



SCHOOL OF RADIOLOGIC TECHNOLOGY

Catalog

**ACMH SCHOOL OF RADIOLOGIC TECHNOLOGY
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Updated – 8/17

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Policy Revision Statement	Policy Number: 1
Original Date: 10/91	Revision Date: 6/13
Last Review Date: 6/17	

**THE POLICIES IN THIS MANUAL ARE UNDER CONSTANT
EVALUATION AND REVISION.
POLICIES ARE SUBJECT TO CHANGE
WHEN DETERMINED APPROPRIATE BY PROGRAM
OFFICIALS.**

**ARMSTRONG COUNTY MEMORIAL HOSPITAL
SCHOOL OF RADIOLOGIC TECHNOLOGY**

Program Officials

1. Educational Coordinator – Glenna Kanish, M.A.Ed., R.T.R.M.
2. Clinical Coordinator – Jenny Sturgeon, B.S., R.T.R.
3. Clinical Evaluators -
Barbara Reesman, R.T.R.
Jennifer Lockhart, R.T.R.
Michelle Schrecengost, R.T.R.
Tracy Reed, R.T.R.
Dona Campbell, R.T.R.
Pamela Crissman, R.T.R.M.

School Advisors

1. Vice President of Clinical Services – Mona Rupert, R.R.T., M.B.A.
2. Vice President of Human Resources – Anne Remaley, B.S., H.R.M.

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: ACMH Mission and Vision Statement	Policy Number: 2
Original Date: 1/09	Revision Date: 6/17
Last Review Date: 6/17	



MISSION STATEMENT

ACMH is committed to improving the emotional and physical health of its patients through superior clinical care and the compassionate management of illness and disability.

VISION STATEMENT

- We will be a leader in promoting responsible and healthy behavior in our community.
- We will provide compassionate and exemplary inpatient and outpatient services for our patients.
- We will be an employer of choice by encouraging personal growth and recognizing both individual and team accomplishments.
- We will provide value to our medical community by providing innovative, cost-effective and high quality services for our medical providers and their patients.
- We will invest or partner in new products that will enhance accessibility to services and improve healthcare outcomes.
- We will provide a safe and secure environment for staff, patients, and visitors alike.

**ARMSTRONG COUNTY MEMORIAL HOSPITAL
SCHOOL OF RADIOLOGIC TECHNOLOGY
POLICY AND PROCEDURE MANUAL**

Policy Title: ACMH Imaging Services Mission Statement	Policy Number: 3
Original Date: 1/09	Revision Date:
Last Review Date: 6/17	

The mission of the Department of Imaging Services is to:

- Respond to patient needs and support colleagues and associates in providing quality patient care in an ethical and professional manner.
- Provide state-of-the-art technology in a timely and cost-effective manner.
- Provide information and educate the patient and/or guardian as to the nature of any procedure to be performed to alleviate any apprehension.
- Utilize equipment and accessories, employ techniques and procedures, and perform services in accordance with accepted standards of practice.
- Respect confidences entrusted in the course of professional practice, respect the patient's right to privacy, and reveal confidential information only as required by law to protect the welfare of the individual or the community.
- Insure that all regulatory guidelines will be strictly adhered to as to create a safe environment for all patients and medical team members.

**ARMSTRONG COUNTY MEMORIAL HOSPITAL
SCHOOL OF RADIOLOGIC TECHNOLOGY
POLICY AND PROCEDURE MANUAL**

Policy Title: ACMH School of Radiologic Technology Mission Statement, Goals, and Outcomes	Policy Number: 4
Original Date: 1/09	Revision Date: 7/17
Last Review Date: 7/17	

The program's mission statement - **Consistent with the standards of ACMH, the School of Radiologic Technology is committed to improving the health of patients through compassion and clinical care. It is the mission of the program to provide the essential knowledge and skills to become compassionate, entry-level radiographers.**

In providing superior educational opportunities in the art and science of medical imaging, the goals of our program are to:

- ✓ **Students will employ clinical skills of an entry-level radiographer.**
Outcomes –
 - Students will employ proper radiation protection practices.
 - Students will use appropriate positioning skills.
 - Students will demonstrate proficiency in performing radiographic examinations.
- ✓ **Students will apply effective communication skills.**
Outcomes –
 - Students will illustrate proper written communication skills.
 - Students will demonstrate effective interpersonal communication skills in the clinical setting.
- ✓ **Students will develop critical thinking skills.**
Outcomes -
 - Students will modify the routine procedures to accommodate patient needs (i.e., pediatric, geriatric, trauma, altered state of consciousness, etc.)
 - Students will analyze radiographic images for diagnostic quality and describe how to amend, if warranted.
- ✓ **Students will develop commitment to professional responsibility.**
Outcomes -
 - Students will evaluate the importance of the professional development.
 - Students will employ professional behaviors in the clinical environment.
- ✓ **The program will assure the effectiveness of its educational offerings to the student radiographers and the communities it serves.**
Outcomes -
 - Students will pass the ARRT Registry examination on the first attempt within 6 months of graduation.
 - For those seeking employment, students will secure employment in medical imaging within 12 month of graduation.
 - Students will demonstrate to employers the qualities of an entry-level radiographer.
 - Students will evaluate their educational offerings to be effective in the development of an entry-level radiographer.
 - Students will complete the program in 24 months or within 150% of the stated program length.

The goals of the competency based program were designed to maximize the learning experience of each student. They were written with the idea of educating the best radiologic technologist possible. Our curriculum assumes the goals have been reached and possibly surpassed.

**ARMSTRONG COUNTY MEMORIAL HOSPITAL
SCHOOL OF RADIOLOGIC TECHNOLOGY
POLICY AND PROCEDURE MANUAL**

Policy Title: Nondiscrimination Policy

Policy Number: 74

Original Date: 6/90

Revision Date: 12/16, 7/17

Last Review Date: 7/17

The Armstrong County Memorial Hospital School of Radiologic Technology assumes the responsibility to treat applicants and students with respect and equality and without regard to race, color, sex, religion, age, national origin, sexual orientation, marital status, disability, or any other prohibited basis.

The Americans with Disabilities Act defines an individual with a disability as a person who:

- has a physical or mental impairment that substantially limits one or more of his/her major life activities such as seeing, hearing, speaking, walking, breathing, performing manual tasks, learning, caring for oneself and working
- has a record of such impairment
- is regarded as having such impairment

In accordance with the Americans with Disabilities Act, the ACMH School of Radiologic Technology has established a set of program technical standards relative to the program's curriculum. The standards are as follows:

- have good eyesight either naturally or through correction
- have the ability to hear instructions and verbal requests made by patients
- be physically able to stand and ambulate for extended periods of time
- be physically able to move and lift patients
- have a moderate degree of dexterity to manipulate radiographic equipment and the keyboard of a computer

These standards are not admissions criteria, they are standards; therefore, they are necessary for successful completion of the clinical portion of the program and the profession. These technical standards are also provided for informational purposes to better describe the typical requirements of the profession. ACMH School of Radiologic Technology will, upon request, make reasonable accommodations to the known physical and mental limitations of the student, unless it would impose an undue hardship on the hospital or hospital operation or compromise the safety of patients, students, or staff. Determination of the accommodations will be made on an individual basis as to whether or not an accommodation or modification can be reasonably made.

**ARMSTRONG COUNTY MEMORIAL HOSPITAL
SCHOOL OF RADIOLOGIC TECHNOLOGY
POLICY AND PROCEDURE MANUAL**

Policy Title: Class Outline	Policy Number: 5
Original Date: 6/07	Revision Date: 6/08, 6/09, 6/10, 6/11, 6/12, 1/13, 6/13, 5/14, 3/15, 6/15, 6/16, 6/17
Last Review Date: 6/17	

Starting Date: July 6, 2017
Graduation Date: June 19, 2019

Orientation to Radiography: Including Medical Ethics, Law, & Patient Care	80 Hours	First Year
Medical Terminology	120 Hours	First Year
Anatomy, Pathology, (Skeletal), & Radiographic Procedures	165 Hours	First Year
Special Procedures and Interventional Radiography	20 Hours	First Year
Imaging Equipment	25 Hours	First and Second Years
Human Structure, Function, Pathology and Radiographic Procedures	140 Hours	First and Second Years
Contrast Media and Pharmacology	20 Hours	Second Year
Radiographic Skull Positions	35 Hours	Second Year
Principles of Radiographic Exposure	70 Hours	Second Year
Introduction to Computer Literacy	5 Hours	Second Year
Radiation Physics	65 Hours	Second Year
Principles of Radiation Protection and Radiobiology	25 Hours	Second Year
Radiographic Image Processing and Evaluation	30 Hours	Second Year

**ARMSTRONG COUNTY MEMORIAL HOSPITAL
SCHOOL OF RADIOLOGIC TECHNOLOGY
POLICY AND PROCEDURE MANUAL**

Policy Title: Class Schedule	Policy Number: 6
Original Date: 6/07	Revision Date: 6/08, 5/09, 6/10, 6/12, 1/13, 6/13, 8/13, 5/14, 6/16, 6/17
Last Review Date: 6/17	

CLASS		TIME	YEAR	INSTRUCTOR
Orientation to Radiography including Medical Ethics, Law, and Patient Care		July - October 80 hours	First	Glenna Kanish
Medical Terminology		October - February 120 hours	First	Glenna Kanish
Skeletal Anatomy, Pathology, and Radiographic Positions		July - May 165 hours	First	Jenny Sturgeon
Special Procedures and Interventional Radiography		March – April 20 hours	First	Glenna Kanish
Human Structure, Function, Pathology and Radiographic Procedures		May of first year – May of second year 140 hours	First and Second	Glenna Kanish and Jenny Sturgeon
	Reproductive	August	Second	Glenna Kanish
	Endocrine	May	First	Glenna Kanish
	Cells, Tissues, and Skin	May	First	Jenny Sturgeon
	Nervous	November	Second	Jenny Sturgeon
	Digestive	July/August	Second	Jenny Sturgeon
	Urinary	October	Second	Glenna Kanish
	Circulatory	June/July	First and Second	Jenny Sturgeon
	Respiratory	November/December	Second	Glenna Kanish
Contrast Media and Pharmacology		September 20 hours	First	Jenny Sturgeon
Radiographic Skull Procedures		September 35 hours	Second	Glenna Kanish
Imaging Equipment		June/July 25 hours	First and Second	Glenna Kanish
Principles of Radiographic Exposure		January - February 70 hours	Second	Jenny Sturgeon
Introduction to Computer Literacy		November 5 hours	Second	Jenny Sturgeon
Radiation Physics		January - March 65 hours	Second	Glenna Kanish
Principles of Radiation Protection and Radiobiology		April - May 25 hours	Second	Jenny Sturgeon
Radiographic Image Processing and Evaluation		March - May 30 hours	Second	Glenna Kanish

**ARMSTRONG COUNTY MEMORIAL HOSPITAL
SCHOOL OF RADIOLOGIC TECHNOLOGY
POLICY AND PROCEDURE MANUAL**

Policy Title: Policy for Students Performing Radiographic Procedures	Policy Number: 7
Original Date: 10/91	Revision Date: 10/16
Last Review Date: 6/17	

Students shall perform all diagnostic procedures with direct supervision, until demonstrating competency in specified procedures. Direct supervision is defined as the supervision provided by a qualified radiographer who is present in the same room or location where the radiographic procedure is being performed. Direct supervision assures the safety of the patient and appropriate educational practices in which the qualified radiographer will

- Review the procedures in relationship to the student's achievement
- In accordance to student's knowledge, evaluate the condition of the patient.
- Be physically present in the same room or location during the performance of the procedure.
- Reviews and approves the procedure and/or image

After competency is achieved, students may perform procedures with indirect supervision, which also assures patient safety and proper educational practices. Indirect supervision is defined as that supervision provided by a qualified radiographer who is immediately available to assist students regardless of their level of competency. Immediately available is defined as the physical presence of a qualified radiographer in an adjacent room or location where the imaging procedure is being performed. This applies to all areas where ionizing radiation equipment is being used on patients.

In support of professional responsibility for provision of quality patient care and radiation protection, unsatisfactory radiographs will be repeated with the physical presence of a qualified radiographer, regardless of the student's level of competency. The qualified radiographer must approve the student's procedure prior to the repeat radiation exposure to the patient.

**ARMSTRONG COUNTY MEMORIAL HOSPITAL
SCHOOL OF RADIOLOGIC TECHNOLOGY
POLICY AND PROCEDURE MANUAL**

Policy Title: Working as a Professional	Policy Number: 8
Original Date: 9/88	Revision Date: 3/04, 6/09, 2/11, 5/14, 6/14, 6/15
Last Review Date: 6/17	

You are now a part of the professional environment of health care. Professionalism is “the skill, competence, or character expected of a member of a highly trained profession” (encarta.msn). “A health care provider or health care professional is an organization or person who delivers proper health care in a systemic way professionally to any individual in need of health care services” (wikipedia.org). It is essential that you look and act professional at all times.

There are specific standards for dress and grooming when developing a professional image. A patient’s first impression of you is influenced by your personal appearance. In a medical setting, healthcare professionals must set the tone for the interaction with patients and visitors. Health care professionals are constantly in contact with individuals who will assess them based on their communication, body language, and appearance.

A more in depth look of professionalism will be focused on in the Orientation to Radiography class.

The dress code policy (Policy 12) for the School of Radiologic Technology students is found on page 17 of this manual and page 19 of the student’s Policy and Procedure Manual.

**ARMSTRONG COUNTY MEMORIAL HOSPITAL
SCHOOL OF RADIOLOGIC TECHNOLOGY
POLICY AND PROCEDURE MANUAL**

Policy Title: Lab Fee/Tuition	Policy Number: 9
Original Date: 2/96	Revision Date: 5/97, 2/00, 5/04, 1/08, 10/12, 7/16, 8/16, 6/17
Last Review Date: 6/17	

The School of Radiologic Technology charges a lab/fee of \$5000.00 per year. The program's advisory board and the hospital's executive team determined this amount on October 2, 2012.

Options for paying the lab fee/tuition are available to the student each year. The deposit of \$250 to hold the student's position in the program following acceptance is subtracted from the first year's tuition.

The payment schedule and amounts are as follows:

- One payment of \$4750 - due June 15 – prior to the start of education
- Two payments
 - \$2250 – due June 15 – prior to the start of education
 - \$2500 – due January 15
- Four payments
 - \$1000 – due June 15 – prior to the start of education
 - \$1250 – due September 15
 - \$1250 – due January 15
 - \$1250 – due April 15

As a second year student, the initial payment towards the second year lab fee/tuition will be accepted any time after passing the first year comprehensive final until July 1. The payment schedule and amounts are as follows for the second year:

- One payment of \$5000 - due July 1
- Two payments
 - \$2500 – due July 1
 - \$2500 – due January 25
- Four payments
 - \$1250 – due July 1
 - \$1250 – due September 15
 - \$1250 – due January 15
 - \$1250 – due April 15

The student will be given adequate notice as a reminder of upcoming payments by program officials.

**ARMSTRONG COUNTY MEMORIAL HOSPITAL
SCHOOL OF RADIOLOGIC TECHNOLOGY
POLICY AND PROCEDURE MANUAL**

Policy Title: Program and Hospital Description	Policy Number: 10
Original Date: 1991	Revision Date: 5/95, 2/96, 9/02, 3/04, 6/09, 6/16, 10/16, 6/17
Last Review Date: 6/17	

The School of Radiologic Technology was established at Armstrong County Memorial Hospital in 1958. The Joint Review Committee on Education in Radiologic Technology (JRCERT) accredits the program. The School is maintained and conducted according to the “Standards” as adopted by the JRCERT. The program is subject to periodic accreditation evaluations for the expressed purpose of maintaining exemplary levels of professionalism and educational quality. The goals of the program were developed to maximize the learning experience of each student. They were written with the idea of educating the best radiologic technologist possible. They will be revised as situations dictate. Our program of study certifies that the goals have been reached and possibly surpassed.

The program is a twenty-four month certificate program designed to accommodate full time students. The JRCERT determines the program’s clinical capacity. Students will be admitted each July and graduation is held the third week of June two years later. The program includes scheduled weekly academic classes in addition to assigned clinical rotations through the various imaging modalities and specialty areas of ACMH and Armstrong Orthopedic Associates, located directly off the ACMH campus. The program is designed to present approximately 800 didactic hours and 1,920 clinical hours.

The Armstrong County Memorial Hospital School of Radiologic Technology assumes the responsibility to treat applicants and students with respect and equality and without regard to race, color, sex, religion, age, national origin, sexual orientation, marital status, disability or any other prohibited basis.

ACMH was founded in 1898 as a non-profit community hospital by a group of concerned citizens. The hospital is the only general care hospital located within Armstrong County and provides acute in-patient hospital care as well as out-patient and emergency care to area residents.

The hospital is licensed by the Pennsylvania Department of Health and also through Conditions of Participation with Medicare and is accredited by DNV LC Healthcare USA. The hospital is a medium sized acute care facility located in East Franklin Township and was dedicated in 1973. It is approximately five miles west of the borough of Kittanning at the intersection of the Allegheny Valley Expressway (Route 28) and Route 422 at the address of One Nolte Drive, Kittanning, Pennsylvania, 16201.

**ARMSTRONG COUNTY MEMORIAL HOSPITAL
SCHOOL OF RADIOLOGIC TECHNOLOGY
POLICY AND PROCEDURE MANUAL**

Policy Title: Class Descriptions	Policy Number: 11
Original Date: 1/98	Revision Date: 3/04, 6/11, 9/11, 6/12, 6/14, 6/16, 6/17
Last Review Date: 6/17	

ORIENTATION TO RADIOGRAPHY

Includes Medical Ethics, Patient Care, Medical Law, and CPR

This course will provide the student with an overview of radiography and its role in health care delivery. Student responsibilities will be outlined. Students will be oriented to academic and administrative structure, key departments and personnel and to the progression as a whole. The following principles will also be introduced: Basic Concepts of Radiographic Exposure; Basic Radiation Protection; Patient Care; and Medical Ethics and Law

MEDICAL TERMINOLOGY

This course will acquaint the student with medical terminology as applied to the specialty of radiology. This pertains to medical terms, prefixes, suffixes, and word roots, as well as radiographic terms and abbreviations. The student will also gain a basic knowledge of anatomy and physiology of the human body.

SKELETAL ANATOMY, PATHOLOGY, AND RADIOGRAPHIC PROCEDURES

This course will provide the student with names and locations of the bones of the body, along with the detailed structure of each. This will also include some variations and diseases affecting these bones. Instruction on the radiographic positions of the structures of the body will be provided so that the student is capable of positioning the patient for any procedure. Practical instruction and applications in the radiographic room will be provided.

SPECIAL PROCEDURES AND INTERVENTIONAL RADIOGRAPHY

The special procedures and interventional radiography course will cover the special procedures performed in the imaging department and interventional suite. The student will gain knowledge of the proper procedures, the equipment used, and indications for the examinations, the advantages, and possible complications.

HUMAN STRUCTURE, FUNCTION, PATHOLOGY, AND RADIOGRAPHIC PROCEDURES

This course will provide the student with the basic structure and function of the different systems of the body. Normal variations and pathology pertaining to each organ will be discussed. Instruction will be given on the different procedures performed to visualize each system. Clinical experience will compliment the classroom portion of this course.

