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A Clinical Instructor Online Training Course for Radiologic Technologists

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A CLINICAL INSTRUCTOR ONLINE TRAINING COURSE FOR RADIOLOGIC TECHNOLOGISTS

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ABSTRACT

A CLINICAL INSTRUCTOR ONLINE TRAINING COURSE

FOR RADIOLOGIC TECHNOLOGISTS

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An online training module was developed for Radiologic Sciences Clinical Instructors at Clinical Education Centers for Yakima Valley Community College. This training module orients new Clinical Instructors to accreditation standards, as well as orients them to student and technologist requirements for the Radiologic Sciences Program.

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Chapter One

Introduction to the Project

Overview

Yakima Valley Community College's Radiologic Sciences Program utilizes nine hospitals and four clinics for training of its student radiologic technologists. Geographically, these hospitals and clinics are located in a 150 mile radius of Yakima.

Accreditation requirements for the Radiologic Sciences Program include having at least one Radiologic Technologist at each educational center who is trained in clinical instruction and who has continuous ongoing communication with the program's Clinical Coordinator. Currently, the means for training and communication are face to face meetings. Individual training requires many hours with difficulty of coordination of schedules, plus many hours spent in travel for face to face meetings.

Current literature supports the effectiveness of online education. Umble, Cervero, Yang and Atkinson (2000) found that traditional classroom instruction was comparable to online education when evaluating improvement of knowledge. Redding and Rotzien (2001) also supported online education as being as effective as traditional classroom learning. Therefore, this project was developed to facilitate training requirements in an online format. In addition to fulfilling training requirements, avenues of communication are included for Clinical Instructors by the means of email and discussion boards.

Purpose

The purpose of this project was to develop an online course utilizing computer technology to provide a means for consistent training for new clinical instructors for Yakima Valley Community College's Radiologic Sciences Program. This project also provides a means of ongoing communication between Clinical Instructors and the Clinical Coordinator.

Scope

This project was limited to Radiologic Technologists who were Clinical Instructors at clinical education centers for Yakima Valley Community College Radiologic Sciences. Only clinical instructors in this position would have access to this WebCT Training Module.

Limitations of Project

The staff of the Radiologic Sciences Program at Yakima Valley Community completes a yearly revision of documents used in clinical instruction. This Clinical Instructor Training Module contains many of those forms, and others which are used for reporting data. The author understands that this project is not static, and there will be frequent review and updates of all forms.

Definition of Terms

> *Asynchronous*. A learning mode in which the time of actual instruction and the reception of instruction are different. The sender and receiver do not communicate at the same time. (Mount Wachusett Community College, 2002)

Discussion board. A place on WebCT where documents or comments may be posted for viewing. (Mount Wachusett Community College, 2002)

e-mail. Electronic mail whereby messages are automatically passed from one computer user to another through a computer network. (Mount Wachusett Community College, 2002)

Hyperlink. An electronic link from one web document or site to another. (Merriam-Webster,2003)

Listserv. A computer program that automatically distributes to names on a mailing list. (TechTarget Network, 2003)

Radiography. The process of making radiographs. (Merriam-Webster, 2003)

Radiology. The branch of medicine concerned with ionizing radiation or radioactive material in the diagnosis and treatment of disease. (Merriam-Webster, 2003)

Threaded discussion. A form of asynchronous discussion on the Web whereby one user posts a message or document, and other users see it and respond to it in their own time. (Mount Wachusett Community College, 2002)

WebCT. A course management software program for Web classes. (Mount Wachusett Community College, 2002)

Chapter Two

Review of Literature

Overview

A review of literature was done to investigate the efficacy of distance education delivery methods, specifically online delivery, of didactic content. Also reviewed were advantages and disadvantages of online education, copyright concerns, technology requirements, instructor training and effective classroom environments.

Comparison of online and classroom education

Distance education, with delivery of information through the Internet or satellite broadcast, is becoming increasingly common in colleges and businesses throughout the world. Several studies have compared outcomes of traditional classroom education and distance education.

In one study by Umble, Cervero, Yang and Atkinson (2000) the researchers compared traditional classroom and distance education. This study evaluated the effects of an immunization continuing education course. Participants in both the classroom and distance education settings were evaluated immediately upon completion of the education, and again three months post education. The study found that both classroom and distance education classes showed a significant improvement of knowledge immediately after the session ended. At the three-month follow up, there was no significant difference between classroom and distance education evaluation. The

researcher concluded that the findings support the use of distance learning for continuing education.

In a study of online learning versus classroom learning, Redding and Rotzien (2001) compared outcomes of three similar classroom groups and an online group. The classroom instruction had been in place for 12 years, and "instructional design and course delivery in the classroom has matured over an extended period of time" (p. 9). The online course was less than a year old, and not as mature. However, the researchers reported ending course grade point averages for students were 78.35%, 81.62%, and 82.80% for each of the classroom groups, and the online group was 92.37% (p. 7). Although the study was limited by small sample size, the researchers concluded that the "online instruction was more effective than classroom instruction" (p. 10).

One researcher (Huff, 2000) compared traditional classroom instruction and interactive television with master's of social work students evaluating their critical thinking skills. With the interactive television students, the instructor utilized listserv to provide students with outlines of the weeks' topics. With both delivery systems, the instructor used teaching strategies to increase the level of critical thinking. The researcher found that "both groups significantly increased their critical thinking skills with no significant differences found between the two groups. Conclusion: Distance education using interactive television was found to be equivalent to face-to-face instruction with regard to acquisition of critical thinking skills" (p. 410).

The research study by Clark and Jones (2001) compared traditional and online formats in a public speaking course. The online course required five classroom meetings to complete course objectives, but all other material and discussion were delivered online. This study found by evaluating students in both methods of educational delivery, that the "outcomes in the two types of sections were nearly identical for those students who completed the course" (p.118). The researchers noted: "the attrition rate was considerably higher in the online sections than in the traditional ones, with a mean attrition rate of 44% in the online sections compared to 17% in the traditional ones" (p. 115).

Advantages of online education

Advantages of online education are many. Several articles (Bork, 2001; Redding and Rotzien, 2001; Sawyer, 2000; Shave, 1999) discussed student convenience. No longer do the students need to leave their homes to take a college course or continuing education: no fighting for parking places, expenses of traveling to a classroom, or finding a babysitter for the kids. For most courses surveyed in the above studies, the majority of the correspondence and school work could be done at anytime of the day or night, making it convenient for the student working evenings or weekends, as well as those working in the daytime. Also enhanced were convenience to those who are disabled, alleviating the time and trouble of physically getting from their home to a classroom, which may require several elevators to get there.

Also noted were "students who may not utter a word in a face to face classroom find that there is more room for expression in the virtual classroom"

(Sawyer, 2000, p. 7). The student who may be too shy or simply not think as quickly as other classmates will be able to participate in chat room discussions or post thoughts on bulletin boards. Shave (1999) listed some advantages that include "increased group synergy via chat rooms and group discussions" (p. 4).

Disadvantages to online education

Online education is not for everyone. Though some students work well in an online environment, one author (Billings, 2000) noted that "students in Web courses feel isolated" and that some "students in Web courses feel disconnected with the faculty" (p. 63).

Another article (Shave, 1999) discussed that computer literacy is underestimated by many students as a prerequisite for an online course, and yet is necessary for success. Students need an opportunity to acquire skills such as proficiency with tools such as search engines, conducting online searches, using bibliographic databases and accessing large databases for research, as well as using email, and accessing the online sites. Also, the student must have specific hardware required to support the online course.

In a study by Clark and Jones (2001), the researchers investigated successes of online learning and found that student comfort level and expertise with technology had a direct correlation with not only course completion, but course grade. Many students dropped the offered online course prior to completion due to the complexity of necessary computer knowledge, and in several cases, required computer hardware. Noted by the authors when comparing traditional classroom delivery and online formats for the same class

content "attrition rate was considerably higher in the online sections than in the traditional ones, with a mean attrition rate of 44% in the online sections compared to 17% in the traditional ones" (p. 115).

Instructor qualifications for online teaching

Most educators have had some instruction in classroom teaching strategies. However, these same educators may be ill prepared to teach in the online classroom. As described in a study by Mielke (1999):

There are "five critical elements for successful teaching at a distance:

1. Instructor enthusiasm. This requires animation and comfort in front of a camera, or with the technology utilized. Faculty support and interest are critical to the success of distance learning endeavors.
2. Organization. Teaching materials must be prepared in advance; timing, variation, and smooth transitions must be planned. Instructors should allocate from 3 to 5 hours of preparation for each hour of distance instruction. Great attention to detail is required long before the actual classroom activity occurs.
3. Strong commitment to student interaction. Whatever the modality used to teach at a distance, the instructor must encourage and facilitate ongoing communication between the students and the instructor.
4. Familiarity with the technology used in the class format. Faculty development is important before beginning any distance activities, and instructors should be trained in video use, computer use, or other forms of instructional technology used.

5. Critical support personnel. Production staff, graphic designers, and technical staff members will help the instructional setting produce successful teaching at a distance." (p.2)

Educators must develop new philosophies regarding the learning environment to establish one that is learner-centered, and not teacher centered (Billings, 2000).

Keeping it Legal: Copyright considerations

In the traditional classroom, educators have been given latitude to utilize copyrighted material for educational purposes by the fair use doctrine. The Web classroom is subject to the same rules, but with the availability of media, the potential for copyright infringement is greater. There are two issues at hand: staying legal with other's information, and protecting your students' and the instructor's information.

In a book by Horton (2000), the author discussed copyright considerations for Web based classrooms. Although the fair use doctrine still applies, it does pose challenges. Typically, material displayed for classroom use is shown once or twice, then put away for the next class. If this material will remain on your web site for longer than a few days, permission must be obtained from the originator (Web Teaching Articles: Privacy. . ., 2002).

The amount of material displayed must be no more than 10% of the originator's work, and the work must include credit and copyright information on all material. It is easy with computer technology to cut and paste the entire work for your students to view. Permission must be obtained to utilize more than 10% of the material in your web media. An alternative to obtaining permission is to link

to the author's material via another web site (Web Teaching Articles: Privacy. . ., 2002).

Horton (2000) discussed several options to keep the material created by either the instructor or the students of the Web class protected. First you must consider who will have access to your class. Restrict access to students taking the class, and have their assignments coded so only the instructor has access or group projects will be viewed by only those involved. A bonus to restriction of access is students may feel safer sharing and exchanging ideas if they know only classmates and instructor have access to their thoughts and discussion of issues in the class.

Protecting the material the instructor and students have created for the Web site may be a consideration if your site has original works, and is more comprehensive than a syllabus. For a small fee, you can protect the copyright of the Web site. This may be accomplished by Registration of the copyright and should be done within three months for maximum protection (Horton, 2002).

Building an effective online course

The author encountered severa; articles that included ideas to build an effective online course. Those ideas include changing technology, student/instructor and student/student communication, how to develop online materials and how to design an effective online course.

Technology. Rapid changes in computer technology have given online instruction a continual learning platform. In several articles (Mazoue, 1999; Wegner, Holloway & Wegner, 1999), the authors mention just some of the

delivery methods for online classes: Web pages, hyperlinks, commercial databases, listservs, e-mail, and electronic discussion boards. Though many students have gone through recent educational facilities where they have learned to utilize this new technology, it has been difficult for all students to come to online classes with similar expertise. The students' comfort level with computers and technology has a direct effect on their success with an online course.

Sawyer (2000) and O'Hanlon (2001) offered several suggestions to assist in student success with technology required for online instruction. First, hold an orientation class where required computer hardware and computer skills are outlined for the students. Second, identify computer literate students that may be willing to help other classmates as they progress through technology for the course material. Through class chat rooms during the course, students could ask for and offer help regarding computer skills with classmates. Third, the instructor must be literate enough with technology to be available and assist students in a timely manner with their technology questions, or, if funds allow, have a teaching assistant assigned to the course whose job it is to answer technology questions. The instructor must have course material organized in such a manner to help eliminate student frustration when navigating through the computer (O'Hanlon,p.18).

O'Hanlon (2001) offered further suggestions regarding student preparation for successful online instruction. While discussing the growing number of online courses being offered across the United States, the researcher stated that some colleges are requiring a computer literacy course prior to taking any online

course. The student would receive instruction on basic computer hardware, software and functions such as word processing and spread sheets, as well as accessing email, search engines, navigating web pages, and how to get help when you need it. The author found that prior computer experience increased success in online courses.

Student/instructor and student/student communication. Student interactions have the potential to change in the virtual classroom. No longer are there the familiar face to face discussions, which are common in traditional classrooms. Students and instructors must develop new ways to communicate.

Strategies to develop student/student interactions in the online classroom have been investigated by Sawyer (2000). The author identified several methods to increase student contact. Some strategies listed were conducting a face to face meeting at the start of the course, at midterm and periodically throughout the course for group presentations. Though this would help with communication, it may be a deterrent to some students taking the course, because now the convenience of not having to attend class is reduced. Another strategy listed was having all students post a digital photograph of themselves along with a short biography on the web site. This would help students and instructor recognize those in the class, if they happened to see them on campus. It would help the instructor put face and name together. The short bio would also assist the students with getting to know each other, which may help with discussions in the virtual classroom. Students could also list their computer literacy on the web site,

to connect those who may need extra help with those who can offer help with their computer expertise.

