

**MCNEESE STATE UNIVERSITY
COLLEGE OF NURSING AND HEALTH PROFESSIONS
DEPARTMENT OF
RADIOLOGIC AND MEDICAL LABORATORY SCIENCES
RADIOLOGIC SCIENCES PROGRAM**

STUDENT HANDBOOK

IT IS THE STUDENT'S RESPONSIBILITY TO READ THE STUDENT HANDBOOK. THE STUDENT WILL BE HELD RESPONSIBLE FOR POLICIES IN THIS HANDBOOK. RULES ARE SUBJECT TO CHANGE. DISPUTES OVER INTERPRETATION SHOULD BE BROUGHT TO THE PROGRAM DIRECTOR'S ATTENTION. THE PROGRAM DIRECTOR WILL SEEK THE ADVICE OF THE PROGRAM FACULTY AND/OR THE RADIOLOGIC SCIENCES ADVISORY COMMITTEE FOR A FINAL DECISION.

Issued to _____

Date _____

I have read the 2020- 2021 MSU Radiologic Sciences Student Handbook for the professional phase. I understand all policies therein and will abide by these policies during my enrollment in the professional phase of the program. (Distributed Summer Sessions)

Student Signature

Date

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MISSION & PROGRAM GOALS

The program in Radiologic Sciences at McNeese State University offers a Bachelor of Science degree which prepares students for the health care profession as competent radiographers (R). In addition, the program prepares students for career opportunities in Mammography (M), Computed Tomography (CT), Magnetic Resonance Imaging (MR), Bone Densitometry (BD), Vascular-Interventional Radiography (VI), or Cardiac-Interventional Radiography (CI). The program integrates learning and clinical environments to promote advanced professional development. The program mission aligns with the University mission to emphasize in-depth disciplinary knowledge and its application to academic and professional environments. Students achieve success through the studied acquisition of content knowledge, the demonstration of discipline-specific skills and dispositions as well as mastery of general education competencies such as critical thinking, effective communication, and independent learning.

The program goals are:

1. To provide an education that promotes clinical competency.
 - SLO – 1.1 Students will be able to demonstrate radiographic positioning skills accurately
 - SLO – 1.2 Students will provide patient care and comfort to patients while performing radiographic procedures
 - SLO – 1.3 Students will be able to apply the principles of radiation protection for the patient, self and others.
2. To foster critical thinking skills enabling effective problem solving in the professional environment.
 - SLO – 2.1 Students produce radiographic images demonstrating proper selection of exposure and technical factors,
 - SLO – 2.2. Students will evaluate finished radiographic images, for proper: anatomy visualized, positioning, and exposure factors
3. Apply effective communication skills in the professional environment.
 - SLO – 3.1 Student will be able to communicate with their patients while implementing the radiography process
 - SLO – 3.2 Students will be able to communicate effectively with clinical staff and peers.
4. To promote professionalism in radiologic sciences.
 - SLO – 4.1 The student will maintain appropriate conversation with and in the presence of patients
 - SLO – 4.2 The student will demonstrate professional ethics while at the assigned Clinical Education Setting

SLO – Student Learning Outcome

Policy: 1982

Revised: 1994, 1997, 2007, 2011, 2017, 2019

Code of Ethics

American Registry of Radiologic Technologists (ARRT)

The Code of Ethics forms the first part of the Standards of Ethics. The Code of Ethics 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 principal objective of the profession to provide services to humanity with full respect for the dignity of mankind.

3 The radiologic technologist delivers patient care and service unrestricted by the concerns of personal attributes or the nature of the disease or illness, and without discrimination on the basis of race, color, creed, religion, national origin, sex, marital status, status with regard to public assistance, familial status, disability, sexual orientation, gender identity, veteran status, age, or any other legally protected basis.

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.

11 The radiologic technologist refrains from the use of illegal drugs and/or any legally controlled substances, which result in impairment of professional judgment and/or ability to practice radiologic technology with reasonable skill and safety to patients.



Revised by ARRT 2019

INTRODUCTION

Welcome to the Radiologic Sciences program sponsored by McNeese State University. It is our sincere hope that you will find this program a rewarding and challenging part of your life.

Your participation as part of the health care team is much appreciated. The health care team is a group of individuals who are working toward one goal – providing the best possible care and diagnosis to the patients they are privileged to serve.

The purpose of this handbook is to better acquaint you with the policies and guidelines of the radiologic sciences program. Being knowledgeable of the policies and guidelines of this handbook will enable you to realize what is expected of you as a student in the program.

Students enrolled in the program will be responsible for observing all university rules and regulations as stated in the current university “Undergraduate Catalog” and the Code of Student conduct for MSU which can be found at www.mcneese.edu/policy and then click on “Student Handbook” policy. Students will also be responsible for observing all rules and regulations of the assigned Clinical Education Setting (CES) and all policies, procedures and guidelines listed in this handbook. You are urged to be knowledgeable of the information contained in these references as they contain considerable information about day-to-day concerns you may face.

The information in this handbook is subject to change due to changing circumstances; the policies, as written, may be modified, superseded, or eliminated. You will be notified of such changes through regular channels.

Not every eventuality can be foreseen, and areas not covered in this handbook will be dealt with on an individual basis. ***Student clinical performance responsibilities include, but are not limited to the duties and responsibilities stated in this handbook.***

In the event that the clinical education setting and the student handbook policies and procedures differ, bring the matter to the attention of the program director of radiologic sciences so that the matter can be presented to the Radiologic Sciences Advisory Committee for a decision.

*Policy: 1982
Revised: 1984, 1988, 1994, 1997, 2003, 2018*

ACADEMIC STANDARDS

The following academic standards are specific to the program in addition to the academic standards set by the university.

- Grading scale for RADS courses:
 - 100 – 93 = A
 - 85 – 92 = B
 - 77 – 84 = C
 - 69 – 76 = D
 - Below 69 = F
- A grade of “C” or better is required for all courses within the professional curriculum
- A grade of “I” for any RADS course not completed by the last date to resign the following semester becomes a grade of “F”
 - If the “I” is received in a course that is a prerequisite for a course offered the next semester, the “I” must be removed before the start of the next semester

NON- COMPLIANCE OF ACADEMIC STANDARDS

- If a final grade lower than “C” is earned in a “RADS” course
 - The student will be dismissed from the program *
- If a final grade lower than “C” is made in NURS 330 or HSM 450
 - The student must complete the course with a “C” or better prior to graduation
- Reentry into the program
 - Available if unsuccessful completion of only one RADS course in a given semester
 - Available only the next time the course is offered
 - Available only if the minimum grade point averages are met
 - Available only if program capacity permits, otherwise reapplying to the program is an option
 - The student does not have to complete an application and go through the admission process for the professional phase
 - Students who request reentry should contact the program director for more details
 - After a second unsuccessful attempt of any RADS course, reentry is not an option, student may reapply
- Reapply to the program
 - Available if unsuccessful completion of more than one RADS course
 - Must complete an application and go through the admission process
 - In calculating the grade point averages for re-admission the following will apply
 - All courses including the completed RADS courses will be used in the establishing the grade point averages

** Students who are dismissed from the program will be assisted through referral for counseling and guidance in redirecting their program of study.*

Policy: 1982

Revised: 1984, 1986, 1987, 1994, 1997, 2003, 2013, 2018

ACCREDITATION

The Joint Review Committee on Education in Radiologic Technology (JRCERT) is the only organization recognized by the U.S. Department of Education (USDE) to evaluate and accredit educational programs in radiography and radiation therapy.

The program is accredited and evaluated by the JRCERT.

- Holds the maximum accreditation status awarded by the JRCERT
- Documents pertaining to this award are housed in the Radiologic Sciences Office
 - JRCERT accreditation is the Hallmark that tells students the educational program is committed to academic excellence, healthcare quality and patient and professional safety
 - JRCERT accreditation demonstrates that the program adheres to these National Educational Standards

The “Standards for an Accredited Educational Program in Radiological Technology” are available through the Program Director or by writing to the: *JRCERT, 20 N. Wacker Drive Suite 2850, Chicago, IL 60606-3182* or at www.jrcert.org and then selecting “Programs & Faculty” and then clicking on “JRCERT Standards” and selecting “Radiography Standards”

- Allegations of noncompliance of the standards should be directed to the JRCERT

Policy: 1979

Revised: 1986, 1994, 1997, 2003, 2006, 2007, 2017

APPEALS PROCEDURE*

Differences of opinion may arise from time to time. Resolving these differences fairly and quickly is obtained by the following procedure.

STEP ONE

Talk the concern over with the faculty member within two days of the occurrence.

- Faculty member required to give answer within two working days
 - No answer, or not satisfied with response, advance to step two

STEP TWO

State your concern to Program Director

- Must be in writing
- Submitted within three working days after initial reply in step one
- Program Director required to reply within one week
 - No answer, or not satisfied with response advance to step three

STEP THREE

State concern to Radiologic Sciences Appeals Committee

- Committee composed of all Radiologic Sciences faculty members (excluding the program director and the involved faculty member), department head of Radiologic and Medical Laboratory Science (who will serve as chairman, unless the position is held by the RADS program director, in this situation, the MLS program director will serve as chairman), and one other member (faculty member from the department or technologist from the CES involved). If any of the mentioned members of this committee are unable to attend a replacement member may be appointed.
- Written request to program director for an appeals committee review
- Submitted within two days after completion of step two
- Program director required to call a meeting to review the student's appeal within one two weeks
- Appeals committee required to give a decision on the appeal or call for an investigative hearing within one week following the Committee meeting

STEP FOUR

Investigative Hearing called to hear additional evidence before rendering a decision.

- All appeals committee members required to be present
- Student states their appeal calling on witnesses if necessary
- Committee may request faculty and/or the program director to state their rationale for decision
 - Calling on witnesses if necessary
- After the presentations all non-committee persons leave the hearing
- Vote on a decision by secret ballot
- Immediate notification of appeals committee decision

STEP FIVE

The University has an established policy entitled student complaint policy which can be found at http://www.mcneese.edu/policy/student_complaint_policy This policy states the procedures for filing a complaint. In addition this policy also directs the student to special policies which are not general in nature under the procedure for handling complaints involving special policies. Students are also directed to the University Student Handbook, Code of Student Conduct for further direction on how to make an appeal. Academic appeals must follow undergraduate grade appeals procedure as stated in the MSU catalog, which can be found at http://catalog.mcneese.edu/content.php?catoid=12&navoid=746#ug_grade_appeals .

Policy: 1989

Revised: 1994, 1997, 2003, 2007, 2008, 2010, 2019

ATTENDANCE/TARDY

In addition to the rules and regulations stated in the MSU catalog, the following will be enforced:

- Regular and prompt attendance for all Radiologic sciences courses is required
 - Any test missed can be made up according to the policy

CLINICAL RADIOGRAPHY COURSES

Active clinical participation is 10% of the overall course evaluation (except RADS 355 =5%, and RADS 467 = 20%). A minimum number of clinical participation days are required. The student will be **permitted 1 absence** from the clinical radiography course each semester. One absence is equal to the number of assigned hours for a day. Students missing no days or up to one day will receive 100 points in the clinical participation section of the overall course evaluation

- Absences beyond the 1 permitted must be made up
 - The maximum number of absences beyond the one permitted is as follows:
 - RADS 350, RADS 355, RADS 356, RADS 459 – 3 absences
 - RADS 461 and RADS 467 – 5 absences
 - Any absences over the maximum number permitted will require a Radiologic Sciences Advisory Committee decision regarding continuation in the program
 - Make up absences
 - Must be made up in the assigned area and the times assigned
 - Must be made up by the day before grades are due for the semester with no point deductions
 - RADS 467- must be made up by the day before grades are due for graduating seniors.
 - If make up absences are not completed as stated, the following will apply:
 - The student will receive an incomplete grade for the clinical radiography course, and
 - The following points will be deducted from the clinical participation section of the overall course evaluation:
 - RADS 350, 355, 356, 459, 461, and 467–1 absence = 0 points deducted
 - RADS 350, 355, 356, and 459 – 2 absences = 25 points deducted
 - RADS 350, 355, 356, and 459 – 3 absences = 50 points deducted
 - RADS 350, 355, 356, and 459 – 4 absences = 75 points deducted
 - RADS 350, 355, 356, and 459 – over 4 absences = 100 points deducted
 - RADS 461 and 467 – 2 absences = 25 points deducted
 - RADS 461 and 467 – 3 - 4 absences = 50 points deducted
 - RADS 461 and 467 – 5 - 6 absences = 75 points deducted
 - RADS 461 and 467 – over 6 absences = 100 points deducted
- Students becoming ill while in attendance at the CES will not be permitted to remain at the CES
- Leaving the CES prior to completing assigned hours will result in an absence for the total hours assigned for that day
- Contact the CI or the Radiology Department of the CES if unable to attend
 - Prior to scheduled assignment
 - Failure to contact results in a double absence
- Time must be documented, *see clinical radiography course record keeping*
 - Failure to document arrival and departure times is considered an absence, unless it can be verified
 - Failure to document arrival or departure time will result in a –5 pt/occurrence in record keeping
 - 3 violations of not properly documenting time in a semester will result in a one day suspension, and counted as an absence
- Limited rotational assignment attendance in RADS 461 for areas involving one assignment, such as:
 - Mammography/Bone Densitometry, Sonography, Nuclear Medicine, Radiation Oncology, Vascular Interventional Radiography, and Magnetic Resonance
 - Absences result in point reductions on the rotational evaluation for that area and are recorded on the grading procedure summary sheet for the clinical radiography course
 - 1 absence = ½ evaluation score
- Friday and Saturday absences on the evening assignments results in a double absence for each occurrence

TARDINESS

Reporting to the **assigned area** of the CES after their assigned time is considered tardy. (sign in must be 3 min prior to assigned time)

- Must be properly attired by the assigned time
- Tardy is up to one hour late
- Anytime over one hour considered an absence
- Cumulative record of tardiness maintained
 - Permitted three (3) tardy occurrences per semester
 - Permitted two (2) tardy occurrences per summer session
 - Each occurrence over results in a one day suspension from the course, and counted as an absence

In the event that extended physical restrictions or circumstances are imposed, see Program Officials

BACKGROUND CHECK

Enrollment in clinical radiography courses requires a healthcare worker background check

- Includes:
 - Criminal Search, Social Security Number Verification, Maiden Name/AKA Name Search, Sexual Offender Registry/Predator Registry, National Wants & Warrants Submission, 13224 Terrorism Sanctions Regulations, U. S. Government Terrorist List Search, Investigative Application Review, Adverse Action Letter, Medicare/Medicaid Sanctioned
- Performed by: *Precheck Inc.* Go to <https://candidate.precheck.com/StudentCheck?schoolId=4116>, then click on “select program” (from the drop down menu, select Radiologic Sciences)
 - Next, under “Select Services” check the box “Background Check”
 - Then follow instructions as prompted on the screens
 - All fees are paid by the student and made payable to Precheck. Inc.
 - All information contained in the healthcare worker background check is confidential
- Required prior to beginning the first Clinical Radiography course
- An adverse action (denial of acceptance into a clinical education setting) based in whole or part from information contained in a healthcare worker background check report requires the program to follow the procedures of the Fair Credit Reporting Act (FCRA)
 - Pre-adverse action disclosure would be issued to the student
 - Student would have right to dispute the accuracy or completeness of information furnished in report in accordance with the Fair Credit Reporting Act (FCRA)
 - A student who has been convicted of any felony or serious misdemeanor will be not be assigned to a clinical education setting if it is a security or safety issue.
 - Criminal conviction does not automatically preclude a student from being assigned to a clinical education setting, however the assignment decision will be based upon a careful consideration of the nature of the conviction
 - Criminal convictions for a felony or misdemeanor offense involving acts of violence, theft, or dishonesty, weapons, program related fraud, abusive treatment of patients, or moral turpitude are likely to adversely affect the workplace and thus creates a decision of not assigning a student to the clinical education setting
 - Being on active probation or parole is also likely to adversely affect the workplace and thus creates a decision of not assigning a student to the clinical education setting
 - Students who are identified as a positive match on any part of the healthcare worker background check could be considered as an individual who may not be assigned to a clinical education setting
- **Failure to complete the healthcare worker background check will result in a student not being assigned to a clinical education setting and enrolling into Clinical Radiography courses**
- Students are required to report to a program official if they are arrested or charged for any offense with the exception of minor traffic offenses.
 - Student must submit a police report or other documentation concerning the arrest and/or charges within 2 days of the arrest
 - The program will not take any adverse action based solely on an arrest but will consider underlying facts of arrest before taking disciplinary action
 - Failure to report an arrest or charge is grounds for dismissal

Policy: 2006, 2010, 2019

BREAKS

Clinical radiography courses permit students to leave their assigned areas for breaks, lunch, or dinner.

- 45 minute lunch or dinner
 - Time in excess of 45 minutes must be made up on the day the violation. For each 15 minute block in excess, the time must be made up as follows: 1min – 15 min = 1 hr make up time, 16 – 30 min = 2 hr make up time, etc.
 - Failure to make up time in excess will result in a one-day suspension, which will count as an absence.
 - 3 violations of exceeding 45 minutes for lunch or dinner will result in a 1 day suspension, and counted as an absence
 - Lunch breaks should be scheduled between 11:00 a.m.-12:30 p.m. except in cases of extreme circumstances.
 - When leaving the CES, this time must be documented
 - Failure to document departure and/or arrival times results in a 5 pt deduction for each occurrence in clinical record keeping
 - 3 violations of not properly documenting time in a semester will result in a one-day suspension, and counted as an absence
- Breaks are not guaranteed; permitted at the discretion of the CI or Supervising Technologist

Policy: 1984

Revised: 1988, 1992, 1994, 1999,2001, 2003, 2006

CARDIOPULMONARY RESUSCITATION CERTIFICATION

Enrollment in clinical radiography courses requires cardiopulmonary resuscitation certification.

- Adult, infant & AED Training with Skill Check off, or
- Healthcare Professional /Provide Card,
- Current for the duration of the program
 - Failure to do so will result in suspension (days missed are counted as absences) from the Clinical Radiography course until proper certification is obtained
- Internet CPR certifications are unacceptable

Policy: 1994

Revised: 1998, 2003, 2011

CLINICAL ASSIGNMENTS*

Enrollment in clinical radiography courses requires assignment to area hospitals and/or clinics that are accredited to serve as Clinical Education Settings (CES) by the JRCERT. Facilities currently serving as CES's are listed within the faculty and administration page of this handbook. A minimum number of clinical participation hours are required for each clinical radiography course. Clinical assignments are in addition to on-campus courses and are made by the program officials on a semester basis. Prior to the summer session of the first year, the students are given the initial CES request placement form to complete (**Form F-49**). During the fall semester of the first year, the students are given the CES placement for the remainder of the professional phase of the program (**Form F-50**). Every attempt is made to assign one clinical education setting for two consecutive clinical assignments. The other clinical assignments will be among the other clinical education settings.

FIRST YEAR*

- 0 clock hours per week spring semester
- RADS 350 – 22.5 clock hours per week summer for clinical and 3 hours lecture (6wks)
- RADS 355 - 15 clock hours per week fall semester
- RADS 356 - 15 clock hours per spring semester

SECOND YEAR*

- RADS 459 - 22.5 clock hours per week summer for clinical and 3 hours lecture (6wks)
- RADS 461 - 25 clock hours per week fall semester
- RADS 467 - 25 clock hours per week spring semester (up to 8 weeks of advanced area rotational assignments, Form F-36)
 - During his course students may also complete some of the documentation required by the ARRT for clinical experience in one post-primary certification examination area, such as Mammography (M), Computed Tomography (CT), Magnetic Resonance Imaging (MR), Bone densitometry (BD), Vascular-Interventional Radiography (VI), or Cardiac-Interventional Radiography, (CI).

ROTATIONAL ASSIGNMENTS*

While assigned to the CES, the student will be rotated through the various areas of the Radiology Department such as Radiography, Fluoroscopy/Radiography, Mobile, Surgery, Computed Tomography (See **Form F-1**). The student may be assigned to another CES for some rotations, which requires documentation of any procedures that were evaluated for competency/proficiency on **Form F-53**.

- Rotational assignments are distributed at beginning of each course
 - No changes in assignments without the permission of the Program Director and/or the clinical coordinator
- Monday – Friday daytime hours, with the exception of occasional evening rotation
 - Evening Rotation during summer – RADS 459 includes one Saturday assignment.
- If no activity in rotational assignment, must assist/perform in other areas
 - When in other areas, inform the CI and/or the supervising technologist

Students must exercise judgment in the number of hours of employment they work during the program as their education may be jeopardized by excessive hours of employment. Work schedules must not conflict with the program curriculum (clinical courses and campus courses). Students must not receive monetary compensation for work done in the Radiology Department during their assigned clinical education

Advanced Area/Choice ASSIGNMENTS*

The student will also be assigned to choice areas during the professional phase of the radiologic sciences program. Choice areas are selected by the student from the following areas: Radiography, Radiography/fluoroscopy, Mobile, Surgery, Bone Densitometry, Cardiac Interventional Radiography, Vascular Interventional Radiography, Sonography, Nuclear Medicine, Computed Tomography, Magnetic Resonance, Mammography, Radiation Oncology. (See **Form F-27**) (1-2 weeks)

- Student may request 1-2 wk. rotations through any of the choice assignments listed above
- Will be assigned during the Fall or Spring semester for a maximum of 2 weeks during each assignment, none during the summer session)
- **Form F-27**
 - Failure to submit form in the specified time will result in the assignment being selected by the program officials

During RADS 356 (first CT assignment) students are assigned to computed tomography as an observation rotation only, During RADS 459 (or second CT assignment) students are assigned to computed tomography to completed the computed tomography objectives (Form F-46), During RADS 461(or third CT assignment) Students are assigned to computed tomography to complete competency (Form F-15)

During RADS 467 students can request an advanced area beyond radiography, in one of the following: mammography/bone densitometry, computed tomography, magnetic resonance imaging, vascular interventional radiography, or cardiac-interventional radiography(see **Form F-36** for specifics)

**Course assignments including both on campus classes and clinical courses should not exceed 40 hrs/wk. or 10 hrs/day. The student may request to exceed this time limit (see Form F-25)*

Policy: 1982,

Revised: 1983, 1984, 1986, 1988, 1989, 1991, 1992, 1994-1998, 2001, 2003, 2008, 2010, 2011, 2013, 2014, 2019

CLINICAL COURSE OBJECTIVES

Objectives for clinical radiography courses are stated in the course syllabi. Each clinical radiography course requires the student to

- Acquire clinical competency in a variety of diagnostic procedures and other imaging modalities
 - Successful completion of all clinical radiography courses identifies that the student has documented the minimum clinical competency requirements set by the American Registry of Radiologic Technologists (ARRT)
 - In addition to meeting the minimum clinical competency requirements set by the ARRT, completion of RADS 467 for most students indicates they have completed some of the documentation required by the ARRT for clinical experience in one post-primary certification examination area, such as: Mammography (M), Computed Tomography (CT), Magnetic Resonance Imaging (MR), Bone densitometry (BD), Vascular-Interventional Radiography (VI), or Cardiac-Interventional Radiography, (CI).
- Develop and practice work habits and appropriate interpersonal relationships with patients and other members of the health care team
- Coordinate their RADS course objectives with their clinical assignments
- Utilize the course objectives in preparing for unit tests

Policy: 1981

Revised: 1982, 1983, 1984, 1987, 1988, 1997, 2003, 2011, 2016, 2019

CLINICAL RADIOGRAPHY COURSE – RECORD KEEPING

Record keeping is part of each clinical radiography course. Record keeping includes but not limited to *clinical experience records, signing evaluations, personal notebooks of exposure factors, and daily attendance records*. The majority of record keeping is maintained through an electronic clinical tracking system, purchased through the MSU Bookstore. The clinical tracking system is **the MED HUB E-Value System**. Students are given *100 pts* at the beginning of each semester for proper record keeping. Point deductions will be assessed as stated below and recorded on the grading procedure summary sheet for the course. (see grading procedure sheets Form F-45 (350)(355)(356)(459)(461)(467)

CLINICAL EXPERIENCE RECORD

Maintain a daily record of clinical experience

- Enter via www.e-value.net
 - Entries are through the **Case Log icon**
 - must be completed on the day you performed, assisted or observed the procedure
 - by 11:59 pm
 - All procedures on e-value will have 3 listings.
 - Procedure, Procedure – Evaluation, Procedure – Proficiency
 - Select the procedure only, not procedure – Evaluation or Proficiency
- Randomly checked by clinical instructor or MSU faculty
 - Incomplete clinical experience records = -5pts/occurrence
- Competency/Proficiency Evaluations completed by Clinical Instructor other than your home Clinical Instructor
 - Complete and submit paper form entitled “Clinical Participation Log: e-value entry communication to your home CI. This serves as a reminder for home CI to enter on Form F-45

PERSONAL POCKETSIZE NOTEBOOK OF EXPOSURE FACTORS

A personal pocketsize notebook is required to be with the student at all times during clinical assignments.

- Record exposure factors for radiographic procedures (no positioning notes)
- Checked randomly
 - No notebook, or notebook not up-to-date = -5pts/occurrence

DAILY ATTENDANCE RECORD

- Enter via www.e-value.net
 - Entries are through the **Time Tracking icon**
- Arrival and departure times must be documented on a designed computer within assigned CES
 - Failure to document arrival and departure times is considered an absence, *see attendance policy*
 - Failure to document arrival or departure time will result in a 5 pt deduction for each occurrence
 - 3 violations of not properly documenting time in a semester will result in a one day suspension

Policy: 1984

Revised: 1986-1990, 1994, 1996-1997, 2001-2003, 2005, 2006, 2007, 2016,2012, 2019

CLINICAL RADIOGRAPHY COURSE – UNIT TEST

At mid-semester, the student will complete a written unit test while enrolled in all clinical radiography courses (except RADS 467)

- Each test will encompass
 - Course objectives as stated in the syllabi
 - Supplemental information provided by the instructor or radiographer during any rotation
 - Any objectives from previous or currently enrolled RADS courses
- The unit test exams will be comprehensive utilizing the objectives, course assignments, and when applicable image evaluation sessions and anatomy ID quizzes for all courses taught in the Radiologic Sciences Program. All students ***must strive for a passing score of at least 77% on the unit test***
 - ***Failure to achieve a passing grade of 77% on the unit test***
 - ***Requires the student to be retested***
 - ***Prior to retesting must schedule a review/remedial session(s)(see below)***
 - ***Retest administered before or after all other final examinations for the semester***
 - ***a score of 77% or higher on retest will be recorded as a 77% on unit test***
 - ***this score of 77% on the retest replaces previous score***
 - ***Failure to achieve a passing grade of 77% when retested***
 - ***grade recorded will be the higher grade of the two scores***
 - Bonus points are not applicable for meeting the score of 77% on the unit test
 - Bonus points are only applicable when the grade on the unit test is 77% or higher
 - **Review/remedial session(s)**
 - Scheduled in addition to clinical assignment hours
 - Open to all
 - **Required** for those receiving a score lower than 77% on unit test at mid term
 - schedule an individual appointment within one week following the original test date
 - Remediation as prescribed by program officials
 - Projects when applicable are scored as unit tests on the grading procedure sheet for the course
 - Quizzes on image evaluation and or anatomy ID when applicable will be averaged and recorded as a unit test grade on the grading procedure sheet
 - Other rules apply as stated in the syllabus

Policy: 1985

Revised: 1989, 1992-1994, 2001-2003, 2005, 2007, 2008, 2009, 2010, 2011, 2013, 2015

CLINICAL SUPERVISION OF STUDENTS

During the clinical radiography courses of the program, all students are under direct supervision until a student achieves and documents competency on a given procedure. The following require direct supervision at all times: mobiles, surgical, fluoroscopic procedures not requiring radiographic images, emergency room procedures or other procedures when performed in a room remote from the main imaging department.

DIRECT SUPERVISION

Direct supervision requires the following parameters:

- A qualified practitioner* be present in the examining room during the radiographic procedure
- A qualified practitioner* reviews the procedure and evaluates the patient's condition in relation to the student's achievement and knowledge
- A qualified practitioner* reviews and approves the procedures.

INDIRECT SUPERVISION

Students who have achieved and documented competency of a given procedure may perform that procedure under indirect supervision of a radiographer*.

- Indirect supervision requires that a qualified practitioner* be available for immediate assistance
- Immediate assistance means that a qualified practitioner* is present in the room adjacent to where the procedure is being performed

REPEAT EXPOSURES

When repeat exposures are necessary a qualified practitioner* must be present in the examining room, and the student must fill out **Form F-31** which is located in the examining room.

MOBILE, SURGERY, ER/ED, PEDIATRIC procedures

When performing a mobile, surgery, ER/ED, or pediatric procedure, a qualified practitioner* must be present in the examining room.

It is the student's responsibility to insure that proper clinical supervision prevails.

- Failure to comply will result in disciplinary action
- Report to a program official whenever asked to perform an examination, which violates this policy.

ENERGIZED LABORATORIES

The Radiologic Sciences Program has two energized laboratories. One a Computed Radiography (CR) lab, the other is a Digital Radiography (DR). The CR lab has four way floating table top, with 90-15 degree table tilt, and an upright bucky. The generator for the CR lab has method to disable the radiographic tube. This feature was designed to allow students to work independently within the lab without supervision of a Radiologic Sciences faculty member so that students cannot make exposures. The DR lab has a stationary table and upright bucky with an interchangeable DR panel, and two chargeable batteries for the DR panel. This lab also incorporates a PACS system into the lab. The generator for the DR lab is password protected to not allow exposures by students without the supervision of a Radiologic Sciences faculty member.

