected to utilize Standard Precautions, hand washing and protective clothing/gear to prevent contact with blood and other potentially infectious materials.

Exposure incident means a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious material that results from one's duties as a CNHP student or faculty member. An exposure incident involving a student/faculty member in the CNHP while in a clinical facility or campus laboratory is treated in a similar manner to any type of accident occurring within the agency.

Laboratory Post-HIV/HBV Exposure Protocol

Should a student or faculty member be exposed to HIV/HBV in an on-campus laboratory setting, the following post-exposure protocol is recommended:

1. The student will notify the faculty member supervising the learning experience. If the exposed individual is a faculty member, he/she will notify the chairperson of the specific program in the CNHP.
2. As soon as possible following the exposure, the college incident form will be completed by the faculty member/student.

3. The exposed individual will be referred to the Wilson Student Health Center for evaluation if the event occurs during operating hours. If the exposure occurs when the Health Center is closed, the faculty member will determine the individual's primary care options and refer the person to those resources.
4. It is recommended that both individual and source be tested for HIV and HBV when an exposure occurs. Testing will be conducted at the individual's expense.
5. It is recommended that post-exposure prophylaxis of those involved be directed by the individual's primary care providers at the individual's expense.
6. If there is a delay in reporting an exposure incident, it is recommended that the same protocol be followed.

Clinical Post HIV/HBV Exposure Protocol

If a student/faculty member is exposed to blood or other potentially infectious materials in the clinical environment, this protocol is to be followed:

1. The student will notify the clinical faculty. If the exposed individual is a faculty member, s/he will notify the chairperson of the specific program at the CNHP.
2. The student, clinical faculty or chairperson will notify the supervisor of the area where the exposure occurred. Thereafter, post-exposure protocols for the clinical institution will be followed.
3. The infection control staff member/epidemiologist of the clinical facility will be notified of the exposure immediately by the student or if possible by the clinical faculty member. If a faculty member has been exposed, this individual will notify the infection control staff/epidemiologist.
4. As soon as possible following a report of an exposure incident the clinical faculty and infection control staff/epidemiologist should provide the student with counseling about an immediate confidential medical evaluation and follow-up at the student's expense. In some instances the clinical facility may cover costs of treatment and testing as would be done for an employee. In the case of a faculty member's exposure, the individual is expected to communicate directly with the infection control staff/epidemiologist. The medical evaluation and follow-up should include, at a minimum, the following requirements:
 - (a) Documentation of the route(s) of exposure and the circumstances under which the exposure incident occurred.
 - (b) Identification and documentation of the source individual unless the clinical facility staff establishes that the identification is unfeasible or prohibited by state or local law.
 - (1) The source individual's blood shall be tested as soon as possible after consent is obtained in order to determine HBV and HIV infectivity. If consent is not obtained, the clinical facility shall establish that the source individual's consent cannot be obtained. When the source individual's consent is not required by law, the source individual's blood shall be tested and the results documented.
 - (2) When the source individual is already known to be infected with HIV or HBV, testing for the source individual's HIV or HBV status need not be repeated.
 - (3) Results of the source individual's testing shall be made available to the exposed individual who should also be informed of applicable laws and regulations concerning disclosure of the identity and infectious status of the source individual.
 - (c) The exposed student/faculty member's blood should be tested as soon as possible after consent is obtained. Agencies which provide testing for HIV include:
Northeast Arkansas Regional AIDS Network (NARAN) (870-931-4HIV)
Craighead County Public Health Department (870-933-4585),
Wilson Student Health Center (870-972-2054).

Additionally, the exposed individual has the option of utilizing their private physician for confidential testing.

- (d) It is suggested that post-exposure prophylaxis be managed by the student/faculty member's personal healthcare provider.
- (e) A copy of the OSHA Blood borne Pathogens Standard (29 CFR 1910-1030) is accessible in this document (attached).

Substance Abuse Policy and Procedure

The College of Nursing and Health Professions recognizes its responsibility to provide a healthy environment within which students may learn and prepare themselves to become members of a health occupation. Within each profession there are codes and standards for conduct by which all members of the profession are expected to function. Thus, when engaged in educational activities whether on campus or in the clinical setting health professionals are expected to be free from the abusive influence of chemical substances/drugs. When students are under the influence of drugs and alcohol, they present a threat to patients, other students and the employees and visitors of clinical facilities.

It is the responsibility of the student to report any medication/s taken which would adversely affect his/her ability to perform safely in class or clinic. Written documentation will be required for verification of medications taken and will be placed in the student's file. As a condition of admittance and retention in any professional program in the Arkansas State University College of Nursing and Health Professions all students must sign a Substance Abuse Compliance Contract (found in the Forms section) agreeing to adhere to the Substance Abuse Policy & Procedures when conducting any activity associated with their educational program. As the contract notes, it is inclusive of testing for substances and appropriate release of that information.

Procedures

1. If a faculty member or supervisor observes a student demonstrating behavioral changes giving probable cause to believe the student is under the influence of drugs or alcohol while performing course activities the student will immediately be asked to submit to body fluid testing for substances at a lab designated by the College of Nursing and Health Professions (in Jonesboro, Occupational Health) who have identified procedures for collection (see attached). The cost of the test will be borne by the student. Refusal to submit for testing warrants immediate program dismissal. At the time the specimen is released to the testing lab, the student will sign a release statement requesting that the test results be sent to the Dean's Office, College of Nursing and Health Professions, and to the student. If the results are negative, no further action will be taken and the student will only be allowed to make up work missed. If the results are positive (and substantiated by a second or confirmation test), the student will be dismissed from the professional program. Laboratory results will be disclosed to individuals whose duties necessitate review of the test results and confidentiality will be adhered to as stringently as possible.

2. This policy applies only to a student exhibiting behavior creating probable cause to believe drug or alcohol abuse is present. A student may be removed from the clinical environment or educational program for any

prohibited behaviors as set out in the university or program handbooks, rules and regulations, whether or not related to substance abuse.

3. Readmission of the student to the program is contingent upon the following conditions:

a. Formal application for readmission to the program.

b. Meeting specific program admission criteria as noted in the Undergraduate/ Graduate Bulletin

c. Clinical space availability.

d. Documentation that a prescribed treatment program has been completed by the student related to the drug/alcohol condition. The documentation is to be submitted to the Dean's Office, College of Nursing and Health Professions by the designated treatment facility.

e. Follow-up program as suggested by the treatment facility which may include, but is not limited to, one or more relapse prevention procedures. The follow-up program will be individual specific and written as part of a contractual agreement with the student.

4. Arkansas State University may be required by state or national regulatory boards to submit information regarding a student's substance abuse history when he/she applies to take the examination for licensure. There is no guarantee that these boards will allow individuals with a substance abuse history to take the examination. Each case is judged individually by each board.

5. Students will be required to abide by individual institutional policies relating to substance abuse in clinical agencies to which they are assigned.

The generic meaning of the term "drug" is broadly defined as any chemical substance which affects living systems. For the purposes of this policy, substance and/or drug abuse are used interchangeably and defined as socially unacceptable use of drugs or other chemical substances for non-therapeutic purposes. The substance alcohol (ethanol), by its properties and actions, is a drug and is used as such in this policy. Drugs prescribed by a physician licensed to practice medicine and surgery, as long as the drug is taken in accordance with the provider's instructions and do not impair the student's ability to perform his/her duties, are exempt from this policy. Reference: Reiss, B. & Melick M. (1987). *Pharmacological Aspects of Nursing Care* (2nd Ed.). Albany, NY: Delmar Publishers, pp. 2, 627, 631-633

Behavioral Changes Associated With Drug Abuse

The College of Nursing and Health Professions has developed the following list of behaviors that are not all inclusive but, when observed, can be used as indices to identify an individual who at the moment of observation could be under the influence of a "drug" (see the *Substance Abuse Policy* for definition of the term "drug" and for the mechanisms to operationalize the policy). The College of Nursing and Health Professions is guided by behavioral descriptors that are stated in the latest edition of Diagnostic & Statistical Manual of Mental Disorders.