Kirby (1999) also identified several strategies to build interactions with online courses. She discussed the need for feedback from students as well as ongoing discussions regarding course content. Utilizing the technology platform in which the course is presented can provide a safe place where students may discuss issues and assignments among themselves and with the instructor, provide support and encouragement to classmates, and assist one another with questions and problems either with course content or technology. These interactions are accomplished with the class bulletin board, emails, and chat rooms.

Kirby (1999) presented also discussed student feedback with satisfaction or frustration with online interactions. Student feedback regarding interactions reported complaints of time consumption to keep up on bulletin board postings and involvement with chat rooms that may get off track from the original intent. While enriching to some students, others identified frustration with sifting through discussion items pertaining to course material. The researcher identified success with presenting two bulletin board formats for the course: one that would request responses and feedback that was tailored to contain on track, brief responses; another bulletin board would be present for those philosophical discussions that may enrich topic information, but carry beyond requirements. Students would be required to participate with the brief bulletin board, but have the option, if they desired, to participate in the longer, time-consuming discussions. This strategy

was helpful in overall course satisfaction. The author also found that by using chat technology, students reported increased comfort with that technology.

Instructor interaction with students has been evaluated several ways. Kirby (1999) and Wegner (1999) discussed the need for timely responses from the instructor of the online course as a requirement for student satisfaction. Email should be responded to within 24 hours, and assignments turned in via email should be graded within one week. It was also helpful if instructors took part in chat room discussions to assist in participation by all students, and to keep the topic on track. As stated by Mazoue (1999), instructors should "provide timely, context specific feedback and motivational support" (p. 108) to best achieve student satisfaction in an online classroom.

Developing online materials. Successful online education requires much preparation and commitment by faculty and their supporting institution. Brahler, Peterson and Johnson (1999), discussed some approaches for successful development and delivery of successful online courses. The authors stated the need for adequate resources to produce effective online learning materials. They stated the cost to develop multimedia rich learning materials increases with the complexity of course content and learner outcomes. They listed "time to develop material as 30-200 hours for courses with basic complexity, 75-250 hours for courses with intermediate complexity and courses with high complexity requiring as much as 200-600 hours to develop" (p. 44). Though development time decreases as developer experience increases, there is the need for faculty support from the administration not only in time, but technology support.

Administration may find it difficult to provide faculty release time to develop computer-assisted instruction. One approach for support to faculty is to provide inservices and classes for them to learn how to develop an effective online course. This would develop standard training of proven methods for success, and help eliminate the individual trial and error methods, and decrease instructional development time and conversion of standard coursework to the online method of delivery (Mazoue, 1999).

Employers must support the faculty developing online instruction by providing adequate computer training. Technology is continually changing and faculty must achieve computer literacy for online delivery. Administrators must support faculty by providing the computer equipment, hardware and software, to deliver virtual teaching, as well as the computer expertise to deliver the material the most effective way (Mazoue, 1999).

And most important, the supporting institution must provide adequate release time for faculty to develop effective online instruction. The time commitment is significant when developing a new course, and administration must acknowledge its role in supporting faculty for successful development of online courses.

As summarized in the study by Mazoue (1999):

> Institutions should provide:
>
> - a network learning infrastructure;
> - institutional support for IT-based instruction;
> - adequate access to equipment and support personnel;

- curricular support and basic computer literacy skills(p. 105).

Designing an effective online course. Many artocles have been written aboutonline instruction and what makes it successful. A report by Leh and Som (1999) compared the instructional format of the standard classroom and the online classroom. A standard classroom consists of "preparation, presentation, application, evaluation and summary" (p. 1). Presentation of online instruction requires little modification to this process, only modification of the delivery method.

Web Teaching Articles: Preparing. . . (2002) presented considerations for methods of content delivery of web courses. This report suggested the main points of course material be summarized first, because most readers will scan computer information and can pick out information from lists better than paragraphs. Also, most students scan information first, so important points should be highlighted and appropriate headings used. Information should be concise. Students will print lengthy documents to read, so information that is comprehensive and contains much detail should be in a format that is easy to print. The article also recommended that, rather than including all information directly on the web page; appropriate links should be utilized to supplement information. Care should be taken by the instructor to ensure that links contain valuable information, and can be used to support and supplement the presentation.

In literature by Brown (2000), program design for online learning is listed as an essential component for student success. It is important that web based

instruction material provide a detailed timeline to help students stay on task. Also, web based instruction should obtain information from students throughout the course to evaluate course workload. It is also important to offer a variety of presentation forms for material to reach and motivate all types of students and learning styles.

Web Teaching Articles: Taking. . . (2002) discussed the importance of communication both instructor to class, and classmate to classmate. This may be accomplished through media such as a chat room where synchronous discussion may take place in real time regarding an issue. Care must be taken by the mediator to ensure that topics are kept on task, and all are given an opportunity to participate.

Discussion may also take place with a bulletin board in an asynchronous mode, where students post their thoughts and responses to material or an issue to be read by classmates or instructor at a later time. This is an effective method for an instructor to ensure all students are taking part in discussion. It also works well for students who need time to answer questions after some thought, as well as assisting the student who wishes to restrict the time demands of the internet course, because it enables them to read the discussion at their convenience, and respond with less time restrictions (Web Teaching Articles: Taking. . ., 2002).

Summary

Online education has been shown to be as effective as traditional classroom education. However, due to the advantages and disadvantages specific to online education, it isn't for everyone. The instructor and students must possess computer literacy skills for success. Communication between

instructor and students must be re-evaluated, and technology must be utilized to achieve the most successful environment for interactions necessary for the course. The instructor must be committed to exploring and using new media for transmission of information as well as innovation in teaching. Issues of privacy and access to the Web site must be addressed throughout the course. The research by Mazoue (1999) summarized that online learning environments are informative, accessible, navigable, interactive and collaborative.

Chapter Three

Procedures

Overview

The Radiologic Sciences Program at Yakima Valley Community College is required by accreditation to have onsite Clinical Instructors at all clinical education centers. Accreditation also requires initial training of all clinical instructors, ongoing training for updates, and open communication with the Clinical Coordinator of the program. Yakima Valley Community College's Radiologic Sciences Program utilizes 11 clinical education centers within a 150 mile radius of the college, making it a very cumbersome and time consuming project to keep trained and updated clinical instructors at all sites, as well as maintain communication with them. Bork (2001) states that an online format for instruction has the advantage of overcoming time and travel concerns.

The author recognized the need for a training module that could be constantly updated, accessed at any time by clinical instructors and clinical coordinator, and provide a means for open communication between all sites. Mielke (1999) supports online training as a means for providing communication through email or discussion boards.

Methodologies

Review of literature. A review of literature was completed investigating the effectiveness of online courses when compared to traditional classroom teaching methods. Also studied were advantages and disadvantages of online education,

copyright concerns, technology requirements, instructor training and effective classroom environments. The author concluded that online delivery for a Clinical Instructor Training Module would be an appropriate for the needs of Yakima Valley's Radiologic Science's Program.

Course development. Yakima Valley Community College uses WebCT as its shell for online courses. There were several training courses offered by WebCT the author attended to learn how to design, develop and manipulate information for the intended course. There were training modules from these courses with step by step instructions and tips for using WebCT which were very helpful. Instructors currently using WebCT for online courses were contacted and consulted for tips and pitfalls from their experience. Yakima Valley Community College also has a computer technician with experience with WebCT and the format necessary, so when the author had difficulty getting a particular web page to look the way it should, there was a technician available to answer questions. The author enrolled in two college courses that utilized online instruction in part, and so was able to experience an online class from the student perspective.

Course materials. Radiologic Sciences accreditation requirements dictated some of the material that must be in the training course. The author was able to customize much of the material for Yakima Valley Community College Clinical Instructors. Other documents included were selected for its importance in understanding the Radiologic Sciences Program and how it operates.

Utilizing information from the review of literature, the author was interested in designing a module that was easy to read and easy to navigate through. Web Teaching Articles: Preparing. . . (2002) suggested providing main points of information in lists, rather than paragraphs, as students are better able to pick out information in this format. This information was utilized when designing course material.

Module design. In designing the module, the author chose icons for the home page that would summarize the main categories necessary. An outline of necessary information for each icon was drafted. All material for the module had to be converted to Web format (html), then placed under the appropriate icon. The completed training module was previewed by two Clinical Instructors who have been with the Radiologic Sciences Program for five years, and deemed ready to pilot.

Training needs

As supported by the study of Clark and Jones (2001), computer literacy by the user is imperative for success in an online class. All new Clinical Instructors have been queried as to computer experience and an instructional class on how to navigate through and use the online training module will be held for those wanting some extra help.

Future considerations

The author understands that computer technology is rapidly changing, and will continue to keep abreast of changes with that technology which may affect online delivery.

Chapter Four

The Project

Yakima Valley Community College's Radiologic Sciences utilizes 11 clinical education centers for its students' practical training. Each clinical education center must have at least one onsite Clinical Instructor who has been trained by the program's Clinical Coordinator regarding program policies and procedures as well as clinical requirements of students. These requirements are updated annually, so ongoing training and communication is necessary between the Clinical Instructors and the program's Clinical Coordinator. Due to the geographical area included in the program's clinical education centers, the process of training and communication is cumbersome and time consuming process. The literature review completed by the author supports training in an online format as an effective method for instruction. Therefore, this training has been developed into a WebCT online class, which is available only to onsite Clinical Instructors and the Clinical Coordinator. This online class provides the means of training, and also provides methods for ongoing communication.

The Clinical Instructor Training Module is supported by WebCT. Those who access this module must be identified by the Clinical Coordinator and given an access code and password specific for the individual.

The Clinical Instructor Training Module begins with the Training Module Home Page which contains 6 icons, emphasizing the major components of this module. They are training module, calendar, communication, JRCERT documents, student assignments and policies.

The Training Module icon will take the reader through the role and expectations of the clinical instructor. It also includes a job description, and suggested activities with both 1st and 2nd year Radiologic Technology students. It discusses student evaluations with samples included. It also discusses program requirements of attendance tracking, and has a sample time card.

The Calendar icon has important dates for both Clinical Instructors and students, such as when evaluations are due, when the quarter begins and ends, and clinic classes that will take the students out of the hospital setting.

The communication icon provides an email link, a whiteboard for discussion, a discussion board and a chat room for real time meetings.

The JRCERT Documents icon provides written documentation from the accreditation board that impact clinic such as repeat policy, supervision clarified and a sample Curriculum Vitae.

The student assignments has a clinical code of conduct, assignments specific to the academic quarter, as well as posted due dates for student clinical assignments for that quarter.

The Policies icon contains repeat policy and supervision policies again, as well as the Radiologic Sciences Student Policy Manual.

WebCT allows the student to click on an icon to open its contents and is able to print if desired. The student is able to navigate back to the home page to access any other area contained within the course.

The Clinical Coordinator is listed as sole instructor, and is the only person with access to change content of this module. However, the communication icon

can be utilized by all who have access to this module, specifically the clinical instructors.

The author understands that the material contained in the training module is subject to change on an ongoing basis, and will be updating this module frequently. Two Clinical Instructors who have been with the Radiologic Sciences Program for at least 5 years have been asked to preview the training just prior to its completion. They deemed it ready to us. The training module will be presented to 9 new Clinical Instructors in September for utilization. An evaluation will be designed to seek feedback from the Clinical Instructors as to the ease of use, quality and quantity of information, and effectiveness of information contained within this module. With this evaluation, changes will be made as necessary immediately, and then annually, thereafter.

The author also will investigate the potential for Clinical Instructors filling out forms utilizing the templates in this module for submission to the Radiologic Sciences Program's Clinical Coordinator.

Chapter Five

Summary, Conclusions and Recommendations

Summary

The purpose of this project is to provide required training to onsite clinical instructors for Yakima Valley Community's Radiologic Sciences Program. This method of training has been chosen because Online classes for education have shown to be an effective method for instruction (Umble, Cervero, Yang and Atkinson, 2000).

Advantages of online classes include flexibility with time requirements, and elimination of transportation issues, since online classes can be in the convenience of one's home (Bork, 2001). Also, students may increase verbal participation through discussion boards, where in the classroom they may be too shy (Sawyer, 2000).

Disadvantages include required computer skills for instructor and students (Mielke, 1999), as well as eliminating the face to face contact (Billings, 2000). Training to increase instructor computer competence, as well as student orientation to using the web course, can increase success. Maintaining communication is important, and may be facilitated through web chat rooms or asynchronous posting of information, as well as email for classmates and instructor (Mielke, 1999).

Awareness of what can make a potent online class is imperative for maximum effectiveness. The instructor must remain flexible and creative to increase the effectiveness of online learning for his/her students.

Conclusions

Yakima Valley Community College Radiologic Sciences Clinical Instructor Training Module is anticipated be an effective tool for consistent, convenient training. Because of the geographical location of the clinical education centers, and the requirements for continuing communication, it will be extremely convenient to have this training online. It will help facilitate consistent training, and open up communication through WebCT with email and discussion boards. It has the potential to save money in travel and time. It is easily updated, so clinical education centers will have the most current information available. It has been tested by current Clinical Instructors and found complete and ready to use.

