

LOUISIANA STATE UNIVERSITY of ALEXANDRIA
Department of Allied Health

Radiologic Technology Program



2021 – 2022
Student Handbook

PREFACE

This handbook is prepared for use by students enrolled in the Associate of Science in Radiologic Technology Program and contains information specific to this program. The information in this handbook is not intended to be wholly independent, but instead, a complement to the LSUA General Catalog and the LSUA Student Handbook which are maintained and published by Louisiana State University of Alexandria. For general policies, see the LSUA General Catalog and the LSUA Student Handbook.

The purpose of this Handbook is to provide guidelines to aid you through the Radiologic Technology Program at Louisiana State University of Alexandria and provide you an understanding of our policies. To accomplish this, it is important that you know and understand exactly what is expected of you. This handbook should help you realize what is expected of you as a student in a healthcare profession. Should you need further clarification or have additional questions, feel free to contact the Program Director.

The information in this handbook is current at the time of printing. However, policies, guidelines, and procedures are subject to change. The information in this Handbook is **SUBJECT TO CHANGE**. The Program **RESERVES THE RIGHT** to modify any statement; the policies as written may be modified, superseded, or eliminated. Final interpretation of program policies and procedures will be made by the program's faculty. You will be notified of any such changes.

Not every circumstance can be predicted. Any area not covered in this Handbook will be dealt with on an individual basis. In addition to this Handbook, students should also be aware of the LSUA General Catalog and Student Handbook which can be found at www.lsua.edu. We urge you to study these materials.

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Acknowledgment of Receipt and Understanding of the Radiologic Technology Program Handbook

My signature below indicates that I have received, read, and understand the Handbook for the Radiologic Technology Program at LSU Alexandria. I agree to abide by **ALL** Rules and Regulations outlined in this handbook. I understand that I am responsible for adhering to these policies and procedures. I also understand that failure to abide by these Rules and Regulations may serve as grounds for my dismissal from the Radiologic Technology Program.

Student Name (printed)

Student Signature

Date

Academic Honesty Statement

I understand that LSU Alexandria has a Code of Student Conduct. The academic work that I submit will be my own, and I will not receive any unauthorized assistance with any work that I submit for this program. I further attest that I will not falsify documents to include clinical time records and evaluations.

Student Signature

Date

Statement of Non-Discrimination

Pursuant to the Rehabilitation Act of 1973, Section 504, LSU of Alexandria will provide services and training, without discrimination, to any qualified handicapped person who meets academic and technical performance standards requisite to admission and/or participation in the Radiologic Technology Program.

Contact Information

Program Director: Tess Myers, Ed.D, R.T. (R) 318-473-6466 O
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Clinical Coordinator: Sarah Barnes, M.B.A., R.T. (R) (CT) 318-427-4463 O
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Administrative Assistant: Sandra Gremillion 318-473-6466

Clinical Education Sites: (miles from main campus)

Avoyelles Hospital 318-240-6194
4231 LA 1192, Marksville, LA (25 miles)
CI: Delain Moreau

Bunkie General Hospital 318-346-3317
427 Evergreen St, Bunkie, LA (24 miles)
CI: Bobbie Gauthier

Central Louisiana Imaging Center. 318-442-7500
3704 North Blvd, Alexandria, LA (6 miles)
CI: Brandi Ewing

Christus Cabrini Surgery Center 318-427-6500
3436 Masonic Dr, Alexandria, LA (8 miles)
CI: Heather Mitchel

Christus St. Frances Cabrini Hospital 318-448-6734
3330 Masonic Dr, Alexandria, LA (8 miles)
CI: Mandi Skursky, Tina Smith, Christy Tassin

LaSalle General Hospital 318-992-9200
187 9th St, Jena, LA (47 miles)
CI: Jordie White

Oakdale Community Hospital 318-215-3003
130 Hospital Dr, Oakdale, LA (33 miles)
CI: Wayne Deville

VA Medical Center 318-466-2971
2495 Shreveport Hwy, Pineville, LA (15 miles)
CI: Nicole Jarrell

Winn Parish Medical Center 318-648-3010
301 Par Rd 245, Winnfield, LA (58 miles)
CI: Amber Callendar

Program Mission

The Radiologic Technology Program at Louisiana State University Alexandria is designed to prepare graduates who are competent in the art and science of radiography. The graduates of the program will receive an Associate of Science Degree in Radiologic Technology and are prepared to complete the National Certification Examination administered by the American Registry of Radiologic Technologists.

Program Goals

The following are the goals of the Radiologic Technology Program at Louisiana State University Alexandria:

Goals	Objectives
Students will be clinically competent.	<ul style="list-style-type: none">• Students will effectively apply knowledge of exposure factors.• Students will be prepared to demonstrate proper radiation safety practices.• Students will be prepared to perform routine radiographic studies.
Students will communicate effectively.	<ul style="list-style-type: none">• Students will demonstrate effective written communication skills.• Students/Graduates will communicate effectively with patients, peers, and other medical professionals.
Students will use critical thinking and problem solving skills.	<ul style="list-style-type: none">• Students will demonstrate critical thinking skills and problem solving skills.• Students will identify diagnostic quality images and correct non-quality images accordingly.
Students will evaluate the importance of professionalism.	<ul style="list-style-type: none">• Student will demonstrate ethical treatment of patients.• Students will demonstrate attitudes and behaviors that are representative of a competent healthcare professional.

Accreditation

The Radiologic Technology Program is accredited under Louisiana State University of Alexandria's Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) and approved by the Louisiana State Radiologic Technology Board of Examiners.

Additionally, The Louisiana State University Alexandria Radiologic Technology Program is accredited and evaluated by the Joint Review Committee on Education in Radiologic Technology (JRCERT). Inspection of these documents is available through the Program Director. The JRCERT is dedicated to excellence in education and to quality and safety of patient care through educational programs in radiation and imaging sciences. The JRCERT is recognized by the United States Department of Education (USDE) and the Council for Higher Education Accreditation (CHEA) to accredit educational programs in radiography and radiation therapy. The JRCERT awards accreditation to programs demonstrating substantial compliance with the STANDARDS.

There are six established standards a program must be in compliance with to achieve accreditation:

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.

NOTE: As of 2021 LSUA is on a probationary status with JRCERT for low first time pass rates. The probationary period runs through November 2023.

For more information on the JRCERT Standards, please refer to the JRCERT website at www.jrcert.org Contact Information: 20 N. Wacker Drive, Suite 2850, Chicago, IL 60606-3182 Phone: (312) 704-5300

Complaint Resolution Policy for Non-Compliance of JRCERT Standards

The Radiologic Technology Program at LSU Alexandria has voluntarily participated in accreditation by the Joint Review Committee on Education in Radiologic Technology (JRCERT). The accreditation process assures students, graduates, patients, and the public, of the program's commitment to academic excellence and growth and continuing program enhancement and effectiveness.

The Radiologic Technology Program of LSU Alexandria strives at all times to be in compliance with the JRCERT Standards for an Accredited Educational Program in Radiologic Sciences. If an individual believes, at any time, the program is not in compliance with any standard; a complaint can be filed with JRCERT. First attempt to resolve the complaint should be directly with LSUA or program officials. If the complaint has not been properly addressed, allegations of non-compliance may be reported directly to the JRCERT.

Certification / Licensure Requirements

Certification Status / 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, RT(R)(ARRT), you will have to successfully complete the ARRT examination.

Students completing the program are eligible for certification by the **ARRT**. The Program Director provides applications during March of the final semester. Students completing the program in May are eligible to take the ARRT examination on any day the examination is offered after your graduation. The Registry begins accepting applications three months prior to the student's graduation date. It is the student's responsibility to submit their application early to ensure the desired testing appointment time (see ARRT Examinee Handbook). The completed application must be signed by the Program Director before it can be submitted to ARRT. The appropriate fee must be submitted with the application. Questions regarding this matter should be forwarded to **ARRT at (651) 687-0048**.

THE AMERICAN REGISTRY
OF RADIOLOGIC
TECHNOLOGISTS®

Notice of Felony or Misdemeanor Convictions

The American Registry of Radiologic Technologists (ARRT) has stringent rules regarding misconduct and eligibility to take the national registry exam. In order to meet ARRT certification requirements, you may complete the pre-application review process with the ARRT prior to program enrollment to avoid delays and uncertainty regarding certification eligibility if you have been:

- convicted of a crime, including a felony, a gross misdemeanor, or a misdemeanor with the sole exception of speeding and parking violations, or a similar offence in a military court-martial;
- any alcohol and/or drug related violations;

- had any license, registration, or certification denied, revoked, suspended, placed on probation, or subjected to discipline by a regulatory authority or certification board (other than ARRT);
- suspended, dismissed, or expelled from an educational program that you attended.

The pre-application review form is downloadable from the Ethics section of ARRT's website at www.arrt.org or by phoning ARRT at (651) 687-0048, ext. 8580.

In the event that a student or graduate of the Radiologic Technology Program is concerned about ARRT eligibility, it is the sole responsibility of the student or graduate to certify eligibility with the ARRT.

State Licensure Status

The **Medical Radiation Health and Safety Act No. 485** requires that all persons in hospitals and clinics using radioactive materials or equipment emitting or detecting ionizing radiation on humans for diagnostic or therapeutic purposes is to be licensed by the State of Louisiana. To work as a registered radiologic technologist in a hospital located within Louisiana, you are required to hold a valid license granted by the state. Students enrolled and attending a Board approved school of Radiologic Technology, who apply ionizing radiation to humans for necessary diagnostic or therapeutic purposes while under the supervision of a licensed practitioner or licensed Radiologic Technologist at the approved clinical affiliate of the sponsoring institution, are exempt from licensure requirements. Students are exempt only for clinical hours required by the program. Students are not allowed to work in the capacity of a Radiologic Technologist at any hospital or clinic. Questions regarding this matter should be forwarded to the **LSRTBE at (504) 838-5231**.



LOUISIANA STATE RADIOLOGIC TECHNOLOGY
BOARD OF EXAMINERS

Graduates of the program who are seeking employment but awaiting their first ARRT examination results must submit an application and appropriate fees to the appropriate State Board (LSRTBE) for a license and a temporary permit. The Program Director provides the application during March in the final semester. It is the student's responsibility to complete the application process, obtain the Program Director's signature, and submit the application with the appropriate fees. The examination for State Licensure is the examination given by the ARRT. Graduates must allow the ARRT to release their examination results to the State Board. Failure of the reexamination results in revocation of the temporary permit which cannot be renewed and loss of work in a hospital. Graduates may then reapply for examination but a license will not be issued by the State until all qualifications and requirements of successful completion of the ARRT examination have been met.

Professional Societies

Many organizations play key roles in the professional lives of radiologic technologists.

LSRT

The state society is the Louisiana Society of Radiologic Technologists (LSRT; <http://www.lsrtnet.net>). All professional students are **REQUIRED** to join the LSRT. The LSRT conducts two educational meetings per year (The Mid-Winter Seminar and the Annual Conference) which students may be **REQUIRED** to attend. Student membership is available for a reduced fee. The LSRT also has student scholarships available. For more information, see the LSRT website or the Program Director.

ASRT

The national society is the American Society of Radiologic Technologists (ASRT; <http://www.asrt.org>). The ASRT has student memberships available for a reduced fee, as well as, student internships, grants, and scholarships. For more information, see the ASRT website or the Program Director.

Lambda Nu

Lambda Nu is the national honor society for the radiologic and imaging sciences. Students with a grade point average of 3.3 or higher on a 4.0 scale will be invited into the honor society just prior to graduation.