CONTRAST MEDIA & PHARMACOLOGY

This course will cover the different types of contrast media used for radiographic procedures and examples of each. The student will gain knowledge of the properties of contrast media, the procedures they are used for, and possible reactions that could occur. Basic pharmacology will also be discussed

RADIOGRAPHIC SKULL PROCEDURES

This course will provide instruction in the art of positioning to visualize the different structures of the skull. This information is supplemented with practical instruction and application in the radiographic rooms.

IMAGING EQUIPMENT

This course is designed to introduce the student to different imaging systems and techniques used in medical imaging. The student will gain knowledge of the operations, applications, and uses of each of the specialized pieces of equipment that are being utilized in the fast growing field of medical imaging.

PRINCIPLES OF RADIOGRAPHIC EXPOSURE, INCLUDING IMAGE CRITIQUE AND QUALITY ASSURANCE

This course will provide the student with a basic understanding of x-ray production, including the different factors that govern and influence the production of the radiographic image. The principles and concepts of quality assurance will be introduced. Sessions on radiographic image evaluation will be provided to ensure the understanding of the technical aspects of producing an acceptable radiograph.

INTRODUCTION TO COMPUTER LITERACY

This course will introduce the student to fundamental principles of computer technology. Computer concepts and terminology will be discussed, along with computer applications in radiology, including digital radiography. Basic software components utilized for data management will also be introduced.

RADIATION PHYSICS

This course is designed to provide the student with the knowledge of the structure of matter, magnetism, and the basics of electricity. These will then in turn aid in understanding x-ray circuitry and production.

PRINCIPLES OF RADIATION PROTECTION AND RADIOBIOLOGY

This course will provide the student with an overview of the principles of radiation protection. Radiation protection responsibilities of the radiographer, for the patients, personnel, and the public are presented. Included in this unit is an overview of the interactions of radiation with the living systems and the effects that can occur.

RADIOGRAPHIC IMAGE PROCESSING AND EVALUATION

While transitions in radiographic imaging from film/screen to electronic imaging and processing occur, this course incorporates the make up of the equipment, purposes, and functions and the process performed to produce quality diagnostic medical images in both systems. Quality assurance and troubleshooting various imaging problems will be emphasized.

**ARMSTRONG COUNTY MEMORIAL HOSPITAL
SCHOOL OF RADIOLOGIC TECHNOLOGY
POLICY AND PROCEDURE MANUAL**

Policy Title: Student Dress Code

Policy Number: 12

Original Date: 4/94

Revision Date: 8/96, 12/96, 5/98, 7/99, 4/03, 4/08,
2/11, 4/11, 5/13, 6/15, 4/16, 6/16, 4/17

Last Review Date: 6/17

The following are the guidelines for the student radiologic technologist dress code:

1. Cranberry, hunter green, brown, or navy scrubs, which must be neat and clean at all times. Appropriate figured scrub tops may be worn. (Animal or people designs and solid white tops are not permitted).
2. All-white professional shoes and all-white leather or vinyl walking shoes, which must be neat and clean at all times. (No clogs, open-toed shoes or high-top tennis shoes are permitted).
3. White hose or plain white socks. (No sport socks).
4. **Plain** all white lab coat or white cardigan may be worn over scrubs. Cranberry, hunter green, brown, or navy lab coats or cardigans may also be worn over scrubs (colored lab coats and scrub pants colors must be the same). No hooded sweaters or sweatshirts or those with writing or graphics will be worn. ACMH logo is permitted on the approved attire.
5. Solid white turtlenecks or long sleeved solid white T-shirts may be worn under scrubs. Solid white T-shirts (without words or graphics) may be worn under scrubs. The sleeves and bottom of the T-shirt should not be visible beyond the length of the scrub top.
6. Highly fragranced colognes, lotions, or perfumes should be avoided. (These may be offensive to ill patients).
7. Nails must not be excessively long (as they could injure the patients and bacteria tend to grow underneath them).
8. A minimal amount of jewelry may be worn. No large rings, no dangling necklaces, bracelets, earrings (including plugs, gauges, or tapers) or oral or facial jewelry. These could cause injury to a patient as well as yourself. Visible body piercing must be limited to a reasonable amount, type, and size of ear piercing. Other piercings must be removed during educational hours.
9. Visible tattoos must be covered.
10. Headwear is prohibited.
11. Must be clean-shaven. Beards and mustaches are acceptable, but must be neatly trimmed.
12. Hair must be kept neat and clean at all times. Hair that touches the collar must be pulled off the collar. A scrub hat must be worn when assisting with a sterile procedure.
13. Good hygiene is required, including bathing and grooming. Clothing must be neat, clean, wrinkle free and in good repair.
14. The identification badge is to be worn at all times while at work, as it is a part of the uniform. The badge must be easily visible at eye level, with name and department facing outward. The ID badge is not to be defaced with stickers, pictures, etc. If an ID badge is lost or stolen, the student must notify Human Resources. There may be a charge to replace lost ID badges.
15. Radiation monitoring badges must also be worn in the appropriate location.

LOOKING PROFESSIONAL EXPRESSES PROFESSIONALISM!

You are expected to report to your assigned area clean, neat, and appropriately groomed and wearing appropriate attire. Noncompliance with the dress code will result in demerits and/or being sent home, which would be considered an unexcused absence. A 2% deduction from the dress code category of the quarterly performance appraisal grade will be made for each occurrence. Noncompliance with the dress code may result in disciplinary action.

**ARMSTRONG COUNTY MEMORIAL HOSPITAL
SCHOOL OF RADIOLOGIC TECHNOLOGY
POLICY AND PROCEDURE MANUAL**

Policy Title: Evaluation Periods

Policy Number: 13

Original Date: 5/91

Revision Date: 5/96, 10/96, 8/11, 6/14, 6/16

Last Review Date: 6/17

During the first three months of education, school officials will closely monitor the student's ability to learn new skills, process information both clinically and didactically, evaluate interpersonal skills, and the student's adjustment to the responsibilities and expectations of the program. During this time frame, students are also assessing their suitability to the program and profession as a radiographer. If no lack of aptitude is apparent, acknowledgement is given to the student for completion of the remainder of their education.

However, during the remaining portion of the student's education, the school reserves the right to request withdrawal at any time because of unsatisfactory clinical ability, conduct, or didactic achievement.

Individual student evaluations occur in the privacy of the faculty office, at the following times.

1 month	12 months
3 months	15 months
6 months	18 months
9 months	24 months

These evaluations include a review of:

- Performance appraisals
- Clinical competencies obtained during the time frame
- Didactic and clinical grade averages
- Strengths and weaknesses of the student
- Any concerns that the student may be having
- Attendance

Evaluations and counseling sessions are not limited to these time frames. Students and faculty may request additional sessions when necessary. All evaluation and counseling sessions are confidential.

**ARMSTRONG COUNTY MEMORIAL HOSPITAL
SCHOOL OF RADIOLOGIC TECHNOLOGY
POLICY AND PROCEDURE MANUAL**

Policy Title: Refund Policy

Policy Number: 14

Original Date: 5/93

Revision Date: 5/95, 6/04, 6/13, 6/14, 8/15

Last Review Date: 6/17

In the event that a first time student at ACMH School of Radiologic Technology withdraws or is dismissed within the first 30 weeks (960 hours), a pro rata refund policy will be followed. This will be assessed according to the number of weeks the student has paid for and the number of weeks the student was enrolled in the program.

**ARMSTRONG COUNTY MEMORIAL HOSPITAL
SCHOOL OF RADIOLOGIC TECHNOLOGY
POLICY AND PROCEDURE MANUAL**

Policy Title: General Policies	Policy Number: 15
Original Date: 5/97	Revision Date: 6/98, 11/01, 5/02, 1/03, 5/03, 6/09, 6/13, 6/15. 6/16, 6/17
Last Review Date: 6/17	

- A. Except in emergencies, personal telephone calls shall not be made from or received in the department. Guidelines for the use of cellular phones (portable electronic communication devices – PECD) are found in the Portable Electronic Communication Device Policy (Policy #55).
- B. Eating is permitted in designated areas only.
- C. All ACMH facilities are tobacco free.
- D. Students must have their own health care coverage. A copy of the current insurance card must be made available to school officials to be kept on file. If an injury occurs in the hospital during educational hours, the student will be referred to the employee health nurse (or to the emergency room if the employee health nurse is not one site). The nurse will then decide if the student should be seen in the emergency room. The expense of any medical care is the student’s responsibility. Personal injuries, no matter how minor, must be reported immediately and on proper forms to the school officials.
- E. It is required that two disaster drills be conducted each year. Students on duty during these drills will take part in these rehearsals in preparation for any real disaster in which our hospital might unexpectedly receive a large number of sick or injured patients. Students will be informed of the imaging services department’s procedure for disaster drills. Students are also instructed during the Orientation to Radiography course on the various drills that may be conducted during their education.
- F. Students of the hospital are prohibited from soliciting for any purpose or distributing any materials or literature on the hospital premises. Violation of the above policy by a student will subject the student to disciplinary action.
- G. Every effort is made to see that you are provided with safe working conditions. Technologists and students are responsible for the safety and well being of each patient. We ask that you be alert always to any hazardous conditions and report the condition immediately to the supervisory personnel.
- H. ACMH requires that all entering students must have the following screenings done before the starting date: mantoux, rubeolla, rubella, hepatitis B antibodies, and varicella, at no charge to the student. Any student not immune to rubeolla, rubella, varicella, or hepatitis B, with his/her permission, will be vaccinated at the beginning of the program. The flu shots are mandatory unless restricted by a health commission.
- I. Lockers are provided to students. It is suggested that a lock be used on the locker. The hospital is not responsible for the loss of any articles or valuables stored in lockers.
- J. One set of right and left markers will be given to each student at the beginning of their education. The student is responsible for purchasing any additional sets if the original set is lost or misplaced.

K. The student must report any change in name, address, or phone number to the program officials for maintenance of accurate records.

L. The program does not object, if the student finds it necessary to obtain employment in addition to the student’s clinical and didactic assignments. It is the expectation of the program that the employment does not interfere with the student’s clinical or didactic performance. If a student becomes employed by ACMH during their education, the student will be considered an ACMH employee and follow employee policies and procedures during their scheduled shifts as an employee. If the student becomes injured while engaged in other employment, our hospital is not responsible for the payment of any medical bills or hospitalization as a result of this injury.

M. If a student decides to terminate their schooling, the student is required to notify the school officials immediately. A written statement of termination must be signed and dated to be placed in the student’s permanent file.

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Clinical Rotation	Policy Number: 16
Original Date: 3/91	Revision Date: 5/96, 10/96, 6/08, 5/29/02, 1/03, 3/04, 7/04, 2/05, 6/08, 6/09, 6/10, 6/11, 11/11, 6/12, 5/14, 6/15, 6/17
Last Review Date: 6/17	

Students are assigned to the clinical area within the first week of education after a brief orientation. The student begins with observation of equipment operation and execution of examinations and procedures. However, the student is permitted to assist in the moving of patients, preparing the room, and changing image receptors. The student’s knowledge and understanding should be enhanced through day to day observation and participation. Performance Appraisal Evaluations may be obtained weekly with a maximum of two per week.

Equitable clinical assignments are scheduled for all students during the two year educational process. Students are scheduled primarily Monday through Friday daylight shift. In order to enhance the students’ critical thinking skills and develop a sense of responsibility, there will be minimal weekend and evening shift assignments.

Eight weeks of evenings (1:00 to 9:30 p.m.) will be assigned during the second year on Mondays, Wednesdays, and Fridays when the student is in the clinical area. The first rotations will start the last week of June or toward the beginning of July (a maximum of two students per week is permissible but only one student may be scheduled).

Two full daylight weekends (7 a.m. to 3:30 p.m.) will be assigned during the second year to familiarize the student with the atmosphere of weekends.

1. The first rotation will start following the Labor Day holiday (one student per weekend).
2. The second rotation will start during the month of February (one student per weekend).

This procedure acquaints the students with shift rotation and strengthens the skills needed to become a reliable and qualified technologist familiar with the various shifts of the workforce. These rotations allow the student to gain more self-confidence and knowledge in organizing the unscheduled patient workload, giving consideration to patient priorities and procedure time required.

Students are rotated through the radiography and fluoroscopy rooms. There is a registered technologist assigned to every room and the student is under the supervision of this technologist during their clinical rotation. As images are taken, the technologist and the student examine the radiographic images. An unacceptable radiograph is repeated after the student and technologist review it and the technologist has identified to the student why it is an undesirable image. The technologist must be in the room for any repeat radiographs the student must take.

Students are scheduled in a particular room for several days at a time. This gives the student an opportunity to become familiar and comprehend the equipment and procedures performed in each of the rooms during several consecutive assignments.

The student is assigned to the radiographic and fluoroscopic rooms, interventional suite, operating room, and portable radiography cases throughout the entire educational process. There is an assignment of three full days within one week to the Imaging Services office early on in the first year.

Students have three one-week rotations through computed tomography during the first year of education and three consecutive weeks during the second year of education. During the second year, students are scheduled in the following specialty areas for a week's rotation. These areas include film room, nuclear medicine, diagnostic medical sonography, magnetic resonance imaging, mammography, and radiation oncology. All room rotations and specialty area assignments have objectives that must be completed and submitted.

Students will also rotate through Armstrong Orthopedics Associates, a JRCERT approved clinical setting. The rotations will begin during the first year following winter break and will continue till winter break of the second year of education.

The mobile Positron Emission Tomography (PET) scanner and pain clinic are considered clinical observation sites. To acquaint the student with these areas, the student will be assigned to PET for one day and pain clinic for two days. As these are considered observation sites, the student will be there to observe only and will not have direct patient contact. Student summaries are required for these clinical observation sites. (Summary guidelines are listed on page 139)

Second year students are assigned a rotation through the cardiopulmonary department in order to learn how to perform EKGs. This rotation consists of 2 mornings from 6:30 am to 12:00 pm. Students will also perform 2 hours in the afternoon in the Emergency Department triage area following one of their EKG assignments. This time allows the student to observe and apply their knowledge of how to obtain vital signs on patients in the clinical setting. Objective sheets are to be completed and submitted for both of these areas.

Schedules are subject to change with notification.

**ARMSTRONG COUNTY MEMORIAL HOSPITAL
SCHOOL OF RADIOLOGIC TECHNOLOGY
POLICY AND PROCEDURE MANUAL**

Policy Title: Personal Time	Policy Number: 17
Original Date: 6/91	Revision Date: 10/91, 5/98, 5/99, 6/00, 3/03, 6/11, 7/11, 7/12, 6/13, 10/13, 5/14, 6/14, 6/15, 6/16, 3/17, 6/17
Last Review Date: 6/17	

Personal time (combined sick leave and vacation time) totals 56 hours per year. A minimum of 15 minutes (.25) of personal time will be granted. Requests for personal time should be documented on the Request for Personal Time form (Form #48) for approval. Students are to have their established meal break at the appropriate time and not to remain in clinical assignment to deduct this time from the end of their assigned shift in order to use less personal time. Special circumstances may be considered with approval by program officials.

When an absence occurs, it is expected that the classroom assignment be made up. Any personal hours used in excess of the 56 hours will require a doctor's excuse. Any personal hours taken in excess must be voluntarily made up. This make-up time is limited to the daylight and evening shifts and will not exceed a 40 hour week or a ten hour clinical day. A doctor's excuse for any sick time may be required of the students at the discretion of school officials.

All notifications for absence or tardiness are made by way of the program official's office number (724) 543-8206. When a student is unable to report for his/her assigned shift, it is the individual student's responsibility to contact the school officials prior to the beginning of the shift and speak to a school official to report an absence or tardiness. Students must state the reason for this absence or tardiness (i.e. ill, flat tire, vacation time, etc.), as this is documented. If a school official is unavailable at the time of notification, the student should leave a message on the school office's voice mail, reporting the absence and stating the reason. During weekend assignments, students are to notify the technologist in the Imaging Services department at (724) 543-8132, who will then inform school officials.

Any illness requiring hospitalization will not be deducted from the 56 hours, with a maximum of five days (clinical or didactic) per year. Hospitalization or treatment requiring more than five scheduled days (clinical or didactic) will be considered a leave of absence.

Students who become ill during clinical or didactic education may request to leave or be sent home, depending on the circumstances. The time the student is not in attendance, in this case, will be documented as sick hours. The remaining scheduled hours of the clinical shift not completed or hours of didactic instruction not completed will be deducted from the personal hours.

All personal time must be used by a specified date each year. Personal time for a first year student is issued for the time frame of the first day of education through the Friday prior to graduation. Graduation is the third Wednesday of June. The new allotment of 56 hours of personal time will be granted the following Monday of graduation week. For second year students, all compensatory time and personal time is to be used prior to the week of graduation. Students cannot transfer personal hours to another student or to the second year of education.

A winter break will be given to all students during the weeks of Christmas and New Year's Day. These weeks are December 25 - 29, 2017 and January 1 - 5, 2018. Clinical and didactic education will resume Monday, January 8, 2018.

First year students will have a spring break the week before Memorial Day. Second year students will have a summer break the second full week of August. During these weeks, there will be no scheduled classes. Any other days used as vacation days will be scheduled upon approval of the school officials.

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Daylight, and Shift Differential and Holiday Assignments	Policy Number: 18
Original Date: 4/91	Revision Date: 10/91, 6/92, 5/96, 6/98, 6/99, 12/01, 5/02, 1/03, 5/05, 6/08, 4/12, 7/12, 10/13, 6/14, 6/15, 6/17, 7/17
Last Review Date: 7/17	

The students follow a two week rotational schedule. The first and second year students have specific class and clinical days. The chart below indicates the class and clinical days during this two week rotation for the first and second year students.

Week One – First Year Students				
Monday	Tuesday	Wednesday	Thursday	Friday
<u>Class</u>	<u>Clinical</u>	<u>Class</u>	<u>Clinical</u>	<u>Class</u>
Follow Class Schedule	Follow Clinical Schedule	Follow Class Schedule	Follow Clinical Schedule	Follow Class Schedule
Week Two – First Year Students				
<u>Class</u>	<u>Clinical</u>	<u>Class</u>	<u>Clinical</u>	<u>Clinical</u>
Follow Class Schedule	Follow Clinical Schedule	Follow Class Schedule	Follow Clinical Schedule	Follow Clinical Schedule

Week One – Second Year Students				
Monday	Tuesday	Wednesday	Thursday	Friday
<u>Clinical</u>	<u>Class</u>	<u>Clinical</u>	<u>Class</u>	<u>Clinical</u>
Follow Clinical Schedule	Follow Class Schedule	Follow Clinical Schedule	Follow Class Schedule	Follow Clinical Schedule
Week Two – Second Year Students				
<u>Clinical</u>	<u>Class</u>	<u>Clinical</u>	<u>Class</u>	<u>Class</u>
Follow Clinical Schedule	Follow Class Schedule	Follow Clinical Schedule	Follow Class Schedule	Follow Class Schedule

The specific clinical and didactic schedules are posted in advance. The clinical schedule indicates room assignments and times of the clinical shift assignments. Each instructor provides a classroom schedule indicating the times of instruction and material covered during each class period. The students are also given a monthly master schedule. This calendar indicates class and clinical assignments for both classes and both instructors.