Recommendations

The author recommends utilizing online instruction for clinical instructor training, though recognizing its benefits, acknowledging its limitations. Evaluation of this training module will be designed and assessed after three months, with changes and/or updates as suggested. Evaluation of this module will then take place on an annual basis, at the Fall quarter Clinical Instructor Meeting. It is planned that future material be test piloted by current Clinical Instructors and edited for changes as suggested.

The author also would investigate future training courses or classes delivered in an online format. There may be potential for curriculum expansion without limitations presented by geography.

References

Billings, D. M. (2000). A Framework for assessing outcomes and practices in web-based courses in nursing. *Journal of Nursing Education*, *39*(2), 60-69.

Bork, A. (2001). What is needed for effective learning on the internet? [Electronic version]. *Educational Technology and Society 4*(3), 139-144.

Brahler, C. J., Peterson, N. S., Johnson, E. C. (1999). Developing on-line l earning materials for higher education: an overview of current issues [Electronic version]. *Educational Technology & Society* 2(2), 42-54.

Brown, B. (2000). *Web-based training.* Columbus, OH: ERIC Clearinghouse on Adult, Career, and Vocational Education. (ERIC Document Reproduction Service No. ED445234)

Clark, R. A. & Jones, D. (2001). A comparison of traditional and online formats in a public speaking course. *Communication Education 50*(2), 109-124.

Horton, S. (2000*). Web teaching guide:a practical approach to creating course websites.* New Haven: Yale University Press.

Huff, M. T. (2000). A comparison study of live instruction versus interactive television for teaching MSW student critical thinking skills. *Research on Social Work Practice 10*(4), 400-416.

Kirby, E. (1999). *Building interaction in online and distance education courses.* San Antonio, TX: Society for Information Technology and Teacher Education International Conference. (ERIC Document Reproduction Service No. ED432230)

Leh, A. S. C. & Som, Y. M. (1999) *Challenges and considerations when conducting an online course.* San Antonio, TX: Society for Information Technology and Teacher Education International Conference. (ERIC Document Reproduction Service No. ED428743)

Mazoue, J. G. (1999) The essentials of effective online instruction. *Campus-Wide Information Systems. 16*(3), 104-110.

Mielke, D. (1999). *Effecting teaching in distance education.* Washington DC: ERIC Clearinghouse on Teaching and Teacher Education. (ERIC Document Reproduction Service No. ED436528)

Merriam-Webster Dictionary (2003). [Electronic version] Retrieved July 29, 2003 from http://www.m-w.com/cgi-bin/dictionary

O'Hanlon, N. (2001). Development, delivery, and outcomes of a distance course for new college students [Electronic version] *Library Trends* 50(1), 8-27.

Redding, T. R.& Rotzien, J. (2001) Comparative analysis of online learning versus classroom learning. *Journal of Interactive Instruction Development. 13*(4), 3-12.

Sawyer, J. (2000) *Interweaving face-to-face student contact with an online class presentation format* Hawaii, USA: Teaching in the Colleges Online Conference. (ERIC Document Reproduction Service No. ED413893)

Shave, C. (1999). *So you want to deliver a course using the internet!* New South Wales, Australia: Teaching in the Community College Online Conference. (ERIC Document Reproduction Service No. ED434648)

TechTarget Network (2003) *Definitions*. Retrieved July 29, 2003 from http://searchwebservices.techtarget.com/sDefinition/0,,sid26_gci212298,00.html

Umble, K. E., Cervero, R. M., Yang, B. & Atkinson, W. L. (2000) Effects of traditional classroom and distance continuing education: A theory-driven evaluation of a vaccine-preventable diseases course. *American Journal of Public Health*, *90*(8), 1218-1224.

Web teaching articles: preparing to teach with the web. (n.d.) Retrieved July 7, 2002 from Dartmouth College, Academic Computing Web site: http://www.dartmouth.edu/%7Ewebteach/articles/prepare.html

Web teaching articles: privacy in the online classroom. (n.d.) Retrieved July 7, 2002 from Dartmouth College, Academic Computing Web site: http://www.dartmouth.edu/%7Ewebteach/articles/restrict.html

Web teaching articles: taking discussion online. (n.d.) Retrieved July 7, 2002 from Dartmouth College, Academic Computing Web site: http://www.dartmouth.edu/%7Ewebteach/articles/discussion.html

Wegner, S. B., Holloway, K. C.& Wegner, S. K. (1999). The effects of a computer-based instructional management system on student communications in a distance learning environment [Electronic version]. *Educational Technology & Society 2*(4), 146-153.

Appendix A

APPENDIX A

Yakima Valley Community College

Clinical Instructor Training Module

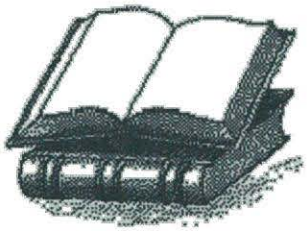
Chris Beaudry, Clinical Coordinator

Announcements (in Designer Options, select text block, edit text)

Training Module

Calendar

Communication



JRCERT Documents

Student Assignments

Policies

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Role of the Clinical Instructor

The Clinical Instructor (CI) serves as an on site supervisor for the students in the Radiologic Sciences Program. The CI provides a vital link between the student and the Radiologic Sciences Program. One of the key elements of the job is to serve as a communication link for the students. The students need a friendly on-site person to assist them with clinical learning objectives and potential concerns in clinic. The CI also is a very valuable adjunct in maintaining student on-site clinical records, and is an essential part to providing a link between the radiology staff and their evaluation and testing of students. A duty of the CI is to clarify wording or scoring on competency forms and to seek fair and impartial evaluations of each student. The on-site instructor assists in the orientation process of new students by demonstrating various departmental procedures or equipment or by enlisting the support of fellow radiographers to assist in the process. CI's must demonstrate discretion when a student needs counseling, conversation, or if a student needs a little extra help. The CI needs to work closely with the Clinical Coordinator and program staff to alert them to potential student concerns or changes in departmental patterns. The role modeling of the CI is one of the first examples seen by students and can provide a lasting impression on the radiographic career.

On-site Clinical Instructor

Expectations/Responsibilities

Expectations:

1. Assist students in utilizing clinic time to its fullest.
2. Alert Clinical Coordinator to any concerns about a student's performance.
3. Monitor student's characteristics for professionalism in clinic, i.e., actions, dress, radiation safety.
4. Familiarize yourself with all clinical documents and be ready to answer questions as needed.
5. Keep abreast of changes in clinical education centers (positioning, film/screen changes, policies) and share information with other YVCC instructors.
6. Maintain positive relationships with RTs, students, and YVCC instructors
7. Support YVCC policies, including student supervision, radiation protection, repeat protocols, etc.

Responsibilities:

Daily:

1. Check the schedule to see what students are assigned in the clinical and their appropriate room assignment.
2. Ask if students need assistance in any area of clinic.
3. Engage/encourage students in activities during slow periods, i.e., practice.
4. Record sick time or late clinic time on attendance sheet.

Bi-monthly:

1. Consult with clinical coordinator regarding student progress, successes, and areas for improvement.

Monthly:

1. Keep abreast of clinic class topics; provide input for updating policies.

Quarterly:

1. Attend clinical instructors meeting.
2. Conduct student evaluation sessions with RTs, providing comments and suggestions where appropriate. Keep abreast of evaluation schedule provided by clinical coordinator and have paperwork done in a timely manner.

On-going:

1. Provide a link between your clinical affiliate and YVCC. Keep Clinical Coordinator abreast of any changes that would affect the students and/or the program.
2. Be a role model for the students.
3. Support YVCC Radiologic Technology policies.
4. Council students on site as needed, provide immediate feedback when necessary.

On-Site Clinical Instructor

Job Description

The following responsibilities reflect duties required of the assigned Clinical Instructor at designated clinical education centers affiliated with Yakima Valley Community College.

1. Supervise students while they perform radiographic procedures.
2. Evaluate student performance on a daily basis.
3. Counsel students regarding ways to improve clinical performance.
4. Orient students to department procedures.
5. Instruct students on proper ways to handle radiographic equipment.
6. Monitor attendance.
7. Submit progress reports and formal evaluation instruments as scheduled by the clinical coordinator.
8. Assist clinical coordinator in the development of assignment schedules.
9. Conduct competency testing as requested by the clinical coordinator.
10. Attend clinical instructor workshops/meetings scheduled quarterly or as needed with program director and clinical coordinator.

Clinical Instructor Activities with

First Year RT Students

1. First year students require a great deal of supervision and direction. On their first day, make sure they have a general tour of the hospital areas important to the Radiology Department. Introduce them to the RTs.
2. The first thing students need to do on arrival is to have their timecard signed. On their first few days in clinic, make sure their card is getting signed and filled on a daily basis.
3. Make sure they are properly attired in uniform (clean & pressed), hair, jewelry, name pin and radiation badge. Remind them if anything isn't correct. Try to do this in private, so the student won't be embarrassed. If the problem is consistent, make sure to report it to the Clinical Coordinator.
4. Review the equipment with the students both in a group and individually. If you note problems, make sure to encourage the student to practice.
5. Make sure the student has the opportunity to go to the front office. Check to see if they have questions. Orient them to where films are found and the follow through procedure of where to place the films for reading.
6. During the first week, emphasize orientation to staff, department and being in clinic.
7. Show the students how to look up films for film critiques. Review with them how to fill out the forms. Encourage this activity when things are slow. If it is too busy, encourage students to stay after clinic and complete the work.
8. By the end of the third week, encourage students to start to do performance competencies. There are specific deadlines to be met and students need to be reminded of them.
9. Students are to complete two practice cards during the quarter. Encourage this activity during idle times.
10. Be sure to complete any student paperwork on a daily basis and encourage the RTs to do so also.
11. Make sure the students have the necessary clinical forms in clinic.
12. When in doubt, research and then get back to the student with the response.
13. Be a role model.

Clinical Instructor Activities with

Second Year Students

1. Many of the second year students have recently transferred their clinical training site, and they need to do comps on rooms, office, safety, etc. Check with them and assist as needed.
2. Make sure they have a general tour of the hospital areas important to the Radiology department. Introduce them to the RTs.
3. Make sure they are properly attired in uniform (clean and pressed), hair, jewelry, name pin and radiation monitoring device. Remind them if anything is not correct. Try to do this in private, so the student will not be embarrassed. If the problem is consistent, make sure to notify the Clinical Coordinator.
4. Encourage completion of film critiques. If it's too busy, encourage students to stay after clinic and complete the work.
5. Encourage students to start to do performance competencies. There are specific deadlines to be met and students need to be reminded.
6. Be sure to sign any student forms on a daily basis, and encourage the staff RTs to do so also.
7. Students are to complete practice cards during the quarter. Encourage this activity during idle times.
8. Make sure students have their clinical forms in clinic.
9. When in doubt, research and get back to the students with a response.
10. Be a role model.

YVCC
Radiologic Sciences Program
Quarterly Evaluation

Student's Name_____..Date_____

Clinical Site_____

Evaluator(s)_____

Scoring:
Circle the number which most accurately reflects the student's current performance.

5	=	**Superior:**	Near perfect performance.
4	=	**Above average:**	The student was able to meet the standard 90% of the time.
3	=	**Average:**	The student was able to meet the standard the majority of the time (80%).
2	=	**Below average:**	Performance is satisfactory a majority of the time, but does not meet the 80% benchmark.
1	=	**Unacceptable:**	The student is unable to meet the standard 50% of the time.

Please evaluate the following performance standards.