Observation of any of these behaviors will result in dismissal from the learning environment (clinical or classroom).

Attention Deficit/Cognitive Impairment

- ataxia
- tremors, especially of the hands

- slowed response time in a familiar skill
- diminished from the usual in coordination/dexterity

Social Impairment

- inappropriate verbal remarks (subjects/words/expletives)
- inappropriate behaviors or those beyond the societal norm such as:
 - angry outbursts/unrestrained agitation
 - crying that cannot be explained
 - euphoria
 - paranoia
 - hallucinations
- behaviors that are markedly changed from that individual such as:
 - introversion
 - extroversion
 - sullen/irritable
 - giddy
 - defensiveness

Somatic Manifestations/Discomforts

- odor of alcohol on breath
- nausea/vomiting/thirst
- frequent trips to bathroom/complaint of urinary frequency or diarrhea
- hiccoughs
- reddened sclera (bloodshot eyes)
- pupil changes/drooping eyelids
- complain of blurred vision or inability to focus

Speech/Communication Impairment

- slurred (thick tongue)
- rapid/choppy communication pattern
- incoherent speech

Behavioral Patterns Associated With Substance Abuse

The following is a list of behavioral patterns that may surface when drugs have been abused. While these patterns have many causes, thorough assessment and detailed documentation is needed over a period of time to determine if there is any relationship to drug abuse. Patterns of behavior to observe and validate are:

- repeated tardiness
- frequent absenteeism
- numerous and chronic somatic complaints (colds/GI problems/lack of sleep/weight loss/sluggishness/low energy)
- untidy personal appearance or deterioration in quality of grooming
- lack of attention to hygiene (hair, nails, skin, oral)
- multiple crises in personal life
- avoidance/lack of eye contact
- isolation/lack of peer support
- repeated excuses for below standard performance
- forgetfulness with appointments/assignments
- slowed response time in familiar activities

- behavior shifts/mood swings
- lack of trust and suspicious of the motives of others
- needle tracks on body surface
- behaviors surrounding the administration of narcotics:
- frequent need to waste "unused" medications
- recording the administration of larger doses than ordered
- unauthorized possession of the narcotic key
- unsupervised entry into narcotic cabinet
- volunteering to be in situations to gain greater access to narcotics
- taking frequent breaks/numerous occasions when whereabouts unknown

Criteria for Urine Drug Screens is found in the Forms Section

HIPAA Compliance

Protecting the Privacy of Patients' Health Information

Overview: Each time a patient sees a doctor, is admitted to a hospital, goes to a pharmacist or sends a claim to a health plan, a record is made of their confidential health information. In the past, family doctors and other health care providers protected the confidentiality of those records by sealing them away in file cabinets and refusing to reveal them to anyone else. Today, the use and disclosure of this information is protected by a patchwork of state laws, leaving gaps in the protection of patients' privacy and confidentiality.

Congress recognized the need for national patient record privacy standards in 1996 when they enacted the Health Insurance Portability and Accountability Act of 1996 (HIPAA). The law included provisions designed to save money for health care businesses by encouraging electronic transactions, but it also required new safeguards to protect the security and confidentiality of that information. The law gave Congress until August 21, 1999 to pass comprehensive health privacy legislation. When Congress did not enact such legislation after three years, the law required the Department of Health and Human Services (HHS) to craft such protections by regulation.

In November 1999, HHS published proposed regulations to guarantee patients new rights and protections against the misuse or disclosure of their health records. During an extended comment period, HHS received more than 52,000 communications from the public. In December 2000, HHS issued a final rule that made significant changes in order to address issues raised by the comments. To ensure that the provisions of the final rule would protect patients' privacy without creating unanticipated consequences that might harm patient's access to care or quality of care, HHS Secretary Tommy G. Thompson opened the final rule for comment for 30 days. After that comment period, President Bush and Secretary Thompson allowed the rule to take effect on April 4, 2001, as scheduled, and make appropriate changes during the next year to clarify the requirements and correct potential problems that could threaten access to, or quality of, care. On July 6, 2001, HHS issued its first set of guidance to answer common questions and clarify confusion about the final rule's provisions.

Compliance Schedule

The final rule took effect on April 14, 2001. As required by the HIPAA law, most covered entities have two full years - until April 2003 - to comply with the final rule's provisions. The law gives HHS the authority to make appropriate changes to the rule prior to the compliance date.

Covered Entities As required by HIPAA, the final regulation covers health plans, health care clearinghouses, and those health care providers who conduct certain financial and administrative transactions (e.g., electronic billing and funds transfers) electronically.

Information Protected

All medical records and other individually identifiable health information used or disclosed by a covered entity in any form, whether electronically, on paper, or orally, are covered by the final rule.

Consumer Control over Health Information

Under the final rule, patients will have significant new rights to understand and control how their health information is used.

- * Patient education on privacy protections. Providers and health plans will be required to give patients a clear written explanation of how the covered entity may use and disclose their health information.
- * Ensuring patient access to their medical records. Patients will be able to see and get copies of their records, and request amendments. In addition, a history of non-routine disclosures must be made accessible to patients.
- * Receiving patient consent before information is released. Health care providers who see patients will be required to obtain patient consent before sharing their information for treatment, payment, and health care operations. In addition, separate patient authorization must be obtained for non-routine disclosures and most non-health care purposes. Patients will have the right to request restrictions on the uses and disclosures of their information.

Boundaries on Medical Record Use and Release

With few exceptions, such as appropriate law enforcement needs, an individual's health information may only be used for health purposes.

- * Ensuring that health information is not used for non-health purposes. Health information covered by the rule generally may not be used for purposes not related to health care - such as disclosures to employers to make personnel decisions, or to financial institutions - without explicit authorization from the individual.
- * Providing the minimum amount of information necessary. In general, disclosures of information will be limited to the minimum necessary for the purpose of the disclosure. However, this provision does not apply to the disclosure of medical records for treatment purposes because physicians, specialists, and other providers need access to the full record to provide quality care.

Ensure the Security of Personal Health Information

The final rule establishes the privacy safeguard standards that covered entities must meet, but it gives covered entities the flexibility to design their own policies and procedures to meet those standards. The requirements are flexible and scalable to account for the nature of each entity's business, and its size and resources. Covered entities generally will have to:

- * **Adopt written privacy procedures.** These include who has access to protected information, how it will be used within the entity, and when the information may be disclosed. Covered entities will also need to take steps to ensure that their business associates protect the privacy of health information.

* **Train employees and designate a privacy officer.** Covered entities will need to train their employees in their privacy procedures, and must designate an individual to be responsible for ensuring the procedures are followed.

Establish Accountability for Medical Records Use and Release

In HIPAA, Congress provided penalties for covered entities that misuse personal health information.

* **Civil penalties.** Health plans, providers and clearinghouses that violate these standards will be subject to civil liability. Civil money penalties are \$100 per violation, up to \$25,000 per person, per year for each requirement or prohibition violated.

* **Federal criminal penalties.** Under HIPAA, Congress also established criminal penalties for knowingly violating patient privacy. Criminal penalties are up to \$50,000 and one year in prison for obtaining or disclosing protected health information under “false pretenses”; and up to \$250,000 and up to 10 years in prison for obtaining or disclosing protected health information with the intent to sell, transfer or use it for commercial advantage, personal gain or malicious harm.

Balancing Public Responsibility with Privacy Protections

In limited circumstances, the final rule permits - but does not require - covered entities to continue certain existing disclosures of health information without individual authorization for specific public responsibilities.

These permitted disclosures include: emergency circumstances; identification of the body of a deceased person, or the cause of death; public health needs; research, generally limited to when a waiver of authorization is independently approved by a privacy board or Institutional Review Board; oversight of the health care system; judicial and administrative proceedings; limited law enforcement activities; and related to national defense and security.

