

**McNeese State University**  
**College of Nursing and Health Professions**  
**Department of Health Professions**  
**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 2025- 2026 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 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](http://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 Setting (CS) 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 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

### Required test reviews sessions

#### **I. Test review sessions**

- **Required** for all students who do not make at least a grade of 77 on individual tests.
- Test review session times will be set up by the individual professors
  - Test review sessions will be one of two methods and will be announced by the professor in a class session following the test.
  - The two methods of test review sessions are:
    - Scheduled individual review sessions with the professor during "Student Support Hours", again required for those who do not make a score of 77 or higher on the test.
    - *Scheduled block review sessions of the test*, which would be scheduled outside of your regularly scheduled times and all students can attend but will be required for those who do not make a score of 77 or higher on the test.

### 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 professional phase of program \*
- ***Noncompliance of academic standards means the student does not progress to the next semester of the professional phase of the Radiologic Sciences program.***
- ***To progress to the next semester the student may choose to:***
  - 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 ***if space is available in the cohort***, otherwise reapplying to the program is an option
      - Available only if the minimum grade point averages are met
    - The student does not have to complete an application or the admission process for the professional phase
    - Students who request reentry must contact the program director for more details
    - After a second unsuccessful attempt of any RADS course, reentry is not an option
  - 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
    - After a second unsuccessful attempt of any RADS course, reapplication is not an option

\* *Students who are dismissed from the professional phase program will be assisted through referral for counseling and guidance.*

*Policy: 1982*

*Revised: 1984, 1986, 1987, 1994, 1997, 2003, 2013, 2018, 2021, 2024, 2025*

## ACCREDITATION

The Joint Review Committee on in Radiologic Technology (JRCERT) is the only organization recognized by the U.S. Department of Education (USDE) and the Council for Higher Education Accreditation (CHEA) for the accreditation of traditional and distance delivery educational program in radiography, radiation therapy, magnetic resonance and medical dosimetry.

The program is accredited and evaluated by the JRCERT.

- Holds the maximum accreditation status awarded by the JRCERT
- [JRCERT award letter](#) documenting maximum accreditation award of 8 years
  - 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

There are “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 by clicking [“Radiography Standards”](#)

- Allegations of noncompliance of the standards should be directed to the JRCERT or by completing an [Allegations reporting form](#)

*Policy: 1979*

*Revised: 1986, 1994, 1997, 2003, 2006, 2007, 2017, 2024*

## 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 CS 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](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](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 in the classroom and labs are 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%).

***Nonactive clinical participation violation will result in a student receiving a 10-point deduction per occurrence in the clinical participation*** section of the F-45 grading procedure sheet for the course. The student will be ***permitted 1 absence*** from the clinical radiography course each semester which does not have to be made up. This ***first absence counts as the one permitted absence that does not have to be made up***. One absence is equal to the number of assigned hours the day missed. ***Students must make up all absences over the one permitted.*** Student who only miss the one permitted absence will receive 100 points in the clinical participation section on the grading procedure sheet for the course (***form F-45***). If a student must be absence more than the one permitted, the student must make up the day(s) missed and point deductions will be applied to the clinical participation section on the grading procedure sheet (***form F-45***). If the absence(s) is excused no points will be deducted, but day(s) missed must be made up. Students must complete a 40+ form to schedule make up time.

- **Make up absences and point deductions are as follows:**
  - Must be made up in the assigned area and the times assigned
  - The point deductions are:
    - RADS 350, 355, 356, and 459 – 2 absences (the 1 permitted & 1 additional) = 25-point deduction
    - RADS 350, 355, 356, and 459 – 3 absences (the 1 permitted & 2 additional) = 50-point deduction
    - RADS 350, 355, 356, and 459 – 4 absences (the 1 permitted & 3 additional) = 75-point deduction
    - RADS 350, 355, 356, and 459 – over 4 absences (the 1 permitted & 3 additional) = 100-point deduction
    - RADS 461 and 467 – 2 absences (the 1 permitted & 1 additional) = 25-point deduction
    - RADS 461 and 467 – 3 - 4 absences (the 1 permitted & 2-3 additional) = 50-point deduction
    - RADS 461 and 467 – 5 - 6 absences (the 1 permitted & 4-5 additional) = 75-point deduction
    - RADS 461 and 467 – over 6 absences (the 1 permitted & 6 additional) = 100-point deduction
  - The student will receive an incomplete grade for the clinical radiography course until the makeup days are completed.
    - If make up days are not completed before the start of the next clinical radiography course, the student will not be permitted to progress to the next clinical radiography course.
    - Exception: RADS 467- must be made up by the day before grades are due for graduating seniors.
  - A point deduction of 100 points for any clinical course is considered excessive absences and will require a Radiologic Sciences Advisory Committee decision regarding the student's continuation in the program
- ***Students becoming ill while in attendance at the CS will not be permitted to remain at the CS***
  - Leaving the CS prior to completing assigned hours will result in an absence for the total hours assigned for that day
- ***When a student is unable to attend a clinical assignment, they must contact the CP or the Radiology Department of the CS, (CS is the facility or department where you are assigned for the rotation, ie: Pediatric Center, Fast Pace, Cath Lab, MRI, etc.)***
  - Prior to scheduled assignment
  - Failure to contact prior to the scheduled assignment will result in a 25-point deduction in the clinical participation section on the grading procedure sheet
- When present for a clinical assignment the 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 25-point deduction in the clinical participation section on the grading procedure sheet.

After 3 violations of nonactive clinical participation during the fall and spring semesters, or 2 violations during the summer, it will be considered as an absence. Each occurrence over the permitted will count as an absence, 25 points will be deducted and the absence must be made up and will not count as the one permitted absence.

### **TARDINESS**

Students are to clock-in no later than 3 minutes prior to assigned time, and must be properly attired upon clocking in.

- Tardy is considered as clocking in any time after 3 minutes prior to the assigned time and up to 1 hour after.
- Anytime over one hour is an absence
- When tardy, the amount of time tardy will be added to the assigned time for that day
  - Failure to stay for the time tardy, results in a 25-point deduction in the clinical participation on the grading procedure sheet
- Cumulative record of tardiness will be maintained
  - Permitted three (3) tardy occurrences per semester
  - Permitted two (2) tardy occurrences per summer session

Each occurrence over the permitted will count as an absence, 25 points will be deducted and the absence must be made up and will not count as the one permitted absence.

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

*Policy: 1982*

*Revised: 1984-1994, 1996, 2001, 2003, 2004, 2005, 2007, 2008, 2011, 2012, 2013, 2014, 2019, 2021, 2022, 2023, 2024, 2025*

## **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: *Castlebranch*. It is a simple process type in the URL address **mcneese.castlebranch.com**

- then click "place order"
  - then click "please select"
  - then select "radiologic technology"
  - then click the middle selection for [VK83bgdt: Background Check - Drug Test](#)
  - then check "I have read order instructions"
  - then "click to continue"
  - then follow instructions as prompted
- If applicable, must file a pre-approval application with the ARRT and LSRTBE (see form F-32)
  - Required prior to beginning the first Clinical Radiography course
  - An adverse action (denial of acceptance into a clinical 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 setting if it is a security or safety issue.
      - Criminal conviction does not automatically preclude a student from being assigned to a clinical 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 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 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 setting
  - **Failure to complete the healthcare worker background check will result in a student not being assigned to a clinical 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, 2023, 2024*

## **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: 1 min – 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 25-point deduction in the clinical participation section on the grading procedure sheet.
  - 3 violations of exceeding 45 minutes for lunch or dinner will result in 25-point deduction in the clinical participation section on the grading procedure sheet.
  - Lunch breaks should be scheduled between 11:00 a.m.-12:30 p.m. except in cases of extreme circumstances.
  - When leaving the CS, this time must be documented
    - Cell phones are prohibited at the CS and cannot be used to clock in and out for lunch breaks
    - 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 25-point deduction in the clinical participation section on the grading procedure sheet.
- Breaks are not guaranteed; permitted at the discretion of the CP or Supervising Technologist

*Policy: 1984*

*Revised: 1988, 1992, 1994, 1999, 2001, 2003, 2006, 2023, 2025*

## **CARDIOPULMONARY RESUSCITATION CERTIFICATION**

Enrollment in clinical radiography courses requires cardiopulmonary resuscitation certification.

- Adult, infant & AED Training with Skills 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
- The Skills Check off must be completed in person not online

*Policy: 1994*

*Revised: 1998, 2003, 2011, 2021*



## CLINICAL ASSIGNMENTS\*

Enrollment in clinical radiography courses requires assignment to area hospitals and/or clinics that are accredited to serve as Clinical Settings (CS) by the JRCERT. Facilities' currently serving as CS'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 CS request placement form to complete (**Form F- 49**). Every attempt is made to assign one clinical setting for two consecutive clinical assignments. The other clinical assignments will be among the other clinical settings. Travel to and from the clinical assignments is the responsibility of the student. All Clinical Settings are located within 40 miles of the campus.

### **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 this 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 CS, 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 CS 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 CP 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 choose 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, students are assigned to computed tomography (use form F-46 and F-9). During RADS 461, 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)***

## 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](http://www.e-value.net), through the **Case Log icon**
  - must be completed on the day performed, assisted or observed the procedure
    - Students will be given 10 minutes at the end of their assignment to complete entering case logs, must be completed by 11:59 pm the day performed
    - 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 preceptor or MSU faculty
  - Incomplete clinical experience records = -5pts/occurrence
- Competency/Proficiency Evaluations completed by Clinical Preceptor other than your home Clinical Preceptor
  - Complete and submit paper form entitled “Clinical Participation Log: e-value entry communication to your home CP. This serves as a reminder for home CP to enter on Form F-45

### **PERSONAL POKETSIZE 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](http://www.e-value.net), through the **Time Tracking icon**, Students have 5 options under the time tracking icon
  - Present, absent, make-up, campus closure, and 40+
  - Failure to select the appropriate option will result in a -5pts/occurrence under record keeping
- Arrival and departure times must be documented **on a designed computer within assigned CS**
  - 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 25-point deduction in the clinical participation section on the grading procedure sheet.

Policy: 1984; Revised: 1986-1990, 1994, 1996-1997, 2001-2003, 2005, 2006, 2007, 2016, 2012, 2019, 2021, 2025

## 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 preceptor 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 midterm 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 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 second attempt or the final unit test grade***
  - 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, 2023, 2025

## 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 ensure 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 one DR energized laboratory. The laboratory located in Hardtner Hall 122 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 MIMPS system into the lab. The generator is password protected to not allow the x-ray tube to be energized, disabling exposures by students. In addition, the two chargeable batteries for the DR detector are removed from the room to permit students to use the control panel without the direct supervision of a Radiologic Sciences faculty member. The removed batteries are placed in a locked faculty member's office.

#### **Safety Rules of the lab:**

1. The Radiologic Sciences lab is 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 opening 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 a lab when class is not in session. The generator is password protected, and exposures are disabled by removing the chargeable batteries. The removed batteries are placed in a locked faculty member's office
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, 2021, 2024

## **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
  - Annual Infectious Disease report can be found at <https://ldh.la.gov/index.cfm/page/536>
  - 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 CS
    - 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.

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

For additional information:

[Communicable Disease Book](#)

*Policy: 1989  
Revised: 1994, 1998, 2000, 2003, 2021*

## Community Service/Involvement

The purpose of volunteer requirements throughout the curriculum is to promote the concept of service as a health care professional to the community. 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 community, representing the Radiologic Sciences program and the university.

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

There will be preapproved events that are posted on the bulletin board in the hallway near the departmental office. These events do not require approval of a program official.

For other events 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 may be direct patient care, indirect patient care, health care related walks, church related events.

- 1 hour 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
  - Visiting and socializing with individual in assisted living or long-term care facilities
  - Participating in projects that improve the well-being of individuals in the community
- 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
- Church events
  - Food drive
  - Teach CCD, bible school, Sunday school, youth leader, etc
  - Homeless shelter related activities

*Policy 2018, Revised 2019, 2023, 2025*

## 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 (modules I, II, and III)**
- **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 three types of radiographic examinations with regard to ***competency evaluations (Modules I, II, and II)***. They are module I, module II, module III examinations. Specific positions/projections included in the evaluation are stated in ***Appendix I***. The ARRT competences include general patient care requirements (CPR\*, Vital Signs (BP, Temp, Resp, Pulse, Pulse Ox) , 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 module I and II competency evaluations will satisfy all ARRT requirements for examination eligibility. Completion of module III competency the MSU/BS degree (\*Evaluated separately)

#### ***MODULE I EXAMS (ARRT requirements for examination eligibility)***

- Mandatory (36 examination/procedures)
- Performance evaluated on patients in clinical setting, unless indicated by asterisk on Appendix I (2 can be simulated, but not as carryovers)
- Examinations listed in *Appendix I*

#### ***MODULE II EXAMS (ARRT requirements for examination eligibility)***

- Mandatory (15 examination/procedures)
- 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 8 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
    - Evaluated by CP, 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*

#### ***MODULE III EXAMS (MSU/BS degree requirement)***

- Mandatory (14 examination/procedures)
- Performance evaluated on patients in clinical setting or by **simulation**, unless indicated by + on Appendix I (Computed Tomography cannot be simulated)
  - Simulation involves performance evaluation on a live subject (not an actual patient) with the exposure simulated
  - Only to meet requirements for currently enrolled clinical radiography course
- 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 CP, or MSU Faculty
  - If CP or MSU Faculty 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](http://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 CP 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) (Student will be held responsible for assurance that images produced meet the established evaluation criteria)
  - ***A minimum of 2 competency evaluations from module I, II or III must be done by the CP or MSU Faculty during each clinical radiography course, except RADS 467 only 1 competency evaluation required.***
    - **The CP 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 CS 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 Preceptor; however, there are no semester requirements until RADS 461.