Safety Rules of the lab:

1. The Radiologic Sciences labs are always locked except at times when classes are scheduled for the rooms.
2. Students are required to wear a dosimeter during all radiography course labs.
3. Students are not allowed to stand in the doorway of the radiographic room while exposures are being made. This is to prevent radiation exposure from scattered radiation.
4. Students must get permission from a faculty member to be in the lab when class is not in session. The faculty member must make sure the generator is disabled in the CR lab, and DR lab is password protected.
5. Students are not allowed to make exposures in the lab without supervision of the assigning faculty member.
6. Students are not allowed to be in the radiographic room when exposures are being made.

** Qualified practitioner: one which is credentialed and in good standing in radiography, radiation therapy, sonography or nuclear by the American Registry of Radiologic Technologists (ARRT) or appropriate certifying agency, or holds a current license to practice radiography, radiation therapy, or nuclear medicine in the state of Louisiana.*

Policy: 1992

Revised: 1994, 1997, 1999, 2003, 2007, 2016

COMMUNICABLE DISEASE

Communicable diseases vary in their virulence, duration, mode of infection, and affects. In order to fully protect students, patients, and clinical staff, the student should do the following:

- Suspicion of exposure or contraction of any of the diseases (conditions) listed as a reportable disease by the state of Louisiana requires an immediate physician notification
 - If diagnosed with a reportable disease (conditions) and determined by their physician to be of short duration which may be transferred by air or contact
 - Must follow physician's recommendations with regard to attendance of all RADS courses
 - If diagnosed with a reportable disease that is of relatively long duration, a written diagnosis must be submitted to program officials
 - Continuation in the RADS clinical courses is permitted with proper counsel from the infection control nurse and/or the department of the CES
 - Depending on the severity of the disease, the type of the disease and the student's physician, the student may be required to withdraw from the clinical radiography course
- Students are required to adhere to their physician's course of treatment. Failure to do so will result in disciplinary action.
- The student's confidentiality will be protected to a certain degree. This will depend on what the disease is and if it will affect the health and welfare of others.

The state of Louisiana has listed those diseases, which are reportable as communicable diseases. The current list of reportable diseases is as follows:

Amebiasis	Lymphogranuloma Venereum
Acquired Immune Deficiency Syndrome (AIDS)	Malaria
Blastomycosis	Measles (Rubeola)
Botulism	Meningitis, other bacteria or fungal
Campylobacteriosis	Mumps
Chancroid	Mycobacteriosis, atypical
Chlamydial Infections	Neisseria meningitis infection
Cholera	Pertussis (whooping cough)
Cryptosporidiosis	Rabies (animal & man)
Diphtheria	Rocky Mountain spotted fever
Encephalitis (arthropod-borne) (specify type)	Rubella (Congenital Syndrome)(German Measles)
Enterococcus (infection: resistant to vancomycin)	Salmonellosis
E. Coli 0157:H7 infection	Shigellosis
Gonorrhea	Staphylococcus aureus (infection: resistant to methicillin/oxacillin or vancomycin)
Haemophilus influenzae infection	Streptococcus pneumoniae (infection: resistant to penicillin)
Hemolytic - uremic syndrome	Syphilis
Hepatitis, acute (A,B,C, other)	Tetanus
Hepatitis B carriage in pregnancy	Tuberculosis
Herpes (neonatal)	Typhoid Fever
HIV infection	Varicella (Chicken Pox)
Legionellosis	Vibrio infections (other than cholera)
Lyme disease	

FAILURE TO COMPLY WITH THIS POLICY WILL RESULT IN DISCIPLINARY ACTION AS DETERMINED BY THE RADIOLOGIC SCIENCES ADVISORY COMMITTEE.

For additional information:

<http://dhh.louisiana.gov/index.cfm/page/299>

[Communicable Disease Booklet](#)

<http://dhh.louisiana.gov/assets/oph/Center-PHCH/Center-CH/infectious-epi/InfectionControl/posters/CommunicableDiseaseChart.pdf>

Policy: 1989

Revised: 1994, 1998, 2000, 2003

Community Service/Involvement

The purpose of volunteer requirements throughout the curriculum is to promote the concept of service as a health care professional. The requirement of community service/involvement hours provides service and interaction with the community, as well as exposure of the radiologic sciences program. Voluntary service is a non-reimbursed contribution to the welfare of others in the Radiologic Sciences program, the University, and the community.

COURSE	Number of hours required	Reporting Method
RADS 355	6	Student Self-Report form F-52
RADS 356	6	Student Self-Report form F-52
RADS 461	6	Student Self-Report form F-52
RADS 467	6	Student Self-Report form F-52

The student will select an agency and/or an event to submit for approval to the RADS Program Director or Clinical Coordinator, prior to the scheduled event.

Service/Involvement maybe direct patient care, indirect patient care, and health care related walks.

- 1 hours for every hour of service/involvement

Suggested activities for community service/involvement:

- Direct Patient Care –
 - Taking vital signs at:
 - Assisted living, long-term care facilities, etc.
 - Calcasieu Community Clinic
 - Health fairs
- Indirect Patient Care - hours for every hour of service/involvement
 - Checking patients in at a clinic/health fair
 - Visiting public facilities with therapy dogs, or transporting animals for surgery
- Health Care Related walks –
 - Participating in actual walk –
 - Volunteering at the walk (working booths, handing out water/foods, registration, etc.) hours for every hour of service/involvement

Policy 2018, Revised 2019

COMPETENCY BASED CLINICAL EVALUATIONS

Evaluation of the student's performance on specific *radiographic examinations* is part of each clinical radiography course. Competency based clinical evaluations are one aspect of the grading system for the clinical radiography courses. Competency based clinical evaluations involve the following types of performance evaluations:

- **Competency evaluation**
- **Proficiency evaluation**
- **Documentation of competency maintenance**
- **Merit competency evaluation (optional)**

Patient evaluation prior to the request for any performance evaluation is prohibited

RADIOGRAPHIC EXAMINATIONS

A radiographic examination is a series of radiographic exposures of an anatomical part sufficient to permit diagnostic evaluation of that part. There are two types of radiographic examinations with regard to *competency evaluations*. They are module I, and **module II** examinations. Specific positions/projections included in the evaluation are stated in *Appendix I*. The ARRT competencies include general patient care requirements (CPR*, Vital Signs, Sterile and Aseptic Technique, Venipuncture*, Transfer of Patient, and Care of patient medical equipment), which are evaluated as part of each competency evaluation on a radiographic examination. Completion of all the program competency evaluations will satisfy all ARRT requirements for examination eligibility. *Evaluated separately

MODULE I EXAMS

- Mandatory
- Performance evaluated on patients in clinical setting
- Examinations listed in *Appendix I*

MODULE II EXAMS

- Mandatory
- Performance evaluated on patients in clinical setting or by **simulation**
 - Simulation involves performance evaluation on a live subject (not an actual patient) with the exposure simulated
 - Not preferred performance evaluation method
 - Limited for up to 15 of the examinations listed
 - Cautiously requested by the student
 - May need to simulate at a later date due to exam availability
 - Only to meet requirements for currently enrolled clinical radiography course
 - Must be requested prior to the last two weeks of a clinical radiography course
 - Evaluated by CI, or MSU faculty
 - If unsuccessful, cannot request reevaluation on the same exam on the same day (unless last day of RADS 467)
 - **Must use MSU kVp ranges**
- Examinations listed in *Appendix I*

COMPETENCY EVALUATION

Evaluation of the student's performance of a specific radiologic examination (chest, abdomen, wrist, etc.)

- Initiated by student or faculty member, (if initiated by a Faculty member, inform the student they are being evaluated before the examination begins)
 - The examination or procedure must have been previously covered
 - In a Radiographic Procedure course and laboratory
 - *Appendix I* lists examination and/or procedures and the course in which it is taught
 - Student must be *totally unassisted* while performing the requested procedure for evaluation
 - Selection of Evaluator should be in the following manner
 - First ask CI, MSU Faculty
 - If CI, or MSU Faculty not available, ask the Assistant CI
 - If Assistant CI not available, the student may perform the evaluation with a staff radiographer
- It is the responsibility of the student to generate the necessary form for the evaluator
 - Log in via www.e-value.net
 - Click on the Case Log icon
 - Select add new; make necessary selection for the procedure being evaluated (select procedure either *Evaluation*

or Proficiency); click add procedure

- **If a CI or MSU faculty is performing the evaluation, the evaluation will be completed on-line via the e-value system the form you generated in the previous step. See Form F-10** (competency/proficiency evaluation form) for items you will be evaluated on, (sections III and IV of Form F-10 are only evaluated on applicable examination/procedures as specified on Appendix 1)
- **If a technologist is performing the evaluation, a paper evaluation is completed using Form F-11** (competency checklist for staff radiographers and assistant CI's) (Student will be held responsible for assurance that images produced meet the established evaluation criteria)
- **A minimum of 2 module I competency evaluations must be done by the CI or MSU Faculty during each clinical radiography course, except RADS 467 and it is 1 module I**
 - **The CI or MSU faculty will then complete the evaluation on-line via the e-value system using the form you generated.**
- Certain procedures will have specific competency evaluation forms. The procedures and forms are – Computed Tomography (**Form F- 15**), C-arm or OR Cholangiogram (**Form F- 21**), and Retrograde Pyelogram (**Form F-44**), see these forms for the items you will be evaluated on
- A minimum number of successfully completed competency evaluations is required for each clinical radiography course

Performance Criteria for the Evaluation

- Evaluation is based on the objectives and scoring guidelines stated in *Appendix II* or as specified on the following forms: **Form F-10** (comp/prof. form), **Form F- 11** (comp staff checklist), **Form F-15** (CT comp), **Form F-21** (C-arm or OR Cholangiogram), or **Form F-44** (Retrograde Pyelogram)
- Images produced must meet the established evaluation criteria as stated in the Evaluation Criteria from the required positioning textbook
- The student will perform the entire CES routine, however, only evaluated on the projections/positions listed on *Appendix I*, except for radiation protection and patient care
 - Radiation protection and patient care are evaluated on all projections/positions in the area of procedure management of **Form F-10**
- Successful completion means the student received a score of 90% or better
 - This means the student has demonstrated competency of the examination and receives a score of 10 pts on the grading procedure sheet for the course
 - Continued competency is established through the proficiency evaluations and the documentation of competency maintenance (Form F-43)
 - Successfully completed evaluations over the minimum number required for the course are applied to the minimum for the next clinical radiography course
- A score below 90% means the student was unsuccessful on the competency/proficiency/merit evaluation, and must be re-evaluated
 - 5 pts will be recorded on the grading procedure sheet for the course
 - A score of "0" on any area of the evaluation results in an unsuccessful evaluation, regardless if the overall score is 90% or better (evaluation must be completed)
 - The student is required to complete the prescribed remedial action (see remedial action policy)
 - Remedial actions not completed as prescribed or within the established time frames will result in changing the 5 pts to 0 pts (see remedial action policy)
- All unsuccessfully completed evaluations are counted in the course in which they were attempted
- There is an established maximum number of unsuccessful competency/proficiency evaluations for each course
 - When maximum number of unsuccessful competency/proficiency evaluations is exceeded the student will receive an automatic failure of the course

PROFICIENCY EVALUATION

Evaluation of the student's performance on an examination in which competency has been previously demonstrated, student evaluated while performing totally unassisted. Proficiency evaluations can be performed at any time starting with RADS 355 at the discretion of the Clinical Instructor; however, there are no semester requirements until RADS 461.

- Initiated by student or Faculty Member
 - Evaluations performed on module I or module II examinations
 - Exams may be evaluated for proficiency **only one time, unless initiated by the Clinical Instructor**
 - Beginning with RADS 461, there will be a minimum semester requirement for proficiency evaluations.
 - Any successfully completed proficiency evaluations over the minimum number required for the

course are applied to the minimum for the next clinical radiography course.

- If initiated by a Faculty member
 - inform the student they are being evaluated before the examination begins
- If initiated by the student, the following applies
 - First ask CI, MSU Faculty, it is the responsibility of the student to generate the necessary form for the evaluator, you will be evaluated according to the items on Form F-10, sections III and IV of Form-F10 are ***not*** completed on proficiency evaluations
- Log in via www.e-value.net
 - Click on the Case Log icon
 - Select add new; make necessary selection for the procedure being evaluated (select procedure - Proficiency); click add procedure,
 - If CI, or MSU Faculty not available, ask the Assistant CI. The student will be evaluated according to the items on the *paper evaluation Form F- 11*
 - If Assistant CI not available, the student may perform the evaluation with a staff radiographer. The student will be evaluated according to the items on the *paper evaluation Form F-11*
 - **The CI or MSU faculty will then complete the evaluation on-line, via the e-value system using the form you generated.**
 - Evaluations are based on the objectives and scoring guidelines stated in *Appendix II* or as specified on **Form F-10** (comp/prof. form)

Performance Criteria for the Evaluation

- Evaluation is based on the objectives and scoring guidelines stated in *Appendix II* or as specified on the following forms: **Form F-10** (comp/prof. form), and **Form F- 11** (comp staff checklist)
- Images produced must meet the established evaluation criteria as stated in the Evaluation Criteria from the required positioning textbook
- The student will perform the entire CES routine, however, only evaluated on the projections/positions listed on *Appendix I*, except for radiation protection and patient care
 - Radiation protection and patient care are evaluated on all projections/positions in the area of procedure management of **Form F-10**
- Successful completion means the student received a score of 90% or better
 - This means the student has demonstrated proficiency of the examination and receives a score of 10 pts on the grading procedure sheet for the course
- A score below 90% means the student was unsuccessful on the proficiency evaluation
 - 5 pts will be recorded on the grading procedure sheet for the course
 - A score of “0” on any area of the evaluation results in an unsuccessful evaluation, regardless if the overall score is 90% or better (evaluation must be completed)
 - The student is required to complete the prescribed remedial action (see remedial action policy)
 - Remedial actions not completed as prescribed or within the established time frames will result in changing the 5 pts to 0 pts (see remedial action policy)
- All unsuccessfully completed evaluations are counted in the course in which they were attempted
- A minimum number of successfully completed proficiency evaluations are required beginning with RADS 459
 - Any successfully completed proficiency evaluations over the minimum number required for the course are applied to the minimum for the next clinical radiography course.
- There is an established maximum number of unsuccessful competency/proficiency evaluations for each course
 - When maximum number of unsuccessful competency/proficiency evaluations is exceeded the student will receive an automatic failure of the course

DOCUMENTED COMPETENCY MAINTENANCE (paper form only)

Students will be required to perform a minimum number of radiographic examinations each semester, in which they have previously demonstrated competency. Completion of the minimum number of radiographic examinations will document competency maintenance. *If all documented competency Maintenance requirements are completed for the semester, the student will be granted 100 points for Section II on the grading procedure sheet for course. If any of the documented competency Maintenance requirements are not completed for the semester the student will receive “0” for section II on the grading procedure sheet for course.* Examinations completed over the minimum number are not carried over to the next semester.

The student will be responsible for achieving the specified number of Documented Competency Maintenance examinations as indicated on *paper forms (Form F-43 (350), (355), (356), (459), (461), and (467))*. It is the student’s responsibility to have their individual *paper form* with them during all clinical assignments. The form will be randomly checked for performance

accuracy by the clinical instructor and/or MSU faculty. Examination(s) may be removed if *not* performed within the established guidelines for Documented Competency Maintenance.

Documented Competency Maintenance Guidelines:

- Can be initiated by the student or faculty member
- Student will be observed while performing an examination
 - Exam will be one in which competency on the examination was previously documented and a completed competency evaluation for the exam is recorded on the e-value system
 - By a supervising technologist present in room
- Performance of the examination will include whatever is ordered
 - For example: 3 view spine series or 5 view
 - Must be performed by student from beginning to end (including all paper work or electronic transmission)
 - Form F-43 must be completed by supervising technologist at the end of the examination
 - Minimum number of examinations in () on Form F-43
 - Must have at least 2 different examinations represented in each body part area when the minimum required examinations is more than 3
- Will perform the examination with little to no assistance (positioning of patient and exposure selection unassisted)
- May repeat one radiograph within the examination/procedure due to positioning of the patient or exposure selection, but must correct error with little to no assistance (if no measurement on original, cannot be counted as a documented competency Maintenance)
- Radiograph(s) to include patient ID (MR #, or X-ray #, and Accession # with applicable)
- Radiograph(s) include student's R or L lead identification marker (must be able to distinguish it could only be an R or L)
- Demonstrate all anatomy in accordance with the established anatomy ID sheet
- Provide radiation protection (collimation, shielding, etc.)
- Complete the examination within an appropriate time limit (dependent on the patient's condition)
- Cannot use 40 + time to achieve documented competency maintenance

MERIT COMPETENCY EVALUATION

Evaluation of the student's performance on examinations which are covered in lecture/laboratory courses, however the examination is not required as part of the module I or module II competency/proficiency evaluation system. Merit competency evaluations are a way for students to demonstrate clinical performance above and beyond what is required and receive extra credit. Merit Competency evaluation forms must be generated in the e-value system as stated under the Competency Evaluations.

- **Optional**
- Limited to 6 successfully completed evaluations per semester and summer session
- Eligible examinations listed on *Appendix I*
- Evaluated by the CI or MSU faculty while observing the student's performance totally unassisted
- Evaluation is based on the objectives and scoring guidelines stated in *Appendix II* or as specified on **Form F-10**
 - Remedial action, estimated skin doses and simulation not applicable
 - Successfully completed evaluations will receive 5 pts each on the grading procedure sheet for the course
 - Only successfully completed evaluations recorded

REMEDIAL ACTION+

Unsuccessfully completed competency/proficiency evaluations require a prescribed remedial action.

- A score below 90% on a competency/proficiency evaluation is an unsuccessfully completed evaluation
 - Recorded as 5 pts on the grading procedure sheet for the course
 - CI or MSU faculty must review the procedure or examination with the student and/or prescribe necessary remedial action within the e-value system
 - Students may view a remedial action via the e-value system.
 - Sign in to www.e-value.net
 - Select the report icon, then under "**Evaluation Trainee Reports** ", next click on **completed evaluations about trainee**, report, then select about trainee, then within "evaluation type" and select F-12 remedial action, click next, then under the "Evaluation Type" select F-12, then click on "View Evaluation"
 - After viewing the appropriate evaluation (F-12), the student **MUST** enter the date (in box at bottom of F-12 form) they are viewing the F-12 form, this verifies the student has reviewed the remedial action
 - Prescription must be completed before a competency/proficiency evaluation can be attempted again on the unsuccessful procedure
- **When viewing the Form F-12, you will be assigned a prescription**
 - Evaluations unsuccessful due to a *radiographic procedure* or *technical error*
 - May require review of the examination/procedure by assigning you to read, perform an experiment, watch an audiovisual, physical demonstration by the CI or MSU Faculty, observation of successful performance on the failed projection(s)++, and/or written research
 - Written research prescriptions must include bibliographic notation
 - The prescription must be completed within 7 days* or by the end of the current semester if the unsuccessful competency/proficiency was performed during the last week of the semester
- Prescriptions not completed as prescribed or within the established time frames will result in changing the 5 pts to 0 pts on the grading procedure sheet for the course

*Includes days not assigned and weekends

++ Either on a **patient** or by **simulation**, regardless if module I or module II, observed by CI, MSU faculty or Assistant CI

+ Not applicable to merit competency evaluations or Documented Competency Maintenance

COMPETENCY/PROFICIENCY EVALUATION REQUIREMENTS BY COURSE

Each clinical radiography course has a minimum requirement of successful *competency evaluations* from module I, *competency evaluations* from module II, *proficiency evaluations*, and *documented competency maintenance*. Students are encouraged to request *competency and proficiency evaluations* on more than the minimum required for each clinical radiography course. Failure to meet the minimum requirements results in failure of the course, regardless of grade calculation. Each clinical radiography course also has an established maximum of unsuccessful competency/proficiency evaluations, when exceeded results in failure of course, regardless of grade calculation. ***A minimum of 2 competency/proficiency evaluations must be done by the CI or MSU Faculty during each clinical radiography course.***

RADS 350 – CLINICAL RADIOGRAPHY I

- 4 Competency Evaluations from Module I (2 completed by Midterm)
- 2 Competency Evaluations from Module II (1 completed by Midterm)
- Documentation of Competency Maintenance (see form F-43/350)
- Maximum number of unsuccessful competency/proficiency evaluations = 20****

RADS 355 – CLINICAL RADIOGRAPHY II

- 7 Competency Evaluations from Module I (3 completed by Midterm)
- 5 Competency Evaluations from Module II (2 completed by Midterm)
- Documentation of Competency Maintenance (see form F-43/355)
- Maximum number of unsuccessful competency/proficiency evaluations = 25****

RADS 356 – CLINICAL RADIOGRAPHY III

- 7 Competency Evaluations from Module I (3 completed by Midterm)
- 7 Competency Evaluations from Module II (3 completed by Midterm)
- Documentation of Competency Maintenance (see form F-43/356)
- Maximum number of unsuccessful competency/proficiency evaluations = 25****

RADS 459 CLINICAL RADIOGRAPHY IV

- 4 Competency Evaluations from Module I (2 completed by Midterm)
- 4 Competency Evaluations from Module II (2 completed by Midterm)
- Documentation of Competency Maintenance (see form F-43/459)
- Maximum number of unsuccessful competency/proficiency evaluations = 20****

RADS 461, CLINICAL RADIOGRAPHY V

- 7 Competency Evaluations from Module I (3 completed by Midterm)
- 8 Competency Evaluations from Module II (4 completed by Midterm)
- 5 Proficiency Evaluations (2 completed by Midterm)
- Documentation of Competency Maintenance (see form F-43/461)
- Maximum number of unsuccessful competency/proficiency evaluations = 25****

RADS 467, CLINICAL RADIOGRAPHY VI

- 3 Competency Evaluations from Module I
- 6 Competency Evaluations from Module II
- 3 Proficiency Evaluations
- Documentation of Competency Maintenance (see form F-43/467)
- Other requirements are dependent upon the Specialty/choice area(s) requested by the student and assigned by the clinical coordinator; these requirements are distributed to the student depending on their assignment

*automatic failure of course if over this number, failure of the course is also possible at a number lower than this if other areas used in calculating the clinical grade are low (see Grading Clinical Radiography course)

Policy: 1983

Revised: 1986, 1990-1992, 1994, 1999, 2003, 2004, 2006-2011, 2013, 2014, 2016, 2018, 2019, 2020

CONDUCT

The University expects all students to obey the law, to adhere to the rules and regulations of the University, to fulfill contractual obligations and to maintain integrity and a high standard of honor in scholastic work. The Code of Student conduct for MSU which can be found in the MSU Student Handbook located at www.mcneese.edu/policy and then click on Handbook policy.

Student enrolled in clinical radiography courses will:

- Perform radiological examinations only with the written orders from a physician
 - If performs an examination without any orders from a physician, ~
 - If performs additional examinations other than what was order by the physician*~
 - If performs the incorrect side when there are right and left body parts*~
 - If performs incorrect procedure as a result of not obtaining proper patient history*~
- Report to the clinical assignment in an alert condition
- Not be in possession of drugs, liquor, or weapons, nor engage in their use while on clinical assignments, *~
- Not engage in conduct which violates the Clinical Education Setting employee code of conduct , ARRT code of Ethics *~
- Not chew gum while on clinical assignment
- Transport patients only when accompanied by a technologist, or in situations when the technologist is within audible or visual distance
- Verify patient identification prior to performing a radiographic procedures*~
- Not sleep while on clinical assignments*
- Not post any information from the CES on social media, including pictures of self, patients, or others while at the CES,*~
- Not engage in theft of any articles from the Clinical Education Setting, or the University *~
- Not leave patients unattended while undergoing diagnostic procedures
- Not hold patients during radiographic exposures
- Not fight or attempt to injure others while at the Clinical Education Setting *~
- Not accept any type of gratuity or "tip" from a patient or a patient's family
- Not destroy property *~
- Not clock in or otherwise fill in attendance record of another student *
- Not abuse patients physically or verbally *~
- Not study for other courses while on clinical assignments
- Not smoke (E-cigarettes, Vapors, etc.) in areas where it is prohibited while on clinical assignments
- Not leave the assigned areas unless instructed to do so
- Not falsify records *~
- Not use profanity while on clinical assignment*~
- Not use employee lounges (except for lunches)
- Not use cell phones

THREE VIOLATIONS OF THE ABOVE WILL RESULT IN DISCIPLINARY ACTION BY THE RADIOLOGIC SCIENCES ADVISORY COMMITTEE

** Results in the student being placed on probation immediately without prior violations*

~Results in a disciplinary action more serious than probation when it is determined to be a violation of more serious consequences by the Radiologic Sciences Advisory Committee, or it is a repeated violation

Policy: 1982

Revised: 1984, 1989, 1992, 1994, 1996-1999, 2003, 2006, 2007, 2010, 2013, 2014, 2018, 2019

CONFIDENTIAL INFORMATION

The university and the CES's maintain records that are confidential in nature.

- Students will come in contact with protected health information (PHI), this information must be appropriately safeguarded according to the Health Insurance Portability and Accountability Act (HIPAA)
- All information pertaining to the CES, its policies, personnel and/or patients are confidential Requests for information concerning a patient should be referred to the Supervising Technologist or the CI
- Students assigned to some CES's may be required to sign confidentiality statement prior to assignment or as part of the CES orientation process
- Photographs within the radiology department are not permitted without authorization from the hospital's communications department.
- Posting of any information from the CES on social media is prohibited
 - Photographs
 - identification badges
 - patient history and protected health information
 - text indicating the CES patient or employees
 - encompassing while at the CES or away from CES
- The university in accordance with the Family Education Rights and Privacy Act (FERPA) states
 - Students have access to their educational records within a reasonable time after requesting
 - Student records with certain exceptions, will **not** be released without prior consent
 - Only directory information can be released
 - Directory information is considered name, local and permanent address, telephone listing, major field of study, dates of attendance, etc.
 - Prohibiting the release of directory information can be made in writing to the RADS program office
- Clinical radiography course folders maintained at the CES are only to be removed or distributed by the CI or MSU faculty
 - Students may not copy the records themselves
- Student(s) reviewing other student's folder is a violation of the confidentiality of that student's records
- Student(s) are required to maintain up-to-date directory and contact information with the radiologic sciences office
 - Any changes in this information must be submitted immediately to the radiologic sciences office
- Students(s) are required to provide faculty with up-to-date e-mail addresses
- Any violation of the above will result in disciplinary action by the MSU Radiologic Sciences Advisory Committee

Policy: 1992

Revised: 1984, 1992, 1994, 2003, 2004, 2007, 2011, 2014

DISCIPLINARY SYSTEM

The policies contained in this handbook are necessary to insure consistency and orderly operation as well as to protect the rights and safety of all concerned. Disciplinary action for a policy violation will occur ***whenever*** program faculty is made aware. Disciplinary action of policy violation will result in a ***written warning, probation, suspension or dismissal***, unless specifically stated within the policy. Repeated violations of any policy will result in the disciplinary action being determined by the radiologic sciences advisory committee.

- **All disciplinary actions are to be documented on Form F-4**
 - Disciplinary Action Report submitted highlighting:
 - Expected behavior or performance with respect to violation
 - Length of the probation or suspension, when applicable
 - Consequences for not fulfilling those expectations

Written Warning

- The clinical instructor or an instructor from McNeese State University will provide written warning(s) of policy violation(s) to a student, unless specified for another immediate disciplinary action
 - Written warnings are placed in the student's clinical folder
 - Written warnings are cumulative from one clinical radiography course to another
- After 3 repeated written warnings of the same policy violation(s), the student will be referred to the radiologic sciences advisory committee for disciplinary action other than written warning

RADIOLOGIC SCIENCES ADVISORY COMMITTEE ACTIONS MAY INCLUDE, BUT NOT LIMITED TO THE FOLLOWING:

Probation:

- 3 written warnings of the same policy violation
- Items listed on the conduct page marked with an asterisk (*) warrant probation without prior written warnings
- The length of probation will be for the remainder of the semester in which the violation occurred, unless the violation occurs within the last two weeks of the clinical assignment, and then the probation is applied to the next semester.

Suspension

- When probation(s) has proven to be inadequate
- Some suspensions are warranted without prior probation
- Length of suspension is 2 days from the clinical radiography course
 - Days missed will be counted as absences from the clinical radiography course
 - Work due during this absence will not be accepted
 - Test(s) missed may not be made up
- ***when it is determined to be a violation of more serious consequences by the Radiologic Sciences Advisory Committee, or it is a repeated violation***

Dismissal:

- When previous disciplinary action(s) has proven to be inadequate
- Dependent on the type of violation
 - May be subject to immediate dismissal without prior disciplinary action being taken
- Any student dismissed may be ineligible for reapplication to this program.
- After three suspensions
- ***When it is determined to be a violation of more serious consequences by the Radiologic Sciences Advisory Committee, or it is a repeated violation***

Policy: 1986

Revised: 1987, 1992, 1994, 1997, 2003, 2007, 2010, 2013, 2018

DOSIMETRY SERVICE

Students will always wear a dosimeter while attending clinical assignments and energized laboratory sessions

- Worn on the collar
- Replaced quarterly
 - Students not providing dosimeter within 2 days for exchange following verbal request during the semester will not be permitted to attend the CES until the exchange
 - Students not providing dosimeter for within 2 days for exchange following verbal request at the close of the semester will prevent student from being able to start the next clinical radiography course
 - Students not providing final dosimeter prior to their last final examination will result in grade not being submitted for final clinical radiography course until dosimeter is submitted
- Radiation monitoring records are kept on file in the RADS office
 - Distributed quarterly for individual exposure awareness (student's signature or initials)
 - Students can request a copy of their reading from the Radiologic Science office
 - Excessive reading on dosimeter
 - A reading above 1.25 rems per quarter
 - Program -- should not exceed 1.25 rems per quarter
 - NCRP and State -- cannot exceed 3 rems per quarter
 - If exceeded, the following steps should be observed:
 - Written verification on **Form F-5** justifying receiving such an exposure
 - CI where the student is assigned will, for the next quarter, physically observe the student during his/her clinical assignments
 - Exposure readings of greater than the allowable limits by the State of Louisiana
 - Require an over-exposure report to be sent to the Louisiana Energy Division and a copy filed with the student's radiation monitoring records and referred to the University Radiation Safety officer for counseling
- If lost
 - A fee may assessed, along with shipping costs
 - student will not be permitted to attend the clinical assignment(s)
 - notification must be immediately to a program official
 - must request to reschedule the all the day(s) missed for another time,
 - must be rescheduled prior to the last day of the semester
 - day(s) missed will not be counted as an absence, as they are required to be rescheduled
 - a second time during a semester, days missed will count as absences
 - In cases when shipping takes more than two days only two days will be counted as absences, in accordance with the Attendance/Tardy policy
- Dosimeters may not be used for employment

Policy: 1984

Revised: 1986, 1989, 1991, 1994, 2003, 2004, 2006, 2013, 2018, 2019, 2020

DRESS CODE AND APPEARANCE

The student uniform is to be worn by all students while in attendance at the Clinical Education Setting. When the assigned area requires something other than the student uniform (i.e.: surgery, special procedures), the student must arrive and leave the CES in the student uniform.