Conference Attendance

Conference attendance for **BOTH** Mid-Winter and Annual Conferences is **REQUIRED**. Students are responsible for their financial obligations to attend conference including: membership to LSRT, Conference fee, hotel accommodations, travel, food, etc. You are joining a society of professional healthcare workers, which requires continuing education. As such, you are **REQUIRED** to participate in professional societies, which will provide opportunities for education, professional development, and networking. There are **NO** options to miss these events. **The only excused absence will require a doctor's note with a positive FLU or COVID test result.**

Technical Standards

Technical Standards are adopted by some health career programs to aid in the assurance that students will be able to complete the program successfully. Students accepted and progressing in the Radiologic Technology Program must be physically and mentally capable of successfully performing the following requirements. Any limitation of a student that may restrict or interfere with satisfactory performance may result in the necessity of withdrawal from the course and/or program. Reasonable accommodation for the Technical Standards may be requested. Reasonable accommodation in the Technical Standards is not the same as reasonable accommodations under the Americans with Disabilities Act. Whether a requested accommodation is reasonable must be determined by the Program Director on an individual basis, in consultation with the involved student and appropriate school officials. A student in the Radiologic Technology Program must possess the following:

- **Actively** participate in all demonstrations, laboratory exercises, and clinical experiences in the professional program component of the degree and to assess and comprehend the condition of all persons assigned to him or her for examination, diagnosis, and treatment. Such observation and information usually requires the functional use of visual, auditory, and somatic sensations.
- **Communicate** effectively, sensitively, and audibly with persons in order to elicit information, describe changes in mood, activity and posture, assess non-verbal communications, and be able to effectively and efficiently receive from and transmit information to persons, fellow students, faculty and staff, and all members of the health care team. Communication skills include listening, speaking, reading, and writing, as well as the observation skills described above.
- **Sufficient** sight to read requisitions and medical charts, observe a patient's condition from across a room in low levels of light and to evaluate medical images (including different shades of gray) computer screens.
- **Sufficient** hearing to interact with and respond to patients at a distance of 20 feet as well as to the audible sounds of equipment.
- **The** ability to stand and walk for 80% of clinical time.
- **The** ability to lift up to 50 pounds occasionally, assist and maneuver patients in wheelchairs, stretchers, and imaging tables without injury to patient, self, or other members of the health care team.
- **The** ability to respond appropriately and effectively to medical emergencies.
- **Sufficient** motor skills to manipulate, lift, and reach equipment and to operate small controls on equipment.
- **Cognitive** ability to perceive and deal appropriately with environmental threats and stresses and continue to function safely and effectively during high stress periods.
- **The** ability to protect oneself and others from hazards in the healthcare environment, such as infectious disease, contaminated equipment, sharp instruments, chemical fumes, and radiation.

Developed: 2008

Revised: 2016, 2018

Face Mask Policy

LSUA is a community, and our members are expected to avoid endangering the health and safety of other members of the community. During the COVID-19 Pandemic, face mask policies may change periodically. It is the student's responsibility to follow the current LSUA face mask policy.

When students are participating in clinical education, they must follow the masking policy of each facility. An N95 mask can be provided for each student only to be worn during clinical hours. After 21 days of use, students will need to request a replacement.

Developed: 2020

Revised: 2021

Grading System

For all RADT courses the grading system is listed below. Please refer to individual course syllabi for more detailed explanation of individual course grades. Students must make at least a "C" to continue in the program.

93-100	A
85-92	B
77-84	C
69-76	D
0-68	F

Expenses

In addition to tuition and campus registration fees, students enrolled in the Radiologic Technology Program will incur some additional expenses. These values are approximate.

Textbooks	\$ 1,200.00
Background check	5.00
Drug Screen	40.00
R/L Markers	35.00
Uniforms	100.00 - 250.00
Patches (each)	5.00
Name Badge	8.00
LSRT	300.00 - 500.00
Convention(s)	
LA Temp License	10.00
LA License Fee	100.00
ARRT Exam Fee	225.00
RADT Pin	20.00 – 150.00
Portraits	30.00 – 150.00

Other student clinical obligations may include but are not limited to random drug screening tests, CPR certification, completed Health Form, annual TB test, and annual flu vaccine.

Students are also responsible for their own transportation to and from the Clinical Education Sites (all sites are located less than 60 miles from LSU Alexandria's main campus).

Criminal background checks are a requirement at some affiliated clinical training sites. All students must submit a criminal background check before entering the clinical sites. The original copy of the background check will be kept in the student's file in the Department of Allied Health office. Students agree these documents may be shared with the clinical sites upon request. Based on the results of the criminal background check, an affiliated clinical site may determine to not allow your presence at their facility. This could result in your inability to successfully complete the requirements of a specific course and your program. More information is available from your program director.

Attendance Policy

To derive optimum benefits from a course, consistent attendance in all courses is **MANDATORY** for student success. Absences from class for any reason, avoidable or unavoidable, will result in a loss for the student. When excessive, it may be a direct cause of low achievement or failure.

Didactic Courses:

MANDATORY attendance in all didactic courses is required for student success. Program faculty will follow at least the minimal college requirements for attendance in class but will often require more than the minimal effort from the student. **This is your chosen profession.** You will not be successful if you do not attend class and laboratory. It is common courtesy to notify the specific faculty in advance whenever absence is unavoidable. The faculty has the prerogative of determining whether a student may make up work or examinations that have been missed because of absence. **Specific attendance requirements for all didactic courses will be listed in individual course syllabi.**

In light of the COVID-19 pandemic, if you have a temperature above 98.9 degrees, or have any other symptoms of COVID-19, **DO NOT COME TO CAMPUS**. Instead, you should notify your instructor. Specific details will be provided in individual course syllabi.

Students who are tardy to a didactic class run the risk of not being allowed in the classroom. It is the discretion of the instructor to lock the door when class begins and any late student will not be allowed in the class until break, if a break is given. Any quiz or assignments missed because of tardiness may not be accepted at the discretion of the instructor. Specific details will be listed in individual course syllabi.

Excessive absences from didactic courses will result in a Minor Violation of the disciplinary code (see disciplinary code for details). Excessive is defined as more than 3 days for a MWF course, more than 2 days for a MW or TTH course.

Clinical Courses:

Since the clinical experience is a major part of the radiology curriculum, attendance and participation are **MANDATORY**. All students are expected to attend regularly and punctually. Any student with repetitive tardiness and/or absences is in academic jeopardy.

Students in their **FIRST TWO (2) SEMESTERS** of clinic may miss up to **TWO (2)** days of clinic without penalty, no questions asked. Any missed day after **TWO (2)** will result in dismissal from the program.

Students in **SENIOR** level clinic may miss up to **THREE (3)** days of clinic without penalty, no questions asked. Any missed day after **THREE (3)** will result in dismissal from the program.

It is recommended that you avoid **ALL** clinical absences. Should a clinical absence be unavoidable you must notify the Clinical Coordinator or Course Instructor **AND** the clinical site you were to report to at list 15 minutes prior to your report time. You may send an email, text, and or voicemail for the Clinical Coordinator or Course Instructor. You must **CALL** the clinical site and make note of who you spoke with.

Failure to notify both parties of absence more than 15 minutes after scheduled clinical time will result in disciplinary action and a penalty of 15 points off your attendance grade.

After the maximum number of missed days (2 for juniors, 3 for seniors), a student **MUST** provide medical documentation (i.e. doctor's excuse, positive Flu test, positive Covid test) for missing more than the maximum days of clinic. **Without medical documentation, the student will be dismissed from the program for exceeding the absentee policy.**

Tardies: Tardiness will be monitored. Every 1 minute a student is late (up to 15 minutes); there will be a 1 point deduction from the clinical grade.

Leaving Early: You **ARE NOT** allowed to leave clinic early without the permission of the Clinical Coordinator or Course Instructor. Leaving early will be treated the same manner as a tardy.

Bereavement: Students may be given time off without loss of clinical time to attend the funeral or burial services of immediate family. Immediate family, for the purposes of this policy, includes: a parent/step-parent, child/step-child, mother/father-in-law, grandparents, or grandchild. Time allowed shall not exceed 2 days. Documentation will be required. Without proper documentation the absence will not be approved.

In the event that you test positive for COVID-19, are required to self-isolate, or a physician imposes extended absence and/or physical restrictions, see the Program Director immediately.

Developed: 2002

Reviewed: 2004, 2009, 2013, 2016

Revised: 2008, 2010, 2014, 2018, 2019, 2020,2021

Academic Standards

Progression Policy

Students must earn a minimum grade of “C” in all required courses. Maintenance of prerequisites and co-requisites as indicated in the curriculum sequence prior to progressing to the next course level(s) is also required. A radiologic technology course may be repeated one time only. Students are allowed to re-enter only one RADT course throughout the course of study, regardless of failure or withdrawal.

Developed: 2002

Revised: 2010, 2015

Reviewed: 2013, 2021

Dismissal Policy

A student is subject to dismissal from the Radiologic Technology Program for the following reasons:

1. Failure to achieve at least a “C” in any RADT course.
2. The need to repeat/re-enroll in more than one required radiologic technology course.
3. Receiving any 2 Serious Violations (see Disciplinary Policy).
4. Participation in academic cheating and/or unauthorized possession of an examination.
5. Plagiarism
6. Falsification of patient, affiliate, and/or program records, to include time clock records.
7. The unlawful and/or unauthorized use, abuse, possession, distribution, transportation, manufacture, concealment, consumption, promotion or use of alcohol, illegal drugs, legal drugs obtained illegally, controlled substances, or designer drugs.
8. Illegal possession of weapons.
9. Theft
10. Destruction of equipment
11. Lack of professional compatibility or unsafe clinical practice as identified by the Radiologic Technology Faculty.
12. Excessive clinical absence as described in the clinical attendance policy.

Immediately upon participating in any of the above reasons (except 1 and 2), the student will be dismissed from the clinical or classroom setting. The student will be informed by the Program Director of a specific time to meet with the Radiologic Technology disciplinary panel which will be held within five (5) working days. The panel will consist of:

- RADT Program Director
- Department Chair of Allied Health
- Clinical Coordinator
- CI involved

The student will present his/her case to the panel. A private discussion of the disciplinary panel may be held. The panel may recommend the immediate dismissal of the student from the program or issue the student a Serious Violation Report. The student will be informed of the panel’s decision prior to adjournment of the meeting.

Developed: 2002

Reviewed: 2003, 2005, 2013, 2016, 2018, 2021

Revised: 2010

Classroom Behavior Expectations

Whether attending a class in person or remotely (in the event of pandemic restrictions), students are expected to be respectful, courteous, and engaged in the classroom. Students must avoid behaviors that are disruptive or distracting. Inappropriate, hostile, or offensive comments or behaviors will not be tolerated. Violations of this policy may affect course grade and initiate the Student Code of Conduct process. The quality of professional behavior expected of Radiography students is exemplified in the following behaviors:

- commitment to learning
- problem solving
- interpersonal skills
- professionalism
- communication skills
- responsibility
- effective use of time and resources
- critical thinking
- use of constructive feedback
- stress management
- staying awake

Remote Classrooms (in the event they are mandated by pandemic restrictions)

- Dressed appropriately (no pajamas)
- Sitting upright, preferably at a table or desk
 - No laying in bed or on the sofa
 - Video must be on
 - Sound must be muted unless speaking
- Be prepared to answer questions when asked

Clinical Education Plan

The purpose of this section is to explain what is expected of students and a summary of responsibilities during clinical rotations. A detailed explanation will be given in the syllabus provided at the beginning of each clinical course. The program's objective is to help the student gain the knowledge and skills necessary to function as an integral part of a Radiology Department.

It is important to emphasize this is a competency based system and the pace or rate of the student's progress is dependent on the student's ability to comprehend and perform the various examinations.

Clinical Competency Plan

This plan consists of the integration of all aspects of the curriculum including lecture, demonstration, simulation, and clinical participation. Specific objectives, including cognitive, psychomotor, and affective competencies for clinical courses, are outlined in each syllabus.

Clinical skills can be developed by following a systematic approach. The following sequence explains a step by step approach:

- **Academic Preparation:** Complete this step by studying radiographic physics, principles and techniques, anatomy and physiology, radiographic positioning, etc. in didactic courses.
- **Performance Objectives:** Students will be given instruction and demonstration of radiographic procedures followed by simulated practice sessions in the laboratory. The Course Instructor will complete the Laboratory Skills Evaluation Form (See Appendix C). This will be used as a simulation assessment tool to assist students in identifying weak positioning skills prior to actual evaluations in the clinical setting. Students' comprehension of course materials will be evaluated by written examination and by these simulations in the laboratory. If a student makes below a 90% on a Laboratory Skill Evaluation, the student will receive a grade of 50% and must challenge the Evaluation again, and an average of the two grades will be given. Failure on the second Evaluation results in a grade of 0% and a required conference with the instructor and student regarding remedial assignments and successful completion of the program.
- **Clinical Participation:** Students are required to observe and assist radiology staff in performing various procedures. Performance of these tasks and skills must be supervised by the RT or CI. As the student gains experience in various procedures, he/she gradually moves into an independent clinical performance state. At this point, the student may then progress to actually performing examinations and procedures under the direct supervision of a Registered Radiologic Technologist. **Repeat radiographs are to be performed only in the presence of the RT/CI regardless of the student's competency level.**
- **Competency Evaluations:** After a score of 90% or higher on simulation, and when certain of the ability to do a particular procedure independently, ask the Clinical Instructor or any authorized technologist to complete a competency evaluation when the next patient for that procedure arrives. Performance will be documented on a Competency Form (See Appendix B). If competency is achieved it will be counted toward the requirement for that semester, and now may be performed with indirect supervision. If competency is not achieved, a remedial action may be assigned and the competency must be repeated until competency has been achieved. **All competencies may be reevaluated by LSUA faculty for quality and completeness. The final approval of competency/proficiency evaluations will be determined by LSUA faculty, regardless of prior approval by a Clinical Instructor.**
- **Final Competency Evaluations:** Students are re-evaluated in the form of a Final Competency Evaluation (See Appendix D). Final competency evaluations are performed during the **final two semesters (fourth and fifth)** of the program. These final competency evaluations are to be evaluated and documented by the CI or Course Instructor. The results will become a part of each student's clinical record. Successful completion of all final competency examination evaluations completes the requirements for the Clinical Competency Plan.