As part of their clinical education, students will obtain experience during various daylight and evening assignments. Students are to arrive in the Imaging Services department promptly for all designated shifts. The student will report to his/her assigned room or to class. Students are provided with clinical and didactic schedules in advance. The student is under the supervision of a registered technologist during all assigned clinical shifts. The student schedule is posted at least monthly, in advance.

DAYLIGHT ASSIGNMENTS:

7:00 a.m. to 3:30 p.m.

8:00 a.m. to 4:30 p.m.

10:00 a.m. to 6:30 p.m.

EVENING ASSIGNMENT

1:00 p.m. to 9:30 p.m.

The clinical objectives for the daylight shift are as follows:

DAYLIGHT ASSIGNMENTS:

- A. The student will participate in the procedures performed during the day.
(This participation moves from a demonstration mode of observation to a practice mode of assisting the radiologic technologist. The student gradually moves into a competency level by gaining experience. This procedure is outlined on page 57 in Policy 37 – Clinical Education and page 72 of the student’s Policy and Procedure Manual).
- B. The student will help prepare the room and equipment for the procedures of the day.
- C. The student will practice proper medical asepsis techniques and follow standard precautions at all times.
- D. The student will communicate with patients in a professional manner.
- E. The student will recognize the physical and mental status of the patient to assist the patient in being as comfortable as possible.
- F. The student will follow directions from instructional staff, technologists, supervisors, and physicians.
- G. The student will integrate classroom knowledge into the clinical setting.

EVENING AND WEEKEND ASSIGNMENTS

- A. Along with the daylight objectives the student will gain experience and apply knowledge when dealing with the unscheduled/emergency patient.

- B. The student will demonstrate independent judgment in organizing and prioritizing patient procedures.
- C. The student will assist and perform trauma procedures with little or no assistance.
- D. The student will choose the best positioning options and sequences in order to obtain quality images when modification of procedures is required.
- E. The student will select the appropriate equipment and image receptor maneuvers based on the patient limitation.
- F. The student will demonstrate speed and efficiency in handling emergency situations.
- G. The student will critique radiographs (under the supervision of a technologist) to determine if the images are diagnostically acceptable.

These assignments help to develop a technologist who can demonstrate problem solving skills/abilities that are necessary in order to adapt to the changing and challenging health profession. A total of 4% (84.5 hours) of the clinical hours during the second year will be spent in evening and weekend assignments. The student to staff ratio will be 1:1 during these assignments. Students may be assessed during these assignments.

Students will be scheduled off on all holidays recognized by the hospital. These include:

- | | |
|-------------------------|-----------------|
| 1. NEW YEAR’S DAY | 4. LABOR DAY |
| 2. MEMORIAL DAY | 5. THANKSGIVING |
| 3. JULY 4 th | 6. CHRISTMAS |

Students will be scheduled off (8 personal hours) in observance of their birthday. In the event that the student’s birthday falls on a class day, the birthday observance will be scheduled the first clinical day (8 personal hours) following the actual birthday date (exception weekends). In the event that the birthday falls on a scheduled day off, another clinical day off (8 personal hours) will be assigned in observance of the student’s birthday.

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Clinical Schedule Guidelines	Policy Number: 19
Original Date: 11/90	Revision Date: 1/91, 3/91, 4/91, 10/91, 5/96, 6/98, 5/99, 5/02, 1/03, 5/05, 8/11, 7/12, 6/13, 6/14, 6/15, 6/16, 9/16
Last Review Date: 6/17	

The Clinical Coordinator will post the clinical schedule.

- 1. All students will document their attendance by using the ACMH time and attendance devices at the beginning and end of their educational assignments (didactic and clinical).
- 2. The student will not be scheduled more than five consecutive days.

3. The student cannot switch their scheduled day off for another day off in the schedule.
4. When the student is scheduled in a specialty area, it is encouraged that the student does not utilize personal time as these assignments are limited.
5. Personal time will not be granted on Saturday or Sunday as these are minimal, except in extenuating circumstance. .
6. When personal time is requested on a day in which the student is to have class, the student is responsible for class work missed.
7. All requests for personal time should be made using the Request for Personal Time Form (#48).
8. Personal time is granted after the approval of the Educational or Clinical Coordinator.
9. Trades must be written and signed by all parties involved on the appropriate form. These forms must be completed when trading days as well as shifts on the same day (i.e. 7 and 8 o'clock shifts).
10. When a weekend trade is made, days off will automatically be changed unless specified otherwise.
11. If a student requests to trade a 10:00 a.m. to 6:30 p.m. shift, 1:00 p.m. to 9:30 p.m. shift, or weekend shift, they must trade a student a similar clinical experience (i.e. if a student wishes to trade a 10:00 a.m. to 6:30 a.m. shift, they must trade for another 10:00 a.m. to 6:30 p.m. shift. If a student wishes to trade a Saturday daylight shift, they must trade for another Saturday daylight shift.) Follow the same guidelines for specialty rotations.
12. No personal time or compensatory time will be scheduled after June 1 of the second year, unless the student has completed all competencies.
13. All personal time during the first year of education must be used by the Friday prior to graduation. The new allotment of personal time (56 hours) begins the Monday of graduation week. All personal time and compensatory time remaining during the second year of education must be used by the Friday before graduation.
14. If an examination is given on the day of an absence, the student will take the examination on the first day back from the absence in the event the student was given the test material prior to the absence. If the student, prior to the absence, did not receive the test material the student will take the examination the second day upon return. These time frames may vary in certain circumstances such as hospitalization or extended illnesses.
15. Clinical hours should not exceed more than 10 hours per day and the total didactic and clinical hours should not exceed 40 hours per week.

This is subject to change under certain circumstances.

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Grading System and Scale	Policy Number: 20
Original Date: 11/91	Revision Date: 9/92, 6/96, 9/02, 7/12, 6/14, 6/16
Last Review Date: 6/17	

A. Progress reports on each student’s didactic work performance are maintained, kept current, and are available to the student.

B. The student’s didactic achievement will be computed on a straight percentage basis. Quiz grades, homework, and other class assignments throughout a course account for 50% of the final grade. The final test comprises the remaining 50% of the course grade.

C. The student must maintain an 80% subject average didactically and an 85% average clinically. When a student falls below this average, the student will be placed on probation for three months and is subject to dismissal from the program if no improvement is shown (Policy #22 – Academic and Clinical Probation)

D. Final tests will be given to all students on the same day. If extenuating circumstances should occur and a student is absent during the scheduled final examination, the student will take the examination on the day of return. Consideration will be given to students returning after extended periods of time away from classes.

E. Official grade transcripts are given to each student every six months.

G. Grading scale:

94% - 100%	-----A
87% - 93%	-----B
80% - 86%	-----C
75% - 79%	-----D
74% & Below	-----F

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Academic and Clinical Probation	Policy Number: 22
Original Date: 5/99	Revision Date: 6/14, 6/16, 6/17
Last Review Date: 6/17	

REASONS FOR ACADEMIC PROBATION

1. The overall average of a class falling below 80%.
2. Failure of a final examination.
3. More than 5 failures per quarter (January 1 through March 31; April 1 through June 30 (or June 10 for second year students); July 1 through September 30; October 1 through December 31).

REASONS FOR CLINICAL PROBATION

1. Failure of 2 practical examinations per quarter – timeframes noted above (A failure is when a student has to return to the demonstration level for the procedure. It may result from the student not passing a simulation or competency with a maximum of 3 attempts.)
2. Not graded on required number of competencies in a given time frame.
3. Falling below minimum overall clinical percentage of 85%.
4. Not obtaining the required number of performance appraisal evaluations in a quarter.

The student will receive a written notification for each failure; failure of any quiz, final test, and clinical simulations and competencies that requires returning to the demonstration level. The student will sign each notification indicating their awareness and these forms are kept on file. A final copy will be given to the student.

All probationary periods consist of three-month duration. At any time during the probationary period, the Advisory Committee can review the student’s records to determine if additional action is required.

If a student receives 4 didactic failures or 2 clinical competency failures during a probationary period, the student will be subject to dismissal from the program.

At the end of the 3-month period, the Committee will again review the student’s records. At this time, the following recommendations can be made.

- a. To reinstate the student to satisfactory status.
- b. To dismiss the student permanently from the program for unsatisfactory progress.

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Failure Policy	Policy Number: 21
Original Date: 5/98	Revision Date: 6/01, 6/16, 6/17
Last Review Date: 6/17	

The following are guidelines, which constitute academic and clinical failure, respectively:

Academic Failure

- A student must pass all classes with at least an 80%.
- In the event that a student’s final grade in a class is below 80%, the student will be dismissed from the program.
- In the event that a student fails a final examination in a class, but still passes the class with an 80% or above, another test will be given within one week. The score will be recorded in the form of a pass/fail mark on the retake final. This grade will be recorded in the student’s file, but the original grade will be displayed on the transcript. A failing mark on the retake final examination is subject for dismissal from the program.

Clinical Failure

- A student must pass all clinical competency assessments with at least an 85% on the execution of the examination.
- Failure of one clinical competency on the second attempt (through all levels after return to the demonstration level) constitutes dismissal from the program.
- Failure of two clinical competencies while on clinical probation is subject to dismissal.

Students who have been dismissed for academic or clinical deficiency may apply for readmission to the program after one year. They must sit out for at least one year from dismissal. The student must follow the program's current admission guidelines.

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Promotion Steps/Graduation Requirements	Policy Number: 23
Original Date: 5/91	Revision Date: 6/93, 6/94, 6/95, 6/96, 5/97, 5/04, 6/10, 6/13, 6/14, 6/15, 8/16, 6/17
Last Review Date: 6/17	

A. The student must pass the first year comprehensive examination on the first attempt with at least an 80% in order to continue in the program.

B. The student must pass the second year comprehensive examination with at least a 75% before the student will be considered certified (certification entitles the student to take the American Registry of Radiologic Technologists (ARRT) certification and registration examination).

The student will be allowed three attempts (on three different days) to pass the certification test. The third attempt should be within a 6 month time frame of the initial attempt. Ineligibility for taking the ARRT examination will result after three unsuccessful attempts. The student must be certified through the second year comprehensive examination to take part in the graduation ceremonies.

C. The student must do the following in order to graduate from our program and receive his/her certification.

All clinical objectives must be met.

All clinical competencies must be completed with an 85% or better on execution.

All didactic classes must be successfully completed with an 80% or better.

An acceptable term paper must be completed.

Both the first and second year comprehensive tests must be successfully completed.

Attend the program for 24 months or complete the program within 150% of the stated program length of 24 months.

All the financial obligations to the ACMH School of Radiologic Technology must be met.

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Term Paper	Policy Number: 24
Original Date: 5/91	Revision Date: 5/96, 10/96, 6/01, 1/02, 6/07, 11/08, 6/15
Last Review Date: 6/17	

By October 15 of the student’s second year of training, the student must submit a term paper of an appropriate subject dealing with the field of radiology. This term paper will be worth 10% of the second year grade average.

The term paper is worth a total of 100 points

Content.....	60
Spelling.....	10
Grammar.....	10
Organization.....	10
Format	10

The student, with the approval of the instructors, chooses the subject of the paper.

GUIDELINES

1. Must be typed, using Times New Roman font, 12 font size, and double-spaced. Use the MLA style documentation. You can find this on the MLA Web site (<http://www.mla.org>).
2. Must be a minimum of six pages (type appearing on one side only).
If diagrams, drawings, or illustrations are used to enhance the subject material, it is in addition to the six required pages. The works cited and cover pages are not included in the six required pages.
3. Must have one inch margins on top, bottom, and sides.
4. The paper must include a Works Cited page with a minimum of three sound sources.
5. Must include a cover page that contains student’s name, date of submission, and title of paper.
6. Must submit the original copy in a plastic report cover.

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Professional Organizations and Educational Seminars	Policy Number: 25
Original Date: 11/90	Revision Date: 05/96, 03/04, 07/09 , 06/16
Last Review Date: 6/17	

Radiologic technology students are encouraged to participate at all levels in the professional societies. Organizations at national, state, and local levels assist radiographers in keeping abreast in newest innovations in the field to improve the student’s skills and their profession.

- ✓ The American Society of Radiologic Technologists (ASRT) – national organization. For more information about the ASRT, visit www.asrt.org.
- ✓ The Pennsylvania Society of Radiologic Technologists (PSRT) – state organization. For more information about the PSRT, log on to www.psrtonline.org.
- ✓ Health Occupations Students of America at www.hosa.org promotes career opportunities and enhances the delivery of quality health care to all people.

All second year students will be granted time off to attend an annual student seminar, in the event that they wish to attend. If the student chooses not to attend, their existing clinical schedule will be followed. In addition to this, students will be given time off to attend one other pre-approved *educational seminar.

In the event that a student will be competing in the technibowl competition, has won an award for a paper, or wishes to attend a state meeting, time off will also be given.

*Any seminar must meet the approval of school officials before time off will be granted.

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Communicable Disease	Policy Number: 26
Original Date: 4/09	Revision Date: 6/14, 6/15, 6/16, 6/17
Last Review Date: 6/17	

All students are required to participate in and complete standard precautions, isolation procedures, and communicable disease instruction. The Infection Control Coordinator and Employee Health Coordinator (or their designee) will provide this training at the beginning of the student’s education in the Orientation to Radiography class. Radiology course material will also be utilized for instruction. Any questions regarding communicable diseases will be directed to the Infection Control Department or the Employee Health Coordinator.

All students are required to follow Standard Precautions. If a student comes in contact with a person suspected or has a communicable disease or who has the communicable disease themselves is to immediately report the situation to the school officials. The school officials will take appropriate action by sending the student to the Employee Health Department, whereby the recommendations will be made depending on the individual circumstances. Should the conditions warrant a physician’s recommendation that the student remain home until the contagious portion of the disease passes, this absent time will be recorded in the student’s file. Depending on the nature of the communicable disease, it may be required that the student present a note from a physician stating that the student may return to take part in their education.

It is the policy of ACMH that all personnel follow Standard Precautions when caring for all patients.

1. Gloves must be worn when:
 - A. Touching any blood and body fluids, secretions, excretions except sweat, mucous membranes, or non- intact skin.
 - B. Handling items or surfaces soiled with blood or body fluids, secretions, or excretions except sweat.
 - C. Performing venipuncture or other vascular procedures.
2. Masks and eye protection or a face shield must be worn if spraying, splashing or splatter of blood, body fluids, secretions, or excretions to the face is anticipated.
3. Gowns or aprons shall be worn if soiling of one’s clothing is likely.
4. Hands and other skin surfaces must be washed immediately and thoroughly if contaminated with blood or other body fluids.
5. Try to prevent injuries caused by needles or sharps. To prevent needle stick injuries, needles must not be recapped, purposely bent or broken by hand. After use, needles, scalpel blades, and other sharp items must be placed in the appropriate puncture-resistant containers. They should never be disposed of in a garbage bag or trashcan.

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Compensatory Time	Policy Number: 27
Original Date: 5/91	Revision Date: 6/00, 6/01, 3/04, 2/11, 6/14, 6/15, 6/16, 6/17
Last Review Date: 6/17	

If there is a situation of an emergency nature, or the hospital’s disaster plan is enforced, students may volunteer to remain on site to assist with the increase in the number of patients associated with these occurrences. In the event that a student stays for this purpose, they will then be given compensatory time to be used at a later date. A student may also be awarded compensatory time throughout their education. When a student wishes to use compensatory time, the student will ask an instructor or the technologist in charge for permission to do so. The compensatory time slip or card, which signifies verification, must be presented to the instructors or the technologist in charge at the time when compensatory time is granted. The compensatory time slip or card should only be given to the technologist in charge when a school official is not available. If presented to the technologist in charge, the technologist will place the student’s name, date, and the amount of compensatory granted on the designated form in the radiology department. Compensatory slips and cards are then given to one of the school officials or partial use is documented on the card. A student is not permitted to stay beyond their scheduled clinical time for the sole purpose of accumulating compensatory time.

Reduction in the clinical time, as well as classroom time, can be made with the use of compensatory time, as well as personal time. Schedules are posted well in advance; therefore, attempts should be made to take care of personal matters around your schedule.

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Excused and Unexcused Absences	Policy Number: 28
Original Date: 5/91	Revision Date: 5/91, 10/91, 6/93, 6/00, 6/14, 6/16, 6/17
Last Review Date: 6/17	

EXCUSED AND UNEXCUSED ABSENCES

An excused absence is one in which school officials have been notified, such as an absence due to illness, death in the family, an absence given advance permission, or any other unavoidable circumstance. Failure to notify school officials/supervisor prior of an absence is considered unexcused. Notification of absence is required at least 30 minutes prior to the student’s scheduled time. In the case of an unexpected emergency, school officials should be notified as soon as possible. It is the individual student’s responsibility to personally notify school officials. The notification should be made by calling the program official’s school office at (724) 543-8206. If the school officials are unavailable to answer the telephone, a message can be left on the voicemail. During weekend assignments, students are to notify the technologist in the Imaging Services department at (724) 543-8132. The technologist will then notify the school officials.

The student must state the reason for the absence or tardiness. The reasons for absence or tardiness are documented.

The student is responsible for obtaining any information missed in class. A “0” will be given for any graded assessment given on the day of an unexcused absence. Any unexcused absences must be made up prior to graduation.

Three unexcused absences during the program are subject to dismissal from the program.

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Time and Attendance	Policy Number: 59
Original Date: 3/11	Revision Date: 3/11, 7/12, 6/13, 11/13, 6/14, 6/16
Last Review Date: 6/17	

Students will access the ACMH timekeeper terminals to document all their clinical and didactic assignments. The students’ home terminal is located in the hallway by the students’ locker room; although various terminals are located throughout the hospital. The student should not swipe in more than 15 minutes before the scheduled shift begins. When scheduled in the department for an 8½ hour shift, the ½ hour lunch break is included. The

student should promptly arrive **in the department** prior to the beginning of the scheduled shift and **not leave** the department until the shift has ended.

If the student should leave the hospital campus for any reason, the student will swipe out when leaving and swipe in upon return (example – going off hospital campus for lunch break). An occurrence will result if a lunch break lasts beyond the allotted amount of time.

The time and attendance policy has been developed to provide a consistent standard of conduct in regard to attendance. The following is the guideline for occurrences/year.

- 6 occurrences/year – verbal warning
- 8 occurrences/year – written warning
- 10 occurrences/year – subject to suspension
- 12 occurrences/year – subject to dismissal

An occurrence includes

- not swiping in at the beginning of the scheduled shift (clinical and didactic hours)
- not swiping out at the end of a scheduled shift (clinical and didactic hours)
- swiping in late for clinical and didactic assignments (if notification of tardiness is received before the scheduled start time of the scheduled assignment, compensatory time or personal time may be used to prevent an occurrence)
- swiping out early (unless compensated with approved compensatory time or personal hours) for clinical and didactic assignment
- unexcused absence

An evaluation of attendance will be provided at performance evaluations, including both absences and tardiness. A 2% deduction will be made from the punctuality category of the clinical grade for each day there is an occurrence.

