Midwestern State University
BSRT – Entry Level Program
Part I: Academic Handbook
2022
(Graduates of 2024)
Midwestern State University
Robert D. and Carol Gunn College of Health Sciences and Human Services
The Shimadzu School of Radiologic Sciences
Bachelor of Science in Radiologic Technology Program

STUDENT HANDBOOK

Reviewed and Revised: June 2021
Updated: November 2021

Note: This handbook is for use by students in the Bachelor of Science in Radiologic Technology Program and contains specific information about the Radiologic Technology Program. For general MSU policies, see the MSU student handbook and catalog.

The information in this handbook is current at the time it is posted. However, this manual may be revised or amended upon written notification to the student. No revision or amendment will be retroactive but will become effective upon the date of student notification. The Chair of Radiologic Sciences will make final interpretation of program policies and procedures.
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INTRODUCTION

Purpose of the Radiologic Technology Program

The Radiologic Technology Program is designed to develop the technical skills and knowledge necessary for the student to satisfactorily function in the role of a radiologic technologist. The program seeks to provide pertinent learning experiences which will enable the student to demonstrate competency in the technical aspect of the profession as well as the human relations aspect. The program further seeks to develop the students' interests in the professional societies as well as the possibilities for continuing education.

The Radiologic Technology Program is twenty-nine months in duration after completing the necessary prerequisites. During this two-and-a-half year period, the student will receive didactic experience at the University, combined with clinical experience at the affiliated hospitals and clinical sites. The student can earn a Bachelor of Science after satisfactorily completing the appropriate curriculum. Upon satisfactory completion of the radiologic science curriculum and prerequisites, the student is eligible to sit for the national registry examination for radiologic technologists sponsored by the American Registry of Radiologic Technologists (ARRT).

A variety of assessment methods are used to determine if the student is achieving the goals of the program. Some of these include: tests, laboratory exercises, projects, assignments, student demonstrations, image critiques, observation, and performance evaluations.

The radiologic technologist is one of many individuals who work together as a team to meet the needs of the medical community and society by providing patients with the best possible care. Because of the rapid growth of the medical field, there is an ever increasing need for radiologic technologists.

Program Philosophy

Midwestern State University’s Radiologic Technology Program was designed with the philosophy that the most effective way to prepare graduates to enter the Radiologic Sciences profession is a progression from theory in the classroom to guided practice in the laboratory to “real-world” application in the clinical environment. The spring semester of the second year and the fall & spring semesters of the third year are devoted to on-campus classes and energized laboratories. As students enter the summer term of the third year, the focus changes to clinical experiences and some online courses. The clinical environment reinforces technological, patient care, and professional skills.
Mission, Goals, and Student Learning Outcomes

Bachelor of Science in Radiologic Technology Mission Statement

The Bachelor of Science in Radiologic Technology program at Midwestern State University uses a multifaceted approach to prepare students to become competent and compassionate radiologic technologists who demonstrate personal and professional growth as part of a dynamic health care team.

Program Goals and Student Learning Outcomes

<table>
<thead>
<tr>
<th>GOALS</th>
<th>STUDENT LEARNING OUTCOMES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Students will demonstrate CLINICAL COMPETENCE</td>
<td>• Students will apply positioning skills.</td>
</tr>
<tr>
<td>Students will demonstrate CRITICAL THINKING skills.</td>
<td>• Students will practice radiation protection.</td>
</tr>
<tr>
<td>Students will demonstrate an understanding of PROFESSIONALISM</td>
<td>• Students will analyze radiographic images.</td>
</tr>
<tr>
<td>Students will demonstrate effective COMMUNICATION skills in the medical environment.</td>
<td>• Students will manipulate technical factors.</td>
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<tr>
<td></td>
<td>• Students will demonstrate professional ethics.</td>
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<tr>
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<td>• Students will demonstrate an appreciation for radiologic sciences.</td>
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<tr>
<td></td>
<td>• Students will demonstrate oral communication skills.</td>
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<tr>
<td></td>
<td>• Students will practice written communication skills.</td>
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</tbody>
</table>
PROGRAM STRUCTURE

ORGANIZATIONAL CHART
Midwestern State University
Bachelor of Science in Radiologic Technology Program

Provost,
Vice President of
Academic Affairs

Dean of the Gunn
College of Health
Sciences and Human
Services

Radiologic Sciences
Program Chair

Radiologic Science
Faculty

Clinical Coordinator

Assistant Clinical
Coordinator

Clinical Instructor
PROGRAM FACULTY

Melanie Billmeier, MSRS, RT(R), Clinical Coordinator, Assistant Professor

Robert Comello, MS, RT(R), Associate Professor

Dr. Rodney Fisher, Ph.D., RT(R) (N) (CT) (BD), CNMT, Assistant Professor

Dr. Kimberly Onstott, Ed.D., RT(R) (CT) (MR), Assistant Professor

Vicki Sanders, MSRS, RRA, RT(R) (CT) (CV), RA Program Clinical Coordinator, Associate Professor

Mandy Sedden, MSRS, RT(R), Assistant Professor

Shanna Tole, MSRS, RT(R), Assistant Clinical Coordinator, Assistant Professor

Dr. Beth Vealé, Ph.D., RT(R) (QM), Professor, Department Chair

Dr. Jessyca Wagner, Ph.D., RT(R), Assistant Professor

Dr. Lynette Watts, Ph.D., RT(R), Associate Professor

Rachel Whatley, MSRS, RT(R), Assistant Professor

Debra Wynne, MSRS, RT(R), Assistant Professor
**RADIOLOGIC SCIENCE FACULTY/STAFF CONTACT INFORMATION**

<table>
<thead>
<tr>
<th>Department Chair:</th>
<th>E-Mail Address</th>
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</tbody>
</table>

**Flower Mound Campus:**

<table>
<thead>
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<td>972-410-0128</td>
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</tbody>
</table>

**Health Science Pre-Admission Counselors:**

<table>
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<th>Name</th>
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</tbody>
</table>

**Radiologic Science Undergraduate/Graduate Secretary:**

<table>
<thead>
<tr>
<th>Name</th>
<th>E-Mail Address</th>
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</table>

**Radiologic Science Toll Free Number:**

866-575-4305
ACCREDITATION

Regional Accreditation

The Radiologic Technology Program and Midwestern State University are regionally accredited by the Southern Association of Colleges and Schools Commission on Colleges (SACS-COC). As summarized by the SACS-COC, “To gain or maintain accreditation with the Commission on Colleges, an institution must comply with the standards contained in the Principles of Accreditation: Foundations for Quality Enhancement and with the policies and procedures of the Commission on Colleges. The Commission on Colleges applies the requirements of its Principles to all applicants, candidates, and member institutions, regardless of type of institution (public, private for-profit, private not-for-profit).”

“The Southern Association of Colleges and Schools Commission on Colleges is the regional body for the accreditation of degree-granting higher education institutions in the Southern states. It serves as the common denominator of shared values and practices among the diverse institutions in Alabama, Florida, Georgia, Kentucky, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, Texas, Virginia and Latin America and other international sites approved by the Commission on Colleges that award associate, baccalaureate, master’s, or doctoral degrees. The Commission also accepts applications from other international institutions of higher education.”

“When an institution has earned accreditation by the Commission on Colleges, it signifies that it has ‘a purpose appropriate to higher education and has resources, programs, and services sufficient to accomplish and sustain that purpose.’ In addition to ensuring that our institutions provide quality programs for students which determines eligibility for Title IV funds (student financial aid), the Commission on Colleges works to influence legislation and regulations that impact the work of our member institutions.”

More information about SACS-COC can be found online.

Programmatic Accreditation

The BSRT Program is accredited by:

The Joint Review Committee on Education in Radiologic Technology
20 North Wacker Drive, Suite 2850
Chicago, IL 60606-3182 www.jrcert.org
(312) 704-5300 or e-mail at: mail@jcert.org

The Joint Review Commission on Education in Radiologic Technology (JRCERT) promotes excellence in education and enhances quality and safety of patient care through the accreditation of educational programs. The only agency recognized by the United States Department of Education to accredit educational programs in radiography and radiation therapy, the JRCERT accredits educational programs in radiography and radiation therapy and in the related disciplines of magnetic resonance and medical dosimetry.
Programs accredited by the JRCERT must demonstrate that they are in substantial compliance with the relevant JRCERT accreditation standards: Standards for an Accredited Educational Program in Radiologic Sciences (radiography and radiation therapy), Standards for an Accredited Educational Program in Magnetic Resonance, or Standards for an Accredited Educational Program in Medical Dosimetry.

In keeping with JRCERT requirements to make program effectiveness data available to communities of interest, please see the following link:

Program Effectiveness Data

**COMPLIANCE WITH JRCERT STANDARDS**

Because the Radiologic Technology Program at Midwestern State University is accredited by the JRCERT, the program will strive at all times to be in compliance with the JRCERT Standards for an Accredited Educational Program in Radiologic Sciences. If a student determines that the program is not in compliance with any standard, a complaint can be brought to the program’s attention. Upon receipt of an allegation, the Radiologic Technology Program will review it to determine if the non-compliance issue exists. Within ten (10) days after receiving the complaint, a meeting will be scheduled with the individual filing the allegation to discuss the complaint. If the complaint is legitimate, the program faculty will develop a plan to resolve the issue and bring the program into compliance. If the party filing the complaint is not satisfied with the results, a meeting will be scheduled with the Program Chair to determine if on compliance still exists. This meeting will be scheduled within twenty (20) days of the original meeting. If the Program Chair determines non-compliance is still present, a plan will be drafted to solve the non-compliance issue. If the results of this meeting are still unsatisfactory to the party filing the complaint, a meeting can be scheduled with the Dean of the college and/or the JRCERT.

**Standards for Accreditation**

This Program meets or exceeds the “Standards for an Accredited Educational Program in Radiologic Technology” (Standards) as published by the Joint Review Committee on Education in Radiologic Technology (JRCERT). These Standards may be found in whole by following the link above. Students may request an individual copy of the Standards from the Program Chair. Students have the right to report program infractions of the Standards to the JRCERT.

Inspection of all accreditation documents is available through the Program Chair or Undergraduate Coordinator. 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 to accredit educational programs in radiography and radiation therapy. The JRCERT awards accreditation to programs demonstrating substantial compliance with these standards.

There are established standards a program must be in compliance with to achieve accreditation.
The Standards for an Accredited Educational Program in Radiologic Sciences (JRCERT, 2021) are as follows:

**Standard One, Accountability, Fair Practices, and Public Information:** The sponsoring institution and program promote accountability and fair practices in relation to students, faculty, and the public. Policies and procedures of the sponsoring institution and program must support the rights of students and faculty, be well-defined, written, and readily available.

**Standard Two, Institutional Commitment and Resources:** The sponsoring institution demonstrates a sound financial commitment to the program by assuring sufficient academic, fiscal, personnel, and physical resources to achieve the program’s mission.

**Standard Three, Faculty and Staff:** The sponsoring institution provides the program adequate and qualified faculty that enable the program to meet its mission and promote student learning.

**Standard Four, Curriculum and Academic Practices:** The program’s curriculum and academic practices prepare students for professional practice.

**Standard Five, Health and Safety:** The sponsoring institution and program have policies and procedures that promote the health, safety, and optimal use of radiation for students, patients, and the public.

**Standard Six, Programmatic Effectiveness and Assessment: Using Data for Sustained Improvement:** The extent of a program’s effectiveness is linked to the ability to meet its mission, goals, and student learning outcomes. A systematic, ongoing assessment process provides credible evidence that enables analysis and critical discussions to foster ongoing program improvement.

Students have the right to report program infractions of the standards to the JRCERT.

The scope of practice of the medical imaging professional includes:

1. Administering medications parenterally through new or existing vascular access, enterally, or through other appropriate routes as prescribed by a licensed practitioner.*+  
2. Administering medications with an infusion pump or power injector as prescribed by a licensed practitioner.*+  
3. Applying principles of ALARA to minimize exposure to patient, self, and others.  
4. Applying principles of patient safety during all aspects of patient care.  
5. Assisting in maintaining medical records, respecting confidentiality and established policy.  
6. Corroborating a patient’s clinical history with procedure and ensuring information is documented and available for use by a licensed practitioner.  
7. Educating and monitoring students and other health care providers.*+  
8. Evaluating images for proper positioning and determining if additional images will improve the procedure or treatment outcome.  
9. Evaluating images for technical quality and ensuring proper identification is recorded.  
10. Identifying and responding to emergency situations.
11. Identifying, preparing and/or administering medications as prescribed by a licensed practitioner.*+
12. Performing ongoing quality assurance activities.
13. Performing venipuncture as prescribed by a licensed practitioner.*+
14. Postprocessing data.
15. Preparing patients for procedures
17. Providing optimal patient care.
18. Receiving, relaying and documenting verbal, written and electronic orders in the patient’s medical record.*
19. Selecting the appropriate protocol and optimizing technical factors while maximizing patient safety.
20. Starting, maintaining and/or removing intravenous access as prescribed by a licensed practitioner.*+
21. Verifying archival storage of data.
22. Verifying informed consent for applicable procedures.

*Excludes limited x-ray machine operator
+Excludes medical dosimetry
Source: American Society of Radiologic Technologists (ASRT)
Updated December 2, 2020

PERFORMANCE STANDARDS

American Society of Radiologic Technologists
Radiography Professional Performance Standards

Standard One: Assessment The medical imaging professional collects pertinent data about the patient, procedure, equipment, and work environment.

- Assesses and maintains the integrity of medical supplies.
- Assesses factors that may affect the procedure, such as medications, patient history, patient preparation or artifact-producing objects.
- Assesses patient lab values, medication list and risk for allergic reaction(s) prior to procedure and administration of medication.*†
- Confirms that equipment performance, maintenance and operation comply with the manufacturer’s specifications.
- Determines that services are performed in a safe environment, minimizing potential hazards.
- Maintains restricted access to controlled areas.
- Obtains and reviews relevant previous procedures and information from all available resources and the release of information as needed.
- Participates in ALARA, patient and personnel safety, risk management and quality management activities.
- Recognizes signs and symptoms of an emergency.
- Verifies patient identification and appropriateness of the procedure requested or prescribed.
- Verifies that the patient has consented to the procedure.
- Verifies that protocol and procedure manuals include recommended criteria and are reviewed and revised.
- Verifies the patient’s pregnancy status.
- Complies with federal and state laws and regulations to minimize radiation exposure levels.
- Develops and maintains standardized exposure technique guidelines for all equipment.
• Maintains and performs quality control on radiation safety equipment.
• Reviews digital images, for the purpose of monitoring radiation exposure.

**Standard Two: Analysis/Determination** The medical imaging professional analyzes the information obtained during the assessment phase and develops an action plan for completing the procedure.

- Consults appropriate medical personnel to determine a modified action plan.
- Determines that all procedural requirements are in place to achieve a quality diagnostic or therapeutic procedure.
- Determines the appropriate type and dose of contrast media to be administered based on established protocols.*†
- Determines the course of action for an emergent situation.
- Determines the need for and selects supplies, accessory equipment, shielding, positioning, and immobilization devices.
- Employs professional judgment to adapt imaging or therapeutic procedures to improve diagnostic quality or therapeutic outcomes.
- Evaluates and monitors services, procedures, equipment and the environment to determine if they meet or exceed established guidelines, and revises the action plan.
- Selects the most appropriate and efficient action plan after reviewing all pertinent data and assessing the patient’s abilities and condition.
- Analyzes images to determine the use of appropriate imaging parameters.
- Verifies that exposure indicator data for digital radiographic systems has not been altered or modified and is included in the DICOM header and on images exported to media.

**Standard Three: Education** The medical imaging professional provides information about the procedure and related health issues according to protocol; informs the patient, public and other health care providers about procedures, equipment and facilities; and acquires and maintains current knowledge in practice.

- Advocates for and participates in continuing education related to area of practice, to maintain and enhance clinical competency.
- Advocates for and participates in vendor specific applications training to maintain clinical competency.
- Educates the patient, public and other health care providers about procedures and the associated biological effects.
- Elicits confidence and cooperation from the patient, the public and other health care providers by providing timely communication and effective instruction.
- Explains effects and potential side effects of medications.*†
- Maintains credentials and certification related to practice.
- Provides an accurate explanation and instructions at an appropriate time and at a level the patient and their care providers can understand; addresses questions and concerns regarding the procedure.
- Provides information on certification or accreditation to the patient, other health care providers and the public.
- Provides information to patients, health care providers, students and the public concerning the role and responsibilities of individuals in the profession.
- Provides pre-, peri-, and post-procedure education.
- Refers questions about diagnosis, treatment or prognosis to a licensed practitioner.
- Maintains knowledge of the most current practices and technology used to minimize patient dose while producing diagnostic quality images.

**Standard Four: Performance** The medical imaging professional performs the action plan and quality assurance activities.

- Adheres to radiation safety rules and standards.
- Administers first aid or provides life support.†
• Applies principles of aseptic technique.†
• Assesses and monitors the patient’s physical, emotional and mental status.
• Consulti with medical physicist or engineer in performing and documenting quality assurance tests.
• Explains to the patient each step of the action plan as it occurs and elicits the cooperation of the patient.
• Immobilizes patient for procedure.
• Implements an action plan.
• Maintains current information on equipment, materials and processes.
• Modifies the action plan according to changes in the clinical situation.
• Monitors the patient for reactions to medications.*†
• Participates in safety and risk management activities.
• Performs ongoing quality assurance activities and quality control testing.
• Performs procedural timeout.
• Positions patient for anatomic area of interest, respecting patient ability and comfort.
• Uses accessory equipment.
• Uses an integrated team approach.
• When appropriate, wears one or more personal radiation monitoring devices at the location indicated on the personal radiation monitoring device or as indicated by the radiation safety officer or designee.
• Coordinates and manages the collection and labeling of tissue and fluid specimens.
• Routinely reviews patient exposure records and reject analyses as part of the quality assurance program.
• Uses appropriate uniquely identifiable pre-exposure radiopaque markers for anatomical and procedural purposes.
• Uses pre-exposure collimation and proper field-of-view selection.

Standard Five: Evaluation The medical imaging professional determines whether the goals of the action plan have been achieved, evaluates quality assurance results and establishes an appropriate action plan.
• Communicates the revised action plan to appropriate team members.
• Completes the evaluation process in a timely, accurate and comprehensive manner.
• Develops a revised action plan to achieve the intended outcome.
• Evaluates quality assurance results.
• Evaluates the patient, equipment and procedure to identify variances that might affect the expected outcome.
• Identifies exceptions to the expected outcome.
• Measures the procedure against established policies, protocols and benchmarks.
• Validates quality assurance testing conditions and results.
• Evaluates images for positioning to demonstrate the anatomy of interest.

Standard Six: Implementation The medical imaging professional implements the revised action plan based on quality assurance results.
• Adjusts imaging parameters, patient procedure or additional factors to improve the outcome.
• Bases the revised plan on the patient’s condition and the most appropriate means of achieving the expected outcome.
• Implements the revised action plan.
• Notifies the appropriate health care provider when immediate clinical response is necessary, based on procedural findings and patient condition.
• Obtains assistance to support the quality assurance action plan.
• Takes action based on patient and procedural variances.

Standard Seven: Outcomes Measurement The medical imaging professional reviews and evaluates the outcome of the procedure according to quality assurance standards.
• Assesses the patient’s physical, emotional and mental status prior to discharge.
• Determines that actual outcomes are within established criteria.
- Evaluates the process and recognizes opportunities for future changes.
- Measures and evaluates the results of the revised action plan.
- Reviews all data for completeness and accuracy.
- Reviews and evaluates quality assurance processes and tools for effectiveness.
- Reviews the implementation process for accuracy and validity.
- Uses evidence-based practice to determine whether the actual outcome is within established criteria.

**Standard Eight: Documentation** The medical imaging professional documents information about patient care, procedures and outcomes.
- Archives images or data.
- Documents diagnostic, treatment and patient data in the medical record in a timely, accurate and comprehensive manner.
- Documents procedural timeout.
- Documents unintended outcomes or exceptions from the established criteria.
- Maintains documentation of quality assurance activities, procedures and results.
- Provides pertinent information to authorized individual(s) involved in the patient’s care.
- Records information used for billing and coding procedures.
- Reports any out-of-tolerance deviations to the appropriate personnel.
- Verifies patient consent is documented.
- Documents fluoroscopic time.
- Documents radiation exposure.
- Documents the use of shielding devices and proper radiation safety practices.

**Standard Nine: Quality** The medical imaging professional strives to provide optimal care.
- Adheres to standards, policies and established guidelines.
- Anticipates, considers and responds to the needs of a diverse patient population.
- Applies professional judgment and discretion while performing the procedure.
- Collaborates with others to elevate the quality of care.
- Participates in ongoing quality assurance programs.

**Standard Ten: Self-Assessment** The medical imaging professional evaluates personal performance.
- Assesses personal work ethics, behaviors and attitudes.
- Evaluates performance, applies personal strengths and recognizes opportunities for educational growth and improvement.

**Standard Eleven: Collaboration and Collegiality** The medical imaging professional promotes a positive and collaborative practice atmosphere with other members of the health care team.
- Develops and maintains collaborative partnerships to enhance quality and efficiency.
- Informs and instructs others about radiation safety.
- Promotes understanding of the profession.
- Shares knowledge and expertise with others.

**Standard Twelve: Ethics** The medical imaging professional adheres to the profession’s accepted ethical standards.
- Accepts accountability for decisions made and actions taken.
- Acts as a patient advocate.
- Adheres to the established ethical standards of recognized certifying agencies.
- Adheres to the established practice standards of the profession.
- Delivers patient care and service free from bias or discrimination.
- Provides health care services with consideration for a diverse patient population.
- Respects the patient’s right to privacy and confidentiality.
Standard Thirteen: Research, Innovation and Professional Advocacy  The medical imaging professional participates in the acquisition and dissemination of knowledge and the advancement of the profession.

- Adopts new best practices.
- Investigates innovative methods for application in practice.
- Monitors changes to federal and state law, regulations and accreditation standards affecting area(s) of practice.
- Participates in data collection.
- Participates in professional advocacy efforts.
- Participates in professional societies and organizations.
- Pursues lifelong learning.
- Reads and evaluates research relevant to the profession.
- Shares information through publication, presentation and collaboration.

*Excludes limited x-ray machine operator
+Excludes medical dosimetry
Source: American Society of Radiologic Technologists (ASRT)
Updated December 2, 2020

ARRT Code of Ethics

The Code of Ethics\(^1\) shall serve as a guide by which Certificate Holders and Candidates may evaluate their professional conduct as it relates to patients, healthcare consumers, employers, colleagues, and other members of the healthcare team. The Code of Ethics is intended to assist Certificate Holders and Candidates in maintaining a high level of ethical conduct and in providing for the protection, safety, and comfort of patients. The Code of Ethics is aspirational.

1. The Radiologic Technologist acts in a professional manner, responds to patient needs, and supports colleagues and associates in providing quality patient care.

2. The Radiologic Technologist acts to advance the principle objective of the profession to provide services to humanity with full respect for the dignity of mankind.

3. The Radiologic Technologist delivers patient care and service unrestricted by the concerns of personal attributes or the nature of the disease or illness, and without discrimination regardless of sex, race, creed, religion, or socio-economic status.

4. The Radiologic Technologist practices technology founded upon theoretical knowledge and concepts, uses equipment and accessories consistent with the purposes for which they were designed, and employs procedures and techniques appropriately.

