

Radiologic Technology Program

OF

Hudson Valley Community College

Program Policy Handbook

2023-2024



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Introduction

Welcome to the 2023-2024 academic year! We hope this year brings you closer to achieving your goal of becoming a professional Radiographer. The program's faculty and staff are dedicated to your success and are here to support you during your education in this program. The faculties involved in the program have offices close to the Medical Imaging main office and maintain office hours available for you.

The faculty, staff, and administration of the Radiologic Technology program welcome you as a new/returning student. It is important that all students are familiar with and clearly understand our program's policies as described in this manual. This handbook is effective for this academic year and subject to change with appropriate notification. All students should also read and understand the general college regulations that are detailed in the college catalog which may be found in the most up-to-date format on the college website - <https://www.hvcc.edu/index.php>.

The Radiologic Technology Program Policy Handbook explains your rights, privileges and responsibilities while you are a student enrolled in this program. Students will be expected to abide by the policies outlined in this handbook. As you read this book should any questions arise, feel free to ask for clarification from a faculty member or the Department Chairperson.

After carefully reading this book, please sign the last page and return it to the Medical Imaging Office in Brahan 026 where it will be kept on file.

The department wishes you success in your efforts while a student in the Radiologic Technology program at Hudson Valley Community College!

RADIOLOGIC TECHNOLOGY

Mission Statement

The Radiologic Technology program prepares students for a career in Radiography through educational activities designed to develop effective communication skills, appropriate professional and ethical conduct, and the technical knowledge to perform quality radiographic procedures. The program provides a supportive, student-centered learning environment enriched through didactic, laboratory and clinical experience.

Program Goals

- To provide students the opportunity to learn the concepts and theories related to radiography.
- To develop students' skills in applying radiography concepts in the clinical environment.
- To incorporate various teaching methodologies to accommodate different learning styles and foster critical thinking skills.
- To prepare students to communicate effectively in both oral and written form for their practice as radiographers.
- To provide students with the academic support services necessary for educational success.
- To develop professional behavior.
- To provide opportunities to integrate classroom instruction with clinical application.

Program Objectives

- Gain knowledge in humanities, sciences and radiologic sciences to be successful in the profession.
- Develop a sense of professionalism and function as an integral member of the healthcare team and member of a nationally registered and licensed health profession.
- Develop a sense of personal responsibility, self-reliance and discipline for the benefit of self and the patients served.
- Develop independent thinking and the ability to document, analyze, problem solve and reach sound, rational conclusions.
- Foster a lifelong interest in learning.

Graduate Goals

- To demonstrate the technical skills necessary to produce quality radiographic images.
- To apply the knowledge of radiation protection principles for the patient, self, and others.
- To demonstrate proper discretion, judgment and professional conduct in the performance of radiographic procedures.
- To provide patient care essential to radiologic procedures. Such care shall include analysis of emergency situations and selection of appropriate responses.
- To effectively interact and communicate with patients, members of the healthcare team and the public.

Radiologic Technology Faculty Contact Information

	Office	Phone	Email
Margaret Ewart Zapp	BRN-027	518-629-7124	m.ewartzapp@hvcc.edu
Brooke Matthews	BRN-033	518-629-7123	b.matthews@hvcc.edu
John Hart	BRN-032A	518-629-7459	j.hart@hvcc.edu
Mary Potanovic	BRN-032	518-629-7365	m.potanovic@hvcc.edu
Erica Cole	BRN-030	518-629-7329	e.cole@hvcc.edu
Amber O'Connell	BRN-029	518-629-7435	a.oconnell@hvcc.edu
Michael Reynolds			m.reynolds@hvcc.edu
Will Gutierrez			TBA
Matthew Shorter			m.shorter@hvcc.edu
Stacy Medick			s.medick1@hvcc.edu
Catherine Nicchi			c.nicchi@hvcc.edu
Rebecca Relyea			r.relyea@hvcc.edu

The Medical Imaging Departmental Office is open any day the College is open. The department program assistant is available to offer assistance. The office is located in Brahan Hall, room 033 and the telephone number is (518) 629-7123. All the phones listed above have voice mail and the faculty will return calls as permitted by their teaching schedules.

Hudson Valley Community College and Program Accreditation

Middle States Commission on Higher Education (MSCHE)

Hudson Valley Community College is accredited by the Middle States Commission on Higher Education (MSCHE).

The Mid-Atlantic Region Commission on Higher Education, doing business as the Middle States Commission on Higher Education (MSCHE), was formally incorporated under Pennsylvania Commonwealth law on March 1, 2013. From its origins in 1919 through February 2013, the Commission was a unit of the Middle States Association of Colleges and Schools. Although now an independent corporation, the Commission maintains an ongoing relationship with the Middle States Association.

The Commission on Higher Education is recognized by the U.S. Secretary of Education to conduct accreditation and pre-accreditation (Candidacy status) activities for institutions of higher education in Delaware, the District of Columbia, Maryland, New Jersey, New York, Pennsylvania, Puerto Rico, and the U.S. Virgin Islands, including distance education and correspondence education programs offered at those institutions.

MSCHE is also recognized by the Council on Higher Education Accreditation (CHEA) to accredit degree-granting institutions which offer one or more post-secondary educational programs of at least one academic year in length in Delaware, the District of Columbia, Maryland, New Jersey, New York, Pennsylvania, Puerto Rico, the Virgin Islands, and other geographic areas in which the Commission conducts accrediting activities.

The Commission is a voluntary, non-governmental, membership association that defines, maintains, and promotes educational excellence across institutions with diverse missions, student populations, and resources. It examines each institution as a whole, rather than specific programs within institutions.

For more information on Middle States Commission on Higher Education (MSCHE), please visit the following website <http://www.msche.org/>.

Joint Review Committee on Education in Radiologic Technology (JRCERT) –

The Radiologic Technology program is accredited by the Joint Review Committee on Education in Radiologic Technology (JRCERT)

Originally established in 1969, the Joint Review Committee on Education in Radiologic Technology (JRCERT) is the only organization recognized by the United States Department of Education (USDE) and the Council for Higher Education Accreditation (CHEA) for the accreditation of traditional and distance delivery educational programs in radiography, radiation therapy, magnetic resonance, and medical dosimetry. Over the last several decades the JRCERT has proven to be the “gold standard” of accreditation for educational programs in the radiologic sciences and currently accredits over 700 educational programs.

For more information on Joint Review Committee on Education in Radiologic Technology (JRCERT), please visit the following website <https://www.jrcert.org/>.

PROFESSIONAL ORGANIZATIONS FOR RADIOGRAPHERS

Upon successful completion of Hudson Valley Community College's Radiologic Technology program, graduates are eligible to apply for the New York State Licensure and the American Registry of Radiologic Technologists Certification Examination.

Both the New York State Department of Health and the American Registry of Radiologic Technologists have "good moral character" requirements for all who apply for the examination. Individuals who have been convicted of crimes either previous to enrollment or while enrolled in the Radiologic Technology program may be ineligible for these examinations. **The Radiologic Technology Department Chairperson should be contacted immediately if a student has questions regarding eligibility for these examinations.**

New York State Department of Health (NYSDOH)

In New York State, the field of Radiologic Technology is regulated by the Department of Health. It is declared to be the policy of the state of New York that the health and safety of the people of the state must be protected against the harmful effects of excessive and improper exposure to ionizing radiation and from inadequately performed diagnostic tests and radiation therapy treatments. Such protection can best be accomplished by requiring adequate training and experience of persons under the supervision of licensed practitioners as defined in Article 35 of the Public Health Law. It is the purpose of this article to establish standards of education, training and experience and to require the examination and licensure of radiographers, radiation therapists and nuclear medicine technologists.

https://www.health.ny.gov/environmental/radiological/radon/docs/article_35.pdf

At the conclusion of this program, graduates may be eligible to be licensed by the NYSDOH to practice Radiography.

The American Registry of Radiologic Technologists (ARRT)

The ARRT administers a comprehensive written examination to eligible graduates of educational programs in radiography, radiation therapy technology and nuclear medicine technology, which are accredited by a mechanism acceptable to the ARRT. Graduates who pass the ARRT's examination are certified in the appropriate discipline. The American Registry of Radiologic Technologists is not involved in the accreditation process but does require evidence that candidates for certification are graduates of accredited programs. The ARRT maintains a registry of certified technologists in all disciplines of Radiologic Technology. The ARRT requires 24 hours of continuing education in a two-year period to renew certification. ARRT certifications awarded January 1, 2011, and thereafter will be time-limited to 10 years. Prior to the end of the 10-year period, the individual will be required to demonstrate continued qualifications in order to continue to hold the certification. For information on the ARRT and other eligibility requirements, contact the agency at 1255 Northland Drive, Saint Paul, Minnesota 55120-1155. (651) 687-0048 OR <http://www.arrt.org>

At the conclusion of this program, graduates may be eligible to sit for the national certification examination administered by the ARRT and be nationally registered as a Licensed Radiologic Technologist.

The Standards of Ethics is listed on the ARRT website at:

<https://www.arrt.org/pdfs/Governing-Documents/Standards-of-Ethics.pdf>

“Every candidate for certification must, according to ARRT governing documents, "be a person of good moral character and must not have engaged in conduct that is inconsistent with the ARRT Rules of Ethics," and they must "agree to comply with the ARRT Rules and Regulations and the ARRT Standards of Ethics." ARRT investigates all potential violations in order to determine eligibility.

Issues addressed by the Rules of Ethics include convictions, criminal procedures, or military court martial as described below:

- Felony;
- Misdemeanor;
- Criminal procedures resulting in a plea of guilty or nolo contendere (no contest), a verdict of guilty, withheld or deferred adjudication, suspended or stay of sentence, or pre-trial diversion.

Juvenile convictions processed in juvenile court and minor traffic citations not involving drugs or alcohol do *not* need to be reported.

Additionally, candidates for certification are required to disclose whether they have ever had any license, registration, or certification subjected to discipline by a regulatory authority or certification board (other than ARRT). Primary pathway candidates must indicate any honor code violations that may have occurred while they attended school.

Candidates becoming certified through the primary pathway may complete a pre-application to determine their ethics eligibility prior to enrolling in or during their educational program.”

This pre-application form can be found at <https://www.arrt.org/pdfs/Ethics/Ethics-Review-Pre-Application.pdf>

PROFESSIONAL SOCIETIES

Program faculty members believe in providing opportunities for development of the entire professional person. As a student in a radiology program, you are eligible to join and gain the benefits of state and national organizations.

As a member of a professional organization, the student may participate in the following activities:

- Attendance/participation in local, state and national meetings
- Preparation/display of professional development exhibits
- Preparation/presentation of professional development papers

The American Society of Radiologic Technologists (ASRT)

The ASRT is a professional membership organization representing the interests of radiographers, radiation therapy technologists and nuclear medicine technologists according to the purpose and goals stated in its by-laws. The American Society sponsors numerous educational programs for all ranks of technologists with a wide range of professional and continuing education offerings. The ASRT developed and publishes the curriculum guide for educational programs in Radiologic Technology and provides for periodic review of curricula in Radiologic Technology. The ASRT maintains its headquarters at 15000 Central Avenue, SE, Albuquerque, New Mexico 87123-3909. Sal Martino, Ed.D., R.T.(R.), CAE is the chief executive officer at 1500 Central Avenue SE, Albuquerque, New Mexico 87123 Phone: 800-444-2778, Press 5 or (505) 298-4500, Press 5.

<http://www.asrt.org>

The Practice Standards for Medical Imaging is located on the ASRT website at:

<https://www.asrt.org/main/standards-regulations>

As a student in this program you are required to join the ASRT as a student member both in the first and second year of the program. Student membership cost is \$35/year and the \$10 membership application fee is waived for students. Please visit the ASRT website https://www.asrt.org/docs/default-source/membership/asrt-mbr-application.pdf?sfvrsn=79398cd1_34 for an application and submit it as soon as possible. Please provide a copy of your membership card to the Medical Imaging office as soon as you receive it.