- Initiated by student or Faculty Member
  - Evaluations performed on module I, II or module III examinations
  - Exams may be evaluated for Proficiency **only one time, unless initiated by the Clinical Preceptor**
    - 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 RADS 461 are applied to the minimum required for RADS 467 the next semester.
  - If initiated by a Faculty member (**Faculty can initiate starting with RADS 355**)
    - inform the student they are being evaluated before the examination begins
  - If initiated by the student, the following applies (**Student cannot initiate until RADS 461**)
    - First ask CP, 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](http://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 CP, or MSU Faculty not available, a designated Radiographer will be appointed by CP. The student will be evaluated according to the items on the *paper evaluation Form F- 11*
    - **The CP or MSU faculty will then complete the evaluation on-line, via the e-value system using the form generated by the student.**
  - 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 CS 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 461
  - 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 preceptor 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, II or module III 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 CP 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
  - CP 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](http://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 CP 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, II or module III, observed by CP, or MSU faculty

+ Not applicable to merit competency evaluations or Documented Competency Maintenance

Policy: 1983

Revised: 1986, 1990-1992, 1994, 1999, 2003, 2004, 2006-2011, 2013, 2014, 2016, 2018, 2021, 2025

## 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, *competency evaluations* from module III, *proficiency evaluations*, and *documented competency maintenance*. Students are encouraged to request *competency (modules I, II, III) 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 (module I, II, III)/proficiency evaluations must be done by the CP or MSU Faculty during each clinical radiography course.***

### **RADS 350 – CLINICAL RADIOGRAPHY I**

4 Competency Evaluations from Module I (*2 completed by Midterm*)

1 Competency Evaluations from Module II

Documentation of Competency Maintenance (see form F-43/350)

***Maximum number of unsuccessful competency/Proficiency evaluations = 20\****

### **RADS 355 – CLINICAL RADIOGRAPHY II**

8 Competency Evaluations from Module I (*4 completed by Midterm*)

3 Competency Evaluations from Module II (*1 completed by Midterm*)

3 Competency Evaluation from Module III (*0 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*)

3 Competency Evaluations from Module II (*1 completed by Midterm*)

4 Competency Evaluation from Module III (*2 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*)

1 Competency Evaluations from Module II

Documentation of Competency Maintenance (see form F-43/459)

***Maximum number of unsuccessful competency/Proficiency evaluations = 20\****

### **RADS 461, CLINICAL RADIOGRAPHY V**

8 Competency Evaluations from Module I (*4 completed by Midterm*)

4 Competency Evaluations from Module II (*2 completed by Midterm*)

4 Competency Evaluation from Module III (*2 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**

5 Competency Evaluations from Module I+

3 Competency Evaluations from Module II+

3 Competency Evaluation from Module III

3 Proficiency Evaluations+

Documentation of Competency Maintenance (see form F-43/467) +

Other requirements are dependent upon the Advanced Area rotation requested by the student and assigned by the clinical coordinator; these requirements are distributed to the student depending on their assignment

+ must be completed during the ½ of semester when assigned to the general radiography rotations

\*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, 2021, 2025

## 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](http://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 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 CS on social media, including pictures of self, patients, or others while at the CS, \*~
- Not engage in theft of any articles from the Clinical Setting, or the University \*~
- Not leave patients unattended while undergoing diagnostic procedures
- Not hold patients or the image receptor during radiographic exposures
- Not fight or attempt to injure others while at the Clinical 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 clinical setting equipment for personal use
- Not use cell phones/smart watches

### **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, 2023, 2025*

## CONFIDENTIAL INFORMATION

The university and the CS'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 CS, its policies, personnel and/or patients are confidential Requests for information concerning a patient should be referred to the Supervising Technologist or the CP
- Students assigned to some CS's may be required to sign confidentiality statement prior to assignment or as part of the CS orientation process
- Photographs within the radiology department are not permitted without authorization from the hospital's communications department.
- Posting of any information from the CS on social media is prohibited
  - Photographs
  - identification badges
  - patient history and protected health information
  - text indicating the CS patient or employees
  - encompassing while at the CS or away from CS
- 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 CS are only to be removed or distributed by the CP 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 preceptor or an professor 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, then the probation is applied to the next semester.
- If the offense is serious enough the probation can be assigned for multiple semesters

### **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
  - Suspension days cannot be made up and cannot be used as the 1 permitted absence, points will be deducted under clinical participation on the grading procedure sheet
  - 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, 2022, 2025

## 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 CS 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 must be within 30 days of report)
  - Students can request a copy of their reading from the Radiologic Sciences 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
      - CP 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 be 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 all the day(s) missed,
    - 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, 2021, 2022*



## **DRESS CODE AND APPEARANCE**

The student uniform is to be worn by all students while in attendance at the Clinical Setting. When the assigned area requires something other than the student uniform (i.e.: surgery, special procedures), the student must arrive and leave the CS 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
- Males - all **navy** professional uniform or professional scrubs
  - Navy colored -Top/Pant
  - White lab coat
- Pants not to drag the floor or be frayed
- 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
  - No Ornamental headwear (ie: wide headbands, caps, etc.)
- 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 badge must be worn and, where provided, the CS ID
  - No magnetic name badges 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, no large or dangling earrings and no hoops
  - If gauged earlobes, must wear flesh toned gauge plugs
  - Wedding band and/or engagement ring
  - Wrist watch with a second hand (smart watches are not acceptable)
- No sweaters or jackets -- only lab coats are acceptable
- Surgical Attire is not permitted outside the CS it is the property of the CS
- 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 CS***

- Time missed will be considered an absence
- Repeated violations of the dress code will warrant appropriate disciplinary action.***

## **EARLY RELEASE FROM A CLINICAL RADIOGRAPHY COURSE**

The clinical radiography courses are completed on documented achievement of the stated objectives and competences 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, II or III
  - 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 preceptor evaluation of the student.

*Policy 1989  
Revised 1994, 1997, 2003, 2007, 2021*

## EVALUATIONS

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

### ***CLINICAL PERFORMANCE EVALUATION F-9/ Urgent Care Center Evaluation (Vital Signs/IM injection-F54)***

The student will

- Be evaluated at the end of each rotational assignment **F-9**
  - 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 for generating the necessary form (**Form F-9**) via [www.e-value.net](http://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
- Urgent Care Center Evaluation form (**F-54**) are completed at the end of each urgent care assignment
  - % Of yes responses based on total number of responses, for example 14 total responses with 12 yes responses =  $12/14 = 85.7$  or 86%
- 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 CP

### ***EQUIPMENT MANIPULATION***

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

- 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 must be generated in e-value by the student and completed during the first assignment through the rotation at each assigned CS, per semester***
- Submit the completed form to the CP within one week\* or it will result in the 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, CP, or MSU faculty
- The completed form will then be reviewed, scored and recorded on the grading procedure sheet by the CP
  - % 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 PRECEPTOR***

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

- 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 CP. 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](http://www.e-value.net), under the evaluation icon- "initiate ad hoc Evaluation" select Form F-6 "Who did you work with"

### ***CLINICAL SETTING EVALUATION***

At the close of each semester, the student will evaluate each CS to which they are assigned via [www.e-value.net](http://www.e-value.net), under the evaluation icon- "initiate ad hoc Evaluation" select Form F-7

### ***CLINICAL PRECEPTOR EVALUATION***

At the close of each semester, the student will evaluate each the CP to which they are assigned via [www.e-value.net](http://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 (RADS 461)***

Includes Radiography, Radiography/Fluoroscopy, Mobile/Surgery, Cardiac Catheterization, 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](http://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.
  - Submit the completed form to the CP within one week\* or it will result in the score of "0"
  - The completed form will then be reviewed and scored by the CP
    - Scoring, is worth up to 100 points

- % Of yes responses based on total number of responses and that % of 100 is the score, for example:
  - 22 total responses with 20 yes responses =  $20/22 = 90\%$

- **Advanced Area Assignments (RADS 467)**

The forms listed below specific to each area are generated via [www.e-value.net](http://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
- Submit the completed form to the CP within one week\* or it will result in the score of "0"
- The completed form will then be reviewed and scored by the CP
- Scoring, is worth up to 100 points
  - % Of yes responses based on total number of responses and that % of 100 is the score, for example:
    - 22 total responses with 20 yes responses =  $20/22 = 90\%$

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

\* 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, 2023, 2024*

### **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 CS
- **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 preceptor 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, 355, 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% - of Final grade, *see below***
  - Clinical performance evaluations (F-9)
  - Urgent Care Center evaluation (F-54) when applicable
  - Choice Clinical Assignment Evaluations (RADS 461 only)
  - Equipment Manipulation Evaluations
  - LSRT or Equivalent Membership (RADS 356 only), Community Service (except for RADS 350 and 459),
  - Professional meeting bonus points
- **5% - Record keeping, *see clinical radiography course – record keeping***
- **10% - Clinical participation, *see attendance/tardy policy***
- **7% - Clinical preceptor evaluations of the student, *see evaluations***
- **20% - Unit tests, Case Analysis Presentation (350 only), Oral Presentation (459 only), Mid-term grade, and Quizzes, *see clinical radiography course – unit testing***

### **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 Area Clinical Evaluations
  - Equipment Manipulation Evaluations
- **5% - Record keeping, *see clinical radiography course – record keeping***
- **20% - Clinical participation, *see attendance/tardy policy***
- **12% - Clinical preceptor evaluations of the student, *see evaluations***

### **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 requires the students to have health insurance.

- Students must indicate health insurance coverage and copy of card on the self-reported health form (**Form F-38**)
- Students are not employees of the CS
  - Not covered by employee benefits of the assigned CS
  - Not covered by worker's compensation will assigned to the CS

### **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 are required prior your RADS 350 clinical assignment and if exposed to an individual with active tuberculosis. 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 CS orientation)
- Hazard materials (chemical, electrical, bomb threats etc.) (part of CS orientation)
- Failure to attend orientation will result in suspension from the clinical radiography course until attendance is documented
- **Documentation of accreditation and OSHA requirements are completed on Form F- 39, and reported to the CS on a semester basis**

Student(s) with latex allergies

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

## 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 CS. 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 CP and the Clinical Coordinator
- Required to follow the proper procedure for documenting incidents in the CS where the incident occurred
  - See the CP or supervisor for the proper procedure
- All incidents must be documented with the CS 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 CS 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 CS
- 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 CS
  - Must use good judgment in deciding 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 ***respondent 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

### **CONVICTION OF A CRIME (Form F-32)**

All potential violations must be investigated by the LSRTBE in order to determine eligibility. The LSRTBE 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 plea 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 must notify the LSRTBE in order to obtain a ruling of the impact of their eligibility for the state license (go the LSRTBE website [www.lsrbe.org](http://www.lsrbe.org) and write the Executive Director for the process of preapproval for a state license.
  - Pre-approval for the state license must be submitted any time after acceptance into the professional phase and before your first clinical radiography course.
  - Further information regarding reporting requirements may be accessed on the LSRTBE website

### **STUDENT EXEMPTION**

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

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

Policy: 1986, 2024



## **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. A Certification of Insurance can be requested from the purchasing department.

*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 professor 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 preceptor 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 CS.

- Markers are must be ordered from **PB Markers** (<https://pbmarker.com/markers.html>) (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 **"1 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, then add to cart
  - 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 CP
  - 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 preceptor'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, 2023*

## 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 department, as well as complete a specialty rotation during RADS 461 (1-2 weeks) and/or 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 Setting (CS) 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 piercing), 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 within the [ACR Manual on MRI Safety](#) page 123

## NATIONAL CERTIFICATION EXAM

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 plea 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](http://www.arrt.org))
  - Pre-approval for the state license must be submitted any time after acceptance into the professional phase and before your first clinical radiography course.
  - Further information regarding reporting requirements may be accessed on the ARRT website at <https://www.arrt.org/pages/resources/ethics-information/reporting-ethics-violations>

*Policy: 1982*

*Revised: 1984, 1985, 1986, 1993, 1994, 1996, 1997, 2003, 2004, 2008, 2013, 2014, 2016, 2024, 2025*

## ORIENTATION - CLINICAL SETTINGS

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

- CP for the CS 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
    - Mobiles and Surgery
    - MR
    - Nuclear Medicine
    - Radiation Oncology
    - Special Procedures
- Neither the university nor the CS 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.lsrt.net](http://www.lsrt.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 3 pts for observation of the Bee (requires faculty member initials)
  - Receive 2 pts for Student BEE participation
    - 3<sup>rd</sup> place 10 pts
    - 2<sup>nd</sup> place 15 pts
    - 1<sup>st</sup> 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, 3<sup>rd</sup> place 10 pts, 2<sup>nd</sup> place 15 pts, 1<sup>st</sup> place 20 pts
    - Receive 2 pts for each hour of observation at the Bowl (requires faculty member initials/hr)
  - Ceremonial events (awards/induction of officers) 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 CP evaluation category on the grading procedure sheet.
- Provide annual scholarship - *Joe Schwartz Memorial Scholarship*

*\* points may change depending on options at meeting*

### **NATIONAL SOCIETY** [www.asrt.org](http://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, 207, 2022, 2023*

## **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 CS 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](http://www.mcneese.edu/ada) and [www.mcneese.edu/policy](http://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 CS 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](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/policy/alcohol-and-other-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 (10 Panel split study drug Screening)
- Performed by *Castlebranch*. (see instructions under the **Background Check Policy**, the steps in obtaining drug screening and background check are both performed by *Castlebranch*)
- Required prior to the first Clinical 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 to *Castlebranch* to 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 decide 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.

Policy: 2006  
Revised 2008, 2010-2012, 2015, 2016, 2019, 2023



### TELEPHONES/CELL PHONES/SMART WATCHES

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 and smart watch usage is prohibited at the CS
  - Cell phones and/or smart watches must be left in car or locker

*Policy: 1982, Revised: 2001, 2003, 2005, 2007, 2012, 2023*

### 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 CS
- 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 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 CS 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/CS orientation at the University)
- Tuberculosis awareness (done with annual program/CS orientation at the University)
- MRI safety (done with annual program/CS orientation at the University)
- Fire safety (done with annual CS orientation at the CS)
- Emergency preparedness/Hazards (chemical, electrical, bomb threats, terrorist attack etc.) (done with annual CS orientation at the CS)
- Medical emergencies (done with annual CS 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 CS specific policy review done with annual CS orientation at the CS)
- 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 Health Professions**  
**RADIOLOGIC SCIENCES PROGRAM**

**Clinical Rotation Record Summary Sheet**

**Name:**

<b>Approximate minimums – 4 weeks of evenings,</b>			
<b>RADIOGRAPHY (36 weeks)</b>			
<b>RADIOGRAPHY/FLUOROSCOPY (12 weeks)</b>			
<b>MOBILES &amp; SURGERY (8 weeks)</b>			

**MCNEESE STATE UNIVERSITY**  
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<b>C.T. (3 weeks)</b>			
<b>CHOICE ROTATION(S): Radiography, Radiography/Fluoroscopy, Mobile/Surgery/ Bone Densitometry, Vascular Interventional Radiography, Sonography, Nuclear Medicine, Computed Tomography, Magnetic Resonance, Mammography, Radiation Oncology, (see Form F-27) (1-2 weeks)</b>			
<b>Advanced Area Rotations: CT, MRI, Mammography/Bone Density, Vascular Interventional Radiography, Cardiac Interventional Radiography, (See Form F-36) (up to 7 - 8 weeks)</b>			
<i>Policy: 1982, Revised: 2001, 2003, 2007, 2008, 2009, 2010, 2011, 2013, 2014, 2015, 2016, 2019, 2021, 2024</i>			

**MCNEESE STATE UNIVERSITY**  
**Department of Health Professions**  
**RADIOLOGIC SCIENCES PROGRAM**

**COUNSELING FORM**

- ☐ Counseling only
- ☐ Counseling with disciplinary action
- ☐ Incident documentation

<b>Name</b>	<b>Date</b>	
<b>CS</b>	<b>Date of Incident</b>	
<b>NATURE OF INCIDENT and COMMENTS:</b>		
<b>SUGGEST AREAS FOR IMPROVEMENT:</b>		
<b>DISCIPLINARY ACTION</b> (When applicable)	<input type="checkbox"/> Written warning <input type="checkbox"/> Probation (length)_____	<input type="checkbox"/> Suspension _____days <input type="checkbox"/> Dismissed
<b>Clinical Coordinator's Signature</b>	<b>Student's Signature</b>	
<b>Clinical Preceptor's Signature</b>	<b>Program Director's Signature</b>	
	<b>Date:</b>	

*Revised: 2003, 2007, 2014*

**MCNEESE STATE UNIVERSITY**  
**Department of Health Professions**  
**RADIOLOGIC SCIENCES PROGRAM**

*Excessive / Unusual Exposure Readings*

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

**MCNEESE STATE UNIVERSITY**  
**Department of Health Professions**  
**RADIOLOGIC SCIENCES PROGRAM**

**TECHNOLOGIST EVALUATION QUESTIONNAIRE**

<b>Student doing evaluation:</b>		
<b>Technologist being evaluated:</b>		
<b>CS:</b>		
<b>Semester</b>	<b>Year</b>	
<b>INSTRUCTIONS FOR FILLING OUT THIS FORM:</b> The purpose of this form is to improve the Clinical Setting teaching process. For this reason, all answers should be objective, keeping personal feelings out of this evaluation. BE SURE TO READ ALL QUESTIONS.		
	<b>Yes</b>	<b>No</b>
1. Was the technologist willing and available to act as an preceptor?		
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?		
<b>COMMENTS:</b> (Use the back of this page if more room is needed)		

**MCNEESE STATE UNIVERSITY**  
**Department of Health Professions**  
**RADIOLOGIC SCIENCES PROGRAM**  
**Clinical Setting Evaluation Questionnaire**

<b>CS:</b>					
<b>Semester:</b>			<b>Year:</b>		
The purpose of this questionnaire is to evaluate the Clinical 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 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.	<b>Strongly Agree #5</b>	<b>Agree #4</b>	<b>Neither Agree Nor Disagree #3</b>	<b>Disagree #2</b>	<b>Strongly Disagree #1</b>
1. The amount of time spent in the Clinical Setting was adequate time to expose you to a variety of procedures.					
2. The clinical routines and procedures are consistent.					
3. The Clinical Setting Radiographers are interested in the program.					
4. The Clinical 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 Setting acted as good examples in radiation protection procedures.					
8. The clinical rotation assignments were adhered to.					
9. The radiographers at the Clinical Setting acted in a professional manner.					
10. The radiographers at the Clinical 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.					