Professional Ethics

- The student follows protocol policies of the clinical environment. 5 4
- The student utilizes hospital resources appropriately. 5 4
- The student adheres to hospital policy regarding confidentiality issues. 5 4

Communication-Interpersonal Relations

- The student explains all procedures, gives clear directions and ensures patient understanding. 5 4
- The student respects cultural, ethnic and other various universal differences. 5 4
- The student exhibits positive and appropriate verbal and non-verbal conversation with patient, peers and staff in the work environment. 5 4
- The student listens carefully and correctly follows the instructions of superiors. 5 4
- The student accepts constructive commentary and shows a willingness to improve. 5 4
- The student maintains a positive attitude. 5 4

Patient Care

- The student ensures patient safety and reacts appropriately to medical conditions. 5 4
- The student displays compassionate care, responds to patient needs and provides for patient modesty. 5 4

Work Conduct

Dependability

- The student calls the clinical site when (s)he will be late. 5 4

- The student efficiently completes clinical responsibilities (patient, exam and film follow through including hanging films and wet-read protocols) 5 4

Dress Code and Personal Hygiene
- The student reports to the clinical site dressed per the program policy. 5 4

Punctuality
- The student reports to the work area at the assigned time. 5 4

Attendance
- The student reports to the clinical site on assigned days. 5 4

Radiation Safety
- The student correctly implements safety measures of time, distance and shielding for self, patient and others. 5 4
- The student always wears his/her PPD. 5 4

Initiative
- The student seems genuinely interested in procedures and will seek to participate in all levels/types of examinations. 5 4
- The student performs duties without being asked, and uses time in a productive manner. 5 4

Quantity of Work
- The student uses clinical time in a constructive, productive manner and performs exams when they are available 5 4

Occupational Skills

Positioning Skills
- The student knows the procedural routines and performs the required positions properly. 5 4
- The student can adapt protocol to meet various situations. 5 4

Technical Factors
- The student assesses the patient, considers necessary adjustments, and sets appropriate technical factors 5 4

Standard Precautions
- The student uses proper standard precaution techniques for self and patient, including hand washing, disinfection of equipment, gloves, etc. 5 4

Film Critique
- The student can correctly identify the position of a radiograph and recognize strengths and areas for improvements in discerning diagnostic quality. 5 4

Quality of Work
- The student is prepared to perform exams for current and past levels of training. 5 4

- The student demonstrates neatness, accuracy and efficiency. The number of repeats is consistent with his/her current level of education/training. 5 4

Problem Solving/Critical Thinking

- The student obtains information from numerous appropriate sources to provide quality care (patient, chart, previous films, other health care professionals, etc.) 5 4
- The student identifies poor technique(s) on radiographs and can formulate the changes necessary to yield a diagnostic radiograph. 5 4
- The student displays confidence in skills while recognizing limitations. 5 4
- The student identifies the steps necessary to complete a task and does so in a logical manner. 5 4
- The student can recognize error and seeks to improve his/her ability. 5 4

Score _____

Comments: (Are required in each area the student scored below three.)
Areas of Strength

_____
_____
_____
_____

Areas for Improvement

_____
_____
_____
_____

Clinical Coordinator to enter the following information:

To receive a satisfactory evaluation:

- The student must receive (99) or greater points on the quarterly evaluation with no greater than four items scored 2 or bellow

The student must pass 75% of comps on the first attempt.

-

Evaluation Score:
Items Scored Below 3:
Performance Comps Attempted:
Performance Comps Passed on First Attempt:

Evaluation Deemed:

Satisfactory: **Unsatisfactory:**

Yakima Valley Community College
Radiologic Sciences

Clinical Education Setting Evaluation

Clinical Setting: _____ Qtr/Yr: _____

Directions: For each of the following statements, please assign a rating of:

1 = needs improvement
2 = average
3 = excellent

The Radiographers:

_____ Demonstrate appropriate teamwork concepts.

_____ Exhibit characteristics of positive professional role models.

_____ Give clear and precise directions.

_____ Provide appropriate and positive feedback of my performance.

_____ Support and assist me in meeting program goals.

_____ Are receptive to student ideas, input, and questions.

_____ Demonstrate various methods to perform exams and adapt to diverse situations.

This Clinical Education Setting:

_____ Provides an adequate number and variety of exams for me to complete required competencies.

Please comment about your experience at this clinical education setting:

_____

INDIVIDUAL R.T. EVALUATION
YVCC
Radiologic Sciences Program

Student _____ Date _____

Clinical Site

_____

Evaluator(s)

_____

Grading: Using the following scale, please rate the student's current level of performance. Satisfactory scores (3.0 or greater) must be achieved in each category.

5 = Superior, near perfect, may have been unable to meet the standard two or less times.
4 = Above average, may have been unable to meet the standard three to four times.
3 = Average, the student was unable to meet the standard at least six times.
2 = Below average, the student performance needs much improvement as (s)he cannot meet the standard the majority of the time.
1 = Unacceptable, the student is unable to meet the standard entirely.

Professional Ethics

_____1. The student utilizes hospital resources appropriately.
_____ 2. The student maintains confidentiality.
_____ 3. The student responds to patient needs and respects differences.
_____ 4. The student acts in an appropriate manner with all medical staff.

Patient Care/Interpersonal Relations

_____ 1. The student gives clear directions and ensures patient understanding.
_____ 2. The student listens carefully and follows the instructions of superiors.
_____ 3. The student exhibits positive communication with all.
_____ 4. The student accepts constructive commentary and shows a willingness to improve.

Work Conduct

_____ 1. The student effectively completes clinical responsibilities (clerical, quality assurance, etc).
_____ 2. The student practices radiation safety for self and others.
_____ 3. The student follows the YVCC dress policy.
_____ 4. The student seems genuinely interested in procedures and will seek all levels/types of exams.
_____ 5. The student uses clinic time in a productive manner.

Occupational Skills

_____ 1. The student knows procedural routines, can perform the required positions properly and can adapt protocol when necessary.
_____ 2. The student sets appropriate technical factors, and makes adjustments when necessary.
_____ 3. The student can identify diagnostic and non diagnostic radiographs and can make improvements as necessary.

_____ 4. The student is able to perform exams for current and past levels of training; repeats are consistent with his/her level of training.

Problem Solving/Critical Thinking

_____ 1. The student identifies poor technique(s) on radiographs and can formulate appropriate changes.
_____ 2. The student performs tasks in a logical manner.

Areas of Strength

Suggestions for Improvement

MIDTERM EVALUATION
YVCC
Radiologic Sciences Program

Student _____ Date _____

Clinical Site _____

Evaluator(s) _____

Grading: Using the following scale, please rate the student's current level of performance. Satisfactory scores (3.0 or greater) must be achieved in each category.

5 = Superior, near perfect, may have been unable to meet the standard two or less times.
4 = Above average, may have been unable to meet the standard three to four times.
3 = Average, the student was unable to meet the standard at least six times.
2 = Below average, the student performance needs much improvement as (s)he cannot meet the standard the majority of the time.
1 = Unacceptable, the student is unable to meet the standard entirely.

Professional Ethics

_____The student utilizes hospital resources appropriately, maintains confidentiality, and interacts with patients and medical staff in a positive manner.

Comments:_____

Patient Care/Interpersonal Relations

_____The student exhibits positive verbal and non-verbal communication with patients and medical staff, is able to explain procedures to patients, listens well and shows a willingness for improvement.

Comments:_____

Work Conduct

_____ The student adheres to program policy regarding work schedule and responsibilities, uses time in a productive manner, participates in all level/types of examinations.

Comments:_____

Occupational Skills

_____ The student completes exams effectively in a timely manner utilizing universal precautions, applies radiation protection measures, sets appropriate technical exposure factors, and can discriminate between diagnostic and non diagnostic radiographs.

Comments:_____

Problem Solving/Critical Thinking

_____ The student displays confidence in skills while recognizing limitations, performs tasks in a logical manner and analyzes performances for self improvement.

Comments:

_____

_____

_____

_____

Satisfactory _____ Unsatisfactory _____

Areas of Strength

_____

_____

_____

Suggestions for Improvement

_____

_____

_____

_____

Y.V.C.C. Radiologic Sciences
Student Time Card for Clinical Experience

Name _____ Month _____ Shift _____

• If Make up Hrs.	Date	Time In RT Sign.	Time Out RT Sign.	Reason for Adjustment	Holiday Earned	Holiday/Sick Taken	Daily Total Worked

Holiday Hrs. Accumulated: _____Sick Taken: _____Holiday Taken____Total Hrs. Worked _____

Instructions: This card must be signed on a daily basis. Entries must be made in ink. ***No white out allowed.*** In the adjustment column, indicate a reason for less than 8 hours, e.g. class, Image Maker's meeting. If you list holiday hours earned, note the source of those hours, e.g. Thanksgiving. If you are ill, indicate this on the appropriate date and check column if make-up hours. At the end of the month, tally the hours in each of the columns. Time cards must be date stamped by the 5th day of the following month and submitted.

YVCC Radiologic Sciences

Student Absenteeism Record

for

(Your Clinical Facility)

Student	Date Absent	Hours Missed	Reason Given	Time Notified	RT initials

Yakima Valley Community College

Clinical Instructor Training Module

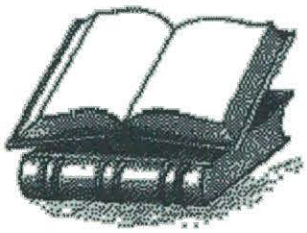
Chris Beaudry, Clinical Coordinator

Announcements (in Designer Options, select text block, edit text)

Training Module

Calendar

Communication



JRCERT Documents

Student Assignments

Policies

August 2003

Date: Month August Year 2003 Go

To compile a list of entries, click Compile.

Previous Month Next Month

To view, add, or edit the daily schedule, click a hyperlinked date below.

Note: All private entries are italicized.

	Sun	Mon	Tue	Wed	Thu	Fri	Sat
View Week						1	2
View Week	3	4	5	6	7	8	9
View Week	10	11	12	13	14	15	16
View Week	17	18	19	20	21 - Quarterly Evaluations due	22	23
View Week	24	25	26 - Evals	27 - Clinic Final 2:30pm - 4:00pm	28 - Evals	29 - Grades for RT 250 posted on Web	30
View Week	31						

July 2003

Date: Month July Year 2003 Go

To compile a list of entries, click Compile.

Previous Month Next Month

To view, add, or edit the daily schedule, click a hyperlinked date below.

Note: All private entries are italicized.

	Sun	Mon	Tue	Wed	Thu	Fri	Sat
View Week			1	2 - Clinic Class 2:30pm - 4:00pm	3	4 - Holiday	5
View Week	6	7	8 - Midterm Evaluations due	9	10	11	12
View Week	13	14	15	16	17	18 - Clinic Class 11:30 - 4:00pm PYMC	19
View Week	20	21	22	23	24	25 - Today	26
View Week	27	28	29	30	31		

Yakima Valley Community College

Clinical Instructor Training Module

Chris Beaudry, Clinical Coordinator

Announcements (in Designer Options, select text block, edit text)

Training Module

Calendar

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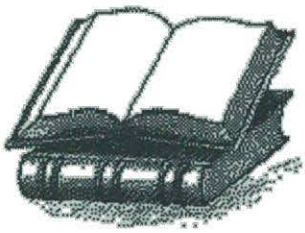

JRCERT Documents

Student Assignments

Policies

Chat

Whiteboard

Discussion

email

Yakima Valley Community College

Clinical Instructor Training Module

Chris Beaudry, Clinical Coordinator

Announcements (in Designer Options, select text block, edit text)

Training Module

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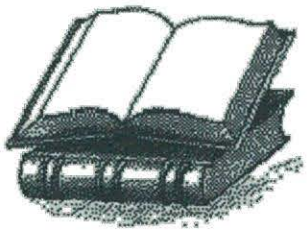

JRCERT Documents

Student Assignments

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Yakima Valley Community College

Radiologic Sciences

"Quality Patient Care"

Repeat Radiograph Policy

Unsatisfactory radiographs shall be repeated only in the presence of a qualified radiographer, regardless of the student's level of competency.

Yakima Valley Community College

Radiologic Sciences

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

- Reviews the request for examinations in relation to the student's achievement.
- Evaluates the condition of the patient in relation to the student's knowledge.
- Is present during the conduct of the examination.
- Reviews and approves the radiographs.

After competency has been achieved, imaging procedures may be performed under **indirect supervision** of a qualified practitioner. The radiographer:

- Reviews the request for examinations in relation to the student's achievement.
- Must be in the immediate vicinity of the examination room but does not have to oversee the procedure.
- Reviews and approves the radiographs.

Curriculum Vitae

(Name)

Professional Experience

Date	Employer	Responsibilities
	Only RT jobs	Include a brief job description of duties (be sure to add if you have students, supervision, training, etc.

Education

Date	Institution	Degree

Certification

year	ARRT	R, M, CT ?

CPR, Health Care Assistant, Wa State

Clinical Instructor Training Module

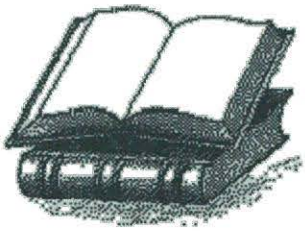
Chris Beaudry, Clinical Coordinator

Announcements (in Designer Options, select text block, edit text)

Training Module

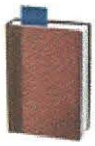
Calendar

Communication



JRCERT Documents

Student Assignments



Policies

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Clinical Code of Conduct for Radiologic Sciences Students of YVCC

Patients always come first:

- First year students - Two students should be in on every exam, unless comping, proficiency, or otherwise directed by supervising RT
- Watch for patients that need x-rays

When you get to your shift - make sure:

- Have your time card signed
- Check to see if there are any exams going on - get in on them and follow through to the end
- Check to make sure the rooms are warmed up and stocked
- Decide with classmates and RT who will be involved with which exams, prepare for surgery, if appropriate
- Communicate with RT's at *all* times regarding exams, whereabouts, and things to do

If there are no patients:

- **Watch for exams to do at all times**
- Make sure rooms are cleaned and stocked
- Make sure files are completed (reports, films, etc.)
- Ask RT if there is anything you can help with *before*:
  - Clinic homework (can be done during clinic *if* department work is done)
  - No school homework to be done in clinic
- If student is practicing positioning, use the busiest room, so when a patient arrives, the student is involved with patients
- If multiple students are at clinic, two should be involved with patient exam and other students practicing in remote room, inform RT;s where you are and keep a look out for exams. The RT's may not have time to come and get you.
- Remain professional - even when patients are not around

Remember—**Always**:

- No repeats without an RT
- Direct supervision is necessary until exams have been successfully "comped"
- Direct supervision always for; Portables, Surgery, and ALL Contrast Studies

Note:

- PYMC - Watch light system and Inpatient Board
- YVMH - Watch the board

Summer Clinic

cb/03

What are the clinical times for:

Days	7:30am – 4:00pm
Evenings	3:30pm – 12:00 midnight
FMOY	8:00am – 5:00pm (1 hr lunch)
Ortho clinics	7:30am – 4:00pm

Testing: Ken Rose (PYMC), Jeri Heintz (YVMH), Sherie Masters (YVMH) and Chris have hours throughout the summer – plan on getting testing done early.