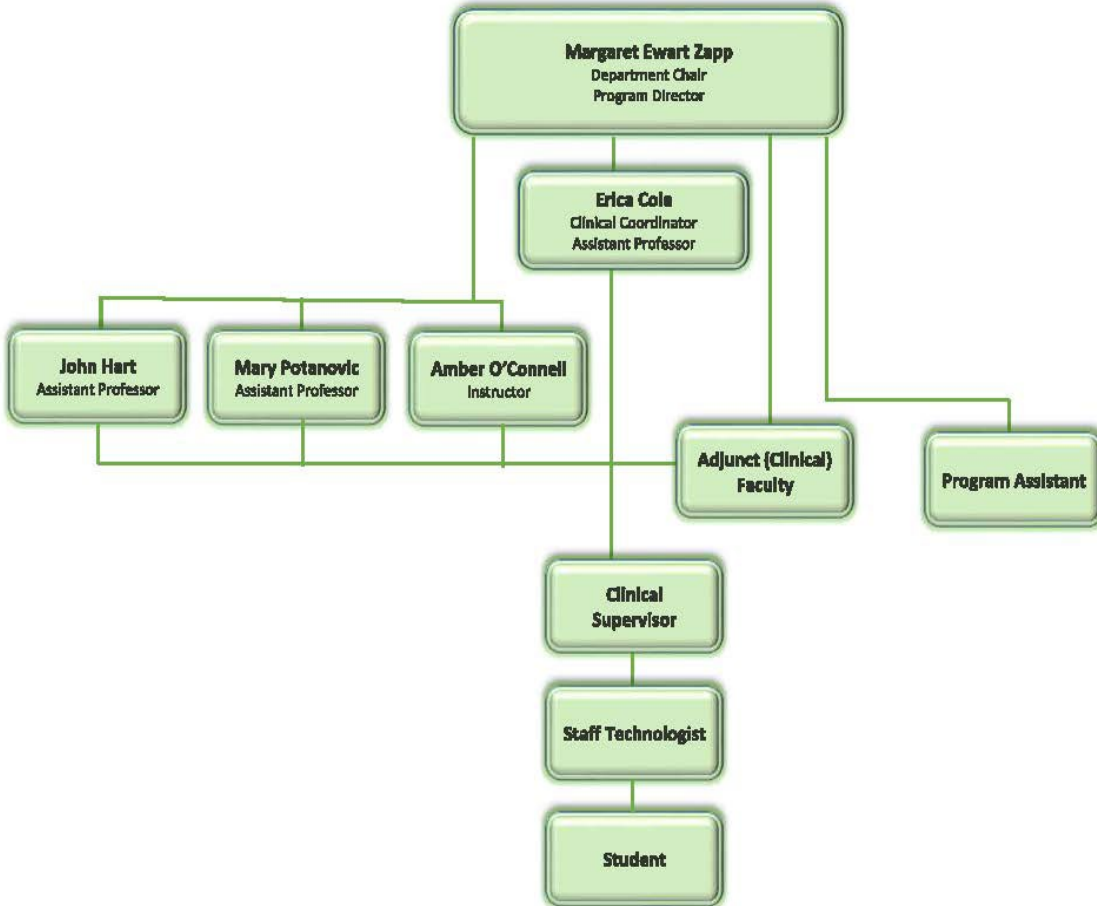
New York State Society of Radiologic Sciences (NYSSRS)

The mission of the NYSSRS is to promote the Radiologic Sciences and Medical Imaging Professions, establish and maintain the appropriate education to achieve the purpose of elevating and promoting the highest standards possible for patient care in the communities of interest and also protect the general welfare of Radiologic Science Professionals.

Student members shall be enrolled in an educational program, be eligible for certification by the American Registry of Radiologic Technologists (ARRT), and registered with New York State Department of Health as a student radiographer. Eligibility shall conclude on discontinuation of student status.

For more information and to obtain a membership form please visit <http://www.nyssrs.org/index.html>

RADIOLOGY PROGRAM HEIRARCHY



ROLE OF THE CLINICAL SUPERVISOR

The hospital Clinical Supervisor is a member of the radiology department who is in part responsible for the students' clinical education. This person has a major responsibility for:

1. Conducting an individualized clinical education orientation program for the students and the staff of the Department of Radiology.
2. Provide students with a written protocol of radiographic procedure positioning requirements
3. Maintaining effective liaison between the HVCC faculty and the hospital's Radiology Department.
4. Conducting conferences with the students on clinical matters, responsibilities, and problems.
5. Assisting the students during clinical education to secure reasonable accurate appraisals of their competency in the clinical area.
6. Conferring with the Radiology Department staff on student problems.
7. Encouraging conferences between staff radiographers and the student to increase the effectiveness of the clinical education.
8. Acting as a resource person by suggesting additional material that can be used to enhance the clinical education.
9. Conferring with the staff radiographer throughout the semester regarding the evaluation of the students.
10. Helping the students to make decisions regarding future plans and goals in a specific clinical area.

Qualifications

- Must be certified by the American Registry of Radiologic Technologists (ARRT) and maintain a New York State License to practice Radiography
- Must complete the continuing education requirements necessary to maintain ARRT credential
- Must be a graduate of an approved Radiologic Technology program and a minimum of two years practice as a Radiologic Technologist
- Provide Medical Imaging Department with a resume, copy of NYS License and ARRT card with documented continuing education validation

Must Meet One of the Following Criteria

- Experience as an Assistant Clinical Supervisor for one year
Or
- Served as acting Clinical Supervisor for one year
Or
- Served as a Clinical Competency Assessor for one year

SPECIAL NOTE

Must be approved and appointed by Hudson Valley Community College's Medical Imaging Department after joint selection by the hospital Radiology Department and the College's Radiologic Technology faculty

ROLE OF THE ASSISTANT CLINICAL SUPERVISOR

The Assistant Clinical Supervisor is an essential role at the clinical site as the Assistant should be prepared to fill-in if the Clinical Supervisor is not available. The following is a description of Hudson Valley's expectations for this role:

- Must be qualified to perform the Duties and Responsibilities of the Clinical Supervisor
- Assist the Clinical Supervisor in the performance of Duties and Responsibilities related to that position
- Assume Duties and Responsibilities of the Clinical Supervisor in the absence of the Clinical Supervisor

Qualifications

- Must be certified by the American Registry of Radiologic Technologists (ARRT) and New York State License required
- Must complete the continuing education requirements necessary to maintain ARRT credential
- Must be a graduate of an approved Radiologic Technology program and a minimum of one year practice as a Radiologic Technologist
- Provide the Medical Imaging Department with a resume, NYS License and ARRT card documenting continuing education validation

Special Note

Must be approved and appointed by Hudson Valley Community College's Medical Imaging Department after joint selection by the hospital Radiology Department and the College's Radiologic Technology faculty

ROLE OF THE CLINICAL ASSESSOR/STAFF RADIOGRAPHER

The Radiology Department staff radiographer is a full or part-time employee of the hospital who also shares in the responsibility for the daily guidance of the Radiologic Technology student enrolled in the education program. The staff radiographer occupies a key role in making the student's clinical experience a successful and meaningful one. He or she works closely with the college faculty and is responsible for:

1. Acquiring a thorough understanding of the college program, its general philosophy, and its objectives.
2. Orienting the students to the hospital, its personnel, policies, procedures, and facilities.
3. Providing the student with the information necessary to gain a better understanding of the functions of the radiology facility.
4. Familiarizing the student with the general procedure of the Radiology Department.
5. Observing and evaluating the student as he or she progresses through each clinical rotation.
6. Writing a fair and constructive recommendation of the student to accompany each personal growth evaluation and clinical assessment.
7. Conferring with the hospital supervisors and college faculty throughout each academic semester .

Qualifications

- Must be certified by the American Registry of Radiologic Technologists (ARRT) and New York State License required.
- Must complete the continuing education requirements necessary to maintain ARRT credential.
- Must be a graduate of an approved Radiologic Technology program and a minimum of one year practice as a Radiologic Technologist.
- Provide the Medical Imaging Department with a resume, NYS License and ARRT card documenting continuing education validation.

Special Note

Must be approved and appointed by Hudson Valley Community College's Medical Imaging Department after joint selection by the hospital Radiology Department and the College's Radiologic Technology faculty.

RESPONSIBILITIES OF THE STUDENT

The Program's Expectations of Radiologic Technology Students

1. To be knowledgeable of all program policies and aware of any consequences of non-compliance.
2. The importance of a good appearance cannot be overestimated. Students are expected to comply with the policies of the affiliate and the Radiology Program in regard to dress and grooming.
3. Establish good working relationships with all personnel with whom you have contact.
4. Be responsible for all equipment and materials used during clinical assigned hours.
5. Gain respect of your colleagues by being professional and dignified.
6. Attend and participate in all your scheduled clinical activities.
7. Consult with your staff radiographers, floor supervisors, and/or college faculty for help on problems.
8. Participate in the evaluation of your clinical progress in conjunction with the staff on the hospital's Radiology Department and the faculty of the program
9. Observe the staff of the Radiology Department at work. This is a learning situation and many ideas and suggestions can be gained from watching these people.
10. Strive to broaden your own knowledge and background on clinical subject matters by reading the professional literature available.
11. Be an active and responsible student radiographer by joining the state or national professional Radiologic Technology Society.
12. Adhere to the work ethics adopted by the program: attendance, character, teamwork, appearance, attitude, productivity, organization, communication, cooperation, and respect. Remember, students are working on their resume everyday they are at clinical and class.
13. Attendance/tardiness – these two qualities are of utmost importance. They measure responsibility and dependability, which are two of the most important personality traits future radiographers possess.

Please note: Throughout the length of the program, students will be evaluated in the clinical setting by clinical faculty, clinical supervisors, and clinical assessors. This evaluation will take into consideration the students clinical progress and growth where it pertains to positioning skills, technical factors, and professional development. An example of the evaluation criteria can be found in the Trajecsys system and is entitled "Student Clinical Performance Documentation". Students should familiarize themselves with this criteria.

Addressing Concerns During the Radiologic Technology Program

Students should address their specific concerns to the appropriate person(s) in the order listed below. Any additional concerns not listed, please see the Department Chairperson for guidance.

	Coursework, homework, tests, course content, grades	Clinical site issues	Benefit time, clinical hours, clinical policies	Scheduling, Degree requirements	Financial Aid
1	Professor/Instructor	Staff Technologist	Clinical Supervisor	Department Chair	Financial Aid
2	Department Chair	Clinical Supervisor	Clinical Coordinator	Dean of Health Sciences	Department Chair
3	Dean of Health Sciences	Clinical Faculty	Department Chair	Registrar	
4	VPAA (Vice President for Academic Affairs)	Clinical Coordinator		VPAA (Vice President for Academic Affairs)	
5	College President	Department Chair		College President	

CLINICAL EDUCATION IN RADIOLOGIC TECHNOLOGY

The purpose of clinical education in Radiologic Technology is to allow the student to apply theoretical principles of radiography, patient care and departmental procedures to practical experience. The student's role in the clinic setting is one of a learner and not a staff Radiographer.

The college in collaboration with the affiliating clinical facilities will arrange clinical education. While the student is in the clinical department, he/she must observe the regulations imposed by the affiliating clinical facility with regard to patient safety and welfare. Also, the assigned schedule of experience must be followed closely.

Clinical Education Policies

Clock In/Out Policy

When a student is assigned to a clinical education site, the following rules have been adopted for clocking in/out:

1. You are required to clock in and out using the TRAJECSYS tool on the **designated** computer at each clinical site.
2. If the student forgets to punch in/out for a day, leading to a discrepancy in the records, the student will be docked 4 hours of benefit time.
3. You will only use your password and clock in or out for yourself; not for any other individual.
4. If a student does not follow the Clock In/Out Policy, they will receive a written warning. If the policy is misused by the student a second time, the student will be dismissed from the program.