The procedure for final competency evaluations is similar to the competency evaluations. The Program Faculty or CI randomly selects examinations and evaluates student performance using the final competency evaluation form. Students are expected to complete 4 final category competencies (chosen from each major category) with a minimum mastery level of 90% on each examination. A numerical grade is given for final competency evaluations. Final competency evaluations are averaged and count for a percentage of the clinical course grade. If the grade is below 90%, the student will receive a grade of 50% for that evaluation. The student will be allowed to redo the same examination or another examination from the same category. Final competencies must be completed on patients; no simulations will be allowed. All scores for competencies will be averaged.

Clinical Supervision

During all clinical courses, the students are under the supervision of an ARRT registered technologist. Once a student has successfully performed a specific competency evaluation, the student is under indirect supervision of a radiographer.

Direct Supervision

- Must occur for students **before** documented competency of any procedure.
- The clinical instructor or radiologic technologist will:
 - Review the procedure in relation to the student's achievement.
 - Evaluate the condition of the patient in relation to the student's knowledge.
 - Be present during the procedure.
 - Review and approve the radiographs.
 - All repeat exams

Indirect Supervision

- May occur for students **after** documentation of competency for any given procedure.
- The clinical instructor or radiologic technologist will:
 - Review, evaluate, and approve the procedure as indicated above
 - Be immediately available to assist students regardless of student's achievement. Immediately available is interpreted as the physical presence of a qualified radiographer adjacent to the room or location where a radiographic procedure is being performed. This availability applies to all areas where ionizing radiation equipment is in use on patients.

When repeat exposures are necessary, a radiographer **must be physically present** in the radiographic room and must approve the student's procedure prior to re-exposure. It is the student's responsibility to ensure the proper clinical supervision prevails before performing a specific exam. Failure to comply with this policy will result in Disciplinary Action.

Clinical Experiences

The Clinical Education Plan is divided into five clinical courses. Each course is described in the form of a syllabus, which consists of general goals, specific objectives, and clinical rotations that students are assigned during the two-year period. The requirements for each course are also listed in each course syllabus.

The ARRT requires candidates for certification to meet certain Professional Requirements. (See "ARRT Radiography Competency Requirements," Appendix A for specific requirements.)

At the conclusion of this program, the student shall have the following:

- Two years of clinical education experience at a JRCERT approved clinical site with its affiliates.
- Ten (10) mandatory general patient care activities;
- Thirty-seven (36) mandatory imaging procedures
- Fifteen (15) elective imaging procedures selected from a list of 34 procedures;
 - One (1) of the 15 elective imaging procedures must be selected from the head section;
 - Two (2) of the 15 elective imaging procedures must be selected from the fluoroscopy studies section, one of which must be either upper GI or contrast enema.
- Four (4) final competency evaluations.

The minimum requirements for each clinical course are listed below:

- RADT 1024
 - 6 Competency Evaluations
- RADT 1005
 - 12 Competency Evaluations
- RADT 1010
 - 12 Competency Evaluations
- RADT 2007
 - 12 Competency Evaluations
 - 2 Final Competency Evaluations
- RADT 2012
 - 9 Competency Evaluations
 - 2 Final Competency Evaluations

These minimum requirements are necessary for establishing a grading system and are not meant to be restrictive. After successful completion of a simulation, students should request competency evaluation on any procedure they feel prepared to perform independently, even if they have completed the minimum requirements for the semester. Competency evaluations completed over the minimum requirements will be counted toward the next semester. All unsuccessful attempts at competency (failures) will be part of the grade in the semester in which they were obtained. All required competency evaluations must be completed by the end of the semester. **However, if the student fails to acquire the minimum requirements for a semester, there will be a 7 point deduction from the final course grade for each one missed. A student may not simulate any more than 2 procedures per semester.**

Simulation is performance of the examination on a subject (not a patient). Simulations may be used only for infrequent or limited volume examinations. Simulated examinations involve all necessary components of an actual examination, including exposure to ionizing radiation, image critique, etc. Simulations will be performed on phantoms in the lab. Students are only allowed to simulate the number of examinations that is required to meet the minimum number of required competencies for the semester (not to exceed 2 procedures per semester). Simulations cannot be carried over from semester to semester. Students are not allowed to simulate fluoroscopic, surgical, or portable examinations.

The following is a sample list of possible examinations that a student could simulate:

Skull	Sternum	Mandible
Facial Bones	Orbits	Clavicle
Nasal Bones	SI Joints	Sacrum/Coccyx
Decub Chest	Scapula	

Clinical Rotation Plan

Students accepted into the Radiologic Technology Program are assigned to area hospitals and clinics that serve as Clinical Education Sites (CES). All CES are within 60 miles driving distance from LSUA main campus. Clinical assignments are made solely by LSUA faculty on a semester basis. Students are not allowed to request being placed at a clinical site but may request to not be assigned to a CES. Students may complete a survey related to where they live. This information is taken into consideration when creating clinical schedules. The program supersedes any student request in clinical placement.

For the safety of students and patients, not more than 10 clinical hours will be scheduled in any one day. Scheduled didactic and clinical hours combined will not exceed 40 hours per week. Hours exceeding these limitations may be approved on an individual basis and is voluntary on the student's part.

A clinical rotation schedule is provided which lists the various assignments students will experience during their clinical education. Typical clinical rotation assignments take place during the daytime hours, Monday through Friday. Clinical rotation assignments are given to each student at the beginning of each semester and posted at each CES. Students are not allowed to attend clinic in an area not assigned. Also, students are not allowed to attend clinic beyond the scheduled time unless finishing an exam that was started prior to the end of clinic time. Clinical hours may vary depending upon CES.

- Required Clinical Rotations
 - Diagnostic Radiography
 - Fluoroscopy
 - Surgery
 - Special Procedures
 - Trauma (1 p – 9 p)
 - Weekend (Friday – Sunday)
 - Computed Tomography (CT)
- Elective Clinical Rotations
 - Magnetic Resonance Imaging (MRI)
 - Radiation Therapy
 - Ultrasound (US)
 - Mammography
 - Nuclear Medicine
 - Heart Catheterization

Grading Procedures for Clinical Radiography Courses

Students must have a final grade average of at least 77% to successfully complete the course. A detailed explanation of how grades are calculated is listed in each course syllabus.

A summary of clinical radiography course grades are listed below:

- Performance Evaluations: The student will be evaluated by a radiographer at the end of each rotation (usually done every 2 weeks but not more than 3 weeks). It is the student's responsibility to obtain the necessary form and submit it to the technologist. Students are not allowed to have the same technologist fill out 2 evaluations back to back unless an exception is made. Performance evaluations are averaged and count for a percentage of the final course grade.
- Semester Evaluations: The student will be evaluated by the course instructor two times a semester, at mid-term and at the end of the semester. These evaluations are based on observation and input from CIs. **The minimum passing grade on a semester evaluation is 77%.** If the grade is below 76%-69%, the student will receive a grade of fifty (50) for that evaluation. If the grade is 68% or below, the student will receive a grade of zero (0) for that evaluation.
- Competency Evaluations: Students must perform all required competency evaluations with a **minimum grade of 90%.** The competency evaluations are averaged and count for a percentage of the clinical course grade. If the grade is below 90%, the student will receive a grade of 50% for that competency evaluation. The student will be allowed to attempt the

- competency again.
- Attendance: Students start each semester with 100 points for attendance. Points will be deducted for tardiness. Attendance will count for a percentage of the final course grade.
- Other requirements: The details for other requirements for each semester are detailed in each course syllabus and count for a percentage of the final course grade.

Clinical Rotation Paperwork

The following paperwork should be turned in within one week of each clinical assignment:

- Room Checklist: The student will complete a room checklist for each room assigned. This form is to be completed with a technologist in the **FIRST WEEK** of each clinical rotation. It is advised to complete the room checklist prior to comping, as not knowing your room can result in an **Automatic Failure** on a competency exam.
- Orientation Checklist: The student will complete an orientation checklist for each CES assigned. This form is to be completed with a manager/supervisor the **first day** in the department.
- Student Performance Evaluations: Students are required to be evaluated by a Registered Radiologic Technologist at the end of a rotation or every two weeks. **A zero "0" will be given for evaluations not completed.**
- Daily Clinical Experience: Students are required to document and maintain a record of the examinations completed during each clinical rotation. The daily student clinical experience records are entered into a daily clinic log spreadsheet and turned in monthly. **Failure to submit the daily log results in 1 point lost per month and Disciplinary Action** (see Disciplinary Policy).

****Clinical paperwork is the property of LSUA, as such it is kept on file in the radiologic technology department. Students review their paperwork at the end of each semester. Students may also review paperwork upon request with a faculty member. Copies are not permitted****

Clinical QR Code Clocking System

Students are expected to use the QR Code Clocking System in order to keep accurate records of their time while in clinic. At the beginning of clinical, the student will be required to download a QR Code reader app on their phone. Each student will be provided with their own unique QR code. A ring of QR codes, for each individual class, will be placed at each clinical site at the beginning of each new semester. Some hospital sites will not provide internet connection. For these facilities, the Program Director or Clinical Coordinator will email the student with their unique QR link (these links must not be shared). Students will be required to use their OWN phone or the hospital's computer to clock in for the day, clock out for lunch, clock in from lunch, and to clock out for the day. **It is mandatory that the student uses their OWN QR code at all times.** The student is expected to arrive at the clinical site with enough time to scan their QR code or to use their QR link that will be sent to their LSUA email. There will be a 1 point deduction for every minute that the student is late. Any more than 15 minutes will be considered absent for that day. The faculty of the program views the clinical clocking system as a binding contract between the student and the program. **Falsifying** clocking in for the day, out for lunch, in from lunch, and/or out for the day, clocking in/out for another student, or having someone else clock you in/out in any manner is unethical and **will result in dismissal from the program.**

This completes the requirements for the Clinical Education Plan.

Revised: 2010, 2013, 2014, 2016, 2017, 2018, 2020, 2021

Breaks

Breaks can be scheduled when the workflow permits, but these breaks are not guaranteed. In no instance are students entitled to breaks.

Lunch or dinner breaks will be limited to 30 minutes unless otherwise approved by the Clinical Instructor. Lunch should be scheduled between 11:30 a.m. – 1:00 p.m. Dinner should be scheduled between 5:00 p.m. – 6:30 p.m.

Lunch times will be monitored. If the student does not return from lunch within 5 minutes beyond their allotted time, the student will be considered tardy. Every minute a student is late; there will be a 1 point deduction from the clinical attendance grade.

Clinical Makeup Time

In the event a student misses more than their maximum number of days of clinic per semester, **AND a medical excuse is provided**, the time missed *may* be made up at the discretion of the Clinical Coordinator and Program Director. Makeup time must be scheduled before the end of each semester (See Appendix I). If the student does not present documentation of an excuse (doctor's excuse) of any absence greater than 2 days for juniors or 3 days for seniors, it will be considered excessive absence and will result in dismissal.

Disciplinary Policy

Students are expected to possess a professional attitude and demeanor at their assigned clinical site. If a student violates the professional conduct policy, disciplinary action will be taken. Specific violations and disciplinary actions to be taken are listed below. These violations may result in failure of a course and/or recommendation for dismissal from the Radiologic Technology Program.