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Funeral Leave	Policy Number: 29
Original Date: 5/87	Revision Date: 6/14
Last Review Date: 6/17	

Days off will be given in the event of a funeral for a close relative. This time is not counted against the student, but the student is responsible for obtaining notes from missed classes and making up any missed examinations.

Three days will be given for the death of: mother, father, spouse, brother, sister, son, daughter, stepmother, stepfather, stepson, stepdaughter, stepbrother, stepsister, grandson, granddaughter, grandmother, grandfather, mother-in-law, and father-in-law.

One day will be given for the death of a brother-in-law, sister-in-law, daughter-in-law, son-in-law, aunt and uncle.

Personal time can be taken for additional time off in the event of a funeral.

**ARMSTRONG COUNTY MEMORIAL HOSPITAL
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Policy Title: Leave of Absence	Policy Number: 30
Original Date: 10/99	Revision Date: 1/01, 4/03, 6/14, 7/15
Last Review Date: 6/17	

A leave of absence may be granted in case of emergency, personal, or medical reason, upon arrangement and approval of the school officials. It is the responsibility of the student to submit a written statement identifying their desire to take a leave of absence along with the completed Policy 30. A student is also required to submit a physician's note of diagnosis, prognosis, and activity limitations for any medical leave. Upon return, the student must submit a physician's note stating they are released for full duty and the return date. When taking a leave of absence, the student will use the remaining personal hours for the current year first.

The school officials will discuss with the student the following plans of action from which the student can choose.

1. Take a leave of absence (clinical and didactic aspects of education) for the remaining school year with the possibility of being reinstated into the next equivalent class.
2. The student will attend didactic classes only. The number of clinical hours, which the student misses, must be made up.
3. The student will take a leave of absence from the didactic and clinical areas. The student's position in the program will be held for eight weeks. This time may be extended an additional four weeks, if indicated in writing by a physician. The student will return to complete their clinical and didactic education.

In the event that a leave of absence extends beyond twelve weeks, the student may be readmitted into the next equivalent class at the discretion of the Advisory Committee of the program and the class size does not exceed the maximum number of students. The student will pay the same tuition as the class they are entering. All clinical and didactic grading will start over for the year.

Students taking any leave of absence must complete all course work, didactic and clinical, before receiving their certificate. Each case is considered individually by the Advisory Committee. Students are not guaranteed placement into an equivalent year's class if the maximum individual class size is exceeded. Consideration will be given to clinical evaluation deadlines in regard to time absent from clinical assignments. The make up of clinical hours must comply with the 1:1 technologist/student ratio. The student's hours of combined clinical and didactic time will not be in excess of 40 hours per week or 10 hours per day.

The Veteran's Administration will be notified immediately when a veteran student is granted a leave of absence. Notification guidelines will also be followed when a student is receiving Title IV funding.

I have read the content of the policy and understand the content.

Today's Date _____ Student's Name _____

Leave of Absence start date _____ Expected date of return _____

Leave of Absence Choice: Medical _____ Personal _____ Plan of Action Number _____

Signature of Student _____

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Student Pregnancy Policy	Policy Number: 31 Page 1 of 2
Original Date: 10/86	Revision Date: 10/86, 12/87, 5/91, 10/96, 5/97, 4/99, 4/12, 7/15, 7/16
Last Review Date: 7/17	

The contents of this policy were reviewed by the Radiation Safety Officer in July 2017.

Armstrong County Memorial Hospital School of Radiologic Technology recognizes the need to establish procedures regarding student pregnancy.

If a student is pregnant or becomes pregnant while in training, she will decide whether she wants to formally declare her pregnancy to school officials, thereby taking advantage of the special dose limits provided to protect the developing embryo/fetus. The student must make written declaration of her pregnancy using Form #28 – Declaration of Pregnancy Form. Instructions describing information that should be known about the radiation exposure of pregnant women is given to all students. These instructions provide information on the potential effects of declaring a pregnancy in order to help women make informed decisions on whether or not to declare their pregnancy. The information is provided in the form of answers to typical questions. These questions and answers are a summary of NRC Regulatory Guide 8.13, “*Instruction Concerning Prenatal Radiation Exposure*”.

Once a pregnancy has been declared, the School Officials, together with the Radiation Physicist, will confidentially counsel the student. The various plans of action from which the student may choose will also be discussed.

The plans of action, which are available to the student, are as follows:

1. Take a leave of absence for one year from both clinical and didactic aspects of the program, returning at the appropriate time if the maximum number of students is not exceeded in an equivalent class. The appropriate time will be determined on a case by case basis. The student must meet with school officials for advisement prior to her reinstatement.
2. The student will attend didactic classes only. The number of clinical hour that the student does not complete must be made up before she receives her certificate and before she is eligible to take the Registry examination. Didactic hours that the student does not complete must also be made up. The student will not exceed 40 hours per week or 10 hours per day when making up time. Clinical time will comply with the 1:1 technologist/student ratio.
3. The student will maintain full status in both didactic and clinical areas. Strict documentation of the student’s radiation exposure must be maintained. This option would be indicated if the pregnancy occurs during the final quarter of the program and no leave of absence is anticipated.

4. The student will maintain full status in both didactic and clinical areas until time of delivery. At this time a leave of absence will be given and the position in the program will be held for six weeks. This time may be extended if contraindicated in writing by your physician. The student will then return to the program to complete her clinical and didactic education.

The student's physician must approve in writing her return to the program for any of the above options.

If, at any time, the student voluntarily decides to undeclare or revoke her declaration of pregnancy, she may do so. This requires written notification to the school officials using Form #88 – Voluntary Undeclaration of Pregnancy Form. The school officials will then alert the Radiation Physicist. The students will then be monitored according to the general guidelines for radiation workers as described by the Pennsylvania Department of Environmental Protection.

All clinical and didactic requirements must be completed before the student is eligible to receive her certificate.

I have read the policies and understand their content.

I have decided to follow plan number _____.

Signature

Date

**ACMH SCHOOL OF RADIOLOGIC TECHNOLOGY
POLICY AND PROCEDURE MANUAL**

Declaration of Pregnancy Form – Form #28

To: _____
(Name of Program Official)

I am declaring that I am pregnant. I believe that I became pregnant _____ (Only the month and year need to be provided).

I understand that my occupational radiation dose during my entire pregnancy will not be allowed to exceed 0.5 rem (5 millisieverts), unless that dose has already been exceeded between the time of conception and submitting this form.

If I find out that I am no longer pregnant, or if my pregnancy is terminated, I will promptly inform you (preferably in writing) that my pregnancy has ended.

_____ Student technologist's signature

_____ Printed name of Student technologist

_____ Date

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Making the Decision to Declare Pregnancy Guidelines	Policy Number: 57
Original Date: 10/86	Revision Date: 8/11, 7/16
Last Review Date: 7/17	

The contents of this policy were reviewed by the Radiation Safety Officer in July 2017.

1. If I become pregnant, am I required to inform the school officials of my pregnancy?

No. It is your choice whether to declare your pregnancy to your school officials. If you choose to declare your pregnancy, a lower radiation dose limit will apply to you. If you choose not to declare your pregnancy, you will be subject to the same radiation dose limits that apply to nonpregnant workers even if you are visibly pregnant.

1. If I declare my pregnancy in writing, what happens?

The amount of radiation that you will be allowed to receive will be less because there is a lower dose limit for the embryo/fetus of female workers, who have formally declared their pregnancy in writing. Ordinarily, the radiation dose limit for a worker is 5000 millirems (mrems) (50 millisieverts) in a year.

But, if you declare in writing that you are pregnant, the dose to the embryo/fetus is limited to 500 mrem (5 millisieverts) during the 9 month pregnancy, which is one-tenth of the dose limit that an adult worker may receive in a year. In addition, efforts must be made to avoid substantial variation above a uniform monthly dose rate so that the entire dose received does not occur during a particular time of the pregnancy. (This may mean that, if you declare your pregnancy, you may not be permitted to perform some of your clinical functions).

2. Why do the regulations have a lower dose limit for a woman who has declared her pregnancy than for a normal worker?

The purpose of the lower limit is to protect her unborn child. Scientific advisory groups recommend that the dose before birth be limited to about 0.5 rem rather than the 5 rem (50 millisieverts) occupational annual dose limit because of the sensitivity of the embryo/fetus to radiation. Possible effects include deficiencies in the child’s development, especially the child’s neurological development, and an increase likelihood of cancer. (These effects have not yet been seen in the human in the dose ranges we are considering.)

3. What effects on development can be caused by radiation exposure?

The effects of large doses of radiation on human development are quite evident and easily measurable, whereas at low doses the effects are not evident or measurable and therefore must be assumed.

For example, studies of the effects of radiation on animals and humans demonstrate clearly and conclusively that large doses of radiation such as 100 rems, (100,000 mrem or 1 sievert) cause serious developmental defects in many of the body’s organs when the radiation is delivered during the period of rapid organ development.

The developing human brain has been shown to be especially sensitive to large doses of radiation. Mental retardation has been observed in the survivors of the atomic bombings in Japan exposed in utero during sensitive periods.

Additionally, some other groups exposed to radiation in utero have shown lower than average intelligence scores and poor performance in school.

The sensitivity of the brain undoubtedly reflects its structural complexity and its long developmental period (and hence long sensitive period). The most sensitive period is during the 8th to 15th weeks of gestation followed by a substantially less sensitive period for the 2 months after the 15th week. There is minimal effect on the child's developing brain during the first two months of pregnancy or the last three months of pregnancy.

No developmental effects caused by radiation have been observed in groups at doses at or below the 5 rem (50 millisieverts) occupational dose limit. Scientists are uncertain whether there are developmental effects at doses below 5 rem (50 millisieverts). It may be that the effects are present but are too mild to measure because of the normal variability from one person to the next and because the tools to measure the effects are not sensitive enough, or it may be that there is some threshold dose below which there are no developmental effects whatsoever.

In view of the possibility of developmental effects, even if very mild, at doses below 5 rem (50 millisieverts), scientific advisory groups consider it prudent to limit the dose to the embryo/fetus to 0.5 rem (5 millisieverts).

4. How much will the likelihood of cancer be increased?

Radiation exposure has been found to increase the likelihood of cancer in many studies of adult human and animal groups. At doses below the occupational dose limit of 5 rem, an increase in cancer incidence has not been proven, but is presumed to exist even if it is too small to be measured.

The question is whether the embryo/fetus is more sensitive to radiation than an adult. Increased sensitivity of the embryo/fetus to cancer induction from radiation exposure is not able to be proven. However, it is assumed that there is some increased sensitivity. Some scientific advisory groups assume that radiation exposure before birth may be 2 to 3 times more likely to cause cancer over a person's lifetime than the same amount of radiation received as an adult. If this is true, there would be 1 radiation-induced cancer death in 200 people exposed in utero at the occupational dose limit of 5 rem (50 millisieverts).

These advisory groups have considered this risk to be too high and have thus recommended that the radiation dose to the embryo/fetus be limited to a maximum of 0.5 rem (5 millisieverts). At that dose, there would be 1 radiation-induced cancer death per 2000 people. This would be in addition to the 400 cancer deaths from all causes that one would normally expect in a group of 2000 people. (The International Commission on Radiation Protection is considering lowering the fetal dose even more.)

5. How does the risk to the embryo/fetus from occupational radiation exposure compare to other risks?

The risk to the embryo/fetus from 0.5 rem or even 5 rems of radiation exposure is relatively small compared to some other avoidable risks.

Of particular concern is excessive consumption of alcohol during pregnancy. The U. S. Public Health Service has concluded that heavy alcohol consumption during pregnancy (three drinks per day and above) is the leading known cause of mental retardation. Children whose mothers drank heavily during pregnancy may exhibit developmental problems such as hyperactivity, distractibility, short attention spans, language difficulties, and delayed maturation, even when their intelligence is normal.

Cigarette smoking may also harm the unborn. There is a direct correlation between the amount of smoking during pregnancy and the frequency of spontaneous abortion and fetal death. Children of mothers who smoke while pregnant are more likely to have impaired intellectual and physical growth. Maternal smoking has also been associated with such behavioral problems in offspring as lack of self-control, irritability, hyperactivity, and disinterest. Long-term studies indicate that these children perform less well than matched youngsters of nonsmokers on tests of cognitive, psychomotor, language, and general academic functioning.

Alcohol and smoking are only examples of other risks in pregnancy. Many other toxic agents and drugs also present risk. In addition, many factors that cannot be controlled present risk. There is an increased risk in pregnancy with increasing age of the mother. Maternal disease may be an important risk factor. Malnutrition, toxemia, and congenital rubella may be associated with birth defects. Maternal diabetes and high blood pressure have been associated with problems in the newborn. In addition, many birth defects and developmental problems occur without an obvious cause and without any obvious risk factors. For example, viruses that we may not even be aware of can cause defects and defects can arise in spontaneous random errors in cell reproduction. But these are things that we cannot do anything about.

In summary, you are advised to keep radiation exposure of your unborn child below 0.5 rem, but you should also remember that alcohol consumption, cigarette smoking, and the use of other drugs can do a great deal of harm.

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

You may ask for clinical experiences that do not involve any exposure to occupational radiation at all, but your request may not be able to be honored. Even if you receive no occupational exposure at all, you will receive a dose typically about 0.3 rem (3 millisieverts) from natural background radiation.

7. What effect will formally declaring my pregnancy have on my clinical experience?

This must be decided on a case by case basis. As part of your radiation safety training, you were told the policies with respect to the job status of a declared pregnant woman. In addition, the PA DEP recommends that, before you declare your pregnancy, you talk to a program official and ask what a declaration of pregnancy would mean specifically for you and your status. However, if you do not declare your pregnancy, the lower exposure limit of 0.5 rem (5 millisieverts) will not apply.

It is most likely that you will be told that you can continue to perform your clinical duties with no changes and still meet the limit for exposure of a declared pregnant woman.

If the dose you currently receive is above the 0.5 rem (5 millisieverts) dose allowed for a declared pregnant woman, it is quite likely that the program can and will make a reasonable accommodation that will allow you to continue performing your current clinical duties.

HOW TO DECLARE YOUR PREGNANCY

8. What information must I provide in my declaration of pregnancy?

You must provide your name, a declaration that you are pregnant, the estimated date of conception (only the month and year need to be given), and the date that you give the letter to the school official. A sample form that you can use is included at the end of these questions and answers. You may use the sample letter or write one of your own.

9. To declare my pregnancy, do I have to have documented medical proof that I am pregnant?

No. No proof is necessary.

10. Can I tell the school officials orally rather than in writing that I am pregnant?

No, the declaration must be in writing. As far as the regulations are concerned, an oral declaration or statement is the same as not telling the school officials that you are pregnant.

11. If I have not declared my pregnancy in writing, but the school officials notice that I am pregnant, do the lower dose limits apply?

No, the lower dose limits for pregnant women apply only if you have declared your pregnancy in writing. The choice of whether to declare your pregnancy and thereby train under the lower dose limits is your choice, not the choice of the school officials. You may not be removed from a specific area because you appear pregnant.

12. If I am planning to become pregnant but am not yet pregnant and I inform school officials of that in writing, do the lower dose limits apply?

No. The lower limits apply only if you declare that you are already pregnant, in writing.

13. What if I have a miscarriage or find out that I am not pregnant?

If you have declared your pregnancy in writing, you should promptly inform the hospital that you are no longer pregnant. The regulations do not require that the revocation of declaration be in writing, but it is recommended that you revoke the declaration in writing to avoid confusion. Also, the program officials may insist upon a written revocation for its own protection. If you have not declared your pregnancy, there is no need to inform the school officials of your new, nonpregnant status.

If you have a miscarriage and become pregnant again before you have revoked your original declaration of pregnancy, you should submit a new declaration of pregnancy because the date of conception has changed.

14. How long is the lower dose limit in effect?

The dose to the embryo/fetus must be limited until (1) you have given birth; (2) you inform the school officials you are no longer pregnant; or (3) you inform the school officials that you no longer wish to be considered pregnant.

15. If I have declared my pregnancy in writing, can I revoke my declaration of pregnancy even if I am still pregnant?

Yes, you may. The choice is entirely yours. If you revoke your declaration of pregnancy, the lower dose limits no longer apply.

16. Can I tell school officials I am pregnant when I know I am not in order to work under the lower dose limits?

The purpose of the regulations is to allow pregnant women to choose a heightened level of protection from radiation exposure for the embryo/fetus during her pregnancy. That purpose would not be served by intentionally declaring yourself to be a pregnant woman when you know you are not pregnant. There are no regulatory requirements specifically addressing the actions the hospital might take if you provide a false declaration. However, nothing in the regulations would prevent the program from taking action against you for deliberately providing false information.

STEPS TO LOWER RADIATION EXPOSURE

17. What steps can I take to lower my radiation dose?

These have already been explained to you as part of the instructions that must be given to all radiation workers/students. However, you should ask your program officials or the radiation safety officer whether any additional steps can be taken.

The general principles for maintaining exposure to radiation “as low as reasonably achievable are summarized below. You should already be applying these principles in your clinical duties, but now is a good time to review them.

External Radiation Exposure: External radiation exposure is radiation you receive from radiation sources or radioactive materials that are outside your body. The basic principles for reducing external radiation exposure are time, distance, and shielding – decrease your time near radiation sources, increase your distance from radiation sources, and increase the shielding between yourself and the radiation source. You should also work quickly and efficiently in a radiation area so that you are not exposed to the radiation any longer than necessary. As the distance is increased from the source of radiation, the dose decreases. When possible, you should work behind shielding. The shielding will absorb some of the radiation, thus reducing the amount that reaches you.

Internal Radiation Exposure: Internal radiation you receive from radioactive materials that have gotten into your body, generally entering with the air you breathe, the food you eat, and the water you drink.

Students scheduled in the Nuclear Medicine area will have specific procedures to minimize internal radiation exposure, if applicable. Those procedures incorporate the following general precautions that should be taken when you are working with radioactive materials that are not encapsulated:

1. Wear lab coats and other protective clothing if there is a possibility of spills.
2. Use gloves while handling radioactive materials.
3. Wash hands after working with radioactive materials.
4. Do not eat, drink, smoke, or apply cosmetics in areas with unencapsulated radioactive materials.
5. Do not pipette radioactive substances by mouth.

These basic principles should be incorporated into the specific methods and procedures for doing your individual clinical assignment.

ADDITIONAL INFORMATION

18. Where can I get additional information?

Additional information can be found by calling the Pennsylvania Department of Environmental Protection – Southwest Regional Office- at (412) 442-4000.

You can find additional information on the risks of radiation in NRC’s Regulatory Guide 8.29, “Instruction Concerning Risks from Occupational Radiation Exposure”.

You can also telephone the NRC Regional Offices at the following numbers: Region I – 610-337-5000; Region II – 404-331-4503; Region III – 708-829-9500; and Region IV – 817-860-8100.

Legal questions should be directed the Regional Counsel and technical questions should be directed to the Division of Radiation Safety and Safeguards.