What is the proper procedure to follow if you are ill and unable to come to clinic?

Call clinic or specialty rotation as per student policy manual

and *Call Chris and leave a message (574-4931)*

You want to trade shifts in the summer – what is the proper procedure?

Use the shift trade form

How long a notice is required?

At least one week in advance

What if Chris isn't around?

Clinical instructors at clinic may approve – remind them to correct schedule, and place signed form in the "envelope" for Chris

What paperwork do you need when you transfer to a new clinical facility?

- *Transfer forms found in the "turn-in file", pick them up at clinic class, or call Chris 2 weeks prior to transfer.*
- *Clinical Performance Competency list – Chris will provide. Please remind her 2 weeks prior to transfer.*
- *Transfer checklist with appropriate "green sheets" for facility.*

How do you turn in assignments on time during the summer?

Utilize the "envelope" for turn in paperwork, timecards, proficiencies included. If Chris has already picked up the papers on due dates, have a technologist date and initial the papers, to make sure you get proper credit.

Important Dates:

CE presentation	June 26, 6:30pm – 8:30pm PYMC auditorium
Clinic Class #1	July 2, Wed. 2:30pm, RT Classroom
Clinic Class #2	July 18, Friday, 11:30am PYMC auditorium

Emergencies: direct your loved ones to Jackie (WED manager) 574-4757

If you *have* to get a hold of Chris urgent, (home) 577-8783, otherwise leave a message on her voice mail: 574-4931

SAP forms: Chris is the *only one* who can sign them, so plan ahead.

Assignment Summary Sheet
RT 250
Summer 2003

Assignment	Points	Due Date
Continuing Education (optional)		**June 26th, 6:30pm PYMC Auditorium**
Film Critique Worksheets	10 pts	July 2 (bring to clinic class)
Clinic Class	10 pts	**July 2…2:30pm YVCC Classroom**
5 Performance Comps	25 points	July 11
One Comp Assessment	10 points	July 11
C-arm Comp	-5 pts if not done	July 16
Practice Card #1	-5 pts if not done	July 16
5 Performance Comps	25 points	July 25
Clinic Class	Bring CT papers	**July 18…11:30pm Location PYMC audit.**
Suction/Oxygen Comp	-5 pts if not done	August 15
Duplication	-5 pts if not done	August 15
4 Performance Comps	20 pts	Aug 15
One Comp Assessment	10 points	Aug 15
Practice Card #2	-5 pts if not done	Aug 20
3 Performance Comps	15 points	Aug 22
Simulations	30 points	As per instructor
Film Critiques	5 points	As per instructor
Positioning Returns	30 points	As per instructor
Proficiencies	40 points	August 22
Final Exam	**50 points**	**Aug 27…2:30pm**

Yakima Valley Community College

Clinical Instructor Training Module

Chris Beaudry, Clinical Coordinator

Announcements (in Designer Options, select text block, edit text)

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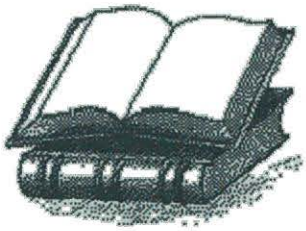
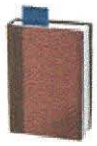
Calendar

Communication



JRCERT Documents

Student Assignments



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Revised 5/2003

INTRODUCTION

Welcome to the Yakima Valley Community College Radiologic Sciences Program! The faculty and administration hope that you will find being a part of the Program a rewarding experiences as you attain your goal of becoming a Radiologic Technologist.

This program is 24 consecutive months in duration and consists of a combination of classroom, laboratory, and clinical experiences. The program is accredited by the J.R.C.E.R.T. (Joint Review Committee for Education in Radiologic Technology). Upon completion of the program, the graduate is eligible to take the Registry exam given by the American Registry of Radiologic Technologists.

This manual will provide specific information on the policies and procedures for the campus and the clinical education settings. **PLEASE READ ALL THE MATERIAL CAREFULLY**.

PROGRAM GOALS AND PHILOSOPHY

The YVCC Radiologic Sciences Program strives to graduate individuals who are qualified in the use of ionizing radiation for the purpose of diagnostic imaging. It is the public's right to expect high standards in the treatment that they receive, as well as being treated in a professional manner.

In a profession, people must work together as a group for the benefit of everyone involved. You have now become part of that group and should always remember that you have responsibilities, both academically and professionally, to carry out.

You are beginning a most interesting, mind expanding, and fascinating experience. How much you get out of the program depends on how much you choose to put into it. If you choose, you can become the self-reliant, decision-making, efficient and caring Radiologic Technologist needed today.

The program, in conjunction with the advisory committee, established program outcomes as a framework for course offerings. Program goals are revised yearly and posted on the student bulletin board.

The following pages identify program outcomes and completer proficiencies. Being familiar with them will help you know what is expected of you.

Outcomes:

- Students will graduate with entry-level job skills.
- Students will be prepared to pass the American Registry of Radiologic Technologists.
- The program will maintain integrity and be responsive to community needs.

Program Completer Proficiencies

I. Occupationally-Specific Skills

A. Procedure Performance

1. Position patient, x-ray tube and image receptor to produce radiographs of the structures within the skull, thorax, extremities, spine, pelvis, abdomen, gastrointestinal tract, biliary and urinary systems.

2. Position patient, x-ray tube or fluoroscopic unit and image receptor to produce cardiovascular, neurological, and advanced urinary systems studies.

3. Position patient, x-ray tube or fluoroscopic unit and image receptor to perform arthrographic and tomographic studies.

4. Select and utilize accessory devices to produce quality radiographs.

5. After analyzing patient size and medical history, select appropriate technical exposure factors to produce a radiograph of diagnostic quality.

6. Assist radiologist in fluoroscopy by preparing the fluoroscopic unit and accessories for use and by adjusting controls as requested during the procedure.

7. Critique radiographs for positioning and technical diagnostic qualities. Recognize unsatisfactory elements and compensate accordingly.

B. Protection

Practice techniques to protect self, patient, and fellow worker from unnecessary radiation exposure.

C. Patient Care

1. Practice standard precautions when radiographing a patient.

2. Obtain history from patient and record it appropriately.

3. Assist patient onto or off of table, stool or bed to avoid patient or personal injury using proper body mechanics and/or mechanical transfer device.

4. Provide for patient comfort and modesty by supplying a pillow, sheet, gown, et cetera and keeping patient properly covered during procedure.

5. Monitor medical equipment attached to patient.

6. Recognize need for medical attention and administer emergency care to patient during critical situation while waiting for help to arrive.

7. Assist physician with administration of contrast media.

8. Follow departmental procedures in case of an incident occurring to a patient, visitor or staff to assure proper reporting and treatment as necessary.

D. Darkroom

1. Start up and close down automatic processor.

2. Imprint proper identification information and develop film.

3. Properly reload cassettes.

4. Store and handle radiographic film safely.

5. Utilizing sensitometry, monitor automatic processor operation.

6. Recognize and report malfunctions in automatic processor noting difficulties which might assist in locating cause of malfunction.

7. Inspect and clean intensifying screens.

E. Quality Assurance

1. Warm-up x-ray tube.

2. Perform safety checks of radiographic equipment and accessories.

3. Recognize and report malfunctions in radiographic unit. Record information which might assist in locating cause of the malfunction.

F. Office Procedures

1. Retrieve and process patient records using computerized or manual record keeping system. Examine radiographic requisition to verify the accuracy and completeness of information on the form.

2. Prepare radiographs and paperwork for interpretation and filing.

G. Anatomy

Identify anatomical structures on radiographs in longitudinal and transverse planes.

II. Human Relations

1. Demonstrate effective interpersonal and inter group relationships.

2. Identify personal values and respect the values of others.

3. Work collaboratively, in groups, to solve problems or create projects.

4. Function as team members for a common goal.

5. Relate empathetically to situations involving patients and peers.

6. Assess behavior of self and others before responding.

III. Computation

1. Use arithmetical, algebraic, geometrical and statistical methods to solve problems pertaining to radiologic sciences.

2. Estimate and check answers to mathematical problems in order to determine reasonableness, identify alternatives and select optimal results.

3. Represent mathematical information visually, numerically, symbolically and verbally.

IV. Communication

1. Listen and respond appropriately to a diversity of patients and others in a health care setting.

2. Use technical writing to communicate effectively.

3. Deliver information to a larger audience.

V. Crosscultural/Global Perspective

1. Work effectively in groups as team members with persons who are from diverse backgrounds.

2. Recognize and utilize different gender perspectives. Respect cultural and ethnic differences and universals among groups.

VI. Technological Literacy

1. Correctly utilize a computer for various radiologic duties.

2. Apply research skills to access electronic information.

VII. Critical Thinking

1. Utilize and recognize multiple (e.g. cultural, socioeconomic, historical, political) perspectives.

2. Gain information from a variety of appropriate sources.

3. Recognize inferences and use evidence to make assumptions.

4. Develop and test hypotheses or prove them by appropriate means.

5. Utilize ethical analysis and judgement.

VIII. Problem Solving

1. Recognize if the problem is significant and needs to be solved.

2. Analyze the problem.

3. Devise a plan to solve the problem and carry out.

4. Reflect on the solution.

ARRT CODE OF ETHICS

1. The Radiologic Technologist conducts himself/herself 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 concerns of personal attributes or the nature of the disease or illness, and without discrimination, regardless of sex, race, creed, religion or socioeconomic status.

4. The Radiologic Technologist practices technology founded upon theoretical knowledge and concepts, utilizes equipment and accessories consistent with the purpose for which they have been designed, and employs procedures and techniques appropriately.

5. The Radiologic Technologist assesses situations, exercises care, discretion and judgement, 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 management of the patient, and recognizes that interpretation and diagnosis are outside the scope of practice for the profession.

7. The Radiologic Technologist utilizes equipment and accessories, employs techniques and procedures, performs services in accordance with an accepted standard of practice, and demonstrates expertise in limiting the radiation exposure to the patient, self and other members of the health care 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, protects 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 educational and professional activities, sharing knowledge with colleagues and investigating new and innovative aspects of professional practice.

INTRODUCTION TO POLICIES

Students enrolled in the Yakima Valley Community College Radiologic Sciences will be responsible for observing college rules and regulations as stated in the current College Catalog and Student Handbook, in addition to those applicable to their clinical affiliation assignments. Clinical education centers, while separately located, are considered an integral part of the College Campus.

The Radiologic Sciences Student Policy Manual outlines performance expectations. The manual was originally developed by the Advisory Committee and faculty based on the philosophy the program must prepare the student for the work environment; what is expected of an employee will be expected of a student in regards to attendance, sick leave, etc. Every year the program asks the Advisory Committee, students and clinical education center staff to review the manual and offer suggestions for updating.

The rules and regulations stated in this manual represent a contractual agreement between Y.V.C.C. and the Radiologic Technology student for 24 months. Failure to comply with the rules and regulations in this manual will affect student evaluations and/or may result in dismissal from the Radiologic Sciences Program if the student shows no improvement or makes no attempt to correct deficiencies after counseling or direction to make improvements.

Every effort has been made and will continue to be made to assure accurate information is contained within these policies. However, it may be necessary to change said policies without notice due to changes in legislature, institutional policies, or other sources. In this case, the program coordinator will provide information on policy changes as soon as possible.

A. ***General Conduct***

1. Courtesy toward instructors, hospital personnel, visitors, and peers is imperative professional conduct.

2. The privacy of an instructor's office is to be respected at all times. While instructors want to be available to assist students, there are times they will not be available, in order to prepare for classes, etc. Each instructor has office hours posted on the office door to notify students of the times they are available for assistance. Appointments may also be made.

3. Students are to read classroom and clinical bulletin boards regularly. Important information will be posted and students will be held responsible for that information.

4. Babies and young children may not attend classes, as this is disruptive and infringes upon the rights of other students.

5. Electronic devices, owned by students such as cell phones and pagers, must be turned off during class time.

B. ***Academic Achievement***

1. The Yakima Valley Community College Department of Radiologic Sciences requires that students must receive a grade "C-" or better in any course required for the Associate Degree in Radiologic Technology, "C" or better in Biology 230-231 A student must receive a minimum accumulative grade point average of 2.5 while enrolled in the R.T. Program. Any student receiving less than a 2.5 accumulated grade point average for courses during enrollment in the R.T. Program will be placed on academic probation and given two quarters to correct the deficiency. If the student does not bring the G.P.A. up to 2.5 at the end of two quarters, the student will be terminated from the program.

2. If a grade below that of "C-" is received in any course required by the Associate Degree in Radiologic Technology (or "C" in Biology 230-231,) the student will be required to repeat the course at the time it is next offered. If the student then does not receive a grade of "C-" or acceptable grade, she/he will be terminated from the Radiologic Sciences Program. If clinic time is missed because of the repeated course, the time must be made up at the end of training.