5. The Radiologic Technologist assesses situations, exercises care, discretion and judgment, assumes responsibility for professional decisions, and acts in the best interest of the patient.

6. The Radiologic Technologist acts as an agent through observation and communication to obtain pertinent information for the physician to aid in the diagnosis and treatment of the
patient, and recognizes that interpretation and diagnosis are outside the scope of practice for the profession.

7. The Radiologic Technologist uses equipment and accessories, employs techniques and procedures, performs services in accordance with an accepted standard of practice, and demonstrates expertise in minimizing radiation exposure to the patient, self and other members of the healthcare team.

8. The Radiologic Technologist practices ethical conduct appropriate to the profession and protects the patient's right to quality radiologic technology care.

9. The Radiologic Technologist respects confidences entrusted in the course of professional practice, 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.

10. 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.

\(^1\)retrieved from ARRT August 21, 2018
Radiography Program Practice Standards

Radiography is a practice discipline with cognitive, sensory, affective, and psychomotor performance requirements. Based on those requirements, a list of “Technical Practice Standards” has been developed. These standards are a part of each radiography course and of a radiographer’s professional role expectation. A student may be dismissed from the program if unable to meet any of the practice standards.

Students will be asked to acknowledge their ability to meet the program technical standards by signing a confirmation statement at the program’s orientation (see pg. 125). Please read the following carefully:

<table>
<thead>
<tr>
<th>Skills</th>
<th>Description</th>
<th>Specific Examples</th>
</tr>
</thead>
</table>
| Communication                 | Oral and written communication skills to communicate in English with accuracy, clarity, and efficiency with patients, their families, and other members of the healthcare team, including non-verbal communication, such as interpretation of facial expressions, affect, and body language | • Communicate with clear dictation to patients, visitors, and other healthcare professionals  
• Explain radiographic procedures, initiate health-teaching, document and interpret radiographic technology actions and patient/client resources  
• Elicit information and cooperation (i.e.: obtaining patient history, giving breathing instructions)  
• Describe changes in a patient’s mood, activity, and posture  
• Perceive nonverbal communication (i.e.: pain, lack of understanding)  
• Recognize and report critical patient information to other caregivers |
| Critical Thinking/Problem-Solving | Critical thinking and problem-solving skills sufficient for sound clinical judgment during the performance of radiography | • Organize and accurately perform in proper sequence, and within a specified time, the steps required for radiographic procedures  
• Identify cause-effect relationships in clinical situations  
• Apply information in classroom to clinical setting, adapting to patient’s needs  
• Ability to quickly assess patients’ conditions and other emergent situations, determine appropriate courses of action, request assistance or delegate responsibilities to coworkers, and/or respond as needed  
• Solve problems (i.e.: mathematical computation)  
• Comprehend three-dimensional relationships (i.e.: anatomical relations)  
• Understand the spatial relationship of structures  
• Critical thinking/ability sufficient for clinical judgement (i.e.: modification of radiographic procedures and/or technical factors to accommodate patient age/or condition |
| Emotional/Behavior            | Emotional stability and appropriate behavior sufficient to accept responsibility/accountability for actions                                   | • Deliver unbiased patient care  
• Establish rapport with patients, healthcare workers, instructors and peers  
• Ability to calmly and respectfully cope in stressful situations, emergency situations, or in situations involving other personnel  
• Accept constructive and professional criticism  
• Follow all program, college, and clinical site policies  
• Expected to maintain confidentiality at all times  
• Expected to adhere to the ARRT/ASRT Code of Ethics and Rules of Ethics |
<p>| Environmental Tolerance       | Radiography students may be exposed to communicable diseases and/or blood and                                                                   | • May care for patients with a communicable disease and shall provide all care using universal precautions |</p>
<table>
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<tr>
<th>Skills</th>
<th>Description</th>
<th>Specific Examples</th>
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<tr>
<td><strong>Skills</strong></td>
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<tr>
<td><strong>Skills</strong></td>
<td>body fluids, toxic substances, medical preparations, latex, and ionizing radiation. Students shall use appropriate precautions at all times.</td>
<td>• Possible exposure to chemicals, irritants, and latex and shall follow all safety and health protection guidelines • May be exposed to ionizing radiation and shall follow radiation protection guidelines at all times • Ability to work in a noisy environment with frequent interruptions</td>
</tr>
<tr>
<td><strong>Hearing</strong></td>
<td>Auditory ability sufficient for physical monitoring and assessment of patient health care needs and during performance of radiography</td>
<td>• Ability to hear, understand, and respond appropriately to comments, questions, and instructions given in person, over the phone, or from a distance including those given when personnel are wearing surgical masks. • Detect and respond independently to monitoring alarms, signs of patient distress and/or a patient’s communication of distress • Must be able to respond to audible paging systems independently</td>
</tr>
<tr>
<td><strong>Motor Skills</strong></td>
<td>Motor abilities required for radiography include gross and fine muscular movements, equilibrium, strength, and functional use of all combined senses for the safe handling of patients, self, and equipment.</td>
<td>• Regularly reach up to six (6) feet off the floor • Push, pull, or lift fifty (50) pounds of weight • Transfer immobile patients from stretcher to radiographic table with some assistance from other personnel • Push standard and oversized patient wheelchairs, as well as mobile (portable) x-ray equipment to and from various areas • Standing for extended periods of time along with frequent bending and kneeling • Wearing a five (5) pound lead apron for extended periods of time • Elicit information from patients by palpation, percussion, testing muscle strength and function, penetration of the skin, and other diagnostic maneuvers • Safely perform diagnostic, therapeutic procedures and/or laboratory procedures • Provide other patient services and patient associated services • Safely lift, manipulate, and use equipment • Manual dexterity for patient positioning and with accessory devices and equipment controls • Move within confined spaces such as treatment rooms, patients’ rooms, or operating rooms • Administer CPR and maintain current certification</td>
</tr>
<tr>
<td><strong>Professional</strong></td>
<td>Present with professional appearance and demeanor; follow instructions and safety protocols and maintain a positive attitude. Demonstrate honesty and integrity beyond reproach. Possess interpersonal abilities sufficient to interact with individuals, families, groups, etc. from a variety of social, emotional, cultural, and intellectual backgrounds.</td>
<td>• Allow mature, sensitive, and effective relationships with patients, healthcare workers, instructors, and peers (interpersonal skills) • Maintain all professional boundaries • Display flexibility and adaptations while working with diverse populations • Function effectively under stress • Effectively work within a team and workgroups • Provide prompt and safe completion of all patient care responsibilities • Exhibit ethical behaviors and exercise good judgement • Display the following: o Compassion o Empathy o Integrity o Concern for others o Interest and motivation</td>
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<td><strong>Attitudes and</strong></td>
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<td><strong>Interpersonal Skills</strong></td>
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<tr>
<td><strong>Smell</strong></td>
<td>Olfactory ability sufficient to detect significant environmental and patient odors.</td>
<td>• Detect odors from patient (foul smelling drainage, alcohol breath) • Detect burning and/or smoke</td>
</tr>
<tr>
<td><strong>Technological</strong></td>
<td>Adaptability and skills to utilize current electronic, digital, and medical technologies.</td>
<td>• Utilize keyboard or touchscreens for selection and inputting of clinical data into consoles, computers and charts • Adapting to different technologies within the medical field, especially medical imaging</td>
</tr>
<tr>
<td>Skills</td>
<td>Description</td>
<td>Specific Examples</td>
</tr>
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</tbody>
</table>
| Vision/Observation     | Normal or corrected visual ability sufficient for accurate observation and performance of radiography in bright, normal, or dim lighting. | • Visually monitor patients  
• View anatomy and appropriate imaging techniques on radiographic images displayed on hard copy or computer screen, all within a low light environment  
• Observe changes in equipment operation (i.e.: warnings)  
• Safely work in dimly lit rooms  
• Observe and evaluate (i.e.: patient’s body habitus, image receptor sizes and selection of appropriate radiographic exposure factors)  
• Skillfully use precision instruments such as microscopes, oscilloscopes, gauges, control panels, and other electronic and digital equipment  
• Observe the results of certain stimuli (i.e.: medication reaction, patient’s skin color changes such as cyanosis or pallor) |
| Other                  | Adapting to Radiography Program course and clinical schedules, including any unforeseen changes | • Ability to work long and/or varied hours  
• Tolerate physically taxing workloads  
• Adapt to changing environments (i.e.: flexible schedules) |
| Mental                 | Mental ability sufficient for patient care, assessment, and operation of equipment | • Be able to visually concentrate and focus attention, thoughts, efforts, and behavior on patients and equipment for varying periods of time  
• Be able to respond to patients’ changing physical conditions independently |

This table is intended to serve as a guide regarding the physical, emotional, intellectual, and psychosocial expectations placed on a student. This document cannot include every conceivable action, task, ability, or behavior that may be expected of a student. Meeting these technical standards does not guarantee employment in this field upon graduation. Ability to meet the program’s technical standards does not guarantee a student’s eligibility for any licensure, certification exam, or successful completion of the degree program.
As you participate in your radiography education, you will be expected to demonstrate that you have indeed ‘learned’ what is required to become a professional radiographer. There are three main component areas, all important, all interrelated, into which your learning may be categorized: cognitive, psychomotor, and affective.

When most people think of ‘schooling,’ they usually refer to the first two of these areas, cognitive and psychomotor. You ‘learn the facts and theories’ and then you ‘put them into practice,’ actually performing the tasks, skills, etc. All too often, the development of what the profession considers to be the appropriate attitudes, beliefs and feelings toward what you are learning, what you are doing, and how you are doing them are assumed to ‘automatically’ occur. A truly balanced education requires that all three component areas be attended to. In view of this necessity, awareness of how well you are progressing in your learning becomes an important component. This is accomplished by assessing your demonstration to faculty, clinical preceptors, and staff that you are mastering those skills and behaviors associated with the affective category. Since no one is capable of directly knowing someone’s thoughts or feelings, we can only assess your affective learning by informing you of 1) what we consider to be important in this area, and 2) what observable behaviors we will be looking for to evaluate your mastery of affective skills. Simply stated, we will be assessing the degree to which your behaviors demonstrate the actions of what the majority of members of our profession, and the majority of the public, consider being indicative of professionalism. Listed below are those traits the University and Clinical faculty have identified as essential elements of affective area competency:

ACCOUNTABILITY
ADAPTABILITY & FLEXIBILITY
ASSERTIVENESS
COMPASSION
DEPENDABILITY
DILIGENCE
EFFECTIVE COMMUNICATION
EMPATHY
HONESTY & INTEGRITY
LEADERSHIP LOYALTY
RESPECT FOR OTHERS
SELF-RESPECT
TEAMWORK

Listed on the following pages are the explanations of the standards of performance we will be using in assessing the degree to which you are demonstrating that you have adopted the traits above.

ACCOUNTABILITY: To assess that you are accountable for your actions, we will be looking at actions you exhibit which show that you:

- Develop a realistic view of your responsibilities with respect to your education
  - Role as a student radiographer
• Contribution to the activities in classroom, lab, and clinic
• Precision of service in caring for patients
• Accept full personal responsibility for satisfactorily carrying out all of your areas of responsibility
• Fully and readily accept the consequences for your actions even when your actions create negative results or you fail to carry out what is expected of you
• Never need to be reminded to do what is expected of you
• Consistently identify yourself, by name and position, to a patient placed in your care, as well as to others in the clinical setting
• Recognize that the impression you are giving to the patient, staff, etc., is determined by your appearance, manner of behavior, manner of speech, and the degree of confidence with which you perform your duties

ADAPTABILITY/FLEXIBILITY: Change is a fact of life. In the healthcare professions, the need to change and adapt to the ‘demands of the moment’ is common. A radiographer must be readily able and willing to change with the situation, be flexible in their expectations, and seek ways to optimize any given situation. We will be looking for examples of how well, frequently, and readily you:
• Recognize when change in routine is actually required
• Correctly choose the change needed
• Refrain from complaining about change

ASSERTIVENESS: This trait is closely associated with accountability and self-respect. We will be assessing your growth in this area by looking for instances where you:
• Seek out ways to ‘take charge’ over your own learning (i.e. read ahead of assigned reading schedule, do independent research, etc.)
• Actively participate in improving your clinical proficiency (i.e. watching out for and trying to do as many cases as possible; attempting the more difficult as well as the easier cases)

COMPASSION & EMPATHY: It is crucial for the radiographer to keep foremost in their mind that is a ‘real person’ for whom they are providing a service. The signs of student compassion and empathy we will be watching for include:
• Knowing and recognizing the needs of the patient, including the patient’s:
  o Need for privacy
  o Desire to be recognized and respected
  o Possible discomfort and/or pain
• Accurately assessing the degree of discomfort experienced by the patient
• Responding appropriately to those needs by:
  o Acknowledging ‘needs’ situations
  o Selecting and implementing measures to satisfactorily meet the needs
• Ability to describe what the patient feels
• Ability to balance your feelings of empathy and compassion with the necessity of performing the exam/study efficiently, accurately, and effectively
• Using only the proper form of address when speaking to the patient, staff, physicians, etc.
• Assuring that your appearance, manner of behavior, and manner of speaking contribute to helping the patient feel comfortable and confident that they are receiving the best quality of care possible
• Treating all patients, staff, and fellow students equally, without regard to race, religion, sex, economic condition, or illness (both physical and mental)

DEPENDABILITY: Since a considerable degree of responsibility is placed on health care professionals (including students in the health related professions), it is vitally important for the radiographer to consistently be ‘ready, willing, and able’ to perform their duties. We will be measuring degrees of dependability by assessing:
• Regularity of attendance: absence from assigned areas of responsibility (clinical or class) should be the exception, and only for the most serious of reasons; perfect attendance should be the norm
• Punctuality: the dependable professional arrives not just ‘on time,’ but well enough in advance of ‘starting time’ so that they are totally ready to take on any assigned responsibilities at the start of the day, as well as when returning from lunch, breaks, etc.
• Awareness of what is expected and, once ‘learned,’ performing duties & responsibilities without being reminded
• Carrying through with responsibilities. This means completing ALL parts of assigned tasks
• Carrying through with what you promise to do
• Openly admitting to ‘not knowing’ when applicable
• Completing and submitting all documents and assignments ‘on time’

DILIGENCE: Other ways of describing diligence are ‘consistent attention to detail’ and ‘striving for perfection.’ Performing tasks so that the result is ‘just good enough to pass’ is not acceptable in the health care professions. Signs of diligence we consider important include:
• Consistency in marking all images appropriately
• Consistency in imaging the appropriate centering point at the center of the image
• Neatness of submitted documents and assignments
• Completeness/comprehensiveness of submitted work

EFFECTIVE COMMUNICATION: Speaking and writing in such a way that the patient, their family, fellow students, and other staff members readily understand what you are trying to communicate. Effective, efficient, and accurate communication can, at times, become a ‘life and death’ situation within the healthcare professions. Your success in using clear, effective, and accurate communication will be assessed in situations where:
• You speak to patients, staff, etc.
• Written communication is required
• Non-verbal communication may affect overall communications (such as movements and facial expressions); appropriateness of non-verbal communication will also be assessed through your adherence to the appropriate appearance and behavior standards

HONESTY & INTEGRITY: There is absolutely no place for dishonesty or lack of integrity in the healthcare professions. Your performance in meeting this standard will be assessed by
measuring the degree to which you:

- Admit when you do not know something
- Admit when you make a mistake
- Submit and assume credit for ONLY your own work
  - In the clinical setting:
    - In images you submit for a grade
    - In patient care delivered or performed
  - In the academic setting:
    - On tests and examinations
    - In assigned papers or research
- Assume credit for only your true level of attainment/achievement or credential
- Give full and truthful account, when asked, of all clinical activities/incidents of which you have direct knowledge

LEADERSHIP: Although not everyone can be a ‘leader’ in the traditional sense of the word, radiographers are looked upon as authorities when it comes to matters pertaining to radiation exposure. In addition, the term ‘professional’ carries the connotation of ‘self-governing,’ ‘self-controlling,’ and ‘helping peers improve.’ In view of these factors, we will be measuring your performance in this area by watching for evidence that you:

- Help your classmates master material you have already mastered
- Perform self-directed learning activities associated with the profession such as:
  - Attending Radiology Club meetings
  - Subscribing to and reading professional radiology publications
  - Keeping an ‘eye out’ for media references to anything relating to radiation/imaging

LOYALTY: Loyalty to your profession, to the program and to the University, to the hospital(s) to which you are assigned, to the staff in their respective departments, and to your fellow students are important traits of a professional. Examples of behavior we will be watching for will include:

- Using positive remarks when speaking about the profession, program, University, etc.
- Using only the proper mechanisms for addressing ‘less than optimal’ situations present in the profession, program, University, etc.
- Recognizing, and actively addressing issues impacting the profession, etc.

RESPECT FOR OTHERS AND SELF: The professional places the needs and desires of those entrusted to their care and the profession above personal desires. Some of the signs of self-respect and respect for others that we consider important include:

- Keeping any and all information pertaining to a patient within the strictest bounds of confidentiality
- Assuring that your appearance is consistently neat, clean, and appropriate to the setting. This includes:
  - Wearing the proper neat and clean uniform
  - Wearing appropriate identification
o Appropriately modifying one’s grooming (including hair style, use of cosmetics and wearing of jewelry) to conform to the conservative end of the prevailing public value system

- Maintaining your personal hygiene so that you never ‘offend’
- Referring to patients, staff, etc. only by proper title, name, or form of address
- Seeking out ways to be helpful to others
- Consistently striving to do one’s best
- Identifying one’s own weaknesses and striving to correct them
- Responding appropriately to correction and criticism from others in positions of authority over you
- Assuring that your behavior consistently adheres to the Code of Ethics for the Profession and to the policies of the University, program, and the hospital(s) to which you have been assigned
- Adhering to the policies detailed in the program’s Clinical Handbook
- Treating all patients, staff, and fellow students equally, without regard to race, religion, sex, economic condition, or illness (both physical and mental)

TEAMWORK: A radiology department must rely on the coordinated activities of all individuals working in the department. For students to demonstrate that they are satisfactorily developing affective domain competency in this area, students must:

- Accurately describe their role as a team member
- Recognize those instances where others in the department may need help/assistance
- Volunteer assistance when appropriate and needed
- Endeavor to find ways to improve the overall efficiency, effectiveness, and/or accuracy of their own performance
- Accept correction/constructive criticism in a positive manner
- Assure that their availability is consistent through adherence to rotational schedules and perfect attendance
GENERAL UNIVERSITY POLICIES
Moffett Library

The Midwestern State University Moffett Library contains approximately 1,500,000 volumes, including microforms and government publications. It subscribes to approximately 450 periodicals and newspapers and has access to over 77,000 full text electronic journals. All major library services are located on the first floor, easily visible from the main entrance. The library’s discovery service, Primo, is available through workstations provided throughout the building. Primo is also available outside the library through the library website. The library provides free access to over 50 radiology specific journals.

The following is an example list of radiology specific journals available in print and online through the MSU Moffett Library:

- Administrative Radiology
- American Journal of Roentgenology
- Applied Radiology
- Canadian Journal of Medical Radiation Technology
- Diagnostic Imaging
- European Journal of Radiology
- Journal of Medical Imaging and Radiation Sciences
- Journal of the American College of Radiology
- Journal of Vascular and Interventional Radiology
- Magnetic Resonance Imaging Clinics of North America
- Radiography
- Radiologic Science & Education
- Radiologic Technology
- Radiology
- Radiology Management
- Seminars in Radiologic Technology
- Seminars in Ultrasound, CT, and MRI

Visitors to Campus

To promote an academic environment for the entire Midwestern State University community, students are expected to exercise prudence in bringing children and other family members to campus. Children and family members are not allowed in classrooms, lab facilities, or hospital environments during class time or clinical rotations. Such a policy protects the children and family members and eliminates distractions for others.

Lockdown Procedures

Any incident affecting MSU campus will be communicated through the MSU Alert system and will also be posted on the University homepage.

Disability Support Services

In accordance with Section 504 of the Federal Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990, Midwestern State University makes reasonable adjustments in its policies, practices, services, and facilities to ensure equal opportunity for qualified persons with disabilities to participate in all educational programs and activities.
Disability Support Services provides information and assistance, arranges accommodations, and serves as a liaison for students, instructors, and staff. To assist students the office has books on tape, recorders, and adaptive software that can be lent to qualified individuals. A student/employee who seeks accommodations on the basis of disability must register with Disability Support Services, Clark Student Center Room 168. Documentation of disability from a competent professional is required.

Individuals with grievances related to discrimination or lack of accommodation on the basis of a disability are encouraged to resolve the problem directly with the area involved. If the matter remains unresolved, advice and assistance will be provided by Disability Support Services. Specific information on filing a grievance is available in Disability Support Services or in the Student Affairs Office, Hardin 112, and (940) 397-4291.

The Director of Disability Support Services serves as the ADA Coordinator and may be contacted at (940) 397-4140, TDD (940) 397-4515, or 3410 Taft Blvd., Clark Student Center Room 168. For more information click Disability Support Services

**Anti-Discrimination Statement**

Midwestern State University is an equal opportunity/affirmative action institution and complies with all Federal and Texas laws, regulations, and executive orders regarding affirmative action requirements in all programs and policies. Midwestern State University affirms its commitment to a policy that provides equal educational opportunities for all students and does not discriminate against any individual because of race, religion/creed, color, sex, age, national origin, or disability. For more information, see the Equal Opportunity and Affirmative Action Policy Statement

**Sexual Harassment Policy**

It is the policy of Midwestern State University that no member of the University community may sexually harass another. The policy is presented in detail in the Midwestern State University Student Handbook link on the Dean of Students’ webpage. For more information, go to Sex Discrimination and Sexual Harassment policy

Any complaints alleging failure of this program to follow these policies should be brought to the attention of:

Beth Vealé, Ph.D., RT(R)(QM) Department Chair
Radiologic Sciences
Midwestern State University
Centennial Hall 430K
3410 Taft Blvd.
Wichita Falls, TX 76308
(940) 397-4611
beth.veale@msutexas.edu
Toll Free: 1-866-575-4305
Substance Abuse/Drug Policy

The university affirms that illegal drug use is unlawful and harmful. The use of illegal drugs and alcohol abuse by students and employees could result in cognitive deficits, loss of productivity, and other health risks. These risks include an increased risk of accidents which may result in death or permanent injury. Free, confidential counseling for alcohol and other drug abuse issues is available to students and employees through the Midwestern State University Counseling Center and Vinson Health Center. Other referral resources may include assessment, individual counseling, educational programs, materials, and referral and case management through community agencies, all which might include a fee. The complete MSU policy can be found in the MSU Student Handbook.

The following sections describe MSU’s policy regarding the sale, manufacture, distribution, possession and use of illegal drugs on or off university property or at university-sponsored events in accordance with federal, state, and local laws. Examples of violations include:

- Misusing over-the-counter drugs.
- Misusing or sharing prescription drugs.
- Possessing, using, being under the influence of, distributing, or manufacturing any form of illegal drug.
- Possessing paraphernalia (i.e., rolling papers, pipes, bongs, etc.) for intended or implied use of any form of illegal drug.
- Possessing paraphernalia that contains or appears to contain illegal drug residue.
- Purchasing or passing illegal drugs from one person to another.
- Using mail services to purchase, pass, or distribute illegal drugs.