All of these disclosures could occur today under existing laws and regulations, although the privacy rule generally establishes new safeguards and limits. If there is no other law requiring that information be disclosed, covered entities will use their professional judgment to decide whether to disclose any information, reflecting their own policies and ethical principles.

Special Protection for Psychotherapy Notes

Psychotherapy notes (used only by a psychotherapist) are held to a higher standard of protection because they are not part of the medical record and are never intended to be shared with anyone else. All other personal health information is considered to be sensitive and protected consistently under this rule.

Equivalent Requirements for Government Entities

The provisions of the final rule generally apply equally to private sector and public sector entities. For example, both private hospitals and government medical units have to comply with the full range of requirements, such as providing notice, access rights and requiring consent for routine uses.

Cost of Implementation

The final rule projected the implementation costs at \$17.6 billion over 10 years - a figure more than offset by the \$29.9 billion in projected savings under the final electronic transactions regulation issued in August 2000.

Preserving Existing, Strong State Confidentiality Laws

As required by the HIPAA law itself, stronger state laws (like those covering mental health, HIV infection, and AIDS information) continue to apply. These confidentiality protections are cumulative; the final rule will set a national “floor” of privacy standards that protect all Americans, but in some states individuals enjoy additional protection. In circumstances where states have decided through law to require certain disclosures of health information, the final rule does not preempt these mandates.

Compliance and Enforcement

The rule will be enforced by the HHS Office for Civil Rights (OCR). On July 6, OCR issued its first set of guidance to answer many common questions about the new patient privacy rule and to clarify some of the confusion regarding the rule’s potential impact on health care delivery and access. Before covered entities must comply with the rule, OCR will provide assistance to providers, plans and health clearinghouses in meeting the requirements of the regulation. The initial guidance and other information about the new regulation are available on the Web at <http://www.hhs.gov/ocr/hipaa/>.

Note: All HHS press releases, fact sheets and other press materials are available at <http://www.hhs.gov/news>.

Pregnancy Policy

The National Council on Radiation Protection and Measurements (NCRP) recommends an occupational radiation fetal dose limit of 5.0 mSv during an entire pregnancy (with a daily limit of 0.025 mSv), and less than 0.5 mSv per month as stated by the American Society of Radiologic Technologists.

Students enrolled in Radiography are instructed in proper safety precautions and personnel monitoring prior to being admitted to an ionizing radiation area. Students are required to abide by all safety precautions. The importance of the ALARA concept (keeping exposure as low as reasonably achievable through a combination of time, distance, and shielding) is stressed.

Not Declared Pregnant Student

A student also has the right to not declare their pregnancy, in which case, the student will be treated as though she were not pregnant. Once a student has declared pregnancy, the student also has the right to un-declare her pregnancy at any time. This is in accordance with Federal and State laws as well as the most current NRC Regulations. All students will be required to sign a form stating they are aware of this policy and realize that A-State or the affiliated medical facilities and personnel cannot be held liable for the problems which may occur should a student NOT DECLARE or UN-DECLARE her pregnancy.

Declared Pregnant Student

A student who has voluntarily informed the Radiography Program Director or Clinical Coordinator, in writing, of her pregnancy and the estimated date of delivery is considered a declared pregnant student. A student has the right to declare her pregnancy and at such a time, the precautions listed below must be followed.

Due to the number and variety of courses in the curriculum and the importance of maintaining a rotation schedule through the various assigned areas without interruption, should any student suspect pregnancy, they are recommended to report it immediately to the Clinical Coordinator. If the student chooses to voluntarily inform the officials of her pregnancy, it must be in writing and indicate the expected date of delivery. In absence of this voluntary written disclosure, a student cannot be considered pregnant. If the student does disclose her pregnancy, she has the option of continuing the educational program without interruption; however, modifications in clinical assignments may occur as to schedule the student through low radiation areas, specifically during the first trimester. The student's capability to complete clinical course requirements will be determined on an individual basis, after counseling.

Upon declaration of pregnancy, the student will:

1. Submit a statement in writing verifying pregnancy and expected due date.
2. Counsel with RAD Clinical Coordinator regarding the nature of potential radiation injury associated with in-utero exposure, the regulation established by the NCRP, and the required preventative measure to be taken throughout the gestation period.
3. Submit in writing, within 24 hours, her decision as to remaining in the program, dependent on the above, or resigning from the program. If resignation is the choice, no other action is indicated.
4. Leave of absence will be reviewed on an individual basis by the RAD Program Director and Clinical Coordinator, dependent on the physician's recommendation.

5. If a pregnant student elects to continue in the professional program after counseling, the student will be required to sign the Pregnancy Complications Release of Liability Form (found in the Forms section) releasing the University and the program of any responsibility should problems develop with the pregnancy.
6. Be required to attend the regular class schedule.
7. Be required to abide by the following:
 - a. Strict adherence to all safety precautions for protection purposes
 - b. Strict statements from her physician as to any changes or problems in her pregnancy and advisability of continuation full time.
 - c. Wear two (2) personnel monitoring devices, one placed on the collar and one on the abdomen for fetal monitoring. The second issued fetal dose film badge will be worn on the abdomen and under the protective apron at all times while in a radiation environment. Monthly readings will be monitored by the Clinical Coordinator and the student will be subject to an immediate leave of absence from the clinical environment if at any point the Clinical Coordinator deems it necessary. The National Council on Radiation Protection and Measurements (NCRP) recommends an occupational radiation fetal dose limit of 5.0 mSv during an entire pregnancy (with a daily limit of 0.025 mSv), and less than 0.5 mSv per month.
 - d. Exposure limits will apply until: the student gives birth, the student notifies the Clinical Coordinator in writing that she is no longer pregnant, or the student informs the Clinical Coordinator that she no longer wishes to be considered pregnant by revoking her previously declared pregnancy in writing.
 - e. At any time the pregnant student feels that she is working in an unsafe area or under conditions she feels are detrimental, the student should remove herself immediately and report to the Program Director, Clinical Coordinator, Clinical Instructor, and Department Supervisor.
 - f. At no time and for no reason will the pregnant student place herself in the primary beam of radiation.
8. Be informed that, dependent on the course requirements and length of absence, she may be required to retake course(s) in their entirety.
9. Return to full-time status as soon as possible after delivery, but only on the expressed written permission of her physician. **Return to full-time status is dependent upon clinical site availability.*
10. Realize that the student must complete, upon her return, all requirements for graduation, including required courses, clinical competencies, and rotations.

Laboratory Policies and Procedures

General Laboratory Policies

The laboratory is an educational environment in which the student must comply with the following rules and regulations.

- During the regularly scheduled lab section under the direction of the A-State faculty, students are required to follow the designated dress code as outlined in the course syllabus.
- Attendance and make-up policies for the laboratory are included in the course syllabus and will be strictly enforced.
- No students are allowed in the laboratory at any time without the permission of the faculty or Program Director.
- All students must bring dosimeters and lead markers (right and left) to each laboratory class.
- Eating, drinking and tobacco products are not allowed in the laboratory.
- Each group of students is responsible for straightening the room at the end of each session, including changing the pillow case and cleaning the x-ray table and wall unit.
- All students are encouraged to utilize the lab outside of scheduled class time. Appointments must be made with the RAD faculty.
- Use of the lab outside of class time is on a sign-up basis only. You may sign-up for a one hour period.
- Any reported loud talking, laughing, or other disturbances will result in loss of lab privileges for the involved students.
- ***Under no circumstances are students allowed to make an exposure in the laboratory without a faculty member present.***
- If you experience any problems with equipment, notify faculty immediately.