CS:	
Semester:	Year:
16. What did you like best about this Clinical Setting?	
17. What did you like least about this Clinical Setting?	
18. What suggestions do you have for improving this Clinical Setting?	
ADDITIONAL COMMENTS:	
Revised 2015, 2016	

[illegible]

**MCNEESE STATE UNIVERSITY**  
**Department of Health Professions**  
**RADIOLOGIC SCIENCES PROGRAM**

Score
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*Clinical Performance Evaluation*

<b>Student Name:</b>	
<b>CS:</b>	
<b>Rotational Area:</b>	
<b>Date from:</b>	<b>Date to:</b>
<i>Directions to the evaluator</i>	
<b>SELECT ONE OF THE FOLLOWING FOR EACH ITEM FOLLOWING I-V:</b>	
<i>Also complete the checklist for the rotation when applicable (located in the course syllabi)</i>	
<b>* Consider Student length of time in professional phase of program</b>	
<b>4</b> The student does this 90% of the time or more <b>3</b> The student does this 80 - 89% of the time	<b>2</b> The student does this 70 - 79% of the time <b>1</b> The student does this 69% of the time or less
<b>Technical Skills* - The student...</b>	<b>II. Patient Care - The student...</b>
<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 and able to adapt for unusual cases	<input type="checkbox"/> E. Performs duties with minimum discomfort to the patient
<b>III. Radiation Protection - The student...</b>	<b>IV. Organizational Skills - The student...</b>
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
<b>V. Affective Domain – The student ....</b>	
<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	Student's signature
Date	Date
<b>Comments: (use reverse side of this sheet if more space is needed)</b>	

Revised 2004, 2007, 2011, 2016, 2021, 2025

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**Department of Health Professions**  
**RADIOLOGIC SCIENCES PROGRAM**

Requested by:

- ☐ Student  
☐ CP

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

**PERFORMANCE EVALUATION**

<b>Student's name:</b>			<b>Procedure:</b>					
<b>Patient's X-ray or MR#</b>		<b>Accession # (when applicable):</b>			<b>Date:</b>			
<b>Room #</b>			<b>Course/Semester</b>					
<i>This form is to be completed only by the Clinical Preceptor, MSU faculty</i>								
<b>KEY:</b> <b>3 – Satisfactory</b> <b>2 – Acceptable (need minor improvement)</b> <b>SCORE _____ x 100 = _____ %</b> <b>1 – Acceptable (needs major improvement)</b> <b>0 – Unsatisfactory (results in failure regardless of the overall average is 90%)</b>								
<b>I. Assessment of Requisition:</b>								
	Proj	Proj	Proj	Proj	Proj	Proj	Proj	Proj
<b>II. Fill in the projections here →</b>								
<b>A. Physical Facility Readiness</b>								
<b>B. Patient Care</b>								
<b>C. Radiographic Procedure</b>								
<b>D. Radiation Protection</b>								
<b>E. Exposure Factors</b>								
<b>III. PRODUCT ANALYSIS</b>								
<b>A. Anatomy Identification *</b>								
<b>B. Positioning Analysis *</b>								
<b>C. Exposure Factors Analysis *</b>								
<b>IV. Total Skin Dose Estimate: <sup>†</sup>*</b>								
<b>V. Procedure Management:</b>								
<b>Comments:</b>								
<b>Evaluator's Signature</b>			<b>Student's Signature</b>					
* Only required on applicable examinations/procedures – see appendix, not required on Proficiency and merit evaluations								
<sup>†</sup> 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 <b>Form F-15</b> , C-Arm Competency use <b>Form F-21</b> , Retrograde pyelogram use <b>Form F-44</b>								
<sup>1</sup> 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**

CP was contacted First ☐

Student's Name:		Procedure	
Patient's x-ray # or MR #	Accession # (when applicable)	Date	
Room #	Course/Semester		
<p><i>This form is to be used by the <b>staff radiographers</b> for competency/Proficiency evaluations at times when the CP 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 CP. <b>This form is not applicable for the following:</b> CT Competency use <b>Form F-15</b>, C-Arm Competency use <b>Form F-21</b>, OR Cholangiogram use the C-Arm competency <b>Form F-23</b>, Retrograde pyelogram use <b>Form F-44</b></i></p>			
<b>Directions: check yes or no for the following objectives:</b>			
<b>ASSESSMENT OF REQUISITION</b>		<b>YES</b>	<b>NO</b>
1. Identify procedure to be performed			
2. Identify mode of transportation to clinical area			
3. Identify the patient's name and age			
<b>PHYSICAL FACILITY READINESS</b>		<b>YES</b>	<b>NO</b>
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 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"/> )			
<b>PATIENT CARE</b>		<b>YES</b>	<b>NO</b>
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			
<b>PATIENT PROTECTION</b>		<b>YES</b>	<b>NO</b>
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) <i>Check N/A if Radiologist does not want to shield for fluoro</i> 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					
<b>RADIOGRAPHIC PROCEDURES</b>				<b>A</b>		<b>B</b>		<b>C</b>		<b>D</b>		<b>E</b>	
				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"/> )													
<b>EXPOSURE FACTORS</b>				<b>A</b>		<b>B</b>		<b>C</b>		<b>D</b>		<b>E</b>	
				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)													
<b>PROJ</b>	<b>PATIENT THICKNESS</b>	<b>mAs</b>	<b>kVp</b>	<b>SID</b>	<b>EV or SV</b>	<b>Patient condition comments</b>							
A													
B													
C													
D													
E													
# of images accepted				# of images rejected									
For Computed Radiography, workstation where images were processed _____													
<b>TOTAL SKIN DOSE ESTIMATE</b>													
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.													
<b>PROCEDURE MANAGEMENT</b>										<b>YES</b>	<b>NO</b>		
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"/> )													
<b>COMMENTS:</b>													
<b>Signature of Evaluator</b>													

Revised: 2004, 2005, 2007, 2008, 2013, 2014, 2016

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**CLINICAL COMPETENCY SYSTEM – REMEDIAL ACTION**

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

*Revised: 2003, 2007, 2016*

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**CLINICAL EDUCATION SUMMARY OF MASTERED EXAMS**

Student's name:

<i>date</i> <b>MODULE I</b> <i>Check box if simulated. Limit 2 simulations</i>	<i>date</i> <b>MODULE II</b> <i>Check box if simulated. Limit 8 simulations</i>	<i>date</i> <b>Module III</b> <i>Check box if simulated. No Limit</i>
Abdomen	<input type="checkbox"/> Calcaneus	<input type="checkbox"/> AC joints
Abdomen Upright	<input type="checkbox"/> Contrast Enema (Single or Double Contrast)	<input type="checkbox"/> Arthrography
Ankle		<b>Computed Tomography</b>
Chest	<input type="checkbox"/> Decubitus Abdomen	<input type="checkbox"/> Cysto/Cystourethrogra m
Chest, wheelchair or stretcher	<input type="checkbox"/> Decubitus Chest	<input type="checkbox"/> IVU
Clavicle	<input type="checkbox"/> Esophagus	<input type="checkbox"/> Mandible
	<input type="checkbox"/> Facial Bones	<input type="checkbox"/> Myelography
C-Arm Procedure (Manip in sterile field)	<input type="checkbox"/> Nasal Bones	<input type="checkbox"/> Sacro-Iliac Joints
	<input type="checkbox"/> Patella	<input type="checkbox"/> Scapula
C-Arm Procedure (Manip >1 proj)	<input type="checkbox"/> Pediatric Abdomen- Age 6 or Younger	<input type="checkbox"/> Skull
C-Spine	<input type="checkbox"/> Pediatric Lower or Upper Extremity -Age 6 or Younger	<input type="checkbox"/> Small Bowel
Elbow		<input type="checkbox"/> Sternum
Femur	<input type="checkbox"/> Pediatric Mobile- Age 6 or Younger	<input type="checkbox"/> Upper Airway-STN
Finger or Thumb		<input type="checkbox"/> Zygomatic Arches
Foot	<input type="checkbox"/> Sacrum and/or Coccyx	<b>Merit Evaluations</b> (Write in as performed)
Forearm	<input type="checkbox"/> Sinuses	
Geriatric Chest	<input type="checkbox"/> Toes	
Geriatric Upper or Lower Extremity	<input type="checkbox"/> Upper GI	
Hand		
Hip		
Hip (Cross Table – Horizontal Beam)*		
Humerus		
Knee		
L-Spine		
Mobile Abdomen		
Mobile Chest		
Mobile Lower or Upper Extremity		
Pediatric Chest age 6 or Lower		
Pelvis		
Ribs		
Shoulder		
Spine (Cross Table – Horizontal Beam)*		
T-Spine		
Tibia/Fibula		
Trauma ^ Lower Ext.	<b>General Patient Care Competencies/Requirements</b> Completion of F-13 indicates completion of: Sterile and Aseptic Technique (F-21) Transfer of Patient  <b>Care of Patient Medical Equip</b> Vital Signs – BP, temp, pulse, resp, oximeter <input type="checkbox"/> Venipuncture (F-41) <i>Date completed:</i>	
<input type="checkbox"/> Trauma ^ Shoulder*		
Trauma ^Upper Ext.		
Wrist		
* can be simulated	<b>CPR (Clinical Course Requirement)</b>	



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***SUMMARY OF PASSED PROFICIENCY EVALUATIONS***

**Student Name:** \_\_\_\_\_

<b><i>Proficiency evaluations completed beginning with RADS 461 8 different procedures or examinations required</i></b>	
<b>Date</b>	<b>Procedure or Examination</b>

*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			<b>3. Perform the following, start to finish (includes reconstruction):</b>	<b>Y</b>	<b>N</b>
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					
G. Maintain clean, stocked area			<b>C. Identify the following anatomy on scan</b>	<b>Y</b>	<b>N</b>
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		
<b>II. CT TECHNOLOGY</b>			4. Kidney		
<b>A. Operation</b>	<b>Y</b>	<b>N</b>	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:

<b>Technologist Signature</b>	<b>Student Signature</b>
<b>Clinical Preceptor Signature</b>	<i>Revised: 2004, 2007, 2014, 2016, 2019, 2025</i>

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*RADS 461 CHOICE ASSIGNMENT OBJECTIVE EVALUATION – AREA: NUCLEAR MEDICINE*

SCORE \_\_\_\_\_

**Student Name:** \_\_\_\_\_

**CS:** \_\_\_\_\_

Date from:			Date to:		
<b>I. PATIENT CARE</b>	<b>Y</b>	<b>N</b>	<b>C. Outline specific patient preparation necessary for the following exams:</b>	<b>Y</b>	<b>N</b>
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			<b>E. Assist in the performance of the following examinations</b>	<b>Y</b>	<b>N</b>
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			<b>D. List other radiographic procedures that would interfere with any nuclear medicine if done on the same day.</b>		
<b>II. NUCLEAR MEDICINE TECHNOLOGY</b>					
<b>A. Operation</b>	<b>Y</b>	<b>N</b>			
Assist in setting up camera for routine procedures					
<b>B. Radiopharmaceuticals</b>	<b>Y</b>	<b>N</b>			
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 Preceptor Signature			<i>revised 2007, 2008, 2014, 2016</i>		

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*RADS 461-CHOICE ASSIGNMENT OBJECTIVE EVALUATION – AREA: RADIATION ONCOLOGY*

SCORE \_\_\_\_\_

Student Name: \_\_\_\_\_

CS: \_\_\_\_\_

<b>Date from:</b>	<b>Date to:</b>																						
<b>I. PATIENT CARE</b>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%;"></td> <td style="width: 15%; text-align: center;"><b>Y</b></td> <td style="width: 15%; text-align: center;"><b>N</b></td> </tr> <tr><td>A. Prepare room prior to patient arrival</td><td></td><td></td></tr> <tr><td>B. Identifies patient correctly</td><td></td><td></td></tr> <tr><td>C. Assists the patient on and off the treatment table</td><td></td><td></td></tr> <tr><td>D. Keep room stocked with supplies</td><td></td><td></td></tr> <tr><td>E. Attentive to the patient needs</td><td></td><td></td></tr> <tr><td>F. Identifies the emotional characteristics of patients who are terminally ill.</td><td></td><td></td></tr> </table>		<b>Y</b>	<b>N</b>	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.			
	<b>Y</b>	<b>N</b>																					
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.																							
<b>II. EQUIPMENT</b>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%;"></td> <td style="width: 15%; text-align: center;"><b>Y</b></td> <td style="width: 15%; text-align: center;"><b>N</b></td> </tr> <tr><td>A. Differentiate between linear accelerator and other types of radiation therapy equipment</td><td></td><td></td></tr> <tr><td>B. Operate hand switch to manipulate therapy machine</td><td></td><td></td></tr> <tr><td>C. Compare different types of e'cones and wedges in relation to their use for Radiation Onc.</td><td></td><td></td></tr> <tr><td>D. Properly set up a patient's radiation prescription</td><td></td><td></td></tr> <tr><td>E. Be able to tell what a bolus is used for</td><td></td><td></td></tr> </table>		<b>Y</b>	<b>N</b>	A. Differentiate between linear accelerator and other types of radiation therapy equipment			B. Operate hand switch to manipulate therapy machine			C. Compare different types of e'cones and wedges in relation to their use for Radiation Onc.			D. Properly set up a patient's radiation prescription			E. Be able to tell what a bolus is used for						
	<b>Y</b>	<b>N</b>																					
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E. Be able to tell what a bolus is used for																							
<b>III. RADIATION ONCOLOGY TECHNOLOGY</b>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%;"></td> <td style="width: 15%; text-align: center;"><b>Y</b></td> <td style="width: 15%; text-align: center;"><b>N</b></td> </tr> <tr><td>A. Cite the principle reason for the use of ionizing radiation for patient treatment.</td><td></td><td></td></tr> <tr><td>B. Name the class of disease most frequently subjected to treatment by Radiation Oncology</td><td></td><td></td></tr> </table>		<b>Y</b>	<b>N</b>	A. Cite the principle reason for the use of ionizing radiation for patient treatment.			B. Name the class of disease most frequently subjected to treatment by Radiation Oncology															
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<b>III. RADIATION ONCOLOGY TECHNOLOGY CONTINUED</b>																							
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 85%;"></td> <td style="width: 5%; text-align: center;"><b>Y</b></td> <td style="width: 10%; text-align: center;"><b>N</b></td> </tr> <tr><td>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.</td><td></td><td></td></tr> <tr><td>D. Distinguish between single dose fractionation and continuous dose methods</td><td></td><td></td></tr> <tr><td>E. Explain the importance of field size</td><td></td><td></td></tr> <tr><td>F. Evaluate a patient's radiation treatment plan</td><td></td><td></td></tr> <tr><td>G. Identify potential side effects of radiation therapy</td><td></td><td></td></tr> <tr><td>H. Describe the physical symptoms corresponding to various side effects</td><td></td><td></td></tr> </table>				<b>Y</b>	<b>N</b>	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.			D. Distinguish between single dose fractionation and continuous dose methods			E. Explain the importance of field size			F. Evaluate a patient's radiation treatment plan			G. Identify potential side effects of radiation therapy			H. Describe the physical symptoms corresponding to various side effects		
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Comments:																							
<b>Technologist Signature</b>	<b>Student Signature</b>																						
<b>Clinical Preceptor Signature</b>	<i>Revised: 2007, 2008, 2014, 2016</i>																						