STUDENT UNIFORM

- Females - all ***navy*** professional uniform or professional scrubs
 - Navy colored -Top/Pant, Top/Skirt, or Dress
 - White lab coat (selected from styles listed below)
 - LANDAU Brand (65% polyester and 35% cotton)
 - Style #'s 3194 WWY, 3155 WWY, or 7535 WWY
- Males - all ***navy*** professional uniform or professional scrubs
 - Navy colored -Top/Pant
 - White lab coat (selected from styles listed below)
 - LANDAU Brand (65% polyester and 35% cotton)
 - Style #'s 3124 WWY, 3140 WWY, or 7551 WWY
- Pants not to drag the floor or be frayed, or be of cargo style
- Pants of hipster or low style are permitted when anatomy is not visible when bending
- Professional or Athletic Shoes (comfortable) and solid colored socks, (no Clogs or Crocs)
- MSU patch (sold in bookstore) to be worn on left shoulder on ***all*** uniforms and lab coats
- The lab coat must be worn
 - When out of the imaging department
 - Surgical assignment when not involved in a surgical procedure and must be buttoned
- Optional –long sleeve tee shirt white or navy, crew neck
- A white or navy tee shirt *may be required* under the uniform (determined on an individual basis)
 - The tail of the tee shirt shall not be visible under the uniform top

THE FOLLOWING RULES WILL BE OBSERVED:

- Clean and well-pressed uniforms at all times
- Uniforms must be navy and not faded in color
- Clean and polished shoes
- Hair clean, neat, and pulled out of the way and under control
- Nails clean and cut short (clear polish only); no artificial nails
- Neatly trimmed beards and mustaches are permitted
- The personnel monitoring devices (dosimeter) must be worn at all times
- MSU name pin (sold in bookstore, 2 are suggested) must be worn and, where provided, the CES ID
 - No magnetic name pins permitted
- Make-up must be in moderation
- Fragrance -- keep in mind that a heavy fragrance may be offensive to the very sick patient but an effective deodorant is a must
- Jewelry is limited to the following
 - Earrings, if worn, must be a single matching pair (one in each ear); no large or dangling earrings and no hoops, wedding band and/or engagement ring, Wrist watch with a second hand
- No visible tattoos
- No sweaters or jackets -- only lab coats are acceptable
- Surgical Attire is not permitted outside the CES it is the property of the CES
- Pb markers and personal technique notebook are to be with you at all times

ANY STUDENT VIOLATING THE DRESS CODE WILL BE REQUIRED TO LEAVE THE CES

- Time missed will be considered an absence

Repeated violations of the dress code will warrant appropriate disciplinary action.

Policy: 1982

Revised: 1984, 1987-1998, 2000, 2003-2005, 2007, 2008, 2010, 2011, 2013, 2015, 2016

EARLY RELEASE FROM A CLINICAL RADIOGRAPHY COURSE

The clinical radiography courses are completed on documented achievement of the stated objectives and competencies for the course. A student may request consideration for early release of a clinical radiography course only one time. To make this request the student must have:

- Completed all competency/proficiency evaluation requirements for program
- Completed all unit tests with a grade of "C" or better
- Submitted a written request to the Program Director
 - By mid-term of the semester involved

Following the approval of the request for consideration of early release, the student must:

- Unit testing
 - Any remaining unit tests must be completed with a grade of "C" or better
- Specialized objectives
 - All performance evaluations for required specialty/choice objective areas must be completed (**Forms F 16-20, 22, 35**)
 - May challenge rotating through the above stated areas by successfully completing a performance evaluation of the specialty/choice area
- Pass an exit testing session
 - On all exams listed on the Summary of Exams **Form F-13**
 - Adhere to the same rules and regulations as competency evaluations
 - Exams may be simulated regardless if it is a Module I or Module II
 - Only one attempt for each examination
 - After one unsuccessfully evaluation, early release is not considered

When the student successfully completes the above

- The following clinical radiography course requirements will be waived
 - Rotational evaluations (F-9)
 - Record keeping
 - Clinical participation requirements
 - Clinical instructor evaluation of the student.

*Policy 1989
Revised 1994, 1997, 2003, 2007*

EVALUATIONS

The following evaluations are used to evaluate the student performance and/or various aspects of the program.

CLINICAL PERFORMANCE EVALUATION

The student will

- Be evaluated at the end of each rotational assignment
 - unless assigned to a different radiographer for a portion of the rotation
 - When a rotation exceeds two weeks, one evaluation will be done every two weeks
- Be responsible to providing generating the necessary form (**Form F-9**) via www.e-value.net (learning module icon) to the assigned radiographer
- Receive up to 100 pts on the grading procedure sheet for clinical radiography courses for each evaluation
- Assure the assigned radiographer has completed form within one week* or it may result in the score of "0"
- The completed form will then be reviewed and recorded on the grading procedure sheet by the CI

EQUIPMENT MANIPULATION

All students are to be knowledgeable of the equipment at each CES.

- Equipment manipulation evaluation form (**F-24**)
 - Equipment manipulation evaluation forms are to be completed for all radiographic, radiographic/fluoroscopic equipment in the department, and the mobile equipment, that you are assigned
 - the C-Arm† (**Form F-21**, and indicate equipment manipulation in procedure box)
 - ***All required equipment manipulation evaluations are to be completed during the first assignment through the rotation at each assigned CES, per semester***
 - Required equipment manipulation forms not completed will result in a score of "0"
 - Students must be ***familiar with all the different types*** of equipment in the department (whether assigned or not), as the competency/proficiency evaluations may be performed on equipment without a prior assignment
 - Students cannot refuse to perform a competency/proficiency evaluation, or appeal an unsuccessful competency/proficiency evaluation because of lack of equipment manipulation knowledge
 - Must be completed by assigned technologist, CI, Assistant CI, or MSU faculty
 - The completed form will then be reviewed, scored and recorded on the grading procedure sheet by the CI
 - % Of yes responses based on total number of responses and that % of 10 is the score, for example: 22 total responses with 20 yes responses = $20/22=90\%$; 90% of 10pts=a score of 9 pts

EVALUATION OF THE STUDENT by CLINICAL INSTRUCTOR

Students enrolled in clinical radiography courses will be evaluated by the clinical instructor.

- Twice during each clinical radiography courses, except the summer session will be once

Form F-26 Completed evaluation reviewed in counseling session at the discretion of the CI. Student receiving a score of less than 50 must have a counseling session.

TECHNOLOGIST EVALUATION

At the close of each semester, the student will evaluate each technologist they were assigned to each semester via www.e-value.net, under the evaluation icon-"initiate ad hoc Evaluation" select Form F-6 "Who did you work with"

CLINICAL EDUCATION SETTING EVALUATION

At the close of each semester, the student will evaluate each CES to which they are assigned via www.e-value.net, under the evaluation icon-"initiate ad hoc Evaluation" select Form F-7

CLINICAL INSTRUCTOR EVALUATION

At the close of each semester, the student will evaluate each the CI to which they are assigned via www.e-value.net, under the evaluation icon-"initiate ad hoc Evaluation" select Form F-8

ADVANCED AREA/CHOICE ASSIGNMENT CLINICAL OBJECTIVE EVALUATIONS

Choice clinical assignments include Radiography, Radiography/Fluoroscopy, Mobile/Surgery, Bone Densitometry, MR, Mammography, Nuclear Medicine, Radiation Oncology, Sonography, Computed Tomography, and Vascular Interventional. The forms listed below specific to each area are generated via www.e-value.net (learning module icon)

- **For choice assignment areas complete form F-9 and in these areas also incorporate the following forms; Nuclear Medicine F-16, Radiation Oncology F-17, and Sonography F-18.**

Advanced Area Assignments (RADS 467)

The forms listed below specific to each area are generated via www.e-value.net (learning module icon)

- For Advanced Area Rotation Assignment Form F-9 every two weeks, and the following evaluations depending on area assigned: Mammography/Bone Densitometry F-23/F-35, Computed Tomography F-47, Magnetic Resonance F-48, ,

Vascular & Cardiac Interventional Technology F-19

For Forms F-16-19, F-22-23, F-35, F-46, F-47, F-48

- Submit the completed form to the CI within one week* or it will result in the score of "0"
- The completed form will then be reviewed and scored by the CI
 - Scoring, is worth up to 100 points
 - % Of yes responses based on total number of responses and that % of 10 is the score, for example:
 - 22 total responses with 20 yes responses = $20/22 = 90\%$
 - Absences in these areas will result in point reductions on the evaluation for that area
 - 1 – 16 hrs of absences = $\frac{1}{2}$ evaluation score
 - 17 hrs or more of absences = 0 pts for the evaluation

† *If assigned to another CES for a surgery assignment can do equipment manipulation evaluation at their assigned CES*

* **One week - 7 (seven) days including days off**

Policy: 1984, Revised: 1986-1994, 1997, 1998, 2001, 2003, 2005, 2007, 2008, 2011, 2014, 2016, 2019, 2020

EXIT INTERVIEW

As an intrinsic evaluation factor for the Radiologic Sciences program, Department of Radiologic & Medical Laboratory Science, and the College of Nursing and Health Professions, an exit questionnaire and/or interview is **required** of all graduating students

- Evaluation forms for the department and the college are distributed after mid-term the final spring semester
- Evaluations for the program are distributed prior to the last final examination
 - The student has the *option* to schedule an interview with program officials in addition to completing the evaluation form
- All evaluations must be returned prior to graduation
- Evaluations not submitted could possibly delay the student's graduation

Policy: 1991

Revised 1997,2003, 2013, 2016

EXTENSION OF A CLINICAL RADIOGRAPHY COURSE

A student may request extension of a clinical radiography course.

- Requires successful completion of all previous clinical radiography courses
- Request made in writing to the Program Director
 - No later than fourteen (14) days before the close of the semester involved
 - Seven (7) days before the close of the summer session
- Reviewed by the Radiologic Sciences Advisory Committee
 - Approval or rejection will be given to the student one week from the date of the request
- The maximum extension considered is four (4) weeks

Policy: 1992

Revised: 1994, 2003

FLUOROSCOPY

Students will not use fluoroscopy for the purpose of checking the positioning of a patient for any clinical radiography course. Selected fluoroscopic procedures can be a part of the rotational assignment.

- Fluoroscopic procedures are performed in accordance with the policy of the CES
- All fluoroscopic procedures not requiring radiographic images require direct supervision
- Any violation of the above will result in disciplinary action by the MSU Radiologic Sciences Advisory Committee

Policy: 1984

Revised: 1997, 2001, 2003

GRADING - CLINICAL RADIOGRAPHY COURSES

These courses are designed as an opportunity for attainment and documentation of clinical competence. The program defines clinical competency as completion of all clinical radiography courses with a grade of "C" or better. Grades for clinical radiography courses are based on *performance evaluations, documented competency maintenance, rotational evaluations, recording keeping, clinical participation, clinical instructor evaluation of the student, unit testing (when required, and writing enriched assignments (when required)*. See grading procedure sheets Form **F-45 (350) (355) (356) (459) (461) and (467)**. The final grade for clinical radiography courses is based on the following percentages:

RADS 350, 356, 459 and 461

- **50% - performance evaluations, see competency evaluations policy**
 - competency evaluations
 - proficiency evaluations
 - Merit competency evaluations
- **5% Documentation of Competency Maintenance requirements for the semester, see competency evaluations policy)**
- **3% - Rotational Evaluations, see evaluations**
 - Clinical performance evaluations
 - Advanced Clinical Evaluations
 - Equipment Manipulation Evaluations
- **5% - Record keeping, see clinical radiography course – record keeping**
- **10% - Clinical participation, see attendance/tardy policy**
- **7% - Clinical instructor evaluations of the student, see evaluations**
- **20% - Unit tests, Case Analysis Presentation (350 only), Oral Presentation (459 only), Community Service (RADS 356 and RADS 461 only), and Quizzes, see clinical radiography course – unit testing, (submission of corrected professional paper RADS 356 only)**

RADS 355

- **40% - performance evaluations, see competency evaluations policy**
 - competency evaluations
 - proficiency evaluations
 - Merit competency evaluations
- **5% Documentation of Competency Maintenance requirements for the semester, see competency evaluations policy)**
- **3% - Rotational Evaluations, see evaluations**
 - Clinical performance evaluations
 - Advanced Clinical Evaluations
 - Equipment Manipulation Evaluations
- **5% - Record keeping, see clinical radiography course – record keeping**
- **5% - Clinical participation, see attendance/tardy policy**
- **7% - Clinical instructor evaluations of the student, see evaluations**
- **15% - Unit tests and Community Service, see clinical radiography course – unit testing and community service policies**
- **20% - Writing Enriched Requirements**

RADS 467

- **55% - performance evaluations, see competency evaluations policy**
 - Clinical Experience Requirements as required by the program for selected ARRT Post Primary Certifications –see individual sheets for assigned areas
 - Merit competency evaluations
- **5% Documentation of Competency Maintenance requirements for the semester, see competency evaluations policy)**
- **3% - Rotational Evaluations and Community service, see evaluations and community service policies**
 - Clinical performance evaluations
 - Advanced Clinical Evaluations
 - Equipment Manipulation Evaluations
- **5% - Record keeping, see clinical radiography course – record keeping**
- **20% - Clinical participation, see attendance/tardy policy**
- **12% - Clinical instructor evaluations of the student, see evaluations**

*Policy 2003,
Revised 2008, 2010, 2012, 2013, 2017, 2019*

HEALTH / INSURANCE

HEALTH SERVICES

The university operates a student health center, for more information <https://www.mcneese.edu/health-services/>

- Nurses are on duty
- Doctors and/or a Nurse practitioner will maintain office hours
 - Extended care for chronic or serious health problems is referred to private physicians and/or public health facilities
 - Students are responsible for payment to those providers

HEALTH INSURANCE / WORKERS COMPENSATION

The program strongly encourage students to have health insurance.

- Selected Clinical Education Settings require assigned student(s) to have health insurance
 - Students must indicate health insurance coverage on the self-reported health form (**Form F-38**)
- Students are not employees of the CES
 - Not covered by employee benefits of the assigned CES
 - Not covered by worker's compensation will assigned to the CES

HEALTH RELATED DOCUMENTATION

Students are required by the radiologic sciences program to provide specific health related documents on an annual basis. Failure to do so will result in suspension from the Clinical Radiography course until proper submission

- A completed self-health form, **Form F-38** is to be submitted prior to each Summer Session, this submission is to be in a PDF or JPEG format and uploaded as instructed.
- Any changes in health condition and medications must be reported to the Radiologic Sciences office and will require an updated Form F-38
 - Results of a PPD for tuberculosis is submitted prior to each Summer Session, this submission is to be in a PDF or JPEG format and uploaded as instructed.
 - If positive, must report to your parish health unit for blood testing with your positive result from skin test and proceed as recommended by the parish TB nurse
 - Results of specified drug screening (prior to First Clinical Radiography Course)
- Hepatitis B immunization or waiver (**Form F-28**)
 - Submitted one time, this submission is to be in a PDF or JPEG format and uploaded as instructed.
- Submit documentation of a seasonal flu vaccine (during each Fall Semester), this submission is to be in a PDF or JPEG format and uploaded on e-value.
- Submit a Release of Medical Information **Form F-42** (prior to First Clinical Radiography Course), this submission is to be in a PDF or JPEG format and uploaded as instructed.

Students are also required to view the following presentations on Moodle (on an annual basis) with regard to workplace hazards

- Universal precautions (power point presentation and testing) (part of program orientation)
- Tuberculosis awareness (power point presentation and testing) (part of program orientation)
- MRI Safety screening (power point presentation, completion of the screening **Form F-51** and testing) (part of program orientation)
- Fire safety (part of CES orientation)
- Hazard materials (chemical, electrical, bomb threats etc.) (part of CES orientation)
- Failure to attend will result in suspension from the clinical radiography course until attendance is documented
- **Document of TJC and OSHA requirements are completed on Form F- 39, and reported to the CES on a semester basis**

Student(s) with latex allergies

- Must inform the CI or program official immediately
- Proper non-latex examination gloves at the CES is the student's responsibility when not provided by the CES
- It is also the student's responsibility to be aware that other items in the imaging area and patient areas may contain latex

Policy: 1994

Revised: 1997, 2001, 2006-2008, 2010, 2012, 2013, 2016, 2017, 2020

HEPATITIS "B" IMMUNIZATION

The Occupational Safety and Health Administration (OSHA) standards state there is an occupational hazard for health care workers – especially when dealing with blood-borne pathogens such as the **Hepatitis B Virus (HBV)**.

- **OSHA standards** require that employers make available the hepatitis B vaccine and vaccination series to employees who come in contact with blood and infectious materials while working
 - The standard fails to specifically include students working in health care settings

PROGRAM POLICY

Students enrolled in the program may come in contact with blood and infectious material while assigned to a CES. Students will need to plan for their own immunization if they desire this means of protection. For some this immunization may have been included as part of your childhood immunizations.

- The program **recommends** that you take part in a Hepatitis B immunization program
 - Immunization includes three injections and/or a blood antibody test
 - Payment and submission of documentation of immunization is the responsibility of the student
- Students choosing not to participate in the immunization or those who have not completed the immunization process, must sign a waiver
 - **Form F-28**
 - Submit the to the Radiologic Sciences program, this submission is to be in a PDF or JPEG format to the designated Radiologic Sciences faculty
- Failure to do so will result in suspension from the Clinical Radiography course until proper submission of one of the above

Policy: 1993, Revised: 1994, 1997, 2003, 2008, 2016

INCIDENT REPORTING

All incidents that occur while on clinical assignment should be reported.

- Shall be reported immediately to the CI and the Clinical Coordinator
- Required to follow the proper procedure for documenting incidents in the CES where the incident occurred
 - See the CI or supervisor for the proper procedure
- All incidents must be documented with the CES and the program officials within one week of the incident
- Any incident not reported by the student according to the above will result in disciplinary action

Policy: 1992, Revised: 1993, 1997, 2003

INCLEMENT WEATHER

If the university closes due to inclement weather, an announcement will be made as early as possible on the radio stations, TV, MSU web-site, etc. in the surrounding areas

- When the university campus is closed, clinical radiography courses are also cancelled
 - If a Code Gray is declared at the assigned CES while in attendance, students are not permitted to leave until an all clear is given
- If the university closes during the day
 - Students will be dismissed from the campus and the CES
- An announcement of elementary and secondary schools closings **does not** include McNeese State University
- If not made before a student must leave for the university campus or their CES
 - Must use good judgment in making a decision as to whether or not to attend
 - If the student does not attend when the university campus is open and operating normally
 - The day is considered as an absence

Policy: 1994, Revised: 1997, 2008

INFORMED CONSENT

Informed consent is a procedure whereby patients may agree to medical intervention or refuse it based on information provided by a health-care professional regarding the nature and possible risks and complications of the intervention.

- Providing this information is usually considered a duty of the physician
 - The physician will be responsible under the doctrine of respondeat superior (Let the Master Answer)
- Students enrolled in the program are **not** permitted to obtain a patient's consent
 - Obtaining informed consent is a responsibility / risk beyond the scope of the student's educational level
- Students are not allowed to sign any forms including, but not limited to, informed consent, or pre and post examination instructions
- Students will be permitted to present information to the patient under direct supervision of a qualified radiographer
- Violations of this policy will be subject to disciplinary action

Policy: 1998

LOUISIANA STATE LICENSURE

To work as a registered technologist in radiography at a hospital, or hospital affiliated clinic an individual is required to hold a valid license granted by the state. To qualify for a state license one must:

- Successfully complete the certification examination administered by the American Registry of Radiologic Technologists (ARRT) in radiography
- Pay associated licensure fees to the Louisiana State Radiologic Technologist Board of Examiners (LSRTBE)

TEMPORARY PERMITS

A temporary license may be requested for individuals who have graduated from an approved program and are awaiting a test date and results from the ARRT.

- Temporary permits are issued one time and one time only
- An unsuccessful completion of the ARRT examination will cancel any temporary permit issued by the LSRTBE
 - In this case, individuals will **not** be able to work at a hospital as a radiographer in the state until a passing score is reported to the LSRTBE

STUDENT EXEMPTION

Students engaged in radiologic procedures from a board (LSRTBE) approved school are exempt from the licensure law while at the CES as an assignment for a clinical radiography course

- Students may not perform radiologic procedures at the CES any other time

Policy: 1986

Revised: 1988, 1997, 2013

LOITERING

Students are requested to be on hospital premises only during clinical assignment hours.

- Visiting with employees or other students who are on assignment is prohibited
- Students will not congregate in offices, halls, other rooms, or leave the clinical area unless instructed to do so.

Policy: 1982

Revised: 1984, 1988, 2003

MALPRACTICE INSURANCE

The State of Louisiana's Public Health and Safety Act 40:1299.39, Part XXI-A assumes student liability coverage by the state. This act is on file in the radiologic sciences program office.

Policy: 1984

MAKE-UP TEST/QUIZ

MAKE-UP TEST POLICY

The policy for making up a test for all **RADS** courses is as follows

- Make-up tests will only be administered in cases of excused absences
- Excused absences are limited to
 - Death (family member)
 - Jury duty and other court appearances (summons)
 - Written doctor's (MD or DDS) excuse/signature required), must document time/date of appointment or dates of illness
 - Natural disaster (must be officially declared by Governor and/or University President)
 - University approved event
- Excuse must be submitted to the course instructor within 3 days of returning to class
- Make-up tests must be arranged within two weeks after absence, and must be completed prior to the final exam period
- The make-up test will not necessarily be multiple choice

MAKE-UP QUIZ POLICY

There will be no make-up quizzes

- Quizzes will not be given to tardy students
- Quizzes will not be graded if the student leaves before the end of class
- In most classes the course instructor will drop one quiz grade when calculating the final course grade

Policy: 1997, Revised 2008

MAMMOGRAPHY MQSA EDUCATION & DOCUMENTATION

The American Registry of Radiologic Sciences (ARRT) considers mammography an area of post primary certification. The program does not require competency in mammography; however, it is an area that may be requested for assignment during RADS 467. The request and completion of the assignment does not mean an individual may perform mammography in a clinical setting after graduation. Mammography performance in the clinical setting requires the facility to adhere to the specific Mammography Quality Standards Act (MQSA) guidelines.

- Graduates from the program currently can meet the *initial* education requirements set by MQSA by electing to and successfully completing RADS 470, completing RADS 467 with a Mammography assignment requested, successfully graduating from the program
- MQSA requires in addition to the initial education requirements that an individual document the performance of at least 25 supervised examinations
 - It is ***possible*** for students to document the MQSA performance requirements for initial training in Mammography following completion of a requested assignment to mammography during RADS 467
 - **Form-F-37** should be incorporated for those individuals pursuing possible mammography certification following graduation
- Letters of documentation for the MQSA initial education requirements should be requested from the program director.

Policy: 1995, Revised: 2002 2004, 2008, 2009, 2011, 2013

MARKERS

Students are responsible for ordering a specified set of R/L lead identification markers with their initials (2-3 initials required) for use in the CES.

- Markers are must be ordered from **PB Markers** (<https://shop.pbmarker.com/1A-1A.htm>) (allow a minimum of 2 weeks for delivery) or call (954 447-5137), or email at pbmarkers@yahoo.com
- The markers you want to order is **"I A Marker"** (see the two bullets below that follow for ordering details)
 - Order one set a Right "R" and Left marker 'L', (Marker A – right, color A- red, Marker B- left, color B – blue)
 - Include first and last initial
 - Click on checkout and continue as directed by webpage
- Must be used on **every** image
- Marker must be visualized (must be able to distinguish it could only be an R or L)(On computed and digital images marker must be visualized with mask present)
 - Correct marker must correspond to the correct side
 - Not obscuring anatomy of interest
 - If all of the above are followed no points are deducted on the competency/proficiency/merit evaluations
- Must have in possession at all times
- Not to be used by another student or radiographer
- If lost
 - Report it immediately to the CI
 - Have two clinical assignment days to locate their markers
 - Must show a copy of order form for new markers to be eligible for future competency/proficiency evaluations until new markers are received
 - During this time, use of the clinical instructor's markers for competency/proficiency evaluations is permitted

Policy: 1982

Revised: 1984, 1985, 1986, 1993, 1994, 1996, 1997, 2003, 2004, 2008, 2013, 2014, 2016, 2018, 2019

MAGNETIC RESONANCE IMAGING (MRI) SAFETY POLICY

Students spend the majority of their observation and clinical experience in the general diagnostic imaging area of the radiology department. However, students will have an opportunity to observe and tour the MRI area, as well as complete a specialty rotation during RADS 461 (1-2 weeks) and an advanced area rotation during RADS 467 (7-8 weeks).

- Prior to the first clinical assignment of the professional phase of the Radiologic Sciences Program (RADS 350), students are required to view the power point on “***MRI Safety: Potential Workplace Hazards associated with Magnetic Wave and Radiofrequency***”, complete the on-line test, and fill out the MRI screening **Form F-51**.

In order to ensure student safety and the safety of personnel and patients in the department, it is important that students respect and follow the rules of MRI safety at all times while in the MRI environment.

- The MRI safety policies and screening requirements for each Clinical Education Setting (CES) must be followed.
- Do not enter the MRI suite unless cleared and accompanied by an MRI technologist.
- Assume the magnet is **always ON**.
- Carrying magnetic items or equipment into the MRI suite is strictly prohibited. These items can become projectiles causing serious injury or death and/or equipment failure.

These items include, but not limited to, most metallic item such as:

- Oxygen tanks
- Wheelchairs
- Carts,
- monitors
- IV poles
- Laundry hampers
- Tools
- Furniture

MRI compliant medical equipment is available for use in the MRI department.

- Personal magnetic items must be removed prior to entering the MRI suite. These include the following:
 - Purse, wallet, money clip, credit cards or other cards with magnetic strips, electronic devices such as beepers/cell phones, hearing aids, metallic jewelry (including all piercings), watches, pens, paper clips, keys, nail clippers, coins, pocket knives, hair barrettes/hairpins, shoes, belt buckles, safety pins, and any article of clothing that has a metallic zipper, buttons, snaps, hooks or under-wires.
- Disclose or ask the supervising MRI technologist or faculty about all known indwelling metallic device(s) or fragment(s) the student may have prior to entering the MRI suite to prevent internal injury.

Injury risks

In addition to the personal items listed, students are advised that any metallic implants, bullets, shrapnel, or similar metallic fragment in the body pose a potential health risk in the MRI suite. These items could change position in response to the magnetic field, possibly causing injury. In addition, the magnetic field of the scanner can damage an external hearing aid, or cause a heart pacemaker/defibrillator to malfunction.

Examples of items that may create a health hazard or other problems in the MRI suite include:

- Cardiac pacemaker, wires, heart valve(s) or implanted cardioverter defibrillators (ICD)
- Neurostimulator system
- Aneurysm clip(s)
- Surgical Metal
- Metallic implant(s) or prostheses
- Implanted drug infusion device
- History of welding, grinding or metal injuries of or near the eye
- Shrapnel, bullet(s) or pellets
- Permanent cosmetics or tattoos (if being scanned)
- Dentures/teeth with magnetic keepers
- Eye, ear/cochlear, or other implants
- Medication patches that contain metal foil (i.e. transdermal patch)

Items that are allowable in the MRI suite, and that generally do not pose a hazard to the student or other persons include:

- Intrauterine devices (IUD's)
- Gastric bypass devices (lapbands)
- Most cerebrospinal fluid (CSF) shunts

Prior to a special rotation in MRI, each facility may require additional medical screening (such as a radiograph of the orbits), which may require a physician's order. For more information regarding MRI Safety, please refer to the American College of Radiology's MR Safety Guidelines available at: <http://www.acr.org/quality-safety/radiology-safety/mr-safety>

NATIONAL REGISTRY

To become a certified Radiologic Technologist in Radiography, R.T. (R) (ARRT) requires successful completion the national certification examination in radiography administered by the American Registry of Radiologic Technologists (ARRT) examination.