Radiation Safety Procedures

- Radiation Safety is a priority. Students are expected to incorporate the principles of ALARA in all aspects of lab activity.
- Dosimeters must be worn during laboratory classes. No student will be allowed to remain in the laboratory without his/her dosimeter. Students will incur a \$25/occurrence charge for lost dosimeters.
- No exposure will be made on human or animal subjects.
- No student will remain in the room during an exposure.

Care and Maintenance of Equipment

- Any equipment malfunctions must be reported to faculty.
- A student **MUST NOT** attempt to repair malfunctioning equipment.
- The x-ray unit and lights must be turned off, as well as doors shut and locked when leaving the lab area.
- Locks must be released before moving the x-ray tube.
- All accessories (phantoms, cassettes, etc.) shall be returned to storage.
- All students must pass an equipment check off before using lab equipment.

Clinical Policies and Procedures

General Introduction

Beginning the summer semester of the professional program in Radiography at Arkansas State University the student will be enrolled in a clinical course that requires attendance in the clinical education site in order to:

- Incorporate ALARA principles
- Acquire expertise and proficiency in a variety of diagnostic procedures and other imaging modalities
- Develop and practice work habits and appropriate interpersonal relationships with patients and other members of the health care team

In the clinical education site the student will be representing Arkansas State University, the College of Nursing and Health Professions, and the Radiography Program. The student is expected to conduct himself/herself in a professional manner at all times.

Clinical Assignments

Clinical assignments are arranged by the Clinical Coordinator and the assigned schedule must be followed closely by each student. All students are scheduled and rotated through various areas during the professional program so they have an equal opportunity to perform all types of radiographic procedures. A composite of all clinical assignments is maintained on each student to verify the equity of the assignments.

Most clinical assignments take place during normal day-time hours (8:00 a.m. to 4:00 p.m.). Students will be given the option to complete an evening shift (2:30 p.m. to 10:00 p.m.). Clinical assignment schedules are given to each student at the beginning of each semester.

It is logistically impossible to assign all students to the same clinical activities at the same time throughout the program. Thus, it is the students' responsibility to coordinate clinical course competencies with clinical assignments. In this manner, students' progress at their own rate and engage in procedures related to their specific clinical assignment.

Placement Process

During the Radiography Program orientation, students complete a form stating their residence during regular and summer semesters. Their residence is the basis for initial clinical placement and aids in future placements as every effort is made for the student's drive time to be less than 1.5 hour one way. First clinical placement is determined by geography and/or community ties and is recorded on the Master Schedule along with each subsequent semester's placement.

The number of students at each facility is determined by a 1:1 technologist to student ratio. This is achieved by referring to the Clinical Site Table that shows the clinical site, number of routine/fluoro rooms, and rotations offered by the clinical site, exam volume, and drive distance.

Students are placed through a fluoroscopy and surgery rotation. Each student rotates through an outpatient clinic, high patient volume site, and low patient volume site. Clinical placement for each student is individualized and based on geography, progress toward completion of mandatory and elective competencies, information discussed with clinical faculty, and exposure to a variety of clinical sites.

Radiation Safety

Radiation safety is an individual attitude and reflects each student's motivation toward protecting himself/herself. Students will be expected to practice proper radiation safety procedures at all times when present in clinic assignments and in laboratory activities. The Clinical Coordinator will closely monitor and record monthly dosimeter readings.

Radiation Monitoring

A dosimeter is assigned to each student at the beginning of the program for the purpose of monitoring radiation exposure. Students are required to wear dosimeters on the collar during laboratory and clinical courses. Students will not be allowed in either area without it. Dosimeters are not to be worn during any activity other than clinical or lab assignments. ***Students will not wear A-State dosimeter during any occupational exposure (work) other than during clinical assignments.***

Each student will possess an electronic account for personalized radiation badge readings. Access to radiation dose will be available at any time. A radiation exposure report is made available to the students each semester by the Clinical Coordinator. Students must initial the printed exposure report to ensure they are aware of their exposure (if any). If a student exceeds a reading of 30 millirems in a given month, an investigation of cause will occur and the student will be counseled regarding exposure.

If a student exceeds a reading of 60 millirems in a given month, the student will be removed from clinical rotation while a formal investigation of cause will occur. After assurance of student safety has been established, the student will be allowed back in the clinical setting with no loss of clinical time on their record.

Proper care of the dosimeter is the responsibility of the individual student. Any discrepancy which might affect the badge reading should be reported immediately to the Clinical Coordinator.

Declared pregnant students will have a collar and fetal dosimeter assigned for more thorough monitoring. All radiation monitoring records are kept on file in the Clinical Coordinator's office.

Under no circumstances will an A-State student be exposed to radiation for any purpose other than routine radiographic examinations performed on patients (Occupational Exposure). Students must **never** hold patients for/during radiographic/fluoroscopic procedures. No student is to allow any exposure to radiation on herself/himself by any person without a physician's prescription for a radiographic examination for that student.

A-State students will NOT be allowed to expose any other individual to radiation during a radiographic procedure, (family member, nurse, technologists, etc., holding patient) without that individual first being allowed to apply the proper protective apparel prior to exposure, and questioned regarding possible pregnancy if applicable. This is considered part of the Radiation Safety Policy.

Any violation of the above will result in disciplinary action by the program faculty.

The Clinical Environment

You will notice many differences between the academic environment to which you have been accustomed and the clinical environment that you are entering. Most of the differences will prove exciting and stimulating, while some will be frustrating and aggravating. How successfully you function and learn in the clinical setting depends in part on how you approach and deal with these differences.

Professional Conduct/Behavior

The radiology department should be a place where patient confidence is inspired. This can be accomplished when one consistently exhibits a professional attitude. One must endeavor to treat patients with kindness and courtesy to ensure preservation of the patient's dignity and privacy. Examples include closing the radiography room door while the patient is in the room and taking care to keep the patient covered with appropriate gowns or blankets. Always introduce yourself and any additional people in the room, and wear your name badge.

Students are expected to maintain a professional behavior at all times, in both the classroom and clinical settings. Students also must always be aware of and comply with all policies and procedures of the clinical education site.

ALL STUDENTS WILL:

- Report to classes and clinical assignments in an alert condition
- Report to classes and clinical assignments in the proper uniform
- Maintain professional attitudes and behaviors at all times (in and out of the classroom/clinic)
- Uphold high ethical standards
- Promote a positive work environment for self and others

To achieve these objectives, students will NOT:

- Be in possession of or under the influence of controlled substances (drugs, alcohol, etc.), nor engage in their use while on clinical assignment or in didactic coursework
- Engage in immoral conduct
- Sleep in class or on clinical assignments
- Engage in theft of any articles from the clinical site or university
- Leave patients unattended while undergoing diagnostic procedures
- Falsify records
- Abuse patients, fellow students, or clinical site members physically or verbally
- Smoke/vape in areas where it is prohibited while on campus or clinical assignments
- Leave the assigned clinical areas unless instructed/permitted to do so
- Use inappropriate language or disrespectful commentary in the clinical or didactic setting
- Receive or make personal phone calls, text messages, etc., except in emergency situations
- Post or share any patient information of any kind on social media platforms

Media Policy

CELL PHONES AND ELECTRONIC DEVICES – Revised 8/12/2019

Cell phones and other electronic devices may be used as a student resource at the discretion of the faculty member and/or clinical site. Taking unauthorized photographs in clinical settings is strictly prohibited, as use of any personal electronic device to store/ enter any type of patient information is a violation of the Healthcare Information Portability Accessibility Act of 1996 (HIPAA).

Cell phones and other electronic devices may not be audible in the classroom. If your phone rings during class, you will be asked to leave and not return. Family emergency calls can be routed through the departmental office. Personal texting in class is prohibited. Using devices to screen capture or cheat on tests and papers is a violation of the Honor Code.

Violation of any of these policies may lead to a grade of F and/or dismissal from the program. Students violating the policy will be referred to the department chair. Students are expected to conduct themselves in a manner which promotes a collegiate learning environment. Behaviors and attitudes which disrupt the learning environment will not be tolerated.