- A. Minor Violations (1 point deduction of course grade)
 1. Unsafe handling of equipment.
 2. Horseplay
 3. Failure to comply with "Universal Precautions."
 4. Failure to bring approved "Right" and "Left" lead markers to clinical/laboratory assignment.
 5. Failure to wear OSL radiation monitoring device to clinical/laboratory assignment OR stores OSL device inappropriately. (Additional points will be deducted from attendance grade to retrieve OSL)
 6. Failure to comply with any part of the Professional Appearance Policy.
 7. Failure to report communicable illness/infection to the PD, CI and/or obtain physician clearance to return to the clinical and/or classroom setting.
 8. Failure to complete and submit daily clinical log at least once per month.
 9. Cell phone use during clinic.
 10. Excessive absences from didactic courses, as established by course syllabus.
- B. Major Violations (3 point deduction of course grade)
 1. Any two Minor Violations within one semester.
 2. Displaying unprofessional behavior such as being unresponsive to patient needs or being unresponsive towards colleagues in providing quality patient care.

3. Absent or tardy from clinical site without following proper procedure as stated in the Attendance Policy in this handbook.
 5. Unsafe handling of equipment requiring repair by clinical facility.
 6. Insubordination to PD, Program Faculty, CI, and/or technologists.
- C. Serious Violations (7 point deduction of course grade)
1. Any two Major Violations within one semester.
 2. Performing a radiographic procedure on the wrong patient/part.
 3. HIPPA violation.
 4. Not adhering to the supervision policy and/or repeating a radiographic procedure without a registered radiologic technologist present.
 5. Not adhering to the post-processing policy.
 6. Leaving the clinical site without permission.
 7. Participation in academic cheating and/or unauthorized possession of an examination.
 8. Plagiarism
 9. Falsification of patient, affiliate, and/or program records.
 10. The unlawful and/or unauthorized use, abuse, possession, distribution, transportation, manufacture, concealment, consumption, promotion or use of alcohol, illegal drugs, legal drugs obtained illegally, controlled substances, or designer drugs.
 11. Illegal possession of weapons.
 12. Theft
 13. Destruction of equipment
 14. Lack of professional compatibility or unsafe clinical practice as identified by the Radiologic Technology Faculty.

Developed: 2002

Reviewed: 2016

Revised: 2010, 2012, 2014, 2018, 2019, 2021

Dress Code Policy

During clinical assignments and simulations, students are to wear LSUA uniforms at all times. The student is expected to be clean, neat and conservative in appearance at all times. Dress and general grooming are very important in projecting a professional image during interactions with patients. Guidelines have been set up for all students and should be followed closely to ensure that a professional image is maintained while the student is at the clinical sites. If at any time a student is in violation of any part of the professional appearance policy, they may be sent home, counted absent, and will receive a "Minor Violation".

- | | |
|--------------------|--|
| Tops: | White Short sleeve, Preferred Women: 4728 Cherokee Core Stretch
Preferred Men: 4725 Cherokee |
| Pants: | Women: 4005 Cherokee Core Stretch in Purple
Men: 4043 Cherokee in Purple |
| Lab Coat: | White Long sleeve |
| Socks: | All White |
| Shoes: | All white leather shoes with closed toes. |
| Official Name Pin: | The name pin will be purple with white letters containing the student's name and title, "LSUA Student Technologist." |
| Official Patches: | LSUA patches must be sewn on left sleeve of uniforms and lab coats 2 inches below shoulder seam. |
| Official ID: | LSUA Picture Identification Badge |

Lead Markers:	Each student must have a pair of approved “Right” and “Left” lead markers in their possession on site during clinical and laboratory assignments.
Dosimeter:	Each student must wear an OSL radiation monitoring device during clinical and laboratory assignments. (Provided by the program.)
Face Mask:	Each student must wear a face mask during clinical assignments if it is the policy of the CES.

Official Name Pin and Patches may be purchased at the following location:

Medical Market
 2219 Worley Drive
 Alexandria, LA
 318-448-1573

All other uniform requirements may be purchased at any location where uniforms are sold.

The following will be observed:

- Good personal hygiene is expected at all times to ensure a pleasant and healthy atmosphere in which to work and to interact with patients. All students are expected to shower or bathe and use deodorant on a daily basis.
- Uniforms should be clean and well-pressed at all times. The uniform should be free of offensive odors, including smoke.
- Hair should be neat, clean, and well groomed. If hair is worn longer than collar length, it must be pinned up. Beards and mustaches are permitted if neatly trimmed.
- Hair covers, large headbands that cover ears, head wraps, hats (other than surgical) are not to be worn.
- Fingernails are to be clean and not to exceed the fingertip in length. Clear color polish only. Artificial nails are not allowed.
- Make-up must be worn in moderation and appropriate for daytime employment.
- No heavy perfume, shaving cream, or lotion.
- Excessive jewelry is not permitted. Jewelry should be limited to what will be considered safe for the student and the patient. Acceptable jewelry that may be worn consists of a watch, wedding ring(s), and small studded earrings only (no larger than ½” in diameter). Earrings must be a matching pair with no more than 2 pairs worn in earlobe only. No facial/tongue piercings are allowed. Necklaces of any kind are not allowed.
- Some sites may restrict visible tattoos. Students must comply with CES policy.

Developed: 2002

Reviewed: 2004, 2006, 2007, 2013

Revised: 2008, 2010, 2014, 2015, 2017, 2018, 2020, 2021

Immunizations

Students are required to maintain current immunizations according to state law and university contracts with clinical sites in order to attend clinical rotations. **Some immunization requirements will need to be updated during the program.** If the immunization records are not up to date, the student will not be allowed to attend clinical rotations until the records are up to date and will be required to make up any time missed according to radiography program attendance policy.

The Occupational Safety and Health Administration (OSHA) has published standards addressing occupational exposure to blood-borne pathogens. The Standards state there is an occupational hazard for health care workers – especially when dealing with blood-borne pathogens such as the Hepatitis B Virus (HBV). The standards require employers to make available the hepatitis B vaccine and vaccination series to employees. The standards cover all employees who come in contact with blood and infectious materials while working. The standards fail to specifically include students working in health care settings.

Students enrolled in the Radiologic Technology Program may come in contact with blood and infectious material while attending clinical radiography courses. The students must be aware of the risk of coming in contact with the HBV while obtaining clinical experience. The Clinical Education Sites are complying with the OSHA standard by immunizing their employees against HBV; however, students will need to plan for their own immunization if they desire this means of protection.

The Radiologic Technology Program strongly recommends being immunized against HBV. The immunization program will include three injections and a blood antibody test. If you choose to participate, you will be responsible for payment and submitting documentation of participation to the Program Director. If you choose not to participate with the immunization or have not completed the immunization, you must sign a waiver (Appendix E) indicating such and submit the waiver to the Program Director.

Developed: 2010
Reviewed: 2021
Revised: 2018

Incident Reporting Policy

All accidents or unusual occurrences in the clinical setting must be reported in writing to the Clinical Coordinator. Whether these accidents involve the student, patient, or any other person, **ALL INCIDENTS MUST BE DOCUMENTED.** Students involved in the incident will be held responsible for notifying the clinical instructor or chief technologist at the site. The clinical instructor at the clinical site needs to complete an incident report and file it according to their policy OR fill out the Clinical Student Incident Form (Appendix N) AND forward a copy to the clinical coordinator.

Developed: 2018
Reviewed: 2021

Outcome Assessment Procedure

The outcome assessment is conducted by utilizing survey instruments that are designed to evaluate the program's qualitative and quantitative outcomes in terms of its mission and goals. These forms will be collected and evaluated by the Program Director. The compiled data will assist the program in an ongoing process of program improvement. These evaluations will be conducted on an annual basis. Statistical data will be reported accordingly to the JRCERT. Data will also be shared with the Program's Advisory Committee and the Department Chair of Allied Health at LSU Alexandria.

Outside Employment

Outside employment is not encouraged because of the rigorous structure of the program. **Work schedules must not conflict with the program curriculum** (clinical and didactic courses). Students will never be excused from class or clinic or be allowed to leave early because of work schedules. Students will not be excused from mandatory events because of work. Students are not allowed to work in the capacity of a technologist and receive wages in the clinical affiliates, or any other medical facility, before satisfying all of the requirements for graduation. A license is required to practice in the State of Louisiana. Questions regarding this matter should be addressed with the LSRTBE.

Post-Processing Policy

Digital image manipulation by students following image processing should be limited, if not avoided. The following are examples of practices that are not allowed following the processing of an image:

- Under no circumstances should students manipulate the brightness or contrast of an image.
- The act of "post-collimation," which is shuddering, masking, or cropping an area of the image after processing to give the appearance of collimation during the exposure, is an unethical and intolerable practice.
- Images are not to be re-centered to give the appearance of correct longitudinal and/or transverse centering.
- Parts of an image must not be cropped, then copied/pasted into another location.
- Markers cannot be "cut" from an image and moved to another location.
- Anatomy cannot be "cut" from an image and saved as another projection.
- Images may not be deleted without approval from the supervising technologist.

These practices are unethical and violate the ARRT's Code of Ethics. Failure to comply will result in disciplinary action.

Developed: 2018

Reviewed: 2021

Pregnancy Policy

A female student is given the option of whether or not to inform program officials of her pregnancy. If the student chooses to **voluntarily** inform the program director of her pregnancy, it must be in writing (see Appendix F, Declared Pregnancy Form). In the absence of this voluntary written disclosure, a student cannot be considered pregnant. However, because of the sensitivity of the unborn child to radiation, it is necessary to inform female applicants of the possible health risks involved as a result of occupational exposure during pregnancy. Students also have the option of continuance in the program with or without modification or take a leave of absence from the program.

1. Pregnant students should notify the PD, Clinical Instructor, and the Radiation Safety Officer (RSO) as soon as pregnancy is suspected/determined so that appropriate radiation safety measures can be instituted. Even though this written notification is voluntary, the Department of Allied Health encourages the pregnant student to perform this disclosure.
 - 1.1. If the student chooses to voluntarily inform officials of her pregnancy, a physician statement verifying the pregnancy shall be submitted by the student. This statement must include a medical release which allows the student to continue with clinical assignments. If, for medical or personal reasons, the student is unable to complete the clinical assignments, she may initiate a request for authorization of an "I" (incomplete) grade through the office of the Vice Chancellor for Academic Affairs. The student must subsequently remove the "I" grade following the regulations in the University catalog. Should the student choose to withdraw from a clinical course, the "withdrawal" guidelines in the University catalog must be followed. Should the student choose to resign from the program, the "resignation" guidelines in the University catalog must be followed.
2. Upon verification of pregnancy, the PD will review all appropriate and applicable principles of proper radiation safety with the student.
 - 2.1. Notify all appropriate radiology department personnel of the expectant status of the student in order to insure proper clinical education experience while maintaining the standards of radiation safety.
 - 2.2. Changes in the clinical assignments may be instituted at the request of the student in order to insure compliance with the recommended Effective Dose Equivalent standards upon completion of the declared pregnancy form.
 - 2.3. The student will be given the option to continue in the program with OR without any modification to clinical assignments.
3. Following completion of the declared pregnancy form, the Effective Dose Equivalent to the fetus from occupational exposure of the expectant mother should not exceed 5 mSv during the remaining gestation period. The monthly exposure shall not exceed 0.5 mSv. The student will be furnished with an OSL fetal radiation monitoring device. This device must be worn at waist level at all times and underneath the protective lead apron during fluoroscopy. A Student Exposure Report (Appendix G) will be completed by the RSO on any student who receives more than 1.0 mSv (100 mrem) for the entire gestation.
4. If the pregnancy occurs during the first semester of the program and the student is unable to fulfill the required clinical objectives, the student will withdraw from the program and may reapply the following spring semester. If pregnancy occurs after the completion of the first semester and the student is unable to fulfill the required clinical objectives, the student may request authorization for an "I" grade through the Vice Chancellor for Academic and Student Affairs for the clinical course. The student may either withdraw or re-enter the same semester of the following year if guidelines for the removal of the "I" grade have been followed and a letter of intent to re-enter the program is turned in to the Program Director no later than 3 weeks prior to the start of the semester.