- The ARRT examination is a computer based test
 - Eligibility to take the examination follows completion and graduation from the program
 - Applications to take the test are made to the ARRT
 - The applicant will be issued an admission ticket with a 90 day window
 - The candidate may schedule an examination at any point within that window at a test center that has an opening

CONVICTION OF A CRIME (Form F-32)

All potential violations must be investigated by the ARRT in order to determine eligibility. The ARRT will ask have you ever been convicted of a misdemeanor, felony or similar offense in a military court-martial

- You are required to report charges or convictions that have been withheld, deferred, stayed, set aside, suspended, or entered into a pre-trial diversion, or involved a pleas of guilt or no contest (nolo contendere)
- DO NOT report juvenile convictions processed in juvenile court
- DO NOT report traffic citations unless drugs or alcohol was involved
- Individuals may file a pre-application with the ARRT in order to obtain a ruling of the impact of their eligibility for the examination (applications available online, go to the ethics section on www.arrt.org
 - Pre-application may be submitted at any time either before or after entry into an accredited program
 - Further information regarding reporting requirements may be accessed on the ARRT website at www.arrt.org/pdfs/ethics/ethics-review-pre-application.pdf

Policy: 1982

Revised: 1984, 1985, 1986, 1993, 1994, 1996, 1997, 2003, 2004, 2008, 2013, 2014, 2016

ORIENTATION - CLINICAL EDUCATION SETTINGS

Students receive proper orientation to each clinical education setting they are assigned (*see form F-40*).

- CI for the CES will conduct orientation
- Will be held on the first day of the clinical assignment or on an assigned date each semester
- Attendance is mandatory

Failure to attend will result in suspension from the Clinical Radiography course until orientation is documented

Policy: 1991

Revised: 1992, 1994, 1996, 1997, 2000, 2003, 2005, 2007

PREGNANCY POLICY

If a student suspects she is pregnant, she *can* notify the Clinical Coordinator and/or the Program Director. ***Pregnancy notification is strictly voluntary***; the program strongly advises *written* pregnancy notification.

- Must sign a witnessed "Attest" form that the appendix to Regulatory Guide 8.13 of the United States Regulatory Commission was read and discussed
 - **Form F-29 (completion of form documents *written* declaration of pregnancy)**
- One option the student can select is to continue in the program without modification
- Another option the program recommends is the following
 - Student continue in the program, but the student will ***not*** be permitted to engage in the following activities (this is suggested as an option)
 - Fluoroscopy
 - Molecules and Surgery
 - MR
 - Nuclear Medicine
 - Radiation Oncology
 - Special Procedures
- Neither the university nor the CES will be responsible for radiation injury to the student or the embryo/fetus if the student chooses to continue in the program during pregnancy
- Regardless of option selected may or may not be allowed to graduate at the scheduled date
 - Determined on an individual basis
 - Depending on the student's capacity to complete course requirements
- Regardless of option required to purchase and wear an additional dosimeter for fetal measurement
 - Required to follow the National Council on Radiation Protection and measurement (NCRP) dose limits for the embryo and fetus
 - No more than .5 rem during the entire gestation, with respect to the fetus
 - No more than .05 rem in any month, both with respect to the fetus
- If the student elects to declare they are pregnant, they have the option of withdrawing their declaration of pregnancy at any time. The *written* declaration withdrawing notification of pregnancy is included on **Form F-29**.

Policy: 1992

Revised: 1994, 1995, 1997, 2003, 2008, 2011, 2014

PROFESSIONAL SOCIETIES

Student attendance at professional organization meetings is strongly encouraged. Student membership is permitted in all the organizations listed below at a reduced rate.

STATE SOCIETY www.lsrn.net

The state society is *Louisiana Society of Radiologic Technologists* (LSRT). Students may elect to attend the educational meetings sponsored by the LSRT.

- **MID-WINTER SEMINAR** - Students are encouraged to attend, those who attend will
 - Receive 2 pts for each lecture attended (max pts 20)
 - Receive 2 pts for each hour of observation at the Bee (requires faculty member initials/hr)
 - Receive 2 pts for Student BEE participation
 - 3rd place 10 pts
 - 2nd place 15 pts
 - 1st place 20 pts
- **ANNUAL MEETING** - Students are encouraged to attend, those who attend and participate in:
 - Scientific Exhibit and/or Quiz Bowl receive
 - Participation 5 pts, 3rd place 10 pts, 2nd place 15 pts, 1st place 20 pts
 - Receive 2 pts for each hour of observation at the Bowl (requires faculty member initials/hr)
 - Banquet attendance receive 5 pts
 - Educational lectures receive 2 pts for each lecture attended (max pts 20)
- Points are added to the unit test category for clinical radiography course grade determination. For RADS 467 the points are added to the CI evaluation category on the grading procedure sheet. These points are not used to achieve a passing grade of "77" on the required unit test at midterm or the retest for clinical radiography courses.
- Bonus points are only applicable if a score of 77 or higher is achieved on the unit test at mid-term
- Provide annual scholarship - *Joe Schwartz Memorial Scholarship*

NATIONAL SOCIETY www.asrt.org

The national society is the *American Society of Radiologic Technologists* (ASRT)

- Provides multiple scholarships and other events for students

Policy: 1982

Revised: 1984-97, 2000, 2003, 2005, 2007, 2008, 2009, 2013, 2017

SEXUAL HARASSMENT

All students enrolled in clinical radiography courses are to render patient care and maintain an environment that shows respect to all. For the purpose of this policy all members of the University and CES community have an obligation to comply with all federal and state laws relating to diversity matters. The University has incorporated a "Diversity Awareness Policy" which is part of the *Faculty/Staff Handbook*, and the *Code of Student Conduct*, and all other documents that mention the behavior of University employees and/or students. "Students should visit the MSU web page at www.mcneese.edu/ada and www.mcneese.edu/policy for policies and procedures regarding disabilities, and diversity awareness, including sexual harassment."

- Harassment is an act that discriminates against or harasses another in relation to ethnicity, race, gender, sexual orientation, religion, disability, or age.
- Any act that is derogatory in relation to ethnicity, race, gender, sexual orientation, religion, disability, or age will not be tolerated.
- Harassment or discrimination can be explicitly or implicitly presented as a term or services, or such conduct will interfere or create an intimidating hostile or offensive environment
- Harassment or discrimination includes but is not limited to Jokes, insults taunts, obscene gestures, embracing, touching, or pictorial communication

Racial Discrimination--Civil Rights Act of 1964

No person in the United States shall, on the grounds of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity. (See MSU diversity awareness policy for specifics)

Sexual Harassment/Discrimination --Title VII

The use of any term or the commission of any act that is sexually derogatory or discriminatory will not be tolerated. Sexual harassment may be either same gender or different gender. It includes any unwelcome sexual advances, requests for sexual favors, and/or other verbal or physical conduct of this nature where:

Gender Discrimination -- Title IX Education Amendments of 1972 as Amended

No person in the United States shall, on the basis of sex, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any educational program or activity receiving federal financial assistance. (See MSU diversity awareness policy for specifics)

Sexual Orientation Discrimination – Executive Order EWE 92-7; KBB2004-54

No state agency or department shall discriminate on the basis of sexual orientation against an individual in the provision of any services or benefits. (See MSU diversity awareness policy for specifics)

Age -- Age Discrimination Act of 1967, as amended

It is unlawful in situations to discriminate in any way based on age. (See MSU diversity awareness policy for specifics)

Discrimination Against Individuals with Disabilities --Rehabilitation Act of 1973/ Americans with Disabilities Act of 1990

The commission of any act that is derogatory or discriminatory toward individuals with disabilities will not be tolerated. (See MSU diversity awareness policy for specifics)

Upon the knowledge or the verbal/written notice of an allegation of sexual harassment, general harassment, or discrimination, the student must notify the Clinical Coordinator and/or Program Director

- Then the Office of Special Services and Equity (or appropriate office) will be contacted at both the University and at the CES to initiate a resolution
- An informal resolution is attempted first, then on to a formal resolution
- The student must also be aware that the complainant also has the right to file a complaint with an external agency (i.e., Civil Rights Commission).
- In the event it is determined a student is guilty of sexual harassment, general harassment or discrimination, the student will be subject to disciplinary action by the MSU Radiologic Sciences Advisory committee

The University also has an equity and inclusion policy for protecting students, faculty and staff that can be found at

https://www.mcneese.edu/policy/equity_and_inclusion_policy

Policy: 1994
Revised: 1997, 2012, 2019

SUBSTANCE ABUSE*

The University has established a policy for students with substance abuse problems. This policy can be found at <https://www.mcneese.edu/find/policies/substance%20abuse> and then click on the Alcohol and Drug policy.

Enrollment in clinical radiography courses requires drug screening (**ALL RESULTS OF DRUG SCREENING(S) ARE CONFIDENTIAL**)

- Utilizes blood/and or urine samples to detect the presence of illegal drugs (15 Panel split study drug Screening)
- Performed by the following acceptable medical laboratory: *The Pathology Lab at 830 Bayou Pines – Lake Charles.*
- Required prior to the first Clinical Education Setting assignment
 - Mandatory prior to the beginning the first clinical radiography course
 - A positive drug screen will result not being able to start the clinical radiography course for first semester clinical radiography students
- All fees are paid by the student and made payable to medical laboratory perform the screening
- May also be performed on a random basis at any time while enrolled in a clinical radiography course
 - Report to one of the screening facilities within 2 hours of being instructed to do so
 - In cases of negative random screening student will be reimbursed fees by the department
 - A positive drug screen will result in disciplinary action up to and including dismissal from the program for current clinical radiography students.
- Drug Screen and/or Alcohol screening may also be performed in cases of reasonable suspicion
 - Reasonable suspicion of being under the influence of alcohol or illegal drugs may be evidenced by the following but not limit to:
 - Frequent absences from class, clinical or lab and/or disappearance from such
 - Isolation and withdrawal
 - Patient care errors
 - Detectable odor of alcohol or illegal drugs
 - Increasingly poor decision and judgment about patient care
 - Illogical or sloppy charting
 - Unusual accidents/incidents
 - Deteriorating personal appearance
 - Changes in motor function/behavioral patterns including personality changes, mood swings, illogical thought patterns, gait disturbances, impaired dexterity, slurred speech, drowsiness/sleepiness, and pupil changes
 - Program Official or designee must be notified, and the Program Official or designee will go to the assigned location of the student and make a decision if drug and/or alcohol screening is necessary
 - In no screening necessary, the student will report back to their assigned area or sent home for the remainder of the assigned time on that day
 - If necessary, Program Official or designee will contact the screen facility
 - Report to screening facility within 2 hours of being instructed to do so
 - Student may not drive a motor vehicle to the screening facility and will be responsible for all transportation costs
 - Student may not attend class or clinical activities until results are reviewed by the Director or designee
 - If the student refuses the screening, he/she shall sign a refusal form (**F-4**) witnessed by two clinical or university representatives
 - Refusal to sign this form will result in disciplinary action up to and including dismissal from the program for current clinical radiography students.
 - A positive blood alcohol and/or urine drug screen will result in disciplinary action by the Radiologic Sciences advisory committee, immediate dismissal from the program will be considered.

*this policy also complies with the Employee and Student Drug Testing Protocol for the College of Nursing and Health Professions

Policy: 2006

Revised 2008, 2010-2012, 2015, 2016, 2019

TELEPHONES

Personal telephone calls are not permitted.

- No one will be called from class or clinical assignment except in an emergency
- Personal calls are permitted on breaks or lunch
- Cellular/Digital phone usage is prohibited in the university classroom and the CES
 - Phones are not to be used or out in visible view while in the university classroom, laboratory, or the CES

Policy: 1982, Revised: 2001, 2003, 2005, 2007, 2012

TUBERCULOSIS NOTIFICATION/PROTOCOL

Students are not to perform radiological examinations on patients suspected or confirmed of having active or inactive tuberculosis.

- Exception to policy if student is provided with a particulate mask

Policy: 1996, Revised: 1997, 2003

VENIPUNCTURE/INJECTION

Clinical performance of venipuncture/injection procedures is required.

- Performed only under ***direct supervision*** of a qualified radiographer approved to perform venipuncture/injection by the CES
- By the completion of all clinical radiography courses for the program, the student is required to document successful completion of 5 venipuncture procedures
 - **Form F-41**
- Not all clinical education settings permit students to perform venipuncture procedures
 - Students are advised to plan appropriately for proper documentation of the required # of venipuncture procedures based on their CES assignments
- When **not** performing the venipuncture procedure, students are expected to assist by doing the following, but not limited to:
 - Setting up for the procedure
 - Administering contrast media

Policy: 1994, Revised: 1996, 1997, 2003

WORKPLACE HAZARDS

Students are required to attend the following presentations on an annual basis or review the following policies with regard to workplace hazards and Health/Safety

- Standard precautions (done with annual program/CES orientation at the University)
- Tuberculosis awareness (done with annual program/CES orientation at the University)
- MRI safety (done with annual program/CES orientation at the University)
- Fire safety (done with annual CES orientation at the CES)
- Emergency preparedness/Hazards (chemical, electrical, bomb threats, terrorist attack etc.) (done with annual CES orientation at the CES)
- Medical emergencies (done with annual CES orientation, and in each clinical radiography course syllabi, (code: blue, yellow, pink, gray, red, black, orange, white, silver)
- Natural disasters (tornado, hurricane and flood) (included in student handbook – inclement weather policy)
- Substance abuse (included in student handbook – substance abuse policy)
- Communicable disease (included in student handbook – communicable disease policy)
- HIPAA (included in student handbook – confidential information, and CES specific policy review done with annual CES orientation at the CES)
- Harassment (included in student handbook – sexual harassment/general harassment diversity awareness policy)
- Failure to attend or review as assigned will result in suspension from the Clinical Radiography course until attendance is documented
- **Form F- 39 and Form F-40**

Policy: 1994, Revised: 2007, 2011, 2016, 2017

FORMS

MCNEESE STATE UNIVERSITY
Department of Radiologic & Medical Laboratory Science
RADIOLOGIC SCIENCES PROGRAM

Clinical Rotation Record Summary Sheet

Name:

Approximate minimums – 4 weeks of evenings,			
RADIOGRAPHY (35 weeks)			
RADIOGRAPHY/FLUOROSCOPY (12 weeks)			
MOBILES & SURGERY (8 weeks)			

MCNEESE STATE UNIVERSITY
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C.T. (4 weeks)			
CHOICE ROTATION(S): Radiography, Radiography/Fluoroscopy, Mobile/Surgery/ Bone Densitometry, Vascular Interventional Radiography, Sonography, Nuclear Medicine, Computed Tomography, Magnetic Resonance, Management, Mammography, Radiation Oncology,(see Form F-27) (1-2 weeks)			
Advanced Area Rotations: CT, MRI, Mammography/Bone Density, Vascular Interventional Radiography, Cardiac Interventional Radiography, (See Form F-36)(up to 7 - 8 weeks)			
<i>Policy: 1982, Revised: 2001, 2003, 2007, 2008, 2009, 2010, 2011, 2013, 2014, 2015, 2016, 2019</i>			

**MCNEESE STATE UNIVERSITY
 Department of Radiologic & Medical Laboratory Science
 RADIOLOGIC SCIENCES PROGRAM**

COUNSELING FORM

- Counseling only
- Counseling with disciplinary action
- Incident documentation

Name	Date
-------------	-------------

CES	Date of Incident
------------	-------------------------

NATURE OF INCIDENT and COMMENTS:

SUGGEST AREAS FOR IMPROVEMENT:

DISCIPLINARY ACTION (When applicable)	<input type="checkbox"/> Written warning <input type="checkbox"/> Probation (length)_____	<input type="checkbox"/> Suspension _____ days <input type="checkbox"/> Dismissed
--	--	--

Clinical Coordinator’s Signature	Student’s Signature
---	----------------------------

Clinical Instructor’s Signature	Program Director’s Signature
--	-------------------------------------

<i>Revised: 2003, 2007, 2014</i>	Date:
----------------------------------	--------------

MCNEESE STATE UNIVERSITY
Department of Radiologic & Medical Laboratory Science
RADIOLOGIC SCIENCES PROGRAM

Excessive / Unusual Exposure Readings

To:		Student ID#:	
Date:		Birthdate:	
Clinical Education Settings:			
The following are the results of your exposure readings for the months of	<input type="checkbox"/> Jan – Mar <input type="checkbox"/> Apr - June	<input type="checkbox"/> July – Sep <input type="checkbox"/> Oct - Dec	Year 20 ____
<i>Please note that you exceed or have an unusual exposure reading as set by McNeese State University</i>			
Excessive Whole Body _____ rems (MSU limits – 1.25 rem/quarter)		Unusual reading _____ mrem	
If you can think of any reason for exceeding McNeese State University’s limits, please comment:			
Student’s Signature		Radiation Safety Officer’s Signature	
Program Director’s Signature		Clinical Coordinator’s Signature	
<i>For the next quarter you will be observed by the Clinical Instructor and the Clinical Coordinator</i>			
<small>Revised 2003</small>			

**MCNEESE STATE UNIVERSITY
Department of Radiologic & Medical Laboratory Science
RADIOLOGIC SCIENCES PROGRAM**

TECHNOLOGIST EVALUATION QUESTIONNAIRE

Student doing evaluation:		
Technologist being evaluated:		
CES:		
Semester	Year	
INSTRUCTIONS FOR FILLING OUT THIS FORM: The purpose of this form is to improve the Clinical Education Center's teaching process. For this reason, all answers should be objective, keeping personal feelings out of this evaluation. BE SURE TO READ ALL QUESTIONS.		Yes
		No
1. Was the technologist willing and available to act as an instructor?		
2. Did the technologist stay with you during your rotation period until you were competent of doing exams on your own?		
3. Did the technologist alternate with you in processing images and staying with the patients?		
4. Did the technologist critique images with you?		
5. Was the equipment fully explained to you?		
6. If you asked the technologist, was he/she willing to explain procedures and positioning?		
7. Was the technique chart reviewed and was it current?		
8. Did the technologist use calipers and follow the technique chart?		
9. If the technologist altered from the technique chart, did he/she explain to you why?		
10. Did the technologist collimate images whenever possible?		
11. Was proper lead shielding used on all patients?		
12. Were you encouraged to do the exams while the technologist observed?		
13. Did the technologist properly identify each patient?		
14. Did the technologist take patient history and explain the exam to the patient?		
15. Did the technologist attempt to have you do any exam totally unassisted that you had not yet covered in class?		
COMMENTS: (Use the back of this page if more room is needed)		

MCNEESE STATE UNIVERSITY
Department of Radiologic & Medical Laboratory Science
RADIOLOGIC SCIENCES PROGRAM

Clinical Education Setting Evaluation Questionnaire

CES:					
Semester:	Year:				
The purpose of this questionnaire is to evaluate the Clinical Education Settings. Please give serious consideration to your responses and be frank and objective. The responses are tabulated by the RADS Office and then made available to the Clinical Education Setting after the end of each semester. You are encouraged to respond to each item, but you need not answer any item that you feel will identify you.	Strongly Agree #5	Agree #4	Neither Agree Nor Disagree #3	Disagree #2	Strongly Disagree #1
1. The amount of time spent in the Clinical Education Setting was adequate time to expose you to a variety of procedures.					
2. The clinical routines and procedures are consistent.					
3. The Clinical Education Setting Radiographers are interested in the program.					
4. The Clinical Education Setting Radiographers were willing to give instructions and assistance.					
5. You were supervised according to the guidelines stated in your student handbook.					
6. You were allowed ample opportunity to perform Radiologic procedures.					
7. The Radiographers at the Clinical Education Setting acted as good examples in radiation protection procedures.					
8. The clinical rotation assignments were adhered to.					
9. The radiographers at the Clinical Education Setting acted in a professional manner.					
10. The radiographers at the Clinical Education Setting were good examples in rendering patient care.					
11. You received thorough feedback on your performance to enable you to improve on your weaknesses.					
12. You were provided adequate opportunity to apply what you learned in didactic courses.					
13. The staff of the Radiology Department made you feel like a stranger.					
14. In general, the Radiology Department practices radiation safety.					
15. The radiographic technique charts work when used correctly.					

CES:	
Semester:	Year:
16. What did you like best about this Clinical Education Setting?	
17. What did you like least about this Clinical Education Setting?	
18. What suggestions do you have for improving this Clinical Education Setting?	
ADDITIONAL COMMENTS:	

Revised 2015, 2016

MCNEESE STATE UNIVERSITY
Department of Radiologic & Medical Laboratory Science
RADIOLOGIC SCIENCES PROGRAM

Clinical Instructor Evaluation Questionnaire

Clinical Instructor:								
CES:								
Semester:			Year:					
The purpose of this questionnaire is to evaluate the Clinical Instructor. Please give serious consideration to your responses and be frank and objective. The responses are tabulated by the RADS Office and then made available to the Clinical Education Setting after the end of each semester. You are encouraged to respond to each item, but you need not answer any item that you feel will identify you.				Strongly Agree #5	Agree #4	Neither Agree Nor Disagree #3	Disagree #2	Strongly Disagree #1
1. The instructor is well prepared and organized.								
2. The instructor is a good clinical supervisor.								
3. The instructor makes me feel free to ask questions and express ideas while at the Clinical Education Setting.								
4. The instructor is willing to provide outside help.								
5. The instructor has been fair to me in performing competency, proficiency evaluations and merit competency evaluations.								
6. The instructor sets a good example for students.								
7. The instructor appears to want to help students learn.								
8. The instructor acts in a professional manner in the clinical setting.								
9. The instructor is available to perform competency, proficiency evaluations and merit competency evaluations.								
10. The instructor completes competency, proficiency evaluations, and merit competency evaluations in a timely manner.								
11. The instructor informs me of my strengths and weaknesses.								
12. The instructor attempts to find solutions to problems.								
13. The instructor <u>does not</u> show favoritism in the clinical setting.								
14. The clinical routines and procedures were explained sufficiently to allow for a thorough understanding.								
15. The instructor was interesting and willing to take time to give instructions and assistance.								
16. The Clinical Instructor saw that the rotational schedule was adhered to.								
17. The Instructor provided individualized instruction when necessary.								
18. The instructor has a positive attitude toward the program.								
19. The instructor provided me with proper orientation to the department and assigned clinical areas.								
COMMENTS: (use reverse side if needed)								
Revised 2014, 2015, 2016								

MCNEESE STATE UNIVERSITY
Department of Radiologic & Medical Laboratory Science
RADIOLOGIC SCIENCES PROGRAM

Score

Clinical Performance Evaluation

Student Name:	
CES:	
Rotational Area:	
Date from:	Date to:
<i>Directions to the evaluator</i>	
SELECT ONE OF THE FOLLOWING FOR EACH ITEM FOLLOWING I-V:	
<i>Also complete the checklist for the rotation when applicable (located in the course syllabi)</i>	
* Consider Student length of time in professional phase of program	
+ Not applicable for the management rotation	
4 The student does this 90% of the time or more	2 The student does this 70 - 79% of the time
3 The student does this 80 - 89% of the time	1 The student does this 69% of the time or less
Technical Skills* - The student...	II. Patient Care - The student...
<input type="checkbox"/> A. Properly manipulates equipment+	<input type="checkbox"/> A. Exhibits patience and empathy+
<input type="checkbox"/> B. Selects appropriate technical factors +	<input type="checkbox"/> B. Communicates with the patient before, during, and immediately after the procedure+
<input type="checkbox"/> C. Correctly evaluates radiographs	<input type="checkbox"/> C. Respects the patient's privacy and modesty+
<input type="checkbox"/> D. Utilizes technical "tips" as provided by the Radiographer	<input type="checkbox"/> D. Attends to patient's physical and emotional needs+
<input type="checkbox"/> E. Performs and/or assists the radiographer utilizing proper positioning skills	<input type="checkbox"/> E. Performs duties with minimum discomfort to the patient+
III. Radiation Protection - The student...	IV. Organizational Skills - The student...
<input type="checkbox"/> A. Protects patients and personnel from unnecessary radiation by using adequate collimation on the part (consider repeat rate) +	<input type="checkbox"/> A. Keeps assigned area neat, clean and orderly
<input type="checkbox"/> B. Utilizes gonadal shielding+	<input type="checkbox"/> B. Maintains a well-stocked room +
<input type="checkbox"/> C. Correctly wears a radiation monitoring device	<input type="checkbox"/> C. Cleans assigned area after each patient+
<input type="checkbox"/> D. Closes the door to the radiographic room during exposures.	<input type="checkbox"/> D. Seeks and recognizes what needs to be done without wasting time
	<input type="checkbox"/> E. Handles radiographic procedures within appropriate time limits+
V. Affective Domain – The student	
<input type="checkbox"/> A. Maintain appropriate conversation with and in front of patients	
<input type="checkbox"/> B. Maintain confidentiality	
<input type="checkbox"/> C. Accepts constructive criticism	
<input type="checkbox"/> D. Demonstrates an interest, positive disposition, and refrains from emotional outbursts while in the clinical education	
<input type="checkbox"/> E. Maintains favorable interpersonal relationships & cooperative nature with clinical staff & peers	
<input type="checkbox"/> F. Follows the dress code as state in the student Handbook	
Technologist's signature	Date
Student's signature	Date
Comments: (use reverse side of this sheet if more space is needed)	

Revised 2004, 2007, 2011, 2016

MCNEESE STATE UNIVERSITY
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Requested by:

- Student
- CI

<input type="checkbox"/> COMPETENCY	<input type="checkbox"/> PASSED
<input type="checkbox"/> PROFICIENCY	<input type="checkbox"/> RETEST
<input type="checkbox"/> MERIT	

PERFORMANCE EVALUATION

Student's name:		Procedure:						
Patient's X-ray or MR#		Accession # (when applicable):				Date:		
Room #		Course/Semester						
<i>This form is to be completed only by the Clinical Instructor, MSU faculty, or Assistant CI in certain Clinical Education Settings with plus status (check Faculty and Administration section in Handbook)</i>								
KEY:								
3 – Satisfactory								
2 – Acceptable (need minor improvement) SCORE _____ x 100 = _____ %								
1 – Acceptable (needs major improvement)								
0 – Unsatisfactory (results in failure regardless of the overall average is 90%)								
I. Assessment of Requisition:								
	Proj	Proj	Proj	Proj	Proj	Proj	Proj	Proj
II. Fill in the projections here →								
A. Physical Facility Readiness								
B. Patient Care								
C. Radiographic Procedure								
D. Radiation Protection								
E. Exposure Factors								
III. PRODUCT ANALYSIS								
A. Anatomy Identification *								
B. Positioning Analysis *								
C. Exposure Factors Analysis *								
IV. Total Skin Dose Estimate: +								
V. Procedure Management:								
Comments:								
Evaluator's Signature					Student's Signature			
* Only required on applicable examinations/procedures – see appendix, not required on proficiency and merit evaluations								
+ Show paperwork; must be turned in by the end of the assigned time on the day the examination or procedure was performed.								
CT Competency use Form F-15, C-Arm Competency use Form F-21, Retrograde pyelogram use Form F-44								
¹ Patient History must be recorded on back of this form.								
Revised 2003, 2004, 2005, 2006, 2007, 2008, 2009, 2014, 2016, 2017								

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Competency / Proficiency Checklist

CI was contacted First

Student's Name:	Procedure	
Patient's x-ray # or MR #	Accession # (when applicable)	Date
Room #	Course/Semester	

This form is to be used by the staff radiographers for competency/proficiency evaluations at times when the CI is unavailable for conducting the evaluations. Completion of this form does not imply competency. Competency will be determined after the images are evaluated and Form F-10 is completed by the CI. This form is not applicable for the following: CT Competency use Form F-15, C-Arm Competency use Form F-21, OR Cholangiogram use the C-Arm competency Form F-23, Retrograde pyelogram use Form F-44

Directions: check yes or no for the following objectives:

ASSESSMENT OF REQUISITION	YES	NO
1. Identify procedure to be performed		
2. Identify mode of transportation to clinical area		
3. Identify the patient's name and age		
PHYSICAL FACILITY READINESS	YES	NO
1. Maintained a clean radiographic table during the procedure		
2. Maintained appropriate linens		
3. Turn machine "on", setting appropriate technical factors		
4. Select appropriate size IR, proper screens, grid, etc. and all necessary supplies, before pt. arrival.		
5. Turn tube and table into position for procedure, having tube centered to bucky (when applicable) before patient's arrival		
6. Set up machine correctly (i.e.: selecting correct bucky for procedure, selecting correct focal spot size)		
7. Select the examination for Computed Radiography (Check here for N/A <input type="checkbox"/>)		
8. Select the number of projections for the examination during Computed Radiography		
9. (Check here for N/A <input type="checkbox"/>)		
10. Assign projections to each IR for the examination during Computed Radiography		
11. (Check here for N/A <input type="checkbox"/>)		
PATIENT CARE	YES	NO
1. Verify patient's identity		
2. Introduce self to patient (and to radiologist when applicable)		
3. Escort and assist patient to radiographic room		
4. Transfer patient on to radiographic table		
5. Explain the radiographic procedure to the patient		
6. Record the patient's clinical history (physically documents pt history, so that radiologist will be able to view patient history), including last menstrual period when applicable		
7. Reassure apprehensive patient and/or parents of pediatric patients		
8. Gown/cover patient, respecting privacy and modesty		
9. Provide immediate and accurate nursing procedures; when indicated by physical and emotional conditions of the patient:		
10. Maintenance of I.V. flow		
11. Labeling of specimens		
12. Utilization of aseptic, and/or isolation techniques		
13. Comply with all the rules of safety (physical, electrical, etc.)		
14. Provide routine monitoring of equipment, vital signs, physical signs and symptoms		
PATIENT PROTECTION	YES	NO
1. Protected patient and personnel from unnecessary radiation		
2. Utilized gonadal shielding		
3. Applied gonadal shielding correctly for fluoroscopy (on table top, unless remote control room) Check N/A if Radiologist does not want to shield for fluoro N/A <input type="checkbox"/>		
4. Demonstrate adequate collimation of part		
5. Closed the door to the radiographic room during exposures		

