Student Policies & Procedures Manual for the Administration of the Radiologic Technology Program

August 2018
Revised August 2019

NORTHEAST IOWA COMMUNITY COLLEGE ABIDES BY ALL STATE AND FEDERAL EQUAL OPPORTUNITY AND NON-DISCRIMINATION REGULATIONS.
Welcome

On behalf of the radiology faculty and staff at Northeast Iowa Community College, I want to extend a warm welcome. We are pleased that you have selected NICC for your radiologic technology education. Our program has a long tradition of providing quality radiologic technology education. Upon completion of the program, you will have the opportunity to apply for graduation with an Associates in Applied Science Degree in Radiologic Technology and take the American Registry of Radiologic Technologists board exam (ARRT) (www.arrt.org). When you successfully complete this national board exam, you will be a Registered Technologist in Radiography. Individual states have different licensure/permit to practice standards. The Iowa Department of Public Health Radiological Bureau oversees the Iowa Permit to Practice in Radiology (www.idph.state.ia.us).

Northeast Iowa Community College Radiologic Technology Program graduates pass the ARRT exam at or above the national average. Our graduates are well prepared to enter the workforce and are recognized as excellent and safe practitioners by the community and employers. Graduates express appreciation for a quality education and a rewarding career with diverse employment opportunities.

The Northeast Iowa Community College Radiologic Technology program is accredited by the Joint Review Committee in Education in Radiologic Technology (JRCERT) www.jrcert.org. A copy of the accreditation standards is available at www.jrcert.org and in Appendix A of this manual.

This Policy and Procedure Manual is intended to provide you information and guidance regarding the program curriculum and policies. Please familiarize yourself with it and refer to it available as a reference throughout the two years.

This manual is designed to answer most of your questions; however, if you have additional questions or need clarification on any topic pertaining to your role as a radiography student at NICC, please contact any of the program faculty for assistance. In addition, please remember that this manual builds upon college policies and procedures found in the NICC College Catalog and at www.nicc.edu.

Again, we welcome and thank you for choosing Northeast Iowa Community College for your radiologic technology education!

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Radiologic Technology Program Administration

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563-556-5058 (fax)

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Dawn Hedrick
Melissa Ebbinghouse
Carmen Phillips
Callie Herbers
Keith Kluesner
Nancy Odefey
Karen Bird

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Allied Health Administrative Assistant
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Compliance Auditor
Danielle White  Ext. 346  whited@nicc.edu

Clinical Sites
Finley Hospital  (563) 589-2402
Mercy Medical Center – Dubuque Center  (563) 589-9040
Mercy Medical Center – Dyersville Center  (563) 875-2952
Medical Associates-East Campus  (563) 584-3135
Medical Associates-West Campus  (563) 584-4361
Medical Associates-Platteville  (608) 348-6266
Monroe Clinic (Monroe, WI)  (608) 324-1333
Midwest Medical Center (Galena, IL)  (815) 777-6135
Southwest Health Center (Platteville, WI)  (608) 348-2331
Jackson County Regional Health Center (Maquoketa, IA)  (563) 652-2474
Guttenberg Municipal Hospital (Guttenberg, IA)  (563) 252-1121
Upland Hills Health (Dodgeville, WI)  (608) 930-7146
Crossing Rivers (Prairie Du Chien, WI)  (608) 357-2244
Student Resources

Peosta Campus

NICC Counseling Services .................................................................Ext. 215
NICC Learning Center........................................................................Ext. 331
Learning Resources Coordinator (Library).........................................Ext. 269
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Extra Help

Instructors are available, by appointment, to assist with questions regarding study materials. The Learning Center is available for any student who desires to improve reading, writing, and language skills or study habits. Tutoring may be available through the Learning Center. Both of these services are provided at no cost to the student.

Counseling

Any student experiencing personal problems during the school year is encouraged to seek assistance from the Counselor on campus, located in Student Services, as it is important to solve problems before they begin to affect school performance. There is no charge for this service.
About This Manual

Purpose

This manual is intended to provide you information and guidance regarding your chosen program curriculum and policies. Please familiarize yourself with it and keep it available as a reference throughout the year. If you have additional questions or need clarification on any topic pertaining to your role as a student at NICC, please contact your Program Director. No rule or statement in this manual is intended to discriminate.

Student Responsibilities

Each student is responsible to review the information presented in this handbook and comply with the college and department policies and procedures. Failure to read this information will not be considered an excuse for noncompliance. This manual builds upon college policies and procedures found in the NICC College Catalog. Make sure you have received your copy of this important and useful resource.

Northeast Iowa Community College Catalog

Prior to program entrance, you are strongly encouraged to review the following policies in the College Catalog:

- Drug-Free Policy
- Tobacco-Free Policy
- Life Threatening Disease Policy
- Bloodborne and Infectious Diseases
- Discrimination, Harassment or Retaliation Policy
- Sex Offender Notification Policy
- Campus Emergencies
- Campus Security
- Financial Aid
- Academic Policies and Information
- Student Services and Resources
- Student Rights and Responsibilities
- Student Conduct Code

Student Responsibility for Catalog Changes

Each student is responsible for being familiar with the information and policies appearing in the College catalog. The College catalog is available at [www.nicc.edu/catalog](http://www.nicc.edu/catalog). Northeast Iowa Community College reserves the right to change policies or procedures or revise the information contained in the catalog at any time. Students should refer to the online catalog for the most current College policies and processes. Failure to read the policies and procedures will not be considered an excuse for non-compliance. Should the institution feel obligated for reasons including, but not limited to, low enrollment or financial constraints, the College reserves the right to terminate any courses or programs from its offerings. The College reserves the right to change policies or revise curricula as necessary due to unanticipated circumstances.
General College Information

NICC Mission Statement

NICC is Student Driven and Community Focused

Northeast Iowa Community College provides in-demand education and training focused on improving lives, driving business success and advancing community vitality.

NICC Vision Statement

Northeast Iowa Community College will be the premiere source for in-demand education, workforce training and partnerships, through innovative thinking and talent development.

Service: We listen, identify and respond to the needs and expectations of our internal and external communities.

Respect: We show consideration for one another and encourage diverse perspectives to build trust, cooperation and accountability.

Stewardship: We use our resources in a responsible, impactful and sustainable manner.

Innovation: We foster the development and advancement of ideas though individual and team creativity.

Integrity: We are ethically accountable to ourselves and others.

Resiliency: We learn from our experiences, refocus and seize the opportunity to improve and persist.

NICC's Common Learning Outcomes (CLOs)

1. Think Critically:
   a. Locate, interpret, and use information effectively; and/or
   b. Use intellectually disciplined processes (conceptualizing, applying, analyzing, synthesizing, and evaluating) to solve problems.

2. Communicate Effectively:
   a. Convey information through verbal, written, technological, or visual means.

3. Apply Knowledge and Skills to Life:
   a. Utilize workforce readiness skills: (technical and soft-skills); and/or
   b. Apply the principles of mathematics, science, humanities, and technology in personal, academic, and working-world situations; and/or
   c. Manage finances effectively.

4. Value Self and Others:
a. Work cooperatively as a member of a team; and/or  
b. Appreciate diversity and its benefits; and/or  
c. Make ethical decisions that respect the rights, values, and beliefs of others.

**Statement of Principles of Sound Ethical Practice**

The Northeast Iowa Community College Radiologic Technology Program is approved by the Joint Review Committee in Education in Radiologic Technology (JRCERT). In addition, Northeast Iowa Community College has approval from the North Central Association of Colleges and Schools (NCA). The standards and curricula of the radiologic technology program are formulated and implemented to promote excellence in caring for the public. The following practices shall be adhered to by NICC administration and faculty:

1. In recruitment activities, objectivity and the presentation of accurate information shall be the goal.
2. The college website (www.nicc.edu) will provide accurate information about requirements for admission, promotion and graduation, cost of the program, and the curriculum.
3. The candidate will be notified promptly regarding his/her eligibility for admission.
4. The educational program will ensure that all students have the opportunity to participate and/or share in like experiences.
5. The provisions of the Civil Rights Act shall be adhered to.
6. All those with access to confidential information regarding a student will respect completely the confidential nature of such data.
7. The school shall acquaint the student with written policies for dismissal, promotion and graduation, and shall abide by its written policies.
8. Students will be informed in writing of changes in program policy before these changes become effective.
9. Students will be notified promptly of pending dismissal for any reason. Students seeking to appeal a dismissal are to follow the college approved process.
10. The student shall not be prohibited from graduation and making application for the licensing examination provided all requirements are met.

**Non-Discrimination Statement**

It is the policy of Northeast Iowa Community College not to discriminate on the basis of race, color, national origin, sex, disability, age (employment), sexual orientation, gender identity, creed, religion, and actual or potential parental, family or marital status in its programs, activities, or employment practices as required by federal and state civil rights regulations. If you have questions, concerns or to read the full policy at: [https://www.nicc.edu/aboutnicc/nondiscriminationpolicy/](https://www.nicc.edu/aboutnicc/nondiscriminationpolicy/).
Admission Policies and Procedures

College Admission

Northeast Iowa Community College (NICC) has an open admission policy and admits any person who can benefit from a program of study. Acceptance to the College, however, does not mean acceptance to all courses or academic programs; review the Selective Admissions Programs policy below. Applicants may be required to take preparatory coursework, participate in a program interview or satisfy a minimum placement test score prior to entering specific college courses or programs.

NICC reserves the right to evaluate requests for admission and to refuse admission to applicants when considered to be in the best interest of the College. NICC may require a person to provide a medical statement from a physician for admission to a specific program or when it is otherwise in the best interest of the student and/or the College.

Entrance Testing

All students must complete entrance testing prior to being accepted to the college. Acceptable entrance tests include ACCUPLACER, ALEKS, ACT, SAT, Compass or completion of approved college coursework. Students should submit test scores of their official college transcripts to the Admissions Office for consideration of an entrance test waiver.

Pre-Admission Assessment Activities

The following minimum placement test scores are required to enter the program.

<table>
<thead>
<tr>
<th>Test</th>
<th>Reading</th>
<th>Math</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACCUPLACER</td>
<td>70</td>
<td>N/A</td>
</tr>
<tr>
<td>ALEKS</td>
<td>N/A</td>
<td>30</td>
</tr>
<tr>
<td>ACT</td>
<td>19</td>
<td>N/A</td>
</tr>
<tr>
<td>COMPASS</td>
<td>81</td>
<td>N/A</td>
</tr>
</tbody>
</table>

Applicants scoring below the minimal requirements have the following options:

Alternative to the Reading Test

If a student earns a C- grade or better in one of the following courses, the reading requirement for acceptance into the program will be waived. (Courses: Introduction to Sociology, Introduction to Psychology, or Developmental Psychology).
Alternative to the Math Test

If a student earns a C- grade or better in Basic Math or Pre-Algebra or a higher level math course, the math requirement for acceptance into the program will be waived.

Test scores are valid for five years after the date of testing.

Those applicants scoring below the math requirements have several options:

- Working in one of the NICC Learning Centers to improve test taking skills and reviewing subject material. Learning Centers are located at the Calmar and Peosta campuses and at the Dubuque Center.
- Participating in independent study with review packets provided by the NICC Testing Center. These packets can be requested in the Testing Center or by calling one of the Testing Center Assessment Technicians. These packets can be mailed to those who request them.
- Applicants who are unable to participate in these activities are encouraged to be involved in self-directed review which may improve test scores. Sources for assistance include: another local community college, the local public library (for review materials), the local K-12 school district (contact with former teachers and/or those who may be willing to provide review advice or tutoring), private tutoring, and other sources that may be available locally.

When an individual feels prepared to retake the necessary test, scheduling should be arranged by calling one of the Testing Center Assessment Technicians. This first retest may be administered two weeks after the date of the original test. The individual taking the test must determine personal readiness.

If scores on the first retest are not sufficient for enrollment in the desired course or program, applicants must wait at least six weeks from the date of the original test before taking the second retest. Approval of the second retest is at the discretion of the Vice President of Learning and Student Success. Approval will be based upon the determination that the student has a reasonable opportunity to qualify for a higher-level course.

If the student is unsuccessful after the second retest, a one year waiting period from the original test date is required.

Previous College Experience

Admission assessment requirements may be waived based on prior courses taken (successful completion of Basic Math or above and College Comp I), credits earned, and grades received. Please have official transcripts sent to the Admissions Office of the campus you plan to attend for determination of the assessment waiver.
Credit Transfers

The coursework completed at another institution may be considered for transfer if it meets the content, course hours, and satisfactory grades. Transfer students who want credit for previous coursework must provide the Admissions Office an official transcript from each college and/or university attended.

A. No academic credit will be granted for non-academic experimental training.

B. The request for transfer of credit needs to occur prior to program entrance.

C. The Allied Health division will accept CLEP exams (with a C- grade or higher) for transfer credit in courses as listed below. For all CLEP Subject Exams, the 50 percentile will be established as the minimum score of degree credit award. Any score at or above the 50 percentile will be transferred in as a C.

<table>
<thead>
<tr>
<th>CLEP Exam</th>
<th>Courses</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Psychology</td>
<td>PSY:111 Introduction to Psychology</td>
<td>3</td>
</tr>
<tr>
<td>Human Growth &amp; Development (if computer based and taken after 7/1/01)</td>
<td>PSY:121 Developmental Psychology</td>
<td>3</td>
</tr>
<tr>
<td>Sociology</td>
<td>SOC:110 Introduction to Sociology</td>
<td>5</td>
</tr>
<tr>
<td>English Composition</td>
<td>ENG:105 Composition I</td>
<td>3</td>
</tr>
</tbody>
</table>

Selective Admissions Programs

In addition to the college admission procedures, some academic programs have specific admission requirements found on the individual program pages within the College catalog. The program admission requirements ensure the student possesses the potential to complete the program successfully. After all admission requirements have been completed, applicants will be considered for acceptance to the program on a first-come, first-served basis. A person who does not meet the requirements for a specific academic program may become eligible after completing appropriate coursework or re-testing on the Compass assessment. Many selective admissions programs have limited enrollment, so applicants should apply well in advance of the semester they plan to enroll.

Remediating Status

Students who have completed the NICC application for admission, but have not completed one or more of the program admission requirements outlined above are classified as “remediating.” Students with a remediating status are not ranked on the program waitlist until all the above requirements have been satisfied.
Waitlisted Status
Students who have all the admission requirements completed and are waiting for acceptance into the program are placed on a waitlist. A waitlist is necessary due to limited capacity for enrollment in the program. Students are ranked on the waitlist based on the date they completed all admission requirements.

Accepted Status
Students at the top of the waitlist will be offered entry into the program and are required to respond to the Admissions Office if they are interested in enrolling in order to avoid cancellation of their application. Students who refuse an acceptance offer will be placed at the bottom of the waitlist as of the date admissions receives notice of their intent not to enroll. Students who do not reply to the confirmation request sent out by Admissions to confirm their intent by the designated date will be moved to the bottom of the waitlist.

Allied Health Programs
Northeast Iowa Community College (NICC) reserves the right to deny acceptance to any health care program per agency policy. Students in health care programs are required to comply with any and all policies and procedures created and implemented by NICC and its clinical/field affiliates. Students are advised that any and all health care facilities associated with NICC may deny admission to or remove any student placed in the facility if, at the discretion of the health care facility, the admission of the student or the continued presence of the student would present or continue a risk to the health care facility or any of its patients or employees.
NICC College-wide Policies and Procedures

Accommodations

Northeast Iowa Community College is committed to providing equal opportunities for all students. Students with disabilities are encouraged to contact the Coordinator of Disability Services for assistance. A handbook is available that identifies services that NICC provides to students who may need academic and/or physical accommodations. All students’ needs or requests are dealt with in a confidential manner. Any applicant who needs accommodation in taking a placement test because of a disability must obtain written documentation from the Coordinator of Disability Services and give it to the course instructor at least two business days prior to taking the test. Documentation should be delivered in person to the instructor who is administering the test. Accommodations which can be provided include extended time for testing, a taped version of the test, a private room to minimize distractions, and a scribe to record answers.

It is the student’s responsibility to schedule testing periods in the Testing Center when indicated. Students are strongly encouraged to take their tests at the same time the class is testing. Students who need extended time are encouraged to start 30-60 minutes earlier than the scheduled class time in order to be finished when class resumes. In addition, students are not allowed to leave the testing area until the classroom testing period has started. Students testing at different times during the class may receive a different test. Students are not allowed extended time beyond the accommodation prescription. Students are not allowed breaks during accommodation testing.

Activity Restrictions

Students with activity restrictions will be counseled according to the Iowa Core Performance Standards for Health Professionals. Students must be able to lift 35 pounds without restriction while in the NICC Allied Health programs. Students unable to meet this guideline may be required to withdraw from the course or program.

APA Reference Style

APA format is used for health assignments including resource documentation. The current APA citation manual can be found in MyCampus/Browse Categories/Academics/Library/Research Help/Research Paper Aids/NoodleTools.

Assignments

It is the student’s responsibility to submit assignments by the date/time due according to the instructor’s syllabus. Students who are absent from class may make arrangements with the instructor to have the assignment faxed, mailed, emailed, or dropped off at campus by someone else on the day the assignment was due. Mailed assignments must be post-marked on the due date. Prior to sending an email assignment request a receipt to ensure delivery. It is the student’s responsibility to retain a copy of the submitted assignment.
**Behavior**

Students are expected to comply with policies established by Northeast Iowa Community College. Examples of expected behaviors for students in the classroom, lab, and clinical/field setting are provided:

Students are expected to exhibit mature and professional behavior at all times. Examples of this expectation includes:

- Active participation in class activities;
- Offering assistance to others without prompting;
- Speaking to others in a calm, courteous, polite manner;
- Encouraging others;
- Listening quietly and attentively in class or post-conference;
- Being quiet during testing.

Examples of behaviors that are disrespectful and unprofessional for others includes:

- Arriving late to class/clinical or leaving when class is in session;
- Talking to classmates during lecture, AV presentations and conferences;
- Use of cell phones during class – text messaging, receiving and/or making calls;
- Making rude or sarcastic comments;
- Using profanity anywhere on campus or at clinical/field sites;
- Displaying hostility;
- Using confrontational words or body language;
- Invading the personal space of others;
- Following a student in their car, home, etc. uninvited;
- Threatening or stalking an individual.

Students displaying disrespectful and/or unprofessional behaviors will be removed from the area and referred to the Program Director and/or the Dean of Allied Health for determination of program continuation.

**Bloodborne Pathogen Training**

Each student will be required to do Bloodborne Pathogen training before the beginning of the school year. Information will be given on how to access this training. Documentation is maintained by the program to evidence student competency in this area.

**Campus Closures**

The College makes every effort to post school delays or cancellations for broadcasting on news and radio stations in a timely manner. The College has the capability to notify students and staff of a dangerous situation by email and text messaging using the Rave Alert System. Emails will automatically be generated when a message is sent out. However, you will need to sign up to receive cell phone text messages through NICC Rave Alert. At the beginning and periodically throughout each semester, the invitations will be published by email. Please take advantage of this communication tool of the College. While Rave Alert is a free service, the student’s
wireless carrier may charge a fee to receive messages on your cell phone. This fee is the student’s responsibility.

Listen to the following radio or television stations or check the NICC website under Announcements for official cancellations of Northeast Iowa Community College classes. NICC, Calmar or NICC Peosta campus will be identified specifically in the broadcast. When an announcement is made regarding the Peosta campus, it also includes the Dubuque, Town Clock, and Manchester Centers. Radio and TV stations will continue to announce cancellations at frequent intervals. Please do not call the stations or NICC as all are busy receiving other calls. Late arrivals are an option for stormy days when more time is needed to track a storm’s intensity, clear the parking lot etc. Be aware that the radio and TV announcements will indicate the time of the late start. For example, an announcement saying, “Scheduled classes will begin at 10 a.m.” indicates a two-hour delay. A one-hour delay means classes will start at 9:00 a.m. You will need to continue listening for future announcements, because the College may cancel classes for the day if the storm worsens, winds pick up, etc. Instructors will make the decisions regarding adjusted class hours for late starts.

Radio Stations:
- Dubuque: KDTH, KATFM, KGRR, WVRE, WJOD, WDBQ (FM & AM), KLYV
- Maquoketa: KMAQ (FM & AM)
- Cedar Rapids: WMT
- Waterloo: KWLO, KFMW
- Oelwein: KOEL (FM & AM)
- Elkader: KCTN
- Manchester: KMCH
- Dyersville: KDST

Television Stations:
- Cedar Rapids: KGAN 2, KCRG 9
- Waterloo: KWWL 7

Students are always advised to use their own discretion before venturing out when road conditions may be hazardous.

Cell Phones and Devices

Unauthorized use of cell phones, cameras, and other electronic devices (including but not limited to Apple Watches, other wrist wearable devices, or audio devices) is prohibited in the classroom, lab and clinical/field/practicum settings. All cell phones/devices must be set to silent or turned off during all classroom, lab and clinical/field/practicum times. Students may not use cell phones/unauthorized devices for exams. Having cell phones/unauthorized devices out during testing will be considered cheating.

Cell phones/devices may not be used during assigned clinical/field/practicum times. This means students are not to make or receive any cell phone/device messages or notifications (voice, text, social media, etc.) during these hours. Students are allowed to use cell
phones/devices during scheduled break times, provided the usage is not disruptive to site staff, patients or visitors. Unauthorized use of cell phones/devices will result in clinical/field/practicum dismissal for the assigned shift. The student will not receive credit for competencies obtained or hours completed. Any hours missed for this reason must be made up at the discretion of the Clinical/Practicum Coordinator. Unauthorized use of cell phones/devices may result in dismissal from the program.

Exceptions to this policy will only be granted for short-term, emergent situations and need to be approved by the classroom/lab instructor or clinical/field/practicum preceptor in advance.

Children

Children are not allowed in class, testing, lab or clinical/field areas. Children who are left unattended in any environment on the campus grounds will be considered unsupervised and at risk. Legal intervention may occur on the part of the College. Students who are having difficulty with arranging child care around course responsibilities will be referred to the NICC counselor for assistance.

Class Attendance and Absence

Students will be expected to attend class since many practicum applications and activities are used in the classroom to facilitate and broaden learning. Classroom experiences are interrelated with lab and practicum, and absence from one area will make the student less effective in other areas. If a student must be absent, the student is responsible for obtaining the information missed. If the student misses a test, arrangements to make-up the test must be made with the instructor. The course syllabus will address the number of tests a student is allowed to make-up. Students are not allowed to make-up missed quizzes or graded class activities. Students must call or email faculty prior to the start of class if they are going to be late or absent. Attendance/tardy records will be maintained. Attendance records are used for financial aid information.

Consistent attendance is strongly correlated with student success. Each student is encouraged to attend a minimum of 90% of all classroom time hours. Absences should be reported to the course instructor prior to the class. Tardiness in excess of 15 minutes to class may be considered as an absence for the class. Repeated absences and tardiness will jeopardize a student’s status in the program and any financial aid disbursements.

Computer Usage

Students must have access to a reliable computer. NICC computers are available for student use.

Conflict Resolution

There may be times when students have concerns regarding testing, clinical/field evaluation, program/course policies, faculty or staff, or conditions of the learning environment that are
adversely affecting learning. When students and/or faculty are under stress or in conflict, a nonproductive learning environment results. It is important for students to learn to use a timely and professional process to resolve concerns/conflict in a constructive manner. Problems must be addressed promptly at the time the concern becomes evident. Most issues are relatively easy to resolve when two individuals sit down to discuss issues in a professional manner. As the issue moves up the chain of command, all persons involved will be included in the decision-making process. Students are expected to adhere to guidelines to assist with conflict resolution:

1. Identify the essence of the concern/conflict, clearly stating objective facts as well as the subjective.
2. Attempt to approach the person(s) who is/are directly involved in the concern/conflict in a manner in which you would like to be approached. When the discussion may be lengthy, or privacy is essential, students are encouraged to schedule an appointment with the faculty member during regular office hours.
3. If the concern/conflict remains unresolved, schedule an appointment to meet with the Dean of Allied Health. The SBAR form (found under Forms) should be completed and brought to the meeting.
4. If the concern continues to be unresolved to your satisfaction, procedures exist at NICC for resolving serious issues (refer to College Catalog). The student will be directed to the Counselor, then the Vice President of Learning and Student Success for guidelines in pursuing these procedures.

Course Related Problems

Students are encouraged to maintain open, on-going professional communication with course, clinical/field, and lab instructors. Students experiencing problems with an instructor, are to discuss the problem with the instructor. Students experiencing course problems must discuss their concerns with the instructor who is involved in the course in which the student is enrolled. If further assistance is needed to resolve the issue, the student and involved faculty member(s) will meet with the Dean of Allied Health. If the problem continues to remain unresolved, the student will be informed of further options within the College for review.

Emergencies

In the event of an emergency during school hours, students may be reached by calling the following campus numbers (Calmar: 1-800-728-2256 or 563-562-3263; Peosta: 1-800-728-7367 or 563-556-5110). Department personnel will obtain the needed information and make contact with the program instructor who will reach the student in the assigned area. Students assigned clinical/field hours beyond regular business hours may be contacted at their assigned site.

Fundraising

To access the College’s current fundraising policy, go to MyCampus > Academic Policies.
Gifts
Due to the professional nature of the clinical/field, classroom, and lab experience, students are not to give or to receive any gifts to/from faculty, staff, patients and/or family members.

Graduate Job References
NICC Faculty and staff work closely with students and get to know their abilities, skills, and character. Faculty and staff may provide letters of recommendation or verbal references for employment, based upon their personal observation and knowledge of the student. Written or verbal references will not contain any information found in the student's educational record, e.g. grades, attendance records, number of hours completed, GPA, discipline records, etc.

Graduation Requirements
Credit students are eligible to graduate when they have fulfilled the following requirements:
1. Completed all program requirements.
2. Maintained a cumulative grade point average of 2.0 or better within the Program.
3. Completed all required courses with a minimum grade of “C-” or above.
4. Paid all fees and other financial obligations to NICC.
5. Returned all library materials.
6. Filed a Graduation Application form by the posted deadline.

Students who are within eight credit hours of earning their degree or who are registered in their last term of a program sequence are also eligible to participate in commencement activities.