SOCIAL MEDIA GUIDELINES - Revised 8/12/2019

Social media can be a way to share life experiences and opinions with others. Use of social media presents risks and carries with it certain responsibilities.

Social media includes all means of communicating or posting information or content of any sort via the Internet or other electronic communication method. Social media includes both your personal or someone else's personal web log/blog, journal, website, or chat room, and group interchanges such as Facebook, Twitter, Instagram, Snap Chat, or You Tube and social media anonymous sites. These applications are subject to having content transmitted to others, with or without consent from the original author. Additionally, per the Health Insurance Portability and Accountability Act of 1996 (HIPAA) regulations <https://www.hhs.gov/hipaa/for-professionals/privacy/special-topics/de-identification/index.html>, no information, pictures, videos or descriptions of clients/families can be posted on social media sites.

You are solely responsible for what you post online. Inappropriate postings specific to patients, classmates or faculty that include discriminatory remarks, harassment or threats, or violations of professional codes of conduct are subject to disciplinary action. Your actions could adversely affect your standing in your health professions program which could include program dismissal.

You should be aware that future employers may view potential candidate's websites. Students are advised to review their site (s) for any unprofessional images or language which could adversely affect successful employment upon graduation. Please make responsible decisions about your use of social media.

MRI Safety

Students will be introduced to the basics of MRI safety prior to their first clinical rotation. Each student will complete an MRI Screening Form during the course that will be reviewed by MRI faculty for contraindications to the MRI suite. If a student has a contraindication that may affect their safety, the student will be counseled and the mandatory Modality Day rotation in MRI requirement will be waived.

Repeat Radiograph Policy

No student will repeat a radiograph unless a clinical instructor or registered radiographer is present in the radiographic room. This policy applies to all procedures including portable examinations. Failure to comply will result in:

1. A written warning for the first offense.
2. Dismissal from the program for the second violation.

There will be **NO** exception to this policy. If a radiographer is not available, the student **MUST** wait to complete the study until such time as a radiographer will be present.

Students are required to sign a document that indicates their compliance with this policy. The signed document is filed in the student's permanent folder.

Supervision Policies

Until a student achieves and documents competency in any given procedures, all clinical assignments shall be carried out under the **direct supervision** of qualified radiographers.

The parameters of direct supervision are:

1. A qualified radiographer reviews the request for examination in relation to the student's achievement;
2. A qualified radiographer evaluates the condition of the patient in relation to the student's knowledge;
3. A qualified radiographer is present during the conduct of the examination; and
4. A qualified radiographer reviews and approves the radiographs.

After a student achieves and documents competency in a given procedure, the student may perform that procedure under **indirect supervision**. Indirect supervision means that a qualified radiographer is immediately available to assist the student if needed.

"Immediately available" is interpreted as the 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.

Dress Code

All Students:

1. Uniforms consist of charcoal grey scrubs. The top will have “stAte Medical Imaging and Radiation Sciences” embroidered on the left side. Pants should not drag the floor; the uniform should be well-fitted and without designs of any kind (other than logo).
2. Lab coats are optional. Students may select any style they prefer but they must be white. No fleece or other style jackets are allowed at this time.
3. **Shoes must be a non-porous material and should be white, grey, or black with little to no accent colors.**
4. **Only** solid white, grey, black, or red T-shirts and long sleeve shirts may be worn under the “scrub” shirt.
5. The A-State security photo ID badge is to be worn in the clinical area at all times.

General Appearance (at a minimum):

1. The A-State ID badge **IS NOT TO BE WORN** when employed by a healthcare facility.
2. Hair should be neat/clean and of natural colors. Long hair should be pulled back, away from the face.
3. Personal hygiene is to be maintained at all times.
4. Plain wedding bands and watches are the only recommended jewelry to be worn. Earrings should be modest – no large hoop or dangle earrings. Excessive body piercing, including tongue, is not allowed.
5. Uniforms must be kept clean and neat at all times. Shoes and laces should be kept clean.
6. Fingernails should be kept trimmed and neat, with **no nail polish (gel or otherwise), no false nails** of any kind.
7. No visible tattoos will be permitted while the student is in clinic. Cover with bandage.
8. Regulations regarding appearance are intended to foster professionalism. Faculty reserve the right to regulate student appearance.
9. Absolutely no cell phones are allowed on your person during clinical hours.
10. Students will refrain from perfumed products out of respect for patient sensitivities.

Dress codes at assigned clinical sites, if more rigorous, will supercede these general policies.

Attendance Policy

All students are expected to attend clinical education for the days/hours designated on the Clinical Schedule. Students are expected to be in attendance 100% of the scheduled clinical hours. Each student is given three (3) absences each semester to be used at their discretion. Should a student miss any additional time for ***any*** reason, other than a death in the immediate family (parents, grandparents, siblings, children, grandchildren, spouse) or required court appearance, a drop in one (1) letter grade will occur for every additional absence. All missed time in excess of the three personal days must be made up prior to the end of semester finals regardless of the reason for the absence.

Time deviations include arriving late, leaving early, and forgetting to clock in or out. Every 4th deviation will result in an absence.

Missed clinical days will be made up at the end of the semester (typically during the final exam schedule, unless otherwise approved by the Clinical Coordinator) in which they were missed. You may NOT make up days on the weekend. If you miss day clinic then you have to make up time during the day - same goes for evening shift.

Time Records

Clinical time is recorded through the online Clinical Reporting System (CRS). It is the sole responsibility of the student to clock themselves in and out on a clinical site computer. **Clocking in and out are not allowed on the student's cell phone unless connected to the facility's WIFI.** The time on the clinic computer and what is recorded in CRS is the "official time". The students are encouraged to arrive at the clinic early to ensure sufficient time to get clocked in. It is the responsibility of the student to clock into the correct department and facility. Failure to do so will result in a time record deviation.

If the student forgets to or is unable to clock in at 8am, they should complete a Time Exception in the CRS system.

If the student is absent, he or she must contact the clinical site and the Clinical Coordinator before the start of their scheduled clinical shift (8 a.m. for day shift and 2:30 p.m. for evening shift). The student must also clock in the CRS under Clinical Hours – Absent and make a note of who they spoke with at the clinical site.. Failure to do the above before the start of the clinical shift will result in a time deviation and an additional day of clinic must be made up. **No call/no shows are not allowed and the first offense will result in two absences being recorded and a written warning. A second no call/no show offense will result in program dismissal.**

Time records are approved every Monday. The IP address will be noted to match the IP address of the clinical education site.

Any student found guilty of falsifying time records will be dismissed from the program. The accuracy of the information documented on the time records is the responsibility of the student. **Time records, along with dosimeters, must be submitted according to your clinical syllabus. Failure to adhere to the clinical syllabus can result in a clinical absence and/or the clinical grade being lowered.**

Clinical Course Requirements

Miscellaneous Policy Concerns and Proposals

Clinical competency credits achieved during a course in which a student received a grade less than “C” will not be used toward graduation requirements and will need to be repeated.

Clinical Competency Credits

Clinical credit is earned through the completion of the *mandatory* and *elective* clinical competencies. A complete list of the approved competencies is included in this handbook.

- a. Clinical competency credits are achieved by performing radiographic procedures on patients during clinical education.
- b. The observation and evaluation of the student's procedural skills is done by clinical instructors, staff radiographers and/or university faculty.
- c. Students are responsible for arranging for an evaluator to be present during the procedure to carry out the competency observations.
- d. Not more than one competency will be granted for the same procedure (e.g., a portable wrist will not count as a wrist and a portable orthopedic exam).

The specific competencies on which a student selects to work in any given semester are determined by three factors: 1) The procedure has been covered in the lecture course and the written test on that material has been covered, 2) the lab practical exam has been successfully completed, and 3) the student has performed the procedure on a patient a number of times and feels confident and prepared to complete the competency for clinical credit.