FOR THE FOLLOWING: List the projection(s) in the block(s) provided, then check "YES" OR "NO" for the objectives under the appropriate projections A, B, etc.											
PROJECTION A		PROJECTION B		PROJECTION C		PROJECTION D		PROJECTION E			
RADIOGRAPHIC PROCEDURES											
		A		B		C		D		E	
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1. Position the patient & anat. part correctly using immobilization and restraining devices if necessary											
2. Utilize controls for locks on radiographic equipment											
3. Placement of correct Pb markers ("R" or "L", etc.)											
4. Can distinguish marker to only be an R or L											
5. Set correct SID (when angling subtract 1" for every 5 degrees of angulation)											
6. Proper pt. identification on IR before submission of images for interpretation (<i>must be recognized by student, if not check "No"</i>)											
7. Center anatomical part to properly placed IR											
8. Align central ray (CR) and collimators accurately											
9. Instruct patient for breathing and remaining still											
10. Adjust patient positioning to accommodate the patient as appropriate for unusual cases.(Check if N/A <input type="checkbox"/>)											
EXPOSURE FACTORS											
		A		B		C		D		E	
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1. Select the proper mAs and kVp for the procedure											
2. Was technique chart employed (if so was it used correctly?), (Check here for N/A <input type="checkbox"/>)											
3. Select the proper automatic exposure control setup. (Check here for N/A <input type="checkbox"/>)											
4. Adjust mAs and kVp as appropriate for an unusual case. (Check here for N/A <input type="checkbox"/>)											
5. Exposure factors were set before positioning the patient and/or not leaving the patient in an uncomfortable position.											
6. List exposure factors employed on each projection (can be filled out by the student or evaluator)											
PROJ	PATIENT THICKNESS	mAs	kVp	SID	EV or SV	Patient condition comments					
A											
B											
C											
D											
E											
# of images accepted _____ # of images rejected _____											
For Computed Radiography, workstation where images were processed _____											
TOTAL SKIN DOSE ESTIMATE											
Must be attached to this form, or must be signed and dated by any Technologist and submitted to drop box by the end of the assigned time on the day the examination/procedure was performed.											
PROCEDURE MANAGEMENT									YES	NO	
1. Make decisions regarding work flow and procedures performed in the radiographic room.											
2. Handle procedure competently and completely within appropriate time limits.											
3. Complete procedure with accuracy and thoroughness.											
4. Send completed images to PACS (Check here for N/A <input type="checkbox"/>)											
COMMENTS:											
Signature of Evaluator						Revised: 2004, 2005, 2007, 2008, 2013, 2014, 2016					

**MCNEESE STATE UNIVERSITY
Department of Radiologic & Medical Laboratory Science
RADIOLOGIC SCIENCES PROGRAM**

CLINICAL COMPETENCY SYSTEM – REMEDIAL ACTION

<input type="checkbox"/> COMPLETED REMEDIAL ACTION	
<input type="checkbox"/> PROFICIENCY EVALUATION	
<input type="checkbox"/> COMPETENCY EVALUATION	
Student's Name:	Procedure:
Date Attempted Evaluation:	Date Remedial Action Assigned:
	MUST BE COMPLETED WITHIN 7DAYS
Instructor making assignment(s)	
<input type="checkbox"/> RADIOGRAPHIC PROCEDURE ERROR – Prescription:	
Signature verifying completion	Completion Date:
<input type="checkbox"/> TECHNICAL ERROR - Prescription	
Signature verifying completion	Completion Date:
<input type="checkbox"/> ERROR IN SECTION III, IV OR V	
The student has reviewed the section covering:	
Signature verifying completion	Completion Date

Revised: 2003, 2007, 2016

MCNEESE STATE UNIVERSITY
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CLINICAL EDUCATION SUMMARY OF MASTERED EXAMS

Student's name: _____

<i>date</i>	MODULE I	<i>date</i>	MODULE II <i>Check box if simulated</i>	<i>date</i>	MERIT
	Abdomen		Abdomen < age 6 <input type="checkbox"/>		Arthrography
	Abdomen Upright		AC joints <input type="checkbox"/>		Bone Age
	Ankle		Calcaneus <input type="checkbox"/>		C-Spine (flex & ext.)
	Chest		Contrast Enema <input type="checkbox"/>		Cleaves or Mod.
	Chest, < age 6		Clavicle <input type="checkbox"/>		Cysto/Cystourethrogram
	Chest, wheelchair or stretcher		Decubitus Abdomen <input type="checkbox"/>		Dialysis Survey
	C-Arm Procedure (Manip of sterile field)		Decubitus Chest <input type="checkbox"/>		Elbow – Coyle Method
	C-Arm Procedure (Manip >1 proj)		Esophagus <input type="checkbox"/>		Elbow - Oblique
	C-Spine		Facial Bones <input type="checkbox"/>		Elbow-Jones Axial
	Comp. Tomo (CT)		Femur <input type="checkbox"/>		ERCP
	Elbow		Hip Cross table lat <input type="checkbox"/>		Hysterosalpingography
	Finger or Thumb		Humerus <input type="checkbox"/>		Intercondylar Fossa
	Foot		IVU <input type="checkbox"/>		Knee Oblique
	Forearm		Lower Ext.< age 6 <input type="checkbox"/>		Knee Standing
	Geriatric Chest		Mandible <input type="checkbox"/>		L-spine Bending views
	Geriatric Upper Ext		Mobile < age 6 <input type="checkbox"/>		L-spine Flex & Ext.
	Geriatric Lower Ext		Nasal Bones <input type="checkbox"/>		Lateral Abdomen
	Hand		Oblique C-Spine <input type="checkbox"/>		Lordotic Chest
	Hip		Oblique L-Spine <input type="checkbox"/>		Metastatic Bone Sur.
	Knee		Patella <input type="checkbox"/>		Myleography
	L-Spine		Sacroiliac Joints <input type="checkbox"/>		Oblique Chest
	Mobile Abdomen		Sacrum and/or Coccyx <input type="checkbox"/>		Optic Foramen/Orbits
	Mobile Chest		Scapula <input type="checkbox"/>		OR Cholangiogram
	Mobile Ortho		Sinuses <input type="checkbox"/>		Retrograde Pyelogram
	Pelvis		Skull <input type="checkbox"/>		SC Joints
	Ribs		Small Bowel <input type="checkbox"/>		Scaphoid
	Shoulder		Spine Cross table lat <input type="checkbox"/>		Scoliosis Series
	T-Spine		Toes <input type="checkbox"/>		Sinuses (open Mouth)
	Tib Fib		Trauma Shoulder <input type="checkbox"/>		Sinuses (SMV)
	Trauma Lower Ext.		Upper GI <input type="checkbox"/>		Sternum
	Trauma Upper Ext.		Upper Airway (STN) <input type="checkbox"/>		T-Tube Cholangiogram
	Wrist		Upper ext. < age 6 <input type="checkbox"/>		TMJs
					Venography
					Zygomatic Arches
			Limited to 15 simulations		
			General Patient Care Competencies/Requirements		
			<i>Completion of F-13 indicates completion of: Sterile and Aseptic Technique (F-21)</i>		
			Transfer of Patient		
			Care of Patient Medical Equip		
			Vital Signs (RADS 220L)		
			<input type="checkbox"/> Venipuncture (F-41)		
			CPR (Clinical Course Requirement)		

Revised: 2003, 2004, 2005, 2006, 2008, 2009, 2012, 2013, 2016, 2017, 2020

**MCNEESE STATE UNIVERSITY
Department of Radiologic & Medical Laboratory Science
RADIOLOGIC SCIENCES PROGRAM**

SUMMARY OF PASSED PROFICIENCY EVALUATIONS

Student Name: _____

*Proficiency evaluations completed beginning with RADS 461
8 different procedures or examinations required*

Date	Procedure or Examination

Revised: 2004, 2006, 2007, 2013, 2015, 2016, 2018, 2020

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<input type="checkbox"/>	Passed
<input type="checkbox"/>	Retest

COMPETENCY EVALUATION - AREA: COMPUTED TOMOGRAPHY

SCORE _____

Student Name: _____

Date: _____

I. PATIENT CARE	Y	N	B. Procedures	Y	N
A. Evaluate and understand request, check chart order			1. Utilize correct patient immobilization devices		
B. Prepare room prior to patient arrival			2. Select and prepare contrast media		
C. Verify patient's identity			3. Perform the following, start to finish (includes reconstruction):	Y	N
D. Introduce self to patient (and to radiologists when applicable)			a. Head, date _____ MR or X-ray # _____		
E. Locate Emergency Cart			b. Abdomen, date _____ MR or X-ray # _____		
F. Attentive to the needs of patient			c. Spine _____, date _____ MR or X-ray # _____		
G. Maintain clean, stocked area			C. Identify the following anatomy on scan	Y	N
H. Assist patient onto the table			1. Heart		
I. Record pertinent history from patient & compare with chart history (PT. must be on back of form)			2. Lung		
			3. Aorta		
II. CT TECHNOLOGY			4. Kidney		
A. Operation	Y	N	5. Liver		
1. Type patient information into computer			6. Spleen		
2. Code scan program into computer			7. Bladder		
3. Utilize operator console to begin patient scan			8. Ureters		
4. Interpret indexing on table and correctly perform table movement			9. Intestine (small & large)		
5. Call up images on display console			10. Stomach		
			11. Pancreas		
			12. Ventricles of the brain		
			13. Optic nerve		
			14. Major parts of the vertebrae		

Comments:

Technologist Signature	Student Signature
Clinical Instructor Signature	<i>Revised:2004, 2007, 2014, 2016, 2019</i>

MCNEESE STATE UNIVERSITY
Department of Radiologic & Medical Laboratory Science
RADIOLOGIC SCIENCES PROGRAM

RADS 461 CHOICE ASSIGNMENT OBJECTIVE EVALUATION – AREA: NUCLEAR MEDICINE

SCORE _____

Student Name: _____

CES: _____

Date from: _____ **Date to:** _____

I. PATIENT CARE	Y	N	C. Outline specific patient preparation necessary for the following exams:	Y	N
A. Evaluate and understand request, check chart order			1. Bone		
B. Prepare room prior to patient arrival			2. Thyroid		
C. Verify patient's identity			3. Myocardial		
D. Introduce self to patient (and to radiologists when applicable)			4. Lung		
E. Locate Emergency Cart			E. Assist in the performance of the following examinations	Y	N
F. Attentive to the needs of patient			1. Bone scan		
G. Maintain clean, stocked area			2. Lung scan		
H. Assist patient onto the table					
I. Record pertinent history from patient & compare with chart history			D. List other radiographic procedures that would interfere with any nuclear medicine if done on the same day.		
II. NUCLEAR MEDICINE TECHNOLOGY					
A. Operation	Y	N			
Assist in setting up camera for routine procedures					
B. Radiopharmaceuticals	Y	N			
1. Identify common radioactive agents used in nuclear medicine					
2. Explain rationale for use of tagging agents					
3. Discuss rules of radiation safety in aseptic sterile technique, and drawing up of pharmaceuticals					

Comments: _____

Technologist Signature **Student Signature**

Clinical Instructor Signature *revised 2007, 2008, 2014, 2016*

MCNEESE STATE UNIVERSITY
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RADS 461-CHOICE ASSIGNMENT OBJECTIVE EVALUATION – AREA: RADIATION ONCOLOGY

SCORE _____

Student Name:

CES:

Date from:

Date to:

I. PATIENT CARE	Y	N			
A. Prepare room prior to patient arrival					
B. Identifies patient correctly					
C. Assists the patient on and off the treatment table					
D. Keep room stocked with supplies					
E. Attentive to the patient needs					
F. Identifies the emotional characteristics of patients who are terminally ill.			III. RADIATION ONCOLOGY TECHNOLOGY CONTINUED	Y	N
II. EQUIPMENT	Y	N			
A. Differentiate between linear accelerator and other types of radiation therapy equipment			C. From the patient's chart, be able to determine if it's photon, electron or arc, Etc., and identify SSD's, gantry angles, etc.		
B. Operate hand switch to manipulate therapy machine			D. Distinguish between single dose fractionation and continuous dose methods		
C. Compare different types of e'cones and wedges in relation to their use for Radiation Onc.			E. Explain the importance of field size		
D. Properly set up a patient's radiation prescription			F. Evaluate a patient's radiation treatment plan		
E. Be able to tell what a bolus is used for			G. Identify potential side effects of radiation therapy		
III. RADIATION ONCOLOGY TECHNOLOGY	Y	N			
A. Cite the principle reason for the use of ionizing radiation for patient treatment.			H. Describe the physical symptoms corresponding to various side effects		
B. Name the class of disease most frequently subjected to treatment by Radiation Oncology					

Comments:

Technologist Signature	Student Signature
Clinical Instructor Signature	<i>Revised: 2007, 2008, 2014, 2016</i>

MCNEESE STATE UNIVERSITY
Department of Radiologic & Medical Laboratory Science
RADIOLOGIC SCIENCES PROGRAM

RADS 461-CHOICE ASSIGNMENT OBJECTIVE EVALUATION – AREA: SONOGRAPHY SCORE _____

Student Name: _____

CES: _____

Date from:			Date to:		
I. PATIENT CARE	Y	N	III. SONOGRAPHY	Y	N
A. Evaluate and understand request, check chart order			A. Explain the principle behind the production of the sonographic image		
B. Prepare room prior to pt arrival			B. Recognize a longitudinal and transverse scan image		
C. Verify patient's identity			C. Identify the purpose and types of coupling agents		
D. Introduce self to patient (and to radiologists when applicable)			D. Explain various patient preparations for common examinations		
E. Locate Emergency Cart			E. State the significance of transducer size to frequency and resolution		
F. Attentive to the needs of patient			F. Identify the following anatomy on a sonographic image:	Y	N
G. Maintain clean, stocked area			1. Gall Bladder		
H. Assist patient onto the table			2. Liver		
I. Record pertinent history from patient & compare with chart history			3. Kidneys		
			4. Vena Cava		
II. EQUIPMENT	Y	N	5. Aorta		
A. Type patient's information on screen			6. Uterus		
B. Manipulate transducer			7. Urinary Bladder		
C. Observe how to change transducer according to the sonographic examination			8. Fetus		
D. Observe the real time apparatus for limited scan			G. Discriminate between cystic and solid areas		
E. Assist in operating equipment to properly freeze a real time image and record					
Comments:					
Technologist Signature			Student Signature		
Clinical Instructor Signature			Revised: 2003, 2007, 2008, 2014, 2016		

MCNEESE STATE UNIVERSITY
Department of Radiologic & Medical Laboratory Science
RADIOLOGIC SCIENCES PROGRAM

RADS 461 & 467-ADVANCED AREA ASSIGNMENT OBJECTIVE EVALUATION – AREA: VASCULAR INTERVENTIONAL RADIOGRAPHY AND CARDIAC INTERVENTIONAL RADIOGRAPHY

Student Name:

CES:

Date from: _____ **Date to:** _____

I. PATIENT CARE	Y	N	II. SPECIAL PROCEDURES	Y	N
A. Evaluate and understand request, check chart order			A. Prepare the fluoroscopic equipment for use		
B. Prepare room prior to patient arrival			B. Prepare the injection site and drape patient		
C. Verify patient's identity			C. Position the patient and select exposure factors for required preliminary images		
D. Introduce self to patient (and to radiologists when applicable)			D. Circulate as needed during the procedure		
E. Assist patient onto the table			E. Identify common catheters and guidewires		
F. Attentive to the needs of patient			F. Identify the purpose of various solutions used during a procedure		
G. Record pertinent history from patient & compare with chart history			G. Identify general pharmaceuticals used in the angiographic room		
H. Check for appropriate signature on consent form			H. Select programming exposures		
I. Correctly place ECG leads on pt			I. Describe procedural steps involved in the Seldinger technique		
J. Obtain & record pt blood pressure			J. Declot	Y	N
K. Establish peripheral pulses			Identify		
L. Identify the need and administer basic life support if applicable			Right Atrium		
M. Locate and evaluate the readiness of the following	Y	N	Superior Vena Cava		
1. Crash cart			Subclavian		
2. Defibrillator			Dialysis Graft		
3. Suction			Identify common wires and catheters used for Declot		
4. Oxygen					
N. Monitors patient vital signs	Y	N			
1. Blood Pressure					
2. Pulse					
3. Respiration					
4. Temperature					

Comments: (please use reverse side if necessary)

Technologist Signature	Student Signature
Clinical Instructor Signature	<i>Revised: 2003,2004, 2007,2008, 2011, 2014, 2016, 2019</i>

Equipment Manipulation to be evaluated on first surgery rotation (RADS 355)

Competency to be evaluated during or after the second surgery rotation

FORM F-21 (generated via e-value, learning modules by student)

**MCNEESE STATE UNIVERSITY
Department of Radiologic & Medical Laboratory Science
RADIOLOGIC SCIENCES PROGRAM**

<input type="checkbox"/> Competency	<input type="checkbox"/> Passed
<input type="checkbox"/> Proficiency	<input type="checkbox"/> Retest

COMPETENCY/PROFICIENCY EVALUATION & Equipment Manipulation - AREA: C-ARM

Student Name:

Date

X-ray or MR #	Accession # (if applicable)		Procedure	
I. MANIPULATE C-Arm Equip.	Y	N	E. Lock and unlock for circular movement	
A. Connecting monitor to C-Arm			F. Operate steering handle	
B. Connecting C-Arm or monitor to electrical outlet				
C. Operating the on/off switch			V. Properly drape the C-Arm	Y N
D. Operating kVp, mA, and time controls			VI. Properly placed foot switch	Y N
E. Operating switch to align image with an anatomical position of the body			VII. Adjust brightness and contrast controls for the video monitor	Y N
F. Operating Fluoroscopy timer and switch			VIII. Properly store the image with the video monitor (Save the image)	Y N
G. Operating selection switch for radiography and fluoroscopy			IX. Making a permanent image	Y N
H. Operating exposure switch for radiography			X. Radiation Protection *	Y N
I. Operating collimators			A. Protect all personnel with lead aprons	
II. Enter patient information*			B. Protect all personnel from unnecessary radiation	
III. Select Technical Factors For the Procedure to be Performed:	Y	N	XI. Properly clean the C-Arm before and after	Y N
A. Fluoroscopic			XII. Properly adhered to Sterile aseptic technique *	Y N
B. Cine/Subtraction			XIII. Send image to PACS if applicable*	Y N
IV. Mechanics of moving the C-arm	Y	N		
A. Lock and unlock horizontally				
B. Lock and unlock vertically				
C. Lock and unlock extension				
D. Lock and unlock angulation				

* Automatic failure if not met

Comments:

Technologist Signature	Student Signature
Clinical Instructor Signature	

Revised: 2004, 2005, 2007, 2013, 2014, 2016

MCNEESE STATE UNIVERSITY
Department of Radiologic & Medical Laboratory Science
RADIOLOGIC SCIENCES PROGRAM

Passed
 Retest

RADS 467 ADVANCED AREA ASSIGNMENT OBJECTIVE EVALUATION - AREA: MAMMOGRAPHY

Student Name:

Date:

X-ray or MR #

I. PATIENT CARE	Y	N	B. Quality Control	Yes	No
A. Evaluate and understand request, check chart order			1. Observe Laser imager QC for assigned CES 2. Observe Diagnostic Review Workstation QC		
B. Prepare room prior to patient arrival			3. Observe Phantom image QC		
C. Verify patient's identity*			4. Observe Viewing Conditions QC		
D. Introduce self to patient (and to radiologists when applicable)			5. Observe the signal to noise (SNR), contrast to noise (CNR) modulation transfer function (MTF) QC, for assigned CES		
E. Explain procedure to patient *			6. Observe Compression force QC		
F. Record pertinent history from* patient utilizing the correct form			7. Observe the Repeat Analysis QC		
G. Maintain clean, stocked area			8. Observe the visual checklist for QC		
H. Assist patient onto the table					
I. Prepare patient for exam: gown* patient, removal of excess deodorant, body powder, necklaces			9. Review Medical physics annual survey report for Mammographic machine(s)		
J. Be attentive to the needs of the patient			III. Mammography Technology <i>A. Explain the difference b/t breast tissues in:</i>	Y	N
II. Equipment	Y	N	1. Fibro-Glandular		
A. Operation			2. Fibro-Fatty		
1. Connect the compression device to unit*			3. Fatty Breast		
2. Apply the compression to patient*			B. Explain importance of noting scars, moles, etc.		
3. Locate the grid/IR holder*			C. Explain baseline mammography		
4. Locate the photocell receptors *			D. Explain mammography guidelines related to age		
5. Insert IR correctly * (if app)			E. Explain the Eklund (pinch-back) method		
6. Attach localization device*			F. Briefly discuss special mammographic positions		
7. Use markers correctly (name, R or L, CC, MLO)*			IV. Locate supplies	Y	N
8. Manipulate the x-y axis on localization device*			a. Identify needles (biopsy and accessories)		
9. Raise and lower unit*			b. Gauze, tape, scalpels, etc		
10. Turn unit from vertical to horizontal*			c. Scrub trays, linen		
11. Identify SID*					
12. Connect the spot compression device					
13. Utilize the magnification technique					
14. Send images to PACS (if App)*					
			<i>*Automatic failure if not met</i>		

RADS 467- ADVANCED AREA ASSIGNMENT OBJECTIVE EVALUATION - AREA: MAMMOGRAPHY

Student's name:

V. TECHNICAL ASPECTS OF MAMMOGRAPHY TECHNOLOGY	Yes	No
A. Select the proper automatic selection for:		
1. Fibro-Glandular		
2. Fibro-Fatty		
3. Fatty Breast		
B. Perform without assistance: (may be simulated) * (If repeat is necessary check no)		
1. Cranio-caudad		
2. Medio-lateral oblique		
C. Identify Anatomy listed below on the above projections		
1. Tail		
2. Nipple		
3. Inframammary crease		
4. Pectoralis muscle		
Completed Documentation Forms	Y	N
1. Clinical Experience Documentation Form Mammography (Form F-37)		
2. Initials, ARRT ID #s Addresses of ARRT Certified Mammo Technologists Form		
Comments:		
<i>*Automatic failure if not met</i>		
Technologist Signature	Student Signature	
Clinical Instructor Signature	<i>Revised: 2003, 2004, 2007, 2008, 2014, 2016</i>	

MCNEESE STATE UNIVERSITY
Department of Radiologic & Medical Laboratory Science
RADIOLOGIC SCIENCES PROGRAM

CHECKLIST **SCORE** _____

NON-RADIOGRAPHIC PERFORMANCE EVALUATION - AREA: EQUIPMENT MANIPULATION

Student's Name: _____ **Date:** _____

CES: _____ **Room #** _____

I. Radiographic Equipment Operation	YES	NO
A. Manipulate the following		
1. On/off switch		
2. kVp control		
3. mA control		
4. Time control		
5. Small and large focal spot		
6. Fluoroscopic reset switch		
7. Tube locks (vertical, horizontal, lateral, and fluoro)		
8. Foot board and shoulder braces		
B. Turn radiographic tube from horizontal to vertical and vice versa		
C. Move radiographic table from horizontal to vertical		
D. Center the tube to the table (transversely)		
E. Position and move bucky tray, utilizing locks		
F. Angle the tube both caudal and cephalic and lateral angles (if applicable)		
G. Insert and remove IR into the bucky tray		
II. Identify the location of the:		
A. Grids (table, wall, stationary)		
B. X-ray tubes (Fluoro, radiographic)		
C. X-ray generator		
D. Storage cabinets		
E. Source to image receptor distance (SID) indicators		
F. Immobilization devices		
G. Location of Emergency drug box and supplies within the room		
H. Identify the location of crash carts in the Radiology Department		
I. Identify the location of the Code Blue Button		
III. Set up for Computed Radiography (when applicable)		
A. Type in patient information		
B. Select the examination		
C. Select # of projections		
D. Assign projection to each IR		
E. Properly process image (IR placed in reader)		
F. Manipulate image when and if necessary		
G. Accept image/reject image		
H. Terminate (end) Study (send to PACS)		
IV. Locate the following on the fluoroscopic tower and/or monitor:		
A. Brightness and contrast controls		
B. Switches for intermittent or continuous Fluoro (frames/sec)		
C. Image reverse		
D. Switch for last image hold (Screen Capture)		
V. Set up for Computed fluoroscopy		
A. Type in patient information		
B. Retrieve/Print/Delete images		
C. Enhance image contrast		
D. Reroute images (if just one printer, should be checked N/A)		
E. Send images to PACS (if applicable)		

Comments: _____

Technologist Signature	Student Signature	Clinical Instructor Signature	
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MCNEESE STATE UNIVERSITY
Department of Radiologic & Medical Laboratory Science
RADIOLOGIC SCIENCES PROGRAM

40 PLUS FORM

- Approved**
- Not Approved**
- Requested time completed**

This form should be used for the following:
1. When a student requests an additional clinical assignment beyond what is assigned for the clinical radiography course
2. When a student has requested an assignment that exceeds either the 10 hr/day or the 40 hr/wk time limits set by the program.
3. When a student has requested an additional academic course, which exceeds either the 10 hr/day or the 40 hr/wk time limits set by the program.

Student's Name _____

CES: _____

Date of request: _____

CHECK THE APPROPRIATE DESCRIPTION:

- Requesting an assignment, which may or may not exceed the time limits as set by the program (while the University is in session).
- Requesting an additional clinical assignment when the University is not in session (during semester breaks or between semesters).
- Requesting an additional academic course that exceeds the time limits as set by the program.

Date(s) and time(s) for the clinical assignment or academic course request

Area of the clinical assignment(s) if applicable

If area requested is not performing examinations, student must be actively involved in clinical participation during the request time

Student's Signature	Signature/title of Individual approving or not approving

Stipulations:

1. *Competency/proficiency evaluations may be performed*
2. *Documentation of Competency Maintenance Exams Cannot be performed*
3. *Minimum time requested for 40+ is a 2 hour block and*
4. *May not be scheduled during a student's class time*
5. *40+ Form requests are limited to the assigned CES - unless approved by program officials*
6. *40+ form requests during semester breaks are limited to the previously assigned CES*
7. *If an examination is not available at currently assigned CES, may request 40 + at previously assigned CES with approval of Program Director and/or Clinical Coordinator, and both CI's approval necessary as well. If proper approval is not obtained then 40+ assignment if completed is voided*
8. *Patient care cannot be delayed; students are not to be called out to perform a specific examination while the patient waits on the arrival of the student. The student must be present at the CES when patient is available for examination.*

Documentation of 40 + Time

Arrival time _____ Tech initials _____ Departure time _____ Tech initials _____

MCNEESE STATE UNIVERSITY
Department of Radiologic & Medical Laboratory Science
RADIOLOGIC SCIENCES PROGRAM

Student Name:

Date:

Score:

A radiographer's conduct in the clinical environment is a strong indicator that the public uses to judge a hospital's/department's level of professionalism. The appropriate conduct is composed of several aspects. When evaluating a student on his/her own abilities, one must consider the length of time they have been in the program.

INSTRUCTIONS: CHOOSE ONE IN EACH CATEGORY.

1. STUDENT'S PROFESSIONAL KNOWLEDGE - understanding of information, responsibilities, procedures, materials, equipment, and techniques required to do the job.

- The student demonstrates comprehensive knowledge of the basic concepts to produce quality images. (10 pts.)
- The student demonstrates above average knowledge of the basic concepts applicable to the production of images. (9 pts.)
- The student demonstrates adequate knowledge of the basic concepts to produce quality images. (8 pts.)
- The student demonstrates a lack of some phases of the basic concepts related to the production of quality images. (7 pts.)
- The student has inadequate knowledge of the basic concepts related to the production of quality images. (6 pts.)

2. QUALITY OF WORK - accurate, thorough, and neat

- The student meets highest standards of accuracy and thoroughness. (10 pts.)
- The student's work is consistently well done; seldom makes errors. (9 pts.)
- The student's quality of work is satisfactory; recognizes mistakes and takes corrective action. (8 pts.)
- The student makes repeated mistakes; tries to correct them. (7 pts.)
- The student has poor work quality; makes repeated mistakes with no idea of correction. (6 pts.)

3. ORGANIZATION OF WORK - the ability organize procedures

- The student sets up room and organizes procedure without instructions from the technologist. (10 pts.)
- The student sets up room and organizes procedures with little prompting from the technologist. (9 pts.)
- The student has to be told when and how to set up a room and organize a procedure. (8 pts.)
- The student cannot complete procedures without assistance: the technologist has to step in and help complete procedure. (7 pts.)
- The student does not have any concept of the procedure. The technologist has to take over the room. (6 pt.)

4. QUANTITY OF WORK - the volume of work accomplished

- The student does more work and is quicker than expected. (10 pts.)
- The student completes appropriate amount of work in the time expected. (9 pts.)
- The student completes work a little slower than expected. (8 pts.)
- The student does not complete work in the time expected. (7 pts.)
- The student does not complete work; works very slowly. (6 pts.)

5. PERFORMANCE UNDER PRESSURE - ability to handle pressure and remain calm in busy or crisis situations

- The student has exceptional ability to handle pressure; is always calm and efficient in busy or crisis situations. (10 pts.)
- The student can handle most busy or pressure situations calmly; seldom appears nervous or loses control. (9 pts.)
- The student displays moderate amount of tolerance for busy or crisis situations. (8 pts.)
- The student is easily irritated in busy or crisis situations and occasionally loses their temper. (7 pts.)
- The student cannot handle busy or crisis situations or makes situations more tense. (6 pts.)

6. INTERPERSONAL SKILLS - ability to communicate, interact and deal effectively with supervisors, peers, patients, and other employees.

- The student is well thought of by others; tactful and diplomatic; promotes teamwork; instills confidence in patients; aware of patients' needs. (10 pts.)
- The student uses an average amount of tact and diplomacy and gets along with others and patients. (9 pts.)
- The student is sometimes curt with patients and/or peers; should be more considerate and tactful. (8 pts.)
- The student consistently interacts poorly with supervisors, patients and/or peers. (7 pts.)
- The student is distant and does not interact with supervisors, patients, and/or peers. (6 pts.)