BLOGGING AND SOCIAL NETWORKING POLICY

Professional Ethics is outlined in the Radiology Program Handbook Standards of Radiology. Students should avoid all discussion of personalities, etc. involving college faculty, clinical instructors, other students, doctors, hospital personnel, and patients. Students should refrain from discussion of problems, issues, or negative experiences encountered either on campus or in the clinical setting on any social network.

The following are guidelines that should be followed when creating blogs, commenting on a blog, creating a LinkedIn profile, using Facebook, Twitter, Instagram, Snap Chats and/or engaging in any other social networking, including contributing to or through any of the other online media.

PERSONAL EXPRESSION

Personal Blogs and social networking contain the views of a particular student, not the views of the college and/or clinical education setting (hospital). However, readers may not immediately appreciate this concept. Students are ***strongly*** discouraged from discussing clinical experiences while using social networking sites.

PROTECT CONFIDENTIAL/TRADE SECRET INFORMATION

When posting blogs and/or contributing to or through any social networking site, students must refrain from disclosing confidential, proprietary, sensitive and/or trade secret information of the college faculty, clinical site and third parties.

BE RESPECTFUL AND EXERCISE COMMON SENSE

All blogs and social networking contributions must comply with the Radiology Programs policies, including but not limited to the programs Code of Conduct and Hudson Valley Community College policies and procedures. When posting to your blog and/or contributing to or through any social networking site, be respectful of others. Assume faculty, other students, co-workers, hospital personnel, patients, and future employers are reading your blogs and contributions.

The Radiology Program will determine, in its sole discretion, whether a particular blog or social networking use violates the programs policies. As will all other policies, violation of this policy may result in discipline, up to and including dismissal from the program.

CELL PHONE USAGE

Students must adhere to the cell phone policy of the clinical site they attend. It is recommended that students use the phone for texting or calls only during **breaks** and **lunches**.

If this policy is abused, the student may be asked to leave the clinical site for the day and it will be considered an absence. The student will receive a warning concerning this breach of policy.

After the second warning, the student will be docked benefit time and will be required to meet with the program director.

After the third offense of improper using the cell phone, the student will be dismissed from the program.

PROGRAM ATTENDANCE POLICY

General

Attendance affects the quality of a student's academic and clinical performance. Therefore, the department expects prompt and regular attendance for lectures, laboratory sessions and at the clinical education centers. Faculty may have individual course attendance policies which link absences and grade assignment.

Benefit Time

As a part of Clinical Education Courses I-VI, students will be allocated benefit time for the two-year period which these courses encompass. As a freshman student, forty (40) benefit hours will be allowed. As a senior student, forty-eight (48) benefit hours will be allowed. Benefit time is granted to students needing to be excused from the clinical setting for illness, personal leave, or inclement weather. When using the benefit day for illness, the student is expected to contact the hospital clinical supervisor one half hour prior to the scheduled start time of the benefit day being used. If a student arrives late to the clinical site or needs to leave early benefit time it is deleted in one (1) hour increments.

Any hours used over the forty (40) allocated for freshman year or above the forty-eight (48) allocated for senior year will have to be made up. Freshmen time owed must be made up prior to transition to the student's senior site. Students may not take time from their senior bank to be used at their freshmen site. (See make-up time).

Absence from the required clinical orientation will be deducted from the original forty (40) hours granted to freshmen. Students will also sacrifice benefit time if they are dismissed from the clinical education center for any

reason, i.e., not having radiation monitoring device, not having the appropriate month's monitoring device, improper uniform, or violation of hospital or program policies.

Students are not allowed to gain time and may not make up any hours missed until all benefit hours have been depleted.

All benefit hours must be properly recorded in the TRAJECSYS system and students absent for more than two consecutive days due to a medical reason will be required to submit an excuse from a medical practitioner. In cases where students have been absent due to illness, medical condition, or bodily injury, they will be required to submit a letter to the Medical Imaging Office from a physician stating that there is no further medical reason for absence and that they are physically able to return.

It is the responsibility of the student to check the CLASS BENEFIT TIME tally sheet each month to verify the attendance record. An updated printout of current benefit hours remaining will be posted to TRAJECSYS and in the Medical Imaging office by the 20th of each month. If there are discrepancies, a student must notify the clinical coordinator before the next month's records are reviewed. No changes will be made in the master record after that time.

Utilization of benefit time is monitored on a monthly basis. Excessive call-ins, consistently arriving late, and consistently leaving early is considered abuse of benefit time. Abuse of benefit time will be documented and will require the student to conference with the Department Chairperson.

Bereavement Time

Bereavement time will be given at the discretion of the Program Director or Clinical Coordinator. The program grants these days for immediate family (spouse, child, parent, grandparent, great-grandparent, sibling, step-parent, step-sibling, and child of sibling).

Hospital Clinical Education Schedule

Students are scheduled to work Monday through Friday during regular daytime shifts. Some clinical education sites may require students to report as early as 6am or as late as 11am for certain rotations. New York State law only allows 80 hours of off-hour shifts for the entire program. Off-hour shifts are only allowed during Clinical Education V. Such shifts must be approved by the Hudson Valley Community College faculty and Clinical Supervisor.

Hudson Valley students will have every day off from Clinical Education which is an official holiday at the clinical education center at which they affiliate. Students are also excused from clinic on any days that classes are not in session.

Freshmen are assigned to Clinical Education centers for 8 hour days on Monday and Tuesday for Clinical Education I & II; Monday through Friday for Clinical Education III.

Seniors are assigned to Clinical Education centers for 8 hour days on Wednesday, Thursday, and Friday for Clinical Education IV & V. Senior students are also required to complete clinical hours 40-hours a week during the winter intercession, dates to be determined by the academic calendar.

A calendar detailing the clinical education days of attendance will be distributed and posted on the Trajecsys homepage in the fall of each year.

In the second year, students are required to complete specialty rotations. A schedule of these rotations is provided during Clinical Education III. Any deviation from this schedule must be approved by the clinical coordinator. During these rotations, student may not arrive late, leave early, or take benefit time. If benefit time is taken for emergency purposes, you must notify the clinical coordinator. Any missed time may require the student return to the site to make up missed hours.

Alternative Schedule Policy

If for any reason a student must request an alternative schedule from the regular schedule of their clinical site, they must have the approval of the Clinical Supervisor and Clinical Faculty. It is up to the discretion of the Clinical Supervisor to determine if the requested schedule change is beneficial to the student's learning. The student is required to commit to this change for the entire year and cannot deviate from the agreed upon schedule at their leisure. This policy only applies to permanent changes and not a one-time occurrence.

Excused Absence (Absences beyond allowed benefit days)

Make-up time or forfeiture of benefit days will not be required for students who have permission to attend local, state or national radiologic technology meetings or to meet citizenship requirements such as Jury Duty. However, students who will be excused must submit an Application for Attendance form and a certificate of attendance from the workshops or courses they attend at these meetings or an official copy of their jury summons. Excused absences for other than approved educational function must be made up before course completion.

Excused absence (other than benefit days) from Clinical Education will be allowed only if the student has:

1. A 2.0 index
2. Not less than a C in any current course
3. The permission of his/her Clinical Supervisor and his/her college Faculty Advisor.

See appendix for form

Snow Days and Class Cancellations

Official college snow days apply to hospital clinical education courses. Students are advised to listen to local television and radio stations for cancellations and delays. Students must not attend the clinical education site when classes are cancelled due to bad weather. Additionally, students will be dismissed from the site if classes are cancelled for any reason during the daytime hours. The department recommends the students use appropriate judgment when attempting to drive in inclement weather conditions. Students may use benefit time on such days but must contact the clinical site according to the policy contained in their manual.

Students may call (518) 629-4822 OR check www.hvcc.edu for snow emergency information and class cancellations. Students are also encouraged to utilize the SUNY Emergency Alert System for notification of school closings.

Notification of Clinical Absence

Tardiness at the clinical site is frowned upon and strongly discouraged. If the student must be late or absent from clinical education, it is the student's responsibility to contact the hospital one-half hour prior to the time of scheduled arrival. Further regulations regarding notification may be requested by the assigned clinical education center. Lack of notification or chronic tardiness will result in disciplinary action. The disciplinary action needed will be discussed between the Hudson Valley Community College faculty and the Clinical Supervisor. Actions range from loss of benefit time to dismissal from the program.

Make-up Time Policy

Time worked as make-up time must be agreeable to the Hospital Clinical Supervisor. The Hospital Clinical Supervisor has the authority to stipulate which days are acceptable as make-up days. Make-up time may only be completed in 4 or 8 hour increments. If a student calls in to the clinical site on a make-up day, additional benefit time will be docked at double the original time owed.

Freshmen students are allowed to make up time on the day shift Monday through Friday. Make-up time by either freshmen or senior students cannot infringe upon the clinical education of the other class. No make-up time is allowed unless adequate supervision is provided. Students may not participate in excess of eight hours in any 24 hour period or 40 hours in any one week of combined classroom and clinical assignments.

Please Note: Students may not make up time or schedule clinical rotations during any holidays that the college is closed.

Vacations

Freshmen: During the academic year, freshmen students will receive the customary college holidays. Freshmen students will be allowed a two-week vacation in the middle of Clinical Education III. Vacation dates will be decided based on the clinical calendar.

Seniors: During the academic year, senior students will receive the customary college holidays and vacations. Students will transition to their senior site after the two-week summer vacation and complete 40-hour work weeks until the start of the fall semester.

Infectious Disease Control Policies

The Radiologic Technology program recognizes that infection control is vital to the health of our program's students and to the health of our patients at the Clinical Education Center. To assure the well-being of both Hudson Valley Community College students and the patients for whom they care, the following policies have been established.

1. Prior to the first day of classes both years in the program, students must obtain a complete physical examination including a 2 Step Tuberculin Mantoux Test and submit a Hudson Valley Community College Immunization form to the Health Office. All Health Science students must also present immunization documentation for Varicella, Measles, Mumps and Rubella, Diphtheria & Tetanus, Hepatitis B immunization is highly recommended. Students must also show proof of annual influenza vaccination. **Students should make three (3) copies of these forms which may be required at the Clinical Education site.**
2. OSHA suggests all individuals involved in Clinical Education at acute care or long term care facilities be vaccinated for Hepatitis B. (An exception is made for pregnant individuals who, after delivery, should seek vaccination as soon as their physician gives permission). Prior to the start of Clinical Education, students must do one of the following:
 - a) Obtain Hepatitis B vaccine and present documentation to college program Department Chairperson on the Health and Immunization form that Hepatitis B vaccinations are in progress.
 - b) Prove previous Hepatitis vaccination and submit documentation to Department Chairperson. As necessary, a three (3) month follow up titer needs to be done to prove Hepatitis B vaccine worked.
 - c) Sign a waiver of liability, declining Hepatitis B vaccination and submit to Department Chairperson.
3. Students of the Radiologic Technology program participating in Clinical Education courses should be aware that

some patients that they may come in contact with may have an infectious disease (i.e. Hepatitis B, Tuberculosis, AIDS, etc.). Students must follow the exact procedures established by each clinical education center in caring for patients with infectious diseases. Radiologic Technology are expected to routinely utilize standard precautions while working with patients. **No Radiologic Technology student shall participate in the radiographic procedures on a patient with a known diagnosis of tuberculosis. A positive PPD or TB test does not mean that a patient has actually contracted the disease and students will be required to perform examinations on these patients.** Students should report any contact with a communicable disease in accordance with policies of the Clinical Education Center where the contact occurs. If you have any questions about contact you have had with a patient you should consult with your clinical supervisor or the program director immediately.