When the student is totally prepared to complete the procedure for clinical credit, then he/she is responsible for requesting competency evaluation from a designated technologist or A-STATE faculty member. The designated faculty/technologist must be present in the room throughout the procedure. Only technologists who have been in-serviced by A-STATE Radiography Program faculty are eligible to evaluate students.

The student is responsible for setting the technical factors, regardless of the availability of technique charts. Therefore, the student should be familiar with the current technical functioning of the radiographic room prior to the time when the examination is performed for competency credit. During the procedure, but any time prior to the first exposure, the student may request to terminate the competency without penalty.

No more than three competencies may be attempted for clinical credit on a single patient by an individual student. No more than two students may perform competencies on the same patient. If the competency is unsuccessful, it cannot be repeated on the same patient.

All images must be identified with the correct student initial marker and correct patient ID.

Faculty will be available to review clinical image critiques on a regular basis throughout the semester.

To graduate and be eligible to meet the ARRT clinical competency requirements, students must:

- Complete 10 mandatory patient care competency exams
- Complete 37 mandatory clinical procedures

- Complete 15 of the 34 elective clinical procedures, to include at least one:
 - Headwork exam
 - An upper GI or barium enema
 - An additional fluoroscopy exam (beyond UGI or BE)

Students failing a clinical course (grade of less than a C) cannot accumulate clinical credits or hours from that course toward clinical graduation requirements.

Clinical Proficiencies

Throughout the student's clinical educational career clinical proficiencies will be required. These are a continuation of the competency exams previously and successfully completed. Clinical proficiencies will not require an image critique; however, each one must be successfully completed. Students should carefully review each clinical syllabi for the required number of competencies and proficiencies needed each semester.

Simulations

During Summer II, simulations may be needed to meet ARRT Clinical Competency requirements. A total of five (5) procedures may be simulated for credit.

A simulation consists of two parts: the positioning portion of the procedure and the filming portion of the procedure. When performing the positioning portion of the procedure the student is responsible for bringing someone to act as the patient. The student must follow the same process for the simulation as would be required on an actual patient. The imaging portion of the procedure is performed on the phantom. When performing the imaging portion of the procedure, the student is responsible for setting the technique and producing the finished radiographs.

Simulated procedures for clinical credit are evaluated in the same manner as clinical competencies in the clinical setting. The faculty will perform an image critique on the resultant films.

Evaluation Criteria

A competency evaluation must be completed in Trajecsys for each competency and simulation attempted and/or completed for clinical credit. The criteria listed below identify the specific behavioral objectives for which the student is responsible under each general heading on the competency evaluation form. This is the criteria by which the student will be evaluated for **ALL** competency evaluations, both simulations and non-simulations, and proficiencies.

Student was able to:

- A. Patient Relationships
 - 1. Interpret request accurately
 - 2. Correlate patient identification
 - 3. Obtain accurate history/assessment
 - 4. Assist the patient appropriately (safety, privacy, etc.)

- B. Technical Factors
 - 1. Center part correctly
 - 2. Select appropriate image receptor
 - 3. Select suitable kVp

4. Select suitable mA
 5. Select suitable time
 6. Select suitable accessory functions (Bucky, etc.)
- C. Positioning Skills
1. Instruct patient properly (breathing/explanations, etc.)
 2. Position patient correctly (oblique/prone/erect/decub./ etc.)
 3. Utilize anatomy landmarks correctly (palpate/rotate/etc.)
 4. Align tube, film, area of interest accurately (central ray/SID/etc.)
 5. Angulate central correctly (degree & direction)
 6. Utilize immobilization devices (sponges/clamps/etc.)
 7. Remove extraneous items (jewelry/dental work/etc.)
 8. Utilize appropriate markers
 9. Perform positioning efficiently (sequence/speed/etc.)
- D. Radiation Protection Methods
1. Collimate beam properly
 2. Ascertain probability of pregnancy (inquiry or other means)
 3. Practice operator protection (aprons/gloves/etc.)

Clinical Advising Program

All students enrolled in radiographic clinical education are evaluated and advised regarding their ability to care for patients in a professional and ethical manner. The advising program is conducted via several documents:

“**Attitude and Behavior**” forms are used by staff radiographers to give students and faculty an opinion of the students' trends in professional attitudes and behavior. Students do not see these actual forms but are supplied with a composite each semester.

Performance Objectives are activities or skills that are expected of a student at a particular education level.

Completed **competency and proficiency exams** are evaluated by the Clinical Coordinator for accuracy and timeliness. Students not performing at a minimum level will be counseled and appropriate action taken to maximize student success.

Clinical Education Sites

Location	Abbreviation	Contact
1st Choice HealthCare: 1300 Creason Road, Corning, AR 72422 #1 Medical Drive, Paragould, AR 72450 141 Betty Drive, Pocahontas, AR 72455 201 Colonial Drive, Walnut Ridge, AR 72476		Director: Lisa Priest
Arkansas Children's Hospital 800 Marshall, Little Rock, AR 72203 (501) 364-4912 (dept.)	(ACH)	Director: Paula McElhanon
Arkansas Methodist Hospital 900 W. Kingshighway, Paragould, AR 72450 (870) 239-7000	(AM)	Director: Shelley Cornelison
Baptist - Crittenden 2100 N 7th St, West Memphis, AR 72301 (870)394-7833	(CRIT)	Director: Daniel Massey CIs: Susan Thigpen/Savannah Allen
Clopton Clinic 300 Carson Street, Jonesboro, AR 72401 (870) 932-1198	(Clopton)	CI: Debbie McCormick
CrossRidge Community Hospital 310 S. Falls Blvd, Wynne, AR 72396 (870) 208-2136	(CR)	Director: Melanie Burnette
Five Rivers Medical Center 2801 Medical Center Dr., Pocahontas, AR 72455 (870) 892-6233	(FR)	Admin: Becky Brown
Great River Medical Center 1520 N. Division Street Blytheville, AR 72316 (870) 838-7365	(GR)	HR: Sherry Marshall Director: Mark Grubbs CI: Laurie Clark
John J. Pershing – VA Med Center 1500 N. Westbrook, Poplar Bluff, MO 63901 (573) 778-4786	(VA)	Director: Debby Shephard
Jonesboro Orthopedics and Sports Medicine 1010 Main St., Jonesboro, AR 72401 (870) 932-1820	(JOSM)	Director: Kacey Davis CI: Abbey Leonard
Lawrence Memorial Hospital 1309 Hwy. 25 W., Walnut Ridge, AR 72476 (870) 886-1244	(LMH)	Director: Don Hubbard
NEA Baptist Medical Center 4800 East Johnson, Jonesboro, AR 72401 Main: (870) 936-1097 Internal Medicine: 870-936-7764 Orthopedics: 870-936-2503 Imaging Center: 870-936-8031/936-8035	(NEA)	Admin: Becky Brewer Admin: Becky Gober CI: Noah Tasker

Location	Abbreviation	Contact
Outpatient Radiology Clinic 200 S. Rhodes Suite B, West Memphis, AR 72301 (870) 735-5555	(ORC)	CI: Cherie Bricker
Paragould Medical Park 4000 Lynnwood Drive, Paragould, AR 72450 (870) 239-8222	(MP)	Director: Shelley Cornelison CI: Jennifer Luther
Poplar Bluff Medical Center 2620 N. Westwood Blvd, Poplar Bluff, MO 63901 (573) 785-7721	(PBMC)	Director: Becky Eyler Jay Patterson
South Mississippi Cty Med Center 611 West Lee, Osceola, AR 72370 (870) 563-7092	(SMC)	CI: William Foster *See Great River Medical
St. Bernard's Regional Med Center 225 East Jackson, Jonesboro, AR 72401 (870) 207-5300	(SB)	Director: Valerie Early Ed Coordinator: Mitzi Pierce
St. Bernard's Imaging Center 1144 E. Matthews, Jonesboro, AR 72401 (870) 207-8000	(SBIC)	Ed Coordinator: Rachel Smith
The Children's Clinic 800 South Church Street, Jonesboro, AR 72401 (870) 277-1540	(CC)	Admin: Tisha Cox
Unity Health – Newport (Harris Hospital) 1205 McLain, Newport, AR 72112 (870) 512-3004	(UN)	Admin: Linda Johnson
Unity Health – Searcy (White County Med Center) 3214 E. Race, Searcy, AR 72143 (501) 268-6121	(US)	Director: Laurie Sindle CI: Jane Klinkman
White River Medical Center 1710 Harrison St., Batesville, AR 72503 (870) 262-1257	(WR)	Director: Amy Whitton CI: Cindy Stout

The health care facility where you will be performing your clinical rotation may require proof of vaccination to COVID, or other medical conditions, in order to participate in your rotation at the facility.