7. INITIATIVE - energy and motivation displayed in starting and completing tasks.

- The student is a self-starter and consistently seeks additional work. (10 pts.)
- The student works well when give responsibility, occasionally seeks additional work. (9 pts.)
- The student does what is required but does not pursue additional responsibility. (8 pts.)
- The student needs frequent encouragement to start and complete tasks. (7pts.)
- The student puts forth very little effort and does just enough to get by. (6 pts.)

CLINICAL INSTRUCTOR EVALUATION OF STUDENT

Student Name: _____

8. PUNCTUALITY - reporting at the start of day and returning from lunch

- The student is punctual in reporting to their assigned area. **(10 pts.)**
- The student is on time, but not in assigned area. **(9 pts.)**
- The student is occasionally late. **(8 pts.)**
- The student is consistently late. **(7pts.)**
- The student is consistently late and wanders or is not easily located. **(6 pts.)**

9. PERSONAL APPEARANCE - grooming, cleanliness and appropriateness of dress

- The student consistently presents a professional image and is always well groomed and careful about appearance. **(10 pts.)**
- The student has satisfactory personal appearance; is clean and neat and is in accordance with dress code. **(9 pts.)**
- The student has satisfactory personal appearance; sometimes needs to be reminded of dress code. **(8 pts.)**
- The student is careless about personal appearance. **(7 pts.)**
- The student is sloppy and is totally oblivious of appearance. **(6 pts.)**

10. PROFESSIONAL ETHICS - integrity, loyalty and impressions the student makes on professional judgment

- The student conducts self in an appropriate manner at all times conforming to professional standards of conduct; uses sound reasoning in making decisions. **(10 pts.)**
- The student usually conducts self in an appropriate manner conforming to professional standards of conduct. **(9 pts.)**
- The student adheres to professional standards of conduct in an acceptable manner. **(8 pts.)**
- The student often does not follow professional standards of conduct when dealing with others. **(7 pts.)**
- The student uses unreasonable judgment and decision making skills; consistently has a negative attitude, rude, arrogant to patients and staff. **(6 pts.)**

This evaluation tool will be completed two times during fall, spring, and summer. This evaluation counts as 7 - 12% of the grade for the clinical radiography course.

	TOTAL POINTS _____ /100
--	---------------------------------------

Comments:

Student's Signature	Date
Clinical Instructor's Signature	Date
	Revised, 2003, 2011, 2014, 2016

MCNEESE STATE UNIVERSITY
Department of Radiologic & Medical Laboratory Science
RADIOLOGIC SCIENCES PROGRAM

REQUEST FOR Choice ASSIGNMENTS

Requests must be made by the Mid-Term of RADS 459 (Rotations are done in RADS 461)

Student Name:

CES:

Semester:

Course #

Date of Request

I would like a choice rotation through (Student may request 1- 2 choice rotation(s) for up to 2 weeks).

Place and X in your selected area(s) and write in the number of weeks being requested next to the area you select) (Select 1 or 2 week rotations)

<input type="checkbox"/>	Radiography
<input type="checkbox"/>	Radiography/fluoroscopy
<input type="checkbox"/>	Mobile/surgery
<input type="checkbox"/>	Bone Densitometry
<input type="checkbox"/>	Vascular Interventional Radiography
<input type="checkbox"/>	Sonography
<input type="checkbox"/>	Nuclear medicine
<input type="checkbox"/>	Computed tomography
<input type="checkbox"/>	Magnetic Resonance
<input type="checkbox"/>	Mammography
<input type="checkbox"/>	Radiation Oncology
<input type="checkbox"/>	Other: <i>please specify</i> <input style="width: 50%; height: 15px;" type="text"/>

	<i>Assigned to:</i>
Student's Signature	CES
<i>Approved by:</i>	<i>For</i>
Clinical Coordinator's Signature	Rotation Area
	<small><i>Revised: 2003, 2007, 2011, 2013, 2014, 2016, 2019</i></small>

**MCNEESE STATE UNIVERSITY
 Department of Radiologic & Medical Laboratory Science
 RADIOLOGIC SCIENCES PROGRAM**

HEPATITIS B VACCINE WAIVER

This waiver is signed to confirm that, as a student health care provider who will be exposed to blood and other infectious materials, I am at risk of acquiring the Hepatitis B Virus (HBV). I understand that the McNeese State University Radiologic Sciences program recommends that I receive the HBV immunization. I also understand that I have the right to decline the immunization and do so at this time. Should I acquire the Hepatitis B Virus, I will hold harmless McNeese State University and the Radiologic Sciences program, affiliated Clinical Education Setting or any persons associate therewith.

Name (printed)	
Signature	Date
Witness Signature	Date

Revised: 2003, 2013

MCNEESE STATE UNIVERSITY
Department of Radiologic & Medical Laboratory Science
RADIOLOGIC SCIENCES PROGRAM

Written Pregnancy Notification Form

I, the undersigned, am <i>voluntarily</i> notifying a Program Official on <input style="width: 150px; height: 20px;" type="text"/> , <div style="text-align: right; margin-right: 20px;"> (Month) (Day) (Year) </div> of my pregnancy, with an estimated <input style="width: 60px; height: 20px;" type="text"/> gestation <div style="text-align: center; margin-right: 20px;"> (Weeks) </div> and an estimated due date of <input style="width: 250px; height: 20px;" type="text"/> . <div style="text-align: right; margin-right: 20px;"> (Month) (Day) (Year) </div>

I have <u>read</u>, and agree to abide by the pregnancy policy in the Student Handbook, and do agree to take personal responsibility for the radiation safety and protection of my unborn child.	
Student Signature	Date

I have <u>read</u> the appendix to Regulatory Guide 8.13 of the United States Nuclear Regulatory Commission.	
Student Signature	Date

I, the undersigned, realize that neither the University, its faculty, nor the Clinical Education Setting will be responsible for radiation injury to myself or the embryo/fetus since I am continuing in the program during my pregnancy.	
Student Signature	Date

I will continue in the program without modification	
Student Signature	Date

I will continue in the program following the recommendations of the program	
Student Signature	Date

Written Withdrawal of Declaration

I wish to withdraw my declaration of pregnancy

Student Signature	Date

revised 2003, 2008, 2014

**MCNEESE STATE UNIVERSITY
 Department of Radiologic & Medical Laboratory Science
 RADIOLOGIC SCIENCES PROGRAM**

REPEAT EXPOSURES

When repeat exposures are necessary, a qualified practitioner* must be present in the examining room, and the student must fill out this form.

It is the student's responsibility to insure that proper clinical supervision prevails.

- Failure to comply will result in disciplinary action
- Report to a program official whenever asked to perform an examination which violates this policy.

Room #
Semester/Yr

CES:

STUDENT REPEAT EXPOSURES

	Exam/position or projection	Student Signature	Tech Initials	Date

Revised: 2003, 004,2016

**Qualified practitioner: one which is credentialed and in good standing in radiography, radiation therapy, sonography or nuclear by the American Registry of Radiologic Technologists (ARRT) or appropriate certifying agency, or holds a current license to practice radiography, radiation therapy, or nuclear medicine in the state of Louisiana.*

MCNEESE STATE UNIVERSITY
Department of Radiologic & Medical Laboratory Science
RADIOLOGIC SCIENCES PROGRAM

CONVICTION OF A CRIME NOTICE

I, The undersigned student of the Radiologic Sciences Program at McNeese State University – Department of Radiologic and Medical Laboratory Science, do here by acknowledge:

- That if I have ever been convicted of a crime such as a misdemeanor, felony or similar offense in a military court-martial, that it could result in my not being eligible to take the national certifying examination to become a registered technologist in radiography,
- I am required to report charges or convictions that have been withheld, deferred, stayed, set aside, suspended, or entered into a pre-trial diversion, or involved a pleas of guilt or no contest (nolo contendere),
- I am not required to report juvenile convictions processed in juvenile court or traffic citations unless drugs or alcohol was involved,
- I also realize that if convicted as stated above while enrolled as a student in the program, the result will be the same, and
- It is my responsibility to file a pre application with the ARRT in order to obtain a ruling of the impact of my eligibility.

SIGNATURE OF STUDENT

DATE

- Pre-application may be submitted at any time either before or after entry into an accredited program, there is an associated fee for submitting this application to the ARRT
- Further information regarding reporting requirements may be accessed on the ARRT website at www.arrt.org/pdfs/ethics/ethics-review-pre-application.pdf

Revised: 2001, 2007, 2008, 2011, 2016

MCNEESE STATE UNIVERSITY
Department of Radiologic & Medical Laboratory Science
RADIOLOGIC SCIENCES PROGRAM

RADS 467 - ADVANCED AREA ASSIGNMENT OBJECTIVE EVALUATION- AREA BONE DENSITOMETRY

Student Name:

CES:

Date from:

Date to:

I. PATIENT CARE	
1. Evaluate and understand request	
2. Prepare room prior to patient arrival	
3. Verify patient identity	
4. Introduce self to patient	
5. Obtain patient height and weight	
6. Assist patient to table	
7. Attentive to patient needs	
8. Record pertinent patient history	
9. Maintain clean stocked area	
II. EQUIPMENT	
1. Energize unit	
2. Perform QA phantom test	
3. Type patient information into computer	
4. Position patient properly on table	
5. Select correct scan speed	
6. Utilize correct immobilization devices	
7. Position part correctly – use rice bags when applicable	
8. Select correct scan	
9. Properly position scan arm	
A. Scan hip	
B. Scan Lumbar Spine	
III. BONE MINERAL ANALYSIS	
1. Analyze hip	
2. Analyze Lumbar Spine	
3. Set profiles when applicable	
4. Compare scans when applicable	
A. Backup disc	
B. Archive disc	
Comments:	
Student Signature	
Technologist Signature	

MCNEESE STATE UNIVERSITY
Department of Radiologic & Medical Laboratory Science
RADIOLOGIC SCIENCES PROGRAM

Advanced Area Assignment ranking Request Form
(Only used for individuals prior to enrolling in RADS 467)

Student Name:

Semester: Spring	Course # RADS 467
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Date of Request

I request the following rankings be considered for my advanced area assignments for RADS 467:
*(Of the following 7 areas listed below, Rank them according to your desire for possible assignment, **Ranking of 1 assigned to the area you desire most, then 2, 3 etc.**)*

Based on the overall outcomes of this request form rotations may be limited to availability. In cases where more individuals request an area than spaces are available, a scoring system will be instituted to determine who will be assigned to specific areas (Scoring system will include the following: Unit Test grade RADS 461 at midterm =50%, Program GPA=50%,

Based on prior clinical grades and individual clinical performance, the RADS faculty by a plurality can decide to deny a request for a specialty assignment. In this case the student would be assigned to Diagnostic Radiology.

<input type="checkbox"/> Computed Tomography (10 Positions) <i>requires completion of RADS 471</i>
<input type="checkbox"/> Magnetic Resonance (8 Positions) <i>requires completion of RADS 471</i>
<input type="checkbox"/> Cardiac Interventional Radiography (3-4 Positions) <i>requires completion of RADS 370</i>
<input type="checkbox"/> Vascular Interventional Radiography (2 Positions) <i>requires completion of RADS 370</i>
<input type="checkbox"/> Mammography/Bone Densitometry (6 Positions) <i>requires completion of RADS 470</i>
<input type="checkbox"/> Diagnostic Radiology

	<i>Assigned to:</i>
Student's Signature	CES
<i>Approved by:</i>	<i>For</i>
Clinical Coordinator's Signature	Rotation Area

Revised 2003, 2004, 2011, 2013, 2014, 2015, 2016, 2019

MCNEESE STATE UNIVERSITY
Department of Radiologic & Medical Laboratory Science
RADIOLOGIC SCIENCES PROGRAM

HEALTH FORM

This form is to be completed by those students accepted into the professional phase of the radiologic Sciences program. This information is necessary so that the University can inform the affiliated clinical education settings of your health history should a situation occur resulting in the need for immediate medical attention.

Name:**Date of Birth:****ID #****Do you have health Insurance** NO YES**Directions –Please check the appropriate box and give an explanation if necessary. (Use the reverse side if needed)****ALLERGIES** NO YES*If yes, please list allergies and state any medications if applicable.***Convulsions or Seizures** NO YES*If yes, please explain type and list medication(s) if applicable.***DIABETES** NO YES*If yes, please explain type and list medication(s) if applicable.***SEVERE HEADACHES** NO YES*If yes, please explain type and list medication(s) if applicable.***HERNIA OR RUPTURE** NO YES*If yes, please explain type and list medication(s) if applicable.***HEART AILMENT** NO YES*If yes, please explain type and list medication(s) if applicable.***BACK OR SPINAL AILMENT** NO YES*If yes, please explain type and list medication(s) if applicable.***SURGERIES, INJURIES** NO YES*List any surgeries or injuries***COMMUNICABLE DISEASE** NO YES*List any communicable disease(s) that you currently have:***OTHER HEALTH AILMENTS
SUCH AS KIDNEY AILMENT,
ULCERS, CHEST PAIN,
FREQUENT COLDS OR SORE
THROAT***List any:***IMMUNIZATIONS OR TEST
RECORD***Submit an up-to-date immunization record along with this form (if not in compliance with the affiliated clinical education setting requirements, you will have to obtain the necessary immunization(s) or test).***ARE YOU CURRENTLY
UNDER MEDICAL CARE** NO YES*If yes, please explain and list all applicable medications (use back of form if more space is needed)***I MEET THE TECHNICAL STANDARDS OF THE PROGRAM** NO YES**EMERGENCY CONTACT Notification:** *Please state name, address and phone # for the following:***Physician:****Relative or Friend:****Student's Signature****Date***Revised 2013, 2016*

**MCNEESE STATE UNIVERSITY
Department of Radiologic & Medical Laboratory Science
RADIOLOGIC SCIENCES PROGRAM**

**TJC and OSHA Requirements
Documentation for the CES**

CES: _____ **Date:** _____

Assigned Radiologic Sciences Students For _____ Semester 20__ listed below:

Contact Radiologic Sciences Program Director Greg Bradley at 475-5657 if more details are needed

Student Name	Fire Safety Hazardous Mat. Orientation Done at CES <i>date</i>	Blood borne Pathogen & TB Standards Orientation <i>Annually</i> <i>date</i>	Hand Washing Orientation <i>Annually</i> <i>date</i>	Background Check <i>Performed by Precheck</i> <i>Once prior to first clinical course</i> <i>date</i>	Drug Screen <i>Once, prior to first clinical course or random</i> <i>date</i>	TB Skin (PPD) Test <i>Annually</i> <i>Date Read</i>	CPR Cert. <i>Must be current</i> <i>Date Expires</i>

Revised: 2004, 2006, 2015, 2016, 2019

MCNEESE STATE UNIVERSITY
Department of Radiologic & Medical Laboratory Science
RADIOLOGIC SCIENCES PROGRAM

ORIENTATION TO THE CLINICAL EDUCATION SETTING

CES: _____ | **Date Orientation completed:** _____

Student Name: _____ | **Student Phone #:** _____

TO BE COMPLETED THE FIRST DAY OF THE CLINICAL RADIOGRAPHY COURSE	
<input type="checkbox"/> Introduction of Clinical Instructor	Restrooms, Storage areas: linen, supplies, etc.
<input type="checkbox"/> Obtain students' phone numbers	Front desk/file, Advanced/Specialty area
<input type="checkbox"/> Review the following policies in the Handbook	Critical Care Unit
Dress Code	Breaks
Incident Reporting	Attendance/Tardy
Clinical Supervision of Students	Clinical Radiography Course – <i>Record Keeping</i>
Clinical Assignments	Conduct
Appeals Procedures	Fluoroscopy
Markers	TB./Notification/Protocol
<input type="checkbox"/> Introduce to chief technologists, technical directors, radiologists (if possible).	<input type="checkbox"/> Orientate to hospital or clinic policies <i>Standard Precautions</i>
<input type="checkbox"/> Procedure Management/patient flow	Request assistance from security
<input type="checkbox"/> Room assignments, and area assignment, demonstration of physical location	<i>Emergency Preparedness, (tornado, hurricane, flood, bomb threats, terrorists attacks)</i>
<input type="checkbox"/> Review policy and procedures for:	Surgical attire
Competency System	<i>Medical emergencies, (code: blue, yellow, pink, gray, red, black, orange, white, silver)</i>
Radiographic Exams - <i>Module I / Module II</i>	Parking, Smoking
Competency Evaluation	<input type="checkbox"/> Radiation Protection
Proficiency Evaluation	Location of Pb apparel
Merit competency Evaluation	Where to stand during exposures
Remedial Action	Where to wear dosimeter
Minimum Requirements & Documentation of Competency Maintenance	Holding patients during exposures
Scoring guidelines for competency & proficiency evaluations (<i>show location of posted copy</i>)	Gonadal Shielding
Evaluation - <i>Equipment manipulation</i>	Closing doors during exposures
Attendance – <i>Clinical Participation</i>	Pregnancy considerations
<input type="checkbox"/> Location of all forms within the Department	Basic review of time, distance and shielding
<input type="checkbox"/> Review clinical course syllabus	<input type="checkbox"/> MRI Safety
<input type="checkbox"/> Review CES HIPAA policy (<i>signature when required</i>)	Review Policy in Handbook
<input type="checkbox"/> Distribute routine exam booklets for the CES	MRI safety protocol specific to the assigned CES
<input type="checkbox"/> Orientate and tour of department and hospital.	<input type="checkbox"/> CES Employee Code of Conduct or Handbook
Designated Computer (s) for sign-in, lounges, lockers	
	Student Signature
	Clinical Instructor Signature
	<i>Revised: 2004, 2007, 2011, 2012, 2013, 2016</i>

MCNEESE STATE UNIVERSITY
Department of Radiologic & Medical Laboratory Science
RADIOLOGIC SCIENCES PROGRAM

Venipuncture Documentation

Documentation of successful performance of venipuncture procedures (Performance of at least 5 directly supervised venipunctures required by completion of all clinical radiography courses)

Student Name:

Date completed	Pt. Identification #		Verified by assigned radiographer

Comments:

Student Signature	Clinical Instructor Signature

Revised: 2004, 2014, 2016

**MCNEESE STATE UNIVERSITY
 Department of Radiologic & Medical Laboratory Science
 RADIOLOGIC SCIENCES PROGRAM**

Medical Information Release

Name _____
 (print name)
 Date _____

I, _____ give my permission to the McNeese State University Radiologic Sciences program to release the following checked items listed below to Clinical Education Settings affiliated with the program. The Clinical Education Settings affiliated with the program are: Advanced MRI, Children’s Clinic of Southwest Louisiana, Christus St. Patrick Hospital, Diagnostic Center of West Calcasieu-Cameron Hospital, Lake Area Medical Center, Lake Charles Memorial Hospital, Open Air MRI of Lake Charles, Pediatric Center of Southwest Louisiana, Urology Center of Southwest Louisiana, W.O. Moss Medical Health Clinic and West Calcasieu Cameron Hospital.

Check all

Health Form (Form F-38)	
Results from PPD	
Results from Drug Screening	
Results from Alcohol Screening	

 (Student Signature)

 (Date)

MCNEESE STATE UNIVERSITY
Department of Radiologic & Medical Laboratory Science
RADIOLOGIC SCIENCES PROGRAM

<input type="checkbox"/> Competency	<input type="checkbox"/> Passed
<input type="checkbox"/> Retest	
MUST RECEIVE ALL YES TO PASS THIS EVAL.	

MERIT COMPETENCY EVALUATION: Area - Retrograde Pyelogram

Student Name:

Date

X-ray or MR #	Accession # (if applicable)	Procedure
----------------------	------------------------------------	------------------

I. Assessment of Requisition*	Yes	No
A. Identify Procedure		
B. Identify Patient		
II. Physical Facility Readiness*		
A. Set up the Room		
B. Set up the Control Panel		
C. Properly placed foot switch		
III. Assist Staff as requested *		
IV. Procedure*		
A. Properly adhered to aseptic technique		
B. Operate the Fluoroscopic Equip.		
C. Make Exposures as requested		
D. Save the image		
E. Send image to PACS if applicable		
F. Make a permanent image when applicable		
V. Radiation Protection *		
A. Protect all personnel with lead aprons		
B. Protect all personnel from unnecessary radiation		
VI. Anatomy Identification*		
<i>* Automatic failure if not met</i>		

Comments:

Technologist Signature	Student Signature
Clinical Instructor Signature	

Revised: 2004,2005,2007, 2016

MCNEESE STATE UNIVERSITY
Department of Radiologic & Medical Laboratory Science
RADIOLOGIC SCIENCES PROGRAM

Grading Procedure Sheet
RADS. 350

STUDENT'S NAME _____

I. Performance Evaluations = 50% of Final Grade						
A. Competency Evaluations Form F- 10 (10 points each)						
1. Competency Evaluations from Module I (4 required) (need 2 for midterm)						
√ if CI	Date	Successful Examination	Score 10		Unsuccessful Examination	Score 5 or 0
<i>Carry over competency evaluations to RADS 355</i>						
2. Competency Evaluations from Module II (2 required) (need 1 for midterm)						
<i>Carry over competency evaluations to RADS 355</i>						

√ CI	Date	Successful Examination	Score 10	Date	Unsuccessful Examination	Score 5 or 0

B. Merit Competency Evaluations (5 points) (limit of 6)		

MID SEMESTER POINT SYSTEM <i>For Section I</i>	
TOTAL PTS RECEIVED FROM A, B =	TOTAL PTS POSSIBLE FROM A =
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 50% = _____ Score for I	

FINAL POINT SYSTEM <i>For Section I</i>	
TOTAL PTS RECEIVED FROM A, B =	TOTAL PTS POSSIBLE FROM A =
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 50% = _____ Score for I	

II. Documented Competency Maintenance = 5% of Final Grade

If All documented competency Maintenance requirements are completed for the semester the student will be granted 100 points for Section II.

If any of the documented competency Maintenance requirements are not completed for the semester the student will receive "0" for section II.

FINAL POINT SYSTEM <i>For Section II</i>	
TOTAL PTS RECEIVED FROM Section II =	TOTAL PTS POSSIBLE FROM Section II = 100
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 5% = _____ Score for II	

III Rotation Evaluation = 3% of Final Grade					
A. Student Clinical Evaluations Form F-9 (Each Evaluation = possible 100 pts)					
DATES			DATES		
<i>From</i>	<i>To</i>	SCORE	<i>From</i>	<i>To</i>	SCORE

B. Equipment Manipulation Evaluations Form F-24 (Each evaluation – possible 10 pts) (required for each rotational assigned area) if not completed by end of the first rotational assignment through the area, will result in (0)

DATE	ROOM	SCORE	DATE	ROOM	SCORE

MID SEMESTER POINT SYSTEM For Section III

TOTAL PTS RECEIVED FROM A, B = _____ TOTAL PTS POSSIBLE FROM A, B = _____

PTS. Received divided
by PTS. Possible = _____ X 100 = _____ X 3% = _____ Score for III

FINAL POINT SYSTEM For Section III

TOTAL PTS RECEIVED FROM A, B = _____ TOTAL PTS POSSIBLE FROM A, B = _____

PTS. Received divided
by PTS. Possible = _____ X 100 = _____ X 3% = _____ Score for III

IV. Record Keeping = 5% of Final Grade (each student is granted 100 on day one of the clinical radiography course) (subtract 5 points for each time student does not record in the following areas)

A. Daily Clinical Experience Record (record the date for each incomplete clinical experience record = -5)

B. Completion and signing of Evaluations (record the date for no signature on evaluation = -5)

C. Personal Pocket-Sized Notebook of Exposure Factors (record the date for no notebook or not up-to-date= -5)

D. Daily Attendance Record (record date for failure to record arrival or departure time = -5)							

MID SEMESTER POINT SYSTEM <i>For Section IV</i>	
TOTAL PTS RECEIVED FROM A, B, C, D =	TOTAL PTS POSSIBLE FROM A, B, C, D =
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 5% = _____ Score for IV	

FINAL POINT SYSTEM <i>For Section IV</i>	
TOTAL PTS RECEIVED FROM A, B, C, D =	TOTAL PTS POSSIBLE FROM A, B, C, D =
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 5% = _____ Score for IV	

V. Clinical Participation – 10% of Final Grade			
Record date of Absence, For absences beyond 1 record date absence is made up			
Date	Make-up Date	Date	Make-up date
	<i>Not required for 1st absence</i>		
Total number of absences = _____			
Refer to the chart below for the point value for clinical participation, if absences are not made up			
	0-1 absence	=	100 pts.
	2 absences	=	75 pts
	3 absences	=	50 pts
	4 absences	=	25 pts
	Over 4 absences	=	0 pts

MID SEMESTER POINT SYSTEM <i>For Section V</i>	
PTS. Received from active clinical participation = _____ X 100 = _____ X 10% = _____ Score for V	

FINAL POINT SYSTEM <i>For Section V</i>	
PTS. Received from active clinical participation = _____ X 100 = _____ X 10% = _____ Score for V	

VI. Clinical Instructor Evaluation Form F- 26/Counseling Sessions = 7% of Final Grade	
Enter the date and score for the clinical instructor evaluation (evaluation worth 100 pts)	
Date	Score

FINAL POINT SYSTEM For Section VI	
TOTAL PTS RECEIVED CI evaluations =	TOTAL PTS POSSIBLE = 100
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 7% = _____ Score for VI	

VII. 20% of Final Grade (unit test, mid-term grade, Case Analysis Presentation = 100 possible pts each, LSRT total points; quizzes = 10 points each)		
Record date and score for each of the following when applicable		
	DATE	SCORE
Unit Test		
Midterm Grade		
Quiz		
Quiz		
Quiz		
Quiz		
Case Analysis Presentation		
LSRT BONUS PTS (when applicable)		

MID SEMESTER POINT SYSTEM For Section VII	
TOTAL PTS RECEIVED Unit Tests =	TOTAL PTS POSSIBLE from Unit Tests =
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 20% = _____ Score for VII	

FINAL POINT SYSTEM For Section VII	
TOTAL PTS RECEIVED Unit Tests =	TOTAL PTS POSSIBLE Unit Tests =
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 20% = _____ Score for VII	

<u>MID-TERM GRADE</u>		<u>FINAL GRADE</u>	
SCORE FROM I		SCORE FROM I	
		SCORE FROM II	
SCORE FROM III		SCORE FROM III	
SCORE FROM IV		SCORE FROM IV	
SCORE FROM V		SCORE FROM V	
		SCORE FROM VI	
SCORE FROM VII		SCORE FROM VII	
TOTAL= _____ /88= _____ % For _____ Grade		TOTAL= _____ For _____ Grade	

I am submitting _____ passed competency evaluations and _____ passed proficiency evaluations as recorded above for this Clinical Radiography course

I have completed the following documented competency maintenance requirements for the clinical radiography course:

EXAMS	NUMBERS
Chest And/Or Abdomen	_____ 10 required
Upper Extremity	_____ 1 required

Student's Signature	Date	Student's Signature	Date
Clinical Instructor's Signature	Date	Clinical Instructor's Signature	Date

Revised 2008, 2009, 2010, 2013, 2014, 2015, 2016, 2017, 2018, 2019

MCNEESE STATE UNIVERSITY
Department of Radiologic & Medical Laboratory Science
RADIOLOGIC SCIENCES PROGRAM

Grading Procedure Sheet

RADS. 355

STUDENT'S NAME _____

I. Performance Evaluations = 40% of Final Grade						
A. Competency Evaluations Form F- 10 (10 points each)						
1. Competency Evaluations from Module I (7 required) (need 3 for midterm)						
√ if CI	Date	Successful Examination	Score 10	Date	Unsuccessful Examination	Score 5 or 0
<i>Carry over competency evaluations to RADS 356</i>						
2. Competency Evaluations from Module II (5 required) (need 2 for midterm)						
<i>Carry over competency evaluations to RADS 356</i>						

\checkmark CI	Date	Successful Examination	Score 10	Date	Unsuccessful Examination	Score 5 or 0

B. Proficiency Evaluations (10 points)

C. Merit Competency Evaluations (5 points) (limit of 6)

MID SEMESTER POINT SYSTEM For Section I	
TOTAL PTS RECEIVED FROM A, B, C =	TOTAL PTS POSSIBLE FROM A, B =
PTS. Received divided By PTS. Possible = _____ X 100 = _____ X 40% = _____ Score for I	

FINAL POINT SYSTEM For Section I	
TOTAL PTS RECEIVED FROM A, B, C =	TOTAL PTS POSSIBLE FROM A, B =
PTS. Received divided By PTS. Possible = _____ X 100 = _____ X 40% = _____ Score for I	

II. Documented Competency Maintenance = 5% of Final Grade	
<i>If All documented competency Maintenance requirements are completed for the semester the student will be granted 100 points for Section II.</i>	
<i>If any of the documented competency Maintenance requirements <u>are not</u> completed for the semester the student will receive "0" for section II.</i>	
FINAL POINT SYSTEM For Section II	
TOTAL PTS RECEIVED FROM Section II =	TOTAL PTS POSSIBLE FROM Section II = 100
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 5% = _____ Score for II	

III. Rotation Evaluation = 3% of Final Grade					
A. Student Clinical Evaluations Form F- 9 (Each Evaluation = possible 100 pts)					
DATES		SCORE	DATES		SCORE
From	To		From	To	

B. Equipment Manipulation Evaluations Form F-24 (Each evaluation – possible 10 pts) (required for each rotational assigned area) if not completed by end of the first rotational assignment through the area, will result in (0)

DATE	ROOM	SCORE	DATE	ROOM	SCORE

MID SEMESTER POINT SYSTEM For Section III

TOTAL PTS RECEIVED FROM A, B =	TOTAL PTS POSSIBLE FROM A, B =
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 3% = _____ Score for III	

FINAL POINT SYSTEM For Section III

TOTAL PTS RECEIVED FROM A, B =	TOTAL PTS POSSIBLE FROM A, B =
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 3% = _____ Score for III	