4. Novel Coronavirus 2019 (COVID-19) Policy - it is the policy of the HVCC Medical Imaging department that Medical Imaging students will wear a surgical mask at all times in the clinical setting unless they are at lunch or on break. Students involved in an imaging procedure on a patient with a confirmed or a suspected diagnosis of Novel Coronavirus 2019 (COVID-19) must wear a program issued N-95 mask and face shield or other approved eye protection. If a student suspects they have been exposed to a person with COVID-19, they are to contact the Department Chairperson immediately for guidance.
5. In order to prevent patients from receiving secondary infections, students with an infectious disease (other than the common cold) may not attend Clinical Education courses. Students should inform their clinical supervisor and college faculty instructor for their Clinical Education Center immediately upon diagnosis. Students may not return to the Clinical Center until a release form from a physician has been presented to the clinical supervisor and college faculty. Clinical supervisors do have the right and responsibility to dismiss a student from the clinic if they believe a student to be ill. Examples of some infectious diseases that will prevent clinical attendance include the flu, tuberculosis, and pink eye. If students are exhibiting any of the following symptoms, they should question the appropriateness of attendance at the clinical site:
 - Fever, chills
 - Signs & symptoms of strep infection
 - Cough & sputum production
 - Skin eruptions, vesicles, skin lesions, weeping dermatitis(eg. herpes simplex, chicken pox, herpes zoster)
 - Draining wounds or sores
 - Diarrhea
 - Vomiting

Students may come to the college to be examined for free by the College Health Services staff or seek health care on their own (for which the student must pay).

6. Hand washing is the most important step to prevent infections from spreading. It is very important that hand washing/hand sanitizing occur before and after patient contact. Hands should be washed after removal of gloves, before and after eating and smoking. They also need to be washing before and after personal hygiene and using the toilet.

Health Services

Hudson Valley Community College has a Health Service Office located in Fitzgibbons Building, Room 146. The office is open Monday through Thursday 8:00 am until 9:00 pm and on Friday 8:00 am until 4:30 p.m. A Registered Nurse is always on campus when the office is open and is available for medical assistance.

Requirements Prior to Clinical Site Attendance

Student Health Records

Health records in the Hudson Valley Community College Health Office must be complete and up to date in order for you to be allowed to attend the clinical site. These include:

- Annual physical
 - Annual two step Tuberculin test (Mantoux only)
 - Annual Influenza Vaccine
 - Covid-19 Vaccination
 - Documented immunization for:
 - Rubella
 - Measles
 - Mumps
 - Polio
 - Disease history for Chicken Pox or immunization
 - Hepatitis B vaccination is highly recommended prior to clinical. Students who do not wish to receive this will be required to sign a waiver stating they have been informed of the risks and have chosen not to pursue vaccination. Waiver forms may be obtained in the Medical Imaging office.
- ** Students will not be allowed to enter clinical without having all of the following completed:**
- Health records updated and on file
 - Signed Student Policy Handbook Agreement

A copy of the approved forms for documentation of annual physical, immunizations, and PPD can be found on the Health Service page of the college website or at the following link:

<https://www.hvcc.edu/healthservices/forms/index.html>

Cardiopulmonary Resuscitation (CPR)

Students must be certified in Basic Life Support (BLS) for the Healthcare Provider prior to the first day of clinical of the freshmen year, first semester. This certification may come from formal classes offered by the college, hospitals, community health agencies, the American Red Cross, the American Heart Association, or other sources. Completely online CPR certification is not an acceptable format for this program. If you are unsure if your certification is appropriate, please see the Department Chairperson for clarification. A copy of your CPR certification card issued by the AHA must be submitted to the Medical Imaging office prior to the start of clinical rotation.

Insurance Coverage

All Health Science students are automatically enrolled in an accidental insurance policy upon enrollment. However, it is highly recommended that students carry their own health insurance to cover illness and preventative care

In the event of an accident at the clinical site, the following procedure should be followed:

1. Alert the Clinical Supervisor of the incident.
2. Obtain appropriate medical care.

3. Contact the Medical Imaging Department Chairperson.
4. Claim an ER admission/evaluation/treatment under your private health insurance or accidental coverage.
5. Provide documentation to Hudson Valley Community College Health Office. The Health Office will require a completed incident form.

Mandatory Drug Testing & Criminal Background Checks

Prior to starting the clinical site, students will be required to complete drug testing and criminal background checks through Castle Branch. Information on Castle Branch will be distributed prior to the start of the fall semester. Students will be required to complete these requirements at their own expense. Results must be shared with the Medical Imaging Department Chairperson and the assigned clinical site. If the clinical site deems the student unfit to attend the site, the student may be unable to complete the degree requirements and may be dismissed from the program.

Please note: A non-negative result on the drug panel will not exclude you from clinical placement. Legally prescribed medications may require additional documentation. THC is currently legal in NYS and a non-negative result will not have an effect on clinical placement.

Conviction of a felony or misdemeanor prior to enrolling in the program or while enrolled in the program may impact the graduate's ability to be licensed in New York State. Such convictions may also prevent the graduate to become nationally certified by the American Registry of Radiologic Technologists. New York State Licensing and national certification are mandated for employment as a Radiologic Technologist in New York State.

Please see the Department Chairperson immediately if you have any concerns or questions regarding the above information.

Clinical Site Orientation & Mandatory Testing Packets

Clinical Education sites associated with the Radiologic Technology program may mandate that students attend hospital orientation programs and/or complete mandatory education and testing packets prior to starting the program. Failure to meet the clinical site requirements could delay the student from participating at the site and continuing in the program.

PREGNANCY NOTIFICATION POLICY

Students Radiographers may voluntarily submit a written declaration of pregnancy. Upon submission of such a declaration, the student must meet with the program director to discuss options available to the student.

If the student decides to continue in the program, all efforts will be made to ensure that the student will complete the program within 2 years.

A student may withdraw a declaration of pregnancy at any time by submitting a written withdrawal statement to the program director.

Upon written declaration of pregnancy, the student must follow these procedures:

1. Submit a statement from her physician verifying pregnancy and an estimated due date. The physician should make recommendations to the student/employee to either of the following options:

- Immediate withdrawal from the program for health reasons* or
- Continued enrollment status without modification or
- Continued enrollment status with modification

*A student that withdraws from the program may apply for readmission; however, readmission is dependent upon the availability of clinical space and academic standing.

2. If the student opts to continue in the program, the student must utilize the following steps to ensure radiation safety for both the student and embryo/fetus:

- Consult with the program director and RSO.
- Program director will review Radiation Safety Guidelines with the student and discuss the potential risks involving ionizing radiation to the developing embryo/fetus.
- The student will be informed of the specific exposure limits.
- The student will be provided a fetal dosimeter to be worn throughout gestation at waist level to monitor the embryo/fetus exposure.
- The fetal dosimetry report will be monitored throughout the gestation period on a monthly basis and will be reviewed by the program director.
- Enhanced radiation protection measures are required when participating in fluoroscopic, portable, or operating room procedures.
- The student may choose modification of the clinical practice during the pregnancy**

****If modification is chosen, the completion date of graduation requirements may be extended. Choosing modification may result in a delay of successful program completion.**

New York State Department of Health Code 10NVCCR part 16 requires embryo/fetal exposure monitoring for declared pregnant women who have occupational radiation exposure. The embryo/fetus is allowed a dose of 500 mrem or less during the entire pregnancy (9months) (not to exceed 50 mrem/month)

****DECLARATION OF PREGNANCY FOR STUDENT RADIOGRAPHERS form can be found in the appendix****

RADIATION MONITORING PERSONAL DOSIMETER (TDL)

New York State requires the student wear a radiation monitoring dosimeter at all times in the clinical setting or in the college x-ray laboratory. Any student without a current monitoring badge will be asked to leave these areas. Loss of benefit time will result when a student does not have the monitoring dosimeter at the clinical setting and an absence will be marked for a student that does not have a monitoring dosimeter for a lab. The radiation monitoring dosimeter must be worn in view on the front of the person, attached to the collar of the uniform being worn by the student.

Students will be given a radiation monitoring dosimeter for the duration of the program. Students are responsible for maintaining and caring for the dosimeter. This device is very sensitive to heat, cold and moisture, therefore students must store the dosimeter in a safe place when not in use. The monitoring of an individual's radiation dosimeter is of utmost importance and is a serious matter. **If a dosimeter is damaged, lost or misplaced, or left in an energized X-ray room, the program director must be notified immediately.**

Students will be required to exchange their dosimeter on a quarterly basis. Notification will be emailed to students when it is time to exchange dosimeters. Failure to exchange your dosimeter by the 8th of the exchange month will result in loss of benefit time, inability to attend labs and the clinical site.

At the end of the program, students must return their dosimeter to the Medical Imaging Office.

Each quarter, the student must initial his/her radiation dose report posted on the bulletin board located in the Medical Imaging office. The Medical Imaging department monitors the dosage of the students in the program and will notify any student if their reading exceeds 30 millirems for that quarter. A student who receives more than 30 millirems on their dosimeter reading will be denied access to the clinical setting until he/she furnished a statement as to where he/she has worked during that period of time and why the radiation badge reading was received.

Individual annual Radiation Dosimetry Reports are maintained in the permanent student record files.

Outside Employment

Although we do not discourage students from holding outside employment if they can maintain at least a 2.0 cumulative index, we strongly suggest students make their education in this program a priority. Historically, students are most successful in this program when they work less than 24 hours a week. Generally, the student should plan to study 2 to 3 hours per week for each semester hour of credit carried, remembering that radiography courses tend to require more time.

If a student is employed in a hospital in the Radiology Department, there are several rules to which he or she must adhere.

- Student malpractice does not cover the student when he or she is working as an employee.
- The student will not seek release time from the clinical education schedule in order to work for pay.
- New York State strictly prohibits student radiographers from performing radiographic procedures outside the scheduled clinical education time. NYSDOH Part 89, section 89.4(d). This includes the practice of positioning patients, handling equipment, setting technical factors, and making exposures during a procedure. Any student caught violating this law will be dismissed from the HVCC Radiologic Technology program immediately.

Patient Holding Policy

As part of our curriculum we abide by the standards set forth by the NYS Department of Health's recommendations on radiation protection and have a strict policy against patient holding. **No student should be involved in a case that requires an occupationally exposed radiation worker to hold a patient during a medical imaging procedure.** Please see the Clinical Coordinator or Department Chairperson immediately if your clinical site is requesting you to participate in exams where patient holding is taking place.

As stated in the state sanitary code Chapter 1- Part 16 on Ionizing Radiation:

16.56 Radiographic installations excluding dental, veterinary and podiatric installations.

(c) Conditions for operation of equipment.

(1) No person shall be regularly employed to hold patients or films during exposures nor shall such duty be performed by any individual occupationally exposed to radiation during the course of his/her other duties. When it is necessary to restrain the patient, mechanical supporting or restraining devices shall be used whenever possible. If patients or films must be held by an individual, that individual shall be provided with appropriate shielding devices such as protective gloves and a protective apron of at least 0.25 mm lead equivalent. No part of the attendant's body shall be in the useful beam. The exposure of any individual used for holding patients shall be determined. Pregnant women and persons under 18 years of age shall not hold patients under any conditions.

MRI Safety Policy

No Radiologic Technology student shall rotate through the MRI modality until he/she/they have completed the MRI safety lecture in Clinical Education III.

At the conclusion of the lecture, students will be educated on basic information regarding MRI technology, describes common hazards and unique dangers associated with the MRI environment, and present guidelines and recommendations to prevent accidents and injuries.

Professional Appearance, Attitude, & Conduct

As a student radiographer, you will be working at the clinical education center with the general public and hospital professional personnel. The regulations listed below will aid you in gaining their confidence and are necessary for maintaining hygienic conditions.