5. The Declaration of Pregnancy may be withdrawn at any time by the student.

Developed: 2002

Reviewed: 2015

Revised: 2007, 2010, 2016, 2018, 2020, 2021

Privacy Rights of Patients

All hospital and patient records are confidential in nature. Requests for information concerning a patient should be referred to the Supervising Technologist or the Clinical Instructor. Students are expected to maintain confidentiality in a professional manner.

In accordance with the Health Insurance Portability and Accountability Act (HIPAA) of 1996, all patient information will be confidential. Students will maintain the privacy of protected health information by: limiting discussion of protected health information to private areas and conference rooms; not discussing health information outside the health care facility unless such discussion is with an appropriate faculty member and in private; not discussing protected health information with other students; refraining from copying any part of the medical record for use outside of the health care facility; refraining from putting any personal identifier on any paperwork associated with the Radiologic Technology Program; client initials may be used as an identifier, however, no room number or health care facility name/unit.

Additionally, students are required to sign confidentiality form (see Appendix M) agreeing to the above. Violating this agreement is a serious violation and will result in a 7 point grade deduction for the course.

Revised: 2021

Professional Conduct

Students are to possess a professional attitude. Students must strive to treat patients with kindness and courtesy to insure the patient's privacy and dignity. After the patient has been placed in the radiographic room, the door should always be closed and care must be exercised to keep the patient covered.

Students are expected to maintain professional behavior at all times, in both the classroom and clinical settings. Professional behavior must also be exhibited with technologists in the clinical settings. Disruptive, insubordinate or unprofessional behavior/speech will not be tolerated. Conduct resulting in a patient or employee incident/complaint will be investigated. If the complaint is deemed valid, disciplinary action will be taken. Students must follow all the policies and procedures of the clinical site. Students must not do anything that threatens or endangers the health or safety of a patient or others. Failure to comply with this policy will result in disciplinary action.

Students must complete a written description and report if an accident occurs involving a patient, a hospital employee, a visitor, or a student. The report is to be made immediately following the incident to the CI (See Incident Reporting Policy).

Students should make the best use of their clinical time. Students should be involved in as many exams as possible in the clinical setting. Students must never refuse to assist with a procedure or refuse to perform procedures in which they have successfully simulated. Students must demonstrate adequate progress in achieving clinical competence and meet all established deadlines.

All students will:

- Follow the policies and procedures of the clinical education setting,
- Report to the clinical assignment in an alert condition,
- Not have in your possession drugs or alcohol, or engage in use of drugs or alcohol while on clinical assignments or in didactic course work,
- Not engage in immoral conduct,
- Not chew gum, eat or drink in clinical areas,
- Not sleep on clinical assignments,
- Not engage in theft of any articles from the clinical education setting,
- Not falsify records,
- Use proper professional language at all times,
- Not receive or make personal phone calls except in emergency situations,
- Not use a cell phone during clinical assignments,
- Not smoke on LSUA campus or during clinical assignments,
- Comply with each hospital's parking policy
- Not repeat any part of a radiographic procedure without an RT present, regardless of the level of competency.

Program Records Policy

A complete record on each student will be maintained in the office of the Program Director and/or the Allied Health Department office. These files will contain:

- Entry physical exam and immunization records
- CPR certification
- Conference notes and/or Disciplinary Action Forms
- Clinical Evaluations
- Clinical Competency Forms
- All final exams

Radiation Protection Policy

Students will be expected to practice proper radiation safety procedures at all times when present in clinical assignments and in laboratory activities. These practices must assure radiation exposures are kept as low as reasonably achievable (ALARA). **Under no circumstances are students allowed to hold an image receptor (IR) during any radiographic procedure.** Students should not hold patients during any radiographic procedure when an immobilization method is the appropriate standard of care.

Radiation badges are used for monitoring students' radiation dose. Each student will be issued an Optically Stimulated Luminescence (OSL) dosimeter before the start of the first clinical rotation. The dosimeter will be exchanged every quarter during the first and second week of that month. Dosimeter reports will be available to students within thirty (30) school days following receipt of data. Students will always wear a dosimeter while attending clinical assignments and energized laboratory sessions; **the student is not allowed to attend without their dosimeter**. If a student arrives without a dosimeter, the student will be sent home to retrieve the dosimeter and considered tardy. The dosimeter is the responsibility of the student.

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

The Radiation Safety Officer (RSO) will evaluate each report thoroughly. Any elevated exposure will be investigated for cause and necessary corrective measures taken when applicable. The occupational dose equivalent limits for adults are:

1. Annual Limit:
 - a. Total effective dose equivalent is 50 mSv.
 - b. The sum of the deep dose equivalent and the committed doses equivalent to any individual organ or tissue other than the lens of the eye is .500 mSv.
2. Annual Limit to the lens of the eye, skin, and extremities:
 - a. Eye dose equivalent of 150 mSv
 - b. Shallow dose equivalent of 500 mSv to the skin or any extremity.

A Student Exposure Report (Appendix G) will be completed by the RSO on any student who receives more than 2.5 mSv (250 mrem) in one calendar quarter. Students should not receive more than 10 mSv (1000 mrem) in one year. Students must employ safe radiation protection techniques for the patient, self, and other during radiographic exposures.

All students are expected to:

- Wear a dosimeter attached to the collar of the uniform when in clinic or the energized laboratory; if wearing a lead apron, the student should wear the badge outside of the apron. The badge must face forward to obtain an accurate radiation measurement.
- Prevent dosimeter from exposure to heat, moisture, washing machines, dryers, microwave ovens, and color televisions;
- Prevent dosimeter from receiving excessive exposure from radiation when not worn;
- In the event a dosimeter is lost or destroyed, it is the student's responsibility to inform the RSO immediately so that a replacement dosimeter can be obtained.

Students have potential access to the magnetic resonance environment. The MRI system has a very strong magnetic field that may be hazardous to individuals entering the MRI environment if they have certain metallic, electronic, magnetic, or mechanical implants, devices, or objects. To assure students potentially entering the MRI environment are safe, an appropriate "MRI Safety" training will be required. All students are required to complete the MRI Screening Form (see Appendix I) to assure students are appropriately screened for magnetic wave or radiofrequency hazards. Additionally, students will be directly supervised at all times by the MRI technologist during their rotation in the MRI suites.

Developed: 2002

Revised: 2010, 2014, 2016, 2018

X-Ray Laboratory Rules

The following rules will be strictly enforced by all LSUA faculty:

- At NO time shall any individual be exposed to the useful beam. Equipment is to be used solely for the purpose of x-raying the radiographic phantoms. Failure to comply with this rule WILL result in immediate dismissal from the program.
- At NO time shall a student make an exposure without the presence of a qualified instructor. All radiographic exposures must be part of a specific assignment and under the direct supervision of a faculty member.
- In the event of an emergency or malfunction involving the x-ray equipment, contact the program director immediately.
- All accidents must be reported to the supervising faculty member immediately and use of the equipment discontinued until the problem is corrected.
- NO person shall be admitted into the laboratory without his/her personnel monitoring device.
- Exposure of a personnel monitoring device to deceptively indicate a dose delivered to an individual is prohibited and may result in dismissal from the program.
- Visitors ARE NOT allowed in the X-ray Lab.
- Appropriate attire should be worn at all times during positioning labs.
- Eating, drinking, smoking and other forms of tobacco use are prohibited in the x-ray room.
- If students are using the laboratory at times other than scheduled class time:
 - Students must sign up for additional time utilizing sheets posted on door.
 - Upon leaving, students will ensure that the lab is clean by wiping down surfaces.
 - Upon leaving, students will ensure all equipment is properly stored and turned off.
- USE OF THE X-RAY LAB IS A PRIVILEGE. Upon entering, the student assumes responsibility for himself/herself and his/her equipment.
- The student may lose his/her right to use equipment in the X-ray lab for any violation of these regulations.

Student Code of Conduct

LSU Alexandria has adopted a Code of Conduct that established reasonable standards of academic and personal conduct for students. This policy is generally administered by the Provost and Vice Chancellor of Student and Academic Affairs. This policy may be found at the following website: [PS 228](#)

Communicable Disease Policy

The radiology department at hospitals performs many diagnostic and therapeutic procedures. Therefore, it is important that techniques be observed to prevent the spread of any infection from patient to patient, from patient to student or from student to patient. "Standard or Universal Precautions" must be used when indicated while providing care to patients. Additionally, specific policies outlined during orientation at clinical affiliates must be adhered.

Students must report communicable illnesses/infections to the Program Director and/or Clinical Instructor. A communicable disease is defined as any disease transmitted from one person or animal to another directly by contact with excretion or other discharges from the body; or indirectly, via substances or inanimate objects. Students with communicable diseases that are transferred by air or contact and are of short duration may not attend clinical courses. Students with communicable diseases that are of relatively long duration must notify the program director. Depending on the diagnosis, the student may be able to continue clinical with directions regarding patient contact or may be asked to drop the clinical course until the illness is resolved. The State of Louisiana has listed those diseases, which are reportable as communicable diseases. See Appendix see the link below for more information.

[Louisiana Department of Health: Sanitary Code](#)

The student must provide from their physician recommended time restrictions from school. Physician clearance after a period of infection is necessary before returning to school. The student's confidentiality will be protected. Failure to comply with this notification policy will result in disciplinary action as determined by the Radiologic Technology Program faculty. An illness requiring an extended absence which prevents the completion of course work because of circumstances beyond the student's control, may necessitate the process for an "I grade, Withdrawal, or Resignation." The student must initiate the appropriate process following the University guidelines.

A position will be held for a student desiring to re-enter the program after successful completion of the first semester. The student must submit a letter of intent to re-enter the Program to the Director by April 1st. The position will be held for the student after the spring semester only provided that the "I grade, Withdrawal, and Resignation" guidelines have been followed.

Revised: 2010, 2013, 2018

Drug-Free Campus Policy & Substance Abuse

Louisiana State Law prohibits the consumption, possession, distribution, possession with intent to distribute, or manufacture of drugs described as controlled dangerous substances in the Louisiana Revised Statutes 40:964; and other statutes define the illegal possession and/or use of alcohol. Further, various federal and state laws and regulations apply to the employees of Louisiana State University at Alexandria, including the Drug-Free Schools and Communities Act Amendments of 1989 (Public Law 101-226), and Revised Statutes of the State of Louisiana. This policy is specifically directed at illegal actions involving alcohol and controlled drugs.

This policy does not supersede the policies in the current LSUA Student Handbook, but reflects additional requirements of Radiologic Technology Students.

Definitions:

Controlled Substances – for the purpose of this policy includes illegal drugs, unauthorized controlled substances, abuse of inhalants, look-alike drugs, designer and synthetic drugs, and any other unauthorized drugs, abnormal or dangerous substances which may affect an employee's mood, senses, responses, motor functions, or alter or affect a person's perception, performance, judgment or reactions while working including those drugs identified in Schedules I through V of Louisiana R.S. 40:964 or Section 202 of the Controlled Substances Act, 21 U.S.C. 812.

Campus/Clinical – For the purpose of this policy, a student is on campus/clinical whenever he/she is:

- On any University/health care facility property including parking lots.
- Present at any University sanctioned activity.
- Wearing an official uniform/lab coat of the Radiologic Technology Program.

The following are prohibited by the Radiologic Technology Program when a student is on campus/clinical and will result in disciplinary action:

- Unauthorized possession or use of a controlled substance and/or alcohol.
- Being under the influence of a controlled substance and/or alcohol, including but not limited to: DUI arrests, convictions, and driving suspensions.
- Illegal manufacture, distribution, sale, or purchase of a controlled substance including but not limited to arrests and convictions.

Department office Allied Health Substance Abuse Policy

Substance Screening

Students who exhibit or demonstrate “reasonable suspicion, based on objective facts and reasonable inferences, that the student is under the influence of or is impaired by drugs or alcohol,” will be tested in accordance with the Drug Testing Policy in the Department of Allied Health.

Drug Testing Policy

This policy applies to all students admitted to programs in the Department of Allied Health. Drug testing may be done randomly, or on the basis of a reasonable suspicion, using objective facts and reasonable inferences, that the student is under the influence of or is impaired by drugs or alcohol. When reasonable suspicion exists, the Department Chair of Allied Health will be notified by the Program Director or Clinical Instructor involved and the

student will be immediately suspended from attending any clinical courses. Appropriate security, campus or clinical site, and a designated representative of LSUA will escort the student suspected of drug/alcohol use, to the testing facility. Testing will be done at the student's own expense. Once testing has been completed, the student must arrange for transportation to his or her own home (at their own expense) and will report to the Department Chair of Allied Health the following morning for further instructions.