IV. Record Keeping = 5% of Final Grade (each student is granted 100 on day one of the clinical radiography course) (subtract 5 points for each time student does not record in the following areas)

A. Daily Clinical Experience Record (record the date for each incomplete clinical experience record = -5)

B. Completion and signing of Evaluations (record the date for no signature on evaluation = -5)

C. Personal Pocket-Sized Notebook of Exposure Factors (record the date for no notebook or not up-to-date= -5)

D. Daily Attendance Record (record date for failure to record arrival or departure time = -5)							

MID SEMESTER POINT SYSTEM <i>For Section IV</i>	
TOTAL PTS RECEIVED FROM A, B, C, D =	TOTAL PTS POSSIBLE FROM A, B, C, D =
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 5% = _____ Score for IV	
FINAL POINT SYSTEM <i>For Section IV</i>	
TOTAL PTS RECEIVED FROM A, B, C, D =	TOTAL PTS POSSIBLE FROM A, B, C, D =
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 5% = _____ Score for IV	

V. Clinical Participation – 5% of Final Grade			
Record date of Absence, For absences beyond 1 record date absence is made up			
Date	Make-up Date	Date	Make-up date
	<i>Not required for 1st absence</i>		
Total number of absences = _____			
Refer to the chart below for the point value for clinical participation, if absences are not made up			
	0-1 absence	=	100 pts.
	2 absences	=	75 pts
	3 absences	=	50 pts
	4 absences	=	25 pts
	Over 4 absences	=	0 pts

MID SEMESTER POINT SYSTEM <i>For Section V</i>	
PTS. Received from active clinical participation = _____ X 100 = _____ X 5% = _____ Score for V	
FINAL POINT SYSTEM <i>For Section V</i>	
PTS. Received from active clinical participation = _____ X 100 = _____ X 5% = _____ Score for V	

VI. Clinical Instructor Evaluation Form F- 26/Counseling Sessions = 7% of Final Grade			
Enter the date and score for the 2 clinical instructor evaluation each semester (Each evaluation worth 100 pts)			
Date	Score	Date	Score

MID SEMESTER POINT SYSTEM For Section VI	
TOTAL PTS RECEIVED CI evaluations =	TOTAL PTS POSSIBLE = 100
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 7% = _____ Score for VI	

FINAL POINT SYSTEM For Section VI	
TOTAL PTS RECEIVED CI evaluations =	TOTAL PTS POSSIBLE = 200
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 7% = _____ Score for VI	

VII. 15% of Final Grade (unit test, mid-term grade, NRTW project, and Community Service = 100 possible pts each, LSRT bonus total points)		
Record date and score for each of the following when applicable		
	DATE	SCORE
Unit Test		
Midterm Grade		
LSRT BONUS PTS (when applicable)		
NRTW Project		
Community Service (6 hours required, all or nothing for points)		

MID SEMESTER POINT SYSTEM For Section VII	
TOTAL PTS RECEIVED Unit Tests =	TOTAL PTS POSSIBLE from Unit Tests =
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 15% = _____ Score for VII	

FINAL POINT SYSTEM For Section VII	
TOTAL PTS RECEIVED Unit Tests =	TOTAL PTS RECEIVED Unit Tests =
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 15% = _____ Score for VII	

VIII. Writing Enriched Requirements 20% of Final Grade	
TOTAL PTS RECEIVED Writing Assign. = _____	TOTAL PTS Possible from writing assignment = _____
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 20% = _____ Score for VIII	

MID-TERM GRADE		FINAL GRADE	
SCORE FROM I		SCORE FROM I	
		SCORE FROM II	
SCORE FROM III		SCORE FROM III	
SCORE FROM IV		SCORE FROM IV	
SCORE FROM V		SCORE FROM V	
SCORE FROM VI		SCORE FROM VI	
SCORE FROM VII		SCORE FROM VII	
		SCORE FROM VIII	
TOTAL= _____ /75 = _____ % For _____ Grade		TOTAL= _____ For _____ Grade	

I am submitting _____ passed competency evaluations and _____ passed proficiency evaluations as recorded above for this Clinical Radiography course	
I have completed the following documented competency maintenance requirements the clinical radiography course:	
EXAMS	NUMBERS
Chest, Abdomen	_____ 13 Required
Extremities	_____ 4 Required
Mobiles	_____ 1 required
Student's Signature _____	Date _____
Clinical Instructor's Signature _____	Date _____

Revised 2008, 2009,2013, 2014, 2015, 2016,2017, 2018, 2019

MCNEESE STATE UNIVERSITY
Department of Radiologic & Medical Laboratory Science
RADIOLOGIC SCIENCES PROGRAM

Grading Procedure Sheet
RADS. 356

STUDENT'S NAME

I. Performance Evaluations = 50% of Final Grade							
A. Competency Evaluations Form F- 10(10 points each)							
1. Competency Evaluations from Module I (7 required) (need 3 for midterm)							
√ CI	Date	Successful Examination	Score 10		Date	Unsuccessful Examination	Score 5 or 0
<i>Carry over competency evaluations to RADS 459</i>							
2. Competency Evaluations from Module II (7 required) (need 3 for midterm)							

√ CI	Date	Successful Examination	Score 10	Date	Unsuccessful Examination	Score 5 or 0
<i>Carry over competency evaluations to RADS 459</i>						
B. Proficiency Evaluations (10 points)						
C. Merit Competency Evaluations (5 points) (limit of 6)						

MID SEMESTER POINT SYSTEM For Section I	
TOTAL PTS RECEIVED FROM A, B, C = _____	TOTAL PTS POSSIBLE FROM A, B = _____
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 50% = _____ Score for I	

FINAL POINT SYSTEM For Section I	
TOTAL PTS RECEIVED FROM A, B, C = _____	TOTAL PTS POSSIBLE FROM A, B = _____
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 50% = _____ Score for I	

II. Documented Competency Maintenance = 5% of Final Grade	
<i>If All documented competency Maintenance requirements are completed for the semester the student will be granted 100 points for Section II.</i>	
<i>If any of the documented competency Maintenance requirements <u>are not</u> completed for the semester the student will receive "0" for section II.</i>	
FINAL POINT SYSTEM For Section II	
TOTAL PTS RECEIVED FROM Section II = _____	TOTAL PTS POSSIBLE FROM Section II = 100

III. Rotation Evaluation = 3% of Final Grade					
A. Student Clinical Evaluations Form F- 9 (Each Evaluation = possible 100 pts)					
DATES			DATES		
<i>From</i>	<i>To</i>	SCORE	<i>From</i>	<i>To</i>	SCORE

B. Equipment Manipulation Evaluations Form F-24 (Each evaluation – possible 10 pts) (required for each rotational assigned area) if not completed by end of the first rotational assignment through the area, will result in (0)

DATE	ROOM	SCORE	DATE	ROOM	SCORE

MID SEMESTER POINT SYSTEM For Section III

TOTAL PTS RECEIVED FROM A, B = _____ TOTAL PTS POSSIBLE FROM A, B = _____

PTS. Received divided
by PTS. Possible = _____ X 100 = _____ X 3% = _____ Score for III

FINAL POINT SYSTEM For Section III

TOTAL PTS RECEIVED FROM A, B = _____ TOTAL PTS POSSIBLE FROM A, B = _____

PTS. Received divided
by PTS. Possible = _____ X 100 = _____ X 3% = _____ Score for III

IV. Record Keeping = 5% of Final Grade (each student is granted 100 on day one of the clinical radiography course) (subtract 5 points for each time student does not record in the following areas)

A. Daily Clinical Experience Record (record the date for each incomplete clinical experience record = -5)

B. Completion and signing of Evaluations (record the date for no signature on evaluation = -5)

C. Personal Pocket-Sized Notebook of Exposure Factors (record the date for no notebook or not up-to-date= -5)

D. Daily Attendance Record (record date for failure to record arrival or departure time = -5)							

MID SEMESTER POINT SYSTEM For Section IV	
TOTAL PTS RECEIVED FROM A, B, C, D =	TOTAL PTS POSSIBLE FROM A, B, C, D =
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 5% = _____ Score for IV	

FINAL POINT SYSTEM For Section IV	
TOTAL PTS RECEIVED FROM A, B, C, D =	TOTAL PTS POSSIBLE FROM A, B, C, D =
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 5% = _____ Score for IV	

V. Clinical Participation – 10% of Final Grade			
Record date of Absence, For absences beyond 1 record date absence is made up			
Date	Make-up Date	Date	Make-up date
	<i>Not required for 1st absence</i>		
Total number of absences = _____			
Refer to the chart below for the point value for clinical participation, if absences are not made up			
	0-1 absence	=	100 pts.
	2 absences	=	75 pts
	3 absences	=	50 pts
	4 absences	=	25 pts
	Over 4 absences	=	0 pts

MID SEMESTER POINT SYSTEM For Section V	
PTS. Received from active clinical participation = _____ X 100 = _____ X 10% = _____ Score for V	

FINAL POINT SYSTEM For Section V	
PTS. Received from active clinical participation = _____ X 100 = _____ X 10% = _____ Score for V	

VI. Clinical Instructor Evaluation Form F-26/Counseling Sessions = 7% of Final Grade			
Enter the date and score for the 2 clinical instructor evaluation each semester (Each evaluation worth 100 pts)			
Date	Score	Date	Score

MID SEMESTER POINT SYSTEM For Section VI	
TOTAL PTS RECEIVED CI evaluations =	TOTAL PTS POSSIBLE = 100
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 7% = _____ Score for VI	

FINAL POINT SYSTEM For Section VI	
TOTAL PTS RECEIVED CI evaluations =	TOTAL PTS POSSIBLE = 200
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 7% = _____ Score for VI	

VII. 20 % of Final Grade, (Unit Tests, Mid-term grade, Corrected writing assignment, Community service - each item = 100 possible pts each; LSRT bonus total points)		
Record date and score for each of the following when applicable		
	DATE	SCORE
Unit Test		
Midterm Grade		
Submission of corrected RADS 355 Writing Assignment (points all or nothing)		
Community Service (6 hours required, all or nothing for points)		
LSRT BONUS PTS (when applicable)		

MID SEMESTER POINT SYSTEM For Section VII	
TOTAL PTS RECEIVED =	TOTAL PTS POSSIBLE =
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 20% = _____ Score for VII	

FINAL POINT SYSTEM For Section VII	
TOTAL PTS RECEIVED =	TOTAL PTS POSSIBLE =
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 20% = _____ Score for VII	

MID-TERM GRADE		FINAL GRADE	
SCORE FROM I		SCORE FROM I	
		SCORE FROM II	
SCORE FROM III		SCORE FROM III	
SCORE FROM IV		SCORE FROM IV	
SCORE FROM V		SCORE FROM V	
SCORE FROM VI		SCORE FROM VI	
SCORE FROM VII		SCORE FROM VII	
TOTAL= <u> </u> /95= <u> </u> % For <u> </u> Grade		TOTAL= <u> </u> For <u> </u> Grade	

<p>I am submitting _____ passed competency evaluations and _____ passed proficiency evaluations as <u>recorded</u> above for this Clinical Radiography course</p>	
<p>I have completed the following documented competency maintenance requirements for the clinical radiography course:</p>	
EXAMS	NUMBERS
Chest, Abdomen	_____ 20 required
Extremities	_____ 5 required
Mobiles	_____ 3 required
Student's Signature	Date
Clinical Instructor's Signature	Date

Revised 2008, 2009, 2013, 2015, 2016, 2018, 2019

MCNEESE STATE UNIVERSITY
Department of Radiologic & Medical Laboratory Science
RADIOLOGIC SCIENCES PROGRAM

Grading Procedure Sheet
RADS. 459

STUDENT'S NAME

I. Performance Evaluations = 50% of Final Grade							
A. Competency Evaluations Form F- 10(10 points each)							
1. Competency Evaluations from Module I (4 required) (need 2 for midterm)							
√ CI	Date	Successful Examination	Score 10		Date	Unsuccessful Examination	Score 5 or 0
<i>Carry over competency evaluations to RADS 461</i>							
2. Competency Evaluations from Module II (4 required) (need 2 for midterm)							
√ CI	Date	Successful Examination	Score 10		Date	Unsuccessful Examination	Score 5 or 0
<i>Carry over competency evaluations to RADS 461</i>							

B. Equipment Manipulation Evaluations Form F-24 (Each evaluation – possible 10 pts) (required for each rotational assigned area) if not completed by end of the first rotational assignment through the area, will result in (0)

DATE	ROOM	SCORE	DATE	ROOM	SCORE

MID SEMESTER POINT SYSTEM For Section III

TOTAL PTS RECEIVED FROM A & B = _____ TOTAL PTS POSSIBLE FROM A & B = _____

PTS. Received divided
by PTS. Possible = _____ X 100 = _____ X 3% = _____ Score for III

FINAL POINT SYSTEM For Section III

TOTAL PTS RECEIVED FROM A & B = _____ TOTAL PTS POSSIBLE FROM A & B = _____

PTS. Received divided
by PTS. Possible = _____ X 100 = _____ X 3% = _____ Score for III

IV. Record Keeping = 5% of Final Grade (each student is granted 100 on day one of the clinical radiography course) (subtract 5 points for each time student does not record in the following areas)

A. Daily Clinical Experience Record (record the date for each incomplete clinical experience record = -5)

B. Completion and signing of Evaluations (record the date for no signature on evaluation = -5)

C. Personal Pocket-Sized Notebook of Exposure Factors (record the date for no notebook or not up-to-date= -5)

D. Daily Attendance Record (record date for failure to record arrival or departure time = -5)

MID SEMESTER POINT SYSTEM For Section IV	
TOTAL PTS RECEIVED FROM A, B, C, D = _____	TOTAL PTS POSSIBLE FROM A, B, C, D = _____
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 5% = _____ Score for IV	

FINAL POINT SYSTEM For Section IV	
TOTAL PTS RECEIVED FROM A, B, C, D = _____	TOTAL PTS POSSIBLE FROM A, B, C, D = _____
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 5% = _____ Score for IV	

V. Clinical Participation – 10% of Final Grade			
Record date of Absence, For absences beyond 1 record date absence is made up			
Date	Make-up Date	Date	Make-up date
	<i>Not required for 1st absence</i>		
Total number of absences = _____			
Refer to the chart below for the point value for clinical participation, if absences are not made up			
	0-1 absence	=	100 pts.
	2 absences	=	75 pts
	3 absences	=	50 pts
	4 absences	=	25 pts
	Over 4 absences	=	0 pts

MID SEMESTER POINT SYSTEM For Section V	
PTS. Received from active clinical participation = _____ X 100 = _____ X 10% = _____ Score for V	

FINAL POINT SYSTEM For Section V	
PTS. Received from active clinical participation = _____ X 100 = _____ X 10% = _____ Score for V	

VI. Clinical Instructor Evaluation Form F-26/Counseling Sessions = 7% of Final Grade	
Enter the date and score for the clinical instructor evaluation (evaluation worth 100 pts)	
Date	Score

FINAL POINT SYSTEM For Section VI	
TOTAL PTS RECEIVED CI evaluations =	TOTAL PTS POSSIBLE = 100
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 7% = _____ Score for VI	

VII. 20 % of Final Grade (Unit Tests, Presentation of Writing Assignment from RADS 355 , Mid-term grade = 100 possible pts each, Quizzes = 10 possible pts each		
Record date and score for each of the following when applicable		
	DATE	SCORE
Midterm Grade		
Unit Test		
Quiz		
Quiz		
Quiz		
Quiz		
Presentation		
LSRT BONUS PTS (when applicable)		

MID SEMESTER POINT SYSTEM For Section VII	
TOTAL PTS RECEIVED Unit Tests =	TOTAL PTS POSSIBLE from Unit Tests =
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 20% = _____ Score for VII	

FINAL POINT SYSTEM For Section VII	
TOTAL PTS RECEIVED Unit Tests =	TOTAL PTS RECEIVED Unit Tests =
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 20% = _____ Score for VII	

MID-TERM GRADE		FINAL GRADE	
SCORE FROM I		SCORE FROM I	
		SCORE FROM II	
SCORE FROM III		SCORE FROM III	
SCORE FROM IV		SCORE FROM IV	
SCORE FROM V		SCORE FROM V	
		SCORE FROM VI	
SCORE FROM VII		SCORE FROM VII	
TOTAL= <u> </u> /88= <u> </u> % For <u> </u> Grade		TOTAL= <u> </u> For <u> </u> Grade	

I am submitting <u> </u> passed competency evaluations and <u> </u> passed proficiency evaluations as <u>recorded</u> above for this Clinical Radiography course			
I have completed the following documented competency maintenance requirements for the clinical radiography course:			
EXAMS	NUMBERS		
Chest, Abdomen	<u> </u>	20 required	
Bony Thorax, spine	<u> </u>		
Extremities	<u> </u>	5 required	
Mobiles & Surgery	<u> </u>	5 required	
Miscellaneous*	<u> </u>	1 required	
*Miscellaneous – Cranium, Contrast or any Merit comp exam			
Student's Signature		Student's Signature	
Date		Date	
Clinical Instructor's Signature		Clinical Instructor's Signature	
Date		Date	
<i>Revised 2008, 2009, 2011, 2013, 2015, 2016, 2017, 2018, 2019</i>			

MCNEESE STATE UNIVERSITY
Department of Radiologic & Medical Laboratory Science
RADIOLOGIC SCIENCES PROGRAM

Grading Procedure Sheet
RADS. 461

STUDENT'S NAME _____

I. Performance Evaluations = 50% of Final Grade							
A. Competency Evaluations Form F-10 (10 points each)							
1. Competency Evaluations from Module I (7 required) (need 3 for midterm)							
√ CI	Date	Successful Examination	Score 10		Date	Unsuccessful Examination	Score 5 or 0
<i>Carry over competency evaluations to RADS 467</i>							
2. Competency Evaluations from Module II (8 required) (need 4 for midterm)							

√ CI	Date	Successful Examination	Score 10	Date	Unsuccessful Examination	Score 5 or 0
<i>Carry over competency evaluations to RADS 467</i>						
B. Proficiency Evaluations (10 points) (5-required) (2 for midterm)						
<i>Carry over proficiency evaluations to RADS 467</i>						
C. Merit Competency Evaluations (5 points) (limit of 6)						

MID SEMESTER POINT SYSTEM For Section I	
TOTAL PTS RECEIVED FROM A, B,C =	TOTAL PTS POSSIBLE FROM A, B =
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 50% = _____ Score for I	

FINAL POINT SYSTEM For Section I	
TOTAL PTS RECEIVED FROM A, B,C =	TOTAL PTS POSSIBLE FROM A, B =
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 50% = _____ Score for I	

II. Documented Competency Maintenance = 5% of Final Grade

If All documented competency Maintenance requirements are completed for the semester the student will be granted 100 points for Section II.

If any of the documented competency Maintenance requirements are not completed for the semester the student will receive "0" for section II.

FINAL POINT SYSTEM For Section II	
TOTAL PTS RECEIVED FROM Section II =	TOTAL PTS POSSIBLE FROM Section II = 100
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 5% = _____ Score for II	

III. Rotation Evaluation = 3% of Final Grade					
A. Student Clinical Evaluations Form F-9 (Each Evaluation = possible 100 pts)					
DATES			DATES		
<i>From</i>	<i>To</i>	SCORE	<i>From</i>	<i>To</i>	SCORE

B. Choice Evaluations for Sonography F-18, Radiation Oncology F-17, or Nuclear Medicine F-16 (Each Evaluation = 100pts), All other choice areas no evaluation required other than F-9

AREA	DATE	SCORE	AREA	DATE	SCORE

C. Equipment Manipulation Evaluations Form F-24 (Each evaluation – possible 10 pts) (required for each rotational assigned area) if not completed by end of the first rotational assignment through the area, will result in (0)

DATE	ROOM	SCORE	DATE	ROOM	SCORE

MID SEMESTER POINT SYSTEM For Section III

TOTAL PTS RECEIVED FROM A, B & C = _____ TOTAL PTS POSSIBLE FROM A, B & C = _____

PTS. Received divided
by PTS. Possible = _____ X 100 = _____ X 3% = _____ Score for III

FINAL POINT SYSTEM For Section III

TOTAL PTS RECEIVED FROM A, B & C = _____ TOTAL PTS POSSIBLE FROM A, B & C = _____

PTS. Received divided
by PTS. Possible = _____ X 100 = _____ X 3% = _____ Score for III

IV. Record Keeping = 5% of Final Grade (each student is granted 100 on day one of the clinical radiography course) (subtract 5 points for each time student does not record in the following areas)

A. Daily Clinical Experience Record (record the date for each incomplete clinical experience record = -5)

B. Completion and signing of Evaluations (record the date for no signature on evaluation = -5)

C. Personal Pocket-Sized Notebook of Exposure Factors (record the date for no notebook or not up-to-date= -5)							

D. Daily Attendance Record (record date for failure to record arrival or departure time = -5)							

MID SEMESTER POINT SYSTEM <i>For Section IV</i>	
TOTAL PTS RECEIVED FROM A, B, C, D =	TOTAL PTS POSSIBLE FROM A, B, C, D =
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 5% = _____ Score for IV	

FINAL POINT SYSTEM <i>For Section IV</i>	
TOTAL PTS RECEIVED FROM A, B, C, D =	TOTAL PTS POSSIBLE FROM A, B, C, D =
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 5% = _____ Score for IV	

V. Clinical Participation – 10% of Final Grade			
Record date of Absence, For absences beyond 1 record date absence is made up			
Date	Make-up Date	Date	Make-up date
	<i>Not required for 1st absence</i>		
Total number of absences = _____			
Refer to the chart below for the point value for clinical participation, if absences are not made up			
	0-1 absence	=	100 pts.
	2 absences	=	75 pts
	3 - 4 absences	=	50 pts
	5 - 6 absences	=	25 pts
	Over 6 absences	=	0 pts

MID SEMESTER POINT SYSTEM For Section V	
PTS. Received from active clinical participation = _____ X 100 = _____ X 10% = _____ Score for V	

FINAL POINT SYSTEM For Section V	
PTS. Received from active clinical participation = _____ X 100 = _____ X 10% = _____ Score for V	

VI. Clinical Instructor Evaluation Form F-26/Counseling Sessions = 7% of Final Grade			
Enter the date and score for the 2 clinical instructor evaluation each semester (Each evaluation worth 100 pts)			
Date	Score	Date	Score

MID SEMESTER POINT SYSTEM For Section VI	
TOTAL PTS RECEIVED CI evaluations =	TOTAL PTS POSSIBLE = 100
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 7% = _____ Score for VI	

FINAL POINT SYSTEM For Section VI	
TOTAL PTS RECEIVED CI evaluations =	TOTAL PTS POSSIBLE = 200
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 7% = _____ Score for VI	

VII. 20% of Final Grade (Unit test, Mid-term Grade, NRTW project = 100 possible pts each; LSRT Bonus total points)		
Record date and score for each of the following when applicable		
	DATE	SCORE
Unit Test		
Midterm Grade		
NRTW project		
LSRT BONUS PTS (when applicable)		
Community Service (6 hours required, all or nothing for points)		

MID SEMESTER POINT SYSTEM For Section VII	
TOTAL PTS RECEIVED Unit Tests =	TOTAL PTS POSSIBLE from Unit Tests =
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 20% = _____ Score for VII	

FINAL POINT SYSTEM <i>For Section VII</i>	
TOTAL PTS RECEIVED Unit Tests = _____	TOTAL PTS RECEIVED Unit Tests = _____
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 20% = _____ Score for VII	

MID-TERM GRADE		FINAL GRADE	
SCORE FROM I		SCORE FROM I	
		SCORE FROM II	
SCORE FROM III		SCORE FROM III	
SCORE FROM IV		SCORE FROM IV	
SCORE FROM V		SCORE FROM V	
SCORE FROM VI		SCORE FROM VI	
SCORE FROM VII		SCORE FROM VII	
TOTAL= _____ /95 = _____ % For _____ Grade		TOTAL= _____ For _____ Grade	

I am submitting _____ passed competency evaluations and _____ passed proficiency evaluations as recorded above for this Clinical Radiography course			
I have completed the following documented competency maintenance requirements the clinical radiography course:			
EXAMS	NUMBERS		
Chest, Abdomen & Bony Thorax	_____	25 required	
Extremities	_____	10 required	
Vertebral	_____	2 required	
Mobiles & Surgery	_____	5 required	
Miscellaneous*	_____	1 required	
*Miscellaneous – Cranium, Contrast or any Merit comp exam			
Student's Signature	Date	Student's Signature	Date
Clinical Instructor's Signature	Date	Clinical Instructor's Signature	Date

Revised 2008, 2009, 2011, 2014, 2015, 2016, 2019

MCNEESE STATE UNIVERSITY
Department of Radiologic & Medical Laboratory Science
RADIOLOGIC SCIENCES PROGRAM

Grading Procedure Sheet
RADS. 467

STUDENT'S NAME _____

I. Performance Evaluations = 55% of Final Grade							
A. Competency Evaluations Form F-10 (10 points each)							
1. Competency Evaluations Form Module I (3 required)							
√ CI	Date	Successful Examination	Score 10		Date	Unsuccessful Examination	Score 5 or 0
2. Competency Evaluations Form Module II (6 required)							
√ CI	Date	Successful Examination	Score 10		Date	Unsuccessful Examination	Score 5 or 0
3. Proficiency Evaluations (3 required)							
√ CI	Date	Successful Examination	Score 10		Date	Unsuccessful Examination	Score 5 or 0
B. Advanced Area Rotation Assignments (selected ARRT Post Primary Certifications)							
1. Evaluation – for Advanced Area Rotation Assignment						Score =	
# of points received divided by total points possible from: Form F-19, F-22, F-23/F35, F-47, or F-48 (Each evaluation is worth 100 pts)							
2. Documentation of Clinical Experience (see individual sheets for assigned areas). (Submission of form, or case log documentation for advanced area) (worth 100 points)						Score =	
C. Merit Competency Evaluations (5 points) (limit of 6)							
FINAL POINT SYSTEM For Section I							
TOTAL PTS RECEIVED FROM A, B, C =				TOTAL PTS POSSIBLE FROM A, B, =			
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 55% = _____ Score for I							

II. Documented Competency Maintenance = 5% of Final Grade

If All documented competency Maintenance requirements are completed for the semester the student will be granted 100 points for Section II.
 If any of the documented competency Maintenance requirements are not completed for the semester the student will receive "0" for section II.