Please note: Due to the changing circumstances related to the Covid-19 pandemic, the program reserves the right to change dress code policies at any time. Any changes will be communicated to the students via college email from the Program Director or Clinical Coordinator.

Professional Appearance

Uniforms (Only required at clinical education site)

Regulation uniform, clean solid white, black, or gray shoes or sneakers, conservative hosiery, Hudson Valley Community College arm patch (left shoulder), name tag and personal dosimeter. Solid white, black, or grey turtleneck or long sleeve shirts may be worn under uniform top.

A Hudson Valley Community College arm patch, student radiographer name tag and radiation monitoring device must be worn at all times. Uniforms must be kept clean and neat at all times and be acceptable to the clinical education site at which you affiliate as well as to the Hudson Valley Community College faculty. All uniform slacks must be appropriately hemmed and not touching the ground. There may be no substitution of uniform slacks. Pewter cardigan style cover-ups (not lab coats) with Hudson Valley Community College arm patch (left shoulder) and name tag worn on the outside, may also be worn over regulation top. Such cover-ups may be purchased through uniform stores.

When scheduled for an operating room rotation, students must wear their Hudson Valley Community College Radiologic Technology uniform to the clinical education site and change into OR scrubs when they arrive. When in the surgical suite, the Hudson Valley Community College name tag and radiation monitoring device must be worn. If wearing the operating room scrub suit outside of the surgical suite, the student is required to wear their required warm-up jacket over the scrub suit.

Jewelry

While attending the hospital clinical affiliate, the only jewelry allowed is:

- Digital watch or a watch with a second hand.
- Engagement ring and/or wedding band.
- Single stud earrings in the lobe of the ear are permissible. Plastic spacers are allowed.
- No other jewelry is permitted.

No other jewelry is permitted. NO other visible body piercing materials are allowed during hospital clinical education courses. NO plastic bracelets promoting various charitable, patriotic or health care organizations may be worn to the clinical education site.

Personal Grooming

Hair, mustaches and beards must be kept neat and clean and trimmed close to the face. Hair which falls below collar level must be worn up or pulled completely back (not just sides). Hair must be of natural colors. No Hair adornments are allowed. Solid black, white, or grey headbands are permitted.

NO offensive or controversial tattoos may be visible while attending hospital clinical education rotations.

Fingernails are to be kept neat and trimmed (nails must not extend beyond tip of finger). Nail polish, if worn, must be clear. No artificial or acrylic nails, gel, ANC, nail wraps or extensions may be worn.

Facial cosmetics – natural appearance is desirable in the hospital setting where you will be working with patients and professionals. Therefore, cosmetics, if worn at all, should be kept to a minimum.

Body Hygiene – since you will be working in close contact with patients who may be affected by heavy orders, personal hygiene is extremely important. Body odors cannot be camouflaged by any perfume or cologne. Bathing or showering is a daily must, together with the use of an effective body deodorant. Similarly, HEAVY perfumes or colognes must be avoided.

Smoking – students who smoke are expected to adhere to the smoking policy at the clinical education center at which they are affiliated. Smells from smoking linger on clothes, hands and breath. Such odors can be irritating to sick, elderly or non-smoking patients. After smoking, wash hands and use breath mints. The chewing of gum is NOT permitted.

Please Note:

If any student is found in the clinical setting in violation of the dress code policy, he/she will be given a verbal warning. If additional violations occur, he/she will be asked to leave the clinical affiliation for the day. If a student is required to leave the clinical site for violations, benefit time will be deducted.

Relationships Within the Clinical Setting

Students are expected to cooperate with hospital personnel while in the affiliated facility. You must observe regulations imposed by the facility regarding patient safety, welfare, personal cleanliness and hygiene. Failure to observe the same will be evidence of inappropriate behaviors.

As a student learner, you are expected to cooperate with the personnel at all times. If any problems arise about the performance of a task that seems unreasonable, you are to report the incident to the clinical supervisor. The clinical supervisor will be responsible for handling the matter. If the student feels the issue is not handled fairly, they may discuss the issue with the college faculty assigned to the clinical site or the program director.

Attitude

A good attitude toward both the profession and more particularly, the patient is extremely important, i.e., empathy toward patients, respect for co-workers and superiors and an industrious nature, etc. Failure to display a good attitude towards patients, hospital employees, or fellow students may result in dismissal from the clinical site and ultimately the Radiologic Technology program.

Professional Conduct

You are entering a health care profession and will be expected to conduct yourself appropriately. Students are expected to present themselves in a professional manner at all times while in the clinical settings. A copy of the Radiologic Technology Code of Ethics is included in this book. Please read carefully as you are held responsible for following these guidelines.

Students may be dismissed from clinical education site and the Radiologic Technology program for any of the following actions:

- Disrespectful or insubordinate behavior towards a clinical supervisor, faculty or staff member
- Breach of hospital patient confidentiality regulations including HIPAA regulations
- Breach of the Code of Ethics or Technical Standards
- Critical errors deemed potentially harmful to patients
- Erratic or abnormal behavior possibly related to alcohol consumption or drug usage
- Failure to comply with the attendance policy
- Photocopying of patient records
- Failure to comply with the dress code
- Health records or immunizations not in compliance
- CPR card invalid
- Positive drug testing
- Unacceptable criminal background check
- Failure to comply with hospital policies and procedures, state or federal laws, rules and regulations

If a student is dismissed for any of the listed reasons, the Clinical Supervisor will notify the college in writing of the situation and the day will count as a clinical absence regardless of the time of the incident.

Serious infractions or repeated incidences will be reviewed at a meeting between the Department Chairperson and Clinical Coordinator and could result in a recommendation for dismissal from the program. If an affiliate hospital permanently dismisses a student, the student's status within the program may be in jeopardy and placement at another clinical site is not guaranteed. The Medical Imaging Department has the right to immediately suspend a student pending investigation of the reason(s) for clinical dismissal. If a new clinical site cannot be secured, the student will not be allowed to continue in the program.

Direct vs Indirect Supervision Policy

Radiography students must have supervision at all times while participating in Clinical Education. While performing clinical assignments, the staff radiographer in charge of the assigned room/area and the clinical instructor are directly responsible of the student. The student must have adequate and proper supervision during all clinical assignments.

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

1. A qualified radiographer reviews the request for examination in relation to the student's achievement.
2. A qualified radiographer evaluates the condition of the patient in relation to the student's knowledge.
3. A qualified radiographer is present during the performance of the examination; and
4. A qualified radiographer reviews and approves the radiographs.

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

After demonstrating competency, students may perform procedures with indirect supervision.

Indirect supervision is defined as that supervision provided by a qualified radiographer immediately available to assist students regardless of the level of student achievement.

"Immediately available" is interpreted as the presence of qualified radiographer adjacent to the room or location where a radiographic procedure is being performed. This availability applies to all areas where ionizing radiation equipment is in use.

Portable and operating room radiography requires that the student be provided with direct supervision for any examinations being performed regardless of the student's level of achievement.

A student is responsible for performing radiographic procedures that have been learned and practiced. If the student is asked to perform procedures for which no instruction or practice has been obtained, it is the student's responsibility to notify the staff radiographer and clinical instructor of this fact. **The student must also assume responsibility for assuring that all repeat radiographs are performed under the direct supervision of a staff radiographer.**

If a student does not follow the Supervision/Repeat Policy, they will receive a written warning. If the policy is misused by the student a second time, the student may be dismissed from the program.

Technical Standards Policy

All applicants accepted into the Radiologic Technology program must be able to meet the program's technical standards detailed on the following pages. Any information supplied is voluntary and will only be shared with the appropriate college personnel who coordinate or provide support services or accommodations. Hudson Valley Community College's Disability Resource Center will provide accommodations for students with disabilities. Upon admission to the program, all students must complete the sign-off form verifying that they have read, understand and are able to meet these standards.

Technical Standards for Admission, Promotion, Graduation

Technical Standards are non-academic criteria used in the admission, promotion, and graduation of students. Technical Standards are published discipline specific essential duties for the safe and reasonable practice of Radiologic Technology.

Technical Standards are a concrete statement of the minimum physical, sensory/motor, communication, behavioral/social, mental/emotional and environmental requirements for normal and safe professional function. They are intended to inform the prospective student/professional of the attributes, characteristics and abilities essential to Radiologic Technology practice. Professional competency is the summation of many cognitive, affective and psychomotor skills. The College has a moral and ethical responsibility to select, educate and certify competent and safe students and practitioners. Patient health and safety is the sole benchmark against which we measure all performance requirements, including the Technical Standards addressed in this document.

All candidates for the A.A.S. Radiologic Technology degree program must possess the essential skills and abilities necessary to complete the curriculum successfully with or without reasonable accommodations for any disabilities an individual may have.

Students enrolled in the Hudson Valley Community College Radiologic Technology program must demonstrate numerous competencies representing all three learning domains – cognitive, psychomotor and affective. Students learn, practice and verify these competencies in a variety of setting including the classroom, the laboratory and in the clinical environment.

To achieve the mandated classroom competencies, radiography students must perceive and integrate information from a variety of sources. The sources include oral instructions, printed materials, visual media and live demonstrations. Students must participate in classroom discussions, present oral reports and successfully pass written and computer based examinations which include the interpretation of radiographic images. Completion of these tasks requires cognitive skills including reading, writing and problem solving. To be physically capable to classroom work students must, without assistance, be able to see, hear, speak, sit and touch.

Radiologic technology laboratory sessions provide students with the opportunity to view and participate in procedure demonstrations, practice radiographic procedures, acquire skills in radiographic technique development, radiation safety practices and image development. In addition to the cognitive skills necessary in the classroom setting, students must demonstrate psychomotor skills to manipulate patient phantoms and radiographic equipment. Student must also demonstrate general professional behaviors such as team cooperation and the ability to communicate with others. To satisfy laboratory requirements, students must perform all procedures without critical errors. In addition to the physical capabilities necessary for classroom activities, radiologic technology sessions require students, without assistance, to reach, manipulate and adjust the radiographic tube six feet from the floor while using both hands to perform procedures needing both fine motor skills and considerable strength. The latter procedures include lifting and manipulate mannequins, turning and moving patients, pushing wheel chairs and performing cardiopulmonary resuscitation.

Clinical education courses associated with the Radiologic Technology program involve the application of knowledge and skills learned in the classroom and laboratory setting to actual patients in the clinical environment. Students must be able to obtain medical history from patient, parent or guardian. Students must be able to

deliver, receive, and interpret verbal and non-verbal communication to and from the patient, the clinical personnel instructors and student peers. Students must be able to recognize and react to signs of medical emergencies. Students must record medical history, interpret patient charts and radiographic procedure requests, visually monitor patients in dimmed lighting and via video monitors during procedures. Students are required to utilize keyboards for clinical data input including diagnostic radiography rooms, emergency rooms, operating rooms and patient rooms. Performing procedures in these areas require the student to move briskly between patients care areas as well as meeting the mental and physical demands in these environments.

Students must demonstrate a respectful and caring attitude toward all patients. They must also demonstrate sensitive responses to patients in the clinical environment and interact with peers, patients, clinical staff and faculty in an emotionally stable, professional and ethical manner. Respect for diversity among patients, clinical and college personnel and peers must be demonstrated. For information on services for students with disabilities or if you have a question regarding this information, please contact:

For information on services for students with disabilities or if you have a question regarding this information please contact:

DeAnne Martocci
Director of Center for Access and Assistive Technology
Siek Campus Center, Room 130
(518) 629-7596
T.D.D. (518) 629-7596
Fax (518) 629-4381

****Please see the Appendix for the Technical Standards Policy sign-off.****

HIPAA & Patient Confidentiality

HIPAA stands for the Health Insurance Portability and Accountability Act of 1996.

This Act adds additional rules for protecting the privacy and security of a person's health information. Referred to as PHI, any information that could be used to identify an individual or an individual's health status is legally required to be protected by health care providers. PHI can be written, oral, or electronic in form. Staff, students and vendors are responsible to protect that information and required to follow all directions for the protection of that information.