Hazardous Materials/Waste
The proper handling, storage, and disposal of hazardous materials and waste products is everyone’s responsibility. Contact your instructor immediately if you suspect exposure to, or contact with a hazardous material. Instructors will provide you the following information for any areas in which hazardous materials are in use:

- Safety Data Sheets may be accessed on-line.
- Protective clothing/equipment required for handling the materials
- Proper disposal of used or unwanted materials and waste

Health and Liability Insurance
Due to the regulation of our affiliating agencies, all Nursing and Allied Health students must submit proof of current health insurance coverage and NICC’s Health Insurance Verification form. Students must submit these documents to the Compliance Department via CastleBranch as part of their program requirements. Nursing and Allied Health students must comply with College requirements for the duration of the program and/or at any time they are in an educational clinical/field setting. Students are responsible for maintaining continuous insurance coverage and presenting documentation of changes to the Compliance Department via CastleBranch.
In the event a student is injured while conducting themselves in a reasonable manner during class, lab or clinical/field, the student must notify the instructor or preceptor prior to leaving the area in which the injury occurred. The instructor and/or preceptor will assist the student in completing both the facility and College forms (NICC Medical Incident Report form) and taking corrective actions. The NICC Medical Incident Report form must be filed in the Program Director’s office within 24 hours.

**In the event of an injury, the students personal health insurance will be primarily responsible.**

Students need to be informed of the following related to NICC’s liability insurance coverage:

- Although covered by NICC’s Liability insurance, students still have an obligation to act responsibly. Liability insurance coverage is for “good faith conduct” and will not apply if students act irresponsibly, maliciously, recklessly, or fail to conform to program and health care agency standards, procedures, and/or policies.
- Participation in the program refers to performance while in the NICC student role. No other employment/work or situation is covered.
- NICC’s liability insurance does not cover travel in a non-NICC vehicle.
- NICC’s liability insurance does not replace the need for personal health insurance coverage.

**Health Related Issues**

Specifically: Pregnancy, Trauma, Surgery, Infectious Diseases and Immunocompromised conditions. If a student is subject to one or more of the listed conditions, the College strongly recommends the student submit a healthcare provider's written recommendation as soon as possible for continuation in the classroom and clinical/field settings. The College is not responsible for illness, injuries or infectious contacts in these settings.

Students who have symptoms of a possibly infectious disease should immediately contact their health care provider. Students with diagnosed infectious diseases must notify program faculty immediately to facilitate notification to appropriate agencies by the program administrators. Arrangements will be made for clinical make-ups for students who have documented infectious diseases. Students with documented infectious diseases must obtain a release from their health care provider prior to returning to the class/lab/clinical setting.

The following guidelines are enforced by clinical agencies:

- **Pink Eye (Conjunctivitis)** – Must be on antibiotics for 24 hours and showing improvement in symptoms.
- **Shingles, skin rash, boils, and Impetigo** – Require a doctor’s diagnosis and release before returning to clinical setting/work.
- **Respiratory infections** – Requiring medical treatment – must be fever free for 24 hours before returning to clinical setting/work. Temp must be below 100.4°F, or 38°C.
- **Strep throat** – Must be on antibiotics and fever free (below 100.4°C, or 38°C) for 24 hours prior to returning to clinical setting/work.
- **Diarrhea** – Use good hand washing technique. Must be fever free (below 100.4°F or 38°C) and diarrhea free for 24 hours.

Students who are aware, or have reason to believe they have an infectious disease and intentionally expose health care workers and clients will be immediately terminated from the program.

**Health Status**

It is the student’s responsibility to report changes regarding their health status while enrolled in the program. It is the student’s responsibility to immediately report any personal injuries or client injuries (those under the student’s care) that occurred during didactic, clinical or field rotations to their instructor or preceptor. The instructor or preceptor will then assist the student in completing the required facility/agency and NICC reports.

**HIPAA Awareness Education**

The Health Information Portability and Accountability of Act of 1996 is a federal law dealing with the privacy and security of health information. Complying with the HIPAA rules is mandatory!

- a. There are fines for each violation of HIPAA privacy (and security) safeguards.
- b. There are also possible criminal penalties.

It is Northeast Iowa Community College’s responsibility to provide HIPAA Awareness training for all health care students. Students in any health related program will be required to complete HIPAA Awareness training (as mandated by the HIPAA Act of 1996) before the first clinical course. Violation of the confidentiality guidelines outlined in this training is a critical incident and grounds for termination in the program. Each student will receive HIPAA information at the beginning of the semester. This program will be accessed through NICC’s website. Documentation is maintained by the program to evidence that each student has received this training annually while in the program.

**HIPAA/Confidentiality**

As a student in a health program, contact with confidential and protected health information will occur. This information may be personal, clinical, financial, or other. Information may be computerized (electronic health record), hard copy, or oral in nature.

Examples of confidential information can include, but is not limited to: health records, employee records, financial records, reports, information distributed to work areas, or any other information found in the course of business. Confidential information includes information learned through discussion in clinical practice on and off campus, from employees and medical staff, patients, and patient families or friends.

Students of Northeast Iowa Community College enrolled in a health program shall maintain all aspects of confidentiality. Students are accountable for being aware of the legal implications in
regards to patient privacy and confidentiality rights as per HIPAA guidelines and regulations. The following guidelines are required:

- Confidentiality of patient information must be protected by the student.
- Access to patient information that you are not assigned to for care and/or research is prohibited, including your own personal health information.
- Patient, family, or health related information may not be photocopied or removed from the healthcare setting.
- Security guidelines for accessing and documenting in the electronic record must be followed.

As a student, it is your responsibility to protect the confidential and private information you have contact with. You must protect information from loss, destruction, tampering and inappropriate access and use, including inappropriate disposal.

Any breach of confidentiality or privacy practices represent a failure to meet the legal, professional, and ethical standards and will constitute a violation of this statement. A breach can include any unnecessary, unauthorized, unintentional, or intentional use or disclosure of confidential information due to carelessness, curiosity or concern, for personal gain or malice, and including informal discussion both in the healthcare facility, outside the facility, or at the college. Such breaches will result in disciplinary action which may include program termination and civil or criminal penalties from the college, individuals, or affiliated organizations.

**Housing**

There are no dormitory facilities on the school campus. Housing arrangements are the students' responsibilities.

**Incident/Accidents Reporting Procedures**

All incidents (i.e. drug errors, client falls, etc.) and accidents (student injuries) involving instructors and/or students will be reported according to the following procedure. All reports will be filed in the Dean’s office and in the Business Services Office on the Calmar Campus.

**Instructor Reporting Procedure at NICC**

- Emergency guidelines will be followed for emergent care needed;
- The Dean of Allied Health will receive verbal notification of the incident;
- NICC Incident Report Form will be completed by supervising personnel prior to leaving the area;
- NICC Medical Incident Report Form (found in this manual) will be turned in to the Dean of Allied Health for review;
- NICC Medical Incident Report Form will be forwarded to the Business Office (Calmar) within 24 hours.

**Instructor Reporting Procedure at Clinical Site**

- Emergency guidelines will be followed for emergent care needed;
• The Dean of Allied Health will receive verbal notification of the incident;
• A facility Incident Report Form and NICC Medical Incident Report Form will be completed by supervising personnel prior to leaving the assigned shift;
• A copy of the Facility Incident Report Form (if allowed), and the NICC Incident Report Form will be turned into the Dean of Allied Health for review;
• NICC Medical Incident Report Form will be forwarded to the Business Office (Calmar) within 24 hours.

Student Responsibilities in Reporting

• The student is responsible for reporting all student or client accident/injuries that occur during class, lab or clinical day prior to leaving the area;
  Instructors will assist the student in completing the correct forms and taking corrective actions as indicated by the clinical facility or NICC policy.

Internet and Email

Northeast Iowa Community College provides computing and networking resources to students. You are encouraged to use the computers, software packages, and electronic mail (e-mail) for educational or college-related activities and to facilitate efficient exchange of useful information. Use of the equipment and networks must conform to the policies and procedures of the college and access may be denied to any student who fails to comply with these requirements. Social networking sites (i.e. Facebook, Snapchat, Instagram, and Twitter) are useful avenues for student communication and study groups, and can be used to access the latest medical news. We support the responsible use of these resources and expect all users to demonstrate the same level of ethical and professional conduct, as is required in face-to-face or written communications. When accessing Facebook, you represent, warrant and agree that no materials of any kind submitted through your account will violate or infringe upon the rights of any third party, including copyright, trademark, privacy, publicity or other personal or proprietary rights; or contain libelous, defamatory or otherwise unlawful material. Any violation of these types of usage terms involving the NICC Allied Health program will result in appropriate disciplinary action, which may include removal from the program.

Potential employers routinely check Facebook postings prior to interviews and hiring of employees. Students must recognize postings on social networking sites may be copied and sent by other individuals who have shared access to personal sites. Therefore, deleted personal postings will continue to circulate and therefore, are considered permanent.
IOWA CORE PERFORMANCE STANDARDS

Iowa Community colleges have developed the following Core Performance Standards for all applicants to Health Care Career Programs. These standards are based upon required abilities that are compatible with effective performance in health care careers. Applicants unable to meet the Core Performance Standards are responsible for discussing the possibility of reasonable accommodations with the designated institutional office. Before final admission into a health career program, applicants are responsible for providing medical and other documentation related to any disability and the appropriate accommodations needed to meet the Core Performance Standards. These materials must be submitted in accordance with the institution’s ADA Policy.

<table>
<thead>
<tr>
<th>CAPABILITY</th>
<th>STANDARD</th>
<th>SOME EXAMPLES OF NECESSARY ACTIVITIES (NOT ALL INCLUSIVE)</th>
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</table>
| Cognitive-Perception    | The ability to gather and interpret data and events, to think clearly and rationally, and to respond appropriately in routine and stressful situations. | • Identify changes in patient/client health status  
• Handle multiple priorities in stressful situations                                                                                                                                 |
| Critical Thinking        | Utilize critical thinking to analyze the problem and devise effective plans to address the problem. | • Identify cause-effect relationships in clinical situations  
• Develop plans of care as required                                                                                                                                                     |
| Interpersonal           | Have interpersonal and collaborative abilities to interact appropriately with members of the healthcare team as well as individuals, families and groups. Demonstrate the ability to avoid barriers to positive interaction in relation to cultural and/or diversity differences. | • Establish rapport with patients/clients and members of the healthcare team  
• Demonstrate a high level of patience and respect  
• Respond to a variety of behaviors (anger, fear, hostility) in a calm manner  
• Nonjudgmental behavior                                                                                                           |
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<tr>
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<tbody>
<tr>
<td>Communication</td>
<td>Utilize communication strategies in English to communicate health information accurately and with legal and regulatory guidelines, upholding the strictest standards of confidentiality.</td>
<td>• Read, understand, write and speak English competently</td>
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<td></td>
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<td>• Communicate thoughts, ideas and action plans with clarity, using written, verbal and/or visual methods</td>
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<td></td>
<td></td>
<td>• Explain treatment procedures</td>
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<tr>
<td></td>
<td></td>
<td>• Initiate health teaching</td>
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<tr>
<td></td>
<td></td>
<td>• Document patient/client responses</td>
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<td></td>
<td></td>
<td>• Validate responses/messages with others</td>
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<tr>
<td>Technology Literacy</td>
<td>Demonstrate the ability to perform a variety of technological skills that are essential for providing safe patient care.</td>
<td>• Retrieve and document patient information using a variety of methods</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Employ communication technologies to coordinate confidential patient</td>
</tr>
<tr>
<td>Mobility</td>
<td>Ambulatory capability to sufficiently maintain a center of gravity when met with an opposing force as in lifting, supporting, and/or transferring a patient/client.</td>
<td>• The ability to propel wheelchairs, stretchers, etc. alone or with assistance as available</td>
</tr>
<tr>
<td>Motor Skills</td>
<td>Gross and fine motor abilities to provide safe and effective care and documentation</td>
<td>• Position patients/clients</td>
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<tr>
<td></td>
<td></td>
<td>• Reach, manipulate, and operate equipment, instruments and supplies</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Electronic documentation/ keyboarding</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Lift, carry, push and pull</td>
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<tr>
<td></td>
<td></td>
<td>• Perform CPR</td>
</tr>
<tr>
<td>Hearing</td>
<td>Auditory ability to monitor and assess, or document health needs</td>
<td>• Hears monitor alarms, emergency signals, auscultatory sounds, cries for help</td>
</tr>
<tr>
<td>CAPABILITY</td>
<td>STANDARD</td>
<td>SOME EXAMPLES OF NECESSARY ACTIVITIES (NOT ALL INCLUSIVE)</td>
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<tr>
<td>Visual</td>
<td>Visual ability sufficient for observations and assessment necessary in patient/client care, accurate color discrimination</td>
<td>• Observes patient/client responses</td>
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<td></td>
<td></td>
<td>• Discriminates color changes</td>
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<td></td>
<td></td>
<td>• Accurately reads measurement on patient client related equipment</td>
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<tr>
<td>Tactile</td>
<td>Tactile ability sufficient for physical assessment, inclusive of size, shape, temperature and texture</td>
<td>• Performs palpation</td>
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<td></td>
<td></td>
<td>• Performs functions of physical examination and/or those related to therapeutic intervention</td>
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<tr>
<td>Activity Tolerance</td>
<td>The ability to tolerate lengthy periods of physical activity</td>
<td>• Move quickly and/or continuously</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Tolerate long periods of standing and/or sitting as required</td>
</tr>
<tr>
<td>Environmental</td>
<td>Ability to tolerate environmental stressors</td>
<td>• Adapt to rotating shifts</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Work with chemicals and detergents</td>
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<tr>
<td></td>
<td></td>
<td>• Tolerate exposure to fumes and odors</td>
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<tr>
<td></td>
<td></td>
<td>• Work in areas that are close and crowded</td>
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<tr>
<td></td>
<td></td>
<td>• Work in areas of potential physical violence</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Work with patients with communicable diseases or conditions</td>
</tr>
</tbody>
</table>

Updated September 2013
Lab Equipment

No supplies are to be taken from the lab, clinical, field or classroom area without instructor permission. Classroom and lab supplies are the property of the college, and clinical/field supplies are the property of the clinical/field setting. Taking supplies without permission is stealing and a breach of contract between the college and the facility. If you are aware of the illegal use of supplies or unethical conduct of another student, it is your professional responsibility to report the incident to your instructor or the Director of the Program. Failing to report these is considered condoning the action and may result in disciplinary action. Mistreatment of any equipment or manikins while in the lab setting will result in dismissal from the remainder of that class session and no credit will be awarded for any evaluation taking place that day. Disciplinary action will follow which may include dismissal from the program.

Latex Allergy

The Centers for Disease Control and Prevention reports that the amount of latex exposure needed to produce sensitization is not known (http://www.cdc.gov/niosh/docs/98-113/). They report that increasing the exposure to latex proteins increases the risk of developing allergic symptoms. Health Care providers are at risk of developing latex allergies because they use latex gloves frequently. Latex proteins can become fastened to the lubricant powder used in some gloves. When workers change gloves, the protein/powder particles become airborne and can be inhaled. It is therefore recommended that non-latex gloves be used for activities that are not likely to involve contact with infectious materials. If latex gloves are used, exposure to latex can be reduced by wearing powder-free gloves. Always perform hand hygiene after removing gloves. Students who have latex sensitivity or allergy must notify NICC’s Compliance Auditor.

Lecture Attendance with a Clinical/Field Failure

Students who have received a clinical failure (incomplete requirements etc.) are encouraged to continue to attend the didactic portion of the class to facilitate future course success. Students should meet with a financial aid counselor to determine the effect on their financial aid package. Students attending class are able to participate in class activities including testing.

Name/Address Change

Students are required to complete required paperwork in the Admissions Offices ASAP and notify the Program Director when their name is changed. This must be done in a timely manner as changes in student’s names affect clinical/field site computer clearance, background checks and licensure applications.

NICC Messages

Students are expected to check their NICC MyCampus, their NICC Gmail account, and their Brightspace Learning Management System daily for messages. NICC Gmail will be the primary means of communication for all students enrolled in NICC’s Nursing and Allied Health Programs.
**Needle-stick Policy**

The Allied Health Department is committed to providing a safe environment in relation to the usage of “sharps.”

In order to prevent injury in the lab:

1) Needles are recapped only using the “scoop” technique.
2) Needles that have been used for manikin practice are not recapped and are immediately discarded into approved sharps containers, which are available throughout the lab.
3) Students work with needles in the lab only with direct supervision by faculty.
4) Needleless injection systems and needle guards are utilized whenever possible.
5) Students do not remove used needles from the lab.

In the lab, if a needle stick injury occurs when it does not involve the potential of bloodborne pathogen transmission, the following steps are taken:

1) Immediately wash the affected area thoroughly with antimicrobial soap and water.
2) Contact faculty who will assist with completion of the NICC accident form.
3) Individuals are instructed in the signs/symptoms of infection and encouraged to seek medical advice as appropriate.
4) Faculty will route the accident form through administrative channels.

In the lab, if a needle stick injury occurs which does involve potential exposure to blood or body fluids of a second individual, the NICC OSHA Bloodborne Pathogens Standard Precautions policy will be followed.

In a clinical or field setting, agency policies will be followed. In addition, the Program Director or Clinical Coordinator will be notified. A NICC Medical Incident form along with a copy of the agency incident form must be completed and filed at NICC within 24 hours of the occurrence.

**Orientation**

Orientation sessions are held to provide students with the essential information to succeed in the program. All orientation sessions are mandatory and required for students to progress in the program. Immunizations and background checks must be current for students to attend clinical orientations. Students will not be allowed to progress into clinical if these orientations are missed due to delinquent immunization or background checks. Students missing mandatory orientations for extenuating circumstances may progress in the program with Program Director approval only.

The following orientation sessions are held:

**NICC New Student Orientation:** Designed to provide a smooth start to the semester. For students who are new to Northeast Iowa Community College or would like a refresher. Visit resource tables, get your questions answered, find your classes and get your student ID picture taken.
**Mandatory Program Orientation:** Completed prior to the start of the program. Program policies and procedures, as well as compliance requirements, are reviewed.

**Clinical Site Orientation:** Specific clinical sites may require students to complete an orientation. If applicable, this would be held prior to the start of any clinical hours.

**Performance Improvement Plans**

A Performance Improvement Plan (PIP) is initiated by the faculty or the Dean of Allied Health when a student is at risk for course or program failure. Students will meet with program faculty to review the objectives that are not being met and the remediation required. Students will be required to fulfill the remediation outlined in the plan. Students must successfully meet all the objectives in order to pass the course. Students will receive a copy of the PIP for reference. A copy will also be maintained in the faculty’s office throughout the student’s program of study. Students on a Performance Improvement Plan are considered to be on probationary status.

**Probationary status is a warning to students that their status in the program is in jeopardy.**

**Plagiarism**

When completing any assignment, if you obtain information from a resource it is expected that you cite the reference. When using a reference, you may NOT copy from the source. You need to paraphrase the information in your own words. Plagiarism will be addressed according to the college Student Academic Honesty Policy. The NICC faculty utilize turnitin.com to identify students who have plagiarized work. Plagiarizing is a serious offense and can result in program termination. Students are plagiarizing if they:

- Use direct quotes without quotation marks and textual citation of the material;
- Paraphrase without crediting the source;
- Present another’s ideas as their own without citing the source;
- Submit material developed by someone else as their own (this includes purchasing or borrowing a paper or copying a disk);
- Submit a paper or assignment for which so much help has been received that the writing is significantly different from their own.

Students are encouraged to visit plagiarism.org to learn more about plagiarism.
Program Re-entry

Once a student begins the Radiologic Technology Program on a full-time status, it should be completed in two years. If, for some reason, the student does not complete a course or drops out of the program, they may set up an appointment with the Radiologic Technology Program Director to discuss re-entry into the program. Re-admittance is dependent upon class seat availability. Students who have failed any clinical education or didactic course must complete a Selected Topics in Health course in order to maintain or remediate their clinical skills. The Program Director and the student will develop specific goals for this course. If the goals in this course are not met, the student will not be allowed to re-enter the program at any time. In addition, once the student has been out of the program for 2 or more years, they must start the program over from the beginning. Students may only re-enter the program once. Students who decline an opportunity to re-enter will be moved to the bottom of the entry list.

* Human Anatomy & Physiology I & II must have been taken within 5 years of re-entry.

Re-entry Policy

Students that have exited the program and have not had behavioral concerns in the program, are eligible to apply for program re-entry utilizing the following guidelines:

1. Submit a professionally typed letter to the Dean of Allied Health stating the request and explaining the reasons why you feel a re-entry into the program should be granted.
2. Complete a Student Success Plan with the Program Director and include it with the letter to the Dean of Allied Health. The Student Success Plan form can be found in the Policy and Procedure Manual.
3. Students will work with the program and compliance directors to verify completion of any outstanding program requirements prior to acceptance for re-entry. Students may be required to purchase a CastleBranch re-entry package.
4. Upon completion of steps 1-3, the student will be granted a re-entry when a seat becomes available.

Refund Policy

See the current college catalog for the Tuition and Course Refund Policy.

Smoking Policy

NICC and all clinical sites are smoke and tobacco-free in compliance with the 2008 Iowa Smokefree Air Act (H.F.2212). Iowa law and the Board of Trustees Policy prohibit smoking or use of tobacco products within college buildings, on college grounds, and in vehicles, as well as on clinical facility grounds or during off-campus classroom and field experiences. In addition to traditional tobacco products, e-cigarettes and vaping are also prohibited. Students who do so will be penalized according to facility protocols.
Social Media

Students must adhere to the program guidelines when using Facebook, Twitter, Instagram, YouTube, LinkedIn, Snapchat, blogs, along with any other emerging social media.

- Any and all patient information obtained during patient care experiences is completely confidential without exception.
- Organizational information you may see or hear during your clinical and field shifts is also considered confidential.
- Educational activities conducted on campus or at the clinical/field site are not to be recorded.

Students are fully responsible and liable for anything posted to social media sites, including any comments in such postings which may be deemed to be defamatory, profane, obscene, proprietary, libelous, or otherwise illegal. Sharing any information considered confidential will result in immediate dismissal from the program. When participating in social media, the following best practices are recommended:

- Think twice before posting: Privacy does not exist in the world of social media.
- Strive for accuracy: Get the facts before posting to social media.
- Be respectful: Opposing views may produce hurtful comments and should be avoided.
- Remember your audience: Future employees, schools, colleagues, etc.
- Personal sites: Identify your views as your own
NICC Student Conduct

Civility Statement

As an academic institution, Northeast Iowa Community College exists for the transmission of knowledge, the pursuit of truth, the development of students and the general well-being of society. Membership in this academic community places a special obligation on all members to preserve an atmosphere conducive to the freedom to teach and to learn. Freedom to teach and to learn depends on opportunities and conditions in and outside the classroom that fosters respect, integrity, honor, and civil conduct. Northeast Iowa Community College defines civility as the art of treating others, as well as ourselves, with respect, dignity, and care. Civility is demonstrated when we are sensitive to the impact that our communications, practices and behaviors have on others, and when we acknowledge each person’s self-worth and unique contributions to the community as a whole. All members of the College community, students, faculty, staff and visitors have the right to work and learn in a safe environment which is civil in all aspects of human relations.

Student Conduct

All students are expected to obey College policies, rules and regulations and not violate municipal, county, state or Federal law. Through voluntary entrance to the College, students indicate a willingness to adhere to the policies, rules and regulations of the College and acknowledge the right of the College to initiate appropriate disciplinary actions. Instructors are responsible for maintaining a classroom environment conducive to teaching and learning, and therefore, may remove any student from class for disruptive behavior or other disciplinary reasons.

NICC students are responsible for knowing the information, policies and procedures outlined in this document. The College reserves the right to make changes to this code as necessary and once those changes are posted online, they are in effect. Students are encouraged to check online at www.nicc.edu/catalog for the current versions of all policies and procedures. Hard copies of the Student Conduct Code are available to students upon request from the Vice President of Learning and Student Services.

Although emphasis is placed on education and guidance in cases of misconduct, the College may take disciplinary action and/or civil and criminal actions against a person disrupting College business or processes in order to ensure the collective good of the community and to protect the rights of its members. The scope of authority of the College includes dismissing a student or visitor whose conduct is unsuited to the purpose of the College.

NICC retains the authority to immediately remove a student from an on-the-job training site, a clinical/field area, an observation, a class offered through any format, a student organization or the College property when a student’s grades, performance, conduct, or health may have a detrimental effect on the student, the College, other students, faculty or staff, customers, clients, or patients of the cooperating agency.
Transportation

The student shall be responsible for his/her own transportation to various clinical/field agencies utilized, and any expenses incurred to attend clinical/field experience. No client is ever to be transported in student automobiles. Students are not to be transported in a faculty vehicle at any time.

Withdrawal Procedure

The college recognizes that unforeseen circumstances may result in a student needing to take time off from the program. Non-progression in the program may result in difficulty with content retention and application upon re-entry and financial aid. Therefore, the following policy is implemented to promote student awareness of the need to proceed in program sequence as expeditiously as possibly.

1. A student who chooses to withdraw from the program for any reason should discuss these intentions with their program advisor. Students must complete the Withdrawal and Clearance form at the Advising Office prior to the designated withdrawal date for the term. It is the student’s responsibility to work with Advising to withdraw from coursework. Students failing to complete the withdrawal process, will receive an “F” in the courses they remained enrolled in.

2. Tuition refund eligibility is based upon the length of enrollment and the number of credit hours for which the student is registered. Students who must withdraw for reasons of personal health, as verified by a physician, may receive a “W” for the term in which they are registered and will follow the standard tuition refund policy.

3. Students who drop after three-fourths length of the course (the withdrawal date) will receive a failing grade on their records for the work not completed satisfactorily.

4. Students who withdraw from the program will be subject to the program rules in effect at the time of program re-entry.

5. An administrative withdrawal may be implemented according to criteria listed in the college catalog.
Compliance

Northeast Iowa Community College reserves the right to deny admission, acceptance, participation and/or continued participation to any healthcare program per agency policy. Students in healthcare programs are required to comply with any and all policies and procedures created and implemented by NICC and its clinical affiliates.

Students are advised that any and all healthcare facilities associated with NICC may deny admission to or remove any student placed in the facility if, at the discretion of the healthcare facility, the admission of the student or the continued presence of the student would present or continue a risk to the healthcare facility or any of its patients or employees.

NICC contracts with CastleBranch to manage background checks, clinical requirements and drug testing. Once you are accepted to the health program, you will receive a letter instructing you on how to initiate this process. In addition, this letter will contain information regarding the cost of utilizing and the deadline for initiating and completing this process. It is the student’s responsibility to purchase the CastleBranch package and meet the associated deadlines. Students that fail to purchase this package and/or meet the health, training, background and/or drug testing requirements will not be allowed to enter or continue in the program. Students are responsible for all financial liabilities associated with not meeting these requirements.

Clinical/Field Requirements

Prior to participating in the clinical/field portion of any health program students must submit the following evidence to CastleBranch.