3. Students must receive a minimum cumulative percentage of 80% in every course unless otherwise specified in syllabus in order to receive a letter grade of "C-" or better. On the average, 85% of students receive "A" and "B" letter grades in all RT courses. Midterm reports are routinely given.

4. If a student receives a grade of less than "C-" in two or more academic required courses, she/he will be terminated from the Program.

5. If a grade of "F" is issued for any clinical practicum course, program termination will occur.

6. **REGULAR** attendance is required. Students missing more than 10% of any academic course will not receive credit for that course.

   Extenuating circumstances can be discussed with the instructor of record and the program coordinator.

7. If a student receives an incomplete grade in support courses required for graduation, she/he has six weeks into the next quarter to complete the course work to receive a letter grade. For incomplete grades in R.T. courses, individualized contracts for completion are established.

8. If it is necessary for a student to miss class, the instructor must be notified prior to the absence.

9. Makeup exams will be allowed only for students who call prior to the absence. Exams must be made up the next day of academic coursework attendance.

10. Tardiness is very disruptive to others attending the class. Therefore, more than three late arrivals to any one class in any one quarter will be cause for a drop in the student's grade for that class of a FULL GRADE POINT.

11. Classroom assignments must be handed in on time.

12. Students are not to leave class or laboratory sessions early without the permission of the instructor.

C. ***Code of Conduct during Examination***

Students will arrive on time for examinations. Any student arriving late will not be given an extension of time beyond the testing limits. If late arrival occurs, the student must sit near the instructor so questions may be answered and the other class members will not be disturbed.

All books and purses will be left in a designated area. Only pencil, pen, calculator and examination will be allowed at the testing station.

Do not look at another student's exam paper. There is no reason to talk to another

student or look at another student's paper. If this occurs, the examination paper/s of the student/s involved in this academic misconduct will be removed at the time of the infraction and a grade of "0" will be given.

If questions are allowed, they must be directed to the instructor privately. If a question proves to be of concern to all students taking the exam, the instructor will make the announcement to the class.

Any violation of this policy will result in the removal of the offender's examination without a grade being awarded and the initiation of disciplinary action, with the most serious penalty being dismissal from the program.

D. ***Health and Physical Standards***

1. **Alcohol and Drug use (Drug-Free Workplace Act of 1988)**

Yakima Valley Community College has implemented a drug abuse policy in compliance with Public Law 100-690. It is the goal of Yakima Valley Community College to adhere to federal regulations and provide a drug-free workplace. The college experience teaches more than facts and numerical equations. It offers the opportunity to explore moral and ethical problems that one will face throughout one's life.

One of the most significant problems confronting college students is to use or avoid alcohol and drugs. Yakima Valley Community College is dedicated to maintaining a drug-free campus for students and employees.

Yakima Valley Community College policy prohibits the unlawful manufacture, distribution, possession, or use of a controlled substance on campus and in all off-campus locations where classes, seminars, workshops, meetings, and college-related activities are offered. Violation of the laws and regulations will result in punishment in accord with the offense.

Community Resources: Yakima Valley Community College students with questions and concerns relating to alcohol or drug problems are encouraged to contact the YVCC Counseling Center (574-4955). The following community resources are available to provide help with drug or alcohol problems.

Alcohol And Drug 24-hour Help Line:

1-800-562-1240
Alcoholics Anonymous:
509-453-7680 (Yakima),
800-967-8207 (Mid-Valley),
509-837-5801 (Lower Valley),
509-649-3133 (Cle Elum).

A complete list of community alcohol and drug treatment facilities can be found in the yellow pages of the telephone directory listed under "Alcoholism Information and Treatment" and "Drug Abuse Information and Treatment."

Refer to Yakima Valley Community College catalog and or Code of Student Rights and Responsibilities for additional information.

2. **Pregnancy Policy**

If a student becomes pregnant, it is their option to inform the program of said condition or not. Notification of pregnancy must be in writing. If a student elects not to inform the program, the student cannot be considered pregnant.

If the student has notified the program or clinical coordinator that they intend to continue, the following should take place:

a. The student shall sign a "Release of Responsibility" waiver for the college and clinical affiliates.

b. The student shall wear two (2) PPD as identified below. The second badge will be ordered at the student's expense.
   (1) One above and outside the apron.
   (2) One underneath the apron and at the waist level.

c. During the gestation period if the radiation readout for the embryo-fetus equivalent exceeds .45 rem/4.5 mSv, the student will be encouraged to withdraw from clinic.

d. Absences during pregnancy will be made up at the end of training, once sick bank is exhausted.

e. If the gestation period ends prior to graduation, arrangements for clinic makeup will be made with the clinic coordinator via special contract. The student may request a clinical leave of absence for up to six-week post deliver. After the initial six-week leave, clinical hours may be reduced for up to 6 months post gestation. Clinic make up will be scheduled at the end of training.

6. **Communicable Disease Policy**

Students who are exposed to or contract a communicable disease must inform the clinical coordinator.

E. ***Personal Appearance***

The personal appearance and demeanor of Radiologic Technology students at Y.V.C.C. reflect both the College and Program standards and are indicative of the students' interest and pride in their profession.

The uniform dress code is one mutually agreed upon by Y.V.C.C. and its clinical education centers. Uniforms will be clean and pressed. Shoes will be clean at all times.

Surgery uniforms will be worn only during the performance of the surgery assignment. Radiologic Technology students will wear their uniforms only for clinical assignments or when officially representing the Y.V.C.C. Radiologic Sciences Program.

1. Any student reporting to the Clinical Education Center in improper uniform or attire, or in a soiled or untidy uniform with dirty shoes, will be sent home by the department supervisor or the college instructor.

2. Students will wear the "official class uniform", socks and predominately white shoes. Shoes **must** have enclosed toes and heels. If the class uniform includes a top with a pattern of color, the pants to be worn will be a matching, solid color. If the top is a solid color, the pants must be the same solid color.

3. If the uniform top does not offer a student enough warmth, a white lab coat or solid color coat that matches uniform may be worn.

4. The appropriate underclothing is necessary. In the event of an undershirt, it may be of T-shirt style, short sleeve (or mock/turtle neck), plain white (no writing or artwork), or it may be a plain solid color that is the same as the uniform top.

5. Hair must be neat appearing at all times. Hair must be cut short enough or be gathered in the back, so as not to fall in the face or eyes while on duty.

6. An ID pin (name plate) is to be worn on the upper part of the uniform top or lab coat. They are to be purchased according to the R.T. Program specifications.

7. Students should shower or bathe daily and use an adequate deodorant.

8. Fingernails will be short, neat, and clean. Only soft pastel shades of polish will be acceptable. Artificial nails are not allowed in clinic.

9. The only acceptable jewelry includes a wedding, engagement or class rings, as well as one additional ring on the opposite hand, a watch, and up to three earrings in each ear. The earrings cannot extend below the ear lobe. Tongue pegs must be removed, a plug (retainer) in its place is acceptable.

10. Scented perfumes or after shave lotions may be objectionable to the ill patient and therefore, not permitted.

11. Makeup should be used tastefully.

12. Facial hair should be neat and trim. Guidelines for length are that beards should be no wider than the outside of the ears and no longer than the "Adams Apple".

13. Tattoos must be covered by clothing or a band-aid.

F. ***Clinical Responsibilities***

I. ***Professionalism***

1. ALL INFORMATION concerning patients, hospital personnel, doctors, and the hospital in general is considered to be CONFIDENTIAL.

2. Casual conversation between peers should not be held in hearing range of patients. Students shall refrain from gathering in groups outside designated meeting areas.

3. Discussion of your personal life while on duty is unprofessional and time consuming in a busy x-ray department. Leave private affairs at home.

4. Students should refrain from discussing any x-ray procedure with another student or technologist in front of the patient. Any discussion should be done away from the patient.

5. Doctors are not to be consulted for personal reasons while on duty.

6. Students are expected to assist with the responsibility of maintaining departmental cleanliness, supplies, and room organization.

7. Smoking or chewing tobacco is not allowed in clinical or campus areas unless there is a designated place for doing so.

8. Chewing gum should not be done during clinic.

9. Eating food and drinking beverages should be done only in specifically designated areas.

10. Students in the clinical education centers are not to receive visitors or phone calls during their assigned shift unless for emergency messages. In the event of an emergency, the phone call should be routed through the YVCC RT office, 574-4930.

11. Students will not refuse to accept assignments by the clinical instructor or clinical education center supervisor commensurate with their capabilities, or to take directions from an individual designated by the clinical education center supervisor.

II. ***Patient Care***

1. Hands should be washed between caring for each patient, not only for personal protection but for the protection of the patients and other hospital personnel.
2. Students should utilize standard precautions in handling any patient.
3. Patients should not be left unattended while undergoing diagnostic procedures.
4. The modesty of patients should be protected at all times.

III. ***Attendance***

1. Students are to be signed in and out by an RT using the timecards provided by YVCC. If the timecard isn't signed, the hours worked will not be credited and hours will be made up. When it is necessary to attend a class, meeting or other appointment, students are required to be signed out and in by a technologist. It is the student's responsibility to tally their timecard monthly and turn it in to the clinical coordinator by the 5th of the following month, or hours will not be credited.

2. Falsification of time cards will result in disciplinary action; i.e., probation, program dismissal.

3. In case of illness, students will notify the Department Supervisor AND Clinical Coordinator **prior** to 8:00 a.m. for day shift and 2:00 p.m. for evening shift. Failure to notify both departments, will constitute an unexcused absence and ***time missed must be made up***. If the Department Supervisor cannot be located prior to 8:00 a.m., leave a message with a technologist, not a secretary, and call the supervisor back when they can be reached.

4. Failure to notify the clinical affiliate and Clinical Coordinator of absence from clinic, for any reason, will result in an unexcused absence. All unexcused absences must be made-up.

5. For each unexcused absence, the letter grade will be lowered one full grade i.e., A- to B-. For quarters that are pass/fail, a student will receive a letter grade of "F" if they are unexcused three times during the quarter.

6. Tardiness may negatively affect the clinic grade as specified in Section "B," Number 10.

7. Time made-up on official school holidays will not be counted as time and one half hours.

8. If a student is absent for three or more consecutive days due to illness, a written and signed statement from a physician indicating the nature of the illness and the student's capability to resume clinical assignments is required upon return. Failure to provide a physician written note will require that the student make-up the time missed.

9. When sick bank and holiday hours have been exhausted, time missed will be made up. Make-up must be scheduled with the Clinical Coordinator within two days of returning or hours will be automatically added to the end of training.

10. If clinical absenteeism exceeds 10%, regardless of sick bank, in any one quarter, the student will receive written notice of concern. If clinical absenteeism exceeds 15%, the student will be withdrawn from clinical practicum for that quarter and must reregister for the course at the end of scheduled training.

IV. ***Schedule***

1. Students assigned to any day shift at one of the hospitals will receive a thirty (30) minute lunch break, unless otherwise advised, to be designated by the supervising technologist. Students assigned to an Orthopedic clinic will receive a sixty (60) minute lunch break unless otherwise advised, to be designated by the supervising technologist. Students leaving the education center must sign out on their timecard. Students remaining in the center need not sign out but must not add in the lunch break time when tallying up weekly hours.

   Students assigned to any evening shift will receive a thirty (30) minute lunch break to be designated by the supervising technologist. Students working the evening shift may not leave the hospital during the lunch break period. The supervising technologist may require that the student eat their lunch in the radiology department or they may allow the student to eat in the hospital cafeteria.

2. Students assigned to an eight hour shift will receive two fifteen minute breaks. Clinical supervisors will designate the time according to the daily schedule.

3. Students are strongly discouraged from holding an outside job while in the R.T. Program. However, if an outside job is held, clinic scheduling WILL NOT be changed for the convenience of any student.

4. All students will have forty (40) hours of emergency leave time to use for emergency situations, (i.e. self/family illness, bereavement, surgery, etc.). This time must be used in minimum two-hour increments.

5. The emergency hours are in addition to, but separate from, holiday hours which the student may accumulate. One cannot "bank" emergency leave hours.

6. When the student must use emergency leave hours, they are to notify the hospital affiliate and Clinical Coordinator, via voice mail if necessary. Indicate on the time card the amount of emergency leave used.

7. Holiday hours may be used in conjunction with, or in place of, emergency leave hours **only** if the student has exhausted all of their emergency leave hours. Pre approval by the Clinical Coordinator is required.

8. For requests to use holiday hours other than in emergency situations, the Clinical Coordinator must receive one week written notice from the student. The coordinator will use discretion in approving the use of holiday hours.

9. Students will be assigned to two college holidays during their clinical training. A student may request one additional holiday assignment per year to accrue hours. Compensatory time for holiday hours must be scheduled with the clinical coordinator prior to April 15 of their second year.