Credentialing and or student clearance at clinical placement sites may vary. In addition to providing proof of COVID-19 vaccination, you may be expected to complete additional requirements including, but not limited to orientations; COVID-19 training; paperwork; release of liability signature sheets; and COVID-19 testing and/or screening. You will be expected to comply with all clinical placement site processes for credentialing and/or student clearance and the program is not obligated to find alternative placement due to failure to follow a site's requirements. Failure to comply with any site requirement may result in delay of program progression or graduation.

Every hospital and clinic has their own emergency code system, location of emergency drugs, emergency evacuation procedure, etc. While you will receive a thorough orientation at your first assigned clinical site, it will be your responsibility after that initial assignment to learn subsequent routines at new clinical assignments. Listed above are clinical sites currently used by the A-State Radiography program. Periodically, these sites may change when some are deleted and others added. The initials beside each name are how assignments will be printed on rotation schedules each semester.

Forms

This section includes the following:

- Pregnancy Declaration
- Substance Abuse Compliance Contract
- Incident Report Form
- Repeat Radiograph Policy
- Room Orientation Checklist
- Statement of Confidentiality
- Physical Performance Requirements
- Safety and Health Statement
- Procedures for College Students – Code of Honor
- College Code of Honor
- HIPAA Compliance Contract
- Clarification of Student Role
- Personal Clinical Documentation Record
- Statement of Understanding/Agreement

Pregnancy Declaration

ARKANSAS STATE UNIVERSITY
COLLEGE OF NURSING AND HEALTH PROFESSIONS
RADIOGRAPHY PROGRAM

Pregnancy Declaration Form

I, _____, have been personally advised of the possible risks and complication due to radiation exposure to my unborn child by a faculty member of the Radiography Program. I understand these risks and the radiation precautions I must take in choosing to remain active in the professional program. My anticipated due date is: _____.

My signature below indicates my understanding of the possible risks due to radiation exposure to my unborn child. My signature also indicates that I release Arkansas State University, the Radiography Program and its faculty, the clinical education center and its employees from all liability of problems or complications that may arise during my pregnancy.

At this time, I would like to:

- _____ Declare my pregnancy and continue in the program with appropriate modifications
- _____ Declare my pregnancy and continue in the program without modifications
- _____ Withdraw a previously declared pregnancy
- _____ Withdraw from the program with the option to return at a later date (upon seat availability)

Signature of Student

Date

Faculty Witness

Date

Substance Abuse Compliance Contract

ARKANSAS STATE UNIVERSITY
COLLEGE OF NURSING AND HEALTH PROFESSIONS
RADIOGRAPHY PROGRAM

I, _____, have read the Board of Trustee approved *Substance Abuse Policy & Procedures* of the Arkansas State University College of Nursing and Health Professions and agree, as a student in the professional health program, to comply with all aspects of the policy as written, including testing for substances and appropriate release of that information. Furthermore, I agree to abide by the provisions for determining dismissal and to follow the conditions of readmission as outlined.

Student Name:

Date:

Student's Signature:

Incident Report Form

ARKANSAS STATE UNIVERSITY
COLLEGE OF NURSING AND HEALTH PROFESSIONS
RADIOGRAPHY PROGRAM

Date:

Time:

Location:

(On campus/Off campus)

Student:

SS# _____

Description of Incident (Name all persons involved):

Witnesses of the Incident: _____

Action Taken (notification of/by whom):

Review/Comments: _____

Does this need review by the Infection Control Committee?

Yes

No

Student Signature

Date:

Faculty Signature

Date:

Follow up:

If more space is necessary, use additional pages or back of sheet.

Repeat Radiograph Policy Compliance

ARKANSAS STATE UNIVERSITY
COLLEGE OF NURSING AND HEALTH PROFESSIONS
RADIOGRAPHY PROGRAM

In accordance with Radiation Safety as stated in the Radiography Program Student Handbook, no student will repeat a radiograph unless a clinical instructor or registered radiographer is present in the radiographic room. There will be **NO** exception to this policy.

Failure to comply with this policy will result in:

1. A written warning for the first offence.
2. Dismissal from the program for the second violation.

I, _____, have read and understand the Repeat Radiographs Policy as specified in the Radiography Program Student Handbook. My signature on this document indicates my understanding of the policy and the disciplinary procedures should I fail to comply with this policy.

Signature of Student

Date

Faculty Witness

Date

Room Orientation Checklist

ARKANSAS STATE UNIVERSITY
COLLEGE OF NURSING AND HEALTH PROFESSIONS
RADIOGRAPHY PROGRAM

Student: _____

Date: ___/___/___

Affiliate: _____

Room: _____

Evaluator: _____, R.T.

Students working in radiography room should be oriented to the following:

ROOM EQUIPMENT	YES	NO
1. Radiographic table locks		
2. X-ray tube locks/releases		
3. If fluoro equipped, moving tower in/out of place		
4. Attachment of foot board		
5. Oxygen hook-up		
6. How Bucky tray moves/locks		
7. How vertical Bucky holder moves		
8. If vertical Bucky, how image receptors are inserted/removed		
9. Operation of control panel		
10. How image receptors are inserted in digital reader		
11. Operation of workstation monitors		
12. Operation of PACS system		
13. Storage area for clean linens		
14. Storage area for accessories (Ex: emesis basin, gloves)		

Statement of Confidentiality

ARKANSAS STATE UNIVERSITY
COLLEGE OF NURSING AND HEALTH PROFESSIONS
RADIOGRAPHY PROGRAM

I understand and agree that in the performance of my duties as a student in the **A-State Radiography Program**, I must hold all medical information in confidence. I understand that any violation of the confidentiality of medical information may result in punitive action.

Signature of Student

Date

Faculty Witness

Date

Physical Performance Requirements

ARKANSAS STATE UNIVERSITY
COLLEGE OF NURSING AND HEALTH PROFESSIONS
RADIOGRAPHY PROGRAM

Students are advised of the following guidelines for working in the Radiography environment. Please indicate if you can perform at the level indicated or if you need accommodations to accomplish the designated task.

STRENGTH & MOBILITY: Yes _____ No _____ (*please explain below*)

- Walk several hours each day, either performing exams, patient transfers, or portable procedures.
- Assume varied postural positions (bending, kneeling, stretching) to work with equipment and patients.
- Lift heavy weight as necessary, either equipment or patients.
- Push/pull stretchers, wheelchairs, portable x-ray equipment, and supply carts as necessary.

MANUAL DEXTERITY & COORDINATION Yes _____ No _____ (*please explain below*)

- Use the thumb/hand/wrist and arm and hand movements to perform such tasks as venipuncture, positioning of the x-ray equipment, assisting patient movements, and operating a computer.
- Use the lower extremities to perform such tasks as manipulating foot table locks and operating foot pedal for fluoroscopy exams.
- Visualize objects distinctly and clearly with or w/o corrective devices.
- Hear sounds distinctly and clearly, with or w/o corrective devices.
- Possess sensory discrimination (understanding accurately what is seen, heard, felt, tasted, or smelled).
- Utilize protective clothing correctly, when necessary, such as gowns, masks, gloves, shoe covers when working with patients in isolation, lead aprons for self-protection from radiation, and surgical gowns, caps, gloves, shoe covers for surgery cases.