<table>
<thead>
<tr>
<th>Health Requirements</th>
<th>Other Requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Annual Flu vaccination</td>
<td>• Certified Nurse Aide (nursing only)</td>
</tr>
<tr>
<td>• Current physical</td>
<td>o Completion of a 75+ CNA course</td>
</tr>
<tr>
<td>• Hepatitis B vaccine or positive surface antibody titer or a Declination waiver</td>
<td>o Direct Care Worker Registry</td>
</tr>
<tr>
<td>• Tetanus, Diphtheria &amp; Pertussis (Tdap) followed by a booster every 10 years</td>
<td>• CPR Completion</td>
</tr>
<tr>
<td>• Two Measles, Mumps and Rubella (MMR) immunizations or positive antibody titer</td>
<td>o American Heart Association Health Professional BLS</td>
</tr>
<tr>
<td>• Tuberculosis Questionnaire</td>
<td></td>
</tr>
<tr>
<td>• Two negative TB skin tests or negative Quantiferon Gold blood test or negative T-Spot blood test</td>
<td></td>
</tr>
<tr>
<td>• Two Varicella (Chicken Pox) vaccines or Positive Varicella titer</td>
<td></td>
</tr>
</tbody>
</table>
American Red Cross CPR for the Health Care Providers

- Health Insurance
- Mandatory program & clinical orientation(s)*
- Mandatory Reporter for Child and Dependent Adult Abuse Training
- NICC HIPAA & Bloodborne Pathogens Trainings*
- NICC picture identification*
- Policy & Procedure Manual (PPM) review and forms
- Uniforms, supplies and equipment, as applicable*

*items not submitted to CastleBranch

**Suspicious Behavior**

Behavior consistent with influence of alcohol or drugs – “under the influence” means that the student is affected by a drug or alcohol in any detectable manner, whereby the safety of the student, peers, patients, or members of the public, or the student’s practicum/class performance, or the safe and efficient operation of the facility or the property of the facility are threatened or impaired. For purposes of this policy, a student who emits an odor of alcohol or illegal drugs shall be considered to be “under the influence”. Under no circumstances should a student who delivers patient care, meets the public, or performs essential services consume alcoholic beverage and/or mind altering drugs before reporting to class or practicum.

Students who demonstrate behaviors consistent with influence of alcohol or drugs will immediately be removed from the setting. The student will not be allowed to drive themselves home from practicum or class. Rather, they will have to call a cab, family member or friend to pick them up. Students are responsible for the cost of any medical evaluations or drug testing requested by the College prior to returning to the practicum area.
Criminal and Abuse Guidelines for Admission, Acceptance, Participation and Continued Participation

Purpose
This policy is intended to clarify Northeast Iowa Community College’s (NICC) guidelines for admission, acceptance, participation and continued participation guidelines for Nursing (PN & ADN), Allied Health and HIT candidates and students.

Policy and Procedure
NICC reserves the right to deny admission, acceptance, participation and/or continued participation to any health care program or course per agency policy. NICC is responsible for informing course candidates of the possibility of denial for clinical/field experience, as well as, professional employment and licensor based on background information.

Each candidate or student’s criminal history and abuse records will be evaluated by NICC, and if applicable, the Iowa Department of Human Services. NICC’s clinical/field partners require all charges and convictions to be evaluated and approved by NICC and if applicable, the Iowa Department of Human Services. The Iowa Department of Human Services will not evaluate pending charges with an outstanding disposition or warrant. The clinical/field agency has the right to deny or remove students from their clinical/field site(s) at any time.

Course candidates/students are responsible for fully participating in the background check process and for reporting any criminal activity while enrolled in any health care program or course. CNA course candidates/students must fully meet the guidelines listed below and remain in compliance during each course and throughout the program.

Students who are found to have violated specified conduct rules within their chosen program of study may receive sanctions under the Student Conduct Code in addition to any program actions. Students are responsible for knowing and adhering to all program rules and regulations established by the program administration.

Guidelines
Any of the below listed items will disqualify you from admission, acceptance, participation and/or continued participation in NICC's health programs.

At any time
- Refusal to participate in the background check or evaluation process.
- Iowa DHS record check evaluation determines the student is not eligible to participate in the clinical/field portion of the course and/or to work in a health care facility.
- A felony conviction.
- A felony, serious misdemeanor or aggravated misdemeanor charge with an outstanding disposition or warrant.
- A conviction in which the supervised/formal probationary period has not been completed.
- A serious misdemeanor or aggravated misdemeanor conviction in which the probationary period has not been completed regardless of supervision level (formal or informal).
• A criminal conviction, of any kind, related to past employment, and/or a healthcare system or organization.
• Inclusion on the child, dependent adult and/or sexual offender registry.

**In the past 10 years**
• A criminal conviction related to illegal distribution or theft of drugs.
• A serious or aggravated misdemeanor conviction of theft or a pattern of theft convictions.

**In the past 5 years**
• A serious or aggravated misdemeanor conviction of assault or violence or a pattern of assault or violent behavior.
• 2 OWI convictions.

**In the past 2 years**
• A criminal conviction related to the possession of drugs, paraphernalia, and/or illegal substances.

**In the past year**
• 1 OWI conviction

Any of the below listed convictions may disqualify you from admission, acceptance, participation and/or continued participation in NICC's health programs based on factors such as job/program relatedness, patterns, timeframes, and/or completion of sentence.

• A misdemeanor conviction involving injury, violence, or sexual misconduct.
• A pattern of criminal convictions or charges.
• Recent criminal conviction(s) or charges of any type.
• Any criminal charge with an outstanding disposition or warrant with the exception of Iowa Code 321 traffic charges.
  - All criminal charges (excluding Iowa Code 321 traffic) incurred while enrolled in a NICC health program must be reported within 48 hours of the occurrence.
  - Incurring a criminal charge or failing to report a criminal charge, regardless of guilt, will result in immediate removal from the clinical/field portion of the program.

**Due Process**

1. NICC will provide the candidate or student with notification that they are not eligible to participate in the clinical/field portion of the course. The notification will include a description of the rule or policy used to substantiate NICC’s decision.

2. Upon notification, the student is immediately ineligible for the clinical/field portion of any health course or program.

3. The candidate or student has 10 business days to request a meeting with the Program Compliance Director to review the evidence utilized to make this decision.

4. The student will be provided with information regarding future eligibility.
Safety Sensitive Program
Drug and Alcohol Policy & Procedure

Revised: November 15, 2013

Purpose
To inform prospective students and current students of Northeast Iowa Community College’s ("the College") drug and alcohol policy. Students in safety sensitive programs must present themselves free from the use of all illegal drugs, free from the use and effects of alcohol, and aware of the effects of prescription medication. Consequently, the use of alcohol and/or illegal drugs by students in these areas is prohibited. Students are required to submit to drug and alcohol screens under the procedures set out herein.

This policy is in compliance with the Drug Free Workplace Act of 1968. This policy supplements, but doesn’t supplant, the general student conduct code of the College and any requirements of external program affiliates. Therefore, students in safety sensitive programs are required to comply with any and all policies and procedures created and implemented by the College and any external program affiliate at which the student will be completing his or her internship, externship, field placement or on the job training.

Further, students shall not use alcohol or engage in “prohibited conduct” as defined herein. The overall goal of this policy is to ensure a drug and alcohol free learning environment and to reduce accidents, injuries, and fatalities.

DEFINITIONS:

A. **Abuse**: Any use of alcohol or a legal drug, which impairs an individual’s faculties (other than use of a legal drug for appropriate purposes in accordance with applicable medical directions). In addition, the taking of a prescription drug that was prescribed for another shall be considered “abuse” of a legal drug.

B. **Alcohol**: Ethanol, isopropanol, or methanol.

C. **External Program Affiliate**: Organizations that have a contractual agreement with the college to provide experiences related to the application and reinforcement of theoretical program content.

D. **Drug**: Any drug or substance defined as controlled substance and included in Schedule I, II, III, IV, or V under the Federal Controlled Substance Act, 21 U.S.C. 801 et seq.

E. **Drug Screen**: The testing of a bodily substance for the identification of alcohol and legal or illegal drugs.

F. **Illegal Drug**: Any drug or substance defined as controlled substance and included in Schedule I, II, III, IV, or V under the Federal Controlled Substance Act, 21 U.S.C. 801 et seq.

G. **Legal Drug**: Any drug or medication lawfully prescribed by a healthcare provider for an individual and taken by the individual only in accordance with such prescription.

H. **Over-the-counter Drug**: Drugs or medications that can be legally purchased without a prescription.

I. **Prescription Medication**: Any drug or medication lawfully prescribed by a physician for an individual and taken by individual only in accordance with such prescription.
J. **Safety Sensitive Program:** Course of study in which the occupation has been designated as high risk or safety sensitive by the College and/or the Department of Labor.

K. **Student:** An individual who has registered for coursework, completed an application to enroll, or is enrolled, in a safety sensitive program at the college.

**Prohibited Conduct**
The following shall be considered “prohibited conduct” for the purpose of this policy:

**Alcohol**
- Consuming alcohol.
- Consuming alcohol within 4 hours of presenting oneself to a safety sensitive program area.
- Being under the influence of alcohol.
- Presenting oneself as under the influence and/or effects of alcohol.
- Operating a motor vehicle while possessing alcohol unless the alcohol is manifested and transported as part of a shipment.
- Operating a motor vehicle while under the influence of alcohol.

**Illegal Drugs**
- Utilizing illegal drugs.
- Being under the influence of illegal drugs.
- Presenting oneself as under the influence and/or effects of illegal drugs.
- Testing positive for illegal drugs.
- Operating a motor vehicle while possessing illegal drugs.
- Operating a motor vehicle under the influence of illegal drugs.

**Prescription / Legal Medications**
- Being under the influence of prescription medication without knowing the effects.
- Using a controlled substance, except when use is pursuant to the instructions of a physician who has advised the student that the substance does not adversely affect the student’s ability to perform their regular duties.
- Using a medication outside of the prescribed scope.
- Using a medication that was prescribed to someone other than the student.
- Failure to submit acceptable proof of prescribed medication(s).

**Testing**
- Refusing to sign the drug and alcohol policy acknowledgment form.
- Refusing to participate in a drug or alcohol testing.
- Not providing a sufficient specimen.

**Alcohol Testing**
Alcohol tests will be performed using a saliva testing device. Any initial test indicating a blood alcohol concentration of .01 or greater will be confirmed by a second test. The confirmation test will be performed no sooner than 15 minutes and no later than 30 minutes following the completion of the initial test. In the event the confirmation test indicates a blood alcohol
concentration of .01 to .0399, the student shall be removed from safety sensitive coursework and/or external program affiliate participation for 25 hours or until his/her next scheduled time, whichever is longer. Students with tests indicating a blood alcohol concentration of .04 or greater are considered to have engaged in prohibited conduct. Law enforcement, an outside lab or healthcare provider may be utilized for alcohol testing.

**Drug Testing**
Drug testing will be performed through saliva collection via mouth swab. Oral mouth swabs test for the presence of drugs and/or metabolites of the following controlled substances: (1) marijuana; (2) cocaine; (3) opiates; (4) amphetamines; (5) phencyclidine (PCP); (6) Benzodiazepines; (7) Barbiturates; (8) Methadone; and (9) Propoxyphene. External program affiliate sites may use other means of collection and detect for other controlled substances. Law enforcement, an outside lab or healthcare provider may be utilized for alcohol testing.

**Types of Tests**
The College has implemented the following circumstances for drug and alcohol testing: (1) program participation; (2) lab participation; (3) external program affiliate placement; (4) post-accident testing; (5) reasonable suspicion testing; (6) random; and (7) return-to-duty testing.

**Program Participation, Lab Participation, External Program Affiliate Placement and Random Testing**
All students enrolled in safety-sensitive programs must submit to drug testing as outlined by NICC and external program affiliates.

**Post-Accident Testing**
The student must submit to drug and alcohol testing any time he or she is involved in an accident while performing a safety-sensitive function. Any time a post-accident drug or alcohol test is required, it must be performed as soon as possible following the accident. In the event a student is so seriously injured that the student cannot provide a sample of urine, breath or saliva at the time of the accident, the student may provide necessary authorization for the College to obtain hospital records or other documents that would indicate the presence of controlled substances or alcohol in the student’s system at the time of the accident.

No student required to take a post-accident alcohol test shall use alcohol for eight (8) hours following the accident or until he or she undergoes a post-accident alcohol test, whichever occurs first.

**Reasonable Suspicion Testing**
Reasonable suspicion for requiring a student to submit to drug and/or alcohol testing shall be deemed to exist when the College manifests physical or behavioral symptoms or reactions commonly attributed to the use of drugs or alcohol. Such student conduct must be witnessed by at least two NICC faculty or staff or a person trained to identify drug and alcohol use in the workplace.

Suspicious behavior consistent with influence of alcohol or drugs – “under the influence” means that the student is affected by a drug or alcohol in any detectable manner, whereby the safety of
the student, peers, co-workers, or members of the public, or the student’s performance, or the safe and efficient operation of the facility or the property of the facility are threatened or impaired. For purposes of this policy, a student who emits an odor of alcohol or illegal drugs shall be considered to be “under the influence.”

Students who demonstrate behaviors consistent with influence of alcohol or drugs will immediately be removed from the setting. The student will not be allowed to drive themselves home. Rather, they will have to call a cab, family member or friend to pick them up. Students are responsible for the cost of any medical evaluations or drug testing requested by the College or the external program affiliate.

**Return-to-Duty Testing**

Any student who engages in prohibited conduct shall be provided with the names, addresses, and telephone numbers of qualified substance abuse professionals (SAPs). If the student desires to attempt to become re-qualified, the student must be evaluated by a SAP and submit to any treatment the SAP prescribes. Proof of evaluation and treatment completion must be provided to the College. Following evaluation and treatment, if any, in order to become re-qualified, the student must submit to and successfully complete return-to-duty testing. The costs of any SAP evaluation or prescribed treatment shall be the responsibility of the student. The College does not guarantee or promise a re-entry to the student should he/she regain qualified status.

**Consequences of Policy Violation**

Any student enrolled in a safety sensitive program who engages in prohibited conduct as set forth herein may be subject to withdraw.

**Student Acknowledgement**

The College shall ensure each student enrolled in a safety sensitive program signs a statement certifying that he or she has received a copy of this policy. This policy is not intended nor should it be construed as a contract between the College and the student. This policy is subject to change at any time at the sole discretion of Northeast Iowa Community College.
Radiologic Technology Program Introduction

Mission Statement

The Northeast Iowa Community College Radiologic Technology Program’s mission is to provide an ambitious didactic and clinical education that will produce compassionate, confident, and professional technologists. The program will provide a variety of work settings and experiences to successfully prepare graduates to function as entry-level radiographers.

Program Accreditation

This program is accredited by the following:
The Joint Review Committee on Education in Radiologic Technology
20 North Wacker Drive, Suite 2850
Chicago, Illinois 60606-3182
312-704-5300
mail@jrcert.org

Program Length

The program is a twenty-four (24) month continuous program. Students will not be permitted to finish the program early. Prospective employers need to be informed that the starting employment date will have to be after completion of the program.

Standards for an Accredited Educational Program in Radiologic Sciences

Standards for an Accredited Educational Program in Radiologic Sciences are available for review at www.JRCERT.org. A hard copy is available in the program director’s office. A copy for student review is located in Appendix A of the Student Policy and Procedure Manual for the Administration of the Radiologic Technology Program. Any violations of these standards requires a JRC violation form to be completed with a correlating disciplinary action. This form can be found under Section XII in Student Policy and Procedure Manual for the Administration of the Radiologic Technology Program.

Radiologic Technology Program Outcomes

Upon completion of the Radiologic Technology Program, the graduate will be able to demonstrate the following outcomes, which are based on the roles of the Radiologic Technologist.

Goals

- Students will demonstrate clinical competency.
- Students will practice appropriate communication skills.
- Students will graduate with critical thinking and problem solving skills.
- Students will demonstrate professionalism.
Northeast Iowa Community College
Radiologic Technology (AAS) Educational Plan
2019-2020

Name: ___________________________________________     Student ID #: ______________________________
Advisor: _________________________________________     Term and Year Started: ____________________

Graduation requirements for the Radiologic Technology program are listed below along with any prerequisites. To graduate from this program, students must complete all required coursework with a "C-" grade or above and earn a minimum 2.0 grade point average.

Courses on this educational plan may not be offered every term or every academic year. Please discuss course availability with an academic advisor or faculty member. It is the student’s responsibility to understand and complete all degree requirements.

Admission Requirements:
BIO:168 Human Anatomy and Physiology I
BIO:173 Human Anatomy and Physiology II
HSC:114 Medical Terminology

Reading requirement for all programs: The ability to read and comprehend information is a core value of Northeast Iowa Community College. A base reading assessment score or evidence of appropriate course completion will satisfy this requirement.

*Course may be taken before beginning program sequence.

**Course may be taken before beginning program sequence.

Term 1 – Fall

<table>
<thead>
<tr>
<th>Course #</th>
<th>Course Title</th>
<th>Cr.</th>
<th>Prerequisites</th>
<th>Term/Yr.</th>
<th>Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>MAT:110</td>
<td>*Math for Liberal Arts</td>
<td>3</td>
<td>MAT:063, MAT:744, or qualif. placement score</td>
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<tr>
<td>RAD:101</td>
<td>Radiographic Patient Care</td>
<td>3</td>
<td>Coreq: RAD:200</td>
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<td>RAD:122</td>
<td>Radiographic Procedures I</td>
<td>4</td>
<td>Coreq: RAD:200</td>
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<tr>
<td>RAD:200</td>
<td>Clinical Education I</td>
<td>3</td>
<td>Coreq: RAD:122</td>
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<tr>
<td>SDV:179</td>
<td>**The College Experience</td>
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Term 2 - Spring

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<th>Cr.</th>
<th>Prerequisites</th>
<th>Term/Yr.</th>
<th>Grade</th>
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</thead>
<tbody>
<tr>
<td>RAD:143</td>
<td>Radiographic Procedures II</td>
<td>5</td>
<td>RAD:122, RAD:200, Coreq: RAD:240</td>
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<tr>
<td>RAD:240</td>
<td>Clinical Education II</td>
<td>5</td>
<td>RAD:101, RAD:122, RAD:200, Pre-/coreq: RAD:143</td>
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Term 3 - Summer

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<th>Cr.</th>
<th>Prerequisites</th>
<th>Term/Yr.</th>
<th>Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>RAD:186</td>
<td>Advanced Procedures and Pharmacology</td>
<td>2</td>
<td>RAD:143, Coreq: RAD:270</td>
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<tr>
<td>RAD:270</td>
<td>Clinical Education III</td>
<td>3.5</td>
<td>RAD:143, RAD:240, RAD:440, Coreq: RAD:186</td>
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<tr>
<td>SPC:112</td>
<td>*Public Speaking</td>
<td>3</td>
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continued
Term 4 - Fall

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Term 5 - Spring

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<tr>
<td>HUM:108</td>
<td>*Cultural Diversity and Identity</td>
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Term 6 - Summer

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<th>Term/Yr.</th>
<th>Grade</th>
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<tr>
<td>PSY:111</td>
<td>*Introduction to Psychology</td>
<td>3</td>
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<tr>
<td>RAD:592</td>
<td>Clinical Education VI</td>
<td>2.5</td>
<td>RAD:561. Coreq: RAD:660</td>
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<tr>
<td>RAD:660</td>
<td>Comprehensive Radiologic Review</td>
<td>2.5</td>
<td>All courses in previous five terms. Coreq: RAD:592</td>
<td></td>
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</tr>
</tbody>
</table>

Total Credits 84.5

Students are given a computer tutorial at the beginning of Clinical Education I and each term following.

**This Associate of Applied Science degree program requires a minimum of 15 credits of transfer-level general education electives from Communication, Humanities, Math, Science, or Social Science. Three of these hours can include SDV:179 The College Experience. If The College Experience course is waived or transfers in for less than three credits, an additional general education elective is required.**
Radiographic Technology Program Policies

Admission Policy
The following procedures are established for processing applicants into the Northeast Iowa Community College Radiologic Technology Program.

Procedure
Admission to Northeast Iowa Community College, official acceptance for program enrollment, and placement on a numbered/program class list will be granted upon successful completion of the required admission procedure as follows:

1. Submit a completed application for admission
2. Submit an official high school transcript
3. Successful completion of the College’s entrance testing requirements.

Advisory Committee Representative
A student representative for each level of the program will be appointed by the faculty to serve on the Radiologic Technology Advisory Committee. The appointment of the student representatives will be made prior to each Advisory Committee meeting.

Class Representatives
The radiologic technology department supports the nomination of individuals who evidence leadership qualities that will assist with class responsibilities, be accountable and professional, and proactive in addressing class issues. The following are guidelines for the nominated officers.

Nominations of Class Representatives:
1. Students may nominate themselves or another student with their permission. These elections will be held at the beginning of the second term.

Election of Class Representatives:
1. The Program Director will be present when elections are held and will count the ballots.

Qualifications of Class Representatives:
1. Positive attitude toward classmates, faculty and the college.
2. Leadership skills.
3. Integrity, honesty, loyalty, dependability and punctuality.
4. Supportive of classmates, faculty, staff and college.
5. Assertive and willing to express their classmates’ concerns.
6. Dedicated to learning.
Role of Class Representatives:

1. Organize class meeting each term to discuss student issues and fundraising efforts.
2. Attend Radiology Advisory meetings twice a year.
3. Represent the entire class.
4. Work with the proper chain-of-command at the college.
5. Communicate monthly or more with the class advisor.
6. Listen to classmates’ concerns; allow them to speak for themselves.
7. Support class officers and classmates.
8. Utilize basic math skills and record keeping skills.
9. Demonstrate creativity if fund raising activities are planned.
10. Give report at every class meeting of class financial status.

Co-curricular Activity Requirements

These requirement must be met in order to complete the program.

Co-curricular Conference: Students are required to attend the University of Iowa Student-Educator Conference during the Spring Semester of the second year of the program or attend an ISRT, local, or regional conference while enrolled in the program. (Event details will be posted on the Radiologic Technology classroom board.) The location of the conferences may vary and students must register for attendance. Students are expected to attend all breakout sessions of the conference they choose.

Following attendance at the conference, students are required to submit a summary paper to the Program Director. The paper must be written using APA style (no references required) and include a 1-2 page summary for each speaker that presented at the conference. The paper must include the student’s name, date/location of the conference, topic(s), and speaker(s). The paper must address the following:

- Explain why the speaker was qualified to speak on the topic.
- A paragraph each about three things that were interesting in the presentation. (A paragraph consists of a minimum of 3 sentences.)
- Describe the part of the presentation that was hardest to understand. Why was this? How can the information be clarified?
- Describe why this presentation may be useful in your career as a radiographer.

Co-curricular Mentoring: Second-year Radiologic Technology students are required to serve as mentors to first-year Radiologic Technology students (mentees). In order to complete the program, mentors must complete the mentor’s checklist, which includes a reflection paper requirement, and can be found in the Forms Section of this manual.

Students are expected to conduct mentoring outside of any class, lab or clinical hours. The location of mentoring must be agreed upon by the mentor and mentee.
Field Trips

Throughout the radiography program, various field trips will be taken. The purpose of these field trips will be to enhance the student's educational understanding of the field of radiologic technology.

During field trips, students are to conduct themselves in a professional manner at all times. Program policies regarding illegal drugs, weapons, theft, pilfering, and disorderly conduct also apply on field trips. Students reported as being disruptive, destructive, or intoxicated by the sponsoring institution will be terminated immediately.

Northeast Iowa Community College wants the student to utilize field trips as an educational experience and not as a vacation. Therefore, students will be REQUIRED to attend all educational functions listed in the program or on the agenda. Failure to attend the required functions will result in make-up time in the clinical area or assignments in theory. If the student cannot attend a field trip due to personal circumstances, the student will be assigned to the clinical area or be given an assignment.

Grading

Students will be evaluated in theory, lab and clinical areas. All courses having a clinical lab component are graded as follows:

1. The didactic lab and clinical components of the course will be combined for a letter grade based on the Radiologic Technology Department grading scale as described below.
2. There are no options for extra-credit work or repeating exams or paperwork to raise course grades at the end of the course.
3. A specific number of competencies are required each semester. See the Schedule of Clinical Competencies in this manual.
4. Students must earn a grade of at least a “C-” for all courses to be eligible for graduation. All pre-requisite courses must be passed with a minimum of a “C-” to progress in the program.
5. Students are encouraged to keep track of their own grades

GRADING SCALE: (Theory) Cumulative

<table>
<thead>
<tr>
<th>Percentage</th>
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<tbody>
<tr>
<td>94-100%</td>
<td>A</td>
</tr>
<tr>
<td>93%</td>
<td>A-</td>
</tr>
<tr>
<td>91-92%</td>
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<td>D-</td>
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<tr>
<td>0-69%</td>
<td>F</td>
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</table>

There is no rounding on grades. For example, a student who earns a grade of 77.8% is awarded a D+ grade as he/she has not earned 78% in entirety. If a student is at 80% or below, the student should initiate a conference with the instructor.

To determine the procedure for calculating grade point average, refer to the NICC College Catalog.
Radiologic Technology Portfolio

**Definition:** Purposeful collection of student’s work that exhibits the student’s efforts, progress, and achievements in one or more areas over a period of time.

Your portfolio can be used for:
- To get a job
- For awards and scholarships
- Document student learning
- Grades/assessment
- Feedback on learning performance

The purpose of your portfolio:
- Learning to evaluate one’s own work is an important instructional goal for all students
- It also teaches the student to communicate with different audiences

What goes into a program portfolio?
- A collection of a student’s work selected to serve a particular purpose
- Student’s best work
- Examples from each of the several categories of work

Each portfolio is unique, but all include gathering and organizing. All are based on documented evidence.

A Radiologic Technology portfolio should include: **All areas need to be typed.**

1. **Student Introduction: Autobiography page**
   a. Your autobiography page should also include your goals for your future achievement

2. **Mission Statement/Introductory page (Table of Contents):**
   a. Mission statement-a short description of the general purpose of your portfolio
   b. Introductory page-this is the Table of Contents of your portfolio.

3. **Assignments** – you will need at least one assignment from each of the following classes. You may include as many assignments from each class as you like. Section 3 will be the biggest section and you may want to subdivide.

   **CLASSES:**
   - Radiographic Patient Care
   - Radiographic Physics
   - Image Evaluation
   - Radiographic Pathology
   - Radiographic Image Exposure
   - Comprehensive Radiologic Review
Stipulations:
1. Your assignment will be chosen by you. Instructors may give you recommendations on certain assignments. Once your assignment is handed back to you with corrections, you need to make changes and put the revised assignment in your portfolio ALONG with the instructor corrected assignment.