This policy provides flexibility for the university in addressing drug-related offenses which occur on or off-campus. Moreover, it permits the university to address its fundamental mission of holistic education and the development of human potential. While recognizing that there is a need to address violations related to the use or possession of controlled substances, the university must address the education and well-being of all its students and employees. In addition to university imposed sanctions, students and employees are subject to all legal sanctions under federal, state, and local law for any offenses involving illegal drugs on university property or at university activities. A student who is caught using illegal drugs, regardless of whether they were arrested, may face immediate dismissal from the BSRT program. Consequences will be evaluated on a case-by-case basis. Illegal or unauthorized drug use within a medical facility will result in immediate dismissal from the BSRT program. If the student is in clinical, a grade of F will be assigned in the clinical course.

Safe Harbor

The university has a Safe Harbor rule for students. The university believes that students who have a drug and/or addiction problem deserve help. If any Midwestern State University student brings their own use, addiction, or dependency to the attention of university officials outside the threat of drug tests or conduct sanctions and seeks assistance, a conduct complaint will not be pursued. A written action plan may be used to track cooperation with the Safe Harbor program.
by the student. Failure to follow the action plan will nullify the Safe Harbor protection and campus conduct processes will be initiated.

**Campus Carry Statement**

Senate Bill 11 Handgun Policy passed by the 84th Texas Legislature allows licensed handgun holders to carry concealed handguns on campus, effective August 1, 2016. Areas excluded from concealed carry are appropriately marked, in accordance with state law (Penal Code 30.06 signage). Please note, open carry of handguns, whether licensed or not, and the carrying of all other firearms (rifles, shotguns, etc), whether open or concealed, are prohibited on campus. Please refer to the University’s webpage for more information regarding campus carry.

**Immunization Policy**

Each student entering the clinical environment is required to have the following immunizations according to Texas state law:

- 2 doses of live MMR vaccine (measles, mumps, rubella)
- TB (tuberculosis) Screening
- 2 doses of Varicella (chicken pox) or proof of illness
- Td/Tdap- one dose of Tdap and TD boosters every 10 years thereafter (diphtheria, tetanus)
- Hepatitis B series
- Seasonal Flu Immunization (September - March)

All required immunizations must be completed prior to the first clinical day. The first Hepatitis B shot must be taken by October 1. TB (tuberculosis) screening will be done in February the semester before clinical starts. Students who have not completed their immunizations will NOT be allowed to participate in clinical until cleared by the MSU Student Health Center (this includes all three Hepatitis B vaccinations). The Student Health Center requires all shot records be forwarded to them, and the Student Health Center may provide immunizations on an appointment basis only.

COVID-19 is currently affecting our community and campus. Please be aware that policies may change suddenly. Clinical site immunization policies supersede program requirements.

Students who are unwilling or unable to comply with the immunization policy must understand that some clinical agencies prohibit the presence of unvaccinated students at their facility. While the MSU Texas BSRT program will make reasonable efforts to find appropriate alternate clinical rotations for these students, there is always a risk the student will not be permitted to complete clinical rotations, which are a required part of the curriculum.
Radiologic Sciences Program Vaccination Exemption Policy

The Midwestern State University’s Radiologic Sciences Program (the “Program”) requires students enrolled in courses with clinical requirements and all faculty who are physically present in the clinical environment to follow the clinical site’s vaccination/immunization policies, standard transmission-based precautions, and infection control guidelines.

Certain clinical sites may allow students to request an exemption from the vaccination requirements for medical or religious reasons. Philosophical, political, scientific, or sociological objections to immunization do not justify an exemption.

- Individuals requesting an exemption for medical reasons will be required to submit a Medical Exemption from Vaccinations Form from a doctor or advanced practice provider.
- Individuals requesting an exception for religious reasons will be required to submit a Request for Religious Exemption from Vaccinations Form. Sincerely held religious belief, practice, or observance includes any traditionally recognized religion as well as beliefs, observances, or practices, which an individual sincerely holds and which occupy in their life a place of importance parallel to that of traditionally recognized religions.

All exemption requests will be submitted to the Program’s Clinical Coordinators for review and validation. While the Program will carefully review all requests for medical or religious exemptions, approval is not guaranteed. The Program will carefully review each request and determine if the request should be granted. After the individual’s request has been reviewed and processed, the individual will be notified, in writing, if an exemption has been granted or denied. The decision is final and not subject to appeal. Individuals are permitted to reapply if new documentation and information should become available.

Individuals with an approved exemption may be required to comply with COVID-19 testing and/or other preventive protective measures as per the clinical site’s requirements. The clinical site’s requirements will be specified in the exemption approval notice.

Individuals must immediately notify the Clinical Coordinator, Clinical Preceptor, department leader, or unit manager if experiencing COVID-19 symptoms (recent loss of smell or taste, or a fever of 100 F and new unexplained cough), diagnosed with or presumed to have COVID-19 by a licensed medical professional, or tested positive for COVID-19.

The Program’s Clinical Coordinators will verify the individuals are following the clinical site’s requirements and communicate with the clinical site as needed.

No individual will be placed in the clinical environment unless the clinical site’s or Program’s requirements are met before placement. Individuals currently in the clinical environment will be removed from the clinical site immediately if they do not abide by the Program’s or clinical site’s requirements. The Program reserves the right to restrict or alter assignments based on vaccination status for patient safety.

If a student feels they have a qualifying exemption and have been assigned to one of the clinical sites allowing exemptions, contact Shanna Tole for forms and information.
PROGRAMMATIC POLICIES (for admission)

Program Admissions Criteria

To be considered for admission, the following basic requirements must be met:

1. Be eligible for admission to MSU.

2. Print and complete the BSRT Program application (Link is not live until July 1st) on the department website and submit an official transcript from each institution attended including Midwestern State University.

3. Have a cumulative GPA of 2.5 or greater on all courses required for the BSRT degree and be in good academic standing.

4. Successful completion (grade of C or higher) in BIOL 1134 and BIOL 1234 prior to applying to the Radiologic Technology program. More than 1 repeat of each/either in the past 5 years will result in ineligibility for the program.

5. Either be core complete OR lack only 3 credit hours from core completion.

6. Satisfy all TSI requirements.

7. Have reliable Internet access (high-speed recommended) and a current, working email address.

8. Take the HESI Examination no later than the posted date on the website of the application year. HESI Instructions. You should take all sections of the HESI except Chemistry. There is no minimum score; however, the score on the HESI will be included in admission ranking. The specific sections to take are:
   a. Anatomy & physiology
   b. Biology
   c. Grammar
   d. Mathematics
   e. Physics
   f. Reading comprehension
   g. Vocabulary
   h. Personality style and learning style assessment

9. FlipGrid Interview. Once students apply to the program, a link will be sent. All applicants must complete the interview process by the due date to be eligible for the program.

10. Admission to the BSRT Program is based on a points-based rubric. Scores on the rubric totaling less than 8 will be reviewed by the Admission Committee, Program Chair, and the BSRT Coordinator on an individual basis.
Prior to the **first fall semester following program admission**, students MUST provide:

1. **Background Check** – Students must obtain an up-to-date background check through Castlebranch. The department secretary will verify initiation of the process (i.e. payment for the background check has been submitted). All outstanding warrants and any unresolved legal issues may result in dismissal from the program. If the applicant is aware of issues prior to the background check, he or she should contact the American Registry of Radiologic Technologists for the procedure to pre-apply for eligibility. Failure to do so may result in ineligibility to sit for the national certification exam.

2. **Health Insurance** – Students are responsible for any personal injury that occurs at the university or hospital. Proof of Health/Accident Insurance is required. A copy of student insurance information is kept in the student file and provided during orientation. It is the students’ responsibility to keep this information current. Any MSU student may purchase health insurance through the university. Students may contact Vinson Health Center for additional information.

   **Failure to provide evidence of the above may result in dismissal from the program.**

3. **CPR Certification** – Students are required to have up-to-date CPR: Basic Life Support for Healthcare Providers certification by the American Heart Association.

   **Failure to provide evidence of the above will result in a formal written warning.**

**Transfer Credits**

Credits transferred from other institutions to fulfill general education requirements will follow Midwestern State University’s Transfer Credit Policy. More information can be found on the MSU webpage: [Equivalencies](#).

It is the program’s policy that students transferring radiologic science courses, with the exception of Introduction to Radiologic Technology/Science and Medical Terminology (both of which are evaluated on a case by case basis), are not accepted in transfer. Students must complete the BSRT program in its entirety through Midwestern State University.

If a student transfers from another institution as “core complete”, that student is not responsible for completing MSU’s core; however, courses that differ from MSU’s core will not be used to calculate ranking. For example, if a student is core complete at another University or 2-year junior college and has completed a Global Component area course, we will not use this course. We will consider those areas complete and will not use a course in this spot, for ranking purposes.
Background Investigation Policy

The Radiologic Technology Program is committed to ensuring public and professional trust and providing safe patient care. In order to meet this goal, background checks, fingerprinting, and drug screening of students is required. Many of our clinical education settings require additional criminal background investigations of all employees and students. To comply with these requirements, accepted students will be asked to submit to these tests to ascertain the student’s suitability for clinical rotations.

Non-negative results will be processed further and may require additional testing. Additional drug screening will be at the student’s expense. Failure to pass drug screening will result in immediate dismissal from the program.

This information will remain confidential and will only be viewed by the Radiologic Science Program Chair or designee. Any criminal conviction which is found during the background investigation that may deem a student unsuitable for clinical rotations will be considered on a case by case basis. Additional information regarding the conviction may be required in order to make an informed decision. The background investigation will be made available to clinical education settings that require such. Individuals at the Clinical Education Setting authorized to make decisions regarding an individual’s eligibility to attend a setting will inform the Program Chair if a student will be allowed to attend clinical at that setting. If an offense appears on the criminal background check that disqualifies the student from attending clinical experiences, the clinical site(s) will notify the program regarding any student’s disqualification for attending clinical at that site. The student will receive written notification. Students who receive notification of ineligibility and who wish to dispute the results of the background investigation may follow the College of Health Sciences and Human Services Grievance Procedure.

A student who has been convicted of a crime, including a felony, a gross misdemeanor, or a misdemeanor with the sole exception of speeding and parking violations, must report these convictions to the American Registry of Radiologic Technologists (ARRT). All alcohol and/or drug related violations must be reported. All potential violations must be investigated by the ARRT in order to determine eligibility. Individuals must file a pre-application with the ARRT in order to obtain a ruling of the impact of their eligibility for the examination. This pre-application may be submitted at any time either before or after entry into an accredited program. For pre-application contact the ARRT at:

ARRT
1225 Northland Dr.
St. Paul, MN 55120-1155
Tel: (651) 687-0048

Drug Screening Test Policy

Students can be required to submit for a drug screening test anytime in the program. The student will be responsible for payment of the test. If the student tests positive for any illegal substance they will be withdrawn from the program immediately.
PROGRAMMATIC POLICIES (after admission)

Program Orientation

Prior to entering the professional program, students will be introduced to the Radiographic Science Program. This will include the use of radiation monitoring badges, policies, clinical policies, medical ethics, interpersonal relationships, and the professional societies.

It is the responsibility of each student to be fully aware of the contents of the handbook and what penalties exist if the student deviates from any outlined policy.

Planning Courses for the Degree

Students should become familiar with the courses they need to graduate. Students are encouraged to plan and obtain advice about scheduling courses so they are taken in the proper sequence or semester. Know who your advisor is and make an appointment each semester when scheduling courses. Good planning could save time and eliminate unnecessarily heavy schedules. However, students should take care when dropping any course during the program as doing so may complicate or prevent on time graduation. Students should inform their advisor when dropping courses.

A quarter of the courses are offered online. *It is critical that students have access to Windows or MAC compatible computers (no Chromebooks) and email addresses. Chromebooks do not work with the proctoring software provided by the University.* The university offers help to students who have not experienced online courses through the distance education department and online help in the learning management system D2L. Please contact your advisor if you need assistance.

When planning a semester schedule, students cannot exceed forty (40) contact hours per week of didactic and clinical involvement. Clinical assignment for students cannot exceed 10 hours in one day.

The total amount of hours required for this degree is 120. A minimum of 30 advanced (Jr/Sr level) semester hours are required of the total 120 degree hours. Courses at MSU beginning with a 3 or 4 are considered advanced. Students MUST complete 12 semester hours at MSU from a particular catalog to graduate under that catalog. Students should keep a copy of their degree plan on file and update it periodically. Students must also satisfy the Writing Proficiency Exam requirements between 60 and 90 hrs. **Students must complete the WPE exam prior to attending clinical.**
Advisors for Students

<table>
<thead>
<tr>
<th>Advisement Stage</th>
<th>Advisor</th>
<th>Procedure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-Program Acceptance Advisement</td>
<td>HSHS College Advisor (Suzanne Hansen)</td>
<td>Students are advised for eligibility requirements for BSRT program. Refer to RADS Secretaries for additional program information, tours, etc.</td>
</tr>
<tr>
<td>Post-Application Advising</td>
<td>RADS Secretary (Kamy Holloway)</td>
<td>Students are advised about all requirements to fully complete BSRT program admission.</td>
</tr>
<tr>
<td>Program Acceptance</td>
<td>Admissions Committee</td>
<td>Committee reviews all files and admission rubrics and selects students for admission.</td>
</tr>
<tr>
<td>Program Advising</td>
<td>Faculty</td>
<td>Once students accept the program slot, the secretary assigns each student a faculty advisor.</td>
</tr>
<tr>
<td>Continued Program Advising</td>
<td>Faculty</td>
<td>Each semester, the student must visit with their assigned advisor to review the degree plan and discuss the Writing Proficiency Requirement and other graduation requirements before the advising hold is removed.</td>
</tr>
</tbody>
</table>

Each student is assigned an academic advisor. It is in the student's best interest to be advised by Radiologic Science faculty. A student is assigned an academic advisor once they have asked to be listed as a pre-major. Students may be advised by any Radiologic Science faculty member regardless of their assigned advisor, if their advisor of record is unavailable. If for some reason the student or faculty member believes another individual should become his/her advisor, this change will be made. The program chair should be contacted when a change is desired. In the event that a faculty member leaves, the student will be assigned another advisor. The designated faculty member must authorize all registration and/or drop-add requests and petitions.

In order to track a student’s progress toward completion of prerequisite courses, the advisor and student will complete/update the “Degree Plan” form each time they meet to discuss class schedules. Students will need to contact their advisors each semester to remove advising holds.

Program details including admissions procedures, faculty, and many other useful links can be found on the program’s website.

Office Hours

The undergraduate secretary’s office hours are 8:00 a.m. to 5:00 p.m. Monday through Friday during the fall and spring semesters. During the summer a compressed schedule is in place. Office hours are Monday through Thursday 7:00 a.m. to 6:00 p.m.

Faculty have set office hours for each semester posted in front of their office door and online. All faculty will schedule individual student appointments. Students can contact them by phone or by email.
Students are encouraged to make appointments with faculty rather than "dropping in". The faculty will provide assistance to students as necessary. However, if students are aware they are having problems in a specific area, they should make an individual appointment for help.

**TUITION AND FEES FOR RADIOLOGIC TECHNOLOGY MAJORS**  
(Professional component of the Radiologic Technology Program)

**Semester 1: Spring II**
- Program Academic Requirements (see degree plan for specific hours)
  - Tuition & Fees link: [https://msutexas.edu/finaid/msu-coa.php](https://msutexas.edu/finaid/msu-coa.php)

**Semester 2: Summer II**
- Program Academic Requirements (see degree plan for specific hours)
  - Tuition & Fees link: [https://msutexas.edu/finaid/msu-coa.php](https://msutexas.edu/finaid/msu-coa.php)

**Semester 3: Fall III**
- Program Academic Requirements (see degree plan for specific hours)
  - Tuition & Fees link: [https://msutexas.edu/finaid/msu-coa.php](https://msutexas.edu/finaid/msu-coa.php)
- Lead markers (2 sets w/initials) - ~$45.00
- Rad Tech Boot Camp subscription - ~$170 for 22 month access*
- Immunizations - $variable
- Health Insurance (1 year) - $variable
- CPR Certification - ~$70.00

**Semester 4: Spring III**
- Program Academic Requirements (see degree plan for specific hours)
  - Tuition & Fees link: [https://msutexas.edu/finaid/msu-coa.php](https://msutexas.edu/finaid/msu-coa.php)
- Immunizations - $variable
- Liability Insurance - $18.00
- Drug Testing - $30.00
- Uniforms - $370.00 (varies)

**Semester 5: Summer III**
- Program Academic Requirements (see degree plan for specific hours)
  - Tuition & Fees link: [https://msutexas.edu/finaid/msu-coa.php](https://msutexas.edu/finaid/msu-coa.php)
- HESI Exit Exams - ~$79.00
- Trajecsys subscription (1 year) - ~$100.00

**Semester 6: Fall IV**
- Program Academic Requirements (see degree plan for specific hours)
  - Tuition & Fees link: [https://msutexas.edu/finaid/msu-coa.php](https://msutexas.edu/finaid/msu-coa.php)
- Health Insurance (1 year) - $variable
- ASRT student membership (1 yr) - $35.00
Semester 7: Spring IV

- Program Academic Requirements (see degree plan for specific hours)
  - Tuition & Fees link: https://msutexas.edu/finaid/msu-coa.php
- ARRT Certification Exam Application - $200.00
- Texas MRT License - $80.00
- LifeTouch Photo - $25.00

*These prices are subject to change due to academic license and discounts.
The following fees are included in our estimate of tuition and fees for each semester but are listed separately here (not as additional charges).

Instructional Enhancement Fee (per credit hour)
- Gunn College of Health Sciences and Human Services (COHS) ....... $24.00

Distance Education fee:
- A fee of $50.00 per credit hour will be added to all courses designated as distance learning.

*Prices are as accurate as possible at the time of publication and are subject to change without prior notification (September 2021)*
**Required Textbooks**
*Book editions are subject to change. Students should check with professors for the most up-to-date information.*

<table>
<thead>
<tr>
<th>Class</th>
<th>Text</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Pre-program Acceptance</strong></td>
<td></td>
</tr>
<tr>
<td>RADS 4123</td>
<td>Practical Statistics for Nursing &amp; Health Care, Fowler, ISBN 9780471497165</td>
</tr>
<tr>
<td><strong>Semester 1: Spring II</strong></td>
<td></td>
</tr>
<tr>
<td>RADS 2012</td>
<td>Quick and Easy Medical Terminology, Leonard, 9th ed. ISBN 9780323595995</td>
</tr>
<tr>
<td>RADS 4613</td>
<td>Legal and Ethical Issues for Health Professions, Nguyen, 4th ed. ISBN 978-0323496414</td>
</tr>
<tr>
<td><strong>Semester 2: Summer II</strong></td>
<td></td>
</tr>
<tr>
<td>RADS 4913</td>
<td>APA Manual. Same as RADS 3523</td>
</tr>
<tr>
<td><strong>Semester 3: Fall III</strong></td>
<td></td>
</tr>
<tr>
<td>RADS 4533</td>
<td></td>
</tr>
<tr>
<td><strong>Semester 4: Spring III</strong></td>
<td></td>
</tr>
<tr>
<td>RADS 3053</td>
<td>Bontragers. Same as RADS 3043</td>
</tr>
</tbody>
</table>
RADS 3063  Patient Care in Radiography. Same as RADS 3243
Bontragers. Same as RADS 3043
Essentials of Radiographic Physics. Same as RADS 3513


**Semester 5: Summer III**
RADS 4114  Radiographic Image Analysis. Same as RADS 4002

RADS 4733  Sectional Anatomy for Imaging Professionals. Kelley,

**Semester 6: Fall IV**
RADS 3213  Nursing Interventions & Clinical Skills. Elkin, 6th Edition
ISBN 9780323187947
Pharmacology & Drug Administration for Imaging Technologists,

RADS 4215  None

Lang Q&A Radiography Examination (w/CD), Saia,
ISBN 978007178715
Radiographic Image Analysis Workbook. Same as RADS 4114

RADS MOD  Varied textbooks for modality choices

**Semester 7: Spring IV**
RADS 4315  None

RADS 4332  Radiography: PREP. Same as RADS 4912
Lang Q&A Radiography Examination. Same as RADS 4912

RADS 4633  None

RADS MOD  Varied textbooks for modality choices

**Estimated Total Cost: $2000**
To make books more affordable, MSUTEXAS Radiography program, Elsevier, and the campus bookstore have partnered to make a discounted Print & eBook bundle available to students.

The bundled package contains only the following required titles:

<table>
<thead>
<tr>
<th>Title</th>
<th>Author</th>
<th>ISBN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient Care in Radiography: With an introduction to medical imaging, 10e</td>
<td>Ehrlich &amp; Coakes</td>
<td>9780323654401</td>
</tr>
<tr>
<td>Digital Radiography and PACS, 3e</td>
<td>Carter &amp; Vealé</td>
<td>9780323547581</td>
</tr>
<tr>
<td>Radiologic Science for Technologists, 12e</td>
<td>Bushong</td>
<td>9780323661348</td>
</tr>
<tr>
<td>Essentials of Radiographic Physics &amp; Imaging, 3e</td>
<td>Johnston &amp; Fauber</td>
<td>9780323566681</td>
</tr>
<tr>
<td>Bontragers Textbook of Radiographic Positioning and Related Anatomy, 10e</td>
<td>Lampignano &amp; Kendrick</td>
<td>9780323653671</td>
</tr>
</tbody>
</table>

These titles are required for the following courses: RADS 3033, RADS 3043, RADS 3053, RADS 3063, RADS 3243, RADS 3513, and RADS 3763.

The book package is only available at the campus bookstore.
# Midwestern State University

## Bachelor of Science in Radiologic Technology Degree Plan
### 2021-2022 Catalog

<table>
<thead>
<tr>
<th>Name</th>
<th>Last</th>
<th>First</th>
<th>MI</th>
<th>MiD#</th>
<th>Catalog Expires</th>
<th>Date</th>
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</thead>
</table>

**Comments:** A minimum of 13 advanced (3/4 credit) semester hours is required of the total 120 semester credit hours required for the degree. Courses at MSU beginning with a 3 or 4 are advanced. Students must complete 12 semester hours at MSU from a particular catalog to graduate under that catalog. Students should keep a copy of this degree plan on file and update it periodically. Students must satisfy Writing Proficiency Exam requirements between 60 and 90 hrs.

### General Core Courses

<table>
<thead>
<tr>
<th>Semester</th>
<th>CRP</th>
<th>Course Name</th>
<th>Credits</th>
<th>Comp</th>
<th>Course Sub</th>
<th>RADS Elective Course Choices</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fall I or prior to application</td>
<td>BIOC 1134 ANAT &amp; PHYS I *</td>
<td>4</td>
<td></td>
<td></td>
<td>RADS 4513 ADM &amp; SUPR</td>
<td></td>
</tr>
<tr>
<td></td>
<td>ENGL 1103 or 1121 or 1143</td>
<td>3</td>
<td></td>
<td></td>
<td>RADS 4813 TEACHING STRATEGIES</td>
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<tr>
<td></td>
<td>PSYC 1163 GEN PSYC OR SOCL 1133 INTRO TO SOCL</td>
<td>3</td>
<td></td>
<td></td>
<td>Modality Selection</td>
<td></td>
</tr>
<tr>
<td></td>
<td>POLS 1333 AMER GOVT I</td>
<td>3</td>
<td>CT</td>
<td>4703, 4783</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>CULTURAL &amp; GLOBAL UNDERSTANDING</td>
<td>3</td>
<td>MRI</td>
<td>4743, 4773</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| Spring I or prior to application | BIOC 1234 ANAT & PHYS II * | 4 | | | Mammography |
| | COMMUNICATION 010B | 3 | | | |
| | CORE MATH | 3 | | | |
| | POLS 1433 AMER GOVT II | 3 | | | |
| | HIST 1233 HIST SINCE 1865 | 3 | | | |

*BIOC 1134 & 1234 must be completed before the start of the fall semester.