A student's refusal to submit to drug testing will result in dismissal from the Department of Allied Health. Students testing positive will be immediately suspended from the health care setting until such time that continuation is granted by the appropriate licensing agency and the Department of Allied Health.

All testing will be done in strict confidence and results maintained with restricted access. Results of the test will be made known to the appropriate licensing agency on a "need to know" basis.

Reviewed: 2010, 2013

Medical Insurance Policy

Louisiana State University of Alexandria does not provide medical insurance for student interns. However, they are covered only for third party liability claims. The program advises the students to obtain their own medical insurance coverage for the duration of the clinical education experience.

Privacy Rights of Students

Louisiana State University Alexandria, consistent with the regulations of the Family Educational Rights and Privacy Act (FERPA) of 1974, ensures students access to their education records maintained by the University and prohibits the release of personally identifiable information from these records without the student's permission except as specified by the law.

Copies of the complete policy statement will be provided to students and/or their parents on request to Admissions and Records. You may also access this policy at the following website: [PS 217](#)

Sexual Harassment Policy

It is the policy of LSU of Alexandria to provide an environment that is free from sexual harassment. No employee or student (either male or female) should be subjected to unsolicited or unwelcome sexual overtures or conduct, either verbal or physical. Sexual harassment is prohibited by Title IX of the Education Amendments of 1972, Title VII of the Civil Rights Act of 1964, and state laws.

Sexual harassment may involve the behavior of a person of either sex against a person of the opposite or same sex, and occurs when such behavior constitutes unwelcome sexual

advances, unwelcome requests for sexual favors, and other unwelcome physical or verbal behavior. The University's policy on sexual harassment and procedures for reporting allegations of sexual harassment may be found at the following website: [PM 73](#)
Revised: 2021

Student Grievance Policy

The student grievance procedure was developed to deal with disputes between students and their instructors. The student grievance policy defines a formal procedure by which disputes that have not been amenable to informal resolution can be resolved.

Although the primary purpose of this policy statement is to clearly describe the formal steps and procedures of the student grievance policy, there are important steps that must be taken to attempt to resolve issues before they escalate to the need for a formal grievance. The University encourages informal resolution of problems. Several things may be done by the student to clarify questions and concerns: 1) Review the course syllabus. 2) Review any course assignments that relate to the area of concern. 3) Investigate any concerns immediately. 4) Bring concerns to the course instructor.

Filing a formal grievance should be viewed as a last resort. Take this step only when all other avenues for resolution have been exhausted. The grievance process is not designed to address cases where students simply made a grade lower than desired in a particular class.

Authority of campus administrators over disputes between students and faculty is limited to cases involving violation of University policies, criminal or unethical mistreatment, or clearly prejudicial treatment of a student. Campus administrators do not have the authority to change grades, except as determined by the Student Grievance Committee as a result of a formal hearing. The basic role of campus administrators in the informal and formal grievance process is to assure fair and equitable treatment under existing University policies and to assist in conflict resolution.

Please see the LSUA Student Handbook or the following link for the complete [Student Grievance Policy](#).

If a complaint (any complaints apart from those that require invoking the grievance procedure (i.e., cleanliness of classroom) may arise during the attendance of Radiologic Technology courses the students must:

First, bring the complaint or issue to the attention of the Program Director. The Program Director will review the complaint or issue, provide a timeline for response, and follow-up when necessary. Secondly, if the Program Coordinator does not respond to the complaint in a timely manner the student may contact the Allied Health Department Chair.

Workplace Hazards Policy

Occupational Safety and Health Administration (OSHA) is an agency of the United States Department of Labor. It was created by Congress to prevent work-related injuries, illnesses, and deaths by issuing and enforcing rules (called standards) for workplace safety and health. OSHA aims to ensure employee safety and health in the United States by working with employers and employees to create better working environments. Students are educated during the Clinical Orientation regarding the following:

- Universal precautions
- Tuberculosis awareness
- Fire safety
- Hazardous materials (chemical, electrical, bomb threats, etc.)
- Blood-borne pathogens
- COVID-19 precautions & symptoms

Appendix A



RADIOGRAPHY
DIDACTIC AND CLINICAL COMPETENCY REQUIREMENTS

ARRT BOARD APPROVED: **JANUARY 2021**
EFFECTIVE: **JANUARY 2022**

4.2.1 General Patient Care Procedures

Candidates must be CPR/BLS certified and have demonstrated competence in the remaining nine patient care procedures listed below. The procedures should be performed on patients whenever possible, but simulation is acceptable if state regulations or institutional practice prohibits candidates from performing the procedures on patients.

General Patient Care Procedures	Date Completed	Competence Verified By
CPR/BLS Certified		
Vital Signs – Blood Pressure		
Vital Signs – Temperature		
Vital Signs – Pulse		
Vital Signs – Respiration		
Vital Signs – Pulse Oximetry		
Sterile and Medical Aseptic Technique		
Venipuncture*		
Assisted Patient Transfer (e.g., Slider Board, Mechanical Lift, Gait Belt)		
Care of Patient Medical Equipment (e.g., Oxygen Tank, IV Tubing)		

*Venipuncture can be simulated by demonstrating aseptic technique on another person, but then inserting the needle into an artificial forearm or suitable device.

4.2.2 Imaging Procedures

Institutional protocol will determine the positions and projections used for each procedure. When performing imaging procedures, the candidate must independently demonstrate appropriate:

- patient identity verification;
- examination order verification;
- patient assessment;
- room preparation;
- patient management;
- equipment operation;
- technique selection;
- patient positioning;
- radiation safety;
- image processing; and
- image evaluation.



4.2.2 Imaging Procedures (continued)

Imaging Procedures	Mandatory or Elective		Eligible for Simulation	Date Completed	Competence Verified By
	Mandatory	Elective			
Chest and Thorax					
Chest Routine	✓				
Chest AP (Wheelchair or Stretcher)	✓				
Ribs	✓		✓		
Chest Lateral Decubitus		✓	✓		
Sternum		✓	✓		
Upper Airway (Soft-Tissue Neck)		✓	✓		
Sternoclavicular Joints		✓	✓		
Upper Extremity					
Thumb or Finger	✓		✓		
Hand	✓				
Wrist	✓				
Forearm	✓				
Elbow	✓				
Humerus	✓		✓		
Shoulder	✓				
Clavicle	✓		✓		
Scapula		✓	✓		
AC Joints		✓	✓		
Trauma: Shoulder or Humerus (Scapular Y, Transthoracic or Axial)*	✓				
Trauma: Upper Extremity (Non-Shoulder)*	✓				
Lower Extremity					
Toes		✓	✓		
Foot	✓				
Ankle	✓				
Knee	✓				
Tibia-Fibula	✓		✓		
Femur	✓		✓		
Patella		✓	✓		
Calcaneus		✓	✓		
Trauma: Lower Extremity*	✓				

* Trauma requires modifications in positioning due to injury with monitoring of the patient's condition.



4.2.2 Imaging Procedures (continued)

Imaging Procedures	Mandatory or Elective		Eligible for Simulation	Date Completed	Competence Verified By
	Mandatory	Elective			
Head – Candidates must select at least one elective procedure from this section.					
Skull		✓	✓		
Facial Bones		✓	✓		
Mandible		✓	✓		
Temporomandibular Joints		✓	✓		
Nasal Bones		✓	✓		
Orbits		✓	✓		
Paranasal Sinuses		✓	✓		
Spine and Pelvis					
Cervical Spine	✓				
Thoracic Spine	✓		✓		
Lumbar Spine	✓				
Cross-Table (Horizontal Beam) Lateral Spine (Patient Recumbent)	✓		✓		
Pelvis	✓				
Hip	✓				
Cross-Table (Horizontal Beam) Lateral Hip (Patient Recumbent)	✓		✓		
Sacrum and/or Coccyx		✓	✓		
Scoliosis Series		✓	✓		
Sacroiliac Joints		✓	✓		
Abdomen					
Abdomen Supine	✓				
Abdomen Upright	✓		✓		
Abdomen Decubitus		✓	✓		
Intravenous Urography		✓			



4.2.2 Imaging Procedures (continued)

Imaging Procedures	Mandatory or Elective		Eligible for Simulation	Date Completed	Competence Verified By
	Mandatory	Elective			
Fluoroscopy Studies – Candidates must select two procedures from this section and perform per site protocol.					
Upper GI Series, Single or Double Contrast		✓			
Contrast Enema, Single or Double Contrast		✓			
Small Bowel Series		✓			
Esophagus (<i>NOT</i> Swallowing Dysfunction Study)		✓			
Cystography/Cystourethrography		✓			
ERCP		✓			
Myelography		✓			
Arthrography		✓			
Hysterosalpingography		✓			
Mobile C-Arm Studies					
C-Arm Procedure (Requiring Manipulation to Obtain More Than One Projection)	✓		✓		
Surgical C-Arm Procedure (Requiring Manipulation Around a Sterile Field)	✓		✓		
Mobile Radiographic Studies					
Chest	✓				
Abdomen	✓				
Upper or Lower Extremity	✓				
Pediatric Patient (Age 6 or Younger)					
Chest Routine	✓		✓		
Upper or Lower Extremity		✓	✓		
Abdomen		✓	✓		
Mobile Study		✓	✓		
Geriatric Patient (At Least 65 Years Old and Physically or Cognitively Impaired as a Result of Aging)					
Chest Routine	✓				
Upper or Lower Extremity	✓				
Hip or Spine		✓			
Subtotal					
Total Mandatory exams required	36				
Total Elective exams required		15			
Total number of simulations allowed			10		

Appendix B

**LOUISIANA STATE UNIVERSITY ALEXANDRIA
DEPARTMENT OF ALLIED HEALTH
RADIOLOGIC TECHNOLOGY PROGRAM
COMPETENCY EVALUATION FORM**

Student _____ Grade _____
 Procedure _____ Date _____
 Simulated () Patient () Clinical Facility _____

Circle each area to indicate point value using the following scale: AF = Automatic Failure* or 50%
 0 = Unacceptable
 1 = Needs improvement
 2 = Acceptable

PROJECTION(S)

	OBSERVATION OF PERFORMANCE	A	B	C	D
1	EVALUATION OF REQUEST Identify part/pt, pt location/transport, hx, pathology, pt info	AF 2	AF 2	AF 2	AF 2
2	ROOM READINESS Rm clean, equip in position, supplies/ accessories	AF 2	AF 2	AF 2	AF 2
3	EQUIPMENT MANIPULATION Operate equipment/accessories, SID, tube angle, align tube/bucky, select technique	AF 1 2	AF 1 2	AF 1 2	AF 1 2
4	POSITIONING SKILLS Correct pt position	AF 2	AF 2	AF 2	AF 2
5	PATIENT CONSIDERATIONS Pt care, explanation of exam, proper gowning, timeliness, standard precautions, instructions, etc.	0 1 2	0 1 2	0 1 2	0 1 2

	IMAGE EVALUATION	A	B	C	D
6	ANATOMICAL PARTS Positioning, rotation, obliquity	0 1 2	0 1 2	0 1 2	0 1 2
7	PROPER ALIGNMENT Centered correctly, anatomy clipped	0 1 2	0 1 2	0 1 2	0 1 2
8	RADIOGRAPHIC TECHNIQUE S#, Exposure index, etc.	AF 1 2	AF 1 2	AF 1 2	AF 1 2
9	IDENTIFICATION Markers, patient info	AF 1 2	AF 1 2	AF 1 2	AF 1 2
10	RADIATION PROTECTION Shielding, Collimation, Repeats	AF 0 1 2	AF 0 1 2	AF 0 1 2	AF 0 1 2
11	IMAGE CRITIQUE	0 1 2	0 1 2	0 1 2	0 1 2
	TOTAL				

*Automatic Failure includes incorrect procedure, part, patient, failure to obtain correct history, failure to manipulate/operate equipment repeat because tube & bucky not aligned, wrong SID, incorrect CR angle, unable to set control panel, inability or improper use of access items, unsafe operation of equipment, incorrect pt position, repeat because of incorrect exposure factors, wrong marker, no marker or shield used, or 2 repeats on same position/projection. The RT will take immediately take over the exam at this point. The student is allowed to observe and assist with the remaining of the procedure.

EXPLANATION OF SCORE. PLEASE LIST COMMENTS BY PROJECTION & NUMBER.