2. You then need to write a written reflection with each assignment. This reflection should state why you chose the assignment and then also include a self-evaluation. An evaluation can include what you accomplished from the assignment, how it met your objectives or goals. Must be 3-5 sentences minimum.

4. **Clinical Competencies** – This section will include a check off form given to you by your instructor or a printed copy from Trajecsys.

5. **Profile** – This section must include a cover letter, resume, and references.

6. **CEU’s (Continuing Education Units)** – This section is for the student to keep documentation of meetings and/or seminars they attend that could be used for Continuing Education Credits. Section 6 may not be completed until you graduate, but if you attend meetings and conferences (Examples: Student-Educators Conference and the DDSRT) you may place this information here.

7. **Copy of Degree** – This section is for the student to keep a copy of their degree from NICC. After the student passes the ARRT exam they can make a copy of their certificate and place it here also.

   **This is a good place to add a copy of your CPR card (valid 2 years) Mandatory Adult and Child Abuse Reporting certificate (valid 5 years), your Permit to Practice.**

8. **Metacognitive essay** – This is an evaluation the student composes to let the instructor know how they felt they performed. The student reflects on their growth and what they learned as a student. They can state their weaknesses and strengths as they went through the program. Cover page is not required.

9. **Co-Curricular Activity Reflection** – This is a reflection of the Student-Educator Conference AND the Mentorship. Cover page not required.

The portfolio will have nine sections as listed above. The Radiologic Technology portfolio will be given a grade in your Comprehensive Radiologic Review class in the sixth semester.

Grading: The portfolio is worth 80 points.

Break down: Section 1: Student introduction 10 pts, Section 2: Mission Statement/Table of Contents 5 pts, Section 3: Assignments 30 pts, Section 4: Clinical Competencies, 5 pts, Section 5: Profile 5 pts, Section 6: CEU’s 5 pts, Section 7: Degree: 5 pts. Section 8: Metacognitive essay 5 pts: Section 9: Co-Curricular activity reflection 10 pts.
Professional Organizations

There are a variety of professional organizations to which a radiologic technology student may belong. These include:

JOINT REVIEW COMMITTEE ON EDUCATION IN RADIOLOGIC TECHNOLOGY
- Accreditation of Radiography programs.
- Compliance with the JRCERT standards helps to ensure the student is receiving a quality radiography education.
- www.jrcert.org

AMERICAN SOCIETY OF RADIOLOGIC TECHNOLOGISTS (ASRT)
- Provides national-level representation for national and state legislation.
- Provides convenient access to continuing education through directed reading quizzes in the bi-monthly Radiologic Technology Journal.
- Provides round-the-clock internet services for online DE resources, career information and new about the medical imaging and radiation oncology profession.
- Provides discounts on educational products and conferences.
- www.asrt.org
- Dues: Approximately $125.00 – yearly

IOWA SOCIETY OF RADIOLOGIC TECHNOLOGISTS (ISRT)
- State affiliate of parent organization, ASRT
- Purpose: to advance the science of radiologic technology by establishing and maintaining high standards of education and training, to evaluate the quality of patient care and to improve the welfare and socio-economics of radiologic technologists.
- Provides technologist with educational opportunities statewide
- Dues: Approximately $40-active member (ASRT and ARRT members), $45-associate member (must be ARRT member)-yearly, $15-student (in RT program)

AMERICAN REGISTRY OF RADIOLOGIC TECHNOLOGIST (ARRT)
- Certification board and registry for profession of radiologic technology
- Keeps track of required continuing education points (24 CEU’s per 2 yr. period)
- Maintains standards and requirements for technologists
- Fees: Approximately $25/year-required to maintain registration and certification- Due in month before birthday
- www.arrt.org

IOWA DEPARTMENT OF PUBLIC HEALTH (IDPH)
- Licensing board for the State of Iowa
- Keeps tracks of required continuing education points(24 CEU’s per 2 yr. period)
- Fees: Approximately $60/year-required to obtain license

As radiologic technologists, we pride ourselves in being known as medical professionals, and support these professional organizations. Please refer to the College Catalog for additional college organizations.
## Program Costs

### Radiologic Technology-AAS

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<th>Item</th>
<th>Term 1</th>
<th>Term 2</th>
<th>Term 3</th>
<th>Term 4</th>
<th>Term 5</th>
<th>Term 6</th>
<th>Program Total**</th>
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<td>Apparel/Clinical Supplies</td>
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<td>Clinical Tracking System</td>
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<td><strong>Term Total</strong></td>
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*For credit programs, the Tuition & Student Fees estimate is based on the course load outlined on the 2019-2020 program educational plan and the 2019-2020 Iowa resident tuition rate and student fees.

*Physical exam and immunizations are dependent upon student’s health insurance coverage. Uninsured costs may run as high as $1,500.

**Additional certification fees may be required upon course/program completion.

Students should be aware that some clinical sites may have additional requirements. Students are responsible for meeting these requirements and for the cost associated with these requirements.
Program Violation in Class and Clinical

All incidents resulting in a written reprimand will be documented and kept in the student’s file. Further infractions may result in dismissal from the program.

- On a student’s first infraction, they will receive a written reprimand.
- On a student’s second infraction, they will receive another written reprimand.
- On a student’s third infraction, they will be recommended for program dismissal.
- If a student is asked to leave or is dismissed from a clinical site, the student may be removed from that portion of the course and the program.

Program Workload

A full-time Radiologic Technology student should plan on attending classes on campus and clinical experiences at local health agencies for approximately 25 to 30 clock hours per week. Radiologic technology students who must be employed for salary and who are enrolled in more than 9 credit hours per term are advised to work no more than 8 clock hours per week. It is expected that students will arrange their work schedules around their class schedules.

Statement of Integrity and Moral Conduct

Integrity and moral conduct are crucial to the practice of radiologic technology. The behavior and continued commitment of radiologic technology students must demonstrate acceptable moral, ethical, and legal values. Students are required to adhere to the Standards of the Joint Review Committee on Education in Radiologic Technology. A hard copy is available in the program director’s office. A copy for student review is located in Appendix A of the Student Policy and Procedure Manual for the Administration of the Radiologic Technology Program.

Study Time

A grade of 2.0 “C” must be maintained in all courses in order to graduate. APPROXIMATELY THREE HOURS PREPARATION/STUDY TIME ARE RECOMMENDED FOR EACH HOUR SPENT IN THE CLASSROOM. Students are encouraged to make academic performance a primary concern while enrolled in the program. Work hours should be kept to a minimum as too many work shifts may cause a student to be unsuccessful. Students should not work all night prior to the clinical day shift. The financial repercussions of failure must be considered.

Success and Remediation Policy

The faculty members of the NICC Radiologic Technology Program recognize the value of student ownership by supporting the HESI Examination. The faculty support empowering students to recognize their own unique strengths and challenges in preparation for the American Registry for Radiologic Technology Board examination and for a successful career.

To prepare for the testing students are reminded of the seriousness and importance of preparing for the rigor of the exam by studying and preparing throughout the program and establishing a firm foundation of knowledge. Final preparation for the exam requires the investment of time and energy to achieve successful results. Last minute cramming for individual or national testing does not lead to success.
Testing Procedures

1. All exams are scheduled and may be taken early at the discretion of the instructor if extenuating circumstances arise. Test items will be taken from materials such as audiovisuals, lectures, discussion, assigned readings, handouts and workbook. Students are responsible for all material covered during scheduled, extended, or rescheduled lectures/lab for time lost related to snow days, instructor absence, etc. **Quizzes may be unannounced.**

2. Please bring the following for every test:
   - Please bring two sharpened #2 pencils. This will avoid the need to sharpen pencils during the test. Sharpening pencils during a test is disruptive to others who are testing.
   - Please bring your “block” eraser to use for any erasures.
   - Bring 2 ink pens, in case 1 runs out of ink.

3. All books and papers are to be placed at the front of the room prior to testing. All personal belongings must be placed at the front of the room. **Cell phones must be turned off and placed at the front of the room.** Only the answer sheet and test are permitted at the student’s desk. **Tests are timed. These will be announced at the beginning of the test and strictly adhered to. Tests will begin as scheduled (on time) with no extra time allowed for those late.**
   - A grade outline will be distributed at the beginning of each course indicating the number of points on each test and activity. In order to receive credit for a multiple answer question, all correct answers must be indicated.
   - Since your answer sheet will be scored by machine, it is absolutely necessary that you mark your answer correctly to avoid errors in the grade you receive.
   - On your answer sheet PRINT in the appropriate spaces your name, the name of the examination, and the date.
   - Keep the marked part of your answer sheet covered at all times. No talking with fellow students while testing is in progress. Try to avoid changing your answers. If you leave the testing room, it is assumed you are finished testing and your test will be picked up. Please plan ahead and take care of any personal needs before the test begins (restroom, Kleenex, drinks, etc.)
   - Mark only one response per item, unless otherwise instructed.
   - **If students have questions concerning a test item, they will be expected to stay in their chairs and raise their hands to receive assistance from the instructor. Only questions regarding possible typographical errors will be answered. All other questions will be answered at the discretion of the individual instructor.**
   - Clarifications and typographical errors will be noted on the whiteboard (to avoid disturbing everyone.) **Check the whiteboard during the test and before you submit your test.**
   - Your score on this test will be the number of answers you have marked correctly.
   - No gum “smacking” or hard candy “chewing” during testing, as they may be disruptive to others.
j. If the instructor determines a student is cheating as evidenced by the student’s actions, the program will follow NICC’s Academic Honesty Policy, the test will be picked up and the student will be given an “F” for the course.

k. When finished testing, the student is to quietly and promptly leave the testing room after turning in the test and answer sheet. Once the test is submitted, under NO circumstances will the test be returned. Be sure you have completed the entire test.

l. The instructor will identify when the test may be reviewed. If the student is absent when the test is returned, he/she may only see their grade. **No grades will be given over the phone, in order to protect confidentiality.**

m. When test results are returned, books, papers, pens, and pencils must be placed under your desk. **Questions regarding scoring or test items must be presented at that time. If no questions are raised, the student agrees the score is correct.**

n. If a test item is identified as invalid when analyzing the completed test, the instructor will delete the item. It is the instructor’s prerogative to allow students with the “best” answer to retain the point, or delete the test item totally if considered an unreliable question.

4. Many of the test questions are application or situational items. Application test items are at a higher level of learning than recall or knowledge test items. Recall test items are often very black and white or concrete (E.g. Where is the stomach located?). Higher level questions require students to apply knowledge and interpret the best answer in the situation. In the clinical/field situation, one applies many pieces of information or facts to make decisions. Testing in this manner will help you be successful in clinical/field as well as in future courses and the board exam.
Above and Beyond Learning Experiences

Approved Education Conference/Speakers: As a part of your Radiologic Technology Program at NICC, you will be invited to attend and participate in various continuing education activities. This is an excellent opportunity to become involved in your chosen profession. In order to participate in the seminars, you may be required to pay a fee. This promotes life-long learning. If you participate in any of these activities/seminars, please make copies of the form below and hand in the program brochure to the Clinical Coordinator. In addition, you will be required to submit a one full page of APA formatted summary of each 1 hour lecture that you attend. You may receive clinical time off for your hours attended.

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<tr>
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<tr>
<td>Title of Seminar: ______________________</td>
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<tr>
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Licensure Requirements

Licensure/Certification

In addition to being at least 18 years of age, the applicant must have the ability to perform necessary duties without constituting a hazard to the health or safety of patients, self, other health care workers, or the general public.

Specifically, the applicant must complete an approved course by either the Joint Review Committee on Educational Programs in Radiologic Technology or the Iowa Department of Public Health.

Licensure Examination

Radiology students applicants must “Be a graduate of an accredited high school or equivalent”. In addition, the ARRT has the express authority to review the felony conviction of an applicant and may deny licensure to any applicant who has been convicted of a felony, which relates to the practice of radiology. An applicant is a person who has filed an application with the ARRT and possesses all of the statutory requirements for the granting of a license. Persons who have not yet completed the pre-requisites for filing an application, such as completion of a course of study approved by the ARRT are not applicants.

The Board has a statutory authority to review the felony conviction of a radiology student who has neither completed the radiology program approved by the ARRT nor filed an application with the ARRT.

Completion of the Radiologic Technology Program at NICC does not guarantee that you will be allowed to sit for the ARRT exam, that you will pass the exam, or that you will be granted a license to practice as a radiologic technologist.

ARRT Exam Passing Rates

Graduates from Northeast Iowa Community College have exhibited a 88% passing rate on the ARRT exam for the last five years (2014-2018). Passing standards for the ARRT exam can be found on www.ARRT.org.

ARRT Exam Preparation

The best preparation for success on the ARRT exam is to maximize learning opportunities and test taking skills throughout the program. The radiologic technology program has designed many opportunities for this learning, but cannot learn for students. Coming prepared to class and getting involved in collaborative learning and other projects will promote the development of a knowledge base and critical thinking skills. Students should strive to learn the maximum, rather than just skimming by with minimum knowledge and preparation for class and clinical activities. The program will be providing tests and evaluation situations that encourage application and analysis of knowledge. These are similar to the knowledge tested on the ARRT exams. Students need to attend all course test review sessions to improve understanding of testing and the
development of test taking skills. Study groups also offer support and assist in the development of test taking skills. Taking a review course and planning study review sessions prior to the exam are also crucial for building confidence and preparation. The ARRT exam should be taken within three months of graduating.

**ARRT Exam Processing**

There will be at least a two-week delay between completion and release of official NICC transcripts. Your Program Director will provide thorough information on ARRT application and testing procedures prior to graduation.

The American Registry of Radiologic Technologist contact information is listed below:

Address: American Registry of Radiologic Technologist
1255 Northland Drive
St Paul, MN 55120

Phone: (651) 687-0048

Web site: www.ARRT.org

**Mandatory Reporting**

Radiologic Technology students are required by Iowa law to report other Radiologic Technologists whose actions (or omissions to act) violate the American Registry of Radiologic Technologist code of ethics. Unethical, incompetent, unprofessional or behavior harmful (or potentially harmful) to the health, safety and/or welfare of the client are examples. Radiologic Technology instructors also must comply. Therefore, the Radiologic Technology program will report continued or egregious unsafe student behavior. Students will be informed of this action. Licensees also have a duty to report their own drug/substance abuse involvement or that of other licensees of which they are aware. Reporting is not optional but mandatory, and failure to comply may result in discipline to the non-reporter or program.

**Clinical/Lab Policy and Procedure**
The American Registry of Radiologic Technologists – Standards of Ethics

ARRT STANDARDS OF ETHICS

2. The radiologic technologist acts to advance the principal objective of the profession to provide services to humanity with full respect for the dignity of mankind.

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

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

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

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

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

8. The radiologic technologist practices ethical conduct appropriate to the profession and protects the patient’s right to quality radiologic technology care.

9. The radiologic technologist respects confidences entrusted in the course of professional practice, respects the patient’s right to privacy, and reveals confidential information only as required by law or to protect the welfare of the individual or the community.

10. The radiologic technologist continuously strives to improve knowledge and skills by participating in continuing education and professional activities, sharing knowledge with colleagues, and investigating new aspects of professional practice.

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

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B. RULES OF ETHICS

The Rules of Ethics form the second part of the Standards of Ethics. They are mandatory standards of minimally acceptable professional conduct for all Certificate Holders and Candidates. Certification and registration are methods of assuring the medical community and the public that an individual is qualified to practice within the profession. Because the public relies on certificates and registrations issued by ARRT, it is essential that Certificate Holders and Candidates act consistently with these Rules of Ethics. These Rules of Ethics are intended to promote the protection, safety, and comfort of patients.

The Rules of Ethics are enforceable. R.T.s are required to notify ARRT of any ethics violation, including state licensing issues and criminal charges and convictions, within 30 days of the occurrence or during their annual renewal of certification and registration, whichever comes first. Applicants for certification and registration are required to notify ARRT of any ethics violation, including state licensing issues and criminal charges and convictions, within 30 days of the occurrence.

Certificate Holders and Candidates engaging in any of the following conduct or activities, or who permit the occurrence of the following conduct or activities with respect to them, have violated the Rules of Ethics and are subject to sanctions as described hereunder:

The titles and headings are for convenience only, and shall not be used to limit, alter or interpret the language of any Rule.

Fraud or Deceptive Practices

Fraud Involving Certification and Registration
1. Employing fraud or deceit in procuring or attempting to procure, maintain, renew, or obtain or restate certification and registration as issued by ARRT, employment in radiologic technology, or a state permit, license, or registration certificate in radiologic technology. This includes altering in any respect any document issued by ARRT or any state or federal agency, or by indicating in writing certification and registration with ARRT when that is not the case.

Fraudulent Communication Regarding Credentials
2. Engaging in false, fraudulent, deceptive, or misleading communications to any person regarding any individual’s education, training, credentials, experience, or qualifications, or the status of any individual’s state permit, license, or registration certificate in radiologic technology or certificate of registration with ARRT.

Fraudulent Billing Practices
3. Knowingly engaging or assisting any person to engage in, or otherwise participating in, abusive or fraudulent billing practices, including violations of federal Medicare and Medicaid laws or state medical assistance laws.

Subversion

Examination / CQR Subversion
4. Subverting or attempting to subvert ARRT’s examination process, and/or the structured self-assessments that are part of the Continuing Qualifications Requirements (CQR) process. Conduct that subverts or attempts to subvert ARRT’s examination and/or CQR assessment process includes, but is not limited to:

(i) disclosing examination and/or CQR assessment information using language that is substantially similar to that used in questions and/or answers from ARRT examinations and/or CQR assessments when such information is gained as a direct result of having been an examinee or a participant in a CQR assessment or having communicated with an examinee or a CQR participant; this includes, but is not limited to, disclosures to students in educational programs, graduates of educational programs, educators, anyone else involved in the preparation of Candidates to sit for the examinations, or CQR participants; and/or

(ii) soliciting and/or receiving examination and/or CQR assessment information that uses language that is substantially similar to that used in questions and/or answers on ARRT examinations or CQR assessments from an examinee, or a CQR participant, whether requested or not; and/or

(iii) copying, publishing, reconstructing (whether by memory or otherwise), reproducing or transmitting any portion of examination and/or CQR assessment materials by any means, verbal or written, electronic or mechanical, without the prior express written permission of ARRT or using professional, paid or repeat examination takers and/or CQR assessment participants, or any other individual for the purpose of reconstructing any portion of examination and/or CQR assessment materials; and/or

(iv) using or purporting to use any portion of examination and/or CQR assessment materials that were obtained improperly or without authorization for the purpose of instructing or preparing any Candidate for examination or participant for CQR assessment, and/or

(v) selling or offering to sell, buying or offering to buy, or distributing or offering to distribute any portion of examination and/or CQR assessment materials without authorization; and/or

(vi) removing or attempting to remove examination and/or CQR assessment materials from an examination or assessment room; and/or

(vii) having unauthorized possession of any portion of or information concerning a future, current, or previously administered examination or CQR assessment of ARRT; and/or

(viii) disclosing what purports to be, or what you claim to be, or under all circumstances is likely to be understood by the recipient as, any portion of or “inside” information concerning any portion of a future, current, or previously administered examination or CQR assessment of ARRT; and/or

(ix) communicating with another individual during administration of the examination or CQR assessment for the purpose of giving or receiving help in answering examination or CQR assessment questions, copying another Candidate’s, or CQR participant’s answers, permitting another Candidate or a CQR participant to copy one’s answers, or possessing unauthorized materials including, but not limited to, notes, and/or

(x) impersonating a Candidate, or a CQR participant, or permitting an imposter to take or attempt to take the examination or CQR assessment on one’s own behalf; and/or

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(x) using any other means that potentially alters the results of the examination or CQR assessment such that the results may not accurately represent the professional knowledge base of a Candidate, or a CQR participant.

**Education Subversion**

5. Subverting, attempting to subvert, or aiding others to subvert or attempt to subvert ARRT’s education requirements, including but not limited to, Continuing Education Requirements (CER), clinical experience and competency requirements, structured education activities, and/or ARRT’s Continuing Qualifications Requirements (CQR). Conduct that subverts or attempts to subvert ARRT’s education or CQR Requirements includes, but is not limited to:

   (i) providing false, inaccurate, altered, or deceptive information related to CE, clinical experience or competency requirements, structured education or CQR activities to ARRT or an ARRT recognized recordkeeper; and/or

   (ii) assisting others to provide false, inaccurate, altered, or deceptive information related to education requirements or CQR activities to ARRT or an ARRT recognized recordkeeper; and/or

   (iii) conduct that results or could result in a false or deceptive report of CE, clinical experience or competency requirements, structured education activities or CQR completion; and/or

   (iv) conduct that in any way compromises the integrity of ARRT’s education requirements, including, but not limited to, CE, clinical experience and competency requirements, structured education activities, or CQR Requirements such as sharing answers to the post-tests or self-learning activities, providing or using false certificates of participation, or verifying credits that were not earned or clinical procedures that were not performed.

**Failure to Cooperate with ARRT Investigation**

8. Subverting or attempting to subvert ARRT’s certification and registration processes by:

   (i) making a false statement or knowingly providing false information to ARRT; or

   (ii) failing to cooperate with any investigation by ARRT.

**Unprofessional Conduct**

**Failure to Conform to Minimal Acceptable Standards**

7. Engaging in unprofessional conduct, including, but not limited to:

   (i) a departure from or failure to conform to applicable federal, state, or local governmental rules regarding radiologic technology practice or scope of practice; or

   (ii) any radiologic technology practice that may create unnecessary danger to a patient’s life, health, or safety.

   Actual injury to a patient or the public need not be established under this clause.

**Sexual Misconduct**

8. Engaging in conduct with a patient that is sexual or may reasonably be interpreted by the patient as sexual, or in any verbal behavior that is seductive or sexually demeaning to a patient; or engaging in sexual exploitation of a patient or former patient. This also applies to any unwanted sexual behavior, verbal or otherwise.

**Unethical Conduct**

9. Engaging in any unethical conduct, including, but not limited to, conduct likely to deceive, defraud, or harm the public, or demonstrating a willful or careless disregard for the health, welfare, or safety of a patient. Actual injury need not be established under this clause.

**Scope of Practice**

**Technical Incompetence**

10. Performing procedures which the individual is not competent to perform through appropriate training and/or education or experience unless assisted or personally supervised by someone who is competent (through training and/or education or experience).

**Improper Supervision in Practice**

11. Knowingly assisting, advising, or allowing a person without a current and appropriate state permit, license, registration, or an ARRT registered certificate to engage in the practice of radiologic technology, in a jurisdiction that mandates such requirements.

**Improper Delegation or Acceptance of a Function**

12. Delegating or accepting the delegation of a radiologic technology function or any other prescribed healthcare function when the delegation or acceptance could reasonably be expected to create an unnecessary danger to a patient’s life, health, or safety. Actual injury to a patient need not be established under this clause.

**Fitness to Practice**

**Actual or Potential Inability to Practice**

13. Actual or potential inability to practice radiologic technology with reasonable skill and safety to patients by reason of illness; use of alcohol, drugs, chemicals, or any other material; or as a result of any mental or physical condition.

**Inability to Practice by Judicial Determination**

14. Adjudication as mentally incompetent, mentally ill, chemically dependent, or dangerous to the public, by a court of competent jurisdiction.

**Improper Management of Patient Records**

**False or Deceptive Entries**

15. Improper management of patient records, including failure to maintain adequate patient records or to furnish a patient record or report required by law, or making, causing, or permitting anyone to make false, deceptive, or misleading entry in any patient record.

**Failure to Protect Confidential Patient Information**

16. Revealing a privileged communication from or relating to a former or current patient, except when otherwise required or permitted by law, or viewing, using, releasing, or otherwise failing to adequately protect the security or privacy of confidential patient information.
Knowingly Providing False Information
17. Knowingly providing false or misleading information that is directly related to the care of a former or current patient.

Violation of State or Federal Law or Regulatory Rule
Narcotics or Controlled Substances Law
18. Violating a state or federal narcotics or controlled substance law, even if not charged or convicted of a violation of law.

Regulatory Authority or Certification Board Rule
19. Violating a rule adopted by a state or federal regulatory authority or certification board resulting in the individual’s professional license, permit, registration or certification being denied, revoked, suspended, placed on probation or a consent agreement or order, voluntarily surrendered, subjected to any conditions, or failing to report to ARRT any of the violations or actions identified in this Rule.

Criminal Proceedings
20. Convictions, criminal proceedings, or military courts-martial as described below: (i) conviction of a crime, including, but not limited to, a felony, a gross misdemeanor, or a misdemeanor, with the sole exception of speeding and parking violations. All alcohol and/or drug related violations must be reported; and/or (ii) criminal proceeding where a finding or verdict of guilt is made or returned but the adjudication of guilt is either withheld, deferred, or not entered or the sentence is suspended or stayed; or a criminal proceeding where the individual enters an Alford plea, a plea of guilty or nolo contendere (no contest), or where the individual enters into a pre-trial diversion activity; or (iii) military courts-martial related to any offense identified in these Rules of Ethics.

Duty to Report
Failure to Report Violation
21. Knowing of a violation or a probable violation of any Rule of Ethics by any Certificate Holder or Candidate and failing to promptly report in writing the same to ARRT.

Failure to Report Error
22. Failing to immediately report to the Certificate Holder’s or Candidate’s supervisor information concerning an error made in connection with imaging, treating, or caring for a patient. For purposes of this rule, errors include any departure from the standard of care that reasonably may be considered to be potentially harmful, unethical, or improper (omission). Errors also include behavior that is negligent or should have occurred in connection with a patient’s care, but did not (omission). The duty to report under this rule exists whether or not the patient suffered any injury.

C. ADMINISTRATIVE PROCEDURES
These Administrative Procedures provide for the structure and operation of the Ethics Committee, they detail procedures followed by the Ethics Committee and by the Board of Trustees of ARRT in handling challenges raised under the Rules of Ethics, and in handling matters relating to the denial of an application for certification and registration (for reasons other than failure to meet the criteria as stated in Article II, Sections 2.03 and 2.04 of the Rules and Regulations of ARRT, in which case, there is no right to a hearing) or the denial of renewal or reinstatement of certification and registration. All Certificate Holders and Candidates are required to comply with these Administrative Procedures. All Certificate Holders and Candidates are expected to conduct themselves in a professional and respectful manner in their interactions with the ARRT Board of Trustees, Ethics Committee and/or staff. Failure to cooperate with the Ethics Committee or the Board of Trustees in a proceeding involving a challenge or ethics review may be considered by the Ethics Committee and by the Board of Trustees according to the same procedures and with the same sanctions as failure to observe the Rules of Ethics.