What makes personal health information identifiable? Any of the following:

- Name
- Address
- Employer
- Relative's Names
- Date of Birth
- Voice Prints
- Finger Prints
- Photos
- Telephone/Fax #
- Email Address
- Social Security #
- Medical Record #
- Account #
- Certificate #
- Date of Surgery
- Any condition or characteristic that could identify the person

PHI can be used by healthcare providers for the treatment, payment and routine business operations. If a consent for disclosure is obtained, all patients must receive the written disclosure statement from the healthcare provider upon giving their consent. The healthcare provider is also required to post this statement for public view.

Additionally, a patient has a right to:

- Inspect and copy the PHI
- Request an amendment or correction of the PHI
- Receive a list of all disclosures & to whom disclosure was made
- Restrict the uses and disclosures of PHI
- Request a certain means of communication regarding PHI

Any person violating disclosure of PHI can be subject to monetary fines up to and including \$250,000 and imprisonment.

You are responsible for safe guarding information in your possession. You are charged with making sure information is secure while in your possession and printed information is discarded in the appropriate manner. You may not discuss anything you observe while at the clinical site that could identify the patient.

In relation to any HIV or chemical dependency information, New York State laws are stricter and hold the healthcare provider and its caregivers to a higher standard in relation to this information. Do not provide or disclose any information without discussing it with a supervisor.

HIV Confidentiality

Overview

In New York State, there are strict laws which protect every patient's privacy. For patients who have AIDS or have been tested for the HIV virus, the law is even stricter. Here is what you must know:

- As an employee/affiliate of the healthcare provider, if you find out a patient has AIDS or has been tested for the HIV virus, you may not repeat this information to anyone unless you must do so in order to provide direct patient care.

If you break this law, you can lose your job, be fined up to \$5,000 and/or have a criminal charges brought against you.

The following information gives details of the New York State law:

KEY POINTS: New York State Department of Health Regulation Part 63:
AIDS Testing and Confidentiality of HIV-Related Information

Requires that HIV counseling be provided prior to testing and testing be provided on a voluntary basis.

- Written informed consent must be obtained voluntarily before an HIV-related test is ordered.
- Exceptions: Not required when test is ordered by court order, required by state or federal law, necessary for organ donation, anonymous research, or used to determine cause of death. All anepartum patients are to be tested prior to admission. If they refuse, it will be offered again in the labor and delivery unit. All newborn infants will receive mandatory testing if the mother refuses. High-risk mothers who refuse testing will receive counseling regarding breast feeding.

Requires that all receive pre-test and post-test counseling.

Pre-test counseling includes:

- Nature of HIV infection and HIV-related illness
- Explanation of test and its voluntary nature
- Benefits of testing, such as early diagnosis and treatment
- Availability of anonymous testing
- Prevention of HIV infection
- Risks involved with disclosure of results

Post-test counseling includes:

- How to cope emotionally with the test results
- How to prevent exposure and transmission of HIV virus
- Importance of notifying contacts, partner screening, notification automatic for known partners
- Circumstances for disclosure of HIV information
- Discrimination problems that might arise with disclosure of test results
- Discussion of the ability to revoke the release of HIV confidential information
- Domestic violence screening

Specifies the manner and circumstances in which HIV-related information can be disclosed:

- Disclosure with a release form “Authorization for Release of Confidential HIV-Related Information” must authorize a specific person or organization to receive this information and is considered a one-time release.
- Disclosure without a release form may be made to authorized persons as listed on the informed Consent to HIV Antibody Test Form.
- Protected individuals (tested person) or their legal representative.
- HEALTH CARE facility or HEALTH CARE provider providing care to the protected individual or their child and anyone working with such a facility or provider who reasonably needs the information to supervise, monitor or administer a health service.
- A contact of the protected person .

- A committee or organization responsible for reviewing or monitoring a health facility.
- When state or federal law requires.
- Authorized foster care or adoption agency.
- An insurance company for reimbursement to the protected person.
- When a court orders it.
- Divisions of Parole, Probation and Commission of Correction.
- Disclosure cannot be made to a HEALTH CARE provider or health care facility if the sole purpose of disclosure is infection control.
- Violations of disclosure may result in a fine up to \$5,000 for each occurrence or criminal charges of a misdemeanor or both.
- All disclosures of confidential HIV-related information must be documented in the medical record.
- A statement prohibiting re-disclosure must accompany all written disclosures of confidential HIV-related information.
- Confidential HIV-related information shall be recorded in the medical record such that it is readily accessible to provide proper care and treatment, including death certificate and autopsy report.

Defines the specific circumstances in which a physician can notify a contact without the consent of the protected person.

- A physician must notify a partner without consent if the physician reasonably believes that disclosure is medically appropriate, the partner is at “significant risk” of infection and the protected person will not inform the partner after being counseled to do so unless domestic violence may occur.
- The physician must inform the protected person of his intent and comply with the protected person’s choice of whether the physician health officer will notify the contact. (PNAP)

Defines factors and circumstances necessary to create “significant risk” of contracting or transmitting HIV infection; these include:

- Sexual contact
- Needle sharing
- Gestation, birthing or breast feeding of an infant of an infected mother
- Transfusion and transplantation of untested body fluids

CLINICAL EDUCATION SUMMARY

Clinical Education courses are an essential component of the education of a Radiographer. Through these courses, students gain practical experience in patient care, radiographic technique formulation and positioning of anatomic parts. The courses consist of classroom lectures/discussions, laboratory demonstrations and practice as well as participation at affiliate hospitals. During the program, students will participate at two of the affiliate hospitals. Listed below are the hospitals and specialty rotations at which students may attend clinical courses:

Albany Medical Center Hospital, Albany
Albany Medical Center Pediatrics, Albany
Albany Memorial Hospital, Albany
Capital Region Orthopaedic Group, Albany
Columbia Memorial Hospital, Hudson
Ellis Healthcare, Schenectady
Glens Falls Hospital, Glens Falls
Kingston/Benedictine Hospitals, Kingston
Northern Dutchess Hospital
OrthoNY, LLC, Albany
Samaritan Hospital, Troy
Saratoga Hospital, Saratoga Springs
St. Peter's Hospital, Albany
Stratton VA Medical Center, Albany
Vassar Brothers Hospital, Poughkeepsie

Students begin the first semester of Clinical Education Course I with an orientation program. Topics discussed include basic terminology, patient and student safety, patient rights, HIPAA regulations, elementary radiation protection, infection control and Hudson Valley Community College's Radiologic Technology program policies. Many of these orientation sessions are scheduled in the Radiologic Technology lab so that students can gain skills in equipment manipulation, proper technique selection, practice radiographic exposures, image identification and radiographic image development. The goal of this orientation is to provide students with a basic understanding of patients and radiography so they may more readily adapt to the hospital. When the orientation is completed, students begin to attend the hospital two (2) days per week (Monday & Tuesday) for the remainder of the semester.

Clinical Education II requires the students continue to participate in the clinical education site for two (2) days per week (Monday & Tuesday) along with classroom lectures.

Clinical Education III is a summer session which begins after the final exam period in May and ends in mid-August. This course requires students to participate at the hospital affiliate for five (5) days per week (Monday through Friday) for eight (8) hour days. At the midpoint of this session, students are assigned a two-week vacation. Students will transition to their senior site after return from this vacation. The change of hospital provides the student with insight into a different hospital and gives the opportunity to learn new department protocols, utilize different radiographic equipment, and learn adaptation skills needed for future employment.

Clinical Education IV begins upon completion of the summer session. Once fall classes begin students participate at the clinical site three (3) days per week (Wednesday, Thursday, & Friday).

Clinical Education V begins after the end of the fall semester and students are required to attend clinic 40 hours a week until the start of the spring semester (excluding holidays). Once spring classes begin, students continue through the spring semester attending the hospital site three (3) days per week ((Wednesday, Thursday, & Friday). Students will graduate in May provided they meet all clinical education requirements and successfully pass a final competency evaluation. Failure to complete clinical education requirements may result in the student attending a second summer for remediation purposes.

Students that have completed all assessment requirements, have successfully performed their exit assessment, and

have obtained employment at an affiliate site are eligible to complete their remaining clinical time at their new place of employment. Any change in clinical placement must be approved by the Clinical Coordinator and the Department Chairperson and requires proof of employment.

**Exact dates of required clinical education attendance will be listed in the clinical calendar and provided to the students at the start of the fall semester.

While at the hospital sites, students are required to comply with hospital policies and procedures as well as federal and state laws, rules and regulations applicable to the regulation of radiographers and hospitals. Failure of a student to comply with these policies, procedures, laws, rules and regulations may result in a student's dismissal from the hospital site and Hudson Valley Community College.

*****Tuition is charged for all clinical education courses including Summer Clinical Education Course III. *****

CLINICAL EDUCATION RECORDS

In order to meet accreditation requirements and to insure that each student receives experience in a variety of clinical procedures, it is imperative that each student submit accurate records of clinical experiences. In completing these records, the student must conform to the Hudson Valley Community College Radiologic Technology Department standards both in terms of accuracy and submitting them when they are due. The student must log all cases in the TRAJECSYS system on a daily basis. While logging these cases, the student must document the level of participation they had in the case. "Level 1" is if the student was present but had no hands-on participation with the exam. "Level 3" should be used if the student takes an active role in completing a procedure; "Level 5" if the student completes the procedure independent of physical participation from a radiographer. The "Level 5" should only be used after the student has completed a successful assessment on that procedure. A general sampling of the day's work is not sufficient; the caseload must reflect every procedure (task) in which the student participated each day.

The student should note that any infraction of the above regulations, in regard to submitting the records within the designated time, will result in the student not being allowed to participate in the clinic. Each day missed in the clinic will result in the loss of a benefit day. When the benefit days are exhausted, each day that is missed must be made up. Serious disciplinary action can result from chronic abuse or fraudulent activity of any of the regulations relating to the student's clinical affiliation records. It is extremely important that the student cooperate fully in regard to timely and accurate records due to the fact that a fair evaluation of his/her proficiency in the clinical setting is dependent upon it.

Service Learning

Service learning integrates community service with academic instruction as it focuses on critical, reflective thinking and civic responsibility. Service learning programs involve students in organized community service that addresses local needs, while developing their academic skills, sense of civic responsibility, and commitment to the community.

Service Learning is a requirement of XRAY206 and XRAY216. The student is required to complete 20 hours of Service Learning within the fall and spring semesters. A complete overview of the service learning requirement and acceptable organizations will be covered during Clinical Education IV.

RADIOLOGIC TECHNOLOGY CLASSROOM AND LABORATORY REGULATIONS

The Radiologic Technology program at Hudson Valley Community College is equipped with two energized laboratories and state of the art x-ray equipment. Students are encouraged to utilize the laboratory to practice positioning skills, work with faculty to understand difficult material, and use the space as a study area if labs are not in session. Students are expected to follow the rules and regulations listed below and maintain a healthy, respectful environment while in the lab space.

- In accordance with Hudson Valley Community College policy, no children may attend classroom or laboratory sessions associated with the Radiologic Technology program.
- Tardiness to a laboratory session will not be tolerated and a student may be asked to leave if they show up late.
- A student will not be allowed to participate in an activated lab session without a personal dosimeter.
- The laboratory facilities can be used by the student during other than scheduled hours, providing he/she receives permission from a faculty member. The student is responsible for leaving the laboratory in the condition in which he or she found it and having it inspected by a faculty member upon completion.
- Cellular phones must be shut off or placed on vibration mode during all classes and laboratory sessions associated with the program.
- If a student has missed a lab session it is best that he or she make up the lab in the next scheduled session of that week. Permission must be granted by the lab instructor.
- It is the instructor's prerogative to dismiss a student from a lab session if the instructor determines the student is not prepared.
- The laboratory facility is to be cleaned after each session.
- The student is not to use any equipment for which he or she has not received operating instructions from a Radiologic Technology faculty member.
- Radiographic exposures are not allowed unless a HVCC faculty is present in the laboratory.