### Apply between August 1st and September 30th

| Fall II | HIST 1133 HIST TO 1865 | 3 | | | |
| | LANGUAGE, PHILOSOPHY & CULTURE | 3 | | | |
| | CREATIVE ARTS | 3 | | | |
| | UNDERGRADUATE INQUIRY & CREATIVITY | 3 | | | |
| | RADS 4133 DATA ANALYSIS or approved statistics | 3 | | | |

### All but 3 credit hours must be completed by the end of the Fall II semester.

### Professional Courses

<table>
<thead>
<tr>
<th>Area</th>
<th>Cr. Hrs.</th>
<th>Adv. Hrs.</th>
</tr>
</thead>
<tbody>
<tr>
<td>RADS 2912 INTRO MED IMAGING &amp; TERM</td>
<td>2</td>
<td>MAJOR 79 33</td>
</tr>
<tr>
<td>RADS 3523 ESSENT. OF RESEARCH</td>
<td>3</td>
<td>General Core 42 0</td>
</tr>
<tr>
<td>RADS 3133 IMAGING PATHOLOGY</td>
<td>3</td>
<td>TOTAL 120 33</td>
</tr>
<tr>
<td>RADS 4613 ETHICS AND LEGAL ISSUES IN MED IMAGING</td>
<td>3</td>
<td></td>
</tr>
</tbody>
</table>

### SIGNATURES

| Signatures | |

### Notes:

**P** - Progression courses denoted with a P must be taken in the designated sequence.

**O** - Courses marked with O are offered online only.

**H** - Courses marked with H are offered online with a classroom component several times each semester.
**Student Records**

The University maintains accurate and confidential student records. It is the right of the students to have access to most of their educational records, and it is the duty of the University to limit access by others in accordance with existing guidelines and relevant laws. Student records, with certain exceptions, will not be released without prior consent of the student through written request.

The following student records may not be viewed by students: financial information submitted by their parents, confidential letters and recommendations, employment job placement or honors to which they have waived their rights of inspection and review. Students have the right to review and question the content of their educational records within a reasonable length of time after making a request for review. If there are any questions concerning the accuracy or appropriateness of the records that cannot be resolved informally, an opportunity to challenge a perceived inaccuracy or violation of privacy will be provided through the appeal mechanism.

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

With regard to clinical radiography course files, only the Radiologic Science faculty or the program secretaries may remove files to be copied. Students may not remove or copy the file themselves. Any violation of the above will result in disciplinary action by the Radiologic Science faculty.

**Student Confidential Information**

In accordance with the Family Education and Rights Act (FERPA) 1997, this program maintains all students’ records as confidential and can only release certain items designated as directory information. Directory information is considered name, local and permanent address, telephone listing, major field of study, dates of attendance, etc. This information is only given out to individuals that have a need to know, such as technical safety, clinical instructors, the Dean’s office, etc. The student can prohibit the release of this directory information by making a written request to the Radiologic Technology Program.

Students must be aware that reviewing another student’s folder or clinical paperwork is a violation of the confidentiality of that student’s records.
Any violation of the above will result in disciplinary action by the Program Faculty.

**Academic Standards**

The following statements outline the minimum academic standards for the Radiologic Technology Program:

1. All progression (RADS) courses must be taken in the sequence prescribed and every effort should be made to complete professional courses as described. Non-progression (professional) courses must be completed for degree eligibility and must be completed by the end of the Summer IV semester.
2. Students must earn a C or above in all courses. Progression courses require a minimum score of 75% to achieve a grade of C while non-progression courses require a minimum score of 70% to achieve a grade of C. Each course earning a grade below a C can only be repeated once.
3. Students must graduate from the program to sit for the ARRT Radiography Registry.

Information about the procedures for when a student is unable to meet the minimum academic standards of the program can be found in the section titled *BSRT Program Progression Policy* of this handbook.

**National Registry**

The American Registry of Radiologic Technologists (ARRT) is the only examining and certifying body for radiologic technologists in the United States. Upon completion of the curriculum, the student is eligible to apply to sit for the Registry Examination. To become a Registered Technologist in Radiography, R.T. (R) (ARRT), students will have to successfully complete the ARRT examination.

The ARRT examination is offered any day after students graduate. Students will need to make an appointment to take the examination. It is suggested that students take the examination as soon after graduation as possible. There is a course offered the last semester of the program titled “RADS 4332 – Radiologic Technology Seminar” that will familiarize students with the process of applying to take this exam.

One issue addressed for certification eligibility is conviction of a crime, including a felony, a gross misdemeanor, or a misdemeanor with the sole exception of speeding and parking violations. All alcohol and/or drug related violations must be reported. All potential violations must be investigated by the ARRT in order to determine eligibility. Individuals may file a pre-application with the ARRT in order to obtain a ruling of the impact of their eligibility for the examination. This pre-application may be submitted at any time either before or after entry into an accredited program.

**ARRT**

1225 Northland Dr.
St. Paul, MN 55120-1155
Tel: (651) 687-0048
**Texas State Licensure**

All graduates who pass the American Registry of Radiologic Technologists (ARRT) certification examinations are qualified for general Medical Radiologic Technologist (MRT) certification in Texas. Twenty-eight (28) days prior to completion of the MSU program, students may apply for a certificate from the State of Texas, Texas Medical Board. For more information, please visit the Texas Medical Board licensing website.

Other states may have different licensure requirements. If a student is planning to seek employment in a state other than Texas, they may choose not to register for a Texas MRT and may instead apply for licensure in the state of their choosing, if it is required. Faculty can assist students with this process if necessary.

**Professional Societies**

Students are afforded a variety of opportunities to develop professional responsibility while attending classes. The following are examples of these opportunities.

- Students are strongly encouraged to join and attend meetings and other activities of the student professional organization, Radiology Club for MSU Radiologic Science Students.
- Students are encouraged to join the Texas Society of Radiologic Technologists (TxsRT) where they are given the opportunity to attend professional meetings which offer informative lectures given by qualified professionals from Texas and the nation. A student must be a member of the Texas Society to submit papers or exhibits for consideration in Society competitions.
- Students are required (in the second half of the program) to join the American Society of Radiologic Technologists which has many resources just for students. They help students prepare for the future and success in school. Membership includes:
  a) Exam preparation — student members get access to the Radiography Student Exam Assessment Library™ which will help get them set for the radiography exam.
  b) Resources and study tools — the Student Center contains study modules and drill and practice exercises, among many other online resources.
  c) Prepare for the Clinical Environment — access to the Compliance Suite containing 33 modules on key competencies for working in health care.
  d) Career Assistance — access information videos and tips on résumés, job searches, interviews, and more. Plus, you can ask questions and network with other students and R.T.s in your area in the ASRT communities.
  e) Exclusive Discounts — save money on items you need such as textbooks, scrubs, shoes, ARRT exam preparation materials, home, and auto insurance and more.
- Once accepted to the program, students are automatically considered members of the Association of Collegiate Educators in Radiologic Technology (ACERT). See your advisor for specific details.
- MSU Texas is an institutional member of the Texas Society of Allied Health Professionals (TSAHP). Students are encouraged to become members to participate in student competitions and attend the annual conference to network with students and professionals from a variety of allied health professions in an effort to broaden their appreciation for members of the healthcare team they will encounter as a radiologic
technologist.

**Program Honors**

An awards ceremony to recognize and honor graduates is held at the end of the last semester the student is enrolled in the program. All department honors and awards are acknowledged at the award ceremony. Student attendance is mandatory.

The following awards will be presented at the ceremony:

**Outstanding Graduating Student Award**
In order to qualify as a nominee for this award, a graduating baccalaureate student must maintain a 3.5 GPA in all required Radiologic Science courses. In addition the faculty, when voting, will consider each candidate's participation in the classroom along with professional, campus, and committee activities. Final selection will be made by majority ballot of the faculty.

**MSU Highest Scholastic Standing Award**
This award is given to the Radiologic Technology Degree Program graduate who attains the highest grade point average (GPA) in the required Radiologic Science courses. GPA ties will be assessed by the Department Chair and Faculty.

**Clinical Award**
After completion of the second clinical semester, the Clinical Coordinator will evaluate student records for overall clinical performance. The evaluation process will take into consideration the following:

1. Scores of the Professional Development Evaluations from the first two clinical semesters. (Those students with a numerical score of 37 or above per clinical semester will be considered);
2. Nominations by the Clinical Instructor by letter of recommendation;
3. Number of completed competency evaluations from the List of Examinations in the Student Handbook, by the midterm point of the final clinical semester;
4. Students’ adherence to all clinical and university policies and procedures.

A maximum of four students will be presented to the full Radiologic Science faculty for voting and winner selection.

**Anton Zembrod Award of Achievement**
This award is given to one or two graduating senior students for outstanding achievement in the radiology program despite overwhelming personal circumstances. The students can be nominated by the clinical instructors, faculty, or students. Nominations are submitted for selection by MSU Radiologic Science faculty.

**Jackie Miller Memorial Scholarship**
This scholarship is given to one or more junior student(s) beginning clinical rotations. Faculty
choose the scholarship recipient based on work ethic, willingness to help others, and motivation to improve. Recipient must meet minimum course grade requirements.

**Scholarships**

Scholarships are available through outside entities and the University, and students will be made aware of these opportunities through faculty and the MSU Texas Financial Aid Department. Aside from those opportunities, there are also department scholarship opportunities when funds are available, BSRT students may apply for scholarships through the radiology program each academic semester.

The criteria for receiving a department scholarship are as follows:
- Academic standing within the class
- Financial need
- Professional/University extracurricular participation

Information about criteria for scholarships outside the department are dependent on the scholarship and should be assessed on a case-by-case basis.

**Academic Honesty**

Honesty is a necessary trait in all health care professionals. It is assumed by the Program that all students practice honest and ethical behavior. Inability to fulfill this assumption will result in the student being dismissed from the Program. All students enrolled in the Radiologic Science Program at Midwestern State University agree to abide by the Student Honor Creed:

“As an MSU student, I pledge not to lie, cheat, steal, or help anyone else do so.”

As students at MSU, we recognize that any great society must be composed of empowered, responsible citizens. We also recognize universities play an important role in helping mold these responsible citizens. We believe students themselves play an important part in developing responsible citizenship by maintaining a community where integrity and honorable character are the norm, not the exception.

Thus, we the students of Midwestern State University resolve to uphold the honor of the University by affirming our commitment to complete academic honesty. We resolve not only to be honest but also to hold our peers accountable for complete honesty in all University matters.

We consider it dishonest to ask for, give, or receive help in examinations or quizzes, to use any unauthorized material in examinations, or to present, as one’s own, work or ideas which are not entirely one’s own. We recognize that any instructor has the right to expect that all student work is honest, original work. We accept and acknowledge that responsibility for lying, cheating, stealing, plagiarism, and other forms of academic dishonesty fundamentally rests with each individual student.
We expect of ourselves academic integrity, personal professionalism, and ethical character. We appreciate steps taken by University officials to protect the honor of the University against any who would disgrace the MSU student body by violating the spirit of this creed.

**Plagiarism**

Plagiarism is defined by Webster as: Plagiarize \pl-a-je-.riz also j -\ vb -rized; -riz·ing vt [plagiary]: to steal and pass off (the ideas or words of another) as one's own: use (a created production) without crediting the source vi: to commit literary theft: present as new and original an idea or product derived from an existing source - plagia·riz·er n

Below is a list of the most common forms of plagiarism that should be avoided to prevent disciplinary actions.

- Buying a paper from a research service or term paper mill
- Turning in another student’s work
- Turning in a paper a peer has written for the student
- Copying a paper from a source text without proper attribution
- Copying materials from a source text, supplying proper documentation, but leaving out quotation marks
- Paraphrasing materials from source text without appropriate documentation
- Submitting a paper previously submitted to another course
- Copying work that was previously published by the student without citing themself

To prevent possible intentional or unintentional plagiarism, all students are advised to seek assistance from program faculty regarding proper methods of source citation.

Based upon the severity of the findings appropriate disciplinary action will be taken, including, but not limited to, the following: the opportunity for resubmitting with corrections to receive a lower letter grade, failure in the course, academic probation, or expulsion from the program and the University.

The entire University Academic Dishonesty Policy can be found in the [University Student Handbook](https://www.msu.edu/student-handbook/).
CLASSROOM/COURSE POLICIES

Attendance

Absences should be kept to an absolute minimum. Students will be held accountable for all assignments missed due to absence. All arrangements relating to absences will be made with the faculty member who is responsible for the class that was missed. Each instructor establishes his/her own attendance/tardiness policies. It is the student’s responsibility to be familiar with the attendance policy of each course as is stated in the course syllabus.

Vacation

The Radiologic Technology Program makes no provision for any vacation time to students in the program other than semester breaks and the vacation periods scheduled on the university calendar.

See clinical calendar for designated holidays, breaks, and vacation periods.

A student may not shorten the length of their clinical rotation by accumulating compensatory time.

Cell Phones

Cell phones should not be used in class or in the clinical setting unless asked to by the instructor. They should be placed in silent or vibrating mode or turned off. Additionally, retrieving text messages, surfing the Internet, checking social media accounts, or answering messages (verbal or text), should not occur during class time, lab time, or during the clinical experience. Failure to follow this policy will result in a deduction of grade or disciplinary action in accordance with the disciplinary policy at the discretion of the course instructor/clinical coordinator. If students need to communicate to someone outside of the class and it is urgent or may be an emergency situation, please inform the instructor/clinical coordinator so that accommodations to this policy may be made.

Professional Conduct/Behavior

The Radiologic Sciences department and clinical assignment areas should be places where patient confidence is inspired. This can be accomplished when one consistently exhibits a professional attitude. Students are expected to maintain professional behavior at all times, in both the classroom and clinical settings. Students also must always be aware of and comply with all policies and procedures of the Clinical Education Setting, even if those policies differ between sites.

EXAMPLES OF PROFESSIONAL BEHAVIORS:

- Show initiative and a positive attitude towards assigned tasks and constructive criticism
- Be punctual, use good judgment, and work well independently or with a team
• Build interpersonal relationships with peers and patients
• Perform well under pressure and apply effective communication
• Practice quality patient care and treat everyone with equality, dignity, and respect
• Adhere to HIPAA and Rules and Regulations of OSHA
• Follow all clinical affiliates, program, and University policies, rules, and regulations

STUDENTS SHALL NOT:
• Be in possession of or under the influence of controlled substances (drugs, alcohol, etc.), nor engage in their use while on clinical assignments or in didactic course work, nor during any function where identified as an MSU Texas BSRT student
• Engage in immoral conduct
• Chew gum, eat, or drink in clinical areas
• Sleep in class or on clinical assignments
• Engage in theft of any articles from the clinical education setting
• Leave patients unattended while undergoing diagnostic procedures
• Falsify documentation
• Abuse patients, faculty/clinical instructors, other students, technologists, or any other persons physically, verbally, mentally, psychologically, or by cyber methods
• Smoke, use smokeless tobacco, or vape in areas where it is prohibited while on campus or clinical assignments
• Leave the assigned clinical areas unless instructed/ permitted to do so by the clinical coordinator or clinical instructor
• Use inappropriate language or disrespectful commentary in the clinical or didactic setting.
• Receive or make personal phone calls, text messages, etc., except in emergencies
• Repeat radiographs without permission and direct supervision from a supervising technologist, clinical preceptor, or clinical staff.

Failure to comply with these requirements will result in disciplinary action.

Appropriate Use of Social Networking

Social networking websites provide unique opportunities for students to get to know one another, share experiences, and keep in contact. As with any public forum, it is important that users of these sites are aware of the associated risks and act in a manner that does not embarrass the students, the Radiologic Technology Program, and the University. It is also important to ensure no information about any patient encounter is made publicly available, no matter how vague it may be appear to be. Students are expected to be respectful of the views and opinions of others in the program and the University. This rule extends to interactions through discussion boards, email, phone conversations, texting, social media, and all other methods of communication. No foul or inappropriate language will be tolerated.

Students are expected to check emails daily for announcements and other program information. Students are expected to use correct English and grammar when writing papers, sending emails, posting to discussion boards, and all other forms of communication.
Posts to social media sites in regards to MSU Texas, its programs, affiliates, faculty, and/or students should be carefully considered. While you are free to post in your own personal accounts, the content of your posts may negatively impact the University and/or its constituents and may warrant disciplinary action.

Inappropriate electronic content (comments, pictures, etc.) that does not reflect the professional behavior expected of professional students may warrant disciplinary action from the program and/or University.

The Radiologic Technology Program has adopted the following guidelines to assist students in carefully using these sites.

A. Personal Privacy

- Set students’ profiles on social networking sites so that only those individuals whom the students have provided access may see one’s personal information.
- Evaluate photos of students that are posted to these sites and “untag” photos that depict the student in what may be construed as compromising situations.
- Be aware of the security and privacy options available to them at any sites where students post personal information. Keep in mind that privacy settings are not impervious, and information can be shared willingly or unwillingly with others, even with “Friends Only” access.

B. Protection of Patient Information

- Comments made on social networking sites should be considered the same as if they were made in a public place in the clinical setting.
- HIPAA rules apply online, and students may be held criminally liable for comments that violate HIPAA.
- Remember that simply removing the name of a patient does not make them anonymous. Family members or friends of that patient or of other patients the student is caring for may be able to determine to whom the student is referring based on the context.
- No posting of patient records including images from any modality. Doing so is a serious violation of HIPAA subject to criminal action and dismissal from the program.

C. Professionalism

- Use of these sites can have legal ramifications. Comments made regarding care of patients or that portray the student or a colleague in an unprofessional manner can be used in court or other disciplinary proceedings.
- Statements made under students’ profiles are attributable to the student and are treated as if the student verbally made that statement in a public place.
- Use discretion when choosing to log onto a social networking site at school. Keep in mind that the use of these sites during lecture and clinical assignments is prohibited.
- Keep in mind that photographs and statements made are potentially viewable by future employers.
- Students may be subject to disciplinary actions within the University for comments that are either unprofessional or violate patient privacy.
- Remember that each student is representing MSU and the Radiologic Technology Program when logging on to a site and make a comment or post a photograph.

**Course Evaluations**

Evaluation of courses and instructors by the students will be carried out in accordance with university policy. Individual instructors may develop their own, more specific, evaluation forms and utilize these in addition to the university's form.

All students are requested to complete course evaluations for each course in which they are enrolled. Course evaluations will be conducted once a semester. Students are invited to utilize constructive criticism in completing the evaluations so that faculty can identify strengths and weaknesses in the course and plan accordingly for the future.

Faculty do not review the actual evaluation by an individual, but receive a generic summary or an average of the ratings. Faculty do review all of the written comments.

**Withdrawal Procedures**

A student who formally withdraws from a course prior to the last day to withdraw as listed in the university calendar will receive a "W" on his/her official transcript. A student who fails to complete a course or who withdraws after the last day to withdraw will receive an "F" on his/her official transcript. Withdrawal from a Radiologic Science “progression” course will result in dismissal from the program.

**Incompletes/No Grade Reported in the Professional Curriculum**

Typically, incompletes are not allowed in the Radiologic Technology program. Only the program chair is authorized to award an incomplete in conjunction with the course instructor.

**BSRT Program Progression Policy**

All courses with a RADS prefix require a grade of C or better for the course to be successfully completed. Courses are clearly marked as ‘progression’ or ‘non-progression’ on the BSRT degree plan. Progression courses require a grade of 75% to earn a C. Non-progression courses require a grade of 70% to earn a C.

The following rules will govern the students’ progression through the BSRT Program.

- A student who earns a grade below a C or withdraws from any progression course will be dismissed from the program. The student may reapply to the program (see **BSRT Reapplication Procedure** in this handbook).
o The student must submit a letter of intent to reapply no later than seven days prior to the beginning of the next semester. (e.g., should a student be dismissed during a fall semester, the deadline to reapply would be seven days before the beginning of the spring semester).

o The clinical site assignment at the time of dismissal will be voided. Readmission is contingent upon availability of clinical site assignments.

o Non-progression courses may not be taken out of sequence while in the process of reapplying.

- Unsuccessful completion of any two courses, at any time, will result in dismissal from the program without opportunity to reapply. (e.g. failure of the same course after re-admittance; failure of two progression courses in one semester; failure of two non-progression courses at any time).

- Unsuccessful completion of one non-progression course requires repeating the same course or taking a different approved course instead (with approval by the Department Chair).

- Violations of program or University policies (e.g., drug or alcohol use, criminal activity, falsification of records including but not limited to time records or patient records, HIPAA regulations, academic or clinical dishonesty), will result in dismissal from the BSRT program without opportunity to reapply.

- Re-enrollment in an unsuccessfully completed non-progression course is the responsibility of the student. Seats will not be held in courses taken out of sequence and enrollment is on an “as available” basis.

- Students must complete all BSRT course work by Summer IV. Exceptions must be approved by the Department Chair.

- Withdrawal from all courses because of circumstances beyond the student’s control will result in readmission being evaluated on a case-by-case basis and requires the approval of the Department Chair.

BSRT Reapplication Procedure

- Unsuccessful completion of any single progression course requires reapplication to the BSRT program.

- Failure to successfully complete any two RADS courses will disqualify a student from reapplying to the BSRT program.

- Students must schedule meeting with the Department Chair and the Admissions Committee Chair to discuss the following:
  - Changes in behavior that will facilitate successful program completion.
  - Clinical site availability.
  - Other requirements for readmission (degree plan changes)

- Students may only be readmitted to the BSRT program once. Any subsequent dismissal for any reason will prohibit the student from reapplying to the program.
• Successful re-admittance must occur within one year (e.g., if a student was dismissed during or at the end of Fall 2022, they must reenter the program no later than Fall 2023). Any student who does not re-enter the program during this one-year period must apply during the next competitive application process.
• Students may be required to complete the degree plan in effect at the time of readmission.
• Auditing successfully completed courses is recommended once readmitted.
• Students will be required to ‘test out’ of all successfully completed progression courses.
  o ‘Test out’ means to score 75% or higher on a comprehensive exam to determine whether or not information has been retained.
  o Failure to score at least 75% on any comprehensive exam will result in the student being ineligible to re-enter the program.
  o Below is a schedule of which comprehensive exams will need to be taken by semester:

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<th>Core Competency Testing</th>
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<td>Semester Offered</td>
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<td>Spring IV</td>
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Prior to reentry to the program, you must test out of all RADS progression courses. ‘Test out’ means to score 75% or higher on a comprehensive exam from each RADS progression course to determine whether or not information has been retained. Failure to score at least a 75% on a comprehensive exam for ALL progression courses previously passed will result in the student being ineligible to re-enter the MSU Texas BSRT program.
COVID-19 POLICY

1. You are expected to follow all MSU policies regarding COVID-19 precautions including:
   - Wearing a mask at all times in university buildings when this requirement is in effect,
   - Not coming to class if you have any of the symptoms related to COVID-19
   - Reporting on the MSU website any possible exposures or any positive tests to COVID-19

2. As long as you follow all procedures and policies, if you are forced to isolate or quarantine, your professors will help you stay current in your courses with tools such as online or make-up exams and Zoom conferences.