FINAL POINT SYSTEM For Section II

TOTAL PTS RECEIVED FROM Section II =	TOTAL PTS POSSIBLE FROM Section II = 100
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 5% = _____ Score for II	

III. Rotational Evaluations and Community Services = 3 % of final grade

A. Student Clinical Evaluations Form F-9 (Each Evaluation = possible 100 pts)

DATES			DATES		
From	To	SCORE	From	To	SCORE

B. Equipment Manipulation Evaluations Form F-24 (Each evaluation – possible 10 pts) (required for each rotational assigned area) if not completed by end of the first rotational assignment through the area, will result in (0)

DATE	ROOM	SCORE	DATE	ROOM	SCORE

C. Community Service

Community Service (6 hours required, all or nothing for points)	
---	--

FINAL POINT SYSTEM For Section III

TOTAL PTS RECEIVED FROM A , B & C =	TOTAL PTS POSSIBLE FROM A, B & C =
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 3% = _____ Score for III	

IV. Record Keeping = 5% of Final Grade (each student is granted 100 on day one of the clinical radiography course) (subtract 5 points for each time student does not record in the following areas)							
A. Daily Clinical Experience Record (record the date for each incomplete clinical experience record = -5)							
B. Completion and signing of Evaluations (record the date for no signature on evaluation = -5)							
C. Personal Pocket-Sized Notebook of Exposure Factors (record the date for no notebook or not up-to-date= -5)							
D. Daily Attendance Record (record date for failure to record arrival or departure time = -5)							

FINAL POINT SYSTEM For Section IV	
TOTAL PTS RECEIVED FROM A, B, C, D =	TOTAL PTS POSSIBLE FROM A, B, C, D =
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 5% = _____ Score for IV	

V. Clinical Participation – 20% of Final Grade			
Record date of Absence, For absences beyond 1 record date absence is made up			
Date	Make-up Date	Date	Make-up date
	<i>Not required for 1st absence</i>		
Total number of absences = _____			
Refer to the chart below for the point value for clinical participation, if absences are not made up			
	0-1 absence	=	100 pts.
	2 absences	=	75 pts
	3 - 4 absences	=	50 pts
	5 - 6 absences	=	25 pts
	Over 6 absences	=	0 pts

FINAL POINT SYSTEM For Section V	
PTS. Received from active clinical participation = _____ X 100 = _____ X 20% = _____ Score for V	

VI. Clinical Instructor Evaluation Form F-26/Counseling Sessions = 12% of Final Grade			
Enter the date and score for the 1 or 2 clinical instructor evaluation(s) each semester (Each evaluation worth 100 pts) If assigned to an advanced rotational area only 1 CI evaluation required			
Date	Score	Date	Score
LSRT BONUS PTS (total points received)			PTS

FINAL POINT SYSTEM For Section VI	
TOTAL PTS RECEIVED CI evaluations = _____	TOTAL PTS POSSIBLE = 100 or 200
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 12% = _____ Score for VI	

<u>FINAL GRADE</u>	
SCORE FROM I	
SCORE FROM II	
SCORE FROM III	
SCORE FROM IV	
SCORE FROM V	
SCORE FROM VI	
TOTAL= _____ For _____ Grade	

I am submitting _____ passed competency evaluations and _____ passed proficiency evaluations as <u>recorded</u> above for this Clinical Radiography course	
I have completed the following documented competency maintenance requirements for the clinical radiography course:	
<u>EXAMS</u>	<u>NUMBERS</u>
Chest, Abdomen & Bony Thorax	_____ 10 required
Extremities (upper or lower)	_____ 2 required
Mobiles or Surgery	_____ 1 required
Student's Signature	Date
Clinical Instructor's Signature	Date
<small>Revised 2008, 2009, 2010, 2011, 2012, 2013, 2015, 2016, 2018, 2020</small>	

**MCNEESE STATE UNIVERSITY
Department of Radiologic & Medical Laboratory Science
RADIOLOGIC SCIENCES PROGRAM**

SCORE _____

Specialty Assignment Objective Evaluation – Area: **Compound Tomography**

- First CT assignment (typically RADS 356), observation only
- Second CT assignment (typically RADS 459), complete this form
- Third CT assignment (typically RADS 461), complete F-15 to achieve CT competency

Student Name: _____

CES: _____

Date from: _____

Date to: _____

I. CT Technology	Y	N	II. Patient Care	Y	N
1. Define Computed tomography			a. Assist in Assessment of patient requisition		
2. Identify the parts of the CT unit			b. Observe and assist in assessing physician orders		
a. gantry			c. Prepare room prior to patient arrival		
b. Patient table (couch)			d. Introduce self to patient		
c. Computer screen/LCD/CRT			e. Locate emergency cart		
3. Define the following terminology			f. Maintain clean and stocked area		
a. Matrix			g. Participate in providing for patient needs		
b. Hounsfield unit			h. Assist in recording of patient information		
c. voxel			III. CT TECHNOLOGY		
d. pixel			a. type patient information into computer		
e. gantry			b. correctly perform table movement		
f. (FOV)			c. utilize operator console to begin patient scan		
g. Window level for the following:			d. retrieve images		
Head			e. send images to printer or PACS		
Abdomen			IV. CT PROCEDURES		
Spine			a. select the correct patient immobilization devices		
			b. observe and assist in all CT procedures		
			c. identify contrast used for CT procedures		
			d. assist in preparation of contrast (oral IV / automatic injector)		
			e. identify types of contrast used for CT procedures:		
			IV		
			Oral		

Comments:

Technologist Signature	Student Signature
Clinical Instructor Signature	

MCNEESE STATE UNIVERSITY
Department of Radiologic & Medical Laboratory Science
RADIOLOGIC SCIENCES PROGRAM

RADS 467 ADVANCED AREA ASSIGNMENT OBJECTIVE EVALUATION- COMPUTED TOMOGRAPHY

SCORE _____

Student Name: _____

Date: _____

A. General Guidelines	Y	N	B. Performance of at least 2 Procedures from each category listed in the Syllabus	Yes	No	NA
1. Assesses Patient Requisition			1. Head and Neck			
2. Assesses Physician Orders			2. Spine and Musculoskeletal			
3. Prepare room prior to patient's arrival			3. Chest			
4. Verify patient's identity			4. Abdomen and Pelvis			
5. Introduce self to patient (and to radiologists when applicable)			5. Special procedures			
6. Record pertinent history from patient & compare with chart history			6. Image Display and Post Processing			
7. Assist patient onto the table			7. Quality Control			
8. Attentive to the needs of patient						
9. Type patient information into computer			Completed Documentation Forms			
10. Selects proper protocol for procedure to be performed			1. Clinical Experience Documentation Form Computed Tomography			
11. Selects parameters for procedure			2. Initials, ARRT ID #'s Addresses of ARRT Certified CT Technologists Form			
12. Interpret indexing on table and correctly perform table movement						
13. Initiates scan						
Prepares and administers contrast						
14. Display image, sequencing, and archiving						
15. Evaluates images for image quality (e.g., motion, artifacts, noise)						
16. Utilizes proper radiation protection						
17. Locate Emergency Cart						
18. Maintain clean, stocked area						
Comments:						
Technologist Signature			Student Signature			
Clinical Instructor Signature						

Revised 2013, 2016

MCNEESE STATE UNIVERSITY
Department of Radiologic & Medical Laboratory Science
RADIOLOGIC SCIENCES PROGRAM

RADS 467 ADVANCED AREA ASSIGNMENT OBJECTIVE EVALUATION- MAGNETIC RESONANCE IMAGING SCORE _____

Student Name: _____

Date: _____

A. General Guidelines	Y	N				
1. Assesses Patient Requisition			18. MRI safety procedures and precautions			
2. Assesses Physician Orders			19. Distinguish T1 and T2 weighting protocols seen on resultant images			
3. Prepare room prior to patient's arrival			20. Locate Emergency Cart			
4. Verify patient's identity			21. Maintain clean, stocked area			
5. Introduce self to patient (and to radiologists when applicable)			B. Performance of at least 2 Procedures from each category listed in the Syllabus	Y	N	NA
6. Record pertinent history from patient & compare with chart history			1. Head and Neck			
7. Assist patient onto the table			2. Spine			
8. Attentive to the needs of patient			3. Thorax			
9. Type patient information into computer			4. Abdomen and Pelvis			
10. Selects proper protocol for procedure to be performed			5. Musculoskeletal			
11. Selects parameters for procedure			6. Special Imaging Procedures			
12. Select optimal imaging coil			7. Quality Control			
13. Initiates scan			Completed Documentation Forms	Y	N	
14. Prepares and administers contrast			1. Clinical Experience Documentation Form Magnetic Resonance Imaging			
15. Display image, and archiving			2. Initials, ARRT ID #'s Addresses of ARRT Certified MR Technologists Form			
16. Evaluates images for image quality						
17. Utilizes Standard precautions						

Comments:

Technologist Signature	Student Signature
Clinical Instructor	<i>Revised: 2013, 2014, 2016</i>

MCNEESE STATE UNIVERSITY
Department of Radiologic & Medical Laboratory Science
RADIOLOGIC SCIENCES PROGRAM

Initial Clinical Education Setting Placement Request Form

Name _____

Date _____

DIRECTIONS: Rank (1-5) according to your preference with "1" assigned to your top choice. Please consider the following when making your preference selection.

Each student will attend Lake Charles Memorial Hospital, Christus St. Patrick Hospital, West Calcasieu-Cameron Hospital, Moss Memorial Health Clinic, and/or Christus Lake Area Hospital. If possible, every attempt will be made to grant each student their first choice for at least one assignment. Typically, students will be assigned to the CES for two consecutive semesters (summer and fall).

Summer Session RADS 350 and Fall Semester RADS 355

- _____ Christus/Ochsner-St. Patrick Hospital
- _____ Christus/Ochsner-Lake Area Hospital
- _____ Lake Charles Memorial Hospital
- _____ West Calcasieu-Cameron Hospital
- _____ Moss Memorial Health Clinic

Give a brief explanation for your rationale.

**MCNEESE STATE UNIVERSITY
Department of Radiologic & Medical Laboratory Science
RADIOLOGIC SCIENCES PROGRAM**

Clinical Education Setting Placement Request Form

Name _____

Date _____

DIRECTIONS: Rank (1-5) according to your preference with "1" assigned to your top choice. Please consider the following when making your preference selection.

Each student will attend Lake Charles Memorial Hospital, Christus St. Patrick Hospital, West Calcasieu-Cameron Hospital, Moss Memorial Health Clinic, and/or Christus Lake Area Hospital. If possible, every attempt will be made to grant each student their first choice for at least one assignment. Students may be assigned to a CES 2 semesters consecutively dependent upon their clinical needs. Assignments to Lake Area Medical Center require that you have health insurance.

Spring Semester Junior year

- _____ Christus-St. Patrick Hospital
- _____ Christus Lake Area Hospital
- _____ Lake Charles Memorial Hospital
- _____ West Calcasieu-Cameron Hospital
- _____ Moss Memorial Health Clinic

Fall Semester Senior year

- _____ Christus-St. Patrick Hospital
- _____ Christus Lake Area Hospital
- _____ Lake Charles Memorial Hospital
- _____ West Calcasieu-Cameron Hospital
- _____ Moss Memorial Health Clinic

Summer Session Senior year

- _____ Christus-St. Patrick Hospital
- _____ Christus Lake Area Hospital
- _____ Lake Charles Memorial Hospital
- _____ West Calcasieu-Cameron Hospital
- _____ Moss Memorial Health Clinic

Spring Semester Senior year

- _____ Christus-St. Patrick Hospital
- _____ Christus Lake Area Hospital
- _____ Lake Charles Memorial Hospital
- _____ West Calcasieu-Cameron Hospital
- _____ Moss Memorial Health Clinic

Give a brief explanation for your rationale. Please explain which #1 choice is the most important to you.

McNeese State University
Department of Radiologic and Medical Laboratory Science
RADIOLOGIC SCIENCES PROGRAM

MRI Safety Screening Form

(This form must be completed annually prior to RADS 350, and RADS 459)

The following questions must be answered prior to entry into the MRI scan room:

	Yes	No
1. Do you have a pacemaker or defibrillator?		
2. Do you have a brain aneurysm clip?		
3. Have you had a surgery where metal clip or other surgical metal remains in your body?		
4. Are you a welder?		
5. Have you ever had metal in your eyes?		
6. Do you have any mechanical or electronic devices in your body?		
7. Do you have an inner ear implant?		

I have completed the following as required by the MSU RADS program:

	Yes	No
1. Read and understand the MRI and Ferromagnetic Safety Policy		
2. Viewed the power point on "MRI Safety: Potential Hazards associated with Magnetic Wave and Radiofrequency"		
3. Taken the online test covering the material in the power point on "MRI Safety: Potential Hazards associated with Magnetic Wave and Radiofrequency"		

Student Name _____ Date _____

(Please Print)

Student Signature _____

**McNeese State University
College of Nursing and Health Professions
Department of Radiologic and Medical Laboratory Sciences**

**Community Service/Involvement
Student Self-Report Form**

Purpose: The purpose of volunteer requirements throughout the curriculum is to promote the concept of service as a health care professional. The requirement of community service/involvement hours provides service and interaction with the community, as well as exposure of the radiologic sciences program. Voluntary service is a non-reimbursed contribution to the welfare or others in the Radiologic Sciences program, the University, and the community.

Criteria

1. The student will select an agency and/or an event.
2. Submit this form for approval to the RADS Program Director or Clinical Coordinator, prior to the scheduled event.
3. Make arrangements with agency or event coordinator to schedule your community service/involvement.
4. Following the event, the student must submit the completed form within three days

Student Name		Course	Date of Form Submission
Name of Agency or Event:			
Check	Activities	Proposed objectives/activities	
	Direct Patient Care		
	Indirect Patient Care		
	Health Care Related Walk		
RADS Program Official approval:			Date:

To be completed by agency or event coordinator

Total number of hours completed:	Date completed:
Name of agency official or event coordinator (please print)	
Signature of agency official or event coordinator	
Phone number:	

McNeese State University
College of Nursing and Health Professions
Department of Radiologic and Medical Laboratory Sciences

Rotation Activity Log When assigned to another CES
Student Report Form to Clinical Instructor at Home CES

Purpose: *The student is to complete this form when assigned to another CES for some rotations, to document any procedures that were evaluated for competency/proficiency. The Clinical Instructor at the home CES will verify that all competency/proficiency evaluations completed while assigned at the visiting CES were entered in to the e-value clinical tracking system. Then, the CI will add the procedures listed on Form F-53 to the Grading Procedure Sheet for the current clinical course.*

Student Name:	Home CES:
Dates of Assignment:	Visiting CES:

Date	Description			Generated in e-value		Completed in e-value by CI at visiting CES?	<ul style="list-style-type: none"> Students must keep this paper in their possession Graded tasks must be initialed by an instructor Please log remedial actions (F12) when applicable 	Instructor initials	
	Indicated if simulated by an *	comp	prof						
ex: 10/15/18	Sternum *	X		Y	N	Y	Graded in e-value, ready to be recorded on F45:	Check when applicable	AP
comments: <i>simulated. Procedure portion graded in e-value, and saved prod analysis</i>						N	Reason Pending: <i>waiting to do product analysis</i>		
1.				Y	N	Y	Graded in e-value, ready to be recorded on F45:		
comments:						N	Reason Pending:		
2.				Y	N	Y	Graded in e-value, ready to be recorded on F45:		
comments:						N	Reason Pending:		
3.				Y	N	Y	Graded in e-value, ready to be recorded on F45:		
comments:						N	Reason Pending:		
4.				Y	N	Y	Graded in e-value, ready to be recorded on F45:		
comments:						N	Reason Pending:		
5.				Y	N	Y	Graded in e-value, ready to be recorded on F45:		
comments:						N	Reason Pending:		
6.				Y	N	Y	Graded in e-value, ready to be recorded on F45:		
comments:						N	Reason Pending:		

Policy 2019, revised 2020

Policy 2018

APPENDIX I

**MCNEESE STATE UNIVERSITY
Department of Radiologic & Medical Laboratory Science
RADIOLOGIC SCIENCES PROGRAM**

CLINICAL COMPETENCY SYSTEM

MODULE I (must be performed on patient)

Examination/Procedures * ARRT Clinical Competencies + JRCERT Standards	RADS course in which covered	(√) requires III and IV on F-10	Projection/Position/Method Requirements
Abdomen*	220	√	AP
Abdomen Upright *	220		AP
Ankle*	320		AP, Oblique (internal), Lateral
Chest *	220	√	PA, Lateral
Chest, Age 6 Or Younger*	230		PA or AP and Lateral
Chest, Geriatric	220		As requested
Chest, Wheelchair/Stretcher*	220		AP
C-ARM PROCEDURES (Surgical requiring manipulation around a sterile field)*	320		Can be done after 1st Surgery rotation
C-ARM PROCEDURE (requiring the C-arm be moved for more than one projection)*	320		Can be done after 1st Surgery rotation
C-Spine*	321	√	AP AXIAL, AP Open mouth, Lateral, Swimmer's (if necessary)
Computed Tomography+	342		(see Form F-15)
Elbow*	220	√	AP, Lateral
Finger Or Thumb*	220		PA, Oblique, Lateral
Foot*	320	√	AP AXIAL, Oblique (internal) Lateral
Forearm*	220		AP, Lateral
Hand*	220	√	PA, Oblique (external), Lateral
Hip*	320		AP, Lateral
Knee*	320		AP AXIAL, Lateral
Lower Extremity - Geriatric	320		As requested
Lower Leg (Tibia/Fibula)*	320	√	AP, Lateral
L-Spine*	321	√	AP, Lateral, and Lateral spot L -S
Mobile Abdomen*	220		AP (supine or upright)
Mobile Chest*	220		AP
Mobile Orthopedics*	220		Two view minimum, except pelvis
Pelvis*	320	√	AP
Ribs*	321	√	AP or PA, Oblique (uppers and lowers on all projections when appropriate)
Shoulder*	220	√	CES Routine
T-Spine*	321	√	AP, Lateral, Swimmer's (if necessary)
Trauma^ Lower Extremity*	320		Two view minimum
Trauma^ Upper Extremity*	220		Two view minimum
Upper Extremity – Geriatric	320		As requested
Wrist*	220		PA, Oblique (external), Lateral

^Trauma is considered a serious injury or shock to the body. Modifications may include variations in positioning, minimal movement of the body part, etc.

MCNEESE STATE UNIVERSITY
Department of Radiologic & Medical Laboratory Science
RADIOLOGIC SCIENCES PROGRAM

CLINICAL COMPETENCY SYSTEM

MODULE II (Can simulate up to 15 examinations/Procedures)

Examination/Procedures * ARRT Clinical Competencies + JRCERT Standards mandatory procedure, Elective procedure	RADS course in which covered	(√) requires III and IV on F-10	Projection/Position/Method Requirements
Abdomen, Age 6 Or Younger*	230		AP
A-C Joints*	220		AP erect with and without weights
Calcaneus*	320	√	Axial, lateral
Contrast Enema (Single Or Double Contrast)*	320	√	AP, AP axial, Lateral, Post Evac (AP or PA)
Clavicle*	220		AP or PA, AP or PA axial
Decubitus Abdomen	220		AP or PA
Decubitus Chest*	220		AP or PA
Esophagus*	320		1 projection
Facial Bones*	321	√	PA or AP, Waters, Lateral
Femur*	320		AP, Lateral
Hip(Cross Table – Horizontal Beam)*	320	√	Cross-Table Lateral
Humerus*	220		AP, Lateral
IVU*	320	√	Must include but not limited to AP or PA, post void (scout not evaluated), if performed in surgery will be CES Routine
Lower Extremity, Age 6 Or Younger*	230		Two view minimum
Mandible*	321		AP or PA, Towne, Both Axiolateral obliques
Mobile Study, Age 6 Or Younger*	230		CES Routine
Nasal Bones*	321		Waters, Both laterals
Oblique -C-spine	321		Both Obliques
Oblique Lumbar Spine	321		Both Obliques
Patella*	320		Tangential
Sacro-Iliac Joints*	320		AP Axial or PA Axial, Both Obliques
Sacrum And /Or Coccyx*	321		AP Axial, Lateral of sacrum and/or coccyx (as ordered)
Scapula*	220	√	AP, Lateral
Sinuses*	321		Erect Waters, PA or PA Caldwell, Lateral
Skull*	320	√	AP or PA, Right or Left lateral, Towne [§]
Small Bowel*	320	√	AP or PA projection(s) (scout does not count)
Spine – Cross Table Lateral-Horizontal Beam	321		
Toes*	320		AP Axial, Medial oblique, lateral
Trauma Shoulder*^	220	√	FOR EXAMPLE , Y- VIEW (if not part of CES routine for shoulder) OR Transthoracic Lateral
Upper Airway –Soft Tissue Neck*	321		Lateral
Upper Extremity, Age 6 Or Younger*	230		Two view minimum
Upper GI*	320	√	RAO, right lateral, LPO, PA or AP

[§]May be simulated even if other projections are performed on a patient

[^]Trauma is considered a serious injury or shock to the body. Modifications may include variations in positioning, minimal movement of the body part, etc.

Clinical Competency System <u>Merit</u> Examination/Procedures	RADS course in which covered	Additional Comments for clarification
Arthrography		
Bone Age	321	For bone maturation in young children, PA projection of both wrists or CES routine
C-Spine (flexion & extension laterals)	321	
Cleaves Or Modified Cleaves	320	
Cystogram/Cystourethrogram	320	
Dialysis Survey	321	AP Pelvis, PA hand, AP Clavicle, Lateral Skull, Lateral Spine, AP Knees or CES routine
Elbow (Coyle Method)	220	
Elbow (oblique either one)	220	
ERCP		
Hysterosalpingography		
Intercondylar Fossa	320	
IVU Obliques	320	
Knee (Oblique Either One)	320	
Knees – Standing	320	
L- Spine (Bending Views Ap)	321	
L- Spine (Flex.& Ext. Laterals)	321	
Lateral Abdomen	220	
Lordotic Chest	220	
Metastatic Bone Survey	321	Sometimes called <i>Skeletal Survey</i> , PA chest, AP & lateral of skull and spine, AP of Pelvis or CES routine
Myelography	321	All projections requested by the physician
Optic Foramen And Orbits	321	
Oblique Chest	220	
OR Cholangiogram	320	All projections requested by the physician
Panoramic Tomography	321	
Retrograde Pyelogram	320	All projections requested by the physician
SC Joints	321	
Scaphoid	220	
Scoliosis Series	321	
Sinuses (Open Mouth)	321	
Sinuses (SMV)	321	
Sternum	321	
T-Tube Cholangiogram	320	All projections requested by the physician
Tmj's	321	
Venogram	370	
Wrist –(radius and/or ulnar deviation)	220	
Zygomatic Arches	321	

APPENDIX II

COMPETENCY / PROFICIENCY OBJECTIVES AND SCORING GUIDELINES

STANDARD RULES:

1. When the student receives a score of "zero" on any area of the evaluation, the result is a failure (regardless if the overall average score is above 90%); however, the evaluation is to be completed.
2. If any portion of the examination must be repeated, it is an *automatic failure* of the competency evaluation.
3. All anatomy listed on anatomy ID sheet must be included on the finished radiographs
4. If the competency/proficiency radiographs have been released to another facility, it is the student's responsibility to do one of the following within 30 days:
 - a. Be sure the clinical instructor evaluates the radiographs prior to their release, or
 - b. Copy radiographs before they are released, or
 - c. Pick up radiographs if located locally, or
 - d. Forfeit the competency/proficiency and select another exam.
5. If the equipment malfunctions the student should not be penalized and given an opportunity to make necessary corrections if applicable.
6. A student may share a projection when performing a competency on multiple exams. (i.e.: waters projection used for nasal bones and zygomatic arches. If the student has to repeat the shared projection both evaluations will need to be retested
7. Student must give evaluator proper form prior to beginning with the name, patient # (including accession # if applicable), date CES, course/semester and room # or results in an *automatic failure* of evaluation
8. During a simulation evaluation if a student is serving as the patient and provides assistance or clues to the student performing the simulation the evaluation will be stopped and thrown out. The student providing the assistance will be written up for cheating and appropriate disciplinary action will be taken

OBJECTIVES:

I. ASSESSMENT OF REQUISITION
A. Identify procedure to be performed*
B. Identify mode of transportation to clinical area*
C. Identify the patient's name and age*
II. A. PHYSICAL FACILITY READINESS *
1. Maintain clean radiographic table and appropriate linens*
2. Turn machine "on", setting appropriate technical factors using technical chart and calipers before positioning of patient*
3. Select appropriate size IR's, and all necessary supplies*
4. Turn table and tube into position for procedure*
5. If machine setup wrong (i.e.: setting wall bucky for Table procedure, incorrect Focal Spot Size) = "0"
6. Type in patient information when applicable (if not done 0)
7. Select the examination for computed radiography (if not done 0)
8. Select the number of projections for the examination during computed radiography (if not done 0)
9. Assign projection to each IR for the examination during computed radiography (if not done 0)
II. B. PATIENT CARE
1. Verify patient's ID. (If not verified, 0).
2. Introduce self to patient or radiologist. *
3. Escort and assist patient to radiographic room*
4. Transfer patient onto the radiographic table*
5. Explain radiographic procedure to patient.
a. No explanation (0)
b. Improper terminology (-1) Ex. Dye (contrast), Shoot (expose)
c. Explanation not detailed or poor explanation*
6. Record the patient's clinical history (physically documents patient history, so that radiologist will be able to view patient history), including last menstrual period when applicable. If not fulfilled, (0) Must be documented on back of F-10 or F-11
7. Reassure apprehensive patient & parents of pediatric patient.*
8. Gown the patients when applicable respecting privacy and modesty.*
9. Provide immediate and accurate nursing procedures.
a. Not maintaining infusion catheters & pumps, O2, NG tubes, urinary catheters, or other tubes (0)
b. Not labeling specimens (0)
c. Not utilizing aseptic and/or isolation techniques (0)
d. Other point deductions depends on severity
10. Provide Routine Monitoring of equipment, vital signs, physical signs and symptoms*
11. Comply with all rules of safety (i.e. physical safety, electrical safety, etc.)*
12. Interacts appropriately and respectfully with patient diversity

II. C. RADIOGRAPHIC PROCEDURES	
1.	Position the patient and anatomical part correctly, utilizing immobilization and restraining devices when necessary.*
2.	Utilize controls and locks for the radiographic equipment.*
3.	Place correct markers (R or L, etc.) and patient ID on the IR.
a.	Must be able to distinguish marker to only be an R or L if not then (0), (if bilateral projections on one IR both sides must be marked, If not (0)
b.	Marker must be visualized on masked image send to PACS, if not (0)
c.	Omitting of marker (0) incorrectly marked - i.e.: Right side with Left marker (0).
d.	If marker is not visualized (0), if can distinguish as only to be an R or L but no initials visible (-1).
e.	If marker is in anatomy of interest (0).
f.	If wrong ID is used, or if no patient ID (0).
g.	Placement of marker on IR; for example but not limited to: marking lateral projections anteriorly if not = -1 (except for lateral humerus can be either, marking); obliques side down, except for SI joints, orbits, and ribs, if not = -1; marking decubitus images of the chest and ABD side up, if not = -1,
4.	4Set incorrect source image-receptor distance; 1"-2" (-1); over 2" (0)
5.	Align CR and collimators accurately.* <i>If the student can tell the evaluator prior to making the exposure and after palpating the patient that all the anatomy cannot be visualized and that they will take an additional radiograph to include the missing anatomy, then no points will be deducted.</i>
6.	Center anatomical part to properly placed film.*
7.	Instruct patient for breathing and remaining still.*
8.	Adjust patient positioning as appropriate for an unusual case*
9.	Correct placement of IR - lw, cw, etc. (-1) If identification blocker is in anatomy of interest (0)
10.	If do not adjust patient positioning to accommodate the patient as appropriate for unusual cases*
II. D. RADIATION PROTECTION	
1.	Protect patient and personnel from unnecessary radiation.*
2.	Utilize gonadal shielding. *If they do not shield patient/ personnel (0).
3.	Demonstrate adequate collimation of the part.
a.	If over collimated resulting in repeated radiograph (0).
b.	If collimation is not adequate*
4.	Applied gonadal shielding correctly for fluoroscopy (on table top, unless remote control room), if not (0) unless not permitted by the radiologist then no pts are deducted
5.	Closed the door to the radiographic room during exposure, if not results in (0)
II. E. EXPOSURE FACTORS	
1.	Select the proper mAs and kVp for the procedure.
a.	If the above procedure not done (0).
b.	The only situation, which permits the student to repeat the radiograph due to exposure factor selection, is for unknown pathologic conditions. <i>If the student evaluates and then produces a diagnostic radiograph, no points will be deducted.</i>
2.	If exposure factors are slightly under or over proper brightness (density-film screen), but radiograph is diagnostic (-1, -2) -- dependent on severity.
3.	If the student does not measure the patient (0).
4.	Select the proper automatic exposure control for applicable exams (all CES's –chest and barium studies). If not selected properly (0). (After RADS 459, any exam may use automatic exposure control.)
5.	Excessive quantum mottle (0). WCCH E-value range 1700-2300, if acceptable but out of range (-1) DR range 100 – 300; 100 – 450 Chest SPH S-value range 100-300, if acceptable but out of range (-1) LCMH and MMHC the S# is dependent on body part, if acceptable but out of range (-1) LAMC E-value range 1500-1800, if acceptable but out of range (-1) LCMH 150 – 500 mobile digital machine, if acceptable but out of range (-1) CC – E-value General 225 – 900 (400), Extremities 500 – 2000 (1000), (<i>target value indicated</i>), if out of range (-1) PC – E-value 200 – 400 (for 1 on 1 images)
6.	If exposure factors are not completed at all on Form F-11 = (0), if partially completed *
III. PRODUCT ANALYSIS For each incorrect response by students (-1).	
A. ANATOMY IDENTIFICATION	
1.	IDENTIFY all anatomy on the radiograph.
2.	The instructor should point out any anatomy not identified by the student and ask them to identify it.
3.	The Instructor should point out any unusual anatomy or anomalies and ask the student what it is. (This is adjusted for the level of the student. FRACTURES AND MOST PATHOLOGICAL CONDITIONS <u>are not</u> covered until RAD TECH 463. If it is a junior student, use this as an opportunity for discussion and inquiry.
III B. POSITIONING ANALYSIS	
1.	Place each radiograph on the view box.

2. Ask the student to identify each radiograph according to <u>position</u> , <u>projection</u> , or <u>view</u> .
3. Select each radiograph and have the student fully describe how they positioned the patient.
AREAS THE STUDENT SHOULD COVER
a. Patient's position (supine, erect, prone, oblique)
b. Patient's rotation or position of the body or part.
c. Baselines used to position the part (MSP, MAL, IOML, etc.)
d. SID
e. Bucky, grid, non-grid, table top (Give ratio also).
f. IR size.
g. Central ray alignment to film/part.
4. Ask the student to evaluate the radiograph to establish evaluation criteria and to identify any corrective measures that could be used.
III C. EXPOSURE FACTOR ANALYSIS
1. Is there anything you could do to optimize the technique on this image? If so, what? (brightness, contrast, penetration, or spatial resolution.) This is adjusted to the student's level. Use this area as an opportunity for discussion and learning.
2. What technique did you use? (mAs, kV) JUSTIFY EACH COMPONENT.
3. Define Grayscale, Brightness, Spatial Resolution, Penetration, and Distortion. Depends on the student's level. These areas are covered in RADS 230. Use this area for discussion and learning.
4. What does mA, kVp, and time control?
5. What is the function of grids? How do they affect technique?
6. How do collimators affect image quality? Depends on student level; taught in RADS 230.
7. Ask the student to give the appropriate technical factors when changing from a grid to non-grid or vice-versa. Depends on student level; taught in RADS 342.
8. Must use proper terminology: If not (-1) (i.e.: overexposure –too much mAs, underexposure-too little mAs, underpenetrated-too little kVp, and overpenetrated-too much kVp)
IV. TOTAL SKIN DOSE ESTIMATE - Calculate patient skin dose estimate for the radiographic examination
A. If calculated with no mistakes (3).
B. If calculated within a 10% margin of error (-1).
C. If correct for each projection but not totaled (-1)
D. If correct but wrong unit of measurement (-2)
E. If measurement obtained incorrectly = (0) (i.e.: correct measurement for lateral C-spine from the side of the neck closest to the tube to the IR)
F. If not submitted by end of the assigned time on the day the examination/procedure was performed (-0)
V. PROCEDURE MANAGEMENT*
A. Make decisions regarding workflow and procedures performed in radiographic room*.
B. Handle procedure competently and completely within appropriate time limits*.
C. Complete procedure with accuracy and thoroughness*
D. Correctly assign projections to the correct IR for computed radiography when applicable (if not done 0)
E. Send completed images to PACS when applicable and/or terminating the study (if not done 0)
F. Accept image/reject images with computed radiography (if not done 0)
* Point deduction depends on severity.
+ Except pediatric patients.
<i>Policy: 1986; Revised: 1994, 1997, 1998, 1999, 2001, 2004, 2005, 2006, 2007,2008, 2009, 2010, 2011, 2012, 2013, 2014, 2015, 2018</i>