MENTAL ABILITIES Yes _____ No _____ (*please explain below*)

- Follow oral and written instructions correctly.
- Effectively communicate issues, concerns, or questions to the appropriate party.
- Adhere to the proper chain of command to resolve issues.

In accordance with the Americans with Disabilities Act, I _____ (print name)

Please Check One:

_____ need special accommodations to complete the RAD program (list needs on back).

_____ require no special accommodations to complete the RAD program.

Comments or explanations from above sections:

Student signature: _____ Date: _____

Safety and Health Statement

ARKANSAS STATE UNIVERSITY
COLLEGE OF NURSING AND HEALTH PROFESSIONS
RADIOGRAPHY PROGRAM

This course(s) may require the use of hazardous chemicals or equipment that the University Safety Committee recognizes as potentially hazardous to a student's safety and health. Every instructor is required to provide instructional information and training on safe handling and usage procedures prior to engaging students in the use of hazardous chemicals or equipment.

In addition, students are advised to notify the instructor or laboratory supervisor of any medications or conditions that may impair their (the student's) mental alertness and/or their (the student's) ability to safely engage in the use of any hazardous chemical(s) or equipment.

All students should participate in the use of hazardous chemicals and equipment only under the direct supervision of the instructor or by approval of the instructor, using recommended methods and procedures. Failure to adhere to the outlined safety precautions could result in disciplinary action.

My signature below indicates that I have read and understand the above statements.

Student signature

Date

Faculty witness signature

College Code of Honor

College Student Academic Honor Code

Each student admitted to a professional program in the College of Nursing and Health Professions is charged with the responsibility of honorable academic conduct. A student is assumed honorable until his/her actions prove otherwise. An academic honor offense is defined as an act of lying/willful misrepresentation, cheating/unauthorized collaboration, plagiarism or facilitating academic dishonesty of others. Formal procedures exist for violations of the academic honor code.

As a student in a health program, it is fundamental that you act in an honorable and virtuous way so that a community of trust is established among members of the college and your clients. Honor is a practiced ideal that will positively impact your relationship with fellow students, faculty, administrators, patients and other members of the community. As you live an honorable life, you will find that you cannot live without it.

All students in this college are bound by the Honor Code and all are needed to make it work. The atmosphere of trust and integrity that is created by an honor system enables the student to know his/her word will be taken as true, to compete fairly in the classroom and to keep what is rightfully his/hers. The system functions best when all members of the college not only take responsibility for their own actions, but hold their peers to the same standards.

As a student admitted to a health professions program, you must agree to live by and support the basic principles of honesty – no lying, cheating or stealing; be accountable for your actions; and share information about honor offenses. If you are not prepared to accept these responsibilities, you should select a program outside this college.

I have read the explanation of the College Student Code of Honor. I understand that as an admitted student in one of the programs in the college, I have accepted the pledge of honesty and will be expected to meet the standards as set forward.

Signature

Date

MIRS Honesty Policy

Arkansas State University
Radiography Program
Academic Honesty Policy and Clinical Experience

All class members are assumed to be honest. Consequently any cheating or plagiarism during any class activity is considered to be unethical and may result in a grade of "0" for that activity, failure of the course, or dismissal from the academic program. For clinical experiences, academic honesty also includes keeping accurate clinical records such as: log books, time records, competencies and proficiencies. **Discovery of falsified clinical documents WILL result in immediate dismissal from the program.**

I understand this policy and this document will serve as a written warning. I understand that falsification of clinical documentation will result in my dismissal from any MIRS program.

Student Signature

Student Printed Name

Date

HIPAA Compliance Contract

ARKANSAS STATE UNIVERSITY
COLLEGE OF NURSING AND HEALTH PROFESSIONS
RADIOGRAPHY PROGRAM

I, _____, have read the information provided to me concerning the Health Insurance Portability and Accountability Act (HIPAA) and understand its intention. As a student in a professional health program, I agree to comply with the requirements of HIPAA.

I understand that during clinical experiences, I will have access to protected personal health information (PHI as defined by HIPAA) of individuals and agree to:

- a) Only use or disclose PHI as permitted Clinical Service under HIPAA statute(s);
- b) Use appropriate available safeguards to prevent misuse of PHI;
- c) Make PHI available to individuals as set forth under the HIPAA statute(s);
- d) Return or destroy all PHI upon termination of a clinical assignment; and
- e) Report any improper disclosure of PHI within ten days of discovery to my Clinical Instructor and/or the Director of Clinical Education.

Student's name

Student's signature

Date

Clarification of Student Role

ARKANSAS STATE UNIVERSITY
COLLEGE OF NURSING AND HEALTH PROFESSIONS
RADIOGRAPHY PROGRAM

I hereby confirm that I am being assigned to one of the clinical sites (the “Institution”) listed below for the purpose of participating in clinical training and experience required as part of my course study at Arkansas State University (the “University”). I recognize and agree that I am not the agent or employee of the University for any purposes whatsoever during my clinical studies at the Institution. I further acknowledge and confirm that I am a student only and have no authority to act on behalf of the University in any capacity, nor will I be compensated for my time or transportation at/to/from the clinical site.

Student	Date
1st Choice Healthcare	Outpatient Radiology Clinic
Arkansas Children’s Hospital	Paragould Medical Park
Arkansas Methodist Hospital	Poplar Bluff Regional Medical Center
Children’s Clinic	South Mississippi County Medical Center
Clopton Clinic	St. Bernard’s Imaging Center
Cross Ridge Community Hospital	St. Bernard’s Regional Medical Center
Five Rivers Medical Center	Veteran’s Hospital
Great River Medical Center	Unity Health Newport
Jonesboro Orthopedics and Sports Medicine	Unity Health Searcy
Lawrence Memorial Hospital	White River Medical Center
NEA Baptist Medical Center	

Personal Clinical Documentation Record

ARKANSAS STATE UNIVERSITY
COLLEGE OF NURSING AND HEALTH PROFESSIONS
RADIOGRAPHY PROGRAM

Prior to entering any clinical site (Institution) I have been counseled on, or had to show proof of:

All personal records and documentation are kept on file in the Clinical Coordinator's office at Arkansas State University. It is the sole responsibility of the student to ensure all health records are up to date. Failure to do so will result in removal from clinic.

Item	Initial Date	Renewal Date(s)
HIPAA compliance		n/a
CPR		
Flu		
Hepatitis B Series (3 shots)		
TB skin test		
TB Mask fitting		
Liability Insurance		
Physical health exam		n/a
Criminal background check		n/a

Statement of Understanding / Agreement

ARKANSAS STATE UNIVERSITY
COLLEGE OF NURSING AND HEALTH PROFESSIONS
RADIOGRAPHY PROGRAM

NAME (PRINT): _____

ADDRESS: _____

TELEPHONE: _____

My signature below certifies that I agree with the following:

1. I have received the Radiography Student Handbook.
2. I have read the Radiography Student Handbook.
3. I understand that I am responsible for all assignments and policies specified in the Handbook, even if they are not stated aloud by the RT Faculty.
4. I understand all policies stated in the Handbook.
5. I understand the penalties for policy violation and/or misconduct.
6. I understand the clinical grading procedure.
7. I agree to abide by the professional behavior requirements stated in the Handbook.
8. I understand that addendums may be made at any time that will affect the policies listed in the Handbook. I agree to abide by the changes made by those addendums.
9. I agree to adhere to the guidelines and policies stated in the Handbook.

Signature

Date

Faculty Witness