3. **If you fail to follow any procedures or policies and risk the health of any student, staff or faculty member, you are subject to dismissal from the program and possible expulsion from the university.**

**Complaint Policy**

It is the policy of the Midwestern State University Radiologic Technology program to work with students in finding fair and equitable solutions to problems apart from those invoking the grievance procedures.

   Step 1: The student should first take their problem or question to their course faculty instructor(s). Usually the instructor will have direct knowledge about the subject and is best qualified to resolve the situation.

   Step 2: If the student and instructor are unable to find a solution or answer within a reasonable amount of time, the student may then bring the matter to the attention of the Department Chair. The student should feel free to discuss the matter fully.

   Step 3: Should a satisfactory and impartial solution not result from Step 2, the student may pursue the matter through the College Dean.

All students will have the option of appointing a person to accompany them during the complaint procedure. Involved faculty should include the student’s faculty advisor during the complaint procedure or designate another faculty member if the advisor is not available or is directly named in the complaint.

**Grievance Policy**

The purpose of this policy is to establish a process by which students may address general issues that do not fall under formal grievance policies. In an effort to expedite resolution to complaints, students will be requested to first follow the Informal Complaint Process. If resolution does not occur via the Informal Complaint Process, the student may follow the Formal Complaint Process.
Informal Grievance Process

The informal complaint process promotes dialogue and understanding, and provides a framework to expedite resolution. It additionally promotes student development through self-advocacy and open communication. Prior to filing a formal complaint, the student must use the following informal procedure. The Informal Complaint Process is initiated in the office of the Dean of Students.

- The student should discuss with the Dean of Students, or designee, the nature of the complaint in order to determine the most appropriate and expeditious manner of addressing said complaint. The Dean of Students, or designee, and the student determine the faculty or staff member best equipped to address the complaint. The comfort of the student in addressing the complaint with any member of the faculty or staff is considered.
- The Dean of Students, or designee, will assist the student in contacting the faculty or staff best equipped to handle a complaint. The student should discuss the complaint thoroughly with the determined faculty or staff as soon as practical. Both parties should openly discuss the issue and attempt to explore a mutually satisfactory outcome.
- The Dean of Students maintains a log of Informal Complaints registered with his/her office. This log includes the student’s name, contact information, nature of complaint, and complaint referral, if necessary.
- Within five days of logging the complaint, the Dean of Students, or designee, will follow-up with all parties in order to determine the disposition of the complaint. The disposition will be included in the complaint log.
- If the complaint is resolved, the process ends.
- If the complaint is not resolved, the student may initiate a Formal Complaint Process.

Formal Grievance Process

A formal written complaint may be issued if the Informal Complaint Process does not produce resolution. The student is encouraged to contact the Dean of Students office prior to submitting a formal complaint so that they can be well-informed of the formal complaint process. The student must use the following formal complaint procedure:

- The student must submit in writing to the appropriate Dean, Director, Chair, or Supervisor, as determined in consultation with the Dean of Students, an outline of what occurred, any witnesses to the alleged event, and the desired outcome of the complaint.
- The appropriate Dean, Director, Chair, or Supervisor, with guidance from the Dean of Students, interviews all affected parties and witnesses.
- Within seven business days of receiving the written complaint, the Dean, Director, Chair, or Supervisor issues a written decision regarding the complaint.
- If the complaint is resolved the process ends.
- If the complaint is not resolved, the affected student may appeal the decision to the appropriate Vice President. The Dean of Students will assist the student in making this determination. The appeal must be in writing, no later than seven business days after receipt of the final disposition of the formal appeal.
- The Vice President will consider the appeal and issue a decision to the student in writing. A copy of the final resolution will be sent to the student and the Dean of Students.
Scholastic Appeals Committee

It is the responsibility and the prerogative of every faculty member to determine grades in those courses to which he or she is assigned. Except in accordance with stated university policies, no other individuals or group can make these decisions.

The only two bases on which a student can legitimately appeal a course grade and/or suspension from an academic program are:

1. The student has not been evaluated according to the same criteria as his or her classmates, OR
2. An error has been made in grading and/or posting.

The procedure for requesting a course grade change and/or retention in an academic program is as follows:

1. The student must consult with the appropriate instructor, unless the instructor is no longer on staff.
2. If this does not resolve the problem, the student should present a formal written appeal to the dean of the college in which the course was taught. This must be done no later than thirty (30) calendar days from the first day of the next long semester. In cases where the student was terminated from a program, the student should submit his or her petition for reinstatement to the dean of the college in which the program is located. The dean should immediately request a written response to the student’s complaint from the faculty member.
3. Within ten working days from receipt of the appeal, the dean of the college should respond to the student in writing as to his or her disposition of this appeal.
4. Should the appeal not be disposed of by the dean of the college in a manner satisfactory to the appellant, the appeal may be presented to the university’s Academic Appeals Committee. In such cases the following procedures should be followed:

   A. The student should obtain from the Office of the Provost a REQUEST FOR HEARING form and a copy of this policy. The student should fill out the form carefully and submit it, along with all other information pertinent to the student’s position, to the Provost. These materials will constitute the student’s formal written appeal and will then be forwarded by the Provost to the chair of the Academic Appeals Committee.
   B. Upon receipt of the appeal, the chair of the Academic Appeals Committee will at once distribute a copy to each member of the Academic Appeals Committee. Within five working days from receipt of the appeal, each committee member will inform the chair of the Academic Appeals Committee in writing whether or not he or she believes the appeal has established, on its face, at least one of the bases for appeal as noted above.
   C. If a simple majority of committee members finds no basis for the appeal, a hearing before the Academic Appeals Committee shall be denied, and the chair of the committee will at once inform the Provost of this decision in writing. The Provost should then inform the student by letter that the appeal has been denied because it did not meet either of the stated bases for appeal.
D. If, however, a simple majority of the Academic Appeals Committee finds that the appeal appears to have a basis, then the chair will as soon as possible inform the student, the faculty member, and the dean of the college that a legitimate appeal has been filed and of specific procedures to be followed. The chair will also provide copies of the appeal to the faculty member and the dean of the college and by the same letter will inform the faculty member (or in certain situations noted as follows, the dean of the college) that he or she has ten working days in which to respond in writing to the Academic Appeals Committee. Both the student petitioning for a hearing by the Academic Appeals Committee and the faculty member involved have the right to challenge one member of the committee. This is a peremptory challenge, and the chair will choose a replacement from among the alternate members of the committee. The initial correspondence between the chair of the committee and the principals should specify this right and request prompt written response.

In cases where the appeal concerns the performance of a teaching assistant or part-time faculty member, the dean of the college or other full-time faculty member directly responsible will represent the university before the Academic Appeals Committee. A teaching assistant or part-time faculty member may appear before the Academic Appeals Committee. In cases where the faculty member responsible is not available, the dean of the college involved will represent the university.

E. Upon receipt of the faculty member’s written response, the chair will provide copies to all members of the Academic Appeals Committee and to the appellant and will schedule a meeting of the Academic Appeals Committee.

F. The first meetings of the committee should be within ten working days from receipt of the faculty member’s response. At the written request of the student, the committee may consider the case based on the student’s written appeal without an appearance by the student before the committee.

G. The number of meetings necessary to reach a decision will be dictated by each individual case. However, general guidelines are provided:

1. Both parties involved reserve the right to bring information considered pertinent before the committee. This may include, but is not limited to written documents as well as orally presented information from designated individuals. Although these hearings are considered informal, reasonableness and fairness should prevail in this area.

2. No representation of the student by legal counsel, parent, or other representative or of the faculty member by legal counsel or other representative except the dean of the college, where warranted, is entertained by the committee.

3. Testimony from the parties involved should be taken independently, thereby avoiding any open confrontation, which could be detrimental to the proceedings.

4. In its deliberations, the committee should seek to focus only on the issue of the grade appeal or retention in the program in question.

5. Likewise, the committee’s final recommendation should deal only with these issues.
6. Prior to the proceedings, copies of all written or recorded evidence to be considered must be made available to all parties involved (student, instructor, and dean of the college). Additionally, any party specifically mentioned in a written document will be provided access to that document or the portion thereof relating to that party.

H. Once the committee has reached a decision, a letter communicating this decision should be delivered to the Provost within ten working days. In addition, a summary of the proceedings outlining all pertinent points and reasons for the decision should be attached as well as the original petition from the student and the faculty member’s response. Any minority opinions from the committee should also be attached.

I. If the committee has rendered a decision favoring the faculty member, the Provost should communicate this by letter to the appellant with a copy to the faculty member. If the decision rendered recommends a grade change, the Provost should write a letter to the faculty member with a copy to the dean of the college requesting the faculty member’s intended action.

J. Should the faculty member decline to change the grade, the Provost may, based on the Academic Appeals Committee’s recommendation, change the grade by administrative action to the specific grade recommended by the committee. If there is an administrative grade change, the student’s transcript will reflect this. In addition, on request from the Provost, the committee may reconsider its findings and recommendations. However, once the committee’s decision has been accepted by the Provost along with the other documents specified above, the committee’s work will be considered complete.
DISCIPLINARY ACTION

Any infraction of the policies of the Midwestern State University, the Radiologic Technology Program and/or any infraction of the policies and regulations of the hospital in which the students are assigned will warrant disciplinary action. The type of action taken will depend upon the seriousness of the infraction.

The BSRT Discipline Committee will convene to discuss any infraction listed above except those involving grades. A student in the clinical or academic environment may be suspended until such time as the committee can meet and investigate the infraction. The committee will meet within 48-72 hours of the suspension depending on what day of the week it occurred. The Clinical Coordinator will be able to present the evidence of the infraction, and the student will be allowed to present their information. Neither the Clinical Coordinator nor the student will be present for the Discipline Committee Meeting. The Committee will consist of the Department Chair, a faculty member not teaching in the BSRT program, and two ad-hoc faculty members. A representative from the Disciplinary Committee and the Department Chair may meet with the student, the parents (providing student has signed a FERPA waiver), and/or any other involved parties.

Disciplinary action will result if a student is cheating in the classroom or lab during tests, cheating with actual clinical attendance, or inappropriate behavior (i.e., drugs, evidence of alcohol, stealing, excessive tardiness, poor attendance, and non-compliance with policies). Incidents of policy and/or procedure violations can also be subject to disciplinary action even if the occurrence is off campus (for example, the inappropriate use of social media such as Twitter, Facebook, Snap Chat, etc. or drunk driving, arrests, coming to class intoxicated, etc.). Discussing an incident on social media may also be subject to disciplinary action. See list below under Dismissal.

The MSU Texas Radiologic Science faculty reserves the right to recommend dismissal of a BSRT student when health and/or personal conduct requires such action. If the student challenges the committee’s decision of being dismissed from the program, they may challenge the due process at the College level. Refer to Grievance Policy.

If the problem should develop within the academic setting, the issue will be reported to the program chair by either a student or faculty member. Issues such as physical hands-on fighting, pushing, verbal abuse, blatant disregard of policies and procedures, and ethical violations may result in dismissal from the program.

If the problem should develop within the assigned hospital or clinical affiliate, they will notify the clinical coordinator and program chair. This notice shall define the problem and any circumstances surrounding the infraction.

Depending on the severity of the infraction, the student may be dismissed immediately without previous warnings.
Disciplinary action in the academic or clinical setting shall fall into one of the following categories:

**First Warning**

This is *verbal* notification to a student that they have violated a policy of the student handbook. If a repeated violation occurs, then a second written warning will result. Documentation of the verbal warning will be placed in the student’s clinical folder.

**Second Warning**

This is a *written* notification to a student that they have violated a policy of the student handbook. This warning does NOT have to be for the same type of violation that warranted the First Warning. Written documentation is prepared and entered into the student’s academic file with signatures of all parties involved.

*Verbal and written warnings are cumulative from one semester to another. Any further policy violations of any kind occurring after a second warning has been given to the student may result in dismissal from the program.*

**Dismissal**

The student will be dismissed from the MSU Radiologic Technology Program for infractions of program policies. Dismissal may be permanent or of a defined period as indicated by meeting with the student and in a letter to the student.

Dismissal from the BSRT program may occur for reasons including but not limited to:
- Repetitive performance of unsafe behaviors during clinical experiences.
- Performance of unethical or illegal behaviors during clinical experiences.
- Failure to comply with clinical agency policies and regulations.
- A deliberate attempt to cover up any error or negligent performance during clinical experiences.
- Cheating or plagiarism (see MSU Texas’ Academic Dishonesty Policy & Procedures in the Student Handbook)
- Violation of the MSU Texas Code of Student Conduct.
- A positive report on any random drug screen.
- Failure to follow the guidelines of the BSRT program’s Professional Conduct/Behavior policy
- Being asked not to return by ANY of the assigned clinical settings where clinical experience is being achieved.
- Committing a breach in the BSRT program policy on the conduct of social media usage.
• Committing a breach of patient or agency confidentiality by inappropriate management of information in any form.
The program has polices/procedures for appropriate laboratory use for energized labs.

Policies and procedures regarding the energized laboratory on campus are located in the Midwestern State University Radiologic Sciences Laboratory Safety Guidelines. Students are instructed in the energized lab prior to any clinical experiences. These instructions include how to reduce patient exposure through positioning and patient care instructions. Students are required to sign an agreement thus documenting that they have received and read the handout on safety policies and that fully understand them and will comply with everything they have read. The signed agreement for each class is kept on file in the X-Ray Compliance Manual available from the Radiation Safety Officer.

Concealed Carry in Laboratories

Participation in Radiologic Sciences laboratory classes often require students to wear “scrubs” which are thin garments which may make concealed carry of a firearm difficult if not impossible. In addition, students are often required to palpate other students while simulating medical examinations or procedures. This required physical contact may also make concealment of a firearm difficult. While concealed carry is not prohibited in any Radiologic Sciences laboratory, students are reminded that intentional display of a firearm may result in criminal and/or civil penalties and unintentional display of a firearm is a violation of university policies and may result in disciplinary actions up to and including expulsion from the program and university. Students should factor the above in their decision as to whether or not to conceal carry in Radiologic Sciences laboratories.

Supervision in the Laboratory Setting

Students will not perform any procedures in the laboratory without supervision, either direct or indirect. Direct supervision takes place until the designated instructor of the course or laboratory activity determines the student is competent to perform under indirect supervision. Indirect supervision requires an instructor to be within speaking distance.
WORKPLACE HAZARDS

Radiation Monitoring (On Campus)

It is the goal of this program to keep radiation exposure to students as low as reasonably achievable. NCRP Report # 102 will be used to establish maximum dose values.

On Campus Semesters

a. The students meet with Radiation Safety Officer (RSO) during the first lab for the Fall III semester to go over the Operating and Safety Procedures. The students sign the equipment operator statement which documents they have read the procedures and agree to follow them. The signed agreement for each class is kept on file in the X-Ray Compliance Manual available from the RSO.

b. Radiation monitoring badges will be obtained for each starting class in sufficient time for them to be available the first time students use the energized laboratory.

c. Radiation monitoring badges are to be worn any time students are working in the energized lab on campus or at the clinical affiliate to which they are assigned.

d. Students will wear the radiation monitoring badge at collar level in front, outside of the protective apron. Also, the radiation monitoring badges will be worn during each laboratory session utilizing the energized laboratory, regardless of whether or not exposures are being made.

e. Radiation monitoring badge should not be allowed to get wet.

f. Radiation monitoring badges will be returned to the storage rack when the laboratory session is completed. Under no circumstances should the radiation monitoring badge be taken off the second floor of Centennial Hall. It is permissible for students to keep radiation monitoring badge on while on break from lab as long as the student remains on the second floor.

g. Quarterly radiation monitoring badge reports will be reviewed by the MSU Radiation Safety Officer and students are to initial report indicating knowledge of exposure. The reports will be kept on file by the MSU Radiation Safety Officer and will be available for students' inspection at any time.

h. The MSU Radiation Safety Officer will conduct an investigation if a student's exposure for a 30-day period is over a negligible reading (0.01 mSv) or over 0.024 mSv in a 90-day period. Results of the investigation will be documented and given to the Department Chair.

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 about workplace hazards included but not limited to the following:
- Standard precautions
- Communicable disease awareness
- Fire safety
- Hazardous materials (chemical, electrical, bomb threats, etc.)
- Blood-borne pathogens

A “Notice to Employees” from the Texas Department of Health is posted in the radiography lab area. This document provides employees with specific information on the hazards of chemicals to which employees may be exposed. A list of hazardous chemicals with the material safety data sheets (MSDS) is kept in the lab and is available to employees and students upon request.

**Pregnancy Policy**

The Pregnancy Policy is consistent with applicable federal regulations and state laws. Every effort will be made to protect the well-being and privacy of the student. All students are informed of the risks of radiation exposure during pregnancy and have the option of declaring their pregnancies or not. The Pregnancy Declaration form is located at the end of this document. A pregnant student may voluntarily notify the MSU Radiation Safety Officer and Department Chair, *in writing*. A form is available from the RSO for pregnancy declaration. After declaring pregnancy, students have the option to continue in the program without any modifications or they may select from the following options:

- During the first two semesters, the MSU Radiation Safety Officer and the Laboratory Instructors will be sure the student is monitored during laboratory classes.
- During the final three semesters the MSU Radiation Safety Officer, the Clinical Coordinator, and the Clinical Instructors will be sure the student is monitored during clinical hours.
- Pregnant students will be provided an additional personal monitor to be worn at waist level under any lead apron (when applicable) and be identified as the fetal dose monitor.
- If the fetal dose monitor is over a negligible reading (0.01 mSv) in a 30 day period, the student will be removed from clinical assignments in radiation areas.
- If the student exceeds the maximum permissible dose, the student will be withdrawn from all clinical courses for the remainder of the pregnancy.
- A student may rescind a pregnancy notification in writing at any point for any reason without explaining the reason.
- Attendance, absence, and make-up policies will be equally enforced.

**Exposure of Insulin Pumps to Magnetic Fields and Radiation**

Students with insulin pumps must take the pump off when in the room during fluoroscopic or radiographic procedures, MRI scans, CT scans, or diathermy treatments. These procedures can make the insulin pump, sensor, transmitter, meter, and remoted control nonfunctional or damage the part of the pump that regulates insulin delivery, possibly resulting in over delivery and severe hypoglycemia. If your pump is inadvertently exposed to a magnetic field, discontinue use and contact the manufacturer of the pump immediately. Do not use pump cases that have a magnetic
clasp. Exposure to a magnetic clasp may interfere with the motor inside the pump.

**Magnetic Resonance Imaging (MRI) Screening**

Prior to entering the clinical environment, the program designates a time period for instruction on MRI safety guidelines and/or provides an instructional video.

Before any student is allowed to perform a rotation in MRI, the MRI form must be completed and reviewed by the Clinical Coordinator, Clinical Instructor, and the MRI supervisor. If a student is contraindicated to perform a rotation in the MRI area, the Clinical Coordinator will adjust the student’s clinical requirements to ensure the safety of the student.

**Venipuncture**

Venipuncture is a procedure commonly performed at the clinical education setting. Venipuncture training occurs in the RADS 3243 Patient Care class. This practice is required as an ARRT clinical competency requirement. Students in the professional curriculum may perform venipuncture if approved by the clinical site after appropriate training.

As of Spring 2023, all angiocath training and testing will be performed in the Simulation Center.
Midwestern State University
BSRT – Entry Level Program
Part II: Clinical Handbook
2022
(Graduates of 2024)
THE CLINICAL ENVIRONMENT

Introduction

The student’s clinical experience will be different from the academic environment in which he/she is accustomed. The success of the student to function and learn in the clinical setting depends, in part, on how he/she approaches and deals with the differences.

Patient care is of utmost importance in the radiology department. The patient’s welfare is considered first above all other considerations. The first priority of patient care is consistent with the goals and needs of clinical education. Occasionally, this reality dictates the scheduling and conducting of educational activities be flexible.

Compared to the learning activities conducted on campus in the classroom setting, the learning activities in the clinical setting are frequently less structured. The student must take a more active and responsible role for integrating the academic preparation with the individual examinations being observed and/or performed.

Generally, in the classroom setting, students work independently as they pursue their academic goals. In the clinical setting, the student must pursue his/her educational goals within the overall goals of the department to deliver quality patient services efficiently and effectively. Rather than function independently, the student becomes a part of a health care delivery team and must function cooperatively to achieve educational and departmental goals.

Another difference between the academic environment and the clinical environment is the student’s performance of an examination to produce a diagnostic image. When students produce diagnostic images of acrylic phantoms in the on-campus laboratory, the attention is narrowly focused on the mechanics of producing the diagnostic image. Since live patients are not exposed to produce images in on-campus laboratory learning, there was no need to be concerned or cautious about the welfare of the "patient.” In the clinical situation, students must develop the ability to expand their awareness of the patient as a person as well as the mechanics of producing diagnostic images of optimum quality.

Clinical skills can be developed by following a systematic step-by-step approach. The following sequence of steps will generally produce outstanding technologists:

- Academic Preparation
- Observation
- Assisting and Performing Examinations under the Supervision of a Qualified Radiologic Technologist
- Competency Evaluation
- Performance Maintenance
**Academic Preparation**
The student is considered academically prepared by successfully completing didactic courses in imaging physics, imaging principles and techniques, anatomy and physiology, diagnostic imaging positioning, etc. before entry into the clinical environment.

**Observation**
The student’s initial activities in the clinical environment will consist primarily of observing qualified radiologic technologists at work.

**Assisting and Performing Examinations under the Supervision of a Qualified Radiologic Technologist**
Once the student is comfortable in the diagnostic imaging exposure room, he/she will be given an opportunity to assist and perform diagnostic imaging procedures under the supervision of a qualified radiologic technologist. Students will not perform diagnostic imaging examinations without direct supervision until competency on the selected examination is obtained.

**Competency Evaluation**
When the student believes he/she is able to perform a particular examination by himself/herself, the student will ask the Clinical Preceptor or a qualified radiologic technologist to perform a competency evaluation for the examination when the next patient for the selected examination arrives. The student’s performance will be documented on a Competency Evaluation Form. If competency is achieved on the selected examination, the student will be marked as competent on the Competency Form and the list of competency examinations. If competency is not achieved, the examination must be repeated until competency is achieved. Additionally, all diagnostic images submitted as completed competencies will be visually evaluated by the Clinical Coordinator or Assistant Clinical Coordinator. Final approval of competency evaluations will be by the Clinical Coordinator or Assistant Clinical Coordinator, regardless of prior approval by Clinical Preceptor or designate.

**Performance Maintenance**
Once the student passes the Competency Evaluation for a particular examination, the student will need additional practice to maintain and perfect their skill. The student may now perform the examinations which they have shown competency with indirect supervision (a qualified radiologic technologist must be in an adjacent room or area but not necessarily in the exposure room). However, if a repeat examination should become necessary for factors over which the student had control, a qualified radiologic technologist must be present to provide direct supervision. The student must have the qualified radiologic technologist who was present for the repeat performance of the examination, initial their logbook, thus documenting the technologist was present for the repeat performance.

When the student is assigned or rotates to another room, the student should have an updated competency list available to show qualified technologists which exams must be performed with direct supervision.
CLINICAL POLICIES AND PROCEDURES

In an effort to promote excellence in the professional and ethical conduct of students and to provide the highest quality of medical care for patients, the following policies are currently in effect for students in the Midwestern State University (MSU) Bachelor of Science in Radiologic Technology (BSRT) program.