CURRICULUM OUTLINE

Students in the Radiologic Technology program must take twenty (20) credits of liberal arts and sciences courses and complete fifty-four (54)* credits of core Radiologic Technology courses. All of the core courses required for the A.A.S. degree are instructed by Hudson Valley Community College faculty. The didactic and lab components of all core courses are taught on the Hudson Valley Community College campus. The majority of all clinical education courses are offered at the hospital clinical sites.

Liberal Arts and Science Requirements

BIOL 270 Anatomy & Physiology I	4
BIOL 271 Anatomy & Physiology II	4
ENGL 101 English Composition I	3
ENGL 102 English Composition II	3
PSYC 101 General Psychology	3
MATH 110 (or higher)	3

Radiologic Technology Courses ****First Year****

XRAY 102 *Radiographic Positioning I	3
XRAY 104 *Image Prod & Eval I	3
XRAY 106 Clinical Education I	4
XRAY 112 *Radiographic Positioning II	3
XRAY 114 * Image Prod & Eval II	3
XRAY 116 Clinical Education II	5
XRAY 126 Clinical Education III	7
Total	28

Radiologic Technology Courses ****Second Year****

XRAY 200 *Radiological Health	3
XRAY 202 *Adv. Radiographic Procedure I	2
XRAY 206 *Clinical Education IV	6
XRAY 212 *Advanced Radiographic Procedures II	2
XRAY 216 *Clinical Education V	6
XRAY 240 *Cross-Sectional Imaging	3
Total	22

Program Grading Policy

All Radiologic Technology students are required to pass all the “*” courses with a “C” or better. Each student must maintain a minimum overall cumulative grade point average of 2.0. Students who fail to maintain the minimum GPA are subject to academic dismissal. Please refer to the college catalog for additional information.

Failure in any of the Radiologic Technology courses will terminate the student from the program.

SPINE Program

Each student’s academic history is evaluated upon admission to the Radiologic Technology program. Students identified as being “at-risk” will be enrolled in the program called SPINE - Support Providing Instruction

Needed to Excel. This program is offered to all students enrolled in the Radiologic Technology program but required of students that are identified. We will have scheduled meetings every week that identified students will be required to attend. Each course will have its own specific SPINE requirements that will be communicated after the start of the semester. This program will be mandatory unless the student tests out and no longer wishes to participate. In order to test out, a student must carry a 75 average in each individual course. Non-compliance with this policy will void the ability to re-enter the program should the student not meet the minimum grade requirement.

Student Advisement

All incoming Radiologic Technology program students will meet with the Medical Imaging Department Chairperson for advisement and course scheduling. Freshmen students will also meet with the Chairperson for advisement and the scheduling of spring semester courses. Summer courses will be automatically scheduled for all qualified students. Senior student advisement appointments will be offered to students who will need additional courses to meet graduation requirements or need to discuss additional academic topics.

At advisement appointments, clinical performance, course grades and transfer credit will be discussed.

Graduation Requirements

Students are responsible to successfully pass all of the courses in order to graduate. Students must have a minimum of a 2.0 cumulative index to graduate. An application for graduation must be obtained from and submitted to the Registrar's Office by April 1st of the year of graduation. The Registrar's Office is located in Guenther Hall, 629-4574.

Financial Aid

Each student is responsible for understanding all financial aid requirements and regulations and how they pertain to their circumstance. Students are advised to use the College catalog to familiarize themselves with all financial aid guidelines, particularly those that cover course repetition, satisfactory Academic Progress and unapproved electives. Students who receive financial aid in the form of grants, loans and scholarships should contact a financial aid advisor prior to adding or dropping a course before scheduling to repeat a course.

Financial Aid Office: Guenther Hall 629-7150.

RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE FOR RE-ENTRY

When an enrolled student fails to meet the “C” grade minimum in a Radiologic Technology core course or who fails a clinical education course, the student is dismissed from the program. Students who fail one Radiologic Technology course **may** be eligible for readmission into the program. Students who withdraw from a course may also be eligible for readmission into the program. If the student fails more than one Radiography core course, they will not be considered for readmission to the Radiologic Technology Program. The student must meet with the Medical Imaging Department Chairperson in order to complete a program re-entry contract. Recommendation for readmission will be based upon individual review by the Radiologic Technology Readmission Committee. Applicants for readmission must successfully complete the recommended courses as stipulated on the re-entry contract. The contract may stipulate the student repeat courses previously passed as well as the course that was failed or withdrawn from. **There is no guaranteed re-admission into the program.**

Students enrolled in Health Science programs who experience an interruption in their education must demonstrate the maintenance of academic and clinical practicum competency. In order to demonstrate continued competency, students seeking readmission to the program may be mandated to repeat previously passed academic and clinical/practicum education courses/competencies. Students who fail to demonstrate competence in the repeated courses/competencies may be dismissed from the program.

Once a student has been readmitted to the program, core curricular courses must be completed in term sequence without interruption. Any student who misses a term may not be permitted to continue in the program.

Please note: Students who are dismissed from Health Science Programs at Hudson Valley or other institutions due to inappropriate or dangerous clinical behavior and/or personal misconduct during patient interactions will not be allowed admission to any Hudson Valley Health Science program or Health Science course with a clinical component. A notation will be placed on the student’s academic transcript indicating the student was dismissed from the Radiologic Technology Program.

It is the student’s responsibility to determine financial aid status and eligibility.

Students who receive approval to re-enter will be subject to policies, procedures & curriculum which are current at the time of re-entry.

***The re-entry contract can be found in the appendix.**

Hudson Valley Community College - Academic Ethics Policy

It is every student's responsibility to become familiar with the standards of academic ethics at the College. Claims of ignorance, unintentional error, or academic or personal pressures do not excuse violations. This program takes academic dishonesty very seriously and any student found breaching this policy will be subject to severe penalties.

The full college policy including the College Judicial System and Process may be found in the College Catalog.

Academic Ethics

Hudson Valley Community College expects all members of the College community to conduct themselves in a manner befitting the tradition of scholarship, honor and integrity. They are expected to assist the College by reporting suspected violations of academic integrity to appropriate Faculty and/or other College Personnel. These guidelines define a context of values for individual and institutional decisions concerning academic integrity. It is every Student's responsibility to become familiar with the standards of academic ethics at the College. Claims of ignorance, unintentional error, or academic or personal pressures do not excuse violations.

Prohibited Conduct

The following is a list of the types of behavior that breach the College Code of Conduct for Academic Ethics guidelines and are therefore unacceptable. Commission of such acts, or attempts to commit them, fall under the term Academic Dishonesty and each is considered a serious offense, which carries severe penalties ranging from a warning to expulsion from the College. No set of guidelines can, of course, define all possible types or degrees of Academic Dishonesty; thus, the following descriptions should be understood as examples of infractions rather than an exhaustive list. Individual Faculty Members and the College Committee on Ethics and Conduct will continue to judge each case according to its particular circumstance. While Faculty Members are encouraged to distinguish between a Student's unintentional failure to follow the Code of Conduct for Academic Ethics and an intentional violation of that Code, particularly in cases of suspected plagiarism, the responsibility for the integrity of work ultimately lies with the Student.

7.1 Plagiarism.

A Student is guilty of plagiarism any time they attempt to obtain academic credit by presenting someone else's ideas as their own without appropriately documenting the original source. Appropriate documentation requires credit to the original source in a current manuscript style (e.g., MLA or APA) that is appropriate to the assignment and the discipline. While Faculty Members are encouraged to distinguish between a Student's unintentional failure to follow the current conventions of the appropriate manuscript style and a blatant act of plagiarism, the responsibility for the integrity of work ultimately lies with the Student. Examples of someone else's ideas may include the following:

- Language, words, phrases, symbols
- Style (written, oral or graphic presentation)
- Data, statistics, including laboratory assignments
- Evidence, research
- Computer programs, creative projects, artwork
- Intellectual ideas such as theories and lectures
- Web sites, digital forms of communication such as email, chat room, and instant messaging
- Photographs, video, audio

7.2 Cheating on Examinations.

A Student is guilty of cheating any time they attempt to give or receive unauthorized help before, during, or after any type of examination. Examples of unauthorized help include the following:

Collaboration of any sort during an examination (unless specifically approved by the instructor)
Collaboration before an examination (when such collaboration is specifically forbidden by the instructor)
The use of notes, books, or other aids (e.g., cell phones, computers or other electronic devices) during an examination (unless permitted by the instructor)
Arranging for another person to take an examination in one's place
Looking on someone else's examination during the examination period
The unauthorized discussion of test items during the examination period
The passing of any examination information to Students who have not yet taken the examination

There should be no conversation while any type of examination is in progress unless specifically authorized by the instructor.

7.3 Multiple Submission.

Submitting all or some portion of the same work for credit more than once, without the prior explicit consent of the instructor to whom the material is being (or has in the past been) submitted.

7.4 Forgery.

Imitating another person's signature or mark on academic or other official documents (e.g., the signing of a Faculty Member's name to a College document).

7.5 Impersonation.

Assuming someone else's identity and/or pretending to be someone else for the purpose of gaining academic credit.

7.6 Sabotage.

Destroying, damaging, or stealing of another's work or working materials (e.g., lab experiments, computer programs, term papers, or projects). Sabotage also includes logging into another's computer account to revise or delete any file or folder.

7.7 Unauthorized Collaboration.

Collaborating on projects, papers, or other academic exercises deemed inappropriate by the instructor(s). Although the usual Faculty assumption is that work submitted for credit is entirely one's own, standards on appropriate and inappropriate collaboration vary widely among individual Faculty. Faculty Members are expected, therefore, to establish explicit expectations and standards. Students who want to confer or collaborate with one another on work receiving academic credit should make certain of the instructor's expectations and standards.

7.8 Falsification.

Misrepresenting materials or fabricating information in an academic exercise or assignment, including laboratory assignments (e.g., the false or misleading citation of sources, the falsification of experiments or computer data, etc.). Falsification also includes falsely claiming to have completed work during an internship or apprenticeship.

7.9 Misuse of Library or Computer Resources.

Removing uncharged materials from the Library Building, defacing or damaging materials, intentionally displacing or hoarding materials within the Library Building for one's unauthorized private use, or other abuse of reserve-book privileges. Or, without authorization, using the College's or another person's computer accounts, codes, passwords, or facilities; damaging computer equipment; or interfering with the operation of the computer system of the College. The College and Information Technology Services have established specific rules governing the use of computing facilities, which appear under Computer Ethics.

Grievance Policy – Reporting a Grievance to the JRCERT

Students have the right to submit allegations against a JRCERT-accredited program if there is reason to believe that the program has acted contrary to JRCERT accreditation standards or that conditions at the program appear to jeopardize the quality of instruction or the general welfare of its students.