If you believe you have been discriminated against, you should contact the U. S. Equal Employment Opportunity Commission (EEOC), 1801 L. Street, N.W., Washington, D.C. 20507 or an EEOC Field Office by calling 800-669-4000. For individuals with hearing impairment, the EEOC’s TDD number is 800-800-3302.

ACMH SCHOOL OF RADIOLOGIC TECHNOLOGY

**RADIATION RISK EVALUATION FOR PREGNANT RADIATION WORKERS
Form #29**

Date _____

Name _____

State of Pregnancy _____

Address _____

Social Security Number _____

Date of Birth _____

As a student occupationally exposed to radiation, I realize there is potential risks to my unborn child from radiation exposure received during my pregnancy. I have read and understand the instructions given to me.

Student's Signature _____

School Official's Signature _____

Date _____

For any further questions pertinent to potential risks, exposure history and current work area, please contact the Radiation Safety Officer at extension _____.

**ARMSTRONG COUNTY MEMORIAL HOSPITAL
SCHOOL OF RADIOLOGIC TECHNOLOGY
POLICY AND PROCEDURE MANUAL**

VOLUNTARY UNDECLARATION OF PREGNANCY – Form #88

To: _____
(Name of Program Official)

This is written declaration that I, _____,
(Student's Name)
undeclare a previously declared pregnancy.

I have read the pregnancy policy and understand its content.

_____ Student's Signature

_____ Student's Printed Name

_____ Date

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Drug Free Environment	Policy Number: 69
Original Date: 6/16	Revision Date:
Last Review Date: 7/17	

Armstrong County Memorial Hospital School of Radiologic Technology, along with Armstrong County Memorial Hospital, is committed to providing a safe environment during its students' educational process. Along these lines, the school is focused on affording a safe, drug-free environment. The unlawful manufacturing, distribution, dispersion, possession or use of a controlled substance is prohibited on ACMH property or as a part of its activities.

A Drug Free Workplace Policy (Policy #4160 in the Armstrong County Memorial Hospital Human Resources Manual) is in effect throughout the ACMH system. If a problem with substance abuse is suspected or documented involving an ACMH School of Radiologic Technology student, Policy #4160 will be implemented. Drug and alcohol screening/testing will be done as deemed appropriate. Confidentiality is maintained.

Students must notify school officials if prescribed medication will affect their ability to perform their educational duties or responsibilities.

The intent of this policy is to assist the student in regard to this issue and promoting a drug free environment. The policies also convey a clear message that illegal drug use and alcohol abuse are incompatible with the educational process or as a representative of ACMH. Violation of this policy or Policy #4160 is also in violation of the ARST Standards of Ethics.

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Student Counseling for Chemical Dependency and Treatment Agencies	Policy Number: 32
Original Date: 11/90	Revision Date: 6/16
Last Review Date: 7/17	

POLICY

It is the policy of ACMH School of Radiologic Technology to recognize chemical dependency (including alcoholism and drug addiction) as an illness for which there is effective treatment and rehabilitation. The program also recognizes that chemical dependency adversely affects student's performance and attendance and that support for correcting such problems will benefit the student, the hospital, the school, and the communities that are served. Conscious of its obligation to students troubled by chemical dependency and of the negative impact of such dependency on educational performance as well interfering with the individual's functional life as manifested by health, family, legal, financial, or emotional problems, the school officials will address this

problem and encourage and assist chemical dependent students to secure treatment promptly. The program wishes to provide chemically-dependent students to move toward recovery. The decision to accept referral is at the discretion of the student. Referral to assessment and treatment is viewed as an adjunct to the existing disciplinary policy.

DEFINITION

For the purpose of this policy, chemical dependency is defined as an illness in which continued consumption of alcohol or use of a chemical substance impairs judgment and leads to a deterioration of the student's performance, behavior, physical health and/or social and family well being.

LIMITATIONS

Nothing in this policy shall limit the program's right to take disciplinary action against the students for deteriorating performance/behavior or for any particular incident in any manner consistent with program policy.

PROCEDURES

1. VOLUNTARY REFERRAL

Students who suspect they may have this illness, even in its earliest stages, may refer themselves to an outside agency (A listing of agencies is attached; a complete listing is available in the radiology school office). Students who refer themselves to an agency for assistance with a chemical dependency problem may do so with complete anonymity. All records of such contacts are completely confidential.

2. RECOMMENDED REFERRAL

Students may be referred by faculties who have reason to suspect a chemical dependency problem is affecting their performance or behavior.

A. The basis of a recommended referral to an agency by faculty should be either:

1. A pattern of deteriorating performance/behavior on the part of the student, which has been documented.
2. A particular on-the-job incident or series of incidents that may suggest chemical dependency, which has been documented.

Faculty should avoid speculation as to the cause of performance decline or personal problems that may have caused particular incidents. Should a particularly unusual incident occur, faculty should consult with a counselor prior to meeting with the student.

B. Counseling contacts are completely confidential. Referring faculty will be informed only that the student did or did not keep arranged appointments, did or did not accept referral, and whether or not the student will require time away from class.

3. OTHER

Expenses incurred for referrals, diagnosis, treatment, and aftercare of chemical dependency will be the responsibility of the student.

If, upon professional evaluation, professional treatment is recommend, the student may take advantage of the policies in place in the form of personal time and/or leave of absence to secure inpatient or outpatient treatment.

4. RETURN TO CLINICAL/DIDACTIC ASSIGNMENTS

Students who have received treatment for chemical dependency may return to clinical assignments and didactic classes upon recommendation of attending physicians/professionals. All class time missed must be made up prior to graduation.

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Student Counseling for Chemical Dependency and Treatment Agency	Policy Number: 33
Original Date: 11/90	Revision Date: 6/13
Last Review Date: 7/17	

SINGLE COUNTY AUTHORITIES AND TREATMENT AGENCIES

ARMSTRONG AND INDIANA COUNTIES

SCA – Armstrong – Indiana Drug and Alcohol Commission
 10829 US Route 422
 P. O. Box 238
 Shelocta, Pennsylvania 15774
 724-354-2746 Single County Authority (SCA)

ARC Manor
 200 Oak Avenue
 Kittanning, Pennsylvania 16201
 724-548-7607 Outpatient and Inpatient Non-Hospital – Drug and Alcohol

Armstrong County Memorial Hospital
 One Nolte Drive
 Kittanning, Pennsylvania 16201
 724-543-8437

Family A.C.T.S.
 837 Fifth Avenue
 Ford City, Pennsylvania 16226
 724-763-7600 Outpatient Drug and Alcohol

The Open Door of Indiana
 334 Philadelphia Street
 Indiana, Pennsylvania 15701
 724-465-2605 Outpatient and Inpatient – Drug and Alcohol

BUTLER COUNTY

SCA – Butler County Drug and Alcohol Program
124 West Diamond Street
P. O. Box 1208
Butler, Pennsylvania 16003-1208
724-284-5114 Drug and Alcohol

Butler Memorial Hospital
One Hospital Way
Butler, Pennsylvania 16001
724-284-4357 Detoxification/Rehab and Inpatient Hospital

Butler Regional Recovery Center
One Hospital Way
Butler, Pennsylvania 16001
724-284-4894 Drug and Alcohol – OP/IOP

Center for Behavioral Health, PA Inc.
301 Smith Drive, Suite 3
Cranberry Township, Pennsylvania 16066
724-779-2010 Outpatient

Ellen O’Brien Gaiser Addiction Center
315 Liberty Street
Butler, Pennsylvania 16001
724-256-8882 Drug and Alcohol – OP/IOP

Ellen O’Brien Gaiser Addiction Center
165 Old Plank Road
Butler, Pennsylvania 16002
724-287-8205 Non-hospital Rehab – Adults

Gateway North Hills
1629 Route 228
Cranberry Township, Pennsylvania 16066
724-776-4844 Drug and Alcohol – OP/IOP

Irene Stacy Center
112 Hillview Drive
Butler, Pennsylvania 16001
724-287-0791 Drug and Alcohol – OP/IOP

CLARION COUNTY

ARC Manor
30 Pinnacle Drive
Suite 204 – Second Floor
Clarion, Pennsylvania 16214
800-323-1333 OP/Partial Hospital

Clarion Psychiatric Center
Two Hospital Drive
Clarion, Pennsylvania 16214
814- 226-9545 Detox and Inpatient Hospital

SCA – Clarion County Drug and Alcohol
214 South Seventh Street
Clarion, Pennsylvania 16214
814-226-5888

JEFFERSON COUNTY

SCA - Clearfield/Jefferson Drug and Alcohol Commission
104 Main Street, P. O. Box 647
Falls Creek, Pennsylvania 15840
814-371-9002

Gateway Institute and Clinic
103 N. Gilpen Street
Punxsutawney, Pennsylvania 15767
814-938-8817, Ext. 221 Outpatient

WESTMORELAND COUNTY

SCA – Westmoreland County Drug and Alcohol Commission
1 Wendall Ramey Lane
Monesson, Pennsylvania 15062
724-684-9000 Ext. 4446

Adelphoi Village – Monastery Run
1108 Village Way
Latrobe, Pennsylvania 15650
724-520-1111 Inpatient Non-Hospital

Alle-Kiski Pavilion
1704 Fourth Avenue
Arnold, Pennsylvania 15068
724-339-8400 Outpatient

Gateway Greensburg
212 Outlet Way, Suite 1
Greensburg, Pennsylvania 15601
724-853-7300 Outpatient and Partial Hospitalization

Greenbriar Treatment Center at New Kensington
 701 Fourth Avenue, Second Floor
 New Kensington, Pennsylvania 15068
 724-339-7180 Outpatient and Partial Hospitalization

SPHS Behavioral Health
 203 South Maple Avenue
 Greensburg, Pennsylvania 15601
 724-834-0420 Outpatient and Partial Hospitalization

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Disciplinary Action	Policy Number: 34
Original Date: 5/03	Revision Date: 6/91
Last Review Date: 7/17	

In any complex organization with large numbers of people, variations of personal behavior and violations of rules and conduct do occur.

To provide a consistent and reasonable guide, the following steps in progressive discipline will be taken.

- A. **INFORMAL WARNING** - A verbal warning may be given by a school official calling attention to your misconduct. A written record will be made that the warning was given to you.
- B. **REPRIMAND** - A reprimand is a written document of a violation of the rules. This step is used for serious or repeated misconduct or rule violation. A written record will be made and you will receive a copy and a copy will be put in your permanent personnel file after the Educational Coordinator and Clinical Coordinator have discussed the specific violation with you and the Vice President of Clinical Services.
- C. **SUSPENSION** - A suspension is a temporary removal for just cause and for a period of one to ten days.
- D. **TERMINATION** - In the event that your termination becomes necessary, the Educational Coordinator and Clinical Coordinator will discuss the reason with you and the specific details that preceded this decision. All terminations must have the approval of administration.

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Rules and Disciplinary Procedures	Policy Number: 35
Original Date: 10/91	Revision Date: 6/16
Last Review Date: 7/17	

When impossible to list all offenses that may lead to corrective action or dismissal, the following is a list, which is presented as a guideline. Appropriate disciplinary action will be taken in the event of violation of any of the following:

1. Divulging confidential information; unauthorized possession, use, copying, or accessing Protected Health Information (PHI); unauthorized disclosure of information contained in such records.
2. Falsification of records; false or misleading statements or omissions on any hospital or school documents.
3. Any act of conduct detrimental to patient care, hospital, or program operations.
4. Creating or contributing to unsafe working conditions.
5. Violation of drug free environment policy.
6. Theft, concealment, or removal of hospital property or property of a hospital employee or student, or patient from the premises without authorization.
7. Insubordination, including refusal to accept educational assignments.
8. Unauthorized possession of firearms, explosives, or concealed weapons on hospital property.
9. Misusing, destroying, or damaging hospital property or property of a hospital employee or student, or patient.
10. Conviction of a crime other than a misdemeanor or a summary offense.
11. Violation of solicitation and distribution policy; vending, soliciting, or collecting contributions for any purpose whatever, at any time, on the premises unless authorized in writing by the administrator.
12. Gambling on hospital premises, which include games of chance, operations of pools, lotteries, etc.
13. Absence without prompt notification or excessive absences or tardiness, for whatever reason.
14. Unacceptable pattern of absences or tardiness.
15. Violating safety rules.

16. Leaving your scheduled assigned area during scheduled times (without notification of program officials or supervising technologist or without prior permission). This pertains to any time during the scheduled assignment.
17. Inattention of educational activities and/or performing activities not related to your education during your scheduled assignments.
18. Violation of hospital's tobacco policy.
19. Sleeping during any educational assignments.
20. Disregard concerning personal appearance, uniforms, dress, or personal hygiene.
21. Immoral conduct.
22. Disorderly conduct on hospital property
23. Fighting or attempting bodily injury or the use of abusive or threatening language to supervisory personnel, ACMH employees, fellow students, visitors, or patients while on AMCH property.
24. Any grossly negligent, careless or willful act, which results in personal injury or property damage.
25. Failure to respect the chain of command or authority.
26. Cheating for any test or quiz (IMMEDIATE DISMISSAL).
27. Over-staying leaves of absence.

Any of the above could result in a probationary period or dismissal from the program. Any probationary period will last three months. During this time the student will be evaluated continually. A final evaluation will be given at the end of three months to determine continuation or dismissal from this program.

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Grievance	Policy Number: 36
Original Date: 10/97	Revision Date: 6/10, 4/12, 6/12, 6/15, 6/16, 10/16, 7/17
Last Review Date: 7/17	

If a student should have a grievance concerning the educational process, the student should provide written documentation (Form 135 – Written Notification of Grievance to Program Officials) of their concern to the school officials. The complaint will receive prompt and courteous consideration. The concern will then be discussed in private and will be kept confidential. It is the school official's responsibility to consider and attempt to remedy the situation as quickly as possible. If the school officials cannot remedy the situation, the following procedure is recommended.

1. Discuss the problem with the Vice President of Clinical Services in private.
2. If the Vice President of Clinical Services cannot come to a reasonable resolution, the student should state the problem in writing to the Vice President of Operational Excellence and Healthcare Informatics within five days following the meeting with the Vice President of Clinical Services so that all the facts may be presented.
3. The student will be notified within one week of the administrative action taken concerning the grievance.

If the student's matter directly involves the Educational Coordinator and/or Clinical Coordinator and the student wishes to bypass expressing their concern to these individuals, the student will follow the steps above beginning with #1.

Students may contact the Joint Review Committee on Education in Radiologic Technology (JRCERT) if they believe the program is not in compliance with the Standards of an accredited educational program for the radiographer. The JRCERT will not become involved with student related disciplinary matters.

The Joint Review Committee on Education in Radiologic Technology
 20 North Wacker Drive
 Suite 2850
 Chicago, Illinois 60606-3182
 Telephone: 312-704-5300
 Website - www.jrcert.org

At any point in this procedure, a fellow ACMH School of Radiologic Technology student may accompany and assist the student in presenting and stating the problem.

This procedure has been developed because the ACMH School of Radiologic Technology wants to include every available means for protecting the student's individual interests and to ensure that the final decision will be made without prejudice.

**Armstrong County Memorial Hospital
 School of Radiologic Technology**

Written Notification of Grievance to Program Officials – Form #135

The student should refer to Policy 36 (Grievance Policy) in regard to the avenues for pursuing a grievance that impacts the quality of their education. A grievance is defined in the JRCERT Standards as “a claim by a student that there has been a violation, misinterpretation, or inequitable application of any existing policy, procedure, or regulation. The grievance procedure is considered accessible through the Policy and Procedure Manual, found in the program's catalog, and is equitable to all.

Student's Name _____
 (please print)

Date (submission of notification to program officials) _____

Brief summary of the nature of the grievance

Provide a detailed description of the nature of the grievance (use additional pages or the back of this form for a complete description).

Student's Signature _____

Date received by program official _____

Name of program official receiving Form 135 _____
(printed name)

Signature of program official above _____

Documentation after receipt of Form 135 from student.

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Clinical Education	Policy Number: 37
Original Date: 10/91	Revision Date: 3/92, 6/10, 6/13, 6/14, 7/15, 6/16, 7/17
Last Review Date: 7/17	

The clinical education of the student is performed under the direct supervision of registered technologists as indicated. Direct supervision is defined as the supervision provided by a qualified radiographer who is present in the same room or location where the radiographic procedure is being performed. Once a student has achieved clinical competency in a certain area, indirect supervision by a qualified technologist is permitted. Indirect supervision is defined as that supervision provided by a qualified radiographer who is adjacent to the room or location where a radiographic procedure is being performed. This ensures immediate availability to assist students. Indirect supervision allows the student to increase their knowledge of technologist's responsibilities. Students will not take the responsibility or the place of employed personnel.

Category of Clinical Assessment Levels:

1. **Readiness:** Student meets the minimum application qualifications of the program and has basic radiography orientation.
2. **Demonstration:** Each procedure will be introduced from the classroom perspective, utilizing PowerPoint slides, images, and handouts. Each exam will then be demonstrated in the laboratory setting by one of the instructors. Each student will demonstrate the procedure back to the instructor to verify they understand and can apply skills necessary to perform the exam.
3. **Practice:** Once the student has been shown the radiographic positioning by an instructor, students can perform the procedures with direct supervision of a qualified radiologic technologist. Students must obtain 4 clinical experiences for each procedure, which are documented on clinical log sheets. For some assessments that are generally less common, students may perform a demonstration on a mock patient. Exams that allow mock patient demonstrations are indicated with an asterisk on the log sheets.
4. **Simulation:** Once the student has obtained the 4 clinical experiences required, students must successfully perform the exam for a clinical evaluator from beginning to end without utilizing radiation exposure.
5. **Competency:** The student will combine knowledge and clinical skills to perform procedures with direct supervision, but with minimal or no assistance. The student will be tested at this level and must pass each required competency with an 85% or greater. For exams indicated with an asterisk that have a low volume of occurrence, proficiency may be demonstrated by performing a simulated exam competency. Students are given a specific scenario (ex. ambulatory patient, cart patient, trauma etc.) and asked to simulate the examination specific to the indicated patient status. Once students successfully perform their competency for an exam, they are allowed to perform exams of that nature with indirect supervision.

**ARMSTRONG COUNTY MEMORIAL HOSPITAL
SCHOOL OF RADIOLOGIC TECHNOLOGY
POLICY AND PROCEDURE MANUAL**

Policy Title: Clinical Competency Evaluations	Policy Number: 38
Original Date: 4/04	Revision Date: 6/14, 7/15, 6/16, 7/17
Last Review Date: 7/17	

After completion of lab demonstration, lab practice, four dated clinical experiences, and graded simulation, the student can prove competency by qualified personnel. The student will perform the graded simulation and competency during their scheduled clinical time. The appropriate evaluation form will be completed for each examination. For each procedure, lab simulation (1/3 grade) and competency grade (2/3 grade) will be averaged together for the final grade for each examination. Lab demonstrations on mock patients for log sheets should be performed by four different technologists when possible.

Only the student, patient, and evaluator will be allowed in the radiographic room at the time of the graded examination. The student must present his/her log sheet to the evaluator **BEFORE** a competency can take place. A graded simulation cannot occur on the same day as a clinical experience, which utilized a phantom or simulated patient. A simulation and competency cannot be performed on the same day.