**Before Placement at Clinical Site**

**BACKGROUND INVESTIGATION POLICY**

The BSRT program is committed to ensuring public and professional trust and providing safe patient care. In order to meet this goal, background checks, fingerprinting, and drug screening of students is required. Many of our clinical education settings require additional criminal background investigations of all employees and students. To comply with these requirements, accepted students will be asked to submit to these tests to ascertain the student’s suitability for clinical rotations.

*Criminal Background Check*

All students will be required to submit to a criminal background check before clinical rotation. The background check will include, but is not limited to, a review of prior criminal records, review of nationwide sexual offender records, review of nationwide healthcare fraud and abuse records, review of the nationwide Patriot Act records, review of residency history, and Social Security verification. Students with any felonies on the criminal record will be ineligible for admission into the MSU BSRT Program. The submission of any false information to MSU BSRT program shall be cause for immediate dismissal. Students are responsible for the payment of the criminal background check. *The criminal background check includes criminal records for counties in the state of Texas; additional counties outside of Texas will be searched for an additional fee.*

*Drug Screening Test Policy*

Students are required to submit for 10 panel urine drug screening (cocaine, amphetamines, barbiturates, benzodiazepines, marijuana, opiates, phencyclidine, propoxyphene, methadone, and synthetic opiates) before clinical rotation and at any time in the program. The student will be responsible for payment of the screening test. If the student tests positive for any illegal substance, he/she will be withdrawn from the program immediately. Non-negative results will be processed further and may require additional testing. Additional drug screening will be at the student’s expense. Failure to pass drug screening will result in immediate dismissal from the program. The submission of any false information to MSU BSRT program shall be cause for immediate dismissal.

This information will remain confidential and will only be viewed by the Radiologic Science Program Chair or designee. Any criminal conviction which is found during the background investigation that may deem a student unsuitable for clinical rotations will be considered on a case by case basis. Additional information regarding the conviction may be required in order to
make an informed decision. The background investigation will be made available to clinical education settings that require such. Individuals at the Clinical Education Setting, who are authorized to make decisions regarding an individual’s eligibility to attend a setting, will inform the Program Chair if a student will be allowed to attend clinical at that setting. If an offense appears on the criminal background check that disqualifies the student from attending clinical experiences, the clinical site(s) will notify the program regarding any students’ disqualification for attending clinical at that site. The student will receive written notification. Students who receive notification of ineligibility and who wish to dispute the results of the background investigation may follow the College of Health Sciences and Human Services Grievance Procedure.

If a student has been convicted of a crime, including a felony, or a misdemeanor with the sole exception of speeding and parking violations, these must be reported to the American Registry of Radiologic Technologists (ARRT). All alcohol and/or drug related violations must be reported. All potential violations must be investigated by the ARRT in order to determine eligibility. Individuals must file a pre-application with the ARRT in order to obtain a ruling of the impact of their eligibility for the examination. This pre-application must be submitted before entry into the program. For pre-application contact the ARRT at:

ARRT  
1225 Northland Dr.  
St. Paul, MN 55120-1155  
Tel: (651) 687-0048

*Cardiopulmonary Resuscitation Certification (CPR)*

A course in CPR must be completed before the student enters the clinical phase of the program and must be current through the end of clinical. When the student has completed the CPR course, a copy of the card is to be submitted to Undergraduate Program Secretary to be kept in the student's clinical file.

*Student Malpractice Coverage*

BSRT students must carry professional liability insurance during the clinical education phase of the training. These fees are to be paid online at the MSU BSRT webpage through the Program Fees link. The liability insurance is effective on the day clinical education begins and ends on the day the BSRT program is completed. The coverage is only valid during the students scheduled clinical hours. Cost of the insurance is approximately $18.00 per academic year or any portion of the academic year. Students will be asked to pay for this insurance the semester before the start of clinical education.

*Health Insurance*

Students are responsible for any personal injury that occurs at the university or hospital. Purchase of Health/Accident Insurance is required. A copy of student insurance information is to be submitted to the Undergraduate Program Secretary and kept in the student’s file. It is
students’ responsibility to keep this information current.

Any MSU student may purchase health insurance through the university. Students can contact Vinson Health Center for additional information.

**Immunization Requirements**

Each student entering the clinical environment is required to have the following immunizations according to Texas state law:

- 2 doses of live MMR vaccine (measles, mumps, rubella)
- TB Screening
- 2 doses of Varicella (chicken pox) or proof of illness
- Td/Tdap - one dose of Tdap and TD boosters every 10 years thereafter
- Hepatitis B series
- Seasonal Flu Immunization (September - March)

All required immunizations must be completed prior to the first day of clinical. If a student has NOT had the Hepatitis B series, the first shot (in a series of 3) must be taken by October 1st. Titers must be completed by October 1st in case another Hepatitis B series must be given. TB Screening must be completed by March 1st of the spring semester before clinical. Students who have not completed their immunizations will NOT be allowed to participate in clinical education until cleared by the MSU Vinson Health Center. The Vinson Health Center requires all shot records be forwarded to them, and the Vinson Health Center may provide immunizations on an appointment basis only. Please refer to the [Immunization and Infectious Policy for Higher Education Students in Health Care Related Fields](#) for detailed information.

Students who are unwilling or unable to comply with the immunization policy must understand that some clinical agencies prohibit the presence of unvaccinated students at their facility.

Clinical site immunization requirements supersede MSU Texas immunization requirements. While MSU Texas BSRT program will make reasonable efforts to find appropriate alternate clinical rotations for these students, there is always a risk the student will not be permitted to complete clinical rotations which are a required part of the curriculum.

**Clinical Assignments**

Because of the locations of the clinical education centers and all centers are full-service medical facilities, students are assigned to only one major affiliate institution for the duration of the clinical education. Students are rotated to other affiliates as needed to satisfy learning objectives.

Clinical site assignment will be determined by:

- Recommendations from faculty
  1. Performance
  2. Integrity
  3. Attitude
  4. Ability to work as a team member with faculty and students
• Site availability
• GPA ranking at the end of the third professional semester (professional courses and Anatomy & Physiology I & II courses)
• MSU cumulative GPA
  o Used as tie-breaker only
• Hometown
• Date of submitted application
  o Used as tie-breaker only
• On campus athlete, band, or international student working on campus (must be approved by Clinical Coordinator)
• Student preference for clinical sites

The students will declare clinical site preferences at the end of the fall semester, and the program will announce assignments at the beginning of the spring semester. Opportunities to transfer, if available, will be made known approximately 60 days before clinical education begins. Clinical sites are located in a wide geographic area in addition to Wichita Falls. Students are responsible for their own transportation, housing, and living expenses during their off-campus clinical courses. Additionally, students must also arrange to have Internet access while enrolled in online courses off-campus.

Situations may arise during the clinical experience that may necessitate a transfer to another clinical site. The BSRT program will make every effort to make the transfer as easy as possible. Any expenses incurred because of this transfer will be the sole responsibility of the student.

Obtaining Clinical Competencies

During the course of the third semester of clinical education, the student will be afforded the opportunity to rotate to a clinical site of higher level of patient care to obtain competencies which are not normally observed at the currently assigned site. Any additional expense of this change will be incurred by the student.

Transportation Policy

It is the student's responsibility to provide his/her own travel to and from class and clinical education sites. Neither the college nor the clinical sites assume any responsibility or liability for student transportation needs.

During Clinical Rotation

Responsibilities of Students in the Hospital

The primary function of the hospital is patient care. Under no circumstances should the presence of students reduce the quality of patient care. It is the student’s responsibility to:

• Follow the administrative policies established by the radiology department and the hospital.
• Students must report to the assigned work center at least 10 minutes prior to the scheduled time clinical time.
• Notify the Clinical Preceptor and Clinical Coordinator no later than 30 minutes before the student’s scheduled time in case of illness or absences which are beyond the student’s control.
• Wear radiation monitoring badge as outlined in the handbook.
• Check with radiologic technologists and/or Clinical Preceptor before leaving the assigned work center.
• Follow the directions provided by the radiologic technologists and/or Clinical Preceptor
• Ask for advice when indicated. DO NOT experiment with patients. Be industrious and ask questions.
• Do not discuss clinical information with patients, relatives, or anyone outside the radiology department.

Professional Behavior Policy

As a representative of the MSU BSRT program, the assigned clinical institution, and the entire profession of the radiologic sciences, it is of paramount importance the student maintains the highest standards of professionalism.

The students are expected to conduct themselves on a professional level. Professional conduct is reflected in attitude and in communication with physicians, supervisors, co-workers, and patients.

Professional conduct includes, but is not limited to:

Commitment to Excellence

• refraining from performing any professional service which requires competence that one does not possess or which is prohibited by law unless the situation morally dictates otherwise;
• striving to exceed expectations at all times;
• committing to life-long learning by taking responsibility for one’s own learning and accurately reflecting on the adequacy of one’s knowledge, skill development and personal barriers to accomplishing learning and growth;
• taking responsibility for learning in group settings by being present, prepared and engaged;
• striving for mastery learning appropriate for one’s level of training;
• reflecting with colleagues on the success of group work.

Honesty and Integrity

• identifying truthfully and accurately one’s credentials and professional status
• communicating appropriately in an honest and timely manner;
• accurately representing actions and events;
• avoiding cheating, plagiarism, misrepresentation of the truth;
• reflecting on one’s personal reaction to encounters with others and accepts responsibility for personal actions;
• recognizing, appropriately disclosing and managing conflicts of interest; is forthcoming with information; does not withhold and/or use information for power;
• admitting mistakes.

Compassion
• recognizing and responding to the fears, suffering and hopes of patients and their families;
• assisting colleagues in dealing with the challenges of professional work.

Respect for Others
• respecting confidentiality of patients;
• recognizing and respecting personal and sexual boundaries;
• avoiding bias (e.g. gender, race, age, sexual orientation) in interactions with others; articulate and embrace the many positive aspects of difference among people and demonstrating awareness of how such differences affect personal interactions;
• demonstrating a commitment to resolving conflicts in a collegial manner;
• showing sensitivity and respect for the needs, feelings, ideas, and wishes of others in clinical and education settings;
• demonstrating humility in interactions with others;
• recognizing that appropriate dress and appearance demonstrate respect for others and for the profession.

Professional Responsibility
• is present and punctual for scheduled activities;
• taking responsibility to notify others for unavoidable absence or tardiness;
• coping with the challenges, conflicts, and ambiguities inherent in professional work;
• identifying and appropriately dealing with problematic behaviors of oneself and colleagues;
• being cognizant of and adhering to the chain of command;
• appropriately displacing clinical responsibilities when personal needs demand it;
• adhering to established professional codes of conduct;
• practicing according to accepted standards of care;
• identifying ethical issues in professional situations and acts in an ethical manner;
• regarding as strictly confidential, all information concerning each patient and refraining from discussing this information with any unauthorized individual, including the patient.

Social Responsibility
• understanding and actively addressing the multiple social factors that threaten the
health of patients;
• actively working for appropriate social change to improve the health of populations;
• modeling healthy behaviors.

Altruism
• placing the interests of others above self-interest;
• being able to give up some personal needs to meet needs of patients.

Examples of unprofessional behaviors include, but are not limited to:
• gossip
• disclosure of medical information with patients or relatives
• discussions pertaining to clinical in public areas (e.g. elevators, cafeterias)
• discussions of inappropriate subject matter within hearing of patients, visitors, etc.
• consumption of food in patient areas (including gum)
• excessive noise
• inappropriate jokes
• loitering

In addition, the student will adhere to the following policies while at the clinical facility:

1. Smoking, smokeless tobacco, vaping, eating, drinking, or chewing gum is permitted only in the lounge or designated areas.
2. Students will not leave their assigned area at any time without permission.
3. Students will not remain in the radiology department after clinical hours except when on duty.
4. When not actively engaged in diagnostic imaging work or other duties, students will make wise use of time to study or update Trajecsys logs and will not congregate in offices, halls, or other rooms.
5. Personal telephone calls are not encouraged. No one will be called from the working area except in an emergency.
6. Patients will not be left unattended.
7. Electronic devices, such as cell phones, are not permitted in patient care areas.
8. Students will wear uniforms **ONLY** during assigned clinical hours or for required campus activities.

Students are responsible for their own actions and must not engage in any activities considered unprofessional or non-conducive to proper patient care. Failure of a student to maintain a professional conduct may result in reduction of clinical grade, course failure, and possible expulsion from the program.

**If a student encounters a problem in the clinical environment, contact the Clinical Preceptor immediately.**
HIPAA

All patient records are confidential in nature. Requests for information concerning a patient should be referred to the supervising technologist or the clinical preceptor. Students are expected to maintain confidentiality in a professional manner.

In accordance with 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, and refraining from copying any part of the medical record for use outside of the health care facility. Medical images with all protected health information (PHI) removed may be used for MSU coursework, if allowed by the clinical affiliate.

Students can learn more about HIPAA through this online presentation.

Appropriate Use of Social Networking Sites

Social networking websites provide unique opportunities for students to get to know one another, share experiences, and keep in contact. As with any public forum, it is important that users of these sites are aware of the associated risks and act in a manner that does not embarrass the students, the Radiologic Technology Program, and the University. It is also important to ensure patient information is not made publicly available. Students are expected to be respectful of the views and opinions of others in the program and the University. This rule extends to interactions through discussion boards, email, phone conversations, texting, social media, and all other methods of communication. No foul or inappropriate language will be tolerated.

Students are expected to check emails daily for announcements and other program information. Students are expected to use correct English and grammar when writing papers, sending emails, posting to discussion boards, and all other forms of communication.

Posts to social media sites in regards to MSU Texas, its programs, affiliates, faculty, and/or students should be carefully considered. While you are free to post in your own personal accounts, the content of your posts may negatively impact the University and/or its constituents and may warrant disciplinary action.

Inappropriate electronic content (comments, pictures, etc.) that does not reflect the professional behavior expected of professional students may warrant disciplinary action from the program and/or University.

The Radiologic Technology Program has adopted the following guidelines to assist students in carefully using these sites.

A. Personal Privacy
• Set students’ profiles on social networking sites so that only those individuals whom the students have provided access may see one’s personal information.
• Evaluate photos of students that are posted to these sites and “untagging” photos that depict the student in what may be construed as compromising situations.
• Be aware of the security and privacy options available to them at any sites where students’ post personal information. Keep in mind that privacy settings are not impervious, and information can be shared willingly or unwillingly with others, even with “Friends Only” access.

B. Protection of Patient Information

• Comments made on social networking sites should be considered the same as if they were made in a public place in the clinical setting.
• HIPAA rules apply online, and students may be held criminally liable for comments that violate HIPAA.
• Remember that simply removing the name of a patient does not make them anonymous. Family members or friends of that patient or of other patients the student is caring for may be able to determine to whom the student is referring based on the context.
• No posting of patient records including images from any modality. Doing so is a serious violation of HIPAA, subject to criminal action and dismissal from the program.

C. Professionalism

• Use of these sites can have legal ramifications. Comments made regarding care of patients or that portray the student or a colleague in an unprofessional manner can be used in court or other disciplinary proceedings.
• Statements made under students’ profile are attributable to the student and are treated as if the student verbally made that statement in a public place.
• Use discretion when choosing to log onto a social networking site at school. Keep in mind that the use of these sites during lecture and clinical assignments is prohibited.
• Keep in mind that photographs and statements made are potentially viewable by future employers.
• Students may be subject to disciplinary actions within the University for comments that are either unprofessional or violate patient privacy.
• Each student is representing MSU and the BSRT Program when logging on to a site and making a comment or posting a photograph.

Radiation Monitoring

It is the goal of this program to keep radiation exposure to students as low as reasonably achievable. Each clinical site RSO maintains the exposure reports and students are required to review their reading quarterly. Exposure review by the students will be verified by the Clinical Preceptor and reviewed and documented by the student on the 2nd & 3rd semester professional development evaluation.
NCRP Report #102 will be used to establish maximum dose values.

1. At least one month before students start their clinical education, the Clinical Coordinator will provide each Clinical Preceptor with a list of students who will start clinical. The clinical preceptor will ensure a radiation monitoring badge will be available for each student on the first day of clinical.

2. Students will wear their radiation monitoring badge when at clinical and will follow the storage policy and other related policies of the clinical affiliate (radiation monitoring badge should remain at affiliate).

3. The MSU Radiation Safety Officer will conduct an investigation if a student's exposure for a 30-day period is over a negligible reading (0.01 mSv) or over 0.024 mSv in a 90-day period. Results of the investigation will be documented and given to the Department Chair.

Additional rules to be followed concerning radiation monitoring badge use are:

1. Radiation monitoring badges are to be worn any time students are working in the energized lab on campus or at the clinical affiliate to which they are assigned.
2. Radiation monitoring badges should not be allowed to get wet.

**Pregnancy Policy**

The Pregnancy Policy is consistent with applicable federal regulations and state laws. Every effort will be made to protect the well-being and privacy of the student. All students are informed of the risks of radiation exposure during pregnancy and have the option of declaring or not declaring their pregnancies. A pregnant student may voluntarily notify the MSU Radiation Safety Officer and Department Chair. A student may rescind a pregnancy notification in writing at any point for any reason without explaining the reason. After declaring pregnancy, students have the option to continue in the program without any modifications or they may select from the following options:

1. During the first two semesters, the MSU Radiation Safety Officer and the Laboratory Instructors will be sure the student is monitored during laboratory classes.

2. During the final three semesters, the MSU Radiation Safety Officer, the Clinical Coordinator, and the Clinical Preceptors will be sure the student is monitored during clinical hours.

3. Pregnant students will be provided an additional personal radiation monitoring badge to be worn at waist level under any lead apron (when applicable) and be identified as the fetal dose monitor.

4. The student radiation exposure will be continuously monitored. If the fetal dose monitor is over a negligible reading (0.01 mSv) in a 30 day period, the student will be removed
from clinical assignments in radiation areas.

5. If the student exceeds the maximum permissible dose, the student will be withdrawn from all clinical courses for the remainder of the pregnancy.

6. Attendance, absence, and make-up policies will be equally enforced.

Workplace Hazards

The Occupational Safety and Health Administration (OSHA) is an agency of the United States Department of Labor 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 about workplace hazards including but not limited to the following:

- Universal precautions
- Communicable disease awareness
- Fire safety
- Hazardous materials (chemical, electrical, bomb threats, etc.)
- Blood-borne pathogens

Contagious Diseases Policy

Students entering the BSRT Program must be aware, like all healthcare workers, they will be exposed to various contagious diseases during their training and career. Precautions to be taken are outlined in the MSU Patient Care course. Additional information regarding contagious diseases is provided by each clinical facility. The students are encouraged to use any protective devices available.

If the student should be the carrier of a contagious disease, the student must contact the Clinical Coordinator immediately. A temporary suspension of training may be necessary for legal reasons and for the protection of patients.

Most contact will be with patients who have not yet been diagnosed with a contagious disease and therefore, the precautionary procedure of wearing gloves is of paramount importance. Students will use strict isolation techniques if the patient has been diagnosed as having a contagious disease. **Students may not refuse to perform radiologic services for patients diagnosed or suspected of having a contagious disease.**

Student must use gloves and other protective or precautionary measures (consistent with institutional policies) for all procedures in which there may be contact with body fluids (urine, blood, excretion, saliva, etc.).

The following disciplinary actions will be administered for noncompliance to this policy:
1. First offense - retraining on universal precautions
2. Second offense - one day suspension from clinical
3. Third offense - termination from the program

**Professional Appearance Policy**

Hospitals and their employees are expected to set examples of cleanliness and appearance. The "Dress Code" of the clinical site will set minimum standards. Students are expected to meet or exceed these standards.

Items listed in the dress code generally include:

1. Clean and pressed uniform.
2. Clean and polished shoes.
3. Clean hands and fingernails. Artificial nails (acrylic, gel, dipped, etc.) are not allowed. (If fingernail polish is worn, it must be in light natural colors. No bright or unusual colors such as red, black, orange, blue, etc.)
4. Hair must be kept neat and clean and, if long, must be pulled up off the collar. No bright or unnatural hair colors. No extreme hairstyles (definition of extreme shall be determined by the clinical site).
5. A mustache or beard is permitted so long as it is kept neatly trimmed.
6. Excessive perfume and cosmetics are not permitted as determined by the Clinical Preceptor.
7. Only a wedding ring, watch, and one small stud earring in each ear is allowed. No necklaces or bracelets or other adornments are allowed. (Only exception is Med-Alert and religious medallions which are to be worn inside the tunic).
8. Body adornments (including but not limited to tattoos, hickeys, or facial piercings) must be covered or removed.
Specific Uniform Policy

The uniform will consist of the following:

- Program specific colored tunic top and matching pants with embroidered school name on top (to be purchased from a specific manufacturer).
- White or dark colored shoes (nursing shoes preferred, but white or dark colored tennis shoes with no color stripes, insets, etc. will be allowed).
- Program specific colored lab coat with embroidered school name is optional.
- Radiation monitoring badge.
- Image markers.
- Identification badge issued by clinical site.

Proper attire includes all of the items listed above. Each student must have at least three uniforms. If a student is not in proper uniform, the Clinical Preceptor or Clinical Coordinator will send the student home and require the student to return to clinical properly attired. Clinical time missed should be made up the same day. In the event a trip home is necessary, the student will be counted tardy for the day.

At no time are student uniforms to be worn while the student is working as an employee or volunteer of a clinical facility. If working hours are scheduled immediately following clinical hours, the student must change clothing prior to beginning paid or volunteer work.

Work During Clinical Experience

Outside Employment

The BSRT program is aware some students must work; however, classes, including Clinical Practicum, are scheduled with learning objectives in mind so student employment must be scheduled around courses. It is not possible to adjust course schedules for individual employment needs. No student’s clinical schedule will be adjusted to accommodate the student’s outside employment schedule or his/her commute to the clinical setting. Students may only perform radiologic procedures outside of clinical courses and for pay when allowed by both state law and clinical affiliate policy.

Student Employment in Health Care Setting Policy

Students employed at any clinical facility or who volunteer time at a clinical facility will not be allowed to receive credit for student time or competencies performed during those working hours. Student time and competencies will only be performed during regularly scheduled clinical hours.

Any student who attempts competencies during paid employee time or any time outside clinical hours may be removed from the program.
During the second clinical semester, students may request a “call back” for competencies not generally seen during regular day time clinical hours. The student can request a “call back” by informing the Clinical Preceptor or a supervising radiologic technologist of the procedure and the student’s contact information. “Call backs” can be made provided another student is not already scheduled on a shift requested to be “called back,” and the already scheduled student is not in need of the competency in question. The student who receives a “call back” must arrive in the regular Midwestern State University uniform to perform these “call back” competencies.

Students who are performing duties related to their employment must NOT wear any part of the student uniform including any form of student identification or MSU Texas affiliation.

Absence and Tardiness Policy

Absences

Two (2) days of clinical absences are allowed each semester. You must use hospital computer only to access Trajecsys.com for your attendance. You must contact the Clinical Preceptor and Clinical Coordinator if you going to be absent. For each absence above the two allowable absences, the returning student must bring a physician's note and a receipt of service from the care provider, and the student will be required to make-up the days missed if more than the 2-day allowance. For each clinical day missed after the 2-day allowance, 5 points per absence will be subtracted from the final clinical grade. The student will be required to make up the days missed, and the make-up time must start within two weeks. Excessive absences (more than 3) will result in a referral to the Department Chair and/or the Dean of the college and may result in a dismissal from the program. Unexcused absences will not be tolerated. If extenuating circumstances occur (for example: surgery, car accidents, death in family), the Clinical Coordinator will make arrangements on an individual basis.