Contact of the JRCERT should not be a step in the formal institutional/program grievance procedure. The individual must first attempt to resolve the complaint directly with institution/program officials by following the grievance procedures provided by the institution/program. If the individual is unable to resolve the complaint with institution/program officials or believes that the concerns have not been properly addressed, he or she may submit allegations of non-compliance directly to the JRCERT at:

20 N. Wacker Drive Suite 2850

Chicago, IL 60606-3182

Phone: (312) 704-5300

Fax: (312) 704-5304

www.jrcert.org

Clinical Sites & Contact Information

Clinical Site / Address	Site Supervisor / Contact Info
Albany Medical Center-MC 113 Department of Medical Radiology New Scotland Avenue Albany, NY 12208	Staci Arana-Gregory, RT E-Mail: aranags@amc.edu Phone: 518-262-4409 South. Clinical: 518-262-1244 Pediatric Rotation: 518-262-3949 ER: 518-262-3442
Albany Memorial Hospital Medical Imaging Department 600 Northern Blvd. Albany, NY 12204	Jill Eistertz, RT E-Mail: jmeister@yahoo.com Phone: 518-471-3280
Capital Region Orthopedic Group 1367 Washington Ave., Suite 200 Albany, NY 12206 XRAY, 3 rd Fl.	Jen Ockenholt RT E-mail: jockenholt@caportho.com Phone: 518-292-2739 Spine Center: 518-292-2605

Columbia Memorial Hospital
Medical Imaging Department
71 Prospect Avenue
Hudson, NY 12534

Macy Williams, RT
E-mail: mkwilliams@cmh-net.org
Pit Area: 518-828-8508

Ellis Hospital
Radiology Department
1101 Nott Street
Schenectady, NY 12308

Nina Racana
E-Mail: twobytwo618@hotmail.com
Phone: 518-243-4490

East Greenbush Imaging
Walmart Plaza Route 4
Rensselaer, NY 12144

Shannon Didziulis
E-mail: Shannon.didziulis@sphp.com
Phone: 518-880-6300

Glens Falls Hospital
Radiology Department
100 Part Street
Glens Falls, NY 12801

Jennifer Reihl, RT
E-Mail: btrfly1279@yahoo.com
Phone: 518-926-1000

Kingston Hospital
Medical Imaging Department
396 Broadway
Kingston, NY 12401

Melanie Piotti, RT
E-Mail: mgiasso@msn.com
Phone: 845-347-2492
Cell: 845-853-9319

Northern Dutchess Hospital
6511 Springbrook Avenue
Rhinebeck, NY 12572

Justine Valenti, RT
E-Mail: Justine.valenti@nuvancehealth.org
Phone: 845-871-3401

NHMP Imaging Center
Kingston Medical Mall
1240 Ulster ave / Kingston NY 12401

Joe Gallivan, RT
E-Mail: Joseph.gallivan@nuvancehealth.org
Phone: 845-443-8270 ext. 57383

Saratoga Hospital
Radiology Department
211 Church Street
Saratoga Springs,, NY 12866

Jessica LaPoint, RT
E-Mail: jlapoint@saratogahospital.org
Phone: 518-583-8763
Cell: 518-232-4334

Wilton Medical Arts 518-583-2255

St. Peter's Hospital
Medical Imaging Department
315 South Manning Blvd
Albany, NY 12202

Sara Houck, RT
E-Mail: sara.houck@sphp.com

Dominique Stumpf, RT
E-Mail: dbell02240@gmail.com

Phone: 518-525-1863

Vassar Brothers Medical Center
45 Reade Place
Poughkeepsie, NY 12601

Stephanie Kane, RT
E-mail: Stephanie.kane@nuvancehealth.org
Phone: 845-454-8500 ext. 72287

APPENDIX

CONFERENCE / SEMINAR

Application for Attendance

Criteria:

- Have a 2.0 index or better and not less than "C" in any current course.
- Provide for your own transportation
- Provide Radiologic Technology office with copies of program brochure when submitting application. (College faculty may require attendance at particular seminar sessions).
- After attending conference/seminar, provide office with registration and an attendance verification form signed by the teacher of each session attended.
- Permission of Clinical Supervisor

Student Name _____

Clinical Hospital _____

Seminar Titles _____

Seminar Dates _____

Dates you will attend seminar _____

Instructor:

This student has been granted release time from their clinical obligation to attend this seminar.

HVCC Faculty Signature

Date

Clinical Supervisor Signature

Date

Pregnancy Form for Student Radiographers

On ____/____/____ I met with the Radiologic Technology Program Director who explained to me the effects of ionizing radiation to the fetus/embryo and of the proper radiation safety protocols which must be followed during my pregnancy.

I understand my options and have decided to:

- Immediate withdrawal from the program for health reasons* or
- Continued enrollment status without modification or
- Continued enrollment status with modification

*A student that withdraws from the program may apply for readmission; however, readmission is dependent upon the

availability of clinical space and academic standing.

Student Name

Date

Department Chairperson

Date

Radiation Safety Officer

Date

RADIOLOGIC TECHNOLOGY TECHNICAL STANDARD FORM

Are you able to perform all of the Technical Standards identified in this document with or without reasonable accommodations?

Yes ____ No ____

Comments: _____

I have read, understand, and believe that I will be able to meet the Radiologic Technology program Technical Standards.

Print or process name

Signature

Date

If you do have a disability or related special needs and require accommodations to perform the Technical Standards, please contact the:

Center for Access and Assistive Technology

(518) 629-7154

T.D.D. (518) 629-7596

Fax: (518) 629-4831

Please note all information regarding your disability is kept confidential

***RADIOLOGIC TECHNOLOGY PROGRAM
RE-ENTRY CONTRACT***

Student Name: _____

Course(s) Failed: _____

Courses Mandated to Pass for Re-Entry:

Please note: Any students re-admitted will automatically be enrolled in the SPINE program.

I _____ understand that the above listed course(s) must be successfully passed in order to gain re-entry into the Radiologic Technology program. I have met with the

Medical Imaging Department Chairperson to discuss this re-entry process.

Please attach a narrative on a separate sheet with the following information:

- Why do you feel you were unsuccessful on your first attempt?
- What changes will you make to ensure you will be successful in the Radiologic Technology program?
- Any other information you would like the committee to take into consideration when considering your re-entry.

Student Signature

Date

Department Chairperson Signature

Date

Committee Decision - Y Approved Y Not Approved

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ARRT STANDARDS OF ETHICS

Last Revised: September 1, 2020

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PREAMBLE

The *Standards of Ethics* of The American Registry of Radiologic Technologists (ARRT) shall apply solely to persons holding certificates from ARRT that are either currently certified and registered by ARRT or that were formerly certified and registered by ARRT (collectively, "Certificate Holders"), and to persons applying for certification and registration by ARRT in order to become Certificate Holders ("Candidates"). Radiologic Technology is an umbrella term that is inclusive of the disciplines of radiography, nuclear medicine technology, radiation therapy, cardiovascular-interventional radiography, mammography, computed tomography, magnetic resonance imaging, quality management, sonography, bone densitometry, vascular sonography, cardiac-interventional radiography, vascular-interventional radiography, breast sonography, and radiologist assistant. The *Standards of Ethics* are intended to be consistent with the Mission Statement of ARRT, and to promote the goals set forth in the Mission Statement.

STATEMENT OF PURPOSE

The purpose of the ethics requirements is to identify individuals who have internalized a set of professional values that cause one to act in the best interests of patients. This internalization of professional values and the resulting behavior is one element of ARRT's definition of what it means to be qualified. Exhibiting certain behaviors as documented in the *Standards of Ethics* is evidence of the possible lack of appropriate professional values.

The *Standards of Ethics* provides proactive guidance on what it means to be qualified and to motivate and promote a culture of ethical behavior within the profession. The ethics requirements support ARRT's mission of promoting high standards of patient care by removing or restricting the use of the credential by those who exhibit behavior inconsistent with the requirements.

A. CODE OF ETHICS

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

1. The radiologic technologist acts in a professional manner, responds to patient needs, and supports colleagues and associates in providing quality patient care.
2. The radiologic technologist acts to advance the principal objective of the profession to provide services to humanity with full respect for the dignity of mankind.
3. The radiologic technologist delivers patient care and service unrestricted by the concerns of personal attributes or the nature of the disease or illness, and without discrimination on the basis of race, color, creed, religion, national origin, sex, marital status, status with regard to public assistance, familial status, disability, sexual orientation, gender identity, veteran status, age, or any other legally protected basis.
4. The radiologic technologist practices technology founded upon theoretical knowledge and concepts, uses equipment and accessories consistent with the purposes for which they were designed, and employs procedures and techniques appropriately.
5. The radiologic technologist assesses situations; exercises care, discretion, and judgment; assumes responsibility for professional decisions; and acts in the best interest of the patient.
6. The radiologic technologist acts as an agent through observation and communication to obtain pertinent information for the physician to aid in the diagnosis and treatment of the patient and recognizes that interpretation and diagnosis are outside the scope of practice for the profession.
7. The radiologic technologist uses equipment and accessories, employs techniques and procedures, performs services in accordance with an accepted standard of practice, and demonstrates expertise in minimizing radiation exposure to the patient, self, and other members of the healthcare team.
8. The radiologic technologist practices ethical conduct appropriate to the profession and protects the patient's right to quality radiologic technology care.
9. The radiologic technologist respects confidences entrusted in the course of professional practice, respects the patient's right to privacy, and reveals confidential information only as required by law or to protect the welfare of the individual or the community.
10. The radiologic technologist continually strives to improve knowledge and skills by participating in continuing education and professional activities, sharing knowledge with colleagues, and investigating new aspects of professional practice.
11. The radiologic technologist refrains from the use of illegal drugs and/or any legally controlled substances which result in impairment of professional judgment and/or ability to practice radiologic technology with reasonable skill and safety to patients.

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 reinstate certification and registration as issued by ARRT; employment in radiologic technology; or a state permit, license, or registration certificate to practice 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 (SSA) that are part of the *Continuing Qualifications Requirements* (CQR) process. Conduct that subverts or attempts to subvert ARRT's examination and/or CQR SSA process includes, but is not limited to: (i) disclosing examination and/or CQR SSA information using language that is substantially similar to that used in questions and/or answers from ARRT examinations and/or CQR SSA when such information is gained as a direct result of having been an examinee or a participant in a CQR SSA 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 SSA information that uses language that is substantially similar to that used in questions and/or answers on ARRT examinations or CQR SSA 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 SSA 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 SSA participants, or any other individual for the purpose of reconstructing any portion of examination and/or CQR SSA materials; and/or

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

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

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

(ix) communicating with another individual during administration of the examination or CQR SSA for the purpose of giving or receiving help in answering examination or CQR SSA questions, copying another Candidate's or CQR participant's answers, permitting another Candidate or a CQR participant to copy one's answers, or possessing or otherwise having access to unauthorized materials including, but not limited to, notes, books, mobile devices, computers and/or tablets during administration of the examination or CQR SSA; and/or

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

(xi) using any other means that potentially alters the results of the examination or CQR SSA 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 (CE)*, 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

6. 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, if no such rule exists, to the minimal standards of acceptable and prevailing radiologic technology practice;

(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.

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; and/or

(iii) military courts-martial related to any offense identified in these Rules of Ethics; and/or

(iv) required sex offender registration.

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 (commission). 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 Committee's Chair to serve for a term of two years 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 Chief Executive Officer of ARRT shall have the power to investigate allegations regarding the possible settlement of an alleged violation of the Rules of Ethics. The Chief Executive Officer may be assisted by staff members and/or legal counsel of ARRT. The Chief Executive Officer 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 Chief Executive Officer 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 Chief Executive Officer. 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 Chief Executive Officer 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 additional requirements that need to be met before the ethics file can be closed (e.g., court, regulatory authority and/or Ethics Committee conditions).

(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) 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 6.05 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*.

STUDENT POLICY HANDBOOK AGREEMENT

I have read the **“Radiologic Technology Program Policy Handbook”** and these policies/guidelines were also explained verbally by the program director and/or Clinical Coordinator or program faculty. I agree to adhere to all policies contained within this document and understand the consequences of failing to comply with the policies described within the Handbook may lead to disciplinary action or dismissal from the program.

Confidentiality Agreement:

The undersigned student of the Hudson Valley Community College Radiology Program hereby agrees that during their time in the program, he/she will not disclose any information or data concerning any patient he/she may interact with at the clinical sites. Further, upon end of enrollment in the program, he/she will

continue to treat as private and privileged any and all information or data concerning any patient at clinical sites and will not release any such information to any person, firm, corporation or any other entity.

Print Name

H00 _____
HVCC ID#

Signature

Date