When a student has to be re-evaluated on a specific examination for the second time, an additional 5% will be deducted from the percentage grade for that examination. In the case of a third evaluation on the same examination, an additional 7% will be deducted from the percentage grade for that examination. In the event that a student has to be re-evaluated, he or she must wait until the following day to do so.

When a student has three consecutive unsatisfactory clinical simulation or competency evaluations on a given examination, this constitutes a failure of a clinical exam. The student must then return to the demonstration level for that procedure and review with the instructor. The final competency score for re-evaluation will receive a 10% deduction for the clinical failure. The exam must be passed during the second round of evaluations or the student is subject to dismissal. An average score of an exam is to be above 85% in order to be considered proficient. In the event that deductions due to re-evaluations or due to a competency being late result in an average score below 85%; the exam does not require repeating, but it is considered a failure. Policy #22 (Page 34) can be referenced for details.

The examinations and the time frames for completing clinical competencies are listed in the Examinations for Clinical Competency Evaluation Policy (Policy # 40). The student will be proficient in performing these examinations upon completion of their education. The students will also show proficiency in examinations that are not done on a regular basis. The student will log clinical experience participation on the appropriate log sheet, which are located on pages 79-86 of the student's Policy and Procedure Manual. These examinations include scapula, clavicle, humerus, femur, sternum, acromioclavicular joints, sacroiliac joints, trauma shoulder, and skull imaging.

**ARMSTRONG COUNTY MEMORIAL HOSPITAL
SCHOOL OF RADIOLOGIC TECHNOLOGY
POLICY AND PROCEDURE MANUAL**

Policy Title: Radiographic Skull Procedures	Policy Number: 39
Original Date: 6/96	Revision Date: 9/96, 7/99, 6/01, 3/04, 7/08, 5/12, 6/15, 6/16, 6/17
Last Review Date: 6/17	

The following are the routines, which will be utilized when performing simulated clinical experiences, graded simulations, and competencies for the special skull procedures. If a student is unable to obtain 4 clinical experiences for each examination because of an insufficient amount of patients, a clinical experience can be simulated. These examinations will follow the same protocol as stated in the Clinical Competency Evaluation Policy (Policy #38). Images will be taken using the skull phantom for competencies. The following competencies (images to be taken) must be completed by March 31 of the second year of education. Those completed after the deadline of March 31 will be considered late.

- Facial Bones - Waters Method - parietoacanthial projection
lateral projection of the face
submentovertical projection
- Nasal Bones - Waters Method - parietoacanthial projection
lateral nose - bilateral
- Mandible - PA projection
lateral projection (unilateral)
axiolateral oblique projection (unilateral)
PA axial
- Temporomandibular Joint - Towne Method - AP axial projection
axiolateral oblique projection (unilateral)
- Zygomatic Arch - tangential projection - bilateral
tangential projection - unilateral
- Orbits - Caldwell Method – PA axial projection
Waters – parietoacanthial projection
Rhese Method – parieto-orbital oblique projection (unilateral)
Lateral face (unilateral)

If the above exams are performed on actual patients in the imaging department, as opposed to on the skull phantom, projections must be performed according to department routines.

**ARMSTRONG COUNTY MEMORIAL HOSPITAL
SCHOOL OF RADIOLOGIC TECHNOLOGY
POLICY AND PROCEDURE MANUAL**

Policy Title: Examinations for Clinical Competency Evaluation	Policy Number: 40
Original Date: 6/98	Revision Date: 6/99, 6/01, 5/02, 6/06, 7/08, 6/11, 9/11, 6/13, 6/14, 12/14, 7/15, 6/16, 6/17
Last Review Date: 6/17	

The students must perform competencies for the following examinations in the designated periods of time:

1. hand
 2. finger
 3. wrist
 4. forearm
 5. elbow
 6. foot
 7. ankle
 8. lower leg
 9. trauma upper extremity- non shoulder exam (*may simulate after May 1st of second year)
 10. trauma lower extremity (*may simulate after May 1st of second year)
 11. knee
 12. patella *
 13. shoulder
 14. pelvis
 15. hip
 16. cross-table lateral hip with a horizontal beam (*may simulate after May 1st of second year)
 17. cart chest
 18. routine chest
 19. portable chest (*competency must be completed by January 20th of the first year)
 20. ribs
 21. cross-table lateral spine with a horizontal beam (*may simulate after May 1st of second year)
 22. cervical spine
 23. thoracic spine
 24. lumbar spine
- For the fluoroscopy procedures (gastrointestinal series, barium enema, barium swallow, and small bowel series) – 2 of the 4 are demonstrated for competency. One of the two must be either a gastrointestinal series or a barium enema. The second competency is selected from one of the three remaining exams. Fluoroscopic exams and intravenous pyelogram must be simulated by March 31st of the second year of training. Remaining clinical experience check offs may be demonstrated starting 2 weeks prior to this deadline.**
25. upper gastrointestinal series
 26. contrast enema
 27. small bowel series
 28. esophagram/barium swallow
 29. sinuses (the phantom will be used for competency when not performing exam on patient)
 30. skull * (the phantom will be used for competency when not performing the exam on a patient)
 31. intravenous pyelogram
 32. abdomen supine
 33. abdomen upright

34. abdomen decubitus
35. pediatric chest (6 years and under)
36. pediatric upper or lower extremity - 6 years and under
37. geriatric chest (at least 65 years old and physically or cognitively impaired)
38. geriatric upper extremity (at least 65 years old and physically or cognitively impaired)
39. geriatric lower extremity (at least 65 years old and physically or cognitively impaired)
37. scapula *
38. clavicle *
39. humerus *
40. trauma shoulder or humerus *
41. femur *
42. portable abdomen
43. portable orthopedics
44. sternum *
45. acromioclavicular joints *
46. sacroiliac joints *
47. sacrum/coccyx *
48. headwork (phantom will be used for competency when a patient is not available for competency)
 - a. zygomatic arches *
 - b. orbits *
 - c. facial bones *
 - d. nasal bones *
 - e. mandible *
 - f. temporomandibular joints *
49. CT of abdomen
50. CT of head
51. CT of chest

The student must also document 2 mobile C-Arm studies--one requiring manipulation around a sterile field and one requiring manipulation to obtain more than one projection -- on the C-Arm Objective Form (#25) on Page 133.

The grading timetable is as follows (The deadline dates are indicated):

- FIRST YEAR:** September 30 (Quarter 1) – at least 1 completed competency
 December 31(Quarter 2) – total of 6 completed competencies
 March 31 (Quarter 3) - an additional 6 completed competencies
 June 30 (Quarter 4) - a total of 20 completed competencies
- SECOND YEAR:** September 30 (Quarter 1) – at least 1 completed competency
 December 31 (Quarter 2) – 12 completed competencies with at least one competency completed by December 1.
 March 31 (Quarter 3) - an additional 12 completed competencies
 June 1 (Quarter 4) - all competencies must be completed (All competencies must be completed by June 1 in order to take remaining compensatory or personal time)

In addition to the grading timetable, the student must document at least one completed competency per quarter in order to calculate a clinical grade for each quarter. In the event that the competencies are not completed by the deadline, 10% will be subtracted from the final grade of each competency. An additional 5% will be deducted for each subsequent quarter that the student does not meet the grading timetable requirements.

Example: Quarter 2 – 4 deficient competencies for that quarter
 Quarter 3 – Completes 2 of the 4 competencies (2 competencies – 10% off grade)
 Quarter 4 – Completes the remaining 2 of the 4 deficient competencies from Quarter 2 (2 competencies – 15% off grade)

Also, instructors may choose the patient and room of the late examinations are performed. Since certain examinations are only performed in specific rooms, the student scheduled in the particular room will have the initial opportunity to prove competency. For example, the student scheduled in Room 3 will be offered the first chance to be graded on a barium enema.

During the first year, a 1% bonus will be given for speed during the examination. This is given if the part is positioned by the time the collimator light terminates. Hopefully, this will establish expediency when performing the more difficult examinations.

The student may start completing the 4 clinical experience exam check offs as soon as they feel confident enough to be actively involved with positioning and centering. The student may begin performing simulations and competencies only after the appropriate anatomy and positioning classes have been taught and can prove competency after successful completion of the final exam for the class. All phases must be dated and initialed before a competency grade can be attempted. Clinical experience is verified by including the patient's ID number, date, and signature of the supervising technologist of the examination. These log sheets are to be turned in by June 1 of the second year of training.

*These procedures may be simulated for final competency grade, if sufficient amounts of patient are not available. Clinical experiences may also be simulated if necessary.

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Clinical Rotation – Computed Tomography	Policy Number: 62
Original Date: 10/13	Revision Date: 7/14, 6/15, 6/16, 7/17
Last Review Date: 7/17	

The ASRT have been addressing the increasing use of CT and how it is impacting the role of a radiologic technologist. The ASRT addresses a basic understanding of computed tomography for new program graduates. Through the planning of student's clinical experiences, radiography programs are encouraged to provide their students with clinical exposure to computed tomography.

Documentation shows that procedures in computed tomography are increasing. CT is beginning to replace initial diagnostic examinations. With the cost constraints in health care, diagnostic radiographers are expected to perform basic CT scans during the off shifts (evening and midnight shifts, weekends, and holidays) in place

of a staffed CT technologist or a CT technologist on call. With this knowledge, changes in the clinical rotations will be implemented.

The first year students will be scheduled in the computed tomography suite. This rotation will begin after the completion of the Orientation to Radiography course in the month of October or November for three rotations. The rotation will consist of Tuesdays, Thursdays, and Fridays while the student is in the clinical area from 7:00 a.m. to 3:30 p.m. At this time, the students will be introduced to the basic concepts of computed tomography and the procedures, which are performed utilizing this imaging modality. During the rotation in the first year, the students will have the opportunity to observe, be oriented to computed tomography, along with obtaining clinical check offs for examinations of the head, chest, and abdomen/pelvis. The first year clinical experience prepares the student for the second year rotation in computed tomography, at which time the student completes clinical check offs, simulation, and competency evaluations.

The program will provide the second year students with three consecutive weeks of clinical rotation through this modality. This rotation consists of Mondays, Wednesdays, and Fridays while the student is in the clinical area from 7:00 a.m. to 3:30 p.m. The clinical experience in computed tomography also provides the student with more exposure to cross-sectional anatomy. Objectives (Policy 45) and evaluation forms (Form #19 found in the student's Policy and Procedure Manual on page 123) are in place for computed tomography rotations and are found in the student policy and procedure manual.

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Clinical Performance Appraisal Grade	Policy Number: 42
Original Date: 10/91	Revision Date: 6/96, 6/98, 1/00, 3/04, 6/09, 6/12, 6/13, 6/14, 6/16
Last Review Date: 7/17	

A clinical grade will be calculated every three months. A minimum of eight evaluations, consisting of patient care and work and technical relationship must be turned in during this period. Each evaluation will be graded individually.

The following scale will be used for the performance appraisal evaluation forms:

Frequently	A	4 points	100%
Usually	B	3 points	93%
Occasionally	C	2 points	87%
Almost Never	D	1 point	75%

The following specialty area evaluation forms are found in the Policy and Procedure Manual.

Imaging Services Office -	page 106
Radiation Oncology -	page 121
Nuclear Medicine -	page 122
Computerized Tomography -	page 123
Diagnostic Medical Sonography -	page 124
Magnetic Resonance Imaging -	page 125
Film Room -	page 126
Mammography -	page 129

The percentage grade will be calculated as follows. The total number of objectives for each evaluation will be divided into 100. That number found will be the amount of the percentage of a “yes” and 0% will be given for a “no”. Example: The computerized tomography evaluation has 10 objectives. One hundred (100) divided by 10 is 10. For every “yes” checked, 10% will be given. A 0% will be given to each “no”. These scores are then calculated into a percentage score.

If less than eight evaluations are turned in, a zero is given for each deficient evaluation. One day a week may be used as an evaluation day. This could be any day and will be at the discretion of the instructors. The technologist working with the student that day will evaluate the student. The evening technologists will evaluate students on evening shift. Students scheduled weekends will have the weekend technologist complete an evaluation (one per weekend).

It is the responsibility of the student technologist to obtain these evaluations and turn them in, not the technologist.

Performance appraisal evaluations may make up a maximum of 1/6 of the clinical grade, during which, the following guidelines must be followed:

- the forms are to be dated when turned in (undated forms will count as a 0).
- the date on the form is the date that the student was scheduled with the technologist.
- only one evaluation per day is permitted.
- a maximum of two evaluations per week are permitted (Monday through Sunday).
- if more than two evaluations are turned in for one week time period, the third evaluation will not be included.

When in a specialty area, the evaluation will be handed in at the end of the week and will be counted towards the quarter the last day the rotation falls into. A student will obtain only one evaluation per week for each of the specialty areas.

Punctuality and following the dress code are evaluated as part of the clinical grade. Demerits will be given for inappropriate dress and also for tardiness, except in extenuating circumstances at the discretion of school officials (ex. bad weather). A 2% deduction will be made from the dress code and punctuality categories for each occurrence.

zero demerits will result in	100%
one demerit -	98%
two demerits -	96%
three demerits -	94%
etc.	

The Performance Appraisal score is calculated by way of the following:

$$([Performance\ Appraisal\ Evaluations\ average\ x\ 2] + dress + punctuality) \div 4$$

If there were any clinical objective sheets submitted during a quarter, the performance appraisal score is averaged with the clinical objective score. The clinical objectives sheets are due every 6 months, with the exception of the portable objectives sheet, which is due on January 20th of the first year. This performance appraisal score makes up one-third of the quarterly clinical grade, with the other two-thirds comprised by the clinical exam average for the quarter. A percentage grade will be tabulated at the end of each quarter, with deadlines of:

September 30	December 31
March 31	June 30 of first year / June 1 of second year

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Clinical Objective Sheets	Policy Number: 43
Original Date: 6/07	Revision Date: 6/16
Last Review Date: 7/17	

Clinical objectives must be turned in at the end of:

- 6 months
- 12 months
- 18 months
- 24 months

Portable clinical objectives are due by January 20th of the first year of training and will be averaged in with the third quarter clinical grade of the first year.

Completed forms turned in:

- on time will receive 100%
- up to one week late will receive 90%
- up to two weeks late will receive 80%
- any time past two weeks, 70%

For every objective not checked off, one percent will be subtracted. The instructors may test the student on any or all objectives checked off.

The student may acquire a check off from a technologist after showing proficiency in a certain area (by demonstrating or, in some instances, explanation, --i.e. why centering is important when phototiming). Clinical objectives will comprise up to 1/6 of the final clinical grade.

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Imaging Services Office Objectives	Policy Number: 44
Original Date: 2/86	Revision Date: 6/91, 5/96, 5/98, 3/04, 6/09, 6/13, 6/14
Last Review Date: 7/17	

The first year student is assigned to the Imaging Services office sometime during the first and second month of education. Each student will be scheduled for three days in the Imaging Services office.

- OBJECTIVES:**
- The student will be able:
 - a. To sufficiently evaluate a doctor’s request.
 - b. To accurately recover patient’s previous reports from the computer system.
 - c. To scan documents into the PACS system.
 - d. To acquire a basic understanding of the office computer system.

- e. To understand the office process from the arrival of the patient through the filing of the report.
- f. Generate a CD of patient's images and documents.
- g. To understand the retrieval of radiology film jacket, if applicable, and process the paperwork if the radiology jacket isn't available.

This assignment will give the student a better insight as to how the radiology department is run. This assignment is beneficial for assisting other health care works in radiology office procedures.

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Specialty Areas	Policy Number: 45
Original Date: 2/86	Revision Date: 11/90, 1/91, 5/96, 10/96, 6/98, 04/04, 1/09. 11/11. 7/12, 7/15, 6/16, 11/16, 7/17
Last Review Date: 7/17	

During the second year of education, the student is scheduled in specialty areas in a one week time period (approximately 24 hours). These rotations include Radiation Oncology, Nuclear Medicine, Diagnostic Medical Sonography, Magnetic Resonance Imaging, Mammography, and Film Room. Students are rotated through Computerized Tomography during the first year and again during the second year of education of which time the student can simulate and acquire competencies. During the first year of the Computerized Tomography rotations, the student may begin to obtain documented clinical check offs. During the second year, the student will more actively participate in procedures and continue to document clinical experiences, simulate with minimal assistance, and perform a competency with minimal assistance for unenhanced procedures of the head, chest, and abdomen. The student may request to be rescheduled in any area that an interest has developed after all clinical objectives have been met and all clinical competencies have been completed. The student will be under the direct supervision of a qualified practitioner. Each area has specific objectives and evaluation forms.

RADIATION ONCOLOGY

Objectives: The student will become familiar with:

1. To care for the terminally ill.
2. The basic physics of radiation oncology.
3. The basic charting process.
4. Basic treatment planning – including computer planning and simulations.
5. How to perform portal imaging.
6. How to help with patient setups.

NUCLEAR MEDICINE

Objectives: The student will become familiar with:

1. The different radionuclides and how to handle them.
2. Quality control of the area.
3. The different examinations, why they are performed, and a brief description of each.
4. A basic understanding of the computer.
5. The basic physics of the camera and computer.
6. The basic principles of generating a diagnostic image and how to send images for interpretation.

COMPUTERIZED TOMOGRAPHY

Objectives: The student will learn:

1. A basic understanding of how the scanner and computer operation.
2. How to operate the scanning console.
3. How to position and center the patients for different examinations.
4. The radiation protection protocols for computerized tomography procedures.
5. The different examinations and a brief explanation of each.
6. Basic cross-sectional anatomy and gain a better conception of where anatomical parts are located.
7. To generate a diagnostic image and send the image to PACS.
8. How to perform the daily quality assurance procedures.
9. To perform with limited assistance basic unenhanced computerized tomography procedures of the head, chest, and abdomen.

DIAGNOSTIC MEDICAL SONOGRAPHY

Objectives: The student will become familiar with:

1. The basic physics of ultrasound.
2. A basic understanding of the real time scanner.
3. To generate diagnostic images and send them to PACS.
4. Basic cross-sectional anatomy.
5. The different examinations and why they are performed.
6. How to scan the different body areas and have an opportunity to scan briefly.

MAGNETIC RESONANCE IMAGING

Objectives: The student will become familiar with:

1. The basic concept of the physics of Magnetic Resonance Imaging.
2. How to operate the scanning console and scan briefly.
3. How to position and center the patient for different examination.
4. Basic cross-sectional anatomy.
5. The different examinations performed and what they will demonstrate.
6. The importance of a thorough patient history and pre-scan screening process.
7. How to generate a diagnostic image and send the images to PACS.
8. The MRI safety protocols.

MAMMOGRAPHY

Objectives: The student will become familiar with:

1. The function of the controls on the mammographic machines.
2. Understand the basic positioning for a routine mammogram as well as special procedures performed in woman's imaging.
3. The patient history, which is obtained, and understand the importance of each question.
4. The different types of breast pathologies through radiographs.

5. Sending mammography images to PACS.
6. Understand the importance of mammographic quality assurance and phantom imaging.
7. The differences between 2 dimensional and 3 dimensional breast imaging.
8. Be aware of the special procedures performed in mammography and briefly describe their procedures.