Tardiness

Time missed because of tardiness should be made up at the end of the assigned shift the same day. This will be recorded as a tardy. Three (3) tardies within one semester will result in the deduction of 5 points from the final clinical grade.

Illness/Injury Guidelines

If the student becomes ill prior to the start of his/her shift and the student feels he /she cannot perform his/her duties or may be contagious, the student should stay home. The student must contact the Clinical Preceptor or a supervisor and Clinical Coordinator at least 30 minutes before the beginning of an assigned shift if an absence is going to occur.

If the student becomes ill at the clinical site, he/she will notify the Clinical Preceptor immediately before leaving the facility. If the student is injured outside the clinical environment, and the injury prevents the attendance of clinical rotations, the student must provide a physician's note or statement of injury from a physician before the absence(s) will be excused. Notes from physicians at the clinical facility will not be accepted unless accompanied by a copy of the
emergency room statement of service.

If the student is injured at the clinical site, notify the Clinical Preceptor immediately. If the student needs to be seen by a physician, the student may check into the emergency room or leave to seek the attention of their own physician. The hospital may not have any responsibility for payment of emergency room charges or any other charges incurred by the student as a result of their injury, so the decision to seek treatment is up to the student. If the injury causes a student to miss clinical time, a physician's note is required for excused absence credit. The student may be required to provide a physician's release for return to work depending on the circumstances of the injury. The Clinical Coordinator should be informed of all absences.

**Inclement Weather Policy**

In cases of bad weather or severe weather conditions, the student must use his or her own judgment when deciding whether or not to attend clinical. The student will inform the Clinical Preceptor as soon as possible. *If schools in the student’s clinical area are canceled, the absence will be excused.*

**Academic Instruction During Clinical Policy**

Even though a greater portion of the student’s time is devoted to clinical education after the fourth semester, academic growth and responsibilities continue to be a very important part of the student’s professional technical development and proficiency. Each semester the student will participate in special courses offered by MSU. The format of instruction may differ significantly from what the student has been accustomed to in the first two semesters. These courses are administered within the typical on-campus classroom setting, in the form of seminars, and are held two to four times per semester. *Attendance is mandatory.*

**Clinical Hours Policy**

The student’s clinical education will be scheduled for 32 hours per week. Clinical assignments may not exceed 10 clock hours in any one day. The first clinical semester will be scheduled for dayshift and with an option to do two weeks of weekends and/or evening shift. During the second and third clinical semesters, clinical hours are scheduled for dayshift and two weeks of weekend and/or evening shifts (excluding holidays). If a holiday falls on a weekday, that day will count as the day off, and the student will not get an additional day off during that week. Within the 32 hours for clinical, one hour for critique class and one hour for discussion will be scheduled weekly. Day shift hours can be anytime between 5:00 am to 7:00 pm.

Combined didactic and clinical hours are not to exceed 40 hours per week.

**Magnetic Resonance Imaging (MRI) Screening Form**

Before any student is allowed to perform a rotation in MRI, the MRI form must be completed and reviewed by the Clinical Coordinator, Clinical Preceptor, and the MRI supervisor. If a student is contraindicated to perform a rotation in the MRI area, the Clinical Coordinator will
adjust the student’s clinical requirements to ensure the safety of the student.

**Mammography Policy**

No males or females may observe and/or participate in mammography examinations.

**Venipuncture**

Venipuncture is a procedure commonly performed at the clinical education setting. Venipuncture training occurs in the MSU Patient Care class. This practice is required as an ARRT clinical competency requirement. Students in the professional curriculum may perform venipuncture if approved by the clinical site after appropriate training.

As of Spring 2023, all angiocath training and testing will be performed in the Simulation Center.

**Clinical Grievance Policies**

**Students**

It is the policy of the MSU BSRT program to work with students in finding fair and equitable solutions to problems, including any student grievance, appeal, question, misunderstanding, or discrimination. Students are urged to take problems concerning clinical education to their Clinical Preceptor.

1. The student should first take the problem or question to their Clinical Preceptor. Usually the Preceptor will have direct knowledge about the subject and is best qualified to resolve the situation.

2. If the student and Clinical Preceptor are unable to find a solution or answer within a reasonable amount of time, the student may then bring the matter to the attention of the Clinical Coordinator. The student should feel free to discuss the matter fully.

3. Should a satisfactory and impartial solution not result from Step 2, the student may pursue the matter through the Department Chair.

All students will have the option of appointing a person to accompany them during the grievance procedure.

**Hospital/University**

In the event the hospital requests a student be removed from the facility permanently, three subsequent courses of action may take place:

1. If the situation is based on a problem specific to the facility and would not prevent the student from completing the program, the university may assign a student to another facility.
2. If the facility is willing to accept the student with full disclosure, the student will be
allowed to complete the program.

3. The student will not be allowed a second transfer unless the facility is no longer
functioning or policies at the facility change so students are no longer accepted.

If the situation is based on unacceptable, intolerable, or illegal actions by a student which violate
the clinical policies set forth in this handbook or which violate any local, state, or federal laws,
the student will be removed from the clinical site and released from the program. Under these
circumstances, a student will not be allowed to reenter the program at any time in the future.

**CLINICAL SUPERVISION**

*Clinical Preceptor*

Each clinical facility has one or more Clinical Preceptor(s). In addition to their responsibilities of
day-to-day operations in the department, these individuals are responsible for the supervision of
the student’s clinical education. This includes scheduling students through appropriate
departamental work centers and assuring they are assigned to qualified technologists; reviewing
performance evaluations and rotation appraisals to determine the level of supervision necessary
for each student and when he or she can work independently in a given situation; performing
competency and professional development evaluations on each student per semester; scheduling
and conducting weekly image critiques; and being available to assist, advise, and counsel
students. Clinical Preceptors enforce supervision and repeat of unsatisfactory image(s) policies.
In addition, Clinical Preceptors monitor each student’s clinical exam record or log sheet weekly.

*Clinical Coordinator*

One MSU faculty member is given responsibility for assisting in the organization, supervision,
and coordination of the clinical education courses in each of the affiliated hospitals. This
responsibility includes assisting in establishing procedures, guidelines, and manuals for the
clinical education component of the curriculum, serving as a liaison between the academic and
clinical faculty, and maintaining communications between the affiliates and the University. The
Clinical Coordinator is also responsible for assisting the Clinical Preceptors as needed and
integrating and relating the curriculum objectives for the classroom and clinical portions of the
program to make the educational experiences as relevant and as well coordinated as possible.
The Clinical Coordinator also participates in the clinical education experience by observing
students at the affiliate sites and by being available to advise and counsel students. Additionally,
the Clinical Coordinator visually evaluates diagnostic images submitted for completed
competencies for final approval. Supervision policies are enforced and monitored through the
periodic clinical site visits by the Clinical Coordinator.

*Assistant Clinical Coordinator*
The Assistant Clinical Coordinator position is under the guidance of the Clinical Coordinator. The Assistant Clinical Coordinator performs duties as assigned by the Clinical Coordinator and the program officials which include items discussed above. This includes serving as liaison between the academic and clinical faculty and maintaining communications between the affiliates and the University. The Assistant Clinical Coordinator also participates in the clinical education experience by observing students at the affiliate sites and by being available to advise and counsel students and visually evaluate diagnostic images submitted for completed competencies for final approval. Supervision policies are enforced and monitored through the periodic clinical site visits by the Assistant Clinical Coordinator.

**SUPERVISION OF STUDENTS POLICY**

The activities of a student must be monitored by a qualified radiologic technologist. Until a student demonstrates competence in a given diagnostic procedure, all of the student’s clinical assignments must be directly supervised. The following definitions will be utilized in the supervision policy.

**Direct Supervision Policy***

All clinical assignments must be carried out under the direct supervision of a qualified radiologic technologist until the student demonstrates competence in a given procedure.

The following are parameters of direct supervision by a qualified radiologic technologist:

- Reviews the request for examination in relation to the student’s achievements.
- Evaluates the condition of the patient in relation to the student’s achievements.
- Physically present in the room during the performance of the examination.
- Reviews and approves the images taken.

Students must be directly supervised during surgical and all mobile, including mobile fluoroscopy, procedures regardless of the level of competency.

**Indirect Supervision Policy***

Once a student successfully completes an exam for competency, he/she may perform the procedure with indirect supervision. Indirect supervision is defined as supervision provided by a qualified radiologic technologist who is immediately available to assist the student regardless of the level of student achievement.

“Immediately Available” is interpreted as the presence of a qualified radiologic technologist adjacent to the room or location where a diagnostic imaging procedure is being performed. This availability applies to all areas where ionizing radiation equipment is in use including bedside and surgical procedures.
Repeating Unsatisfactory Images Policy*

In the event a repeat of unsatisfactory image(s) of an examination being performed by a student is required, the non-diagnostic image must be critiqued by a qualified radiologic technologist, and direct assistance by a qualified radiologic technologist must be given to the student while repeating any image(s). The qualified radiologic technologist must sign his or her initials in the student’s logbook documenting the technologist was present for repeat imaging.

* These supervision and repeat unsatisfactory images policies are also enforced and monitored through the periodic clinical site visits by the Clinical Coordinator and/or Assistant Clinical Coordinator. While the clinical sites are provided a copy of this handbook, personal visits completed by the Clinical Coordinator and/or Assistant Clinical Coordinator, ensure standardization. In addition, Clinical Preceptors monitor each student’s electronic clinical exam record or log weekly through Trajecsys.
REQUIRED CLINICAL EDUCATION DOCUMENTATION

The following explanations tell how different forms will be used to evaluate the student’s progress in the hospital environment. The student will be issued forms as needed by his/her Clinical Preceptor.

**Forms to be completed by the student**

**Orientation Checklist**

This checklist must be complete by the 4th week of the first clinical semester. The student will turn the orientation checklist into his/her Clinical Preceptor, who will submit the form to the MSU Clinical Coordinator at the end of the semester. **Purpose:** This form allows the student, clinical personnel, and MSU BSRT program assurance the student is introduced to all different facets of the hospital and the radiology department.

**Checklists for Room Familiarization**

The student is expected to complete the Checklist for Room Familiarization located at the back of the Clinical Handbook for each exposure room the first time the student rotates through the exposure room. The student will turn checklists into his/her Clinical Preceptor who will submit the form to the MSU Clinical Coordinator at the end of the summer term. **Purpose:** This form allows the student to become familiar with equipment found in each diagnostic imaging room. Certain items on the checklist are important, and the student should know what the items are and where to find them. If the equipment specifications are not readily available, ask the qualified radiologic technologist or Clinical Preceptor for the specifications. The student may research the item in the operator's manual provided by the equipment manufacturer. The student should not hesitate to discuss this list with the qualified radiologic technologist or Clinical Preceptor.

**Clinical Examination Record (Log)**

It is the student’s responsibility to maintain a daily log of all examinations the student observes, assists with, and performs in Trajecsys (an online program). **Student logs will be randomly reviewed through the Trajecsys system by the Clinical Coordinator.** Repeat images and/or examinations are to be documented in the logbook and the qualified radiologic technologist present for the repeat diagnostic image and/or examination must initial logbook. This log must remain intact and will be turned in periodically to the Clinical Preceptor, the Clinical Coordinator, and/or Assistant Clinical Coordinator for evaluation.

**List of Competency Examinations**
This form identifies all of the examinations in which the student will be required to successfully achieve competency and identifies most of the examinations the student will encounter during his/her clinical education period. Before students can perform any examination by themselves, they must demonstrate to a qualified radiologic technologist or Clinical Preceptor that they can perform the examination satisfactorily. A minimum number of competencies are required for each clinical semester and are listed in course syllabi.

The List of Competency Examinations will be issued to the student when he/she enters the clinical education phase of training. It is the student’s responsibility to keep the List of Competency Examinations up-to-date and to have the form readily available when the student is in the clinical site.

Image Repeat Analysis

In order to properly assess the technical progress of the student, an analysis of the number of repeated diagnostic images and reasons for repeats should be completed at least once per semester by the student under the supervision of the Clinical Preceptor. A report of repeat percentages should be forwarded to the MSU Clinical Coordinator by the end of each semester.

Clinical Evaluation by the Student

An evaluation of the clinical experience by the student is to be completed at times deemed by the Clinical Coordinator. This information includes identification of the site's strengths and weaknesses. Results from these evaluations will be used to help the clinical sites identify problem areas and seek improvements. These forms are anonymous and will promote better communication between university faculty and clinical site personnel, which in turn will help raise the level of student evaluation of the clinical experience. These evaluations include: Evaluation of Clinical Preceptor by the Student and Evaluation of Clinical Site by the Student.

Forms to be completed by the Clinical Preceptor/ Qualified Radiologic Technologist

Professional Development Evaluation

This evaluation is completed by the student’s Clinical Preceptor at the end of each semester. It constitutes a portion of the student’s clinical grade.

Purpose: The student’s conduct in the clinical setting is judged by the general public to determine a department's professional level. Appropriate conduct is a broad category encompassing a number of considerations including comprehension of examinations, quality of work, organization of work, quantity of work, patient rapport, and performance under pressure, interpersonal relationships, initiative, judgment, attendance/punctuality,
personal appearance, and professional ethics. The Clinical Preceptor will solicit comments from other radiology personnel concerning the student’s overall performance.

**Competency Evaluations**

When the student feels proficient in an examination, the student will ask the Clinical Preceptor or qualified radiologic technologist to complete a Competency Evaluation. The Clinical Preceptor or qualified radiologic technologist will complete the evaluation with no interruption unless a compromise of patient and/or equipment welfare is questionable. Competency Evaluations are Pass/Fail only and count as a part of the student’s clinical grade.

Upon completion of each competency, the student will show competency diagnostic images for evaluation by the Clinical Coordinator and/or Assistant Clinical Coordinator. The Clinical Coordinator and/or Assistant Clinical Coordinator have the final word in the acceptance or denial of clinical competencies by signing Clinical Competency Evaluation Form and checking Approved or Denied on the form. These will also be documented and tracked in the Trajecsys system by the Clinical Coordinator and/or Assistant Clinical Coordinator.

Simulations are approved and arranged by the Clinical Coordinator in the final clinical semester. Students should make every effort to obtain all examinations on live patients. Failure to complete all competencies by the end of the third clinical semester will result in an Incomplete being assigned as the grade, and the student will have thirty (30) days from the first day of the next long semester to complete the competencies and final grade will be reduced by a letter grade.
Definition of Terms

**American Registry of Radiologic Technologists (ARRT):** The purposes of the Registry include encouraging the study and elevating the standards of radiologic science, as well as the examining and certifying of eligible candidates and periodic publication of a listing of registrants.

**Clinical Coordinator:** The MSU faculty member who is directly responsible for communications between the clinical facility and MSU.

**Clinical Preceptor:** The qualified radiologic technologist designated at each clinical facility to be responsible for the supervision of the clinical education of students assigned to that facility.

**Competency:** The student has performed the procedure independently, consistently, and effectively during the course of his or her formal education.

**Department Chair:** The current Chair of the MSU Radiologic Sciences Program.

**Direct supervision:** Supervision of the student by a qualified radiologic technologist who personally reviews the request for examination in relation to the student’s achievements; evaluates the condition of the patient in relation to the student’s achievements; is physically present in the room during the performance of the examination; and reviews and approves the images taken.

**Indirect supervision:** Supervision provided by a qualified radiologic technologist who is immediately available to assist the student regardless of the level of student achievement.

**Immediately available:** The presence of qualified radiologic technologist adjacent to the room or location where a diagnostic imaging procedure is being performed. This availability applies to all areas where ionizing radiation equipment is in use including beside and surgical procedures.

**Medical Radiologic Technologist:** A radiologic technologist who is licensed through the Texas Medical Board as a medical radiologic technologist. All working radiologic technologists within the state of Texas must be certified as a medical radiologic technologist.

**Program Director:** The MSU faculty member who assures effective program operations, oversees ongoing program accreditation and assessment processes, and assumes the leadership role in the continued development of the program (most often the department chair).

**Qualified Radiologic Technologist:** Technologists who are certified through the American Registry of Radiologic Technologists (ARRT) and if the clinical site is in the state of Texas, the Medical Radiological Technologist (MRT).

**Radiology department:** The department or area of the hospital or clinical facility which performs imaging procedures, using various techniques of visualization, with the diagnosis and treatment of disease using any of the various sources of radiant energy.
**Supervisor:** The person who supervises radiologic technologists, clerical staff, and other support personnel of the radiology department and/or other imaging areas of the radiology department.

**Unsatisfactory image:** An image of undiagnostic quality as determined by the qualified radiologic technologist, Clinical Preceptor, or Clinical Coordinator because of patient positioning, exposure factors, motion, artifacts, etc. Unsatisfactory images performed by a student must be repeated with direct supervision by the qualified radiologic technologist.
SAMPLE CLINICAL FORMS:
## ORIENTATION CHECKLIST

<table>
<thead>
<tr>
<th>Task</th>
<th>Tech Initial</th>
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<tbody>
<tr>
<td>1. Tour of Facility</td>
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<tr>
<td>2. Tour of Department</td>
<td></td>
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<tr>
<td>3. Policies and Procedures</td>
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<tr>
<td>a. Location of Policy and Procedure Manual</td>
<td></td>
</tr>
<tr>
<td>b. Orientation to chain of command</td>
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</tr>
<tr>
<td>4. Location of Equipment</td>
<td></td>
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<tr>
<td>a. Carts</td>
<td></td>
</tr>
<tr>
<td>b. Wheelchairs</td>
<td></td>
</tr>
<tr>
<td>c. IV poles</td>
<td></td>
</tr>
<tr>
<td>d. Oxygen tanks</td>
<td></td>
</tr>
<tr>
<td>e. Crash carts</td>
<td></td>
</tr>
<tr>
<td>f. Emergency drug trays</td>
<td></td>
</tr>
<tr>
<td>g. Suction</td>
<td></td>
</tr>
<tr>
<td>h. Telephones</td>
<td></td>
</tr>
<tr>
<td>5. Disaster/Code/Fire Procedures</td>
<td></td>
</tr>
<tr>
<td>6. Telephone Orientation</td>
<td></td>
</tr>
<tr>
<td>7. Personal item storage</td>
<td></td>
</tr>
<tr>
<td>8. Smoking policy</td>
<td></td>
</tr>
<tr>
<td>9. Parking policy</td>
<td></td>
</tr>
<tr>
<td>10. Clock – in, clock-out procedures</td>
<td></td>
</tr>
<tr>
<td>11. Restroom key</td>
<td></td>
</tr>
</tbody>
</table>

__________________________  ________________________
Clinical Preceptor signature  Date

__________________________  ________________________
Student signature  Date
ROOM FAMILIARIZATION

NAME ___________________________________________ DATE: __________

Clinical Facility ____________________________________________

Exposure Room ___________________________________________

Manufacturer of Equipment _______________________________________

Highest mAs ___________ Lowest mAs ___________

Highest kVp ___________ Lowest kVp ___________

Number of emergency cut-off switches/buttons? ___________

Image receptor holder in the room  Yes  No  Storage location ___________

Patient seating options ________________________________________

Draw the control panel icons for:

Table  Chest  Free  AEC Cell

Configuraion

Fluoroscopy Tower (if applicable)

Tower Attachments _______________________________________

Myelogram stop  Yes  No

Fluro Magnification Options _________________________________

Fluoro Timer Alarm _______________________________________

Room Table

Degree of table tilt:  Head ____  Foot ____

Highest table position ______  Lowest table position ______  Patient step assist Y/N

List the table attachments available ______________________________

What is used to clean the table? ________________________________
Upright Bucky

Exists ____Yes ____No  Tilt ____Yes ____No  Automatic tracking _______

Number of Image Receptor (IR) batteries ______ Number of IR charging stations ______

Size of image receptors ________________________________________________

Wall Bucky accessories _________________________________________________

Type of Bucky grid _______ Ratio ________

Type of Free grid _______ Ratio ________

Emergency Supplies

Emergency cart or tray ____Yes ____No  Room Oxygen ____Yes ____No

Mobile oxygen storage location ____________________________________________

Wall Suction ____Yes ____No  Mobile Suction ____Yes ____No

Biobehazard bin ____Yes ____No  Contrast disposal ____Yes ____No

Sharps disposal ____Yes ____No

Accessory Equipment

Number of lead aprons available? _________________________________

What is the lead equivalency of the aprons? _________________________

How many lead gloves are available? ________________________________

Are sandbags available? ____Yes ____No

Are gonadal shields available? ____Yes ____No

Exposure Button

Can the exposure button engage without exposure ____Yes ____No

How do you make an exposure? ________________________________

How do you know if an exposure is complete? ________________________

______________________________________________________________  __________

Clinical Preceptor Signature  Date
### REPEAT LOG

<table>
<thead>
<tr>
<th>Date</th>
<th>Exam # (accession)</th>
<th>Exam</th>
<th>S#</th>
<th>Technique kVp@mAs</th>
<th>#Repeats: Include Position &amp; Reason</th>
<th>Tech Initials</th>
</tr>
</thead>
</table>

---

---

Clinical Instructor signature
REPEAT ANALYSIS

Student Name ________________________________________________

Clinical Facility ____________________________ Semester ________

This analysis is for the clinical period from ___________ to ___________

Reasons for repeat: # (number of images)
1. Overexposed _______
2. Underexposed _______
3. Patient Motion _______
4. Centering _______
5. Positioning _______
6. Other _______

A. Total number of radiographic images taken ________________
B. Total number of repeats taken during this period __________
C. Calculate to get % of repeats $\frac{B \times 100}{A}$

1. Analyze the above information and give reasons for repeated radiographic images.
   ____________________________________________________________
   ____________________________________________________________

2. What is the most common reason for repeat examinations?
   ____________________________________________________________

3. How can this problem be corrected?
   ____________________________________________________________
   ____________________________________________________________

________________________________________    ______________________________
Student signature                          Clinical Instructor signature
<table>
<thead>
<tr>
<th>CHEST AND THORAX</th>
<th>RT</th>
<th>DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chest</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chest AP - Wheelchair or Stretcher</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ribs (Above D) or (Below D)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SC Joints*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sternum*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Soft Tissue Neck</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**UPPER EXTREMITY**

<table>
<thead>
<tr>
<th>Finger</th>
<th>DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Thumb</td>
<td></td>
</tr>
<tr>
<td>Hand</td>
<td></td>
</tr>
<tr>
<td>Wrist</td>
<td></td>
</tr>
<tr>
<td>Forearm</td>
<td></td>
</tr>
<tr>
<td>Elbow</td>
<td></td>
</tr>
<tr>
<td>Humerus</td>
<td></td>
</tr>
<tr>
<td>Shoulder</td>
<td></td>
</tr>
<tr>
<td>Clavicle</td>
<td></td>
</tr>
<tr>
<td>Scapula</td>
<td></td>
</tr>
<tr>
<td>A-C Joints*</td>
<td></td>
</tr>
</tbody>
</table>

**LOWER EXTREMITY**

<table>
<thead>
<tr>
<th>Toe</th>
<th>DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foot</td>
<td></td>
</tr>
<tr>
<td>Calcaneus</td>
<td></td>
</tr>
<tr>
<td>Ankle</td>
<td></td>
</tr>
<tr>
<td>Lower Leg</td>
<td></td>
</tr>
<tr>
<td>Knee</td>
<td></td>
</tr>
<tr>
<td>Patella</td>
<td></td>
</tr>
<tr>
<td>Femur</td>
<td></td>
</tr>
<tr>
<td>Hip</td>
<td></td>
</tr>
<tr>
<td>X-Table LAT Hip (Horizontal Beam &amp; Pt. Recumbent)</td>
<td></td>
</tr>
</tbody>
</table>