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*RADS 461-CHOICE ASSIGNMENT OBJECTIVE EVALUATION – AREA: SONOGRAPHY*      SCORE \_\_\_\_\_

**Student Name:** \_\_\_\_\_

**CS:** \_\_\_\_\_

<b>Date from:</b>			<b>Date to:</b>		
<b>I. PATIENT CARE</b>	<b>Y</b>	<b>N</b>	<b>III. SONOGRAPHY</b>	<b>Y</b>	<b>N</b>
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:	<b>Y</b>	<b>N</b>
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		
<b>II. EQUIPMENT</b>	<b>Y</b>	<b>N</b>	5. Aorta		
A. Type patient's information on monitor			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:					
<b>Technologist Signature</b>			<b>Student Signature</b>		
<b>Clinical Preceptor Signature</b>			<i>Revised: 2003, 2007, 2008, 2014, 2016</i>		

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**Department of Health Professions**  
**RADIOLOGIC SCIENCES PROGRAM**

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

**Student Name:**

**CS:**

Date from:			Date to:		
<b>I. PATIENT CARE</b>	<b>Y</b>	<b>N</b>	<b>II. SPECIAL PROCEDURES</b>	<b>Y</b>	<b>N</b>
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			<b>J. Declot</b>	<b>Y</b>	<b>N</b>
K. Establish peripheral pulses			Identify		
L. Identify the need and administer basic life support if applicable			Right Atrium		
<b>M. Locate and evaluate the readiness of the following</b>	<b>Y</b>	<b>N</b>	Superior Vena Cava		
1. Crash cart			Subclavian		
2. Defibrillator			Dialysis Graft		
3. Suction			Identify common wires and catheters used for Declot		
4. Oxygen			<b>Completed Documentation Forms</b>		
<b>N. Monitors patient vital signs</b>	<b>Y</b>	<b>N</b>	Clinical Experience Documentation (print out case logs)		
1. Blood Pressure					
2. Pulse					
3. Respiration					
4. Temperature					
Comments: (please use reverse side if necessary)					
<b>Technologist Signature</b>			<b>Student Signature</b>		
<b>Clinical Preceptor Signature</b>			<i>Revised: 2003,2004, 2007,2008, 2011, 2014, 2016, 2019, 2025</i>		

Use this form for **Equipment Manipulation** each semester starting with your first surgery rotation

Use this form to document **competency** starting the second surgery rotation

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<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
<b>I. MANIPULATE C-Arm Equip.</b>	<b>Y</b> <b>N</b>	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		<b>V. Properly drape the C-Arm</b>
D. Operating kVp, mA, and time controls		<b>VI. Properly placed foot switch</b>
E. Operating switch to align image with an anatomical position of the body		<b>VII. Adjust brightness and contrast controls for the video monitor</b>
F. Operating Fluoroscopy timer and switch		<b>VIII. Properly store the image with the video monitor (Save the image)</b>
G. Operating selection switch for radiography and fluoroscopy		<b>IX. Making a permanent image</b>
H. Operating exposure switch for radiography		<b>X. Radiation Protection *</b>
I. Operating collimators		<b>A. Protect all personnel with lead aprons</b>
<b>II. Enter patient information*</b>		<b>B. Protect all personnel from unnecessary radiation</b>
<b>III. Select Technical Factors for the Procedure to be Performed:</b>	<b>Y</b> <b>N</b>	<b>XI. Properly clean the C-Arm before and after</b>
A. Fluoroscopic		<b>XII. Properly adhered to Sterile aseptic technique *</b>
B. Cine/Subtraction		<b>XIII. Send image to PACS if applicable*</b>
<b>IV. Mechanics of moving the C-arm</b>	<b>Y</b> <b>N</b>	
A. Lock and unlock horizontally		
B. Lock and unlock vertically		
C. Lock and unlock extension		
D. Lock and unlock angulation		
<i>* Automatic failure if not met</i>		
Comments:		
<b>Technologist Signature</b>		<b>Student Signature</b>
<b>Clinical Preceptor Signature</b>		

*Revised: 2004, 2005, 2007, 2013, 2014, 2016, 2022*

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☐ Passed  
☐ Retest
**RADS 467 ADVANCED AREA ASSIGNMENT OBJECTIVE EVALUATION - AREA: MAMMOGRAPHY****Student Name:****Date:**

X-ray or MR #					
<b>I. PATIENT CARE</b>	<b>Y</b>	<b>N</b>	<b>B. Quality Control</b>	<b>Yes</b>	<b>No</b>
A. Evaluate and understand request, check chart order			1. Observe Laser imager QC for assigned CS		
B. Prepare room prior to patient arrival			2. Observe Diagnostic Review Workstation QC		
C. Verify patient's identity*			3. Observe Phantom image QC		
D. Introduce self to patient (and to radiologists when applicable)			4. Observe Viewing Conditions QC		
E. Explain procedure to patient *			5. Observe the signal to noise (SNR), contrast to noise (CNR) modulation transfer function (MTF) QC, for assigned CS		
F. Record pertinent history from* patient utilizing the correct form			6. Observe Compression force QC		
G. Maintain clean, stocked area			7. Observe the Repeat Analysis QC		
H. Assist patient onto the table			8. Observe the visual checklist for QC		
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			<b>III. Mammography Technology</b>	<b>Y</b>	<b>N</b>
<b>II. Equipment</b>	<b>Y</b>	<b>N</b>	<b>A. Explain the difference b/t breast tissues in:</b>		
<b>A. Operation</b>			1. Fibro-Glandular		
1. Connect the compression device to unit*			2. Fibro-Fatty		
2. Apply the compression to patient*			3. Fatty Breast		
3. Locate the grid/IR holder*			B. Explain importance of noting scars, moles, etc.		
4. Locate the photocell receptors *			C. Explain baseline mammography		
5. Insert IR correctly * (if app)			D. Explain mammography guidelines related to age		
6. Attach localization device*			E. Explain the Eklund (pinch-back) method		
7. Use markers correctly (name, R or L, CC, MLO)*			F. Briefly discuss special mammographic positions		
8. Manipulate the x-y axis on localization device*			<b>IV. Locate supplies</b>	<b>Y</b>	<b>N</b>
9. Raise and lower unit*			a. Identify needles (biopsy and accessories)		
10. Turn unit from vertical to horizontal*			b. Gauze, tape, scalpels, etc		
11. Identify SID*			c. Scrub trays, linen		
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		
<b>Completed Documentation Forms</b>	<b>Y</b>	<b>N</b>
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>		
<b>Technologist Signature</b>	<b>Student Signature</b>	
<b>Clinical Preceptor Signature</b>	<i>Revised: 2003, 2004, 2007, 2008, 2014, 2016</i>	

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**CHECKLIST****SCORE****NON-RADIOGRAPHIC PERFORMANCE EVALUATION - AREA: EQUIPMENT MANIPULATION****Student's Name:****Date:****CS:****Room #**

<b>I. Radiographic Equipment Operation</b>		<b>YES</b>	<b>NO</b>
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			
<b>II. Identify the location of the:</b>			
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			
<b>III. Set up for Computed Radiography (when applicable)</b>			
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)			
<b>IV. Locate the following on the fluoroscopic tower and/or monitor:</b>			
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)			
<b>V. Set up for Computed fluoroscopy</b>			
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)			
<b>Comments:</b>			
<b>Technologist Signature</b>	<b>Student Signature</b>	<b>Clinical Preceptor Signature</b>	

Revised: 2003, 2005, 2006, 2007, 2016

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**40 PLUS FORM**

☐ **Approved**  
☐ **Not Approved**  
☐ **Requested time completed**

This form should be used for the following, check the appropriate description

1. ☐ When a student needs to request make up time.
2. ☐ When a student requests an additional clinical assignment beyond what is assigned for the clinical radiography course
3. ☐ When a student needs an examination/procedure that is not available at their assigned Clinical Setting (CS)
4. ☐ 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.
5. ☐ 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** \_\_\_\_\_

**CS:** \_\_\_\_\_

**Date of request:** \_\_\_\_\_

**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. Cannot perform Documentation of Competency Maintenance Exams
3. Minimum time requested is a 2-hour block
4. May not be scheduled during a student's class time
5. Requests are limited to the assigned CS - unless approved by program officials
6. Requests during semester breaks are limited to the previously assigned CS
7. For examinations/procedures not available at currently assigned CS.
  - Limit to RADS 467 - may request to go to any previously assigned CS during your clinical assignment
  - Must have approval of both Clinical Preceptor's (CPs).
  - If proper approval is not obtained then 40+ assignment is voided and any examination/procedures performed are not counted or applicable.
8. Patient care cannot be delayed.
  - Students are not to be called out to perform a specific examination/procedure while the patient waits on the arrival of the student. Student must be present at the CS when patient is available for examination/procedure.
9. If a student is late for a 40 + assignment, it will count as tardy. If a student does not show up for a scheduled 40+ assignment, it will count as an absence.

**Documentation of 40 + Time**

**Arrival time** \_\_\_\_\_ **Tech initials** \_\_\_\_\_ **Departure time** \_\_\_\_\_ **Tech initials** \_\_\_\_\_

**MCNEESE STATE UNIVERSITY**  
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**Clinical Preceptor Evaluation of Student**

**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 given 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. (7 pts.)
- ☐ The student puts forth very little effort and does just enough to get by. (6 pts.)

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

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

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

☐ The student usually conducts self in an appropriate manner conforming to professional standards of conduct. **(9 pts.)**

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

**Comments:**

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**REQUEST FOR Choice ASSIGNMENTS**

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

**Student Name:****CS:****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"/>	Cardiac Catheterization
<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>

	<i>Assigned to:</i>
<b>Student's Signature</b>	<b>CS</b>
<i>Approved by:</i>	<i>For</i>
<b>Clinical Coordinator's Signature</b>	<b>Rotation Area</b>
	<i>Revised: 2003, 2007, 2011, 2013, 2014, 2016, 2019, 2022</i>

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**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 Setting or any persons associated therewith.

<b>Name (printed)</b>	
<b>Signature</b>	<b>Date</b>
<b>Witness Signature</b>	<b>Date</b>

*Revised: 2003, 2013*

**MCNEESE STATE UNIVERSITY**  
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**Written Pregnancy Notification Form**

I, the undersigned, am <u>voluntarily</u> notifying a Program Official on of my pregnancy, with an estimated <span style="border: 1px solid black; display: inline-block; width: 60px; height: 20px; vertical-align: middle;"></span> gestation (Weeks) and an estimated due date of <span style="border: 1px solid black; display: inline-block; width: 200px; height: 20px; vertical-align: middle;"></span> .	_____ (Month)      (Day)      (Year)
---	---

<b>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.</b>	
<b>Student Signature</b>	<b>Date</b>

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

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

<b>I will continue in the program without modification</b>	
<b>Student Signature</b>	<b>Date</b>

<b>I will continue in the program following the recommendations of the program</b>	
<b>Student Signature</b>	<b>Date</b>

***Written Withdrawal of Declaration***

**I wish to withdraw my declaration of pregnancy**

<b>Student Signature</b>	<b>Date</b>

*revised 2003, 2008, 2014*



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**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 ensure 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.

<b>Room #</b>
<b>Semester/Yr</b>

<b>CS:</b>
------------

**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  
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**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:**

**Required to report to ARRT and LSRTBE**

- That if I have ever been charged with or 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 certified technologist in radiography,
- I am required to report traffic violations charged as misdemeanors or felonies
- I am required to report traffic violations that involved drugs or alcohol
- I am required to report charges or convictions that have been withheld, deferred, stayed, set aside, suspended.
- If I have had court conditions applied to my charge – including court supervision, probation, or pretrial diversion.
- If I have any plea of guilty, Alford plea, or plea of no contest (nolo contendere)
- I also realize that if charged or convicted as stated above while enrolled as a student in the program, all of the above is applicable, and

**Not required to report to ARRT and LSRTBE**

- I am not required to report juvenile convictions processed in juvenile court
- I am not required to report speeding and parking tickets that were not charged as misdemeanors or felonies and that did not involve drugs or alcohol.