1. Ethics Committee

(a) Membership and Responsibilities of the Ethics Committee
The President, with the approval of the Board of Trustees, appoints at least three Trustees to serve as members of the Ethics Committee, each such person to serve on the Committee until removed and replaced by the President, with the approval of the Board of Trustees, at any time, with or without cause. The President, with the approval of the Board of Trustees, will also appoint a fourth, alternate member to the Committee. The alternate member will participate on the Committee in the event that one of the members of the Ethics Committee is unable to participate. The Ethics Committee is responsible for: (1) investigating each alleged breach of the Rules of Ethics and determining whether a Certificate Holder or Candidate has failed to observe the Rules of Ethics and determining an appropriate sanction; and (2) periodically assessing the Code of Ethics, Rules of Ethics, and Administrative Procedures and recommending any amendments to the Board of Trustees.

(b) The Chair of the Ethics Committee
The President, with the approval of the Board of Trustees, appoints one member of the Ethics Committee as the principal administrative officer responsible for management of the promulgation, interpretation, and enforcement of the Standards of Ethics. The President may remove and replace the Chair of the Committee, with the approval of the Board of Trustees, at any time, with or without cause. The Chair presides at and participates in meetings of the Ethics Committee and is responsible directly and exclusively to the Board of Trustees, using staff, legal counsel, and other resources necessary to fulfill the responsibilities of administering the Standards of Ethics.

(c) Preliminary Screening of Potential Violations of the Rules of Ethics
The Chair of the Ethics Committee shall review each alleged violation of the Rules of Ethics that is brought to the attention of the Ethics Committee if, in the sole discretion of the Chair: (1) there is insufficient information upon which to base a charge of a violation of the Rules of Ethics; or (2) the allegations against the Certificate Holder or Candidate are patently frivolous or inconsequential; or (3) the allegations, if true, would not constitute a violation of the Rules of Ethics; the Chair may summarily dismiss the matter. The Chair may be assisted by staff and/or legal counsel of ARRT. The Chair shall report each
such summary dismissal to the Ethics Committee.

At the Chair’s direction and upon request, the Executive Director of ARRT shall have the power to investigate allegations regarding the possible settlement of an alleged violation of the Rules of Ethics. The Executive Director may be assisted by staff members and/or legal counsel of ARRT. The Executive Director is not empowered to enter into a binding settlement, but rather may convey and/or recommend proposed settlements to the Ethics Committee. The Ethics Committee may accept the proposed settlement, make a counterproposal to the Certificate Holder or Candidate, or reject the proposed settlement and proceed under these Administrative Procedures.

2. Hearings

Whenever ARRT proposes to take action in respect to the denial of an application for certification and registration (for reasons other than failure to meet the criteria as stated in Article II, Sections 2.03 and 2.04 of the Rules and Regulations of ARRT, in which case there is no right to a hearing) or of an application for renewal or reinstatement of certification and registration, or in connection with the revocation or suspension of certification and registration, or the censure of a Certificate Holder or Candidate for an alleged violation of the Rules of Ethics, it shall give written notice thereof to such person, specifying the reasons for such proposed action. A Certificate Holder or Candidate to whom such notice is given shall have 30 days from the date the notice of such proposed action is mailed to make a written request for a hearing. The written request for a hearing must be accompanied by a nonrefundable hearing fee in the amount of $100. In rare cases, the hearing fee may be waived, in whole or in part, at the sole discretion of the Ethics Committee.

Failure to make a written request for a hearing and to remit the hearing fee (unless the hearing fee is waived in writing by ARRT) within such period or submission of a properly executed Hearing Waiver form within such period shall constitute consent to the action taken by the Ethics Committee or the Board of Trustees pursuant to such notice. A Certificate Holder or Candidate who requests a hearing in the manner prescribed above shall advise the Ethics Committee of the intention to appear at the hearing. A Certificate Holder or Candidate who requests a hearing may elect to appear in person, via teleconference, or by a written submission which shall be verified or acknowledged under oath.

A Certificate Holder or Candidate may waive the 30 day timeframe to request a hearing. To request a waiver of the 30 day timeframe, the Certificate Holder or Candidate must complete a Hearing Waiver form that is available on the ARRT website at www.arrt.org. The Hearing Waiver form must be signed by the Certificate Holder or Candidate, notarized, and submitted to ARRT. The Executive Director of ARRT shall have the authority to receive, administer, and grant the Hearing Waiver form and may be assisted by staff members and/or legal counsel of ARRT.

Failure to appear at the hearing in person or via teleconference, or to supply a written submission in response to the charges shall be deemed a default on the merits and shall be deemed consent to whatever action or disciplinary measures that the Ethics Committee determines to take. Hearings shall be held at such date, time, and place as shall be designated by the Ethics Committee or the Executive Director. The Certificate Holder or Candidate shall be given at least 30 days notice of the date, time, and place of the hearing. The hearing is conducted by the Ethics Committee with any three or more of its members participating, other than any member of the Ethics Committee whose professional activities are conducted at a location in the approximate area of the Certificate Holder or Candidate in question. In the event of such disqualification, the President may appoint a Trustee to serve on the Ethics Committee for the sole purpose of participating in the hearing and rendering a decision. At the hearing, ARRT shall present the charges against the Certificate Holder or Candidate in question, and the facts and evidence of ARRT in respect to the basis or bases for the proposed action or disciplinary measure. The Ethics Committee may be assisted by legal counsel. The Certificate Holder or Candidate in question, by legal counsel or other representative (at the sole expense of the Certificate Holder or Candidate in question), shall have the right to call witnesses, present testimony, and be heard in the Certificate Holder’s or Candidate’s own defense, to hear the testimony of and to cross-examine any witnesses appearing at such hearing, and to present such other evidence or testimony as the Ethics Committee shall deem appropriate to do substantial justice. Any information may be considered that is relevant or potentially relevant. The Ethics Committee shall not be bound by any state or federal rules of evidence. The Certificate Holder or Candidate in question shall have the right to submit a written statement at the close of the hearing. A transcript or an audio recording of the hearing testimony is made for in person and teleconference hearings only. Ethics Committee deliberations are not recorded.

In the case where ARRT proposes to take action in respect to the denial of an application for certification and registration (for reasons other than failure to meet the criteria as stated in Article II, Sections 2.03 and 2.04 of the Rules and Regulations of ARRT) or the denial of renewal or reinstatement of certification and registration, the Ethics Committee shall assess the evidence presented at the hearing and make its decision accordingly, and shall prepare written findings of fact and its determination as to whether grounds exist for the denial of an application for certification and registration or renewal or reinstatement of certification and registration, and shall promptly transmit the same to the Board of Trustees and to the Certificate Holder or Candidate in question.

In the case of alleged violations of the Rules of Ethics by a Certificate Holder or Candidate, the Ethics Committee shall assess the evidence presented at the hearing and make its decision accordingly, and shall prepare written findings of fact and its determination as to whether there has been a violation of the Rules of Ethics and, if so, the appropriate sanction, and shall promptly transmit the same to the Board of Trustees and to the Certificate Holder or Candidate in question. Potential sanctions include denial of renewal or reinstatement of certification and registration with ARRT, revocation or suspension of certification and registration with ARRT, or the public or private reprimand of a Certificate Holder or Candidate. Unless a timely appeal from any findings of fact and determination by the Ethics Committee is taken to the Board of Trustees in accordance with Section 3 below (Appeals), the Ethics Committee’s findings of fact and determination in any matter (including the specified sanction) shall be final and binding upon the Certificate Holder or Candidate in question.
3. Appeals

Except as otherwise noted in these Administrative Procedures, the Certificate Holder or Candidate may appeal any decision of the Ethics Committee to the Board of Trustees by submitting a written request for an appeal within 30 days after the decision of the Ethics Committee is mailed. The written request for an appeal must be accompanied by a nonrefundable appeal fee in the amount of $250. In rare cases, the appeal fee may be waived, in whole or in part, at the sole discretion of the Ethics Committee.

Failure to make a written request for an appeal and to remit the appeal fee (unless the appeal fee is waived in writing by ARRT) within such period or submission of a properly executed Appeal Waiver form within such period shall constitute consent to the action taken by the Ethics Committee or Board of Trustees pursuant to such notice.

A Certificate Holder or Candidate may waive the 30 day timeframe to request an appeal. To request a waiver of the 30 day timeframe, the Certificate Holder or Candidate must complete an Appeal Waiver form that is available on the ARRT website at www.arrt.org. The Appeal Waiver form must be signed by the Certificate Holder or Candidate, notarized, and submitted to ARRT. The Executive Director of ARRT shall have the authority to receive, administer, and grant the Appeal Waiver form and may be assisted by staff members and/or legal counsel of ARRT.

In the event of an appeal, those Trustees who participated in the hearing of the Ethics Committee shall not participate in the appeal. The remaining members of the Board of Trustees shall consider the decision of the Ethics Committee, the files and records of ARRT applicable to the case at issue, and any written appellate submission of the Certificate Holder or Candidate in question, and shall determine whether to affirm or to modify the decision of the Ethics Committee or to remand the matter to the Ethics Committee for further consideration. In making such determination to affirm or to modify, findings of fact made by the Ethics Committee shall be conclusive if supported by any evidence. The Board of Trustees may grant re-hearings, hear additional evidence, or request that ARRT or the Certificate Holder or Candidate in question provide additional information in such manner, on such issues, and within such time as it may prescribe. All hearings and appeals provided for herein shall be private at all stages. It shall be considered an act of professional misconduct for any Certificate Holder or Candidate to make an unauthorized publication or revelation of the same, except to the Certificate Holder’s or Candidate’s attorney or other representative, immediate superior, or employer.

4. Adverse Decisions

(a) Private Reprimands
A private reprimand is a reprimand that is between the individual and ARRT and is not reported to the public. Private reprimands allow for continued certification and registration.

(b) Public Reprimands
A public reprimand is a sanction that is published on ARRT’s website for a period of one year. Public reprimands allow for continued certification and registration.

(c) Conditional
Conditional status may be given for continued certification and registration in those cases where there are minimal conditions of the court that need to be met before the court case is closed (e.g., court ordered supervised probation).

(d) Suspensions
Suspension is the temporary removal of an individual’s certification and registration in all categories for up to one year.

(e) Summary Suspensions
Summary suspension is an immediate suspension of an individual’s certification and registration in all categories. If an alleged violation of the Rules of Ethics involves the occurrence, with respect to a Certificate Holder, of an event described in the Rules of Ethics, or any other event that the Ethics Committee determines would, if true, potentially pose harm to the health, safety, or well being of any patient or the public, then, notwithstanding anything apparently or expressly to the contrary contained in these Administrative Procedures, the Ethics Committee may, without prior notice to the Certificate Holder and without a prior hearing, summarily suspend the certification and registration of the Certificate Holder pending a final determination under these Administrative Procedures with respect to whether the alleged violation of the Rules of Ethics in fact occurred. Within five working days after the Ethics Committee summarily suspends the certification and registration of a Certificate Holder in accordance with this provision, the Ethics Committee shall, by certified mail, return receipt requested, give to the Certificate Holder written notice that describes: (1) the summary suspension; (2) the reason or reasons for it; and (3) the right of the Certificate Holder to request a hearing with respect to the summary suspension by written notice to the Ethics Committee, which written notice must be received by the Ethics Committee not later than 15 days after the date of the written notice of summary suspension by the Ethics Committee to the Certificate Holder. If the Certificate Holder requests a hearing in a timely manner with respect to the summary suspension, the hearing shall be held before the Ethics Committee or a panel comprised of no fewer than three members of the Ethics Committee as promptly as practicable, but in any event within 30 days after the Ethics Committee’s receipt of the Certificate Holder’s request for the hearing, unless both the individual and the Ethics Committee agree to a postponement beyond the 30 day period. The Ethics Committee has the absolute discretion to deny any request for a postponement and to proceed to a hearing with or without the participation of the individual. The applicable provisions of Section 2 (Hearings) of these Administrative Procedures shall govern all hearings with respect to summary suspensions, except that neither a determination of the Ethics Committee, in the absence of a timely request for a hearing by the affected Certificate Holder, nor a determination by the Ethics Committee or a panel, following a timely requested hearing, is appealable to the Board of Trustees.

(f) Ineligible
An individual may be determined ineligible for certification and registration or ineligible for reinstatement of certification and registration. The time frame may be time limited or permanent.
(g) Revocation
Revocation removes the individual's certification and registration in all categories. The time frame may be time limited or permanent.

(h) Alternative Dispositions
An Alternative Disposition ("AD") is a contract between an individual and the ARRT Ethics Committee that allows for continued certification and registration in lieu of revocation, provided the individual performs certain requirements, including, but not limited to, providing documentation, attending counseling and/or submitting to random drug and/or alcohol screening. A Certificate Holder or Candidate who voluntarily enters into an Alternative Disposition Agreement agrees to waive all rights set forth in these Administrative Procedures.

(i) Voluntary Surrender of Credentials
At any time during the ethics review process, the Certificate Holder may request to voluntarily surrender ARRT credentials and accept permanent revocation of ARRT certification and registration. To request a voluntary surrender, the Certificate Holder must complete the Voluntary Credential Surrender and Sanction Agreement form ("Agreement") that is available on the ARRT website at www.arrt.org. The Agreement must be signed by the Certificate Holder, notarized, and submitted to ARRT. The Executive Director of ARRT shall have the authority to receive the request and may be assisted by staff members and/or legal counsel of ARRT. The Executive Director is not empowered to enter into a binding agreement, but rather may recommend a proposed action to the Ethics Committee. The Ethics Committee will then decide whether to accept or deny the request for surrender of credentials. If denied by ARRT, the ethics review process will continue according to the Standards of Ethics. If accepted by ARRT, the ethics review process will be discontinued, the Certificate Holder agrees to waive all rights set forth in these Administrative Procedures, and a sanction for permanent revocation will be entered against the Certificate Holder.

(j) Civil or Criminal Penalties
Conduct that violates ARRT’s Rules of Ethics may also violate applicable state or federal law. In addition to the potential sanctions under the Standards of Ethics, ARRT may, without giving prior notice, pursue civil and/or criminal penalties against the Certificate Holder or Candidate.

5. Publication of Adverse Decisions
Summary suspensions and final decisions (other than private reprimands) that are adverse to the Certificate Holder or Candidate will be communicated to the appropriate authorities of certification organizations and state licensing agencies and provided in response to written inquiries into an individual’s certification and registration status. The ARRT shall also have the right to publish any final adverse decisions and summary suspensions and the reasons therefore. For purposes of this paragraph, a “final decision” means and includes a determination of the Ethics Committee relating to an adverse decision if the affected Certificate Holder or Candidate does not request a hearing in a timely manner; a non-appealable decision of the Ethics Committee; an appealable decision of the Ethics Committee from which no timely appeal is taken; and, the decision of the Board of Trustees in a case involving an appeal of an appealable decision of the Ethics Committee.

6. Procedure to Request Removal of a Sanction
A sanction imposed by ARRT, including a sanction specified in a Settlement Agreement, specifically provides a sanction time frame and it shall be presumed that a sanction may only be reconsidered after the time frame has elapsed. At any point after a sanction first becomes eligible for reconsideration, the individual may submit a written request ("Request") to ARRT asking the Ethics Committee to remove the sanction. The Request must be accompanied by a nonrefundable fee in the amount of $250. A Request that is not accompanied by the fee will be returned to the individual and will not be considered. In rare cases, the fee may be waived, in whole or in part, at the sole discretion of the Ethics Committee. The individual is not entitled to make a personal appearance before the Ethics Committee in connection with a Request to remove a sanction or to modify a Settlement Agreement.

Although there is no required format, Requests for both sanction removal and Settlement Agreement modification must include compelling reasons justifying the removal of the sanction or modification of the Settlement Agreement. It is recommended that the individual demonstrate at least the following: (1) an understanding of the reasons for the sanction; (2) an understanding of why the action leading to the sanction was felt to warrant the sanction imposed; and (3) detailed information demonstrating that the Certificate Holder’s or Candidate’s behavior has improved and similar activities will not be repeated.
Letters of recommendation from individuals, who are knowledgeable about the person’s sanction imposed; and current character and behavior, including efforts at rehabilitation, are advised. If a letter of recommendation is not on original letterhead or is not duly notarized, the Ethics Committee shall have the discretion to ignore that letter of recommendation.

Removal of the sanction is a prerequisite to apply for certification and registration. If, at the sole discretion of the Ethics Committee, the sanction is removed, the individual will be allowed to pursue certification and registration via the policies and procedures in place at that time as stated in Section 8.05 of the ARRT Rules and Regulations.

If the Ethics Committee denies a Request for removal of the sanction or modification of a Settlement Agreement, the decision is not subject to a hearing or to an appeal, and the Committee will not reconsider removal of the sanction or modification of the Settlement Agreement for as long as is directed by the Committee.

7. Amendments to the Standards of Ethics
The ARRT reserves the right to amend the Standards of Ethics following the procedures under Article XI, Section 11.02 of the ARRT Rules and Regulations.
Camera Devices in Clinical

No video or photography of any kind may be taken while at clinical sites. Failure to adhere to this policy violates client confidentiality and could result in dismissal from the program.

Charting

Students are not allowed to complete official facility-specific patient care documentation. Students are encouraged to complete an unofficial patient care report for review by the preceptor to facilitate their documentation skills.

Clinical Evaluations

Clinical evaluations are based upon performance according to course objectives. Each student is to be evaluated using a clinical evaluation form completed by NICC faculty or appointed clinical advisors. A clinical evaluation summary can be found in Trajecsys at any time throughout the semester for the student to review. See Clinic Evaluation Forms in the Forms Section of this manual.

Student performance improvement plans will be initiated for students exhibiting patterns of performance/behavior that could lead to a clinical failure. Students who do not perform each individual section of their daily evaluations at 78% will be placed on a Performance Improvement Plan (PIP). The PIP will include what must be completed within a specific time frame in order to continue in the program. Any student who consistently receives an overall unsatisfactory evaluation or has been involved in a critical incident, will be considered unsafe and may receive an “F” for the course.

Clinical Attendance

Due to the complexity of the radiography program, students are expected to attend all clinical practicums. Clinical experiences are interrelated, and absence, tardiness, or inability to complete a shift from one clinical area will make the student less effective in other clinical areas. Repeated clinical absences and tardiness may jeopardize status in the program, and will be reflected on employment recommendations. Attendance at clinicals must be documented through Trajecsys. Time logs must be completed daily at clinical sites to be included in mandatory clinical hours.

Students who cannot attend for the scheduled shift will be considered absent for the shift. If a student is unable to attend a clinical assignment, the student must notify the department at the clinical site and the NICC Clinical Coordinator within 1/2 hour from the beginning time of the scheduled shift through email or the NICC’s Clinical Coordinator’s office voicemail. Failure to do so will result in a “0” on professionalism in the clinical setting section on the daily evaluation. Clinical absences must be recorded in Trajecsys.

Any scheduled clinical time missed may result in a “0” on the professionalism section of the clinical evaluation and will require the missed time to be made up. A student with a documented
release from a Physician will not be penalized on the clinical evaluation, but will still need to make up the time of the absence period.

Extensive absenteeism will result in the student participating in counseling with an NICC counselor. In the event of an emergency or prolonged illness, NICC reserves the right to require written documentation from a physician prior to returning to clinical.

A total of two clinical makeup days will be scheduled by the NICC Clinical Coordinator during the last two weeks of the semester, which may include finals week. If the student has earned any “Above and Beyond Learning Experiences,” the time earned may be used at this time. Failure to complete all clinical requirements by the end of each semester will result in a failure, “F.” Students who have a documented excuse from a physician may receive an “Incomplete” with a deadline to complete absent hours to earn credit for that semester.

**Students are not to be in the clinical setting outside of scheduled hours.**

**Leaving Clinical Early**

Students are not permitted to leave early from the clinical sites or areas unless they are given prior approval from the NICC instructor. If clinical staff excuses a student from a clinical area due to low census or any other reason, the student is instructed to contact their clinical instructor for re-assignment. Students who excessively leave clinic assignments early will receive a verbal/written reprimand. A student who leaves early more than 3 times in a semester without prior approval may be removed from the program.

**Tardiness**

Students are required to arrive "on-time" to their clinical assignments. Students who are excessively late for clinical assignments will receive a verbal/written reprimand. Tardiness will be reflected in the students clinical grade. Students arriving late to the clinical area will be required to "make-up" the time on the day it takes place unless approved by the Program Director and/or Clinical Coordinator. Students are required to log in and out times in Trajecsys. A student who is tardy more than 3 times in a semester without prior approval may be removed from the program.

Failure to inform the instructor and clinical site of tardiness, absence (”no call, no show”), or leaving the site early is considered client abandonment and may result in failure of the course.

**Clinical/Field Cancellation**

The College makes every effort to post school delays or cancellations for broadcasting on news and radio stations in a timely manner. Due to the early hours of clinical rotations, this information may be broadcast after the student is in route to their location. Therefore, students are advised to use their own discretion before venturing out when road conditions may be hazardous. In addition, students are encouraged to utilize a phone tree in clinical for current updates from the instructor. Students are expected to call their clinical instructor/site if they are going to be late to clinical due to inclement weather.
The following guidelines apply to College cancellations related to inclement weather for clinical rotations in the district:

1. If NICC closes campus due to inclement weather, clinical will also be canceled for that day. Students who arrive at a clinical site prior to notification of the campus closing may choose to stay and complete clinical hours at their own discretion, providing that the clinical site and program clinical coordinator agrees and providing that there is an instructor or preceptor on site assigned to the student(s). The program clinical coordinator must also notify the department dean with the name(s) of each student and their clinical site.

2. If the college cancellation occurs after the clinical day has started, the clinical instructor will work to release students in a timely manner from the clinical area without disruption to client care.

3. Students may be required to make up a cancelled clinical day at the discretion of the clinical coordinator. Clinical hours may be made-up using one of the following methods:
   a) Re-schedule date to complete an additional clinical shift at the clinical site;
   b) Written assignments based upon clinical objectives for the course.

In the event a student is unable to attend clinical due to weather, the student will be required to follow the instructor guidelines for clinical absence.

NOTE: College cancellations due to inclement weather may not apply to weather conditions in clinical locations that are not within the College district (Platteville, Monroe etc.). Therefore, it is up to the clinical instructor and the Dean/Program Chair discretion if the students are on-site and clinical may be held. It is also up to the clinical instructor and Dean/Program Chair to cancel clinical due to inclement weather for clinical sites out of the district. In the event of cancellations, the clinical day will be made-up according to #3 above.

Clinical Instructor Absence

When the clinical instructor is absent from the assigned clinical area, the following procedure will be followed:

1. The instructor will notify the clinical site that the clinical experience has been cancelled for the day. The instructor may notify the students in advance if the absence is expected.

2. In the event the instructor was not able to notify the students, the facility personnel will deliver the message to the radiologic technology students upon arrival to the clinical site.

3. Students may not remain in the clinical area without clinical advisor supervision or others approved by clinical coordinator. Therefore, every attempt will be made to re-assign students to an alternative assignment to meet the clinical objectives. Alternative assignments include:
   a. Attending an outlying area;
   b. Join another clinical group;
c. Complete an alternate independent assignment;
d. Learning activities assigned on campus.

4. Students who do not attend or complete the alternative assignments will be considered absent from clinical.

5. If arrangements have not been made for an alternative assignment, students are to return home and will make up the clinical hours upon review by the clinical coordinator. Clinical hours may be made-up using one of the following methods:
a. Re-schedule date to complete an additional clinical shift at the clinical site;
b. Schedule a lab day at the College;
c. Written assignments based upon clinical objectives for the course.

6. In the event an instructor will be absent for a prolonged period of time, a qualified substitute will be assigned to the clinical site or the students will be reassigned to other clinical groups.

**Clinical/Field Protective Health Policy**

Physical and mental health are essential components of well-being and are imperative components for successful performance in a health care program. An alteration or limitation in the physical or mental functioning has the potential to influence client/personnel safety and affect the quality of the care provided by the student.

To assure that client safety is not compromised and to avoid the increased risk of student injury, the preceptor, using professional knowledge and judgment, may request the student to leave the clinical or field setting if the student’s physical or mental status is impaired. Physical and mental impairment that potentially may affect student performance in the clinical or field setting may include, but is not limited to:

- contagious conditions (i.e. chicken pox, influenza, herpes simplex)
- immune-suppressed conditions (i.e. chemotherapy)
- physical limitations (i.e. back/neck injury, fracture, sprain, surgery, high risk pregnancy)
- impairment of judgment/mental functioning (i.e. prescription drug, drug or alcohol use/abuse)
- cognitive impairment (i.e. anxiety disorder, panic disorder, depression)
- uncorrected visual/hearing impairment.

When the instructor/preceptor becomes aware of any of the identified or similar conditions, the following procedure will be initiated:

1. After gathering sufficient information concerning the physical and/or mental status of the student, the instructor will determine the feasibility of the student remaining in the clinical setting. If it is determined that that student is not able to perform at the expected level due to physical illness or limitations and/or mental impairment, the student will be dismissed from the clinical setting.
2. The student will be notified that dismissal from the clinical setting will result in a clinical absence or absences that will be addressed as specified in the program policy manual.

3. The instructor will notify the Dean of Allied Health of the student’s health status and action taken within 24 hours.

4. Documentation of the student’s status and instructor’s action will be completed within 24 hours and a copy will be provided to the Dean of Allied Health within 48 hours.

5. A signed medical release by a physician (MD or DO) will be required at the discretion of the instructor and in consultation with the Dean of Allied Health before the student can return to the clinical setting. Information provided by the physician must include a statement confirming that the student’s condition has resolved and no longer presents a client/student safety concern. The student must be able to resume functioning at a level compatible with meeting clinical requirements and achieving clinical competence.

Clinical Grading

- Course grades for Clinical Education I will be determined by the following: 85% - clinical evaluations; 10% - competency testing; 5% - log sheet completion.
- Course grades for Clinic Ed II will be determined by the following: 70% clinical evaluation, 10% clinical competency testing, 5% online technique quiz, 5% log sheet completion and 10% laboratory grade. The laboratory grade includes technique worksheet and laboratory worksheets.
- Course grades for Clinic Ed III will be determined by the following: 70% clinical evaluations, 10% competency testing, 5% log sheet completion, 10% trauma lab and 5% online technique quiz.
- Course grades for Clinic Ed IV-VI will be determined by the following: 80% clinical evaluations, 10% competency testing, 5% log sheet completion and 5% online technique quiz.
- An online clinical Policy and Procedure quiz must be passed with a 100% for clinical assignment completion in semester I and semester IV two weeks prior to semester completion.
- An online technique quiz is required to be completed semesters two through six, which is due two weeks prior to semester completion.
- There are assigned clinical modules that must be completed with an 86% in semesters III-VI two weeks prior to semester completion.
- Students shall maintain a minimal “C-” average in clinical education.