FILM ROOM

Objectives: The student will learn:

1. To answer the telephone in a correct manner.
2. To accurately check outside physician's orders and doctor's orders in the chart or in the computer system.
3. To obtain the dates of previous procedures and record this on the requisition as well as send prior examination for comparison.
4. To call the nursing stations for patients.
5. With the supervision of a technologist, enter orders into the Meditech system.
6. To delegate work assignments with the guidance of a registered technologist.

Scheduling in specialty areas gives the student a broader insight into the different aspects of radiology. The purpose of being scheduled in these areas is not to become proficient but to gain a basic understanding of that area. The student will be given more time in any area they express a desire for.

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Mammography Rotation	Policy Number: 46
Original Date: 6/16	Revision Date:
Last Review Date 6/17	

The Armstrong County Memorial Hospital School of Radiologic Technology has updated their policy in regard to placement of students in the mammography clinical rotations for observation and/or performance of breast imaging. (Additionally, the policy may be applied to any imaging procedures performed by professionals who are of the opposite gender of the patient.) Under this policy, all students will be offered the opportunity to participate in mammography rotations.

It is the obligation of Armstrong County Memorial Hospital School of Radiologic Technology to provide equitable learning opportunities for all students. Equitable means dealing fairly with all students, but does not necessarily mean equal. With regard to mammography, the program will schedule all students (females and males) in a mammography rotation during the second year of education. The Imaging Services department of Armstrong County Memorial Hospital does not have a policy that restricts male technologists from performing professional responsibilities in the mammography suite.

All students are taught breast anatomy and mammography positioning and pertinent patient medical history in the reproductive didactic course. The student will be scheduled in the mammography rotation following the reproductive course. During a student's rotation in mammography, a mammography technologist demonstrates the mechanisms of the mammography equipment and describes the functions to the students. Students are also given the opportunity to participate in routine mammography procedures, both screening and diagnostic. During the student's scheduled rotational assignment, the student also has the opportunity to observe special procedures being performed in the breast imaging suite.

The program feels that it is beneficial for female students to participate in the mammography imaging procedures. The female student would be at a disadvantage in the workforce where there is a demand for appropriately educated professionals to address the needs of patients. Clinical site policies may also be applicable upon employment in regard to access for males to pursue a career in mammography. Regardless, ACMH School of Radiologic Technology will equitably schedule all students in the breast imaging suite.

Students will be informed as to when they will be scheduled in the mammography rotation. If a student does not wish to participate in this rotation, the student must make this request in writing to program officials. Another clinical assignment will be provided in lieu of the mammography rotation and a clinical evaluation will be obtained for this new assignment.

The change in the program’s policy regarding student clinical rotations in mammography is based on the sound rationale presented in a position statement on student mammography clinical rotations adopted by the Board of Directors of the Joint Review Committee on Education in Radiologic Technology (JRCERT) at its April 2016 meeting. The JRCERT position statement is included as Addendum A to the program’s policy and is also available on the JRCERT Web site, www.jrcert.org, Programs and Faculty, Program Resources.

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Portable and Operating Room Assignments	Policy Number: 47
Original Date: 6/98	Revision Date: 6/02, 4/04, 9/11, 5/12, 7/12 9/12, 6/15, 6/15, 6/17
Last Review Date: 6/17	

The students are assigned to portable and operating room duty throughout their education. Students are to wear radiation protection equipment during all mobile radiographic procedures.

PORTABLES

Students are assigned portable duty throughout their education. The portable objective sheet and portable chest competency must be completed by January 20 of the first year of education. The student is then clinically competent to do a portable procedure with indirect supervision in an adjacent area of which a qualified technologist is immediately available. The portable assignment gives the student experience functioning in limited surroundings and with limited equipment. This also gives the student experience in making pertinent decisions regarding technical factors and positioning, as well as enhancing critical thinking skills. This enables the student to grow in technical ability and certitude.

GOALS

1. The student will be able to evaluate a request for a portable procedure.
2. The student will know the controls for movement and technical factors located on the portable unit.
3. The student will operate the portable unit efficiently.
4. The student will be able to obtain a radiograph of acceptable quality.

OPERATING ROOM PROCEDURES

First and second year students will be scheduled OR for a week at a time. The first year student will begin their OR assignments following instruction on sterile technique. The student is directly supervised by a technologist for all OR procedures requiring radiology guidance. This rotation gives the student a better understanding of surgical procedures and utilizing radiographic images during these procedures.

This gives the student an opportunity to:

- Learn more about the functioning of the operating room
- Reinforce the importance of sterile procedures
- Observe what occurs during the different surgical procedures
- Work with other employees and physicians of the hospital
- Operate portable fluoroscopic radiographic equipment

At the end of the two year program, the student will be able to perform surgical procedures while utilizing the C-arm and portable equipment with very limited assistance or no assistance at all, but under the direct supervision of a registered technologist.

The student must perform at least two C-arm procedures (one being a case that requires manipulation to obtain more than one projection; one being a case that requires manipulation around a sterile field) in the OR with minimal or no assistance from the technologist before he/she graduates.

GOALS

1. The student will be able to evaluate a request for an OR procedure.
2. The student will connect the C-arm and monitors.
3. The student will drape the C-arm for sterile procedures.
4. The student will control fluoroscopy and make an exposure when necessary.

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Student Record Confidentiality	Policy Number: 48
Original Date: 8/01	Revision Date: 6/02, 4/04, 9/11
Last Review Date: 6/17	

ACMH School of Radiologic Technology abides by the regulations set forth by the passage of the General Education Provision Act, Title IV of the Public Law 90-247, as amended (added by Section 513 of Public Law 93-380 and amended by Section 2 of Public Law 93-568), commonly referred to as the “Family Educational Rights and Privacy Act of 1974” (FERPA and also known as the Buckley Amendment).

This enacted federal legislation provides that post-secondary schools must allow students attending their programs to inspect and review their educational records and to designate third parties that may have access to their records. The School of Radiologic Technology is a post-secondary school and therefore school policy will not apply to the parents themselves but directly to the students.

The amendment gives the students the right to see their own educational records maintained by the school office and the right to refuse access of educational records to a third party, including parents.

The program’s Family Educational Rights and Privacy Act (FERPA) Release Form (Form #69) is a written release, which is signed by the student authorizing ACMH School of Radiologic Technology to release information to prospective employers or educational institutions. This form can be rescinded with a signed and dated notification.

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Interview Time for a Radiographer/School	Policy Number: 49
Original Date: 12/04	Revision Date: 6/06, 6/13, 6/15, 6/16
Last Review Date: 6/17	

Second year students will be granted a maximum of sixteen hours that can be used for interviewing for a radiographer position or a school position for an advanced modality or in order to continue their education beyond the radiologic technology course of study. This time may also be used for pre-employment/school physicals and orientation for a radiographer/school position. Anything else that is required for employment/school is not considered under the interview time and will be granted as personal time, use of competency time, or should be scheduled on the student’s day off or around the didactic/clinical schedule. Anything exceeding sixteen hours must be taken as personal hours or compensatory time. The student should provide documentation from the medical facility of the dates, times, and reasons for the use of interview time along with a signature from a contact at that facility

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Jury/Witness Duty	Policy Number: 50
Original Date: 7/01	Revision Date: 6/16
Last Review Date: 6/17	

A student who is selected for jury duty or subpoenaed as a witness or other designation for a court case will be granted time off for the time spent in court. A copy of the notice must be submitted to school officials. It is the student’s responsibility to complete all educational assignments that was covered during the absence.

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Sexual Harassment	Policy Number: 51
Original Date: 1/03	Revision Date: 6/13
Last Review Date: 6/17	

The purpose of this policy is to provide students of ACMH an educational environment that is free from unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct or communications deemed to constitute sexual harassment under federal and state laws, regulations, and guidelines.

ACMH will not tolerate educational/workplace sexual harassment and it will be grounds for discipline up to and including dismissal.

Equal Employment Opportunity Commission guidelines define sexual harassment as follows:

Unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when:

1. submission to such conduct is made explicitly or implicitly a term or condition of an individual's education
2. submission to or rejection of such conduct by an individual is used as a basis for educational/employment decisions affecting such individual, or
3. such conduct has the purpose or effect of unreasonably interfering with an individual's educational performance or creating an intimidating, hostile, or offensive working environment (29 C.F.R. 1604.11)

PROCEDURE

1. Any student who feels he or she is the victim of any form of sexual harassment shall file a written complaint with the hospital as soon as possible after the occurrence of the incident by taking one or both of the following actions:
 - A. Inform the harasser that the conduct is offensive and must stop,
 - B. Report the conduct in writing to the program's officials or to the hospital's Human Resource Department.
2. All complaints of sexual harassment will be investigated promptly in as confidential a manner as possible.
3. There will be no discrimination or retaliation against an individual who lodges a sexual harassment complaint.
4. Any student and/or employee, who are found after investigation, to have engaged in sexual harassment, will be subjected to appropriate disciplinary action up to and including dismissal.

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Clinical Observation Sites Summary Guidelines	Policy Number: 52
Original Date: 1/03	Revision Date: 3/04, 6/05, 6/10, 7/12
Last Review Date: 6/17	

In the second year of education, a student will be scheduled in the clinical observation sites of Positron Emission Tomography and Pain Clinic. A typed student summary must be submitted within two weeks following the student's observation in these areas since an evaluation is not required. Positron Emission Tomography and Pain Clinic are observation areas.

The format for the summary is:

1. The summary should include the student's name, area of observation, and the date in which this observation took place.
2. Include the name of the technologist observed.

3. Is there prep for the individual examinations observed? Include the type of examination and the prep for each if warranted.
4. Describe the basic procedures. Some research may be required to demonstrate understanding of basic principles of the specialty area.
5. State the uniqueness of the examinations performed compared to other imaging modes.
6. Are there contrast agents used? If yes, what are they?
7. What do the tests in the clinical observation site determine or treat?
8. Are there any screening procedures done for the clinical observation site prior to the start of the exam? (specific questions asked for specific examinations)

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Critical Thinking	Policy Number: 53
Original Date: 12/1/03	Revision Date: 11/08, 6/16, 7/17
Last Review Date: 7/17	

Critical thinking and problem-solving skills are promoted throughout the student's education. These skills are developed utilizing various methods, but are not limited to the following.

- Essay questions on tests
- Calculating answers for word problems during Physics and Radiation Exposure courses
- Oral reports
- Completing a six page typed report on a topic relating to radiology
- Performing simulations for which a student must chose a patient scenario at random
- Performing in the clinical area where the student is exposed to all types of patients and situations, many for which procedures must be modified
- Performing in Central Core (Film Room) which gives the student experience in working closely with the radiologists and organizing the flow of patients through the department.
- Analyzing radiographic images for diagnostic quality and knowing how to amend, if warranted.

These skills are recognizable through test scores (didactic and clinical), performance appraisals, Registry scores, and employer surveys.

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Radiation Safety and Monitoring of Students	Policy Number: 54
Original Date: 10/96	Revision Date: 5/99, 12/01, 5/02, 4/11, 4/16, 6/16, 6/17
Last Review Date: 6/17	

A radiation monitoring badge is issued to each student at the onset of their education. This badge should be worn at collar level, facing forward toward the radiation source, and outside the lead apron during all clinical assignments. It is suggested that monitoring badges be left in the student’s locker at the end of each day for these badges are to monitor occupational radiation exposure only. If a badge is lost, a spare badge will be assigned to the student. It is the responsibility of each student to return the previous month’s badge and receive a new badge at the beginning of each month. The previous month’s monitoring device is returned to the dosimeter company monthly with the appropriate control monitor and exposure is determined.

Permanent records of all radiation exposure to the students are kept on file in the office of the hospital’s radiation physicist (Radiation Safety Officer), as well as the program official’s office. When the monthly radiation monitoring exposure reports are received by the educational coordinator from the radiation physicist after being reviewed by the Radiation Safety Officer, the readings are made known to the student. Each student must indicate their knowledge of their exposure by signing and dating Form #120 (Verification of Knowledge of Radiation Dosimetry Report) for each monthly report. If the Radiation Safety Officer determines that a monthly dosage is high, the physicist investigates, talks to the affected student, and the case is brought before the Radiation Safety committee. If the dosage exceeds the permissible monthly allowance, based on 125 mrem/quarter, the Radiation Safety Officer submits a report of this and his investigation to the Radiation Safety Committee. Recommendations from the Radiation Safety Officer will be followed.

Our department follows the ALARA principle at all times, which means maintaining radiation exposures to “*as low as reasonably achievable*”. In support of this principle, no student is permitted, under any circumstance, to hold an image receptor or a patient during any radiographic procedure.

Personal radiation protective equipment is located in the Imaging Services department for use in all radiographic and fluoroscopy rooms, operating rooms, and for mobile imaging. Students are instructed at the onset of education, prior to clinical assignments, as to the proper use of this equipment. All personal radiation protective equipment is checked periodically by the Radiation Safety Officer to ensure the safety of all radiation workers, healthcare personnel, and the general public. The students **must** wear protective radiation apparel during all mobile and fluoroscopy procedures.

**ARMSTRONG COUNTY MEMORIAL HOSPITAL
SCHOOL OF RADIOLOGIC TECHNOLOGY
POLICY AND PROCEDURE MANUAL**

Policy Title: Portable Electronic Communication Device Use	Policy Number: 55
Original Date: 3/07	Revision Date: 7/10, 6/16, 7/17
Last Review Date: 7/17	

The purpose of this policy is to establish guidelines regarding the usage of portable electronic communication devices (PECD) by ACMH School of Radiologic Technology students. The purpose of this policy is not to prohibit students from using these electronic devices, but rather to instruct the students on when such devices may be used in regard to their educational assignments.

PECDs include cell phones, pagers, and any other hand held device that does any of the following: makes or receives phone calls, leaves messages, sends or receives text messages, accesses the internet, allows for the accessing of e-mail, has a camera function, or other electronic data.

During the times of clinical assignments and didactic instruction, students are prohibited from using a PECD unless one of the following applies: 1) usage of the PECD is required because of an emergency; 2) the student has received permission from school officials to use the PECD and the communication does not interfere with their educational assignments or instruction; or 3) the student is in a lobby and reception areas, waiting rooms, cafeteria and break rooms, or hallways, except where otherwise posted, provided proper respect and etiquette is observed so as to not disturb patients, visitors, or other staff members.

Proper etiquette for cellular phone use within the hospital:

- A. Do not, under any circumstances, distract from the care of a patient to answer a PECD. The number will be stored on the device and may be called accessed after the patient's needs have been attended to.
- B. When using a PECD, as with any telephone, proper etiquette and respect must be observed to prevent disturbing patients and other staff members. When using a PECD in common areas, a location should be chosen for a discussion that does not disturb others.
- C. Use common sense in regard to PECD use and etiquette.

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Certification Eligibility Requirements	Policy Number: 60
Original Date: 10/11	Revision Date: 7/17
Last Review Date: 7/17	

Every candidate for the American Registry of Radiologic Technologists (ARRT) Certification must be an individual of good moral character and must not have engaged in conduct that is inconsistent with the ARRT Rules of Ethics. The candidate must “agree to comply with the ARRT Rules and Regulations and the ARRT Standards of Ethics”. The ARRT will investigate all potential violations in order to determine eligibility. These issues include convictions, criminal procedures, or military court martial as described below.

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

Juvenile convictions processed in juvenile court and minor traffic citations, not including drugs and alcohol, do not need to be reported.

If there are any concerns in regard to past history in this matter and ARRT examination eligibility, a pre-application should be submitted to the ARRT. This ethics review pre-application is reserved for those who:

- Are not yet enrolled in an ARRT recognized educational program
- Enrolled in an ARRT recognized educational program and are at least 6 months away from graduation.

This pre-application can be found on the ARRT website at www.arrt.org/pdfs/Ethics/Ethics-Review-Pre-Application.pdf.

Frequently asked questions in regard to ethics and eligibility determination can be found at www.arrt.org/FAQ/Ethics.

The ARRT Ethics Requirements can also be located at www.arrt.org/about-the-profession/arrt-certification-and-registration/requirements/ethics.

The ARRT Rules and Regulations can be found on the ARRT website at www.arrt.org.

Once ethics eligibility is established, the candidate proceeds with the application for certification. When completing the Application for Certification for the ARRT examination, certain questions must be answered by the applicant. These questions include:

- Have you ever been convicted of a misdemeanor, felony, or a similar offense in a military court martial?
- Have you had any license, registration, or certification denied, revoked, suspended, placed on probation, or subjected to discipline by a regulatory authority or certification board (other than the ARRT)?
- Have you ever been suspended, dismissed, or expelled from an educational program that you attended in order to meet ARRT certification requirements? (All applicants must read and sign the “Written Consent under FERPA” on the application. This waives confidentiality of education records and releases educational records for the purposes of review of ARRT application).

The ARRT website is the source of this policy’s content. For more complete description of this subject matter can be obtained at www.arrt.org.

ARRT STANDARDS OF ETHICS

Part 1 – Code of Ethics

This is a guide by which Certificate Holders and Candidates evaluate their professional conduct as it relates to patients, healthcare consumers, employers, colleagues, and other members of the healthcare team.

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 sex, race, creed, religion, or socio-economic status.
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 situation; 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.

Part 2 – Rules of Ethics

These standards are mandatory and enforceable.

1. Employing fraud or deceit in procuring or attempting to procure, maintain, renew, or obtain technology; or a state permit, license, or registration certificate to practice radiologic technology. This includes altering in any respect any document issued by the ARRT or any state or federal agency, or by indicating in writing certification or registration with the ARRT when that is not the case.
2. Subverting or attempting to subvert ARRT's examination process. Conduct that subverts or attempts to subvert ARRT's examination process includes, but is not limited to:
 - a. disclosing examination information using language that is substantially similar to that used in questions and/or answers from ARRT examinations when such information is gained as a direct result of having been an examinee; this includes, but is not limited to, disclosures to students in educational programs, graduates of educational programs, educators, or anyone else involved in the preparation of Candidates to sit for the examinations; and/or
 - b. receiving examination information that uses language that is substantially similar to that used in questions and/or answers on ARRT examinations from an examinee, whether requested or not; and/or
 - c. copying, publishing, reconstructing (whether by memory or otherwise), reproducing or transmitting any portion of examination 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 or any other individual for the purpose of reconstructing any portion of examination materials and/or
 - d. using or purporting to use any portion of examination materials that were obtained improperly or without authorization for the purpose of instructing or preparing any Candidate for examination or certification; and/or
 - e. selling or offering to sell, buying or offering to buy, or distributing or offering to distribute any portion of examination materials without authorization; and/or
 - f. removing or attempting to remove examination materials from an examination room, or having unauthorized possession of any portion of or information concerning a future, current, or previously administered examination of ARRT; and/or
 - g. disclosing what purports 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 of ARRT; and/or
 - h. communicating with another individual during administration of the examination for the purpose of giving or receiving help in answering examination questions, copying another Candidate's answers, permitting another Candidate to copy one's answers, or possessing unauthorized materials including, but not limited to, notes; and/or
 - i. impersonating a Candidate or permitting an impersonator to take or attempt to take the examination on one's own behalf; and/or

j. the use of any other means that potentially alters the results of the examination such that the results may not accurately represent the professional knowledge base of a Candidate.