***I understand it is my responsibility to file a pre-application with the ARRT and LSRTBE in order to obtain a ruling of the impact of my eligibility.***

**SIGNATURE OF STUDENT \_\_\_\_\_**

**DATE \_\_\_\_\_**

- |  |
|--|
| <ul style="list-style-type: none"> <li>▪ Pre-application is to be submitted at any time either before or immediately after acceptance into an accredited program. It is <b><i>strongly recommended</i></b> that if applicable you apply for preapproval from the ARRT and LSRTBE. There is an associated fee for submitting this application to the ARRT</li> </ul>  |
| <ul style="list-style-type: none"> <li>▪ For further information regarding the reporting requirements go to the ARRT and LSRTBE websites at <a href="https://assets-us-01.kc-usercontent.com/406ac8c6-58e8-00b3-e3c1-0c312965deb2/d67eef6f-1560-49bb-9a49-c958d2a67b67/ethics-review-preapplication.pdf">https://assets-us-01.kc-usercontent.com/406ac8c6-58e8-00b3-e3c1-0c312965deb2/d67eef6f-1560-49bb-9a49-c958d2a67b67/ethics-review-preapplication.pdf</a> or <a href="http://www.lsrte.org">www.lsrte.org</a></li> </ul> |

*Revised: 2001, 2007, 2008, 2011, 2016, 2021, 2024*

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**SCORE** \_\_\_\_\_

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

**Student Name:** \_\_\_\_\_

**CS:** \_\_\_\_\_

**Date from:** \_\_\_\_\_

**Date to:** \_\_\_\_\_

	YES	NO
<b>I. PATIENT CARE</b>		
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		
<b>II. EQUIPMENT</b>	<b>YES</b>	<b>NO</b>
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		
<b>III. BONE MINERAL ANALYSIS</b>	<b>YES</b>	<b>NO</b>
1. Analyze hip		
2. Analyze Lumbar Spine		
3. Set profiles when applicable		
4. Compare scans when applicable		
A. Backup disc		
B. Archive disc		
<b>Comments:</b>		
<b>Student Signature</b>	<b>Clinical Preceptor Signature</b>	
<b>Technologist Signature</b>		

*Revised: 2003, 2007, 2014, 2016*

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

**Student Name:**

<b>Semester: Spring</b>	<b>Course # RADS 467</b>
<b>Date of Request</b>	

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 (14 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 (4 Positions) <i>requires completion of RADS 370</i>
<input type="checkbox"/>	Vascular Interventional Radiography (4 Positions) <i>requires completion of RADS 370</i>
<input type="checkbox"/>	Mammography/Bone Densitometry (10 Positions) <i>requires completion of RADS 470</i>
<input type="checkbox"/>	Diagnostic Radiology

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

*Revised 2003, 2004, 2011, 2013, 2014, 2015, 2016, 2019, 2024*

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***Documentation for part of the initial training in Mammography required for MQSA (Successful completion of at least 25 supervised examinations)***

**Student Name:**

[illegible]

**MCNEESE STATE UNIVERSITY**  
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**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 settings of your health history should a situation occurs resulting in the need for immediate medical attention.*

**Name:****Date of Birth:****ID #**

**Health Insurance is required, please attach a copy of your insurance card**

<b>Directions –Please check the appropriate box and give an explanation if necessary. (Use the reverse side if needed)</b>	
<b>ALLERGIES</b> <input type="checkbox"/> NO <input type="checkbox"/> YES	If yes, please list allergies and state any medications if applicable.
<b>Convulsions or Seizures</b> NO      YES	If yes, please explain type and list medication(s) if applicable.
<b>DIABETES</b> NO      YES	If yes, please explain type and list medication(s) if applicable.
<b>SEVERE HEADACHES</b> NO      YES	If yes, please explain type and list medication(s) if applicable.
<b>HERNIA OR RUPTURE</b> NO      YES	If yes, please explain type and list medication(s) if applicable.
<b>HEART AILMENT</b> NO      YES	If yes, please explain type and list medication(s) if applicable.
<b>BACK OR SPINAL AILMENT</b> NO      YES	If yes, please explain type and list medication(s) if applicable.
<b>SURGERIES, INJURIES</b> NO      YES	List any surgeries or injuries
<b>COMMUNICABLE DISEASE</b> NO      YES	List any communicable disease(s) that you currently have:
<b>OTHER HEALTH AILMENTS SUCH AS KIDNEY AILMENT, ULCERS, CHEST PAIN, FREQUENT COLDS OR SORE THROAT</b>	List any:
<b>IMMUNIZATIONS OR TEST RECORD</b>	Submit an up-to-date immunization record along with this form (if not in compliance with the affiliated clinical setting requirements, you will have to obtain the necessary immunization(s) or test).
<b>ARE YOU CURRENTLY UNDER MEDICAL CARE</b> <input type="checkbox"/> NO <input type="checkbox"/> YES	If yes, please explain and list all applicable medications (use back of form if more space is needed) <div style="text-align: right; margin-top: 10px;"> <input type="checkbox"/>    <input type="checkbox"/> </div>
<b>I MEET THE TECHNICAL STANDARDS OF THE PROGRAM</b> <div style="float: right;"> <b>NO</b>      <b>YES</b> </div>	
<b>EMERGENCY CONTACT Notification: Please state name, address and phone # for the following:</b>	
<b>Physician:</b>	
<b>Relative or Friend:</b>	
<b>Student's Signature</b>	<b>Date</b> <i>Revised 2013, 2016, 2025</i>



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**ORIENTATION TO THE CLINICAL SETTING**

CS:

Date Orientation completed:

Student Name:

Student Phone #:

<b>TO BE COMPLETED THE FIRST DAY OF THE CLINICAL RADIOGRAPHY COURSE</b>	
<input type="checkbox"/> Introduction of Clinical Preceptor	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
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
Room assignments, and area assignment, demonstration of physical location	<i>Emergency Preparedness, (tornado, hurricane, flood, bomb threats, terrorist 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, II and III</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 CS HIPAA policy ( <i>signature when required</i> )	Review Policy in Handbook
<input type="checkbox"/> Distribute routine exam booklets for the CS	MRI safety protocol specific to the assigned CS
<input type="checkbox"/> Orientate and tour of department and hospital.	CS Employee Code of Conduct or Handbook
Designated Computer (s) for sign-in, lounges, lockers	
	<b>Student Signature</b>
	<b>Clinical Preceptor Signature</b>

Revised: 2004, 2007, 2011, 2012, 2013, 2016



MCNEESE STATE UNIVERSITY

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**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 Preceptor Signature

Revised: 2004, 2014, 2016

**MCNEESE STATE UNIVERSITY**  
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**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 Settings affiliated with the program. The Clinical Settings affiliated with the program are: Advanced MRI, Children's Clinic of Southwest Louisiana, Christus-Ochsner St. Patrick Hospital, Diagnostic Center of West Calcasieu-Cameron Hospital, Christus-Ochsner Lake Area Hospital, Lake Charles Memorial Hospital, Open Air MRI of Lake Charles, Pediatric Center of Southwest Louisiana, and West Calcasieu Cameron Hospital.

By checking each of the four items in the table below, you are giving permission for the McNeese State University Radiologic Sciences program to release that information to the clinical setting.

*Check each*

<b>Health Form (Form F-38)</b>	
<b>Results from PPD</b>	
<b>Results from Drug Screening</b>	
<b>Results from Alcohol Screening</b>	

\_\_\_\_\_  
 (Student Signature)

\_\_\_\_\_  
 (Date)

**MCNEESE STATE UNIVERSITY**  
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**RADIOLOGIC SCIENCES PROGRAM**

***DOCUMENTATION OF COMPETENCY MAINTENANCE***

*Student's Name*

<b>CHEST, or ABDOMEN (10)</b>		<b>TECH</b>	<b>Re √</b>			<b>TECH</b>	<b>Re √</b>
<b>DATE/EXAM</b>	<b>PT. ID #</b>	<b>Initials</b>	<b>Initials</b>	<b>DATE/EXAM</b>	<b>PT. ID #</b>	<b>Initials</b>	<b>Initials</b>
				<b>UPPER EXT., or Shoulder, or Clavicle, or Trauma upper ext., or AC Joints, or SC Joints or Scapula (1)</b>			

*Revised 2008, 2009, 2013, 2022*

***Student's Name***

Revised 2008, 2009, 2010, 2013

*Student's Name*

93

***Student's Name***

Revised 2008, 2009, 2010, 2013, 2015

***Student's Name***

95

*Student's Name*

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

**MERIT COMPETENCY EVALUATION: Area - Retrograde Pyelogram**

**Student Name:**

**Date**

X-ray or MR #	Accession # (if applicable)	Procedure
<b>I. Assessment of Requisition*</b>		<b>Yes      No</b>
A. Identify Procedure		
B. Identify Patient		
<b>II. Physical Facility Readiness*</b>		
A. Set up the Room		
B. Set up the Control Panel		
C. Properly placed foot switch		
<b>III. Assist Staff as requested *</b>		
<b>IV. Procedure*</b>		
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		
<b>V. Radiation Protection *</b>		
A. Protect all personnel with lead aprons		
B. Protect all personnel from unnecessary radiation		
<b>VI. Anatomy Identification*</b>		
<i>* Automatic failure if not met</i>		
Comments:		
<b>Technologist Signature</b>		<b>Student Signature</b>
<b>Clinical Preceptor Signature</b>		

*Revised: 2004,2005,2007, 2016*

**MCNEESE STATE UNIVERSITY**  
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**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 CP	Date	Successful Examination	Score 10	Date	Unsuccessful Examination	Score 5 or 0
<i>Carry over competency evaluations to RADS 355</i>						

**2. Competency Evaluations from Module II (1 required)**

√ CP	Date	Successful Examination	Score 10	Date	Unsuccessful Examination	Score 5 or 0
<i>Carry over competency evaluations to RADS 355</i>						

<b>B. Merit Competency Evaluations (5 points) (limit of 6)</b>		

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

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

<b>II. Documented Competency Maintenance = 5% of Final Grade</b>		
<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>		
<b>FINAL POINT SYSTEM <i>For Section II</i></b>		
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		

<b>III. Equipment Manipulation Evaluations = 10 points each; Rotation Evaluation, = 100 possible pts each = 3% of Final Grade, Urgent Care Center Evaluation if applicable, and LSRT Bonus points when applicable,</b>					
<b>A. Student Clinical Evaluations Form F- 9 (Each Evaluation = possible 100 pts)</b>					
<b>DATES</b>			<b>DATES</b>		
<i>From</i>	<i>To</i>	<b>SCORE</b>	<i>From</i>	<i>To</i>	<b>SCORE</b>

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. Record date and score for each of the following when applicable					
					SCORE
LSRT Bonus points (when applicable) (points possible are dependent of the LSRT program and will be given by MSU faculty) ( <i>bonus points are added to the points received and not the total points possible</i> )					
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					
<i>Record date of Absence, Tardy, or Non-Active Clinical Participation</i>					
<b>Absences</b> beyond one absence, record date of absence and the make-up date.					
<b>Tardies</b> - record date of tardy, and indicate if time was made up at the end of the assigned day.					
<b>Non-Active Participation</b> – record date and time, results in – 10 pts					
Date of Absence	Make-up Date	Tardy dates	Made up time late Y or N	Non-Active Clinical Participation time/date	
	<i>Not required for 1<sup>st</sup> absence</i>				
<i>Refer to the chart below for the point value for clinical participation</i>					
0-1 absence	=	100 pts.	Excessive Tardies - Over 2 = a deduction of 25 pts/occurrence		
2 absences	=	75 pts			
3 absences	=	50 pts	Non-Active Participation = a deduction of 10 pts/occurrence		
4 absences	=	25 pts			
Over 4 absences	=	0 pts	<i>No point deduction for excused absence(s)</i>		

**MID SEMESTER POINT SYSTEM *For Section V***

PTS. Received from  
Clinical Participation                      X 100 =                      X 10% =                      Score for V

**FINAL POINT SYSTEM *For Section V***

PTS. Received from  
clinical participation = \_\_\_\_\_ X 100 = \_\_\_\_\_ X 10% = \_\_\_\_\_ Score for V

**VI. Clinical Preceptor Evaluation Form F- 26/Counseling Sessions = 7% of Final Grade**

**Enter the date and score for the clinical preceptor evaluation (evaluation worth 100 pts)**

Date	Score

**FINAL POINT SYSTEM *for Section VI***

TOTAL PTS RECEIVED CP 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, Case Analysis Presentation, midterm grade = 100 possible pts each; quizzes = 10 points each)**

**Record date and score for each of the following when applicable**

	DATE	SCORE
Unit Test grade		
Midterm grade		
Quiz		
Quiz		
Quiz		
Quiz		
Case Analysis Presentation		

**MID TERM 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 VII		SCORE FROM VII	
TOTAL= /88= % For Grade		TOTAL= For Grade	

**MCNEESE STATE UNIVERSITY**  
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**Grading Procedure Sheet****RADS. 355****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 (8 required) (need 4 for midterm)**

√ if CP	Date	Successful Examination	Score 10	Date	Unsuccessful Examination	Score 5 or 0
<i>Carry over competency evaluations to RADS 356</i>						
<b>2. Competency Evaluations from Module II (3 required) (need 1 for midterm)</b>						
√ CP	Date	Successful Examination	Score 10	Date	Unsuccessful Examination	Score 5 or 0
<i>Carry over competency evaluations to RADS 356</i>						



<b>3. Competency Evaluations from Module III (3 required) (0 for midterm)</b>						
√ CP	Date	<i>Successful Examination</i>	Score 10	Date	<i>Unsuccessful Examination</i>	Score 5 or 0
<i>Carry over competency evaluations to RADS 356</i>						
<b>B. Proficiency Evaluations (10 points)</b>						
<b>C. Merit Competency Evaluations (5 points) (limit of 6)</b>						

<b>MID SEMESTER POINT SYSTEM For Section I</b>			
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			

<b>FINAL POINT SYSTEM For Section I</b>			
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			

<b>II. Documented Competency Maintenance = 5% of Final Grade</b>			
<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>			
<b>FINAL POINT SYSTEM for Section II</b>			
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			

<b>III. Equipment Manipulation Evaluations = 10 points each; Rotation Evaluation, Community Service, Urgent Care Center Evaluation if applicable - each item = 100 possible pts each = 3% of Final Grade and LSRT Bonus points when applicable,</b>					
A. Student Clinical Evaluations Form F- 9 (Each Evaluation = possible 100 pts)					
<b>DATES</b>			<b>DATES</b>		
<i>From</i>	<i>To</i>	<b>SCORE</b>	<i>From</i>	<i>To</i>	<b>SCORE</b>

B. Equipment Manipulation Evaluations Form F-24 (Each evaluation – possible 10 pts) <b>(required for each rotational assigned area) if not completed by end of the first rotational assignment through the area, will result in (0)</b>					
<b>DATE</b>	<b>ROOM</b>	<b>SCORE</b>	<b>DATE</b>	<b>ROOM</b>	<b>SCORE</b>
C. Record score for each of the following when applicable					
					<b>SCORE</b>
Community Service (6 hours required, all or nothing for points)					
LSRT Bonus points (when applicable) (points possible are dependent of the LSRT program and will be given by MSU faculty) ( <i>bonus points are added to the points received and not the total points possible</i> )					
<b>MID SEMESTER POINT SYSTEM for Section III</b>					
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	

<b>FINAL POINT SYSTEM for Section III</b>					
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	

<b>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)</b>							
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					
<i>Record date of Absence, Tardy, or Non-Active Clinical Participation</i>					
Absences beyond one absence, record date of absence and the make-up date.					
Tardies - record date of tardy, and indicate if time was made up at the end of the assigned day.					
Non-Active Participation – record date and time, results in – 10 pts					
Date of Absence	Make-up Date	Tardy dates	Made up time late Y or N	Non-Active Clinical Participation time/date	
	<i>Not required for 1<sup>st</sup> absence</i>				
0-1 absence	=	100 pts.	Excessive Tardies - Over 3 = a deduction of 25 pts/occurrence		
2 absences	=	75 pts			
3 absences	=	50 pts	Non-Active Participation = a deduction of 10 pts/occurrence		
4 absences	=	25 pts			
Over 4 absences	=	0 pts	<i>No point deduction for excused absence(s)</i>		

**MID SEMESTER POINT SYSTEM for Section V**

PTS. Received  
divided by PTS. Possible = \_\_\_\_\_ X 100 = \_\_\_\_\_ X 10% = \_\_\_\_\_ Score for IV

**FINAL POINT SYSTEM for Section V**

PTS. Received  
divided by PTS. Possible = \_\_\_\_\_ X 100 = \_\_\_\_\_ X 10% = \_\_\_\_\_ Score for IV

**VI. Clinical Preceptor Evaluation Form F- 26/Counseling Sessions = 7% of Final Grade**

Enter the date and score for the 2 clinical preceptor evaluation each semester (Each evaluation worth 100 pts)

Date	Score	Date	Score

**MID SEMESTER POINT SYSTEM for Section VI**

TOTAL PTS RECEIVED CP 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 CP 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, Midterm Grade = 100 possible pts each**