Clinical Hours

These hours are approximate. Clinical hours may vary according to assigned site. During 1st year, clinicals will be Thursdays and Fridays from 7:00 a.m. – 3:30 p.m. and during 2nd year, clinicals will be Mondays and Tuesdays from 7:00 a.m. – 3:30 p.m.
Evening: 11:30 a.m. – 8:00 p.m. - All students
Weekend Rotations: First year summer semester and second year students will be assigned weekend rotations to enhance their clinical experiences. These rotations offer more trauma, portables, and non-routine procedures. Students will be assigned a minimum of 3 weekend rotations which include Saturday and Sunday shifts from 7:00 a.m. to 3:30 p.m. for day shift and 11:30 a.m. to 8:00 p.m. for evening shift. The following Monday and Tuesday will be non-clinical days for 2nd years and the prior Thursday and Friday for 1st year students.

Clinical Makeup Hours

1. The clinical hours that are to be made up must be completed on scheduled clinical day during the last two weeks of the semester. Failure to make up hours on the scheduled clinical day may result in failure for the course. This will affect the student’s progress in the program. Makeup hours must be logged in Trajecsys.
2. Students may not exceed ten (10) scheduled hours of a clinical assignment in one day for safety of students and patients. Students may not exceed a maximum of forty (40) hours of clinical and classroom hours in one week.
3. Every attempt will be made to schedule a makeup day at the rotation and shift in which the absence occurs.
4. No makeup time is permitted on holidays or semester breaks.
5. Students are required to obtain verification from clinical instructors/advisors for all compensatory time though use of the “Compensatory Time Form” found in the forms section of this manual and at clinical sites.
6. All earned Compensatory Time Forms must be submitted to a NICC instructor/advisor for credit toward absenteeism.
7. Absence or tardiness for makeup time will be considered the same as an absence or tardiness on a regularly scheduled clinical day.

Clinical Policies

1. Students will be required to adhere to all policies of the school, hospital, and radiology department during clinical assignments.
2. Students will be required to complete the orientation checklist at assigned clinical locations within two days of attendance.
3. Students will be required to perform those radiographic procedures which are designated as routine at their assigned clinical site.
4. Students are expected to conduct themselves in a professional manner at all times during clinical assignments.
5. Students shall not be permitted to perform radiographic procedures without direct supervision of a registered radiologic technologist unless they have successfully completed competency testing.
6. Students shall not perform radiographic procedures that they have not had in class without direct supervision.
7. Students will be required to log all examinations that they are involved with during the clinical experience. This log sheet will be completed weekly in Trajecsys.
8. Students are required to obtain approval of their radiographs from a registered technologist, radiologists, or supervisory personnel.
9. Students are not permitted to assist or perform clinical activities with a non-registered technologist.
10. All make up time will be scheduled by the Clinical Coordinator.
11. Students are required to make up clinical time on the scheduled make up day(s).
12. Students are not permitted to wear surgery scrubs or hospital lab coats unless they are scheduled for a rotation which scrubs and hospital lab coats are required (surgery, 2nd shift, specials). Surgery scrubs cannot be worn outside the hospital.
13. Students are only allowed to complete a competency with an NICC instructor during their 1st semester. After the 1st semester, clinical advisors can evaluate competencies (except for equipment and transporting).
14. Failure to adhere to any of the clinical policies will affect the student’s clinical grade. It may also result in the student being asked by the Clinical Coordinator, Program Director, or Dean of Allied Health to leave the clinical site until the student complies with the policies. Counseling may be required, depending on policy infraction.

Clinical Records

No part of a patient’s record should be copied, whether permitted by the clinical institution or not as this violates HIPAA guidelines.

Clinical Site Room Assignment

Students will rotate through multiple clinical sites within a 100-mile radius from NICC’s Peosta Campus. Students assigned to radiographic rooms will be expected to actively participate in all procedures performed in their room assignment. Clinical site and room assignments will be posted in the radiology department by the first day of each semester and each student will be given a copy.

Students will not be permitted to switch rooms with another student unless authorized by the Clinical Advisor or NICC staff. Students may observe procedures and/or participate in a radiographic procedure in another room under the following conditions:

1. No procedures are being performed in his/her assigned room.
2. No other student is assigned to that room.
3. If requested by the Clinical Advisor or NICC staff.

Students are not to perform radiographic procedures designated for another room unless authorized by the Clinical Advisor and/or NICC faculty.

Clinical Staff/Student Ratio

Radiography Clinical Staff to student ratio must be 1 to 1. However it is acceptable that more than one student may be temporarily assigned to more than one technologist during uncommonly performed procedures in clinical accordance with the Joint Review Committee on Education in Radiologic Technology guidelines.
Clinical Time-off

Students will be required to notify with documentation of reason AND use the “Clinical Time OFF Request Form” found in the forms section of this Manual in the event that he/she must take time off from the clinical area for the following reasons:

a. Funeral (3 days maximum for – parents, children, spouse, grandparents, siblings, fiancé, father-in-law, mother-in-law, sister or brother-in-law) - make-up required.

b. ROTC, Military leave
c. Authorized leave by Clinical Coordinator and/or Program Director
d. Medical reasons
e. Jury duty, court appearance, etc.

This notification must be initiated by the student and approved by the Clinical Coordinator.
All clinical time missed must be made up and must be arranged with the Clinical Advisor.

Clinical Uniform

A uniform is worn during clinical experiences only. Please do not wear outside of clinical. The uniform must be clean, without wrinkles and must be made of a fabric which properly conceals undergarments. It must be in good repair at all times and replaced before evidence of wear detracts from the overall general appearance of the student. The uniform must fit in a manner which allows freedom of movement without evidence of excessive pulling or wrinkling. The length and style of the uniform must be appropriate in dress and/or pant length and physical build of the individual. The uniform pants should not drag on the floor or have flared bottoms. Shoes and socks must be white. The student should not wear the uniform outside of the clinical setting to avoid pathogen transmission.

All students are required to wear the designated uniform when assigned to the clinical sites. Failure to comply will result in a written reprimand. If in doubt about any apparel ask the program director before purchasing. Uniforms should be clean and pressed at all times. Shoes must be white, enclosed in the toe and heel and not have vent holes greater than 1/4”. White socks must be worn with shoes. Scrub pants must not drag on the floor or have flared bottoms. Clinical handbook/personal notebook is a requirement to the clinical uniform.

Female Student: Matching uniform scrub shirt and pants as specified by NICC
All white leather hospital or tennis shoes (no clogs)
White or clear nylons, white cotton or trouser socks
Plain white t-shirt must be worn under scrub shirt
Identification badge (name tag)
Radiation dosimeter
Lab coat (optional)
No sweaters or sport shirts

Male Student: Matching uniform scrub shirt and pants as specified by NICC
All white leather hospital or tennis shoes (no clogs)
White cotton or trouser socks
Plain white t-shirt must be worn under scrub shirt
Identification badge (*name tag*)
Radiation dosimeter
Lab coat (*optional*)
No sport shirts or sweaters

**Clinical Appearance:**

**Hairstyles:** Hair should be clean and neat. If longer than shoulder length, it must be tied back away from the face during clinical assignment. Extreme hair colors or styles are not permitted.

**Beards:** Beards and mustaches must be kept clean and neatly trimmed close to face. Beard nets or covers may be required in some clinical areas.

**Make-up:** Make-up is to be in moderation in tone. Eye shadow may be worn if appropriate colors are used. Perfume/Cologne are not allowed.

**Jewelry:** Must not be worn in excessive amounts. Necklaces may not be worn with the uniform. Only ¼” size or smaller post earrings that are plain are acceptable. Loop earrings and posts with decorations or dangling objects are not permitted. Only one earring per ear may be worn. Pierced jewelry in the nose or eyebrow or other visible areas is *NOT* permitted. Hand jewelry will be limited to one ring. Ear gage plugs must be flesh colored.

**Tattoos:** Must be covered or concealed.

**Gum:** No chewing gum during clinical assignments.

**Nails:** Nails should be clean and not longer than ¼ inch, so as not to injure the patient. No acrylic nails or tips are allowed. No colored fingernail polish.

**Hygiene:** Maintain good personal and oral hygiene. Bad breath and body odor are unacceptable. A student shall be removed from the clinical area if any patient, doctor, or staff person complains of an offensive odor originating from the student. Offensive odors include, but are not limited to body odor, strong colognes/perfumes, bad breath, and/or odors associated with tobacco use by the students or others.

NICC photo ID badge is to be worn at all times when in the role of a radiologic technology student.

In addition to professional attire, students must conduct themselves in a professional manner in the clinical settings. This includes no gum chewing in the clinical area. Smoking is not allowed on the clinical properties or in the clinical area. Students are asked to not smoke before or during the day of clinical, as clients often find the smell of smoke intolerable. Students will be asked to leave the clinical area if they smell of smoke, which will be counted as a clinical absence for the day. The Clinical Advisors(s) or the NICC faculty will send a student home and/or ask the student to leave the clinical area until he/she complies with the above guidelines.

This policy may be superseded by the policies of the clinical or field experience sites in which case the site’s policies will be followed at all times.
Compensatory Time-off

Students who stay beyond their assigned clinical time, will be given compensatory time off. Compensatory time will consist of the following:

1. Assisting during a radiographic procedure.
2. Finishing a radiographic procedure.
3. Prior permission to observe procedures of educational interest; special procedures, non-routine procedures, unusual procedures, etc.

All compensatory time must be documented by the clinical instructor and/or Clinical Advisor. Students cannot accumulate compensatory time off. All compensatory time off must be taken within the semester of which it occurs. Approved compensatory time off cannot be used to shorten the length of the program.

Competency Failures and Repeat Competencies

If a student either fails or must repeat a competency, they must complete these competencies with an NICC clinical instructor, not a clinical advisor. The original competency grade will be recorded and will be included in the clinical competency grade. An NICC clinical instructor can remove a previously earned competency from a student if their clinical performance for an exam is unacceptable according to the competency. Students must pass all required ARRT competencies prior to program completion. Failure to do so will result in program failure.

End of Semester Deadlines

All clinical grading components are due by the last scheduled clinical day of each semester. Quizzes and homework assignment will have set due dates.

Competencies (Random)

Random competencies will be required during each of the semesters starting with the second. The student is responsible for notifying an instructor or clinical advisor that they need to complete these competencies. The competencies are to be completed by an NICC Clinical Instructor, or a Clinical Advisor. Semester two students will complete 6 random competencies during the NICC lab rotation. The third through sixth semesters require 1 random each semester. When one random does not get successfully passed each required semester, there will be a 5% grade drop in the final grade for that particular clinical semester.

Consent Forms

Students are not allowed to sign/witness patient consent forms in the clinical settings.
Critical Incidents

A critical incident is a situation or behavior that evidences immoral, illegal or unethical behavior. Persistent errors in safety and judgment are also considered critical incidents. Critical incidents will result in a review of the incident by the Program Director prior to determination of consequences. Critical incidents may result in immediate termination in the program.

Examples of Infractions of Moral and Ethical Conduct include but are not limited to:

1. Disruptive classroom or clinical behavior;
2. Threatening, intimidating or coercing faculty or facility personnel on school or clinical premises;
3. Attending clinical with a communicable disease (mumps, shingles etc.);
4. Failure to respect policies of health agencies used for clinical learning;
5. Breach of patient confidentiality/accessing unauthorized client records including your own;
6. Lying;
7. Falsifying client information;
8. Cheating/plagiarism;
9. Stealing supplies from the lab or clinical facilities;
10. Willful neglect or abandonment in care of patients/abusive treatment of clients or visitors;
11. Illegal gain and distribution of drugs;
12. Use of client's medications for self or family;
13. Failing to report a student or health care worker who exhibits one of the above behaviors.

Additional examples of Critical Incidents include but are not limited to:

1. Attending clinical with minimal preparation;
2. Insubordination or refusal to perform during clinical assignments;
3. Deliberate exposure of dosimeter;
4. Leaving the clinical area without completing patient care;
5. Lying about care delivered;
6. Impaired judgment or behavior that indicates possible use of drugs and/or alcohol before or during class, lab, or clinical learning activities;
7. Persistent judgmental errors in performance of radiographic procedures;
8. Failing to use the appropriate level of supervision for a procedure;
9. Deliberately physically or verbally harming a person.

When student's performance is deemed unsafe or unprofessional by program faculty, the health care facility site staff, or designated field preceptor, the student may be removed from that portion of the course and program. The program instructor will work with the Dean of Allied Health to determine the disciplinary action warranted.

The program administrators reserve the right to require a medical examination or counseling of any student whose behavior may compromise or does compromise client care and/or safety. Such an examination may provide data concerning the physical and/or mental ability to perform
satisfactorily. The cost of such an examination will be paid by the student. The College shall retain the right to prescribe the type and extent of the examination and to specify who shall perform it. Should the prescribed type and extent of the examination be performed by the student’s own physician, the College may request a second opinion. This medical examination may be required to continue, progress, and/or re-enter the program.

The hospital and/or clinical/field agency has the right to request a drug screen related to a violation in client safety.

The hospital and/or clinical/field agency has the right to remove a student from their setting for any breach in safety, confidentiality or professionalism.

Students will be subject to disciplinary actions when the clinical or personal performance is determined to be inconsistent with the code of ethics and/or responsibility and accountability for guarding the safety of the patient. As a professional program, it is the responsibility of the faculty to determine if action is indicated.

**Dosimeter**

**Students will complete a Radiation Safety Program with the Program Director each year.** Personnel monitoring dosimeters will be issued to all students enrolled in the program. Dosimeters are issued every other month and a record of radiation exposure on each student will be kept on file. If a report indicates a high dose for any student then the program director and clinical coordinator will assess the situation and discuss a possible schedule change. The following procedures are to be complied with:

1. Dosimeters **MUST** be worn whenever assigned to the clinical area or energized laboratory.
2. Dosimeters will be worn at collar level and outside the apron during fluoroscopic procedures.
3. Dosimeters **SHOULD NEVER** be worn outside the hospital and/or clinic. Dosimeters are to be **LEFT** in the designated area of the radiology department at the end of each assigned shift.
4. If the dosimeter is lost, damaged, or stolen, it must be reported to the Clinical Coordinator **IMMEDIATELY** for documentation purposes. **Student will be responsible for the costs of the second dosimeter.**
5. Upon completion of the program, dosimeters are to be returned to the Clinical Coordinator. Degrees will be withheld until dosimeter is returned.
6. Graduating students accepting positions must submit a request in writing to the Program Director for transfer of their radiation records.
7. New dosimeters are issued on approximately the 10th of every other month.
8. Students are not permitted to wear another student’s dosimeters if they cannot locate their assigned dosimeters.
9. All students are required to verify acknowledgment of radiation exposure by initialing and dating the monthly dosimeters report.
10. Students are not allowed to attend clinical assignments that involve radiation exposure without their dosimeter.

**Exposure Incidents**

Students are to adhere to Standard Precautions and OSHA bloodborne pathogen standards. This includes safe handling and disposing of sharps and contaminated material, and adherence to agency exposure control policies including use of personal protective equipment and timely reporting of exposure incidents. If stuck with a needle or sharp object, or exposed to blood or body fluids during lab, clinical or program activities, the following steps should be taken:

- **IMMEDIATELY** wash the affected area with soap and running water (or appropriate first aid) and contact your program instructor or preceptor. Contact the Program Director if the instructor cannot be reached. The instructor or program administrative personnel with then contact the appropriate infection control personnel at the agency to verify the recommendations for adherence to current Center for Disease Control (CDC) standards for follow-up testing and post exposure prophylaxis (PEP) treatment.

- Follow the immediate infection control recommendations of the agency in which the exposure occurred.

- Fill out the NICC Medical Incident report form and the agency incident report form. The original NICC Medical Incident Report form, along with a copy of the agency incident form must be filed at NICC within 24 hours of the occurrence.

- Follow agency guidelines for follow-up testing and post exposure prophylaxis (PEP) treatment. Students should also notify their health care provider.

**It is vital that action be taken immediately, as delays beyond 4 hours may affect treatment outcomes.**


**Holding Patients/Image Receptor**

Students are not allowed to hold patients or image receptor for any radiologic procedure. Safe radiation protection skills will be practiced in the clinical setting and any deviation from this policy will result in documentation on a student’s daily evaluation. Immobilization devices should be used to hold patients who need assistance. If this does not work, hospital employees (nurses, physicians, etc…who are not female and of childbearing age) should be asked to assist the patient during the radiologic exam. Students may assist patients with movement during fluoroscopic exams.
I.D. Badge

All students will be issued an identification badge that shall be worn during clinical assignments. Identification badges shall be worn on the upper left side of the student's uniform top. Students must have a photo I.D. on at all times during clinical. Lost or damaged IDs can be replaced in the NICC Student Activities office.

Image Markers, Clinical Binders and Pocket Notebook

Students are required to purchase a set of identification markers to be used in the clinical site. Lost markers must be purchased immediately. Students are required to use their own personal markers for all radiographic procedures that they perform. Students are not allowed to attend clinical or perform exams unless they have their image markers available to use.

Students are required to use an NICC binder for the Clinical Competencies Module that is purchased through the NICC’s bookstore. Because this binder will be taken into the clinical site areas, it is important to maintain a professional student image. Other than your name, no additional personalization will not be allowed on or within the binder. The clinical module is a requirement during clinical attendance.

Students are required to use a pocket notebook for clinical reference and is included as part of the clinical uniform. This notebook could be created or purchased by the student. Other than your name, no additional personalization will be allowed on the outside covers. The pocket notebook is a requirement during clinical attendance.

Invasive Procedures

Students are not allowed to carry out invasive procedures on themselves or other students for any reason while in the program. Students in violation of this policy will be removed from the program.

Lab Requirements

Lab Dress Code

The health lab setting must be an environment that promotes professional student interaction and respect as students strive to meet established competencies. Students are required to wear clinical uniform when scheduled in a Radiographic laboratory. Students who are inappropriately attired, will be asked to leave the lab setting to change clothes and will be counted as absent for lab time missed. A dosimeter must be worn.

Lab Equipment

Students are responsible to purchase the required radiographic lead markers and lab manual prior to the first lab day. Students not prepared for lab will be documented as absent for that lab day.
MRI Safety Program

The Radiologic Technology Program at Northeast Iowa Community College requires that all students and staff who participate in clinical assignments complete the MRI Safety Program and complete a screening protocol each year. The screening will be reviewed by the Program Director for approval to participate in potential access to the magnetic resonance environment.

Each individual who has potential access to the magnetic resonance environment must complete the following:

1. View the MRI safety video by Picker
2. Complete a MRI safety screening questionnaire yearly
3. Approval granted for access to the magnetic resonance environment

This assures that students are appropriately screened for magnetic wave or radiofrequency hazards.

A copy of the screening protocol is available in the Program Director’s office.

Patients’ Bill of Rights

1. The patient has the right to considerate and respectful care.
2. The patient has the right to obtain from his physician complete current information concerning his diagnosis, treatment, and prognosis in terms the patient can be reasonably expected to understand. When it is not medically advisable to give such information to the patient, the information should be made available to an appropriate person in his behalf. He has the right to know, by name, the physician responsible for coordinating his care.
3. The patient has the right to receive from his physician information necessary to give informed consent prior to the start of any procedure and/or treatment. Except in emergencies, such information for informed consent should include but not necessarily be limited to the specific procedure and/or treatment, the medically significant risks involved, and the probable duration of incapacitation. Where medically significant alternatives for care or treatment exist, or when the patient requests information concerning medical alternatives, the patient has the right to such information. The patient also has the right to know the name of the person responsible for the procedures and/or treatment.
4. The patient has the right to refuse treatment to the extent permitted by law, and to be informed of the medical consequences of his action.
5. The patient has the right to every consideration of his privacy concerning his own medical care program. Case discussion, consultation, examination, and treatment are confidential and should be discussed discreetly. Those not directly involved in his care must have the permission of the patient to be present.
6. The patient has the right to expect that all communications and record pertaining to his care should be treated as confidential.
7. The patient has the right to expect that within its capacity a hospital must make reasonable response to request of a patient for services. The hospital must provide evaluation, service, and/or referral as indicated by the urgency of the case. When medically permissible a patient
may be transferred to another facility only after he has received complete information and explanation concerning the needs for and alternatives to such a transfer. The institution to which the patient is to be transferred must first have accepted the patient for transfer.

8. The patient has the right to obtain information as to any relationship of his hospital to other health care and educational institutions insofar as his care is concerned. The patient has the right to obtain information as to the existence of any professional relationships among individuals, by name, who are treating him.

9. The patient has the right to be advised if the hospital proposes to engage in or perform human experimentation affecting his care or treatment. The patient has the right to refuse to participate in such research projects.

10. The patient has the right to expect reasonable continuity of care. He has the right to know in advance what appointment times and physicians are available and where. The patient has the right to expect that the hospital will provide a mechanism whereby he is informed by his physician or a delegate of the physician of the patient’s continuing health care requirements following discharge.

11. The patient has the right to examine and receive an explanation of his bill regardless of source of payment.

12. The patient has the right to know what hospital rules and regulation apply to his conduct as a patient.

**Personal Belongings**

All students are encouraged to keep their personal belongings in their locked cars or in an assigned locker (students must provide the padlock) at the clinical sites. Northeast Iowa Community College, the clinical facility, or the clinical instructors are NOT responsible for lost or stolen belongings while attending clinical assignments.

**Physical Contact During Lab and Clinical**

Students can expect to be involved in clothed, physical contact (touching) by instructors and other program students in laboratory and clinical settings to provide opportunities to obtain positioning experience that will enhance their skills for the profession. Physical contact will include, but is not limited to, touching of the clothed shoulders, torso, limbs, digits, head, and neck of others during practice lab procedures and being touched in the same manner by others in the program. These experiences will be under the guidance and supervision of an instructor or clinical site preceptor.

Students who are uncomfortable with physical contact shall immediately and privately notify the program instructor, director, or department dean.

There will be NO radiation emitted during these positioning experiences. All experiences in an *energized* laboratory will be under the direct supervision of a qualified technologist.
Policy on Radiation Safety

The Iowa Department of Public Health (IDPH) requires that an employee is considered a radiation worker if their dose exceeds 10% of the MPD of 5000 mrem/year. In accordance with state guidelines for maintaining radiation exposure “As Low As Reasonably Achievable (ALARA)”, Northeast Iowa Community College strives to assure student exposure during clinical rotations stays under 500 mrem/year. The action levels established are 200 mrem/quarter and 400 mrem/quarter which are below the state regulated limit of 1250 mrem/quarter. All equipment users must complete a Radiation Safety Program with either the Program Director or clinical site designee. This program provides equipment users with information about protecting themselves, patients, patient’s families, and the health care team. The Program Director or clinical site designee also covers the material each year upon completion of the Radiation Safety Program prior to any clinical assignment. All equipment users must complete an acknowledgement form.

All equipment users receive and are required to wear a radiation monitoring badge(s) at all times when at clinical rotations. The badge(s) is to be worn as instructed. Badges are to be left at their clinical site when not in use. It is also the equipment users responsibility to move their badges to their new site when they switch sites.

To assure equipment users safety:

- The Clinical Coordinator will review radiation monitoring badge reports every other month when the Clinical Coordinator receives them from a commercial dosimeter service.

- If an equipment users exposure exceeds 200 mrem in one calendar quarter, he/she receives a letter and is counseled.

- If an equipment users exposure exceeds 400 mrem in one calendar quarter, he/she receives a letter, is counseled, and exposure is recorded by the Clinical Coordinator. The Clinical Coordinator will determine if an additional measures need to be taken.

- Radiation monitoring badge reports are distributed to equipment users for review. Equipment users sign, date and return the reports that are maintained in the Clinical Coordinator’s office.

- Coursework covers information on radiation monitoring devices and radiation protection in greater detail.

Equipment users complete a Radiation Safety program during the beginning of each year. The energized laboratory requires direct supervision and will remain locked at all times. Availability is granted to qualified staff only.
Pregnancy

Under the Department of Education’s (DOE) Title IX regulations, an institution that receives federal funding “shall not discriminate against any student, or exclude any student from its education program or activity, including any class or extracurricular activity, on the basis of such student’s pregnancy, childbirth, false pregnancy, termination of pregnancy or recovery therefrom.” According to DOE, appropriate treatment of a pregnant student includes granting the student leave “for so long a period of time as is deemed medically necessary by the student’s physician,” and then effectively reinstating the student to the same status as was held when the leave began.

Students are encouraged to work with their faculty members and Northeast Iowa Community College’s support systems to devise a plan for how to best to address the conditions as pregnancy progresses, anticipate the need for leaves, minimize the academic impact of their absence and get back on track as efficiently and comfortably as possible. The Title IX Coordinator will assist with plan development and implementation as needed.

Prior to exposure to radiation in clinical assignments, students will be instructed regarding radiation hazards to the embryo/fetus in Radiographic Patient Care and the Clinical Orientation Lecture. Instruction will include a copy of US Nuclear Regulatory Guide 8.13 written by the Nuclear Regulatory Commission and this policy. Students will be required to sign an acknowledgment form indicating that the student attended a lecture and received a copy of the Regulatory Guide and this policy.

The student has the option of whether or not to inform the program officials of a pregnancy. If the student chooses to inform the Program Director of her pregnancy, it must be in writing and indicate the expected date of delivery. The pregnancy declaration form is located in this manual. In the absence of this voluntary written disclosure, a student cannot be considered pregnant.

If the student chooses to voluntarily declare the pregnancy, the following options will be provided:

a. Continue both the didactic and clinical education courses without modifications
   • Student must meet with the Clinical Coordinator to review the U.S. Nuclear Regulatory Commission Guide 8.13 and review required radiation protection measures.
   • All clinical and didactic coursework must be fulfilled according to the Educational Plan at Northeast Iowa Community College.
   • Must wear an additional radiation monitoring device near the lower abdominal area and under the lead apron. This monitor will be measured monthly.
   • Review monthly personal radiation dosimetry reports with the Clinical Coordinator within 30 days of program receipt.
   • Student will be assigned to the same clinical rotations as a non-pregnant student
b. Leave of Absence from the Radiologic Technology Program
   • Discontinue didactic and clinical education courses
   • Re-enter program based on program re-admission criteria
c. Discontinue Program
The student may withdraw their declaration at any time by completing the Withdrawal of Declaring Pregnancy form located in this manual.
A. INTRODUCTION

The Code of Federal Regulations in 10 CFR Part 19, "Notices, Instructions and Reports to Workers: Inspection and Investigations," in Section 19.12, "Instructions to Workers," requires instruction in "the health protection problems associated with exposure to radiation and/or radioactive material, in precautions or procedures to minimize exposure, and in the purposes and functions of protective devices employed." The instructions must be "commensurate with potential radiological health protection problems present in the work place."