G. ***Clinical Competency***

According to the Standards for an Accredited Educational Program in Radiologic Sciences:

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

The parameters of direct supervision are:

1. A qualified radiographer reviews the request for examinations in relation to the student's achievement;

2. A qualified radiographer evaluates the condition of the patient in relation to the student's knowledge;

3. A qualified radiographer is present during the conduct of the examination; and

4. A qualified radiographer reviews and approves the radiographs.

After competency has been achieved, imaging procedures may be performed under indirect supervision of a qualified practitioner, with the exception of portable radiographic examinations and operative surgical procedures. Under indirect supervision, the technologist must be in "voice range".

In support of professional responsibility for provision of quality patient care and radiation protection, unsatisfactory radiographs shall be repeated only in the presence of a qualified radiographer, regardless of the student's level of competency.

H. ***Student Advisory Panel***

Membership

Two representatives from each class.

Meetings

Shall meet once a quarter, approximately during the seventh week, or more frequently as deemed necessary. Meetings shall be scheduled and facilitated by the program coordinator. Faculty members are encouraged to attend. If students request, a staff member outside of the department will moderate the session.

Responsibilities

- ☐ Review Student Policy Manual.
- ☐ Review publicized literature.
- ☐ Other as determined by faculty and students.

Parameters

Specific cases where disciplinary procedures are involved will not be discussed.

Students may offer opinions regarding program policies, however, they cannot make policy.

I. ***Insurance***

Each student participating in the clinical education program is *strongly encouraged* to acquire comprehensive health and accident insurance that will provide continuous coverage during his or her tenure in the program. Students are responsible for their

own health care costs, health insurance coverage, and their own health needs, including injuries which might occur in the clinical setting. A low cost injury and illness insurance is available to students. Students who are uninsured are encouraged to contact the Dean of Student Services Office for more information.

Students are required to purchase liability insurance on a yearly basis. Payment is incorporated into a lab fee.

J. ***Radiation Protection Policy***

When working with ionizing radiation, students will, at all times, observe the following radiation protection rules:

1. Protect the patient by:
   a. Shielding reproductive organs whenever possible.
   b. Using appropriate technical factors (with the lowest possible mAs) to minimize repeat exposures.
   c. Collimating to the area of interest as close as possible.

2. Protect yourself and co-workers by:
   a. Shutting the door to the x-ray room BEFORE making an exposure.
   b. Checking to make sure all personnel are standing behind appropriate lead protection before making an exposure.
   c. Wearing lead aprons when assisting with fluoroscopy procedures.
   d. Students should not hold patients during an x-ray exposure.

3. Students are to wear radiation monitoring PPD on their uniform collar. If a student looses their PPD, they **MUST** notify Clinic Coordinator within 24 hours. A replacement PPD will be ordered at the student's expense. Until the replacement PPD arrives, the student must refrain from all fluoro, portable, and surgical procedures.

   Quarterly radiation reports for R.T. students are reviewed by the clinical coordinator and posted on the student bulletin board of the College and Clinical Education Centers. Students who receive an average monthly reading of 50 mrem or 150 mrem per quarter, will be counseled regarding their radiation safety practices. A radiation overdose shall be considered any dose that exceeds 1.3 Rem per calendar quarter (13 weeks) or 5 Rem per calendar year. In the event of a radiation overdose, the following procedure will be followed:

   (1) Upon receipt of monitoring contractor's report; the clinic coordinator shall:
      a. Notify the student involved.
      b. Notify the program coordinator.
      c. Notify the office of Radiation Protection, 1-800-299-9729

   (2) Upon notification from the clinic coordinator, the student will:
      a. Withdraw from the clinical area pending further investigation.
      b. Outline in writing his/her activities for the period in question, to include:
         1) where PPD had been stored?
         2) where PPD was worn?
         3) was the PPD left in an x-ray room?
         4) was the PPD left in direct sun rays?

5) or any other reason why the PPD had received an over-exposure of radiation.

a. The student may return to the clinical area as soon as it has been approved by the Washington State Radiation Control Office, and/or Yakima Valley Community College radiology staff.

K. *Holidays*

Students will be assigned to work two holidays during their training:

January	-	New Year's Day
January	-	M. Luther King Day
February	-	President's Day
April/May	-	Spring Holiday
May	-	Memorial Day
July	-	Independence Day
Sept.	-	Labor Day
November	-	Veteran's Day
November	-	Thanksgiving
November	-	Day after Thanksgiving

A student will receive compensatory time off, at the rate of one and one half time, from clinic for the holiday assigned.

Students may volunteer to be scheduled for one additional holiday per academic year. Arrangements will be made at the discretion of the clinical coordinator. If a student arranges to do so, compensatory time will be given at the rate of one and one half time, providing the student is not working in order to make up time.

L. *Vacations/Term Breaks*

1. First Year in Clinic

   a. Students will not be assigned to clinic during the fall/winter break of the first quarter.

   b. Students will not be assigned to clinic during one week of the winter/spring break.

1. Second Year in Clinic

   a. Students will receive two weeks of vacation during the summer.

   b. Students will be assigned to clinic during the fall/winter break of the second year. One week of vacation will be scheduled the week of Christmas.

   c. Students will not be assigned to clinic during one week of the winter/spring break.

M. ***Employment***

1. Students are strongly discouraged from holding an outside job while in the R.T. Program. However, if an outside job is held, clinic scheduling WILL NOT be changed for the convenience of any student.

2. A student may have an opportunity to be employed by a clinical education center or other radiology departments for relief work or call. Y.V.C.C. is not responsible for such employment. The transaction is a private agreement between the student and employing institution. Y.V.C.C. **WILL NOT** be held responsible for any action taken by the student while employed.

3. Chapter 246-926-WAC (Washington Administrative Code)

   It has been determined that a student while enrolled in an approved school may administer ionizing radiation. If said student takes call or works outside of school hours, they must apply for registration prior to applying ionizing radiation. See section "N" of this manual for information regarding registration.

N. ***Program Completion***

1. Students will be assigned to clinical practicum through spring quarter.

2. In order to qualify to take the American Registry of Radiologic Technologists (ARRT) Exam, students must successfully complete all aspects of the R.T. Program and fulfill Yakima Valley Community College financial obligations.

O. ***Chapter 18.84 WAC Registration/Certification***

1. The intent and purpose of this law is to protect the public by certification and registration of practitioners of radiologic technology. This will be done by regulating all persons utilizing ionizing radiation on human beings by identifying those practitioners who have achieved a particular level of competency.

2. Copies of the law and codes may be obtained by contacting the following:

   Department of Health
   1112 S.E. Quince Street
   P.O. Box 47865
   Olympia, Washington 98504-7865

P. ***Allegations Of Program Non-Compliance with the JRCERT Standards***

The Joint Review Committee on Education in Radiologic Technology accredits the program. A copy of the Standards for an Accredited Educational Program in Radiologic Sciences is available upon request.

Allegations of non-compliance with the JRCERT Standards may be sent to the JRCERT, 20 N. Wacker Dr., Suite 900, Chicago, IL 60606-2901 with a copy to the program coordinator. The program coordinator will subsequently respond to the allegation/s within two weeks of receiving the written document. The response will be given to the originator of the allegation and to the JRCERT. If resolution is not obtained, a meeting with the originator and the program coordinator will be scheduled with the divisional dean.

Student Exposure-Injury Policy for Clinical Setting

Students participating in clinical practicum may be at risk for exposure or injury to communicable diseases. The goal of the faculty is to preserve the health and safety of students, clients, and faculty in any clinical setting. The purpose of this policy is to provide guidance to both the student and the clinical faculty regarding procedures, rights, and responsibilities in the event of student exposure/injury.

Prevention of Transmission of Communicable Disease with Accidental Exposure

An exposure is an occurrence in which a person is subjected to an infectious agent in such a way that could lead to acquisition of a disease. Should exposure to infectious disease (such as TB) occur, the clinical faculty and/or agency clinical supervisor (on site clinical instructor) will supply information regarding the appropriate protocol. Should a puncture wound or other bloody body fluid exposure to mucous membrane/open skin area occur, the student should implement the following procedures:

ALL needle sticks or bloody or body fluid splash to mucous membrane or open skin should be treated as if there is a potential risk of pathogen exposure.

1. If the student sustains a puncture wound:
   A. Withdraw needle or other object immediately.
   B. Immediately wash hands/area of puncture wound using soap and water.
   C. Encourage increased bleeding for a few seconds, then use gentle pressure at the site of the puncture.
   D. Wipe away any blood and follow up with application of povidone iodine and/or equivalent medication.

1. If the student receives a spray or splash of body fluids:
   A. To eyes, nose or mouth – irrigate with a large amount of water.
   B. To a break in the skin, follow procedure for puncture wound (#1 above).

1. The student will report the incident immediately to the clinical instructor, to the agency clinical supervisor, and to the agency infection control Practitioner/Safety Office/Employee Health Services. The student must complete an exposure form according to the policy of the clinical agency.

2. The student will follow the clinical agency's procedures for reporting and follow-up of the exposure. Any required incident report should be completed before leaving the facility.

3. The student will seek a risk assessment and determination of recommended screening, treatment and/or follow up from the Infection Control Practitioner, clinical supervisor, or other health care provider (if there is no infection control person/clinical supervisor in agency). Information
   regarding the need for serum globulin (HBIG-hepatitis B immune globulin), Hepatitis B Vaccine, HIV testing, and tetanus immunization or other recommended treatment should be discussed.

4. The student should seek assistance from a health care provider of their choice within 2 hours of the exposure.

5. Copies of the risk assessment findings and/or physician's report with recommendations for future follow up, if applicable, should be maintained in student's program file at YVCC.

MOST AGENCIES WILL CHARGE A FEE FOR ANY TESTING OR HEALTH CARE. IF THERE IS A FEE FOR ANY SERVICES, THE STUDENT WILL BE RESPONSIBLE FOR THE COST.

Procedure for Reporting a Sustained Exposure-Injury

1. The student will immediately notify the agency staff (on-site instructor) responsible for the student in that agency of the incident.

2. The student will also notify the clinical coordinator within one day of exposure.

3. The student will follow the agency policy for reporting an injury, which may include completion of an incident or occurrence report, evaluation of the injury by the agency's employee health service or emergency department.

4. The clinical faculty member will assist the student in reporting and accessing agency resources necessary for risk assessment, referral for screening, testing and/or treatment.

5. The clinical faculty will complete the Student Exposure-Injury Report form, including student signature, and forward the completed form to YVCC for placement in the student's program file.

Faculty Responsibility

- Assist the student in completion of required reports and evaluation as required by the clinical agency policy.
- Assist the student accessing risk assessment.
- Inform the student of his/her rights and responsibilities and the required procedures.

Assist the student to analyze the occurrence regarding implications, if any, for future practice

STUDENT EXPOSURE-INJURY REPORT

Student Name: _____

Date of Incident: _____

Clinical Faculty: _____

Description of Exposure-Injury:

_____

_____

Student Signature Date

_____

Faculty Signature Date

Upon completion, this form will be placed in the student's program file.

YAKIMA VALLEY COMMUNITY COLLEGE
WORKFORCE EDUCATION DIVISION

ELECTRONIC COMMUNICATION POLICY FOR YVCC STUDENTS

At Off-Campus Lab/Clinical/Practicum/Fieldwork Sites

Standards of Use:

- ☐ Computer equipment, software, and Internet are to be used in support of the mission of the college and/or affiliated site.
- ☐ YVCC students are expected to limit the use of computers, software, and Internet to work-related functions.
- ☐ YVCC students must follow the Internet and computer-use policies of the affiliated organization(s) in which they are placed.
- ☐ YVCC students shall use standard Internet etiquette.

Restrictions on Use:

- ☐ Recreational use of the equipment, software, and the Internet is expressly forbidden.
- ☐ No YVCC student will transmit or make accessible any offensive, annoying or harassing material.
- ☐ Unauthorized installation of software or changing/altering of software is strictly forbidden.

Disciplinary Action:

- ☐ Violations of this policy will result in immediate dismissal from the affiliated site.
- ☐ Violation of this policy will result in suspension from the lab and referral to the Program Director and/or YVCC Dean of Students for possible disciplinary action, which may include probation, suspension, and/or termination from the program.
- ☐ Violations may result in the inability to complete educational program requirements.
- ☐ Legal violations will be reported to the FBI, the Secret Service, Human Rights, Auditing and Control, and/or the Attorney General's Office.
- ☐ Violators are subject to: disciplinary actions, civil proceedings and/or criminal prosecution.

The following types of activities are examples of unacceptable behaviors, which may violate state or federal law:

1. Altering system software or hardware configurations,
2. Misrepresenting one's identity in educationally-related electronic communication or any other non-permitted electronic communication,
3. Violating copyright and/or software agreements,
4. Using YVCC or affiliated site computing resources for the viewing, transmitting, or storing of material that could be found to be obscene or harassing,
5. Using YVCC or affiliated site computing resources for commercial or profit-making purposes, and
6. Violating YVCC or affiliated site system policies, procedures, or protocol.

YVCC Student User Agreement:

I have received a copy of the Yakima Valley Community College Workforce Education Division Electronic Communication Policy for YVCC Students at Off-Campus Lab/Clinical/Practicum/Fieldwork Sites. I understand that this policy applies to me. I have read the document and agree to follow all policies and procedures contain therein. I agree to abide by the standards and restrictions in the document for the duration of my affiliation with YVCC. I am aware that violations of this policy may subject me to disciplinary action, up to and including, discharge from the college and/or civil and/or criminal proceedings.