Record date and score for each of the following when applicable

	DATE	SCORE
Unit Test Grade		
Midterm Grade		

**MID TERM 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 RECEIVED = \_\_\_\_\_

PTS. Received divided  
by PTS. Possible = \_\_\_\_\_ X 100 = \_\_\_\_\_ X 20% = \_\_\_\_\_ Score for VII



**MCNEESE STATE UNIVERSITY**  
**Department of Health Professions**  
**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)**

√ CP	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 (3 required) (need 1 for midterm)**

√ CP	Date	Successful Examination	Score 10	Date	Unsuccessful Examination	Score 5 or 0
<i>Carry over competency evaluations to RADS 459</i>						

3. Competency Evaluations from Module III (4 required) (need 2 for midterm)						
√ CP	Date	Successful Examination	Score 10	Date	Unsuccessful Examination	Score 5 or 0
Carry over competency evaluations to RADS 459						
<b>B. Proficiency Evaluations (10 points)</b>						
<b>C. Merit Competency Evaluations (5 points) (limit of 6)</b>						



<b>MID SEMESTER POINT SYSTEM <i>For Section I</i></b>			
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

<b>FINAL POINT SYSTEM <i>For Section I</i></b>			
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

<b>II. Documented Competency Maintenance = 5% of Final Grade</b>	
<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>	
<b>FINAL POINT SYSTEM <i>for Section II</i></b>	
TOTAL PTS RECEIVED FROM Section II =	TOTAL PTS POSSIBLE FROM Section II = 100

<b>III. Equipment Manipulation Evaluations = 10 points each; Rotation Evaluations, LSRT Membership, Community Service, Urgent Care Center Evaluation if applicable - each item = 100 possible pts each; LSRT participation Bonus points = 3% of Final Grade</b>					
A. Student Clinical Evaluations Form F- 9 & Form F-46 (CT) (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

C. Record date and score for each of the following when applicable	
	DATE SCORE
LSRT Membership or equivalent	
Community Service (6 hours required, all or nothing for points)	
LSRT Bonus points (when applicable) (points possible are dependent of the LSRT program and will be given by MSU faculty) ( <i>bonus points are added to the points received and not the total points possible</i> )	
<b>MID SEMESTER POINT SYSTEM For Section III</b>	
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	

<b>FINAL POINT SYSTEM For Section III</b>	
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	

<b>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)</b>							
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					
<i>Record date of Absence, Tardy, or Non-Active Clinical Participation</i>					
Absences beyond one absence, record date of absence and the make-up date.					
Tardies - record date of tardy, and indicate if time was made up at the end of the assigned day.					
Non-Active Participation – record date and time, results in – 10 pts					
Date of Absence	Make-up Date	Tardy dates	Made up time late Y or N	Non-Active Clinical Participation time/date	
	<i>Not required for 1<sup>st</sup> absence</i>				
0-1 absence                      =                      100 pts.                      Excessive Tardies - Over 3 = a deduction of 25 pts/occurrence 2 absences                      =                      75 pts 3 absences                      =                      50 pts                      Non-Active Participation = a deduction of 10 pts/occurrence 4 absences                      =                      25 pts Over 4 absences                      =                      0 pts <i>No point deduction for excused absence(s)</i>					

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

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

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

<b>MID SEMESTER POINT SYSTEM <i>for Section VI</i></b>			
TOTAL PTS RECEIVED CP evaluations = _____		TOTAL PTS POSSIBLE = 100	
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 7% = _____ Score for VI			

<b>FINAL POINT SYSTEM <i>for Section VI</i></b>			
TOTAL PTS RECEIVED CP evaluations = _____		TOTAL PTS POSSIBLE = 200	
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 7% = _____ Score for VI			

<b>VII. 20% of Final Grade, Unit Test, Midterm Grade = 100 possible pts each</b>		
Record date and score for each of the following when applicable		
	<b>DATE</b>	<b>SCORE</b>
Unit Test Grade		
Midterm Grade		

<b>MID TERM POINT SYSTEM <i>for Section VII</i></b>			
TOTAL PTS RECEIVED = _____		TOTAL PTS POSSIBLE = _____	
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 20% = _____ Score for VII			

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



**MCNEESE STATE UNIVERSITY**  
**Department of Health Professions**  
**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)**

√ CP	Date	Successful Examination	Score 10	Date	Unsuccessful Examination	Score 5 or 0
<i>Carry over competency evaluations to RADS 461</i>						
<b>2. Competency Evaluations from Module II (1 required)</b>						
√ CP	Date	Successful Examination	Score 10	Date	Unsuccessful Examination	Score 5 or 0
<i>Carry over competency evaluations to RADS 461</i>						

<b>3. Competency Evaluations from Module III (none required)</b>						
√ CP	Date	Successful Examination	Score 10	Date	Unsuccessful Examination	Score 5 or 0
<i>Carry over competency evaluations to RADS 461</i>						
<b>B. Proficiency Evaluations (10 points)</b>						
√ CP	Date	Successful Examination	Score 10	Date	Unsuccessful Examination	Score 5 or 0
<i>Carry over Proficiency evaluations to RADS 461</i>						
<b>C. Merit Competency Evaluations (5 points) (limit of 6)</b>						

<b>MID SEMESTER POINT SYSTEM for Section I</b>			
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

<b>FINAL POINT SYSTEM for Section I</b>			
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

<b>II. Documented Competency Maintenance = 5% of Final Grade</b>			
<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>			
<b>FINAL POINT SYSTEM for Section II</b>			
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

<b>III. Equipment Manipulation Evaluations = 10 points each; Rotation Evaluation, Urgent Care Center Evaluation if applicable = 100 possible pts each = 3% of Final Grade, and LSRT Bonus points when applicable,</b>					
A. Student Clinical Evaluations Form F-9 (Each Evaluation = possible 100 pts) (Form F-46 also recorded here = 100 possible points)					
<b>DATES</b>			<b>DATES</b>		
<i>From</i>	<i>To</i>	<b>SCORE</b>	<i>From</i>	<i>To</i>	<b>SCORE</b>



**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. Record date and score for each of the following when applicable**

	SCORE
LSRT Bonus points (when applicable) (points possible are dependent of the LSRT program and will be given by MSU faculty) ( <i>bonus points are added to the points received and not the total points possible</i> )	

**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)**


<b>MID SEMESTER POINT SYSTEM <i>For Section IV</i></b>			
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			

<b>FINAL POINT SYSTEM <i>For Section IV</i></b>			
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			

<b>V. Clinical Participation – 10% of Final Grade</b>					
<i>Record date of Absence, Tardy, or Non-Active Clinical Participation</i>					
Absences beyond one absence, record date of absence and the make-up date.					
Tardies - record date of tardy, and indicate if time was made up at the end of the assigned day.					
Non-Active Participation – record date and time, results in – 10 pts					
Date of Absence	Make-up Date	Tardy dates	Made up time late Y or N	Non-Active Clinical Participation time/date	
	<i>Not required for 1<sup>st</sup> absence</i>				
0-1 absence                      =                      100 pts.		Excessive Tardies - Over 2 = a deduction of 25 pts/occurrence			
2 absences                      =                      75 pts		Non-Active Participation = a deduction of 10 pts/occurrence			
3 absences                      =                      50 pts					
4 absences                      =                      25 pts					
Over 4 absences                      =                      0 pts		<b><i>No point deduction for excused absence(s)</i></b>			

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

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

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

<b>FINAL POINT SYSTEM for Section VI</b>	
TOTAL PTS RECEIVED CP evaluations =	TOTAL PTS POSSIBLE = 100
PTS. Received divided by PTS. Possible =                      X 100 =                      X 7% =                      Score for VI	

<b>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)</b>		
<b>Record date and score for each of the following when applicable</b>		
	<b>DATE</b>	<b>SCORE</b>
Unit test		
Midterm Grade		
Quiz		
Quiz		
Quiz		
Quiz		
Presentation		

<b>MID TERM POINT SYSTEM for Section VII</b>	
TOTAL PTS RECEIVED =	TOTAL PTS POSSIBLE =
PTS. Received divided by PTS. Possible =                      X 100 =                      X 20% =                      Score for VII	

<b>FINAL POINT SYSTEM For Section VII</b>	
TOTAL PTS RECEIVED	TOTAL PTS RECEIVED
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=     /88 =     %     For     Grade		TOTAL=     For     Grade	

**MCNEESE STATE UNIVERSITY**  
**Department of Health Professions**  
**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 (8 required) (need 4 for midterm)**

√ CP	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 (4 required) (need 2 for midterm)**

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

<i>Carry over competency evaluations to RADS 467</i>						
<b>3. Competency Evaluations from Module III (4 required) (need 2 for midterm)</b>						
√ CP	Date	Successful Examination	Score 10	Date	Unsuccessful Examination	Score 5 or 0
<i>Carry over competency evaluations to RADS 467</i>						
<b>B. Proficiency Evaluations (10 points) (5-required) (2 for midterm)</b>						
<i>Carry over Proficiency evaluations to RADS 467</i>						

<b>C. Merit Competency Evaluations (5 points) (limit of 6)</b>						

<b>MID SEMESTER POINT SYSTEM <i>For Section I</i></b>			
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			

<b>FINAL POINT SYSTEM <i>For Section I</i></b>			
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			
<b>II. Documented Competency Maintenance = 5% of Final Grade</b>			
<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>			
<b>FINAL POINT SYSTEM <i>for Section II</i></b>			
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. Equipment Manipulation Evaluations = 10 points each; Rotation Evaluation, Choice Evaluations, Community Service, Urgent Care Center Evaluation if applicable - each item = 100 possible pts each = 3% of Final Grade and LSRT Bonus points when applicable,**

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

DATES		SCORE	DATES		SCORE
<i>From</i>	<i>To</i>		<i>From</i>	<i>To</i>	

**B. Choice Evaluations for Sonography F-18, Radiation Oncology F-17, or Nuclear Medicine F-16, VIR F-19 (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

**D. Record score for each of the following when applicable**

	SCORE
Community Service (6 hours required, all or nothing for points)	
LSRT Bonus points (when applicable) (points possible are dependent of the LSRT program and will be given by MSU faculty) ( <i>bonus points are added to the points received and not the total points possible</i> )	

**MID SEMESTER POINT SYSTEM For Section III**

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 3% =                      Score for III	



<b>FINAL POINT SYSTEM for Section III</b>			
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 3% =      Score for III

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

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

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

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

<b>MID SEMESTER POINT SYSTEM For Section IV</b>			
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

<b>FINAL POINT SYSTEM for Section IV</b>			
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, Tardy, or Non-Active Clinical Participation*

**Absences** beyond one absence, record date of absence and the make-up date.

**Tardies** - record date of tardy, and indicate if time was made up at the end of the assigned day.

**Non-Active Participation** – record date and time, results in – 10 pts

Date of Absence	Make-up Date	Tardy dates	Made up time late Y or N	Non-Active Clinical Participation time/date	
	<i>Not required for 1<sup>st</sup> absence</i>				

0-1 absence	=	100 pts.	Excessive Tardies - Over 3 = a deduction of 25 pts/occurrence
2 absences	=	75 pts	
3 absences	=	50 pts	Non-Active Participation = a deduction of 10 pts/occurrence
4 absences	=	25 pts	
Over 4 absences	=	0 pts	

***No point deduction for excused absence(s)***

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

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

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

<b>MID SEMESTER POINT SYSTEM <i>For Section VI</i></b>			
TOTAL PTS RECEIVED CP evaluations =		TOTAL PTS POSSIBLE = 100	
PTS. Received divided by PTS. Possible =	X 100 =	X 7% =	Score for VI

<b>FINAL POINT SYSTEM <i>for Section VI</i></b>			
TOTAL PTS RECEIVED CP evaluations =		TOTAL PTS POSSIBLE = 200	
PTS. Received divided by PTS. Possible =	X 100 =	X 7% =	Score for VI

<b>VII. 20% of Final Grade (Unit test, Midterm Grade, each = 100 possible pts;</b>	
<b>Record score for each of the following</b>	
	<b>SCORE</b>
Unit Test	
Midterm Grade	

<b>MID TERM POINT SYSTEM <i>for Section VII</i></b>	
TOTAL PTS RECEIVED =	TOTAL PTS POSSIBLE =
PTS. Received divided by PTS. Possible = _____ X 100 = _____ X 20% = _____ Score for VII	

<b>FINAL POINT SYSTEM <i>for Section VII</i></b>	
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	

<b><u>Midterm</u></b>		<b><u>Final</u></b>	
Student's Signature	Date	Student's Signature	Date
Clinical Preceptor's Signature	Date	Clinical Preceptor's Signature	Date
		Revised 2008, 2009,2011, 2014, 2015, 2016, 2019, 2021, 2022,2023, 2024, 2025	

**MCNEESE STATE UNIVERSITY**  
**Department of Health Professions**  
**RADIOLOGIC SCIENCES PROGRAM**

**Grading Procedure Sheet****RADS. 467****STUDENT'S NAME**

<b>I. Performance Evaluations = 55% of Final Grade</b>						
<b>A. Competency Evaluations Form F-10 (10 points each)</b>						
<b>1. Competency Evaluations Form Module I (5 required)</b>						
√ CP	Date	Successful Examination	Score 10	Date	Unsuccessful Examination	Score 5 or 0
<b>2. Competency Evaluations Form Module II (3 required)</b>						
√ CP	Date	Successful Examination	Score 10	Date	Unsuccessful Examination	Score 5 or 0
<b>3. Competency Evaluations Form Module III (3 required)</b>						
√ CP	Date	Successful Examination	Score 10	Date	Unsuccessful Examination	Score 5 or 0
<b>3. Proficiency Evaluations (3 required)</b>						
√ CP	Date	Successful Examination	Score 10	Date	Unsuccessful Examination	Score 5 or 0
<b>B. Advanced Area Rotation Assignments (selected ARRT Post Primary Certifications)</b>						
<b>1. Evaluation – for Advanced Area Rotation Assignment</b> # of points received divided by total points possible from: Form F-19, F-22, F-23/F35, F-37, F-47, or F-48 (Each evaluation is worth 100 pts)						Score =
<b>2. Documentation of Clinical Experience (see individual sheets for assigned areas).</b> (Submision of form, or case log documentation for advanced area) (worth 100 points)						Score =
<b>C. Merit Competency Evaluations (5 points) (limit of 6)</b>						

**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 = each worth 100 points, Equipment Manipulation Evaluation = 10 points each, = 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

**C. Community Service (6 hours required, all or nothing for points)**

<b>FINAL POINT SYSTEM <i>for Section III</i></b>			
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

<b>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)</b>							
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)							

<b>FINAL POINT SYSTEM <i>for Section IV</i></b>			
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

<b>V. Clinical Participation – 20% of Final Grade</b>					
<i>Record date of Absence, Tardy, or Non-Active Clinical Participation</i>					
<b>Absences</b> beyond one absence, record date of absence and the make-up date.					
<b>Tardies</b> - record date of tardy, and indicate if time was made up at the end of the assigned day.					
<b>Non-Active Participation</b> – record date and time, results in – 10 pts					
Date of Absence	Make-up Date	Tardy dates	Made up time late Y or N	Non-Active Clinical Participation time/date	
	<i>not required for 1<sup>st</sup> absence</i>				
<div style="display: flex; justify-content: space-between;"> <div> 0-1 absence = 100 pts.  2 absences = 75 pts  3 absences = 50 pts  4 absences = 25 pts  Over 4 absences = 0 pts </div> <div> Excessive Tardies - Over 3 = a deduction of 25 pts/occurrence   Non-Active Participation = a deduction of 10 pts/occurrence   <b><i>No point deduction for excused absence(s)</i></b> </div> </div>					
<b>FINAL POINT SYSTEM for Section V</b>					
Pts Received from Clinical Participation =                      X 100 =                      X 20%                      Score for V					