The Nuclear Regulatory Commission's (NRC's) regulations on radiation protection are specified in 10 CFR Part 20, "Standards for Protection Against Radiation"; and Section 20.1208, "Dose to an Embryo/Fetus," requires licensees to "ensure that the dose to an embryo/fetus during the entire pregnancy, due to occupational exposure of a declared pregnant woman, does not exceed 0.5 rem (5 mSv)." Section 20.1208 also requires licensees to "make efforts to avoid substantial variation above a uniform monthly exposure rate to a declared pregnant woman." A declared pregnant woman is defined in 10 CFR 20.1003 as a woman who has voluntarily informed her employer, in writing, of her pregnancy and the estimated date of conception.

This regulatory guide is intended to provide information to pregnant women, and other personnel, to help them make decisions regarding radiation exposure during pregnancy. This Regulatory Guide 8.13 supplements Regulatory Guide 8.29, "Instruction Concerning Risks from Occupational Radiation Exposure" (Ref. 1), which contains a broad discussion of the risks from exposure to ionizing radiation.

Other sections of the NRC's regulations also specify requirements for monitoring external and internal occupational dose to a declared pregnant woman. In 10 CFR 20.1502, "Conditions Requiring Individual Monitoring of External and Internal Occupational Dose," licensees are required to monitor the occupational dose to a declared pregnant woman, using an individual monitoring device, if it is likely that the declared pregnant woman will receive, from external sources, a deep dose equivalent in excess of 0.1 rem (1 mSv). According to Paragraph (e) of 10 CFR 20.2106, "Records of Individual Monitoring Results," the licensee must maintain records of dose to an embryo/fetus if monitoring was required, and the records of dose to the embryo/fetus must be kept with the records of dose to the declared pregnant woman. The declaration of pregnancy must be kept on file, but may be maintained separately from the dose records. The
licensee must retain the required form or record until the Commission terminates each pertinent license requiring the record.

The information collections in this regulatory guide are covered by the requirements of 10 CFR Parts 19 or 20, which were approved by the Office of Management and Budget, approval numbers 3150-0044 and 3150-0014, respectively. The NRC may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

B. DISCUSSION

As discussed in Regulatory Guide 8.29 (Ref. 1), exposure to any level of radiation is assumed to carry with it a certain amount of risk. In the absence of scientific certainty regarding the relationship between low dose exposure and health effects, and as a conservative assumption for radiation protection purposes, the scientific community generally assumes that any exposure to ionizing radiation may cause undesirable biological effects and that the likelihood of these effects increases as the dose increases. At the occupational dose limit for the whole body of 5 rem (50 mSv) per year, the risk is believed to be very low.

The magnitude of risk of childhood cancer following in utero exposure is uncertain in that both negative and positive studies have been reported. The data from these studies "are consistent with a lifetime cancer risk resulting from exposure during gestation which is two to three times that for the adult" (NCRP Report No. 116, Ref. 2). The NRC has reviewed the available scientific literature and has concluded that the 0.5 rem (5 mSv) limit specified in 10 CFR 20.1208 provides an adequate margin of protection for the embryo/fetus. This dose limit reflects the desire to limit the total lifetime risk of leukemia and other cancers associated with radiation exposure during pregnancy.

In order for a pregnant worker to take advantage of the lower exposure limit and dose monitoring provisions specified in 10 CFR Part 20, the woman must declare her pregnancy in writing to the licensee. A form letter for declaring pregnancy is provided in this guide or the licensee may use its own form letter for declaring pregnancy. A separate written declaration should be submitted for each pregnancy.

C. REGULATORY POSITION

1. Who Should Receive Instruction
   Female workers who require training under 10 CFR 19.12 should be provided with the information contained in this guide. In addition to the information contained in Regulatory Guide 8.29 (Ref. 1), this information may be included as part of the training required under 10 CFR 19.12.

2. Providing Instruction
   The occupational worker may be given a copy of this guide with its Appendix, an explanation of the contents of the guide, and an opportunity to ask questions and request additional information. The information in this guide and Appendix should also be provided to any
worker or supervisor who may be affected by a declaration of pregnancy or who may have to take some action in response to such a declaration.

Classroom instruction may supplement the written information. If the licensee provides classroom instruction, the instructor should have some knowledge of the biological effects of radiation to be able to answer questions that may go beyond the information provided in this guide. Videotaped presentations may be used for classroom instruction. Regardless of whether the licensee provides classroom training, the licensee should give workers the opportunity to ask questions about information contained in this Regulatory Guide 8.13. The licensee may take credit for instruction that the worker has received within the past year at other licensed facilities or in other courses or training.

3. **Licensee's Policy on Declared Pregnant Women**
   The instruction provided should describe the licensee's specific policy on declared pregnant women, including how those policies may affect a woman's work situation. In particular, the instruction should include a description of the licensee's policies, if any, that may affect the declared pregnant woman's work situation after she has filed a written declaration of pregnancy consistent with 10 CFR 20.1208.

   The instruction should also identify who to contact for additional information as well as identify who should receive the written declaration of pregnancy. The recipient of the woman's declaration may be identified by name (e.g., John Smith), position (e.g., immediate supervisor, the radiation safety officer), or department (e.g., the personnel department).

4. **Duration of Lower Dose Limits for the Embryo/Fetus**
   The lower dose limit for the embryo/fetus should remain in effect until the woman withdraws the declaration in writing or the woman is no longer pregnant. If a declaration of pregnancy is withdrawn, the dose limit for the embryo/fetus would apply only to the time from the estimated date of conception until the time the declaration is withdrawn. If the declaration is not withdrawn, the written declaration may be considered expired one year after submission.

5. **Substantial Variations Above a Uniform Monthly Dose Rate**
   According to 10 CFR 20.1208(b), "The licensee shall make efforts to avoid substantial variation above a uniform monthly exposure rate to a declared pregnant woman so as to satisfy the limit in paragraph (a) of this section," that is, 0.5 rem (5 mSv) to the embryo/fetus. The National Council on Radiation Protection and Measurements (NCRP) recommends a monthly equivalent dose limit of 0.05 rem (0.5 mSv) to the embryo/fetus once the pregnancy is known (Ref. 2). In view of the NCRP recommendation, any monthly dose of less than 0.1 rem (1 mSv) may be considered as not a substantial variation above a uniform monthly dose rate and as such will not require licensee justification. However, a monthly dose greater than 0.1 rem (1 mSv) should be justified by the licensee.

**D. IMPLEMENTATION**

The purpose of this section is to provide information to licensees and applicants regarding the NRC staff’s plans for using this regulatory guide.
Unless a licensee or an applicant proposes an acceptable alternative method for complying with the specified portions of the NRC's regulations, the methods described in this guide will be used by the NRC staff in the evaluation of instructions to workers on the radiation exposure of pregnant women.

REFERENCES


APPENDIX: QUESTIONS AND ANSWERS CONCERNING PRENATAL RADIATION EXPOSURE

1. Why am I receiving this information?
The NRC's regulations (in 10 CFR 19.12, "Instructions to Workers") require that licensees instruct individuals working with licensed radioactive materials in radiation protection as appropriate for the situation. The instruction below describes information that occupational workers and their supervisors should know about the radiation exposure of the embryo/fetus of pregnant women.
The regulations allow a pregnant woman to decide whether she wants to formally declare her pregnancy to take advantage of lower dose limits for the embryo/fetus. This instruction provides information to help women make an informed decision whether to declare a pregnancy.

2. If I become pregnant, am I required to declare my pregnancy?
No. The choice whether to declare your pregnancy is completely voluntary. If you choose to declare your pregnancy, you must do so in writing and a lower radiation dose limit will apply to your embryo/fetus. If you choose not to declare your pregnancy, you and your embryo/fetus will continue to be subject to the same radiation dose limits that apply to other occupational workers.

3. If I declare my pregnancy in writing, what happens?
If you choose to declare your pregnancy in writing, the licensee must take measures to limit the dose to your embryo/fetus to 0.5 rem (5 millisievert) during the entire pregnancy. This is one-tenth of the dose that an occupational worker may receive in a year. If you have already received a dose exceeding 0.5 rem (5 mSv) in the period between conception and the declaration of your pregnancy, an additional dose of 0.05 rem (0.5 mSv) is allowed during the remainder of the pregnancy. In addition, 10 CFR 20.1208, "Dose to an Embryo/Fetus," requires licensees to make efforts to avoid substantial variation above a uniform monthly dose rate so that all the 0.5 rem (5 mSv) allowed dose does not occur in a short period during the pregnancy.
This may mean that, if you declare your pregnancy, the licensee may not permit you to do some of your normal job functions if those functions would have allowed you to receive
more than 0.5 rem, and you may not be able to have some emergency response responsibilities.

4. Why do the regulations have a lower dose limit for the embryo/fetus of a declared pregnant woman than for a pregnant worker who has not declared?

A lower dose limit for the embryo/fetus of a declared pregnant woman is based on a consideration of greater sensitivity to radiation of the embryo/fetus and the involuntary nature of the exposure. Several scientific advisory groups have recommended (References 1 and 2) that the dose to the embryo/fetus be limited to a fraction of the occupational dose limit.

5. What are the potentially harmful effects of radiation exposure to my embryo/fetus?

The occurrence and severity of health effects caused by ionizing radiation are dependent upon the type and total dose of radiation received, as well as the time period over which the exposure was received. See Regulatory Guide 8.29, "Instruction Concerning Risks from Occupational Exposure" (Ref. 3), for more information. The main concern is embryo/fetal susceptibility to the harmful effects of radiation such as cancer.

6. Are there any risks of genetic defects?

Although radiation injury has been induced experimentally in rodents and insects, and in the experiments was transmitted and became manifest as hereditary disorders in their offspring, radiation has not been identified as a cause of such effect in humans. Therefore, the risk of genetic effects attributable to radiation exposure is speculative. For example, no genetic effects have been documented in any of the Japanese atomic bomb survivors, their children, or their grandchildren.

7. What if I decide that I do not want any radiation exposure at all during my pregnancy?

You may ask your employer for a job that does not involve any exposure at all to occupational radiation dose, but your employer is not obligated to provide you with a job involving no radiation exposure. Even if you receive no occupational exposure at all, your embryo/fetus will receive some radiation dose (on average 75 mrem (0.75 mSv)) during your pregnancy from natural background radiation.

The NRC has reviewed the available scientific literature and concluded that the 0.5 rem (5 mSv) limit provides an adequate margin of protection for the embryo/fetus. This dose limit reflects the desire to limit the total lifetime risk of leukemia and other cancers. If this dose limit is exceeded, the total lifetime risk of cancer to the embryo/fetus may increase incrementally. However, the decision on what level of risk to accept is yours. More detailed information on potential risk to the embryo/fetus from radiation exposure can be found in References 2-10.

8. What effect will formally declaring my pregnancy have on my job status?

Only the licensee can tell you what effect a written declaration of pregnancy will have on your job status. As part of your radiation safety training, the licensee should tell you the company's policies with respect to the job status of declared pregnant women. In addition, before you declare your pregnancy, you may want to talk to your supervisor or your radiation safety officer and ask what a declaration of pregnancy would mean specifically for you and your job status.

In many cases you can continue in your present job with no change and still meet the dose limit for the embryo/fetus. For example, most commercial power reactor workers
(approximately 93%) receive, in 12 months, occupational radiation doses that are less than 0.5 rem (5 mSv) (Ref. 11). The licensee may also consider the likelihood of increased radiation exposures from accidents and abnormal events before making a decision to allow you to continue in your present job.

If your current work might cause the dose to your embryo/fetus to exceed 0.5 rem (5 mSv), the licensee has various options. It is possible that the licensee can and will make a reasonable accommodation that will allow you to continue performing your current job, for example, by having another qualified employee do a small part of the job that accounts for some of your radiation exposure.

9. What information must I provide in my written declaration of pregnancy?
   You should provide, in writing, your name, a declaration that you are pregnant, the estimated date of conception (only the month and year need be given), and the date that you give the letter to the licensee. A form letter that you can use is included at the end of these questions and answers. You may use that letter, use a form letter the licensee has provided to you, or write your own letter.

10. To declare my pregnancy, do I have to have documented medical proof that I am pregnant?
   NRC regulations do not require that you provide medical proof of your pregnancy. However, NRC regulations do not preclude the licensee from requesting medical documentation of your pregnancy, especially if a change in your duties is necessary in order to comply with the 0.5 rem (5 mSv) dose limit.

11. Can I tell the licensee orally rather than in writing that I am pregnant?
   No. The regulations require that the declaration must be in writing.

12. If I have not declared my pregnancy in writing, but the licensee suspects that I am pregnant, do the lower dose limits apply?
   No. The lower dose limits for pregnant women apply only if you have declared your pregnancy in writing. The United States Supreme Court has ruled (in United Automobile Workers International Union v. Johnson Controls, Inc., 1991) that "Decisions about the welfare of future children must be left to the parents who conceive, bear, support, and raise them rather than to the employers who hire those parents" (Reference 7). The Supreme Court also ruled that your employer may not restrict you from a specific job "because of concerns about the next generation." Thus, the lower limits apply only if you choose to declare your pregnancy in writing.

13. If I am planning to become pregnant but am not yet pregnant and I inform the licensee of that in writing, do the lower dose limits apply?
   No. The requirement for lower limits applies only if you declare in writing that you are already pregnant.

14. What if I have a miscarriage or find out that I am not pregnant?
   If you have declared your pregnancy in writing, you should promptly inform the licensee in writing that you are no longer pregnant. However, if you have not formally declared your pregnancy in writing, you need not inform the licensee of your non-pregnant status.

15. How long is the lower dose limit in effect?
   The dose to the embryo/fetus must be limited until you withdraw your declaration in writing or you inform the licensee in writing that you are no longer pregnant. If the declaration is not withdrawn, the written declaration may be considered expired one year after submission.
16. If I have declared my pregnancy in writing, can I revoke my declaration of pregnancy even if
I am still pregnant?
Yes, you may. The choice is entirely yours. If you revoke your declaration of pregnancy, the
lower dose limit for the embryo/fetus no longer applies.

17. What if I work under contract at a licensed facility?
The regulations state that you should formally declare your pregnancy to the licensee in
writing. The licensee has the responsibility to limit the dose to the embryo/fetus.

18. Where can I get additional information?
The references to this Appendix contain helpful information, especially Reference 3, NRC's
Regulatory Guide 8.29, "Instruction Concerning Risks from Occupational Radiation
Exposure," for general information on radiation risks. The licensee should be able to give
this document to you.

For information on legal aspects, see Reference 7, "The Rock and the Hard Place: Employer
Liability to Fertile or Pregnant Employees and Their Unborn Children--What Can the Employer
Do?" which is an article in the journal Radiation Protection Management.

You may telephone the NRC Headquarters at (301) 415-7000. Legal questions should be
directed to the Office of the General Counsel, and technical questions should be directed to the
Division of Industrial and Medical Nuclear Safety.

You may also telephone the NRC Regional Offices at the following numbers: Region I, (610)
337-5000; Region II, (404) 562-4400; Region III, (630) 829-9500; and Region IV, (817) 860-
8100. Legal questions should be directed to the Regional Counsel, and technical questions
should be directed to the Division of Nuclear Materials Safety.

REFERENCES FOR APPENDIX

1. National Council on Radiation Protection and Measurements, Limitation of Exposure to
2. International Commission on Radiological Protection, 1990 Recommendations of the
International Commission on Radiological Protection, ICRP Publication 60, Ann. ICRP
3. USNRC, "Instruction Concerning Risks from Occupational Radiation Exposure,"
Regulatory Guide 8.29, Revision 1, February 1996,[11] (Electronically available at
4. Committee on the Biological Effects of Ionizing Radiations, National Research Council,
Health Effects of Exposure to Low Levels of Ionizing Radiation (BEIR V), National


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**REGULATORY ANALYSIS**

A separate regulatory analysis was not prepared for this regulatory guide. A regulatory analysis prepared for 10 CFR Part 20, "Standards for Protection Against Radiation" (56 FR 23360), provides the regulatory basis for this guide and examines the costs and benefits of the rule as implemented by the guide. A copy of the "Regulatory Analysis for the Revision of 10 CFR Part 20" (PNL-6712, November 1988) is available for inspection and copying for a fee at the NRC Public Document Room, 2120 L Street NW, Washington, DC, as an enclosure to Part 20 (56 FR 23360).

1. Single copies of regulatory guides, both active and draft, and draft NUREG documents may be obtained free of charge by writing the Reproduction and Distribution Services Section, OCIO, USNRC, Washington, DC 20555-0001, or by fax to (301)415-2289, or by email to (DISTRIBUTION@NRC.GOV). Active guides may also be purchased from the National Technical Information Service on a standing order basis. Details on this service may be obtained by writing NTIS, 5285 Port Royal Road, Springfield, VA 22161. Copies of active and draft guides are available for inspection or copying for a fee at the NRC Public Document Room at 2120 L Street NW, Washington, DC; the PDR's mailing address is Mail Stop LL-6, Washington, DC 20555; telephone (202)634-3273; fax (202)634-3343.

2. Copies are available at current rates from the U.S. Government Printing Office, P.O. Box 37082, Washington, DC 20402-9328 (telephone (202)512-1800); or from the National Technical Information Service by writing NTIS at 5285 Port Royal Road, Springfield, VA 22161. Copies are available for inspection or copying for a fee from the NRC Public Document Room at 2120 L Street NW, Washington, DC; the PDR's mailing address is Mail Stop LL-6, Washington, DC 20555; telephone (202)634-3273; fax (202)634-3343.
Repeat Procedures

Students must have a Registered Technologist present when repeating unsatisfactory radiographs. The student will be under direct supervision on repeat radiographs even if the student has completed competency in the procedure.

Safe and Ethical Practice

Integrity and moral conduct are crucial to the health care professions. The behaviors of a health care provider must demonstrate acceptable moral, ethical, and legal values. Students will fail a course or be subject to other disciplinary action when the academic, clinical or personal performance is determined to be inconsistent with the responsibility and accountability for upholding ethical and professional standards. As a professional program, it is the responsibility of the faculty to determine if action is indicated.

To function within the parameters of safe and ethical practice the student must:

1. Comply with the Patient’s Bill of Rights;
2. Comply with the ARRT Code of Ethics;
3. Complete or provide for completion of planned care;
4. Provide a safe environment for the patient;
5. Maintain confidentiality of all information/HIPAA;

In addition to upholding ethical and moral standards, students are required to care for their clients in a safe, professional and responsible manner. Students who are beginning the program are in the process of learning how to deliver cares in a safe and efficient manner. As students progress in the program, they should evidence greater accountability and consistency in their ability to deliver care in a safe and efficient manner. As students progress, they are held accountable for all previously learned skills in the program. Patterns of substandard/borderline lab, clinical and field performance are taken into account when evaluating student progression in the program.

Examples of unsafe practice include, but are not limited to:

1. Forgetting to check an ID band;
2. Leaving side rails down;
3. Not recognizing an abnormal assessment;
4. Attending clinical not fully prepared, emotionally upset, or ill;
5. Carrying out a procedure or treatment without the instructor's permission;
6. Failing to adhere to guidelines when carrying out a procedure or treatment;
7. Not checking physician orders in a routine manner,
8. Carrying out a procedure without full knowledge of the techniques,
Semester Clinical Competency Requirements

1. Students must earn two initials that may be completed through simulations and patients’ examinations with staff and clinical advisors upon initiation of the unit in Radiographic Procedures I & II. The initial indicate that the student has successfully completed the procedure two times prior to attempting a competency. Only one of the initials can be earned through simulation until the 5th semester. At that time, students can earn checks through simulation or patient examination. There is a master competency form that is provided in the Clinical Handbook for initials and competency completion that is turned in to the clinical coordinator at the end of the program for documentation of all required competency fulfillments. There is also a form in Trajecsys.

2. Competency can be achieved after didactic examination in Radiographic Procedures I & II is successfully completed with a 78% or above and two initials have been achieved through the student demonstrating their ability to perform the entire procedure in the presence of a registered technologist.

3. Students are expected to meet the minimal amount of semester competencies. Every competency below the semester minimal requirement including required random each semester will result in a 5% point deduction off that semester’s final clinical grade.

4. Students may not simulate more than eight competencies. This will only be permitted after spring break in the 5th and 6th semester. This can be done if all competency signatures are complete. An exception to this is the pediatric abdomen competency, which may be simulated during the first year of the program.

5. Any competencies exceeding the minimal required amount may be carried over to the following semester and receive credit.

6. Students bear the responsibility for competency completions. The students are required to purchase Trajecsys and a clinical handbook and have at the clinical setting with them. This contains the competencies forms. Students provide the competency exam form to the clinical instructor or clinical advisor to complete when requesting to earn a competency. This to be completed in Trajecsys or a paper copy can be completed then placed in a designated locked area by the person who filled the competency form out. The Clinical Coordinator will place in Trajecsys at a later time.

7. All competencies can be completed by Clinical Advisors or NICC faculty with the exception of Equipment, Transporting, and Repeat competencies. These three types of competencies must be completed with an NICC faculty member. All simulated signatures must be completed by NICC faculty members or clinical advisors.

8. Competencies are due the last scheduled clinical day of each semester.

9. Competencies include 18 lab competencies that are pass/fail in Semester 1. Students must earn 100% in each competency which are not calculated into competency grade.
### Schedule of Competency Requirements

<table>
<thead>
<tr>
<th>Semester</th>
<th>Minimal Competencies Required (Total)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>21 (18 competencies earned in lab)</td>
</tr>
<tr>
<td>2</td>
<td>36 (1st equipment competency and 6 randoms completed during NICC lab included in total)</td>
</tr>
<tr>
<td>3</td>
<td>48 (one random competency included in total + the trauma lab competency)</td>
</tr>
<tr>
<td>4</td>
<td>58 (one random competency included in total)</td>
</tr>
<tr>
<td>5</td>
<td>75 (2nd equipment included plus one random competency included in total)</td>
</tr>
<tr>
<td>6</td>
<td>92 (one random competency included in total)</td>
</tr>
</tbody>
</table>

All mandatory and 15 electives equal a total of 92 competencies to graduate.

### Specialized Rotations

The student will rotate through the following specialized areas located at the clinical affiliates:
- Computer Tomography (CT)
- Nuclear Medicine
- Ultrasound (US)
- Radiation Therapy
- Special Procedures
- Magnetic Resonance Imaging (MRI)

During the student's rotations through specialized areas, he/she will receive clinical competencies. These will be completed by the supervisor of the specialized rotation and are pass/fail competencies that are not calculated into the competency grade. Students must earn 100% in each of these competencies. Students are not allowed to observe or perform breast imaging or hysterosalpingograms to provide all students with equitable opportunity.

### Standards for an Accredited Educational Program in Radiologic Sciences

The essentials and guidelines are the minimum standards for a program in radiography. All radiography programs must maintain compliance with these essentials and guidelines to obtain accreditation.

Students are encouraged to read the essentials and guidelines to obtain a better understanding of the radiography program offered at Northeast Iowa Community College. If the student has any questions, he/she should contact the Program Director for explanation or clarification. Students enrolled in the Radiologic Technology Program are expected to conform to the following code of ethics found in P/P Manual and located in the Program Director’s office.
Supervision

Direct Supervision

Direct supervision is defined as being physically present in the radiographic room assisting and/or supervising the radiography student with the radiographic procedure. The student is under direct supervision of a registered radiographer during radiographic procedures until he/she has successfully completed competency testing.

Listed below are situations in which the student will be under direct supervision even though he/she has completed competency testing.

1. Isolation patients (procedures and transporting);
2. Repeat radiographs;
3. IVP;
4. All portable cases;
5. Surgery case;
6. Mental Health Patients;
7. All pediatric studies (anyone under age 6).

At no time, is the student allowed to perform radiographic procedures independently until he/she has successfully completed a competency test.

Indirect Supervision

The student is under indirect supervision when he/she has successfully completed a competency test for a radiographic procedure. Indirect supervision means that the student can perform a radiographic procedure independently without the physical presence of a registered radiographer in the radiographic room. However, a registered radiographer must be immediately available in the clinical area regardless of the level of student achievement.

TrajeCSYS

Online tracking system used during clinical for time tracking, documenting evaluation and competencies. This must be purchased prior to the start of clinicals.
Forms
Northeast Iowa Community College Allied Health Programs
Policy and Procedure Manual Acknowledgement Form

I, ___________________________ (print name), hereby acknowledge I have obtained a current copy of
the Northeast Iowa Community College (Radiologic Technology, Respiratory Therapy, Dental Assisting,
Medical Assisting, Medical Assisting, EMT and Paramedic) Program Policy and Procedure Manual (“the Manual”). In
relation to the Manual, I hereby acknowledge the following:

1. It is my personal responsibility to read and review the Manual.

2. I have read the provisions of the Manual. Without limiting the importance of any provision of the
Manual, I acknowledge that I have read the following sections (please initial each line):
   _____ State Board Licensure or Certification Requirements
   _____ Iowa Core Performance Standards for Health Careers
   _____ Program Specific Policies and Procedures
   _____ Safe and Ethical Practice
       • Patient’s Bill of Rights
       • Program Specific Code of Ethics
       • HIPAA / Confidentiality
   _____ Clinical Requirements
       • Background Checks
       • Physical and Immunizations
       • Training
   _____ NICC’s Student Conduct Code (https://www.nicc.edu/catalog/)
   _____ Policies Related to Substance Use and Testing

3. I shall be required to adhere to and act in compliance with the provisions of the Manual.

4. Any action or statement made in violation of the Manual may result in corrective action up to and
including removal from the program.

5. In the event that I have questions regarding the Manual and/or any provision therein, I am
responsible for directing my specific questions to a program faculty member or the Dean of
Allied Health.

6. In the event I do not direct questions regarding the Manual and/or any provision therein,
then it shall be understood that I understand the Manual and any and all provisions therein as set
out in the Manual.

7. I am required to obtain and adhere to any and all updated and revised versions of the Manual for
each academic year I am enrolled in the program.