**ABDOMEN**

<table>
<thead>
<tr>
<th>Abdomen</th>
<th>DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abdomen (2 View)</td>
<td></td>
</tr>
<tr>
<td>Abdomen Decubitus</td>
<td></td>
</tr>
<tr>
<td>Intravenous Urography</td>
<td></td>
</tr>
</tbody>
</table>

**HEAD (must have 1)**

<table>
<thead>
<tr>
<th>Facial Bones</th>
<th>DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mandible</td>
<td></td>
</tr>
<tr>
<td>Nasal Bones</td>
<td></td>
</tr>
<tr>
<td>Sinuses</td>
<td></td>
</tr>
<tr>
<td>Skull</td>
<td></td>
</tr>
<tr>
<td>Zygomatic Archae*</td>
<td></td>
</tr>
</tbody>
</table>

**Computerized Tomography (CT)**

<table>
<thead>
<tr>
<th>CT Head</th>
<th>DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>CT Chest</td>
<td></td>
</tr>
<tr>
<td>CT Abdomen/Pelvis</td>
<td></td>
</tr>
</tbody>
</table>

**SPINE AND PELVIS**

<table>
<thead>
<tr>
<th>Cervical Spine</th>
<th>DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Thoracic Spine</td>
<td></td>
</tr>
<tr>
<td>Lumbar Spine</td>
<td></td>
</tr>
<tr>
<td>Pelvis</td>
<td></td>
</tr>
<tr>
<td>Sacrum</td>
<td></td>
</tr>
<tr>
<td>Coccyx*</td>
<td></td>
</tr>
<tr>
<td>X-Table LAT Spine (Horizontal Beam &amp; Pt. Recumbent)</td>
<td></td>
</tr>
</tbody>
</table>

**CONTRAST STUDIES**

<table>
<thead>
<tr>
<th>Arthrogram</th>
<th>DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contrast Enema</td>
<td></td>
</tr>
<tr>
<td>Cystogram, VCUG</td>
<td></td>
</tr>
<tr>
<td>Esophagram (Barium Swallow)</td>
<td></td>
</tr>
<tr>
<td>EGD, ERCP, Duodenogram</td>
<td></td>
</tr>
<tr>
<td>Myelogram</td>
<td></td>
</tr>
<tr>
<td>Small Bowel Series</td>
<td></td>
</tr>
<tr>
<td>Upper GI Series</td>
<td></td>
</tr>
</tbody>
</table>

**SURGERY**

<table>
<thead>
<tr>
<th>Hip</th>
<th>DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>OR Cholangiogram</td>
<td></td>
</tr>
<tr>
<td>C-Arm - 2 projections</td>
<td></td>
</tr>
<tr>
<td>Surgical C-Arm</td>
<td></td>
</tr>
</tbody>
</table>

**MOBILE RADIOGRAPHY**

<table>
<thead>
<tr>
<th>Abdomen</th>
<th>DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chest</td>
<td></td>
</tr>
<tr>
<td>Extremity</td>
<td></td>
</tr>
</tbody>
</table>

**PEDIATRIC (0-6 Years old)**

<table>
<thead>
<tr>
<th>Abdomen*</th>
<th>DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chest</td>
<td></td>
</tr>
<tr>
<td>Extremity</td>
<td></td>
</tr>
<tr>
<td>Mobile</td>
<td></td>
</tr>
</tbody>
</table>

**GERIATRIC (65+) physical or cognitive impairment**

<table>
<thead>
<tr>
<th>Chest</th>
<th>DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Extremity</td>
<td></td>
</tr>
<tr>
<td>Hip or Spine</td>
<td></td>
</tr>
</tbody>
</table>

**GENERAL TRAUMA***

<table>
<thead>
<tr>
<th>Upper Extremity (non-shoulder)</th>
<th>DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shoulder or Humerus (Scapula?, Traumatism, etc)</td>
<td></td>
</tr>
<tr>
<td>Lower Extremity</td>
<td></td>
</tr>
</tbody>
</table>

**OBSERVATION ONLY**

<table>
<thead>
<tr>
<th>Abdominal Angiogram or Run Off</th>
<th>DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cerebral Angiogram or CTA Head</td>
<td></td>
</tr>
</tbody>
</table>

NOTES:  
* These examinations may be evaluated by simulation. 
** No Competency Evaluations will be done from this group.  
*** Trauma is considered a serious injury or shock to the body and requires modifications in positioning and monitoring of the patient’s condition.

Revised May 2021
# MIDWESTERN STATE UNIVERSITY

## CLINICAL COMPETENCY EVALUATION FORM

**Student:**

**Examination/Procedure:**

**Patient X-ray #:**

**Clinical Indications:**

**Radiologist Interpretation:**

The student will notify the clinical instructor or staff technologist when ready to perform a competency. The examination procedure will be monitored by the evaluator. All skills must be passed to successfully complete a competency.

<table>
<thead>
<tr>
<th></th>
<th>YES</th>
<th>NO</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. EVALUATE REQUEST</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Checks patient's identification (ID)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. PATIENT PREPARATION</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Dresses patient, gives explanation of procedure, identified no contradictions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. ROOM PREPARATION</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Room clean, obtains supplies, sets up for procedure, and uses proper cassettes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. PROFESSIONALISM</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Projects a professional attitude, uses good communication skills, requests patient, and is efficient</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. PERSONAL AND PATIENT SAFETY</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Uses universal precautions and proper body mechanics</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. PATIENT POSITIONING</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Gives proper breathing instructions and uses proper alignment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. EQUIPMENT</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Uses proper SID and tube angulation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. RADIATION SAFETY</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Uses shielding, collimation, and no repeats</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. EXPOSURE FACTORS</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Sets correct technique, AEC and focal spot size</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. IMAGE EVALUATION</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Critiques images proficiently, markers and patient information properly displayed</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. EXAM COMPLETION</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Discharges patient completes paperwork, and room cleaned up</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**PASS/FAIL**

**COMMENTS:**

---

**Technologist Signature:**

**Date:**

---

**Clinical Instructor Signature:**

**Date:**

---

**Student Signature:**

**Date:**

---

**Evaluator:**

**Approved**

**Denied**

**Date:**
# CT EXAM CLINICAL PERFORMANCE EVALUATION FORM

**Student:** ____________________________  **Date:** ____________________________

**Examination/Procedure:** CT  **Clinical Indications:** ____________________________

**Patient X-ray #:** ____________________________  **CTDI:** ____________  **DLP:** ____________

**Radiologist Interpretation:** ____________________________

The student will notify the clinical instructor or staff technologist when ready to perform an exam. The examination procedure will be monitored by the evaluator. All skills must be passed to successfully complete exam.

1. **EVALUATE REQUEST**
   - Checks patient's identification (ID)
   - **YES**  **NO**  **N/A**

2. **PATIENT PREPARATION**
   - Dresses patient, gives explanation of procedure, checks for possible pregnancy and prepares consent form
   - **YES**  **NO**  **N/A**

3. **ROOM PREPARATION**
   - Room clean, obtains supplies, sets up for procedure
   - **YES**  **NO**  **N/A**

4. **PROFESSIONALISM**
   - Projects a professional attitude and uses good communication skills
   - **YES**  **NO**  **N/A**

5. **PERSONAL AND PATIENT SAFETY**
   - Uses universal precautions and proper body mechanics
   - **YES**  **NO**  **N/A**

6. **PATIENT POSITIONING**
   - Gives proper breathing instructions and part centered properly
   - **YES**  **NO**  **N/A**

7. **EQUIPMENT MANIPULATION**
   - Properly manipulated gantry based on patient condition in a timely manner
   - **YES**  **NO**  **N/A**

8. **RADIATION SAFETY**
   - Uses shielding & collimators
   - **YES**  **NO**  **N/A**

9. **SELECTS CORRECT PROTOCOL**
   - **YES**  **NO**  **N/A**

10. **IMAGE EVALUATION**
    - Computes cross-sectional images proficiently and patient information is properly displayed
    - **YES**  **NO**  **N/A**

11. **EXAM COMPLETION**
    - Discharges patient, completes paperwork and room cleaned up
    - **YES**  **NO**  **N/A**

**Comments:**

**Technologist Signature:** ____________________________  **Date:** ____________________________

**Clinical Instructor Signature:** ____________________________  **Date:** ____________________________

**Student Signature:** ____________________________  **Date:** ____________________________

**Evaluator:** ____________________________  **Approved**  **Denied**  **Date:** ____________________________

---

105
CLINICAL AFFILIATIONS
## CLINICAL AFFILIATION DISTANCE FROM MSUTEXAS

<table>
<thead>
<tr>
<th>Clinical Affiliates</th>
<th>Distance from MSU</th>
</tr>
</thead>
<tbody>
<tr>
<td>Baylor Scott &amp; White of Marble Falls, Marble Falls, TX**</td>
<td>256 miles – 4 hrs 17 mins</td>
</tr>
<tr>
<td>Carrollton Regional Medical Center, Carrollton, TX **</td>
<td>126 miles – 2 hrs</td>
</tr>
<tr>
<td>Chickasaw Nation Medical Center, Ada, OK**</td>
<td>148 miles – 2 hrs 30 mins</td>
</tr>
<tr>
<td>Clay County Hospital, Henrietta, TX</td>
<td>20 miles – 21 mins</td>
</tr>
<tr>
<td>Electra Hospital, Electra, TX</td>
<td>32 miles – 32 mins</td>
</tr>
<tr>
<td>Graham Regional Medical Center, Graham, TX**</td>
<td>61 miles – 1 hr</td>
</tr>
<tr>
<td>Kell West Regional Hospital, Wichita Falls, TX</td>
<td>5 miles – 7 mins</td>
</tr>
<tr>
<td>Medical City of Dallas, Dallas, TX**</td>
<td>138 miles – 2 hrs 15 mins</td>
</tr>
<tr>
<td>Medical City of Denton, Denton, TX**</td>
<td>106 miles – 1 hr 45 mins</td>
</tr>
<tr>
<td>Medical City of Lewisville, Lewisville, TX**</td>
<td>118 miles – 1 hr 47 mins</td>
</tr>
<tr>
<td>Mercy Hospital Ada, Ada, OK**</td>
<td>149 miles – 2 hrs 39 mins</td>
</tr>
<tr>
<td>Mercy Hospital Ardmore, Ardmore, OK**</td>
<td>90 miles – 1 hr 37 mins</td>
</tr>
<tr>
<td>Methodist Charlton Medical Center, Dallas, TX**</td>
<td>148 miles – 2 hrs 16 mins</td>
</tr>
<tr>
<td>Methodist Dallas Medical Center, Dallas, TX**</td>
<td>142 miles – 2 hrs 15 mins</td>
</tr>
<tr>
<td>North Texas Medical Center, Gainesville, TX**</td>
<td>84 miles – 1 hr 30 mins</td>
</tr>
<tr>
<td>San Angelo Community Medical Center, San Angelo, TX**</td>
<td>241 miles – 3 hrs 30 mins</td>
</tr>
<tr>
<td>Shannon Medical Center, San Angelo, TX**</td>
<td>234 miles – 3 hrs 30 mins</td>
</tr>
<tr>
<td>Southwestern Medical Center, Lawton, OK**</td>
<td>59 miles – 1 hr</td>
</tr>
<tr>
<td>Texoma Medical Center, Denison, TX**</td>
<td>119 miles – 1 hr 55 mins</td>
</tr>
<tr>
<td>United Regional Health Care System, Wichita Falls, TX</td>
<td>2.7 miles – 7 mins</td>
</tr>
<tr>
<td>Wilbarger General Hospital, Vernon, TX**</td>
<td>56 miles – 1 hr</td>
</tr>
<tr>
<td>Wise Regional Health System, Decatur, TX**</td>
<td>77 miles – 1 hr</td>
</tr>
</tbody>
</table>

### Additional Clinical Sites*

<table>
<thead>
<tr>
<th>Clinical Sites</th>
<th>Distance from MSU</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinics of North Texas - Midwestern Site, Wichita Falls, TX</td>
<td>2.6 miles – 7 mins</td>
</tr>
<tr>
<td>Faith Community Rural Health Clinic, Bowie, TX</td>
<td>49.5 miles – 48 mins</td>
</tr>
<tr>
<td>Texas Scottish Rite Hospital for Children, Dallas, TX**</td>
<td>140 miles – 2 hrs</td>
</tr>
<tr>
<td>Texas Oncology, Wichita Falls, TX</td>
<td>4.7 miles – 7 mins</td>
</tr>
</tbody>
</table>

*Students may be assigned to these additional clinical sites to meet clinical competencies.
** These clinical sites are more than or approximately 1 hour travel from the main campus of Midwestern State University.
POLICY ON CHANGES TO THIS HANDBOOK

The information in this handbook is current at the time it is posted. However, this manual may be revised or amended upon written notification to the student. No revision or amendment will be retroactive but will become effective upon the date of student notification. The Chair of Radiologic Sciences will make final interpretation of program policies and procedures.
Pregnancy Declaration Form
Midwestern State University
Bachelor of Science in Radiologic Technology

According to the National Council on Radiation Protection and Measurement (NCRP), the dose to an embryo/fetus during the entire gestation period shall not exceed 5 millisievert due to occupation exposure of a declared pregnant female employee and/or student at any facility. An employee and/or student may declare her pregnancy in writing to assure protection of the embryo/fetus due to the mother’s occupational radiation exposure. A fetal dose badge should be worn at the declared pregnant woman’s abdomen to monitor the embryo/fetal dose. The declared pregnant employee’s and/or student’s collar badge may be used for this purpose (in the first several months, the dose received to the declared pregnant employee’s and/or student’s collar badge is assigned to the embryo/fetus) however, a fetal badge is strongly recommended as soon as possible.

It is the responsibility of the declared pregnant employee and/or student to maximize her effort to avoid radiation exposure and keep her dose to AS LOW AS REASONABLY ACHIEVABLE (ALARA). Those employees and students who declare their pregnancy will have their dose and the dose to the fetal badge reviewed and documented monthly by the Radiation Safety Officer (RSO). Every millisievert/month for the gestation period. Please note that the pregnant employee/students must declare herself “non pregnant” after delivery. For any reason during the pregnancy, the declared pregnant employee/student may declare herself not pregnant in writing.

INSTITUTION: _________________________________________________________

EMPLOYEE/STUDENT SIGNATURE: ________________________________

DATE: _______________________________________________________________

ESTIMATED DATE OF CONCEPTION: _________________________________

RADIATION SAFETY OFFICER

SIGNATURE: ________________________________________________________
Magnetic Resonance Imaging (MRI) Screening Form

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

The MRI system magnet is ALWAYS on!
Please go through the list below. If you answer yes to any of the following, please visit with your clinical coordinator before entering the MRI environment.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>Item Descriptions</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Aneurysm clip(s)</td>
</tr>
<tr>
<td>Yes</td>
<td></td>
<td>Cardiac pacemaker</td>
</tr>
<tr>
<td>Yes</td>
<td></td>
<td>Implanted cardioverter defibrillator (ICD)</td>
</tr>
<tr>
<td>Yes</td>
<td></td>
<td>Electronic implant or device</td>
</tr>
<tr>
<td>Yes</td>
<td></td>
<td>Magnetically-activated implant or device</td>
</tr>
<tr>
<td>Yes</td>
<td></td>
<td>Neurostimulation system</td>
</tr>
<tr>
<td>Yes</td>
<td></td>
<td>Spinal cord stimulator</td>
</tr>
<tr>
<td>Yes</td>
<td></td>
<td>Internal electrodes or wires</td>
</tr>
<tr>
<td>Yes</td>
<td></td>
<td>Bone growth/bone fusion stimulator</td>
</tr>
<tr>
<td>Yes</td>
<td></td>
<td>Cochlear, otologic, or other ear implant</td>
</tr>
<tr>
<td>Yes</td>
<td></td>
<td>Insulin or other infusion pump</td>
</tr>
<tr>
<td>Yes</td>
<td></td>
<td>Implant drug infusion device</td>
</tr>
<tr>
<td>Yes</td>
<td></td>
<td>Any type of prosthesis (eye, penile, etc.)</td>
</tr>
<tr>
<td>Yes</td>
<td></td>
<td>Heart valve prosthesis</td>
</tr>
<tr>
<td>Yes</td>
<td></td>
<td>Eyelid spring or wire</td>
</tr>
<tr>
<td>Yes</td>
<td></td>
<td>Artificial or prosthetic limb</td>
</tr>
<tr>
<td>Yes</td>
<td></td>
<td>Metallic stent, filter, or coil</td>
</tr>
<tr>
<td>Yes</td>
<td></td>
<td>Shunt (spinal or intraventricular)</td>
</tr>
<tr>
<td>Yes</td>
<td></td>
<td>Vascular access port and/or catheter</td>
</tr>
<tr>
<td>Yes</td>
<td></td>
<td>Radiation seeds or implants</td>
</tr>
<tr>
<td>Yes</td>
<td></td>
<td>Swan-Ganz or thermodilution catheter</td>
</tr>
<tr>
<td>Yes</td>
<td></td>
<td>Medication patch (Nicotine, Nitroglycerine)</td>
</tr>
<tr>
<td>Yes</td>
<td></td>
<td>Any metallic fragments or foreign bodies (metal in eyes, shrapnel, etc.)</td>
</tr>
<tr>
<td>Yes</td>
<td></td>
<td>Wire mesh implant</td>
</tr>
<tr>
<td>Yes</td>
<td></td>
<td>Tissue expander (e.g., breast)</td>
</tr>
<tr>
<td>Yes</td>
<td></td>
<td>Surgical staples, clips, or metallic sutures</td>
</tr>
<tr>
<td>Yes</td>
<td></td>
<td>Joint replacement (hip, knee, etc.)</td>
</tr>
<tr>
<td>Yes</td>
<td></td>
<td>Bone/joint pin, screw, nail, wire, plate, etc.</td>
</tr>
<tr>
<td>Yes</td>
<td></td>
<td>IUD, diaphragm, or pessary</td>
</tr>
<tr>
<td>Yes</td>
<td></td>
<td>Dentures or partial plates</td>
</tr>
<tr>
<td>Yes</td>
<td></td>
<td>Hearing aid (Remove before entering MR system room)</td>
</tr>
<tr>
<td>Yes</td>
<td></td>
<td>Other medically implanted device</td>
</tr>
</tbody>
</table>
Before entering the MRI environment or MRI system room, you must remove all metallic objects including hearing aids, dentures, partial plates, keys, beeper, cell phone, eyeglasses, hair pins, barrettes, jewelry, body piercing jewelry, watch, safety pins, paperclips, money clip, credit cards, bank cards, magnetic strip cards, coins, pens, pocket knife, nail clipper, tools, clothing with metal fasteners, & clothing with metallic threads.

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 read and understand the contents of this form and had the opportunity to ask questions regarding the information on this form.

Name of Student: ____________________________________________________________

Signature of Student: _________________________________________________________

Date_____________________________________

MAGNETIC RESONANCE IMAGING (MRI) SCREENING FORM
For Midwestern State University Radiology Students
Bachelor of Science in Radiologic Technology

My signature below indicates that I have read and understand the contents of this academic handbook. I agree to abide by the policies and procedures outlined and understand I am responsible for adhering to them. I understand noncompliance can result in disciplinary action up to and including dismissal from the radiologic technology program.

______________________________________________________
Print Name

______________________________________________________
Student Signature

______________________________________________________
Date
Acknowledgement of 2022 Edition of Part II: Clinical Handbook
Bachelor of Science in Radiologic Technology

My signature below indicates that I have read and understand the contents of this academic handbook. I agree to abide by the policies and procedures outlined and understand I am responsible for adhering to them. I understand noncompliance can result in disciplinary action up to and including dismissal from the radiologic technology program.

_______________________________________________
Print Name

_____________________________________________________________
Student Signature

_________________________
Date
Student Laboratory Participation Agreement

I, (print name) ________________________________, understand during the laboratory experiences I will role-play as a professional radiographer and patient. I expect physical contact with other students while learning various radiographic procedures, blood pressures, pulse, respirations, and venipuncture. I agree to follow all policies related to protecting myself and others by using the appropriate personal protective equipment as prescribed by the program faculty.

Student Signature

Date
**Academic Honesty Attestation Statement**

Academic dishonesty (cheating, plagiarism, etc.) will not be tolerated in the Radiologic Technology Program and may result in suspension or dismissal. Cases will also be referred to the Dean of Students for possible dismissal from the university.

Cheating includes, but is not limited to, (1) use of any unauthorized assistance in taking quizzes, tests, or examinations; (2) dependence upon the aid of sources beyond those authorized by the instructor in writing papers, preparing reports, solving problems, or completing other assignments; or (3) the acquisition of tests or other academic materials belonging to the university faculty or staff without permission.

Plagiarism includes, but is not limited to, the use of, by paraphrase or direct quotation without correct recognition, the published or unpublished works of another person. The use of materials generated by agencies engaged in "selling" term papers is also plagiarism.

Students are encouraged to take full advantage of the many resources available including Internet sites, handouts and workbooks, other textbooks and journals, faculty, and peers. This interactive collegial learning environment is conducive for life-long learning.

By signing this document I agree to abide by Midwestern State University and the Radiologic Technology’s Academic Honesty and Plagiarism policies.

________________________________________
Print Name

________________________________________
Student Signature

________________________
Date
**Program Technical Standards Statement**

I, (print name) _________________________________, have read and understand the Program Technical Standards required of students in the MSU Texas BSRT program. By signing below, I am attesting that I meet these standards or have the ability to meet these standards.

________________________________________
Print Name

________________________________________
Student Signature

________________________
Date
Waiver and Release of Medical Liability

I hereby agree and acknowledge that my participation in the Clinical experience may involve a risk of injury or illness, including COVID-19. I hereby indemnify and hold harmless MSU Texas from any and all claims, suits, liability, judgements, and costs arising from and/or related to any personal injuries, damage to personal property, and the results therefrom, ensuing from my participation in the Clinical experience.

I further agree to indemnify and hold MSU Texas harmless for any injury or medical problem I may acquire, including a diagnosis of COVID-19, during my participation in the Clinical Experience. I agree to pay my own medical costs related to any injuries or illnesses that I incur during my participation in the Clinical Experience. I further agree that MSU Texas shall not be responsible for payment of needed medical services.

☐ By checking this box and providing my student ID and name below, I acknowledge that I have read the above waiver and release in its entirety and affirm this waiver voluntarily. I intend my submission of this form to be a complete and unconditional release of MSU Texas’ liability to the greatest extent allowed by law.

________________________
Student’s Full Name/Signature

________________________
Student’s M#

________________________
Date

________________________
School Representative

________________________
Date
Midwestern State University Photo/Video Release Form

The Radiologic Sciences Department at Midwestern State University appreciates your help with our marketing efforts. The photographs/videos to be taken are for promoting the program. They may be used in a variety of advertising outlets including, but not limited to, ads, websites, brochures, posters, or social media.

I, __________________________________________________________
(please print)

☐ I agree to let my photographs/videos be used for the purposes stated above.
☐ I do not agree to let my photographs/videos be used for the purposes stated above.

Signed: ___________________________________________ Date:______________