Revised 5/2003

RADIOLOGIC SCIENCES STUDENT AGREEMENT

As a student of the department of Radiologic Sciences, I understand that to pursue an Associate of Applied Sciences Degree in Radiologic Technology, I must agree to and abide by the policies and procedures outlined in the Student Policy Manual in use upon admittance. Furthermore, I agree to adhere to the following:

1. Be prepared for lab by having viewed the designated audiovisuals and/or read the assignment before the procedure(s) are demonstrated and practiced in lab.
2. Arrange for satisfactory completion of each module and/or assignment before progressing to the next module or assignment.
3. When assigned to clinic, be responsible and give care to my assigned patients and meet objectives previously introduced.
4. Abide by all rules and regulations of the clinical education center.
5. Be present and prepared for all conferences, tests and other scheduled classes.
6. If requested, bring a physician's excuse for my illness.

7. Make up all missed assignments after consulting with my instructor as to how the objectives are to be met.

I further understand that the following may result in probation or dismissal to be determined by the faculty or Faculty Review Committee:

1. Failure to comply with policy and procedures of the program or to adhere to the ARRT Radiologic Technology Code of Ethics as defined in the Student Policy Manual.
2. Unexcused absence from clinic or class.
3. Failure to achieve the competency test or meet the criteria of competency required for graduation.
4. Failure to achieve the academic standards specified in the Student Policy Manual.
5. Excessive absenteeism or excessive tardiness in class, lab or clinic.
6. Unsatisfactory clinical evaluation ratings.
7. Unsatisfactory performance as determined by one or all of the following criteria: frequency of occurrence; seriousness of the infraction; identifiable major deficiencies in a given area of performance; dishonesty, including lying or cheating.
8. Failure to adhere to the Dress Code as specified in the Radiologic Sciences Policy Manual.
9. Failure to adhere to the "Code of Conduct During Examinations" as specified in the Radiologic Sciences Policy Manual.
10. Failure to abide by published policies or procedures of Clinical Education Centers.
11. Failure to abide by campus and clinical computer policies.

HONESTY IN ALL MATTERS, BOTH ON CAMPUS AND IN THE CLINICAL AREAS, IS THE EXPECTED BEHAVIOR. FINDING A STUDENT GUILTY OF CHEATING OR DISHONESTY IN ANY FORM, WILL BE CAUSE FOR CONSIDERATION OF DISMISSAL FROM THE RADIOLOGIC SCIENCES PROGRAM.

PROGRESSIVE DISCIPLINE

The purpose of progressive discipline is to alert the student to performance deficiencies and give them the opportunity to improve. It also provides a procedure to ensure due process.

Progressive discipline is outlined below:

- Informal oral session
- Written notice(s)
- Probation *
- Suspension *
- Dismissal *

* *Technical assistance may be sought from appropriate college personnel.*

It must be understood that these steps may vary depending on the severity of the policy infractions. Students will be expected to abide by conditions outlined in progressive discipline correspondence.

Faculty members make every attempt to assist students during this process, i.e. counseling may be recommended for personal problems and the program may grant leave of absences. Clinical education center supervisors will be apprised of any educational concerns and actions being taken. However, for ethical and professional reasons, supervisors can only be told of actions that will involve them on a need to know basis.

Upon acceptance into the Radiologic Sciences Program at Yakima Valley Community College, I agree to conform to the rules and regulations of the program as specified in this agreement. I understand that progressive disciplinary steps will be applied if I fail to do so.

_____ _____

Student's Signature ***Date***

RADIOLOGIC SCIENCES

STUDENT CLINICAL EDUCATION AGREEMENT

An integral part of the curriculum for Radiologic Sciences is clinical practicum. Students must demonstrate proficiency in patient care, equipment operations, and radiographic procedures. To accomplish this, students are systematically rotated through imaging departments for approximately 1800 hours of experience during the twenty-four month program. The following is a schedule for the clinical assignments. Rotation through the varied shifts is on a monthly basis:

CLINICAL SHIFTS

First Year:

Summer Quarter: Academic classes on campus.
Some courses may be taken during the pre-RT year.

Fall Quarter: Academic and professional technical courses Mon. – Fri. on YVCC campus. Orientation to clinical practicum.

Winter Quarter:

Mon, Wed, Fri. Academic and professional technical courses on campus.

Tues., Thurs. Clinical Practicum (X-Ray Departments). Two-8 hour shifts per week. Days, evenings, or weekend assignments. Shifts may vary slightly.

Spring Quarter:
Mon, Wed, Fri. Academic and professional technical courses on campus.

Tues., Thurs. Clinical Practicum (X-Ray Departments). Two-8 hour shifts per week. Days, evenings, or weekend assignments. Shifts may vary slightly.

Second Year:

Summer Quarter: June 20 - September 20
40 hours per week. Days, evenings, or weekend assignments. Shifts may vary slightly.

Fall Quarter: September – January. Clinical Practicum (X-Ray Departments). Thirty-two hours per week. Days, evenings, or weekend assignments. Shifts may vary slightly. One – 5 credit academic course.

Winter Quarter:
Tues., Thurs. Academic and professional technical courses on campus.

Mon, Wed, Fri. Clinical Practicum. (X-Ray Departments). Three-8 hour shifts per week. Days, evenings or weekend assignments. Shifts may vary slightly.

Spring Quarter:
Tues., Thurs. Academic and professional technical courses on campus.

Mon, Wed, Fri. Clinical Practicum (X-Ray Departments). Three-8 hour shifts per week. Days, evenings or weekend assignments. Shifts may vary slightly.

Students may be assigned to clinical practicum in the following education centers:

Yakima Cohort
Family Medicine of Yakima
Orthopedics Northwest and Fracture Clinic
Providence Toppenish Hospital
Providence Yakima Medical Center
Sunnyside Community Hospital
Yakima Valley Memorial Hospital
Others if departments become affiliated with YVCC

Tri-Cities Cohort
Kadlec Medical Center
Kennewick General Hospital
Lourdes Medical Center
Tri-City Radiology

Because of the varied clinical assignments, it would be difficult, if not impractical, to hold an outside job or be otherwise involved with anything that would interfere with these assignments.

Upon acceptance into the Radiologic Sciences Program at Yakima Valley Community

College, I hereby agree to conform to the rules and regulations of the Clinical Education Centers and Yakima Valley Community College. Furthermore, I acknowledge the fact that I will be assigned to a variety of shifts in completing my clinical experience.

_____ _____

Student's Signature Date

RADIOLOGIC SCIENCES

APPEAL PROCESS

In the event a student disagrees with a position taken by the program relative to dismissal for reasons ***other than academic or clinical competency,*** the following appeal process is to be adhered to.

Step #1 If the student wishes to appeal the dismissal action, an intent to appeal will be filed in writing, specifying the reasons for appeal, with the program coordinator within one week of dismissal notification.

Step #2 The appeal will be heard by the Clinical Education Centers Supervisor's Review Committee. Every reasonable attempt will be made to conduct the meeting within two weeks of written notification of the appeal.

Step #3 Further appeal can be initiated through the Dean of Workforce Education Division.

Radiologic Sciences

Program Reentry Policy

Academic Situations

Students who have been dismissed from the Radiologic Sciences Program for academic reasons may apply for program reentry. Reentry will be considered only if the student's clinical performance has been satisfactory. Reentry could be granted if faculty members determine extenuating circumstances contributed to the poor academic performance and their influences can be or have been remedied. Reentry will not be possible for at least one quarter from date of exit and may not occur for up to one year. Reentry date will be established on a case-by-case basis.

The process for reentry application is outlined below:

Submit written request for program reentry consideration within two weeks of program dismissal to the program coordinator.

The request must:

- Document the extenuating circumstances that contributed to poor academic results, accompanied by substantiating evidence.
- Outline a plan, which resolves the extenuating circumstances.
- Identify a study plan to achieve academic success.

Students will be notified of faculty response within two weeks of receipt of application.

If a student is permitted to reenter the program, the student will do so on a probationary status. Failure to abide by program policies, course expectations, and/or achieve a minimum grade of "C-," or as otherwise specified, in any course required for the Associate of Applied Science Degree in Radiologic Technology will be immediately terminated from the program without the possibility of program reentry.

Discipline Situations

If a student is dismissed from the program for reasons other than academic or clinical competency, consideration for program re-entry may be given. The Faculty/Clinical Education Centers Supervisors Review Committee will consider requests for re-entry. The student should consult the program coordinator for instructions.

POSTSCRIPT

The faculty recognizes the difficulties students may face in completing curriculum requirements for Radiologic Sciences. Please remember, in being accepted, you fulfilled rigid entry requirements. With continued dedication and commitment, you will succeed.

If problems do arise and you need assistance, don't hesitate to seek help from the faculty. Counselors are also available in the Counseling Center. These people are professionals and have a broad background to assist you. All information is strictly confidential.

Description of Exposure-Injury:

_____

_____ _____

Student Signature Date

_____ _____

Faculty Signature Date

Upon completion, this form will be placed in the student's program file.

Yakima Valley Community College

Radiologic Sciences

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

- Reviews the request for examinations in relation to the student's achievement.
- Evaluates the condition of the patient in relation to the student's knowledge.
- Is present during the conduct of the examination.
- Reviews and approves the radiographs.

After competency has been achieved, imaging procedures may be performed under **indirect supervision** of a qualified practitioner. The radiographer:

- Reviews the request for examinations in relation to the student's achievement.
- Must be in the immediate vicinity of the examination room but does not have to oversee the procedure.
- Reviews and approves the radiographs.

Yakima Valley Community College

Radiologic Sciences

"Quality Patient Care"

Repeat Radiograph Policy

Unsatisfactory radiographs shall be repeated only in the presence of a qualified radiographer, regardless of the student's level of competency.

Yakima Valley Community College

CRITERIA FOR PROCEDURE COMPETENCY TESTING

1. Each student is provided with a list of required competencies for each quarter.

2. The student should ask a RT or instructor to demonstrate each required procedure.

3. The student should practice the procedure test. The student should perform the procedure they will test on at least once before asking the RT or instructor to test them.

4. When the student is ready, they will ask a RT to test them on the procedure. If they achieve 80% or more, they will receive a passing competency.

5. The demonstration, practice and competency testing must occur on separate dates.

Radiologic Sciences Program

Student Exposure-Injury Policy for Clinical Setting

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ALL needle sticks or bloody or body fluid splash to mucous membrane or open skin should be treated as if there is a potential risk of pathogen exposure.

1. If the student sustains a puncture wound:

A. Withdraw needle or other object immediately.
B. Immediately wash hands/area of puncture wound using soap and water.
C. Encourage increased bleeding for a few seconds, then use gentle pressure at the site of the puncture.
D. Wipe away any blood and follow up with application of povidone iodine and/or equivalent medication.

1. If the student receives a spray or splash of body fluids:

A. To eyes, nose or mouth – irrigate with a large amount of water.
B. To a break in the skin, follow procedure for puncture wound (#1 above).

1. The student will report the incident immediately to the clinical instructor, to the agency clinical supervisor, and to the agency infection control Practitioner/Safety Office/Employee Health Services. The student must complete an exposure form according to the policy of the clinical agency.
2. The student will follow the clinical agency's procedures for reporting and follow-up of the exposure. Any required incident report should be completed before leaving the facility.
3. The student will seek a risk assessment and determination of recommended screening, treatment and/or follow up from the Infection Control Practitioner, clinical supervisor, or other health care provider (if there is no infection control person/clinical supervisor in agency). Information regarding the need for serum globulin (HBIG-hepatitis B immune globulin), Hepatitis B Vaccine, HIV testing, and tetanus immunization or other recommended treatment should be discussed.
4. The student should seek assistance from a health care provider of their choice within 2

hours of the exposure.
5. Copies of the risk assessment findings and/or physician's report with recommendations for future follow up, if applicable, should be maintained in student's program file at YVCC.

MOST AGENCIES WILL CHARGE A FEE FOR ANY TESTING OR HEALTH CARE. IF THERE IS A FEE FOR ANY SERVICES, THE STUDENT WILL BE RESPONSIBLE FOR THE COST.

Procedure for Reporting a Sustained Exposure-Injury

1. The student will immediately notify the agency staff (on-site instructor) responsible for the student in that agency of the incident.
2. The student will also notify the clinical coordinator within one day of exposure.
3. The student will follow the agency policy for reporting an injury, which may include completion of an incident or occurrence report, evaluation of the injury by the agency's employee health service or emergency department.
4. The clinical faculty member will assist the student in reporting and accessing agency resources necessary for risk assessment, referral for screening, testing and/or treatment.
5. The clinical faculty will complete the Student Exposure-Injury Report form, including student signature, and forward the completed form to YVCC for placement in the student's program file.

Faculty Responsibility

- Assist the student in completion of required reports and evaluation as required by the clinical agency policy.
- Assist the student accessing risk assessment.
- Inform the student of his/her rights and responsibilities and the required procedures.
- Assist the student to analyze the occurrence regarding implications, if any, for future practice.

STUDENT EXPOSURE-INJURY REPORT

Student Name: _____

Date of Incident: _____

Clinical Faculty: _____