Student Name (please print) ______________________________________________________
Student Signature: _____________________________________________________________
Date (please indicate Month, Day, and Year): ___________________________________________
ACKNOWLEDGEMENT/RELEASE WAIVER AGREEMENT

THIS AGREEMENT EFFECTS YOUR LEGAL RIGHTS.
YOU MAY WANT TO CONSULT YOUR ATTORNEY BEFORE SIGNING.

I, the undersigned, for myself and my heirs, successors, assigns and legal representatives, and in consideration for being permitted to participate in the class/program designed below, hereby agree that:

I have attended a lecture and received from Northeast Iowa Community College instruction regarding radiation hazards to which I may be exposed in the course of my studies. This instruction included risks to an embryo/fetus. I have received and reviewed a copy of Regulatory Guide 8.13 written by the Nuclear Regulatory Commission and this policy, as well as the college’s Radiologic Technology Program Information and Fetal Protection Policy.

I acknowledge that I may be exposed to radiation or other toxic substances in the course of class work or clinical assignments in amounts which may be experienced in a work environment, and that the precise effects of such exposure may be unknown, may vary from person to person, and may involve a risk of serious illness or death.

I am aware that this is potentially hazardous activity and the Northeast Iowa Community College cannot guarantee safety. I am also aware that I should consult with my physician regarding risks to my health and that it is my primary responsibility to inform myself of the nature and extent of the risks, to comply with safety procedures, to avoid extraordinary exposure, and to monitor and to limit any and all exposure.

I accept such risks, known or unknown, and release Northeast Iowa Community College, its faculty, administration, and staff, from any and all liability and waive any and all remedies against them because of the effects of such exposure.

I have had sufficient time to read and consider this agreement and voluntarily agree to be bound. This agreement shall apply to any and all exposure to radiation or toxic substances throughout the class or program designated below.

Name: ___________________________________________ Date: __________

Signature: ___________________________________________
Northeast Iowa Community College
American Registry of Radiologic Technology Requirement Acknowledgment

I, ___________________________ (PLEASE PRINT), hereby acknowledge I have reviewed the radiology certification information included in the current Northeast Iowa Community College Radiologic Program Policy and Procedure Manual (“the Manual”). In relation to the American Registry of Radiologic Technology regulations, I hereby acknowledge the following:

1. Radiologic student applicants must “Be a graduate of an accredited high school or equivalent”; it is my personal responsibility to establish proof of this requirement upon application for certification of the ARRT. I acknowledge I have the option of satisfactory completion of the GED if I have not graduated from an accredited high school or equivalent.

2. The ARRT has the express authority to review the felony conviction of an applicant and may deny licensure to any applicant who has been convicted of a felony, which relates to the practice of radiology. An applicant is a person who has filed an application with the ARRT and possesses all of the statutory requirements for the granting of a license. Persons who have not yet completed the pre-requisites for filing an application, such as completion of a course of study approved by the ARRT are not applicants.

3. The Board has a statutory authority to review the felony conviction of a radiology student who has neither completed the radiology program approved by the ARRT nor filed an application with the ARRT.

4. The completion of the radiologic technology program at NICC does not guarantee that ARRT registration will be issued by the ARRT. Each student must submit an application to take the ARRT national exam and then pass the registry exam. The decision on whether to issue registration is solely within the discretion of the ARRT Board of Ethics.

5. In the event that I have questions regarding these ARRT guidelines, I may contact the NICC Radiologic Technology Program Director or the NICC Dean of Allied Health.

I have read the above policies and fully understand I may be denied certification by American Registry of Radiologic Technology if I have a felony record. With this understanding, it is my decision to enter into the NICC Radiology Technology Program. I release Northeast Iowa Community College and its employees from any liability related to the receipt of ARRT registration to practice radiography.

Student Signature: _____________________________________________

Date (you must indicate Month, Day, and Year): ______________________

American Registry of Radiologic Technologist
1255 Northland Drive
St Paul, MN 55120
(651) 687-0048
www.ARRT.org
Northeast Iowa Community College Allied Health Programs
Clinical Time-off Request Form

Date: ______________________________________________________________________

Student: _____________________________________________________________________

Dates requested for time off: ______________________________________________________________________

Reason: (Attach documentation)
______________________________________________________________________________
______________________________________________________________________________

Approved: __________

Denied: __________

Reason for denying time off:
______________________________________________________________________________
______________________________________________________________________________

Makeup Date(s): ______________________________________________________________________

Clinical Coordinator Signature: ______________________________________________________________________

Student’s Signature: ______________________________________________________________________
Form Letter for Declaring Pregnancy

This form letter is provided for your convenience. To make your written declaration of pregnancy, you may fill in the blanks in this form letter, you may use a form letter the licensee has provided to you, or you may write your own letter.

DECLARATION OF PREGNANCY

To: _________________________

In accordance with the NRC's regulations at 10 CFR 20.1208, "Dose to an Embryo/Fetus," I am declaring that I am pregnant. I believe I became pregnant in________________ (only the month and year need be provided).

I understand the radiation dose to my embryo/fetus during my entire pregnancy will not be allowed to exceed 0.5 rem (5 millisievert) (unless that dose has already been exceeded between the time of conception and submitting this letter). I also understand that meeting the lower dose limit may require a change in job or job responsibilities during my pregnancy.

___________________________  
(Your Signature)

___________________________  
(Your Name Printed)

___________________________  
(Date)

___________________________  
(Clinical Coordinator)
NORTHEAST IOWA COMMUNITY COLLEGE
Form Letter of Withdrawal of Declaration of Pregnancy

This form letter is provided for your convenience. To make your written withdrawal of declaration of pregnancy, you may fill in the blanks in this form letter, you may use a form letter the licensee has provided to you, or you may write your own letter.

WITHDRAWAL OF DECLARATION OF PREGNANCY

To: _________________________

I understand that as of ________________, I will no longer be supplied and monitored with a fetal badge.

___________________________
(Your Signature)

___________________________
(Your Name Printed)

___________________________
(Date)

___________________________
(Clinical Coordinator)
I acknowledge that I have read the following guidelines: Please INITIAL EVERY LINE next to each specific area to verify review of these materials, and understand the importance of complying with the above parameters.

_____ Students must be able to lift a minimum of 35 pounds without restriction

_____ It is the student’s responsibility to report changes regarding their health status

_____ Theory and clinical lab components are interdependent co-requisites Students unable to meet clinical core performance standards are not allowed to complete clinical independent of theory;

_____ Students are not allowed to assume “light duty” or “observe” in clinical settings where the expectation is that the student is assuming the role of the radiology technology student.

I have received a copy of the Iowa Core Performance Standards. I fully understand the Iowa Core Performance Standards, and my obligation to meet with the Dean to review temporary or permanent conditions which may affect my ability to meet these standards. I also recognize an inability to meet this standards may result a need to withdraw from radiology coursework. Permanent restrictions may result in a need to withdraw from the program.

Student Name (PLEASE PRINT): ______________________________________________________

Student Signature:  ________________________________________________________________

Date (you must indicate Month, Day, and Year):  ________________________________
Student Name: ______________________ Clinical Site: ______________________

1. **TECHNIQUE**
   - □ 0. Did not set techniques, did not log techniques on any exams, did not know acceptable exposure range
   - □ 1. Set technique incorrectly and needs assistance to correct, did not log techniques throughout the day, did not observe acceptable exposure range
   - □ 2. Set technique correctly after positioning of patient, minimal logs of techniques, recognizes acceptable range but unable to adjust correct factors
   - □ 3. Set technique correctly prior to positioning, records in technique log book, recognizes acceptable exposure range, able to set up and adapt exposure factors
   - □ N/A
   
   LIST EXAMPLES OF WAYS TO IMPROVE KNOWLEDGE/USAGE OF TECHNIQUES.

2. **EQUIPMENT AND ACCESSORIES**
   - □ 0. Does not use equipment correctly, needs constant supervision to utilize needed accessories for safety with patient care
   - □ 1. Understood very few functions, no collimation was used, unaware of correct distance to use, did not use grid when needed, did not detent tube correctly for distance and/or bucky, markers not used or used incorrectly
   - □ 2. Able to manipulate equipment, understood most of the functions, tube was detented to proper distance and correct bucky, accurate collimation was not used, incorrect distance used, incorrect grid used, markers used but not visible on images or wrong marker used
   - □ 3. Understood equipment functions, able to operate equipment independently, used appropriate collimation, distance, markers visible on image
   - □ N/A
   
   LIST SUGGESTIONS TO IMPROVE USE OF EQUIPMENT.

3. **POSITIONING**
   - □ 0. Unable to correctly complete learned procedures with assistance, unable to utilize information learned from previous exams, does not utilize personal notebook when needed
   - □ 1. Needed supervision to complete routine procedures, made 3 errors or more and/or needed to ask 3 or more questions per exam, limited retention of previously learned exams, personal notebook utilized but not helpful to own learning style
   - □ 2. Performed exams correctly, needed assistance and reminding of details, made 2 or less errors or needed to ask 2 or less questions per exam, has retention of previously learned exams, utilized personal notebook when needed
   - □ 3. Performed routine exams correctly with 1 or less errors, didn’t need to ask questions when doing procedures, can work independently
   - □ N/A
   
   LIST SUGGESTIONS TO IMPROVE POSITIONING SKILLS OR WAYS TO BE MORE SUCCESSFUL AT INDEPENDENT FUNCTIONING.
4. **IMAGE EVALUATION**
   - 0. Unable to identify required anatomy, did not know how to correct errors
   - 1. Needs assistance with critiquing images, correcting errors and identifying anatomy
   - 2. Correctly critiques images but needed assistance in correcting errors, correctly identified obvious but not all anatomy
   - 3. Correctly critiques images and all anatomical structures identified, knew how to correct errors
   - N/A

   **LIST SUGGESTIONS FOR IMPROVEMENT WITH EVALUATIONS OF IMAGES.**

5. **RADIATION PROTECTION**
   - 0. Did not ask LMP, did not use shielding routinely, did not use immobilization devices when needed
   - 1. Used shielding on patient, others and self when applicable, asked LMP and asked for chance of pregnancy when applicable, used correct documentation of both, used appropriate immobilization devices when needed
   - N/A

   **LIST SUGGESTIONS FOR WAYS TO ALWAYS UTILIZE PATIENT SAFETY WITH RADIATION PROTECTION.**

6. **COMMUNICATION WITH PATIENTS**
   - 0. Did not identify patient or did not perform requisition evaluation, unable to give adequate directions to patient, did not identify self to patient, seemed unaware of patient’s condition, used inappropriate terminology with staff/patients
   - 1. Did not use 2 patient identifiers, communication needs to improve, tended to speak to fast, slow or indirectly to patient, identified self to patient incorrectly, aware of patient’s condition but provided inadequate comfort
   - 2. Used 2 patient identifiers but needed assistance performing requisition evaluation, needs to give better directions and/or explain the exam better to patient, needed assistance in providing good care to patient
   - 3. Consistently used 2 patient identifications and performed requisition evaluation, spoke clearly, gave appropriate direction, explained exam correctly to patient, identified self to patient, good communication skills, reacted to patient’s needs, demonstrated compassion and empathy to patients, used appropriate terminology with staff/patients
   - N/A

   **LIST SUGGESTIONS TO IMPROVE COMMUNICATION SKILLS.**

7. **PATIENT HISTORIES**
   - 0. Unable to ask or document accurate history appropriately
   - 1. Took patient histories based on information provided by patient, forgot necessary questions, has a weak medical term vocabulary
   - 2. Took histories based on patient’s statements and personal observation, needed help asking and/or documenting information
   - 3. Documented important history information from patient and personal observation, asked correct history questions and used correct terms to record information
   - N/A

   **LIST SUGGESTIONS IN WAYS TO IMPROVE ACTIVE LISTENING SKILLS AND/OR DOCUMENTATION OF HISTORIES.**

8. **ORGANIZATION**
   - 0. Needs constant supervision, no personal notebook, markers, or/and ID, does not follow directions, no confidence in skills or lacks organization skills when performing exams
   - 1. Needed supervision and prompting, lacked good organizational skills and confidence, did not anticipate next step in the procedure, not prepared for clinic and does not have all required items, personal notebook is not up to date
   - 2. Performed duties with supervision, shows improved confidence in work and decisions, follows through on exams, personal notebook is up to date, uses required items for clinic
   - 3. Performed duties correctly in an organized manner, showed confidence in work & decisions, applied knowledge of clinical setting, anticipated next step, prepared for clinic rotation, utilizes required items for clinic (personal notebook, markers, ID)
   - N/A

   **LIST SUGGESTIONS FOR IMPROVEMENT OF ORGANIZATION OR PREPAREDNESS FOR CLINIC ROTATION.**
9. **PROFESSIONALISM IN THE CLINICAL SETTING**

- 0. Defensive or unwilling to accept constructive feedback, didn’t follow policies, is disrespectful to others around them, shows no motivation to participate in exams or practice.
- 1. Listened to constructive feedback but did not implement suggestions, appeared to be disinterested or negative, must be told to participate in procedures but will complete when directly asked, did not use down time to practice or study unless asked to.
- 2. Demonstrated positive attitude, followed policies, needs to implement suggestions from constructive feedback, did exams when asked but needed prompting to do procedures, uses down time to practice or study.
- 3. Communicated in a positive manner, was enthused about profession and learning, followed policies and conducts oneself in a professional manner, sought and recognized work to be done, used down time constructively, takes initiative to perform beyond assigned tasks.

- N/A

LIST SUGGESTIONS FOR IMPROVEMENT OF PROFESSIONALISM, INCLUDING ATTITUDE, INITIATIVE AND HOW TO RETAIN COMPOSURE WHEN RECEIVING FEEDBACK.

*N/A equals a zero in that category. Calculations will only be taken from points actually given in each category.

**Student Score: _____________/ 27 points**

*OVERALL COMMENTS*

**Student strengths:**

**Suggestions for improvement:**

**Staff’s Name: ___________________________ Date: __________________________**
Northeast Iowa Community College
JRCERT Violation Form

1. Date of Violation________________________

2. JRCERT standard that has been violated_______________________________

3. Please provide a brief narrative of the situation ___________________________
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________

4. Was the violation resolved?_____________________

5. If yes, when and how was the violation resolved? _________________________
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________

Student ________________________________ Date _______________

Program Director ______________________________ Date _______________
NORTHEAST IOWA COMMUNITY COLLEGE
MEDICAL INCIDENT REPORT FORM

COMPLETED INCIDENT REPORTS MUST BE RETURNED TO THE DEPARTMENT SUPERVISOR WITHOUT DELAY. THE REPORT MUST BE IN THE OFFICE OF THE EXECUTIVE DIRECTOR OF FINANCE (Calmar Campus – Administration Building) WITHIN 24 HOURS OF THE INCIDENT.

TO BE FILLED OUT BY THE STAFF PERSON AT THE SCENE OF THE INCIDENT OR THE SUPERVISOR:

Date of Incident: ________________ Time of Incident: ________ Program: ________________

Name of Person Affected: __________________________________________ ID # (students & staff): ________

Birthdate: ________________ Sex: _____ Indicate status: (S)tudent, (ST)aff, (V)isitor: ________

Home Address: ____________________________________________________________________________

PO Box/Street City State Zip

Home Phone: ________________ Exact building location of incident: ______________________

Did incident occur during class/lab time? ________ Was instructor on duty? ________________

Witnesses to incident (Indicate status - (S)tudent, (ST)aff, (V)isitor):

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
<th>Status</th>
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<td>Status</td>
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Details of incident (explain what, why, and how):

Date ______________ Person making report __________________________ Status ________
PERSON ADMINISTERING FIRST AID SHOULD COMPLETE THIS PORTION IF APPLICABLE:

Nature and extent of injury (describe injury and indicate affected area, or a detailed explanation of medical emergency):

![Human figure diagram with arrows pointing to various body parts.]

First aid or treatment administered:

Referral made (returned to class, work, sent home, sent for medical attention, refused medical attention, etc.):

Name of doctor/emergency room notified:

Phone: ___________________ Date: _______________ Time: _______________

Medical Resource Person’s Signature: ________________________________

TO BE COMPLETED BY THE DEPARTMENT SUPERVISOR OR BUILDING SUPERVISOR

In view of the safety precaution now in effect, what other measures can be taken to prevent a recurrence of this type of accident?

Signature _______________________________ Date ________ Time ____________

DIRECT THIS COMPLETED FORM TO THE EXECUTIVE DIRECTOR OF FINANCE (Calmar Campus/Schrage Administration Building) WITHIN 24 HOURS OF THE INCIDENT. IF THIS IS IMPOSSIBLE, THE EXECUTIVE DIRECTOR OF FINANCE MUST BE ALERTED OF THE INCIDENT BY TELEPHONE.
Mentor’s Checklist

_____ First meeting with your mentee.

_____ Obtain his/her biography

_____ Use the 30 minutes to get to know other aspects of your mentee. Share similar information about yourself.

_____ Be sure that your mentee knows how to contact you: email address, telephone. You should have this same information on your mentee.

_____ Ask your mentee what he/she expects from you.

_____ Share with your mentee what you expect.

_____ Set up a regular time to meet each semester

_____ Meet mentee on 3 additional occasions to discuss progress in the program:

Date met in the following semesters:
   Fall __________
   Spring __________

Final Assignment: Write a 1 page reflection on the mentoring you concluded. Include information that you provided and feedback that you received during the mentorship.

“Mentors are guides. They lead us along the journey of our lives. We trust them because they have been there before. They embody our hopes, cast light on the way ahead, interpret arcane signs, warn us of lurking dangers and point out unexpected delights along the way.”

~L.A. Daloz
Northeast Iowa Community College
Radiographic Lab/Clinical Physical Contact Consent Form

Students can expect to be involved in clothed, physical contact (touching) by instructors and other program students in laboratory and clinical settings to provide opportunities to obtain positioning experience that will enhance their skills for the profession. Physical contact will include, but is not limited to, touching of the clothed shoulders, torso, limbs, digits, head, and neck of others during practice lab procedures and being touched in the same manner by others in the program. These experiences will be under the guidance and supervision of an instructor or clinical site preceptor.

Students who are uncomfortable with physical contact shall immediately and privately notify the program instructor, director, or department dean.

* There will be NO radiation emitted during these positioning experiences. All experiences in an energized laboratory will be under the direct supervision of a qualified technologist.

I, _______________________(print name), understand that during the laboratory and clinical experiences I will touch others through clothing and will be touched through clothing as I practice the roles of radiographer and patient.

Student Signature _______________________________________  Date ______________

NICC Radiologic Technology Program Director:

______________________________________________________Date ______________
Radiologic Technology Program Voluntary Make-up Form

I, ________________________, wish to voluntarily complete:

_____ more than 10 hours of clinical experience per day in an effort to make up missed clinical time. Not to exceed a total of 12 hours in one day.

_____ more than 40 hours of combined clinical and didactic hours per week in effort to make up missed clinical time.

__________________________                      _______________
Student signature                  Date

__________________________                      _______________
Clinical Instructor/Clinical Advisor                  Date

__________________________                      _______________
Clinical Coordinator                  Date
NORTHEAST IOWA COMMUNITY COLLEGE
Safe and Ethical Practice Acknowledgement Agreement

A student may be dismissed from the Radiologic Technology program if the student fails to demonstrate safe and ethical practice in the classroom, laboratory or clinical setting. Students exhibiting behaviors in violation of safe and ethical practice will be removed from the area and sent to the Dean of Allied Health for determination of consequences.

To uphold the parameters of safe and ethical practice the student must:

1. _____ Comply with the Patient’s Bill of Rights,

2. _____ Comply with the American Registry of Radiologic Technologists Standard of Ethics,

3. _____ Provide a safe environment for the patient

4. _____ Maintain confidentiality of all information/HIPAA

5. _____ Function within the parameters of the student roles outlined in the NICC College Catalog (www.nicc.edu/catalog) and the Radiology Technology Policy and Procedure Manual

I acknowledge that I have read the following sections: (Please **INITIAL EVERY LINE** next to each specific area to verify review of these materials, and understand the importance of complying with the above parameters.

I fully understand my obligations to my fellow classmates and the clients whom I will serve, and acknowledge failure to meet these obligations may result in termination in the program.

Student Name (*PLEASE PRINT*): ________________________________________________

Student Signature: ____________________________________________________________

Date (you must indicate Month, Day, and Year): ________________________________
Northeast Iowa Community College
HIPAA/Confidentiality Statement for Allied Health Programs

As a student in a health program, contact with confidential and protected health information will occur. This information may be personal, clinical, financial, or other. Information may be computerized (electronic health record), hard copy, or oral in nature.

Examples of confidential information can include, but is not limited to: health records, employee records, financial records, reports, information distributed to work areas, or any other information found in the course of business. Confidential information includes information learned through discussion in clinical practice on and off campus, from employees and medical staff, patients, and patient families or friends.

Students of Northeast Iowa Community College enrolled in a health program shall maintain all aspects of confidentiality. Students are accountable for being aware of the legal implications in regards to patient privacy and confidentiality rights as per HIPAA guidelines and regulations. The following guidelines are required:

Confidentiality of patient information must be protected by the student.

Access to patient information that you are not assigned to for care and/or research is prohibited, including your own personal health information.

Patient, family, or health related information may not be photocopied or removed from the healthcare setting.

Security guidelines for accessing and documenting in the electronic record must be followed.

As a student, it is your responsibility to protect the confidential and private information you have contact with. You must protect information from loss, destruction, tampering and inappropriate access and use, including inappropriate disposal.

Any breach of confidentiality or privacy practices represent a failure to meet the legal, professional, and ethical standards and will constitute a violation of this statement. A breach can include any unnecessary, unauthorized, unintentional, or intentional use or disclosure of confidential information due to carelessness, curiosity or concern, for personal gain or malice, and including informal discussion both in the healthcare facility, outside the facility, or at the college. Such breaches will result in disciplinary action which may include program termination and civil or criminal penalties from the college, individuals, or affiliated organizations.
Confidentiality Agreement

As a student in a Northeast Iowa Community College health program, I, _____________________________ understand the above statements and the expectations that I will maintain the confidentiality of information encountered during the course of study. Further, I understand that a violation or breach of this statement of confidentiality will be investigated and responded to in a manner that may result in suspension/expulsion from the Northeast Iowa Community College health program in which I am enrolled. I understand that I could also be subject to disciplinary action that may include fines and/or imprisonment.

__________________________________________  ____________________________
Name (Print)                                      Date

__________________________________________
Signature
NORTHEAST IOWA COMMUNITY COLLEGE

SBAR Form

The SBAR (Situation-Background-Assessment-Recommendation) technique provides a framework for communication between members of the health care department. Modeled after the SBAR framework established by Kaiser Permanente for communication between members of the health care team about a patient’s condition, this form is an easy-to-remember, concrete mechanism useful for framing any conversation, especially critical ones. The SBAR process facilitates an easy and focused way to set expectations for what will be communicated and assists with problem resolution. This form is to be completed by the concerned individual and brought to any meetings where the issue is to be addressed. Please complete all areas on the form.

S  Situation
Describe the situation:

• Include your name, the course you are enrolled in, the names of the individuals involved in the situation, and the location where the situation occurred.

• Briefly state the problem, what is it, when it happened or started, and how severe.

________________________________________________________________________________________________________________________________________________________
________________________________________________________________________________________________________________________________________________________
________________________________________________________________________________________________________________________________________________________
________________________________________________________________________________________________________________________________________________________
________________________________________________________________________________________________________________________________________________________
________________________________________________________________________________________________________________________________________________________

B  Background
Describe the pertinent background information related to the situation. Include the steps you have taken to address the issue.

________________________________________________________________________________________________________________________________________________________
________________________________________________________________________________________________________________________________________________________
________________________________________________________________________________________________________________________________________________________
________________________________________________________________________________________________________________________________________________________
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A  Assessment
Identify what you feel is the main area of concern.

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

R  Recommendation
State what you would like to be done to resolve the situation:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Modeled after the SBAR form developed by Kaiser Permanente
Northeast Iowa Community College
Student Compensatory Time Form

Please complete this form and give to an instructor/advisor on the day using the compensatory clinical time.

Name: ____________________________________________

Date: _____________________________________________

Amount of time made up: ____________________________

Reason: __________________________________________

Semester: _________________________________________

Clinical instructor/Advisor’s Initials: ______________________

*Document reason in Trajecsys as well when checking in/out.
Northeast Iowa Community College
Student Success Plan

Name _____________________________ Phone Number __________________

Address __________________________ Program: ________________________
Advisor ___________________________ Student I.D.#_________ Evolve Course ID#________

Class re-entry and term ____________________________

I have initiated this Student Success Plan in the following areas of concern:

<table>
<thead>
<tr>
<th>Attendance</th>
<th>Assignments</th>
<th>Classroom Conduct</th>
<th>Class Participation</th>
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<tbody>
<tr>
<td>Exams/Quizzes</td>
<td>Grades</td>
<td>Time Management</td>
<td>Critical Thinking</td>
</tr>
<tr>
<td>Test Anxiety</td>
<td>Health Concerns</td>
<td>Financial</td>
<td>Other</td>
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</tbody>
</table>

To strengthen these areas, I plan to do the following prior to becoming eligible for re-entry into the program.

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

The following activities are available to assist your success in class:

**Learning Center/Writing Center:** Calmar - Student Center; 563-562-3263  X 256/394
Peosta - Room 219; 563-556-5110  X 330/331/360

**Smarthinking** (Online tutoring can be accessed through My Campus – Login and select a class from “My Classes”, select Smarthinking.)

**Office of Disability Services:** Calmar - Student Center Room 123; 563-562-3263  X 258
Peosta - Room 200 J (in the Library); 563-556-5110  X 280

**Counseling Services:** Calmar - Student Center; 563-562-3263  X 263
Peosta - Room 216; 563-556-5110  X 215
Outstanding Program Requirements

DOCUMENTATION MUST BE CURRENT PRIOR TO BEING GIVEN A SEAT IN THE CLASS.

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Date Expired</th>
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Compliance Auditor Signature ___________________________ Date __________

In addition to meeting the above requirements, I agree to keep all program requirements current.

The decision of admission into the program will be based upon the date on this tracking form. Your name will be placed on the Re-track list. Please contact the Program Director to determine your status and entry date. In addition, you are encouraged to visit the Financial Aid Office for assistance in applying for financial aid eligibility due to your student status on this tracking form.

**Plan of Success Reviewed:**

(Please do not sign until meeting with Program Director)

Student Signature ___________________________ Date __________

Program Director Signature ___________________________ Date __________

**Plan of Success Completed:**

Student Signature ___________________________ Date __________

Program Director Signature ___________________________ Date __________
NORTHEAST IOWA COMMUNITY COLLEGE
JRCERT Standards

Standards noted in BrightSpace for student review.