<b>VI. Clinical Preceptor Evaluation Form F-26/Counseling Sessions = 12% of final grade</b>			
Enter the date and score for the 1 or 2 clinical preceptor evaluation(s) each semester (Each evaluation worth 100 pts)			
If assigned to an advanced rotational area only 1 CP evaluation required			
Date	Score	Date	Score
LSRT Bonus points (when applicable) (points possible are dependent of the LSRT program and will be given by MSU faculty) ( <b><i>bonus points are added to the points received and not the total possible</i></b> )			
<b>Total</b>			

<b>FINAL POINT SYSTEM for Section VI</b>	
TOTAL PTS RECEIVED CP evaluations =	TOTAL PTS POSSIBLE = 100 OR 200
PTS Received divided By PTS Possible =                      X 100 =                      X 12% =                      Score for VI	



	<b><u>FINAL GRADE</u></b>
<b>SCORE FROM I</b>	
<b>SCORE FROM II</b>	
<b>SCORE FROM III</b>	
<b>SCORE FROM IV</b>	
<b>SCORE FROM V</b>	
<b>SCORE FROM VI</b>	
	<b>Total for Grade</b>

Student's Signature	Date
Clinical Preceptor's Signature	Date
Revised 2008, 2009, 2010, 2011, 2012, 2013, 2016, 2018, 2020, 2021, 2023, 2024	

**MCNEESE STATE UNIVERSITY  
 Department of Health Professions  
 RADIOLOGIC SCIENCES PROGRAM**

SCORE \_\_\_\_\_

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

**Complete this form for RADS 356** (First CT assignment), record on grading procedure sheet under section III, A (100 points possible)

**Do not complete this form for RADS 461** (second CT assignment, complete F-15 to achieve CT competency),

Student Name: \_\_\_\_\_

CS: \_\_\_\_\_

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 Monitor/LCD/CRT			e. Locate emergency cart		
d. Operator Console			f. Maintain clean and stocked area		
3. Define the following terminology			g. Participate in providing for patient needs		
a. Matrix			h. Assist in recording of patient information		
b. Hounsfield unit			III. CT TECHNOLOGY		
c. voxel			a. type patient information into computer		
d. pixel			b. correctly performs table movement		
e. gantry			c. utilizes operator console to begin patient scan		
f. (FOV)			d. retrieve images		
g. Window level for the following:			e. sends images to printer or PACS		
Head			IV. CT PROCEDURES		
Abdomen			a. selects the correct patient immobilization devices		
Spine			b. observes and assist in all CT procedures		
3. Define the following terminology			c. identify contrast used for CT procedures		
a. Matrix			d. assist in preparation of contrast (oral IV / automatic injector		
			e. identifies types of contrast used for CT procedures:		
			IV		
			Oral		

Comments: \_\_\_\_\_

<b>Technologist Signature</b>	<b>Student Signature</b>
<b>Clinical Preceptor Signature</b>	

## FORM F-47 (generated via e-value, learning modules by student)

**MCNEESE STATE UNIVERSITY**  
**Department of Health Professions**  
**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			<b>Completed Documentation Forms</b>			
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:						
<b>Technologist Signature</b>			<b>Student Signature</b>			
<b>Clinical Preceptor Signature</b>						

Revised 2013, 2016

**MCNEESE STATE UNIVERSITY**  
**Department of Health Professions**  
**RADIOLOGIC SCIENCES PROGRAM**

**RADS 467 ADVANCED AREA ASSIGNMENT OBJECTIVE EVALUATION- MAGNETIC RESONANCE IMAGING** **SCORE** \_\_\_\_\_

Student Name: \_\_\_\_\_

Date: \_\_\_\_\_

A. General Guidelines	Y	N	18. MRI safety procedures and precautions	Y	N	NA
1. Assesses Patient Requisition			19. Distinguish T1 and T2 weighting protocols seen on resultant images			
2. Assesses Physician Orders			20. Locate Emergency Cart			
3. Prepare room prior to patient's arrival			21. Maintain clean, stocked area			
4. Verify patient's identity			<b>B. Performance of at least 2 Procedures from each category listed in the Syllabus</b>	<b>Y</b>	<b>N</b>	<b>NA</b>
5. Introduce self to patient (and to radiologists when applicable)			1. Head and Neck			
6. Record pertinent history from patient & compare with chart history			2. Spine			
7. Assist patient onto the table			3. Thorax			
8. Attentive to the needs of patient			4. Abdomen and Pelvis			
9. Type patient information into computer			5. Musculoskeletal			
10. Selects proper protocol for procedure to be performed			6. Special Imaging Procedures			
11. Selects parameters for procedure			7. Quality Control			
12. Select optimal imaging coil			<b>Completed Documentation Forms</b>	<b>Y</b>	<b>N</b>	
13. Initiates scan			1. Clinical Experience Documentation Form Magnetic Resonance Imaging			
14. Prepares and administers contrast			2. Initials, ARRT ID #'s Addresses of ARRT Certified MR Technologists Form			
15. Display image, and archiving						
16. Evaluates images for image quality						
17. Utilizes Standard precautions						
Comments:						
Technologist Signature			Student Signature			
Clinical Preceptor			Revised: 2013, 2014, 2016			

**MCNEESE STATE UNIVERSITY**  
**Department of Health Professions**  
**RADIOLOGIC SCIENCES PROGRAM**

**Initial Clinical 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 Christus Ochsner St. Patrick Hospital, Christus Ochsner Lake Area Hospital, Lake Charles Memorial Hospital, Ochsner American Legion Hospital-Jennings, and/or West Calcasieu-Cameron 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 one CS for two consecutive semesters.

**Summer Session RADS 350/Fall Semester RADS 355**

- \_\_\_\_\_ Christus/Ochsner-St. Patrick Hospital
- \_\_\_\_\_ Christus/Ochsner-Lake Area Hospital
- \_\_\_\_\_ Lake Charles Memorial Hospital
- \_\_\_\_\_ Ochsner American Legion Hospital-Jennings
- \_\_\_\_\_ West Calcasieu-Cameron Hospital

Give a brief explanation for your rationale.

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**MCNEESE STATE UNIVERSITY**  
**Department of Health Professions**  
**RADIOLOGIC SCIENCES PROGRAM**

**Clinical Setting Placement Request Form**

Name\_\_\_\_\_

Date\_\_\_\_\_

**DIRECTIONS:** Rank (1-4) according to your preference with "1" assigned to your top choice. Please consider the following when making your preference selection.

Each student will attend Christus Ochsner St. Patrick Hospital, Christus Ochsner Lake Area Hospital, Lake Charles Memorial Hospital, and/or West Calcasieu-Cameron 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 one CS for two consecutive semesters.

**Spring Semester Junior year**

\_\_\_\_\_ Christus-Ochsner St. Patrick Hospital  
 \_\_\_\_\_ Christus-Ochsner Lake Area Hospital  
 \_\_\_\_\_ Lake Charles Memorial Hospital  
 \_\_\_\_\_ Ochsner American Legion Hospital-Jennings  
 \_\_\_\_\_ West Calcasieu-Cameron Hospital

**Fall Semester Senior year**

\_\_\_\_\_ Christus-Ochsner St. Patrick Hospital  
 \_\_\_\_\_ Christus-Ochsner Lake Area Hospital  
 \_\_\_\_\_ Lake Charles Memorial Hospital  
 \_\_\_\_\_ Ochsner American Legion Hospital-Jennings  
 \_\_\_\_\_ West Calcasieu-Cameron Hospital

**Summer Session Senior year**

\_\_\_\_\_ Christus-Ochsner St. Patrick Hospital  
 \_\_\_\_\_ Christus-Ochsner Lake Area Hospital  
 \_\_\_\_\_ Lake Charles Memorial Hospital  
 \_\_\_\_\_ Ochsner American Legion Hospital-Jennings  
 \_\_\_\_\_ West Calcasieu-Cameron Hospital

**Spring Semester Senior year**

\_\_\_\_\_ Christus-Ochsner St. Patrick Hospital  
 \_\_\_\_\_ Christus-Ochsner Lake Area Hospital  
 \_\_\_\_\_ Lake Charles Memorial Hospital  
 \_\_\_\_\_ Ochsner American Legion Hospital-Jennings  
 \_\_\_\_\_ West Calcasieu-Cameron Hospital

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

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**Form F-51 (student will generate form through e-value, learning modules)**  
**McNeese State University**  
**RADIOLOGIC SCIENCES PROGRAM**

**MRI Safety Screening Form (This form must be completed while enrolled in RADS 101, and annually prior to RADS 350, and RADS 459)**

Magnetic Resonance (MR) is a medical imaging system in the radiology department that uses magnetic fields and waves. This magnetic field could potentially be hazardous to students entering the environment if they have specific metallic, electronic, magnetic, and/or mechanical devices. Because of this, students must be screened to identify any potential hazards of entering the magnetic resonance environment before beginning clinical rotations.

Pregnancy notice: The declared pregnant student who continues to work in and around the MR environment should not remain within the MR scanner room or Zone IV during actual data acquisition or scanning.

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

1. Have you ever had prior surgery or an operation of any kind?	Yes	No
If yes to question 1, please indicated the date and type of surgery: Date _____ Surgery type _____	Yes	No
2. Have you had an injury to the eye involving a metallic object (e.g. metallic slivers or foreign body)? If yes to question 2, please describe _____	Yes	No
3. Have you ever been injured by a metallic object or foreign body (e.g. BB, bullet, shrapnel, etc.)? If yes to question 3, please describe _____	Yes	No
Please indicated if you have had any of the following:	Yes	No
Aneurysm clip(s)	Yes	No
Cardiac Pacemaker	Yes	No
Implanted cardioverter defibrillator (ICD)	Yes	No
Electronic implant or device	Yes	No
Magnetically-activated implant or device	Yes	No
Neurostimulator system	Yes	No
Spinal cord stimulator	Yes	No
Cochlear implant or implanted hearing aid	Yes	No
Insulin or infusion pump	Yes	No
Implanted drug infusion device	Yes	No
Any type of prosthesis or implant	Yes	No
Artificial or prosthetic limb	Yes	No
Any metallic fragment or foreign body	Yes	No
Any external or internal metallic object	Yes	No
Hearing aid	Yes	No
Other device:	Yes	No

***If you answered yes to any of the above questions, please alert the Program Director. If you answered yes to any of the above questions, for your safety you, will not be permitted to go near the MRI Department or have a clinical assignment in the MRI Department unless you are cleared by your physician.***

**I attest that the above information is correct to the best of my knowledge. I have read and understand the entire content of this form and have had the opportunity to ask questions regarding the information on this form. Should any of this information change I will inform my Program Director.**

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

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

Student Name (Please Print) \_\_\_\_\_ Student Signature \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_The student has not identified any contraindications to entering MR zone III or IV

\_\_\_\_\_The student has identified contraindications to entering MR zone III or IV. The student has been advised not to progress past MR Zone II, unless screened by an MR level II technologist onsite at each Clinical Setting.

Form information reviewed by \_\_\_\_\_  
 \_\_\_\_\_  
 Print name Signature Title

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

**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 of 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

<b>Student Name</b>	<b>Course</b>	<b>Date of Form Submission</b>
<b>Name of Agency or Event:</b>		
<b>Check</b>	<b>Activities</b>	<b>Proposed objectives/activities</b>
	<b>Direct/Indirect Patient Care</b>	
	<b>Church related activities</b>	
	<b>Health Care Related Walk</b>	
<b>RADS Program Official approval for events not posted for with prior approval:</b>		<b>Date:</b>

***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 Health Professions**  
**Radiologic Sciences Program**

**Rotation Activity Log When assigned to another CS**  
**Student Report Form to Clinical Preceptor at Home CS**

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

**Must be submitted to Clinical Preceptor at home CS on the first day of return. Failure to submit this form F-53 on first day of return to home CS will result in minus 5 pts for each item on Form F-53.**

Student Name:						Home CS:			
Dates of Assignment:						Visiting CS:			
Date	Description			Generated in e-value		Completed in e-value by CP at visiting CS?	<ul style="list-style-type: none"> <li>Students must keep this paper in their possession</li> <li>Graded tasks must be initialed by an preceptor</li> <li>Please log remedial actions (F12) when applicable</li> </ul>	Preceptor initials	
	Indicated if simulated by an *	comp	prof						
ex: 10/15/18	Sternum *	X			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>							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:		

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

***Urgent Care Center Evaluation*****(Vital signs/IM injection)*****To be completed at the end of the Urgent Care Rotation*****Score**

<b>Student Name (Print Name)</b>	<b>Date</b>	
<b>CS</b>		
Objective: The student will monitor and record the patient's vital signs: 1. pulse 2. temperature 3. respiration 4. blood pressure 5. Oxygen Saturation with a pulse oximeter		
<b>Pulse</b>	<b>Yes</b>	<b>No</b>
a. Measure the patient's pulse rate at the radial artery near the wrist for 60 seconds, or use the facility's instrument for recording pulse rate		
b. Record the patient's pulse rate per minute.		
<b>Temperature</b>	<b>Yes</b>	<b>No</b>
a. Place the oral thermometer under the patient's tongue, or use the facility's instrument for recording patient temperature.		
b. Read the oral temperature and record the reading.		
<b>Respiration</b>	<b>Yes</b>	<b>No</b>
a. Measure the patient's respiration by observing the patient's chest or abdomen for 60 seconds, or use the facility's instrument for recording the patient's respiration.		
b. Record the number of respirations per minute.		
<b>Blood Pressure</b>	<b>Yes</b>	<b>No</b>
a. Place the cuff of the sphygmomanometer on the patient's upper arm midway between elbow and shoulder, and inflate the cuff.		
b. Record the systolic and diastolic pressures.		
<b>Pulse Oximeter</b>	<b>Yes</b>	<b>No</b>
a. Correct placement of the oximeter on the patient		
b. Record the patient's blood oxygen saturation level		
<b>IM injection</b>	<b>Yes</b>	<b>No</b>
a. Identify the injection site (deltoid, gluteal)		
b. Prepare the site using aseptic technique		
c. Inserts the needle correctly with a quick, smooth motion		
d. Administer the medication		
<b>Evaluator (Print Name)</b>		
<b>Evaluator Signature</b>	<b>Date</b>	
<b>Student Signature</b>	<b>Date</b>	