Appendix C

LOUISIANA STATE UNIVERSITY ALEXANDRIA
 DEPARTMENT OF ALLIED HEALTH
 RADIOLOGIC TECHNOLOGY PROGRAM
 LABORATORY SKILLS EVALUATION FORM

Student _____ Grade _____
 Procedure _____ Date _____

1 = SATISFACTORY

0 = UNSATISFACTORY

		A	B	C	D	E	F	G
1	Pt history & explanation of procedure							
2	Correct Exposure factors							
3	Correct film size, type and placement							
4	Correct SID							
5	CR angulation							
6	Correct alignment; tube & bucky/cassette							
7	Correct positioning of part							
8	Part centered appropriately							
9	Correct marker							
10	Correct collimation							
11	Shielding, if possible							
12	Patient instruction and care							
13	Equipment manipulation							
14	Overall speed and proficiency							
15	Question on projection							

Projections:

A. _____ E. _____
 B. _____ F. _____
 C. _____ G. _____
 D. _____ H. _____

Comments: _____

 Student Signature

 Evaluator Signature

Appendix D

LOUISIANA STATE UNIVERSITY ALEXANDRIA
DEPARTMENT OF ALLIED HEALTH
RADIOLOGIC TECHNOLOGY PROGRAM
FINAL COMPETENCY EVALUATION FORM

Student _____ Date _____ Grade _____

Procedure _____ Patient # _____ Facility _____

Pre-Procedure Checklist

Check if completed

Check patient identification	
Interprets requisitions, checks doctor order; modifies routine if necessary	
Documents patient history, including check for possibility of pregnancy	
Adheres to clinical policies and procedures; knowledge of department protocol	
Room readiness	
Had to repeat, No marker used, No shield used (<i>circle the reason</i>)	

If any of the Pre-Procedure Checklist is not completed, the student will automatically fail (50%).

Projection/Position

View A: _____ View D: _____

View B: _____ View E: _____

View C: _____ View F: _____

1 = Needs improvement/not repeatable 2 = Acceptable

	A	B	C	D	E	F
Patient Care						
Positioning Skills						
Proper Alignment and Centering						
Correct Film Size and Type						
Correct ID and Lead Markers						
Correct Technique						
Uses Proper Collimation						
Equipment						
Overall Proficiency/Competency						
Film Critique including anatomy, pathology, & film quality						

Comments/Remarks:

Student Signature _____

Evaluator Signature _____

Appendix E

HEPATITIS B VACCINE WAIVER

Louisiana State University Alexandria
Department of Allied Health
Radiologic Technology Program

I, _____ have reviewed information on the risk associated with hepatitis B disease, availability and effectiveness of any vaccine against hepatitis B disease. I choose not to be vaccinated against hepatitis B disease, or I will obtain the vaccine at a later date.

Student Signature _____

Date _____

Hepatitis B

Hepatitis B is a potentially fatal disease that attacks the liver. The virus can cause short-term (acute) illness that leads to loss of appetite, tiredness, diarrhea and vomiting, jaundice (yellow skin or eyes) and pain in muscles, joints and stomach. Many people have no symptoms with the illness. It can also cause long-term (chronic) illness that leads to liver damage, liver cancer, and death.

According to the Centers for Disease Control, about 1.25 million people in the U.S. have chronic Hepatitis B infection. Each year it is estimated that 80,000 people, mostly young adults, get infected with Hepatitis B virus. Young adults are more likely to contract Hepatitis B infection due to greater likelihood of high-risk behavior such as multiple sexual partners. More than 11,000 people have to stay in the hospital and 4,000-5,000 people die from chronic Hepatitis B. Hepatitis B virus is spread through contact with the blood and body fluids of an infected person or sharing needles when injecting illegal drugs.

There are several ways to prevent Hepatitis B infections including avoiding risky behavior, screening pregnant women and vaccination. Vaccine is the best prevention. The vaccine series consists of three injections given over a six-month period, which are available through your private health care provider.

Appendix F

LOUISIANA STATE UNIVERSITY ALEXANDRIA
DEPARTMENT OF ALLIED HEALTH
RADIOLOGIC TECHNOLOGY PROGRAM

DECLARED PREGNANCY FORM

At the date of my signature, I _____, am declaring myself pregnant and understand that my radiation limit is 5 mSv for the remainder of my gestation period, not to exceed 0.5 mSv in any given month. Also, changes in my clinical assignments **may be** instituted in order to ensure compliance with JRCERT Standards.

Student's Signature _____ Date _____

Physician _____ Approximate Date of Delivery _____

At the date of my signature, I hereby release above student to continue with clinical assignment.

Physician's Signature _____ Date _____

Program Director's Signature _____ Date _____

At the date of my signature, I _____, chose to withdraw my declaration of pregnancy.

Student's Signature _____ Date _____

Program Director's Signature _____ Date _____

Appendix G

LOUISIANA STATE UNIVERSITY ALEXANDRIA
DEPARTMENT OF ALLIED HEALTH
RADIOLOGIC TECHNOLOGY PROGRAM

STUDENT EXPOSURE REPORT FORM

Student's Name _____ Date of Birth _____

Date OSL Read _____ OSL Reading _____

The above reading exceeds the recommended dose equivalence for one calendar quarter set forth in the Student Clinical Handbook under the Radiation Protection Policy, and by the LSU System Radiation Safety Committee.

The object of our ALARA program is to maintain radiation exposure at the lowest possible levels. This program is based on the premise that radiation exposure is not risk free and therefore, should be kept to levels well below the limits allowed by the Nuclear Regulatory Commission, the State of Louisiana, and other regulatory agencies. The state dose equivalent limit for an occupational radiographer is .05 Sv/yr. For students participating in clinical experiences of a radiography program, the administrative dose equivalent limit is 10 mSv/yr. Therefore, investigational action levels set by the Radiologic Technology Program at LSU Alexandria are as follows:

A student who receives more than 2.5 mSv/calendar quarter.

Your dose is below the NRC and State limits but exceeds the limit recommended for student clinical education. This behavior indicates a need to review radiographic procedures performed during a specific assignment in order to reduce your exposure. Apply the basic rules of radiation protection (time, distance, and shielding) to lower your radiation exposure.

Please provide in the space below a written explanation as to why you believe your OSL has a high reading. Please be specific.

Student Signature Date

RSO Signature Date

Appendix H

ASRT Code of Ethics

Preamble

Ethical professional conduct is expected of every individual registered by the American registry of Radiologic Technologists (ARRT). As a guide, the American Society of Radiologic Technologists (ASRT) and the 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 of 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 and participating in other professional development activities.

By exhibiting 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 conducts herself or himself in a professional manner, responds to patient needs and supports colleagues and associated in providing quality patient care.
- The radiologic technologist acts to advance the principle 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 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 purpose 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 health care 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 Society of Radiologic Technologists, 2003

Appendix I

Louisiana State University Alexandria Department of Allied Health Make-Up Clinical Time Policy

On rare occasions because of extended absence, a student may be required to schedule clinical hours outside of the regular schedule to make up time missed. For the safety of students and patients, under NO circumstance is a student allowed to be in the clinical setting more than ten (10) hours in any one day. Scheduled didactic and clinic hours combined cannot exceed forty (40) per week. A student may voluntarily request to exceed the forty (40) per week when make-up time is required. Students may NOT schedule make-up time on holidays observed by LSUA.

Student: _____

Number of hours missed: _____

Requested schedule:

DATE	Clinical Site	Time

At the date of my signature, I _____, request to exceed the normally scheduled clinical times. Times exceeding forty (40) hours per week are voluntary.

Student's Signature _____ Date _____

Approved:
CC/PD Approval _____ Date _____

Appendix J

MAGNETIC RESONANCE (MR) ENVIRONMENT SCREENING FORM FOR INDIVIDUALS*



The MR system has a very strong magnetic field that may be hazardous to individuals entering the MR environment or MR system room if they have certain metallic, electronic, magnetic, or mechanical implants, devices, or objects. Therefore, all individuals are required to fill out this form BEFORE entering the MR environment or MR system room. Be advised, the MR system magnet is ALWAYS on.

***NOTE: If you are a patient preparing to undergo an MR examination, you are required to fill out a different form.**

Date ____/____/____
month day year Name _____
Last Name First Name Middle Initial Age ____

Address _____ Telephone (home) (____) ____ - ____

City _____ Telephone (work) (____) ____ - ____

State _____ Zip Code _____

1. Have you had prior surgery or an operation (e.g., arthroscopy, endoscopy, etc.) of any kind? No Yes
If yes, please indicate date and type of surgery: Date ____/____/____ Type of surgery _____
2. Have you had an injury to the eye involving a metallic object (e.g., metallic slivers, foreign body)? No Yes
If yes, please describe: _____
3. Have you ever been injured by a metallic object or foreign body (e.g., BB, bullet, shrapnel, etc.)? No Yes
If yes, please describe: _____
4. Are you pregnant or suspect that you are pregnant? No Yes



WARNING: Certain implants, devices, or objects may be hazardous to you in the MR environment or MR system room. Do not enter the MR environment or MR system room if you have any question or concern regarding an implant, device, or object.

Please indicate if you have any of the following:

- Yes No Aneurysm clip(s)
 Yes No Cardiac pacemaker
 Yes No Implanted cardioverter defibrillator (ICD)
 Yes No Electronic implant or device
 Yes No Magnetically-activated implant or device
 Yes No Neurostimulation system
 Yes No Spinal cord stimulator
 Yes No Cochlear implant or implanted hearing aid
 Yes No Insulin or infusion pump
 Yes No Implanted drug infusion device
 Yes No Any type of prosthesis or implant
 Yes No Artificial or prosthetic limb
 Yes No Any metallic fragment or foreign body
 Yes No Any external or internal metallic object
 Yes No Hearing aid
 Yes No Other implant _____
 Yes No Other device _____



IMPORTANT INSTRUCTIONS

Remove **all** metallic objects before entering the MR environment or MR system room including hearing aids, beeper, cell phone, keys, eyeglasses, hair pins, barrettes, jewelry (including body piercing jewelry), watch, safety pins, paperclips, money clip, credit cards, bank cards, magnetic strip cards, coins, pens, pocket knife, nail clipper, steel-toed boots/shoes, and tools. Loose metallic objects are especially prohibited in the MR system room and MR environment.

Please consult the MRI Technologist or Radiologist if you have any question or concern BEFORE you enter the MR system room.

I attest that the above information is correct to the best of my knowledge. I have read and understand the entire contents of this form and have had the opportunity to ask questions regarding the information on this form.

Signature of Person Completing Form: _____ Date ____/____/____
Signature

Form Information Reviewed By: _____
Print name Signature

- MRI Technologist Radiologist Other _____

Appendix K



Sanitary Code - State of Louisiana Part II - The Control of Disease



LAC 51:II.105: The following diseases/conditions are hereby declared reportable with reporting requirements by Class:

Class A Diseases/Conditions - Reporting Required Within 24 Hours

Diseases of major public health concern because of the severity of disease and potential for epidemic spread-report by telephone immediately upon recognition that a case, a suspected case, or a positive laboratory result is known; in addition, all cases of rare or exotic communicable diseases, unexplained death, unusual cluster of disease and all outbreaks shall be reported.

Acinetobacter spp., carbapenem-resistant	<i>C. saka</i> , <i>C. parapsilosis</i> , <i>C. catenulata</i> ,	Measles (Rubella imported or indigenous)	Rubella (German Measles)
Acute Flaccid Paralysis including Acute Flaccid Myelitis	<i>C. guilliermondii</i> , and <i>Rhodotorula glutinis</i>	Melioidosis (<i>Burkholderia pseudomallei</i>)	Severe Acute Respiratory Syndrome-associated Coronavirus (SARS-CoV)
Amoeba (free living) infection (including <i>Acanthamoeba</i> , <i>Naegleria</i> , <i>Balamuthia</i> & others)	Cholera	<i>Neisseria meningitidis</i> (invasive infection)	Smallpox
Anthrax	<i>Clostridium perfringens</i> (foodborne infection)	Outbreaks of Any Infectious Disease	Staphylococcus aureus, Vancomycin Intermediate or Resistant (VISA/VRSA)
Avian or Novel Strain Influenza A (initial detection)	Diphtheria	Pertussis	Staphylococcal Enterotoxin B (SEB) Pulmonary Poisoning
Botulism	Enterobacteriaceae, carbapenem-resistant	Plague (<i>Yersinia pestis</i>)	Tularemia (<i>Francisella tularensis</i>)
Brucellosis	Fish/Shellfish Poisoning (domestic acid, neurotoxic shellfish poisoning, ciguatera, paralytic shellfish poisoning, scombroid)	Polio myelitis (paralytic & non-paralytic)	Viral Hemorrhagic Fever (Ebola, Lassa, Marburg, Crimean Congo, etc.)
<i>Candida auris</i> , as well as common misidentifications of <i>C. auris</i> (e.g., <i>C. haemulonii</i> , <i>C. duobushaemulonii</i> , <i>C. famata</i> , <i>C. lusitanae</i> ,	Foodborne Illness	Q Fever (<i>Coxiella burnetii</i>)	Yellow Fever
	<i>Haemophilus influenzae</i> (invasive infection)	Rabies (animal and human)	
	Influenza-associated Mortality	Ricin Poisoning	
		Rubella (congenital syndrome)	

Class B Diseases/Conditions - Reporting Required Within 1 Business Day

Diseases of public health concern needing timely response because of potential of epidemic spread-report by the end of the next business day after the existence of a case, a suspected case, or a positive laboratory result is known.