3. Convictions, criminal proceedings, or military court martials as described below:

- a. conviction of a crime, including a felony, a gross misdemeanor, or a misdemeanor, with the sole exception of speeding and parking violations. All alcohol and/or drug related violations must be reported. Offenses that occurred while a juvenile and that are processed through the juvenile court system are not required to be reported to ARRT.
- b. 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 a plea of guilty or nolo contendere (no contest); or where the individual enters into a pre-trial diversion activity.
- c. military court-martials related to any offense identified in these Rules of Ethics.

4. Violating a rule adopted by a state or federal regulatory authority or certification board resulting in the individual's license, permit, registration or certification being denied, revoked, suspended, placed on probation, or subjected to any conditions, or failing to report to ARRT any of the violations or actions identified in this Rule.

5. 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).

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

- a. 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;
- b. 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.

7. 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.

8. 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.

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

10. 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.

11. 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, that results in the termination of employment.

12. Revealing a privileged communication from or relating to a former or current patient, except when otherwise required or permitted by law, or using or releasing confidential patient information in violation of HIPAA.

13. 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.

14. 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.

15. Knowingly assisting, advising, or allowing a person without a current and appropriate state permit, license, or registration certificate or a current certificate of registration with ARRT to engage in the practice of radiologic technology, in a jurisdiction which requires a person to have such a current and appropriate state permit, license, or registration certificate or a current and appropriate registration of certification with ARRT in order to practice radiologic technology in such jurisdiction.

16. Violating a state or federal narcotics or controlled substance law.

17. Knowingly providing false or misleading information that is directly related to the care of a former or current patient.

18. Subverting, attempting to subvert, or aiding others to subvert or attempt to subvert ARRT's Continuing Education (CE) Requirements for Renewal of Registration. Conduct that subverts or attempts to includes, but is not limited to:

- a. providing false, inaccurate, altered, or deceptive information related to CE activities to ARRT or an ARRT recognized CE record keeper;
- b. assisting others to provide false, inaccurate, altered, or deceptive information related to CE activities to ARRT or an ARRT recognized CE record keeper;
- c. conduct that results or could result in a false or deceptive report of CE completion; or
- d. conduct that in any way compromises the integrity of the CE Requirements such as sharing answers to the post-tests or CE self-learning activities, providing or using false certificates of participation, or verifying CE credits that were not earned.

19. Subverting or attempting to subvert the ARRT certification or registration process by:

- a. making a false statement or knowingly providing false information to ARRT; or
- b. failing to cooperate with any investigation by the ARRT.

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

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 the ARRT.

22. Failing to immediately report to his or her 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 injury.

Reference - www.arrt.org

The ARRT Standards of Ethics along with the ASRT Code of Ethics are reviewed in the Orientation to Radiography class.

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Military Leave	Policy Number: 63
Original Date: 11/13	Revision Date: 7/17
Last Review Date: 7/17	

The Armstrong County Memorial Hospital School of Radiologic Technology supports the military services of the United States government and provides the following provisions for students during their enrollment in our program. A written request must be made to program officials for each of the following circumstances to include reason, dates, and student’s signature.

Students will be allotted time to fulfill drill requirements, if the drills are scheduled during the student’s clinical and didactic educational assignments. This time will not be held against the student, as it does not need to be made up. The student is responsible for all didactic and clinical course materials presented during absent time.

Students serving in any branch of the U.S. Military Armed Forces, Reserves, or National Guard are allotted 2 calendar weeks of short-term leave of absence per academic year to fulfill their required military commitment (such as for annual training). These 2 calendar weeks include 5 eight hour days and 5 days of didactic instruction (total of 16 hours). Students who miss additional time due to military service will be required to utilize personal time or arrange an acceptable time frame in which to make up the hours missed. This will assure the fulfillment of the program’s requirements. Make up time is subject to the discretion and upon approval of the program officials.

The student is responsible for all didactic and clinical course materials presented during their absences related to military service. All missed assignments will be made up on site. The student must present to program officials written verification of attendance of military obligations from military personnel.

In the event that a student is called to active duty, the student can be re-enrolled upon completion of their active duty assignment. When the military leave of absence extends beyond a twelve calendar week period, the student will be placed in a deferred status. In the deferred status, the student may be reinstated into the next equivalent class (When leave begins during first year, the student is reinstated into the first year class the following year. When the leave begins during the second year, the student is reinstated into the second year

class the following year) and the program does not exceed capacity. When applying for re-enrollment the following criteria must be met:

1. The student will meet the admission criteria as stated by the ACMH Hospital School of Radiologic Technology
2. Application for readmission is made within 90 days after the release from active military duty.
3. The program receives written documentation of the dates of active military service.
4. All clinical and didactic grading will start over for the year.
5. The student will pay the same tuition as the class they are entering.

The Veteran’s Administration will be notified immediately when a veteran student is granted a leave of absence.

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Armstrong Orthopedics Associates – Clinical Setting - Guidelines	Policy Number: 64
Original Date: 4/14	Revision Date: 6/15, 7/17
Last Review Date: 7/17	

Armstrong Orthopedics Associates (AOA), a satellite of Armstrong County Memorial Hospital, was approved by the JRCERT as a clinical setting for the radiography program in November of 2013. A Memorandum of Understanding between the program and this clinical setting is in place. A JRCERT approved clinical evaluator is on site.

Students are scheduled at AOA in the following manner. During the second half of the first year of education, students will be scheduled 8:00 a.m. to 4:30 p.m. on Tuesdays, Thursdays, and Fridays when in the clinical area. During the first half of the second year, students will be scheduled 8:00 a.m. to 4:30 p.m. on Mondays, Wednesdays, and Fridays when in the clinical area. When scheduled at the Armstrong Orthopedics Associates, the students will follow the policies and procedures found in their policy and procedure manual and the policies and procedures of AOA.

During their clinical rotation through this clinical setting, the students will obtain performance appraisals from the clinical evaluator. The student may also obtain clinical check-offs, graded simulations, and clinical competency evaluations. So that evaluations remain consistent between AOA and ACMH Hospital, the following examinations are those that may be evaluated while scheduled at AOA.

- Finger (3 views)
- Hand (3 views)
- Forearm (2 views)
- Humerus (2 views)
- Foot (3 views)
- Ankle (3 views)
- Tibia/fibula (2 views)
- Femur (2 views)

- Hip (2 views)
- Cervical spine (5 views)
- Thoracic spine (3 views)
- Lumbar spine (5 views)

As with all graded clinical evaluations, the final approval is that of the Clinical Coordinator or the Educational Coordinator.

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Social Media	Policy Number: 65
Original Date: 7/14	Revision Date: 7/17
Last Review Date: 7/17	

ACMH School of Radiologic Technology urges all students to be conscious and careful when using social media (such as Facebook, YouTube, Twitter, Instagram, etc). Students need to remember that everyone can see and read what is placed on a site. At present, there is no way to erase digital content. Inappropriate use can diminish a personal reputation as well as the reputation of the hospital, the program, and the community.

False and defamatory comments spoken and heard are referred to as slander. When these comments are written and published, they are called libel. Slander and libel are referred to as defamation. Legal action can be taken when inappropriate written or spoken content is published and confidentiality has been compromised.

When information relating to your clinical site and activities, fellow students, the technologists, patients or their family members, instructors, and the content of the didactic course is posted, this is considered an ethical breach of confidentiality. This would be a violation of HIPAA and Standard of Ethics of which you are to abide.

Extreme caution is advised when mixing professional and personal information through the use of social media.
Rule of thumb to follow: If you have doubts, do not post!

- Activities, which occur during clinical rotations, and have to do with patients are considered private information and should never be shared through social media or any other means.
- Students should refrain from making derogatory or defaming comments about the hospital, program, fellow students, technologists, and instructors.
- Nothing should be posted that would violate FERPA (student privacy) and HIPAA (patient privacy) regulations.
- Use of the camera function of Portable Electronic Communication Devices (PECD) in the educational setting or on ACMH property is prohibited and can result in dismissal from the program. This is a HIPAA violation. The use of the camera function is prohibited per the Portable Electronic Communication Device Use Policy (Policy #55).

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Work Stoppage/Strike Policy	Policy Number: 66
Original Date: 12/14	Revision Date:
Last Review Date 7/17	

The clinical education portion of the program shall provide an environment of direct and/or indirect supervision for competency-based clinical education and experience as stated in the Joint Review Committee on Education of Radiologic Technology (JRCERT) Standards. In the event of a job action, work stoppage, or strike, which cannot accommodate the 1:1 registered technologist to student ratio, the students will not be present for their clinical assignments. The students will be notified by program officials for further instructions in regard to their educational assignments.

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: MR Safety Policy	Policy Number: 67
Original Date: 3/16	Revision Date:
Last Review Date: 7/17	

While enrolled in the Armstrong County Memorial Hospital School of Radiologic Technology, the student will participate in a clinical rotation in the MRI (Magnetic Resonance Imaging) department. During their education, a student may also be asked to assist in transferring a patient to and from the MRI imaging table.

At the onset of their education and prior to exposure to the MRI suite, the student must complete the following:

- The MRI Safety presentation
- The MRI Safety Screening Form for the radiography student (Form #108)
- Tour and overview of the MRI suite by MRI personnel

The MRI Safety Training presentation is conducted by the Educational Coordinator and/or the Safety Officer of the hospital. Completion of the MRI Safety Form (Form #108) for the radiography student will supply an evaluation to determine the safety of permitting the student into the Zone IV environment of the MRI suite. Zone I of the MRI suite is the MRI waiting room, where there are no restrictions and accessible to the general public. Zone II includes the MRI office and is the interface between Zone I and Zones III and IV. Zone III includes the control room and the equipment room, which are restricted to personnel under MR supervision. Zone IV is the MR scanning room, which contains the magnet and is strictly restricted to personnel and patients under MR supervision. Through the review of the safety form by the program director and MRI personnel, any questions or concerns regarding the student's ability to enter a magnetic field will be addressed. If a student is not cleared to enter Zone IV, the Educational Coordinator will notify the student and accommodations will be made to the MRI clinical rotation.

It is the responsibility of the student to report to program officials, any trauma, activity, procedure or surgery in which ferromagnetic materials/device may have become introduced or on them anytime after completion of the MRI Safety Form for the radiography student (Form #108). If a student has ever worked with metal or has

gotten any metal in their eyes, radiographic imaging will need to be obtained of their orbits to screen for metal. These radiographic images will need to be obtained if there are any additional eye exposures to metal.

The students will not enter Zone IV of the MRI suite, unless at least one of the MRI technologists is present and aware of the student’s presence in the area. The student must adhere to all MRI safety policies and procedures during clinical rotation as well as assisting in the MRI suite.

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Academic Assistance and Accommodations	Policy Number: 68
Original Date: 2/16	Revision Date:
Last Review Date: 7/17	

The School of Radiologic Technology at Armstrong County Memorial Hospital is foremost concerned with student achievement and successful completion of the program.

One of the academic goals that the program has for the students is that the students take responsibility for their own development and seek out the means for continuous improvement throughout their education and careers. The student has an ongoing awareness of their didactic and clinical scores and progress, as these are documented and provided to the student on a quarterly basis, as well as on graded didactic assessments. The students may request their overall clinical and didactic scores at any time. The program officials are readily available to assist the students to meet the academic goals and will provide academic assistance to students who request it. A few tips to assist the student towards being successful may include but not limited to:

- Seek help from the instructor
- Utilize a study partner
- Practice tests
- Take advantage of textbooks and online study guides
- Monitoring progress

Reasonable accommodations can be provided to students having a documented disability.

The student is responsible for contacting program officials and making requests for any accommodations. The student must provide documentation by a licensed or certified professional that identifies the disability or medical condition and describes the limits it imposes. This information must be current (no more than 2 years old). Appropriate accommodations are individually based upon the identified need.

Some of the services that can be made available may include:

- Extended time for examinations
- Extended time for in-class assignments
- Taped lectures
- Note taking assistance
- Assistive technology
- Taped textbooks

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Financial Aid	Policy Number: 70
Original Date: 7/16	Revision Date:
Last Review Date: 7/17	

Armstrong County Memorial Hospital School of Radiologic Technology does not participate in the Department of Education student loan programs (i.e. Title IV funding, PHEAA loans). However, for those students who are enrolled at Clarion University of Pennsylvania in the Bachelor of Medical Imaging Sciences course of study and are attending Armstrong County Memorial Hospital School of Radiologic Technology for the clinical portion of the degree, these students will be afforded all of the financial aid that is available to them as a continuing student of Clarion University. The student will maintain student status at Clarion University while attending Armstrong County Memorial Hospital School of Radiologic Technology, thus making the student eligible for tuition assistance through the university. Through the *Agreement to Process Financial Aid* between Armstrong County Memorial Hospital School of Radiologic Technology and Clarion University of Pennsylvania, the university will “calculate and disperse for which students may be eligible including federal, state and/or university funds.”

Students who are enrolled in the Bachelor of Science in Medical Imaging at Bloomsburg University of Pennsylvania and attending ACMH as their clinical site will have their financial aid processed through the university. The clinical site will complete a Consortium Agreement supplied by the university for each individual student; the university will then process/authorize disbursement of all federal aid. Students enrolled in the Associate of Science degree (Technical Trades: Radiologic Technology) at Butler County Community College with ACMH as the clinical site, will have their financial aid processed through BC3.

If qualified, applicants and students may obtain financial assistance from the Veterans Administration (VA). Scholarships and personal loans may also be applied to cover the costs of the student’s education.

Armstrong County Memorial Hospital School of Radiologic Technology’s “Lab Fee/Tuition” policy (Policy #9) is the guideline for making payments to the program. Each payment will be tabulated on specified forms by the Educational Coordinator. A receipt and a copy of the payment plan will be made available to the student with each payment. This enables the student to be aware of the amount, which has been paid and the balance of the lab fee/tuition.

All lab fees/tuition and fees must be finalized prior to graduation.

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Student Services and Resources	Policy Number: 72
Original Date: 11/16	Revision Date: 7/17
Last Review Date: 6/17	

Lockers

Lockers are provided for the students. These lockers are located within restroom facilities in the basement of the hospital. These lockers are in close proximity to the student’s home timekeeper terminal and the radiology classroom. It is suggested that a lock be used on the locker.

Parking

As students of Armstrong County Memorial Hospital, the students are to park in a designated employee parking area, Parking Lot # 9. This lot gives the students easy access to their locker room and classroom. The students will be issued parking tags to hang in the rearview mirror of their vehicle, which indicates they are considered as an employee for parking purposes.

Computer Lab

The hospital’s computer lab is available to the students for educational purposes. When the computer lab is not scheduled for a class or hospital instruction, the students are permitted to utilize the computers in the lab. Initial use of the computers in the lab is made through request to the program officials. This is for the establishment of log ins and passwords.

Grounds

There are multiple seating areas and picnic tables located outside of the hospital, but on the hospital grounds, that are available to the students. These areas can be utilized for studying before and after classes and lunch and supper breaks.

Chapel / Meditation Room

The hospital chapel is located on the third floor of the hospital and is open 24 hours per day. This chapel may be utilized for quiet reflection.

Employee Health Services

The employee health nurse of ACMH will administer the immunizations to the students who are found to be non immune through screenings prior to the onset of education. These are provided free of charge to the students along with the annual influenza vaccination. The employee health nurse will also provide the annual fitting of the N95 mask.

If an injury occurs in the hospital during educational hours, the student will be referred to the employee health department. The nurse will then decide if the student should seek further treatment in the emergency department.

ARMSTRONG COUNTY MEMORIAL HOSPITAL SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY AND PROCEDURE MANUAL	
Policy Title: Clinical Lab Syllabus	Policy Number: 73
Original Date: 7/17	Revision Date:
Last Review Date: 7/17	

Clinical Lab Syllabus

- Anatomy and positioning of each radiographic exam will be introduced in the didactic setting to include:
 - Routine views
 - Special views
 - Adjustments for incorrect positioning, traumatized or non-routine patients, and pediatric or geriatric patient status
- Positioning of exams will be reviewed in the laboratory setting
- After the demonstration of an exam is introduced in the laboratory setting, students will verify their understanding of basic positioning skills by demonstrating how to perform the exam back to instructors. This is signed off on clinical log sheets by the instructor.
- Students will obtain 4 clinical experiences for each exam, which are signed off by the technologist in the room
- Students may not perform clinical simulations or clinical competencies until they have passed the didactic final exam for the class in which the exams are taught
- Until a student demonstrates competency on the exam, they must be under direct supervision by a technologist

Objectives:

- Define standard anatomy and positioning terms
- Explain the purpose of performing the radiographic exam
- Demonstrate proper positioning, including the use of positioning aids as needed
- Demonstrate consideration for the needs of the patient pertaining to their condition
- Simulate the exam on a mock patient or phantom in the laboratory setting
- Perform a competency on the exam on a patient when possible (mock patients and phantoms may be used when insufficient numbers of exams has been indicated with an asterisk)

Term 1 (Quarter 1 of first year – onset of education to September 30)

Chest, Abdomen, and Upper Extremity anatomy and positioning is introduced.

- Positioning of exams will be reviewed in the laboratory setting
- Exams covered:
 - Routine chest
 - Portable chest
 - Cart / Stretcher chest
 - Pigg-o-stat chest
 - Supine abdomen (KUB, FPA)
 - Portable abdomen
 - Erect abdomen
 - Abdomen decubitus

- Fingers
- Hand
- Wrist
- Forearm
- Elbow
- Humerus

Term 2 (Quarter 2 of first year – October 1 to December 31)

Lower extremity, shoulder girdle, and pelvic girdle anatomy and positioning are introduced.

- Positioning of exams will be reviewed in the laboratory setting
- Exams covered:
 - Foot
 - Ankle
 - Tibia / Fibula
 - Knee
 - Patella
 - Femur
 - Shoulder
 - AC joints
 - Clavicle
 - Scapula
 - Pelvis
 - Hip
 - Cross-table hip

Term 3 (Quarter 3 of first year – January 1 to March 31)

Vertebral column, bony thorax, and skull anatomy and positioning are introduced.

- Positioning of exams will be reviewed in the laboratory setting
- Exams covered:
 - Cervical spine
 - Thoracic spine
 - Lumbar spine
 - Cross-table spine
 - Sacroiliac joints
 - Sacrum/Coccyx
 - Sternum
 - Ribs
 - Routine skull

Term 5 (Quarter 1 of second year – July 1 to September 30)

Digestive, special skull, and urinary anatomy and positioning are introduced.

- Positioning of exams will be reviewed in the laboratory setting
- Exams covered:
 - Upper gastrointestinal series
 - Small bowel series
 - Contrast enema
 - Esophagram
 - Orbits

- Facial bones
- Nasal bones
- Zygomatic arches
- Mandible
- Temporomandibular joints
- Intravenous Pyelogram

Unenhanced CT exams of the head, chest, and abdomen are introduced via observation during three rotations in the first year of training. Cross-sectional anatomy is taught during the designated class on the particular body system. Students will obtain 4 clinical experiences, perform a clinical simulation, and demonstrate competency during a rotation in their second year of training, consisting of three consecutive weeks in CT.