# APPENDIX I

## McNeese State University Department of Health Professions Radiologic Sciences Program

### MODULE I (must be performed on patient)

Examination/Procedures ARRT Clinical Competency Requirements Mandatory Procedures	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, Wheelchair/Stretcher	220		AP
Clavicle	220		AP or PA, AP or PA axial
C-ARM PROCEDURES (Surgical requiring manipulation around a sterile field)	320		Can be done after 1 <sup>st</sup> Surgery rotation
C-ARM PROCEDURE (requiring the C- arm be moved for more than one projection)	320		Can be done after 1 <sup>st</sup> Surgery rotation
C-Spine	321	√	AP AXIAL, AP Open mouth, Lateral, Swimmer's (if necessary)
Elbow	220	√	AP, Lateral
Femur	320		AP, Lateral
Finger Or Thumb	220		PA, Oblique, Lateral
Foot	320	√	AP AXIAL, Oblique (internal ) Lateral
Forearm	220		AP, Lateral
Geriatric Chest	220		As requested
Geriatric upper or lower extremity	220/320		As requested
Hand	220	√	PA, Oblique (external), Lateral
Hip	320		AP, Lateral
Hip (Cross Table – Horizontal Beam)*	320	√	
Humerus	220		AP, Lateral
Knee	320		AP AXIAL, Lateral
L-Spine	321	√	AP, Lateral, and Lateral spot L -S
Mobile Abdomen	220		AP (supine or upright)
Mobile Chest	220		AP
Mobile lower or upper extremity	220 upper/320 lower		Two view minimum (Lower - Femur to Toes) (Upper – humerus to fingers)
Pediatric Chest, Age 6 Or Younger	220/230		PA or AP and Lateral
Pelvis	320	√	AP
Ribs	321	√	AP or PA, Oblique (uppers and lowers on all projections when appropriate)
Shoulder	220	√	CS Routine
Spine (Cross Table -Horizontal beam)*	321		
T-Spine	321	√	AP, Lateral, Swimmer's (if necessary)
Tibia/Fibula	320	√	AP, Lateral
Trauma^ Lower Extremity	320		Two view minimum (Femur to Toes)
Trauma^ Shoulder or Humerus*	220	√	FOR EXAMPLE: Y- VIEW OR Transthoracic Lateral
Trauma^ Upper Extremity	220		Two view minimum (Upper – humerus to fingers)
Wrist	220		PA, Oblique (lateral rotation), Lateral
^Trauma requires modifications may include variations in positioning due to injury with monitoring of the patient's condition			
*two of the procedures marked with asterisk may be simulated			

**MCNEESE STATE UNIVERSITY**  
**Department of Health Professions**  
**RADIOLOGIC SCIENCES PROGRAM**

***CLINICAL COMPETENCY SYSTEM***

**MODULE II** (Can simulate up to 8 examinations/Procedures)

<b>Examination/Procedures</b> ARRT Clinical Competences Requirements, Elective procedure	<b>RADS course in which covered</b>	<b>(√) requires III and IV on F-10</b>	<b>Projection/Position/Method Requirements</b>
<b>Calcaneus</b>	<b>320</b>	√	<b>Axial, lateral</b>
<b>Contrast Enema (Single Or Double Contrast)</b>	<b>320</b>	√	<b>AP, AP axial, Lateral, Post Evac (AP or PA)</b>
<b>Decubitus Abdomen</b>	<b>220</b>		<b>AP or PA</b>
<b>Decubitus Chest</b>	<b>220</b>		<b>AP or PA</b>
<b>Esophagus</b>	<b>320</b>		<b>1 projection</b>
<b>Facial Bones</b>	<b>321</b>	√	<b>PA or AP, Waters, Lateral</b>
<b>Nasal Bones</b>	<b>321</b>		<b>Waters, Both laterals</b>
<b>Patella</b>	<b>320</b>		<b>Tangential</b>
<b>Pediatric Abdomen, Age 6 or Younger</b>	<b>230/220</b>		<b>AP</b>
<b>Pediatric Lower or Upper Extremity-Age 6 Or Younger</b>	<b>230/220 320/lower</b>		<b>Two view minimum (Lower - Femur to Toes) (Upper – humerus to fingers)</b>
<b>Pediatric Mobile Study, Age 6 or Younger</b>	<b>230</b>		<b>CS Routine</b>
<b>Sacrum and /or Coccyx</b>	<b>321</b>		<b>AP Axial, Lateral of sacrum and/or coccyx (as ordered)</b>
<b>Sinuses</b>	<b>321</b>		<b>Erect Waters, PA or PA Caldwell, Lateral</b>
<b>Toes</b>	<b>320</b>		<b>AP Axial, Medial oblique, lateral</b>
<b>Upper GI</b>	<b>320</b>	√	<b>RAO, right lateral, LPO, PA or AP</b>
^ Trauma requires modifications may include variations in positioning due to injury with monitoring of the patient's condition			

**MCNEESE STATE UNIVERSITY**  
**Department of Health Professions**  
**RADIOLOGIC SCIENCES PROGRAM**

***CLINICAL COMPETENCY SYSTEM***

**MODULE III** (Any examinations/procedures other than Computed Tomography may be simulated)

<b>Examination/Procedures</b> MSU Clinical Competences Requirements	<b>RADS</b> <b>course in</b> <b>which</b> <b>covered</b>	<b>(√)</b> <b>requires</b> <b>III and IV</b> <b>on F-10</b>	<b>Projection/Position/Method Requirements</b>
<b>A-C Joints</b>	<b>220</b>		<b>AP erect with and without weights</b>
<b>Arthrography</b>	<b>320</b>		
<b>Computed Tomography+</b>	<b>342</b>		<b>See form F-15</b>
<b>Cystogram/Cystourethrogram</b>	<b>320</b>		
<b>IVU</b>	<b>320</b>	√	<b>Must include but not limited to AP or PA, post void (scout not evaluated), if performed in surgery will be CS Routine</b>
<b>Mandible</b>	<b>321</b>		<b>AP or PA, Towne, Both Axiolateral obliques</b>
<b>Myelography</b>	<b>321</b>		<b>All projections as requested by the physician</b>
<b>Sacro-Iliac Joints</b>	<b>320</b>		<b>AP Axial or PA Axial, Both Obliques</b>
<b>Scapula</b>	<b>220</b>	√	<b>AP, Lateral</b>
<b>Skull</b>	<b>320</b>	√	<b>AP or PA, Right or Left lateral, Towne</b>
<b>Small Bowel</b>	<b>320</b>	√	<b>AP or PA projection(s) (scout does not count)</b>
<b>Sternum</b>	<b>321</b>		
<b>Upper Airway – (STN)</b>	<b>321</b>		<b>Lateral</b>
<b>Zygomatic Arches</b>	<b>321</b>		
^ Trauma requires modifications may include variations in positioning due to injury with monitoring of the patient's condition			
+ Computed Tomography Cannot be simulated			

<b>Clinical Competency System Merit Examination/Procedures May do up to six per semester</b>	<b>RADS course in which covered</b>	<b>Additional Comments for clarification</b>
<b>Bone Age</b>	<b>321</b>	<b>For bone maturation in young children, PA projection of both wrists or CS routine</b>
<b>Cleaves or Modified Cleaves</b>	<b>320</b>	
<b>C-Spine Flex and Extension</b>	<b>321</b>	
<b>Dialysis Survey</b>	<b>321</b>	<b>AP Pelvis, PA hand, AP Clavicle, Lateral Skull, Lateral Spine, AP Knees or CS routine</b>
<b>Elbow (Coyle Method)</b>	<b>220</b>	
<b>Elbow (oblique either one)</b>	<b>220</b>	
<b>Intercondylar Fossa</b>	<b>320</b>	
<b>IVU Obliques</b>	<b>320</b>	
<b>Knee (Oblique Either One)</b>	<b>320</b>	
<b>Knees – Standing</b>	<b>320</b>	
<b>L- Spine (Bending Views Ap)</b>	<b>321</b>	
<b>L- Spine (Flex &amp; Ext. Laterals)</b>	<b>321</b>	
<b>Lateral Abdomen</b>	<b>220</b>	
<b>Lordotic Chest</b>	<b>220</b>	
<b>Metastatic Bone Survey</b>	<b>321</b>	<b>Sometimes called <i>Skeletal Survey</i>, PA chest, AP &amp; lateral of skull and spine, AP of Pelvis or CS routine</b>
<b>Oblique Chest</b>	<b>220</b>	
<b>Oblique C-Spine</b>	<b>321</b>	
<b>Oblique L-Spine</b>	<b>321</b>	
<b>OR Cholangiogram</b>	<b>320</b>	<b>All projections requested by the physician</b>
<b>Panoramic Tomography</b>	<b>321</b>	
<b>Retrograde Pyelogram</b>	<b>320</b>	<b>All projections requested by the physician</b>
<b>Scaphoid</b>	<b>220</b>	<b>Stecher or ulnar deviation</b>
<b>Scoliosis Series</b>	<b>321</b>	
<b>Sinuses (Open Mouth)</b>	<b>321</b>	
<b>Sinuses (SMV)</b>	<b>321</b>	
<b>T-Tube Cholangiogram</b>	<b>320</b>	<b>All projections requested by the physician</b>
<b>Venogram</b>	<b>370</b>	

## 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 equipment malfunctions the student should not be penalized and given an opportunity to make necessary corrections if applicable.
5. 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)
6. Student must generate the proper form in e-value prior to being evaluated (when possible). Next give the evaluator the paper form or the tablet prior to beginning the procedure with the name, patient # (including accession # if applicable), date CS, course/semester and room # or results in an *automatic failure* of evaluation.
7. 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:**

<b>I. ASSESSMENT OF REQUISITION</b>
A. Identify procedure to be performed*
B. Identify mode of transportation to clinical area*
C. Identify the patient's name and age*
<b>II. A. PHYSICAL FACILITY READINESS *</b>
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, if incorrect = (0)
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)
<b>II. B. PATIENT CARE</b>
1. Verify patient's ID. <b>(If not verified, 0).</b>
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 <b>(0)</b>
b. Improper terminology <b>(-1)</b> 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, <b>(0)</b> Must be documented on back of F-10 or F-11, and recorded in e-value.
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 <b>(0)</b>
b. Not labeling specimens <b>(0)</b>
c. Not utilizing aseptic and/or isolation techniques <b>(0)</b>
d. Other point deductions depend 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
<b>II. C. RADIOGRAPHIC PROCEDURES</b>
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 <b>(0)</b> , (if bilateral projections on one IR both sides must be marked, If not <b>(0)</b> )
b.	Marker must be visualized on masked image send to PACS, if not <b>(0)</b>
c.	Omitting of marker <b>(0)</b> incorrectly marked - i.e.: Right side with Left marker <b>(0)</b> .
d.	If marker is not visualized <b>(0)</b> , if can distinguish as only to be an R or L but no initials visible <b>(-1)</b> .
e.	If marker is in anatomy of interest <b>(0)</b> .
f.	If wrong ID is used, or if no patient ID <b>(0)</b> .
g.	Placement of marker on IR; <b>for example, but not limited to:</b> marking lateral projections anteriorly if not = <b>-1</b> (except for lateral humerus can be either, marking); obliques side down, except for SI joints, orbits, and ribs, if not = <b>-1</b> ; marking decubitus images of the chest and ABD side up, if not = <b>-1</b> ,
4.	Set incorrect source image-receptor distance; 1"-2" <b>(-1)</b> ; over 2" <b>(0)</b>
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 IR.*
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. <b>(-1)</b>
10.	If do not adjust patient positioning to accommodate the patient as appropriate for unusual cases*
<b>II. D. RADIATION PROTECTION</b>	
1.	Protect patient and personnel from unnecessary radiation. *
2.	Utilize gonadal shielding. *If they do not shield patient/ personnel <b>(0)</b> .
3.	Demonstrate adequate collimation of the part.
a.	If over collimated resulting in repeated radiograph <b>(0)</b> .
b.	If collimation is not adequate*
4.	Applied gonadal shielding correctly for fluoroscopy (on table top, unless remote control room), if not <b>(0)</b> 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 <b>(0)</b>
<b>II. E. EXPOSURE FACTORS</b>	
1.	Select the proper mAs and kVp for the procedure.
a.	If the above procedure not done <b>(0)</b> .
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 IR exposure but radiograph is diagnostic <b>(-1, -2)</b> -- dependent on severity.
3.	If the student does not measure the patient <b>(0)</b> .
4.	Automatic Exposure Control not permitted until RADS 461, except for barium studies. If not selected properly <b>(0)</b> .
5.	Excessive quantum mottle <b>(0)</b> . <b>(These numbers are subject change as equipment changes)</b> WCCH-E-value range 1700-2300, if acceptable but out of range <b>(-1)</b> DR range 100 – 300; 100 – 450 Chest COSP -S-value range 100-300, if acceptable but out of range <b>(-1)</b> LCMH the S# is dependent on body part, if acceptable but out of range <b>(-1)</b> COLA E-value range 1500-1800 for RM 1, S# for RM 2 is 100 – 300, except chest 100 – 400 if acceptable but out of range <b>(-1)</b> LCMH 150 – 500 mobile digital machines, if acceptable but out of range <b>(-1)</b> CC – E-value General 225 – 900 (400), Extremities 500 – 2000 (1000), <b>(target value indicated)</b> , if out of range <b>(-1)</b> PC – E-value 200 – 400 (for 1 on 1 images)
6.	If exposure factors are not completed at all on Form F-11 = <b>(0)</b> , if partially completed *
<b>III. PRODUCT ANALYSIS For each incorrect response by students (-1).</b>	
<b>A. ANATOMY IDENTIFICATION</b>	
1.	IDENTIFY all anatomy on the radiograph.
2.	The preceptor should point out any anatomy not identified by the student and ask them to identify it.
3.	The Preceptor 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.
<b>III B. POSITIONING ANALYSIS</b>	
1.	Review radiographic image on monitor
2.	Ask the student to identify each radiograph according to <u>position, projection, or view.</u>
3.	Select each radiograph and have the student fully describe how they positioned the patient.
<b>AREAS THE STUDENT SHOULD COVER</b>	
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 IR/part.
4. Ask the student to evaluate the radiograph to establish evaluation criteria and to identify any corrective measures that could be used.
<b>III C. EXPOSURE FACTOR ANALYSIS</b>
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. <b>Use this area as an opportunity for discussion and learning.</b>
2. What technique did you use? (mAs, kV) JUSTIFY EACH COMPONENT.
3. Define Contrast (Grayscale), Brightness, Spatial Resolution, Penetration, and Distortion. <b>Depends on the student's level. These areas are covered in RADS 230. Use this area for discussion and learning.</b>
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? <b>Depends on student level; taught in RADS 230.</b>
7. Ask the student to give the appropriate technical factors when changing from a grid to non-grid or vice-versa. <b>Depends on student level; taught in RADS 342.</b>
8. Must use proper terminology: If not <b>(-1)</b> (i.e.: overexposure –too much mAs, underexposure-too little mAs, underpenetrated-too little kVp, and over penetrated-too much kVp
<b>IV. TOTAL SKIN DOSE ESTIMATE - Calculate patient skin dose estimate for the radiographic examination</b> <b>Subtract 4” when using a cassette, and subtract 3” when using no cassette</b>
A. If calculated with no mistakes <b>(3)</b> .
B. If calculated within a 10% margin of error <b>(-1)</b> . If calculated and it is over the 10% <b>(0)</b>
C. If correct for each projection but not totaled <b>(-1)</b>
D. If correct but wrong unit of measurement <b>(-2)</b>
E. If measurement obtained incorrectly = <b>(0)</b> (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 <b>(0)</b>
<b>V. PROCEDURE MANAGEMENT*</b>
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 for CR/DR (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 (if not done 0)
<b>* Point deduction depends on severity.</b>
<b>+ Except pediatric patients.</b>
<i>Policy: 1986; Revised: 1994, 1997, 1998, 1999, 2001, 2004, 2005, 2006, 2007,2008, 2009, 2010, 2011, 2012, 2013, 2014, 2015, 2018, 2021, 2024</i>