Anaplasmosis	<i>Escherichia coli</i> , Shiga-toxin producing (STEC), including <i>E. coli</i> O157:H7	Herpes (neonatal)	Syphilis ¹
Arthropod-Borne Viral Infections (West Nile, Dengue, St. Louis, California, Eastern Equine, Western Equine, Chikungunya, Usutu, Zika & others)	Granuloma Inguinale	Human Immunodeficiency Virus (HIV), infection in pregnancy ^{2,3}	Syphilis [(<i>Treponema pallidum</i>), infection in pregnancy] ^{1,4}
Aseptic Meningitis	Hantavirus (infection or Pulmonary Syndrome)	Human Immunodeficiency Virus (HIV), perinatal exposure ^{2,3}	Syphilis [(<i>Treponema pallidum</i>), perinatal exposure] ^{1,5}
Babesiosis	Hemolytic-Uremic Syndrome	Legionellosis	Tetanus
Chagas Disease	Hepatitis A (acute illness)	Listeriosis	Tuberculosis ¹ (due to <i>M. tuberculosis</i> , <i>M. bovis</i> , or <i>M. africanum</i>)
Chancroid	Hepatitis B (acute illness and carriage in pregnancy)	Malaria	Typhoid Fever
Cryptosporidiosis	Hepatitis B (perinatal infection)	Mumps	<i>Vibrio</i> infections (other than cholera)
Cyclosporiasis	Hepatitis C (acute illness)	Salmonellosis	Zika Virus-associated Birth Defects
	Hepatitis C (perinatal infection)	Shigellosis	
	Hepatitis E		

Class C Diseases/Conditions - Reporting Required Within 5 Business Days

Diseases of significant public health concern-report by the end of the workweek after the existence of a case, suspected case, or a positive laboratory result is known.

Acquired Immune Deficiency Syndrome ¹ (AIDS)	Giardiasis	Lyme Disease	Staphylococcal Toxic Shock Syndrome
<i>Anaplasma Phagocytophilum</i>	Gonorrhea ¹ (genital, oral, ophthalmic, pelvic inflammatory disease, rectal)	Lymphogranuloma Venereum ¹	Streptococcal Disease, Group A (invasive disease)
Aspergillosis	Guillain-Barré Syndrome	Meningitis, Eosinophilic (including those due to <i>Angiostrongylus</i> infection)	Streptococcal Disease, Group B (invasive disease)
Blastomycosis	Hansen's Disease (leprosy)	Nontuberculous Mycobacteria	Streptococcal Toxic Shock Syndrome
Campylobacteriosis	Hepatitis C ((infection, other than as in Class B)	Nipah Virus Infection	<i>Streptococcus pneumoniae</i> , invasive disease
Chlamydial infection ¹	Histoplasmosis	Non-gonococcal Urethritis	Transmissible Spongiform Encephalopathies (Creutzfeldt-Jacob Disease & variants)
Coccidioidomycosis	Human Immunodeficiency Virus ¹ (HIV)	Ophthalmia neonatorum	Trichinosis
Cryptococcosis (<i>C. neoformans</i> and <i>C. gattii</i>)	(infection other than as in Class B)	Psittacosis	Varicella (chickenpox)
Ehrlichiosis (human granulocytic, human monocytic, <i>E. chaffeensis</i> and <i>E. ewingii</i>)	Human T Lymphocyte Virus (HTLV I and II infection)	Spotted Fevers [<i>Rickettsia</i> species including Rocky Mountain Spotted Fever (RMSF)]	Yersiniosis
<i>Enterococcus</i> , Vancomycin Resistant [(VRE), invasive disease]	Leptospirosis	<i>Staphylococcus aureus</i> (MRSA), Invasive Infection	

Class D Diseases/Conditions - Reporting Required Within 5 Business Days

Cancer	Heavy Metal (arsenic, cadmium, mercury) Exposure and/or Poisoning (all ages) ¹	Phenylketonuria ¹	Severe Traumatic Head Injury
Carbon Monoxide Exposure and/or Poisoning ¹	Hemophilia ¹	Pneumoconiosis (asbestosis, berylliosis, silicosis, byssinosis, etc.) ¹	Severe Undernutrition (severe anemia, failure to thrive)
Complications of Abortion	Lead Exposure and/or Poisoning (all ages) ^{1,2}	Radiation Exposure, Over Normal Limits ¹	Sickle Cell Disease ¹ (newborns)
Congenital Hypothyroidism ¹	Pesticide-Related Illness or Injury (all ages) ¹	Reye's Syndrome	Spinal Cord Injury
Galactosemia ¹			Sudden Infant Death Syndrome (SIDS)

Case reports not requiring special reporting instructions (see below) can be reported by mail or facsimile on Confidential Disease Report forms (2430), facsimile (504) 568-8290, telephone (504) 568-8313, or (800) 256-2748 for forms and instructions.

¹Report on STD-43 form. Report cases of syphilis with active lesions by telephone, within one business day, to (504) 568-8374.

²Report to the Louisiana STD/HIV Program: Visit www.hiv.dhh.louisiana.gov or call 504-568-7474 for regional contact information.

³Report on form TB 2431 (8/94). Mail form to TB Control Program, DHH-OPH, P.O. Box 60630, New Orleans, LA. 70160-0630 or fax both sides of the form to (504) 568-5016

⁴Report to the Louisiana Genetic Diseases Program and Louisiana Childhood Lead Poisoning Prevention Programs: www.genetics.dhh.louisiana.gov or facsimile (504) 568-8253, telephone (504) 568-8254, or (800) 242-3112

⁵Report to the Section of Environmental Epidemiology and Toxicology, Occupational Health and Injury Surveillance Program: www.seet.dhh.louisiana.gov or call (504) 568-8150 or (888) 293-7020 or fax (504) 568-8149

⁶Report to the Louisiana STD/HIV Program on HIV/Syphilis during Pregnancy Reporting Form: Visit www.hiv.dhh.louisiana.gov or call 504-568-7474

Reference Cultures/Specimens to State Laboratory: Visit http://dhh.la.gov/asset/oph/Center-PHCH/Center-CHI/infectious-epi/IsolatesToSendToStateLab_2019.pdf

Additional reporting requirements exclusively for laboratory facilities may be found in LAC 51:II §107. The full text of the Sanitary Code may be found in Title 51 of the Louisiana Administrative Code at website <https://www.dca.la.gov/Pages/ocr/lac/books.aspx>.

Appendix L

Consent for Release of Information

I, _____ agree to allow Louisiana State University at Alexandria to release my health information and/or criminal background investigation to clinical education sites, as requested. I understand this information is confidential, will be kept secure at all times, and is shared with faculty only as appropriate.

I further understand that refusal to sign this consent will result in my inability to participate in clinical courses.

Signature: _____ Date: _____

Appendix M

Confidentiality Agreement

AS A STUDENT OF LOUISIANA STATE UNIVERSITY AT ALEXANDRIA, I AGREE THAT:

I shall hold as absolutely confidential all information I may obtain directly or indirectly concerning patients, doctors, or personnel, and will not seek to obtain confidential information from a patient.

I will maintain the confidentiality of all data and documents at all clinical education sites. All information regarding hospital/clinic business or patient information is considered confidential.

I will assure the right to privacy of all patients, staff, visitors, and guests. I understand this facility has both ethical and legal responsibilities to safeguard confidential information.

I will not divulge any confidential information I may encounter while I am a student at LSUA>

I will not copy or transport off the premises any confidential information.

I am aware that civil and criminal penalties are possible if unauthorized disclosure of information occurs.

Signature

Date

What is HIPAA?

Our goal at LSUA is to provide our students the information and training necessary to give patients the highest quality health care. As part of the promise to care for them, we keep information about their health private.

Until now, this promise was simply part of health care's code of ethics. Under a national law that went into effect April 2003, it is illegal to violate this code.

This law, the Health Insurance Portability and Accountability Act of 1996, or "HIPAA" for short, includes punishments for anyone caught violating patient privacy.

Those who do so, for financial gain, can be fined as much as \$250,000 or go to jail for as many as 10 years! Even accidentally breaking the rules can result in penalties, and embarrassment for you or our organization.

What is confidential?

All information about patients is considered private or "confidential" whether written on paper, saved on a computer, or spoken aloud. This includes their name, address, age, social security number, and any other personal information.

It also includes the reason the patient is sick or in the hospital, the treatments and medications he or she receives, caregivers' notes, and information about past health conditions. *If you reveal any of this information to someone who does not need to know it, you have violated a patient's confidentiality, and you have broken the law!*

Do you need to know?

Most of HIPAA is common sense. Just follow the simple "need to know" rule. If you need to see patient information to perform your job, as doctors, nurses and billing clerks do, you are allowed to do so.

But even doctors and nurses don't have the right to look at all the information about every patient. For example, a doctor caring for children has no right to look at the medical record of adult patients unless that doctor is helping to care for them. *Before looking at a patient's health information, ask yourself one simple question. "Do I need to know this to do my job." If the answer is no, stop. If the answer is yes, you have nothing to worry about.*

I could not help overhearing...

Not all information is locked up in a file room, or protected by passwords in a computer. There is no doubt that you will overhear private health information as you do your day-to-day work. As long as you keep it to yourself, you have nothing to worry about. *Remember this information includes the fact that the patient is at the health care facility in the first place. If you see a friend in the waiting room, you might want to tell another friend or family member later. "Hey, guess who I saw today..." However, you must keep it to yourself. The person you saw may not want anyone to know about the visit.*

Even the trash is private

A trash can could trap you into violating HIPAA. Patient information stored on paper or computer disk should never be thrown into an open trash can. The reason is simple. No one knows who might end up seeing the trash once it leaves the building.

If you see patient information in an open trash container, tell your supervisor or a supervisor in the area. He or she can get rid of it properly, either into a locked bin until it can be destroyed or directly into a paper shredder.

Appendix N

LOUISIANA STATE UNIVERSITY AT ALEXANDRIA DEPARTMENT OF ALLIED HEALTH RADIOLOGIC TECHNOLOGY

CLINICAL DISCIPLINARY FORM

Name of student _____
Date _____ Semester _____

Clinical Site _____ Course _____

Place a check on the appropriate line:

Minor violation _____	First _____	Second _____
Major violation _____	First _____	Second _____
Serious violation _____	First _____	Second _____

Specific violation as stated in the RADT Student Clinical Handbook _____

Number and type of violation(s) prior to this incident _____

Detailed description of the incident _____

Plan of action _____

Is follow-up necessary? Yes _____ No _____
Review student's progress in _____ months

I acknowledge that the above comments concerning this clinical incident have been discussed with me and I am fully aware of the plan of action I must follow.

Student's Signature _____	Date _____
Faculty/CI Signature _____	Date _____
PD Signature _____	Date _____

**LOUISIANA STATE UNIVERSITY AT ALEXANDRIA
DEPARTMENT OF ALLIED HEALTH
RADIOLOGIC TECHNOLOGY**

CONFERENCE FORM/REMEDIAL STUDY FORM

Name of Student _____

Date _____ Semester _____

Clinical Site _____ Course _____

Comments _____

Recommendations (when applicable) _____

Student's Signature _____ Date _____

Faculty/CI Signature _____ Date _____

PD Signature _____ Date _____