CT/MRI Program
Class Schedule

Fall Semester:
RAD 364-3 credit hours-CT Technology
RAD 374-3 credit hours-Sectional Anatomy and Imaging Applications
RAD 384-4 credit hours-MRI Technology
RAD 394-3 credit hours-MRI and CT Pathology
**FINAL EXAMS: During finals week**

Spring Semester:
RAD 404-10 credit hours-MRI and CT Clinical Internship I
RAD 414-2 credit hours-Special Studies in MRI and CT
**FINAL EXAMS: During finals week**

Summer Semester:
RAD 424-4 credit hours-MRI and CT Clinical Internship II
RAD 434-2 credit hours-Seminar in MRI and CT
**FINAL EXAMS: During finals week**

Holidays:
September-Labor Day
November-Thanksgiving Break
March-Spring Break
May-Memorial Day
July-Fourth of July
Southern Illinois University  
CT/MRI Program  
Mission, Goals, and Description

Mission:

The mission of the MRI/CT Program at Southern Illinois University Carbondale is to provide a quality program integrating education, research and service in order to meet the needs of the profession and improve health care of the people and communities we serve.

Program Goals:

1. Prepare the student to practice as a competent entry-level professional MRI/CT technologist by offering a balanced curriculum and quality didactic and clinical instruction.

2. Provide didactic and clinical experiences that lead to research in educational, professional, or health care issues relating to MRI and CT.

3. Provide avenues to students for professional development and growth within the profession.

4. Provide avenues for students to develop and apply skills in effective communication necessary for successful MRI and CT practice.

5. Provide avenues for students to develop and apply skills in critical thinking and in problem solving necessary for successful MRI and CT practice.

6. Provide a clinical and didactic environment that leads to the development of clinical skills and competence appropriate to an entry-level MRI/CT technologist.

Program Description:

The Magnetic Resonance Imaging and Computed Tomography specialization option is offered during the fourth year in our Radiologic Sciences bachelor's degree program.

This specialization emphasizes the physics, technology, instrumentation, sectional anatomy, and pathologies common in MRI and CT. Upon completion of the program students are prepared to challenge the national registry examinations offered by The American Registry of Radiologic Technologists. Technologists employed in these specialty areas will be supervised by a board certified radiologist, but will be afforded a greater amount of responsibility and independence in the performance of their duties.

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

CHAPTER 1 – Introduction........................................................................................................8-19
  1. Welcome and Purpose of Handbook
  2. Mission and Focus Statements
     SIUC Focus Statement
     ASA Mission Statement
     Radiologic Sciences Program Mission Statement
     Radiologic Sciences Program Objectives
     MRI / CT Program Mission Statement
  3. Professional Organizations and Opportunities
     Career Mobility
  4. Professional Ethics
     ARRT Standards of Ethics
     Rules of Ethics
  5. ASRT – Magnetic Resonance Technologist Scope of Practice
  6. ASRT – Computed Tomography Technologist Scope of Practice
  7. SIUC University Student Conduct Code

CHAPTER 2 - Student Information..........................................................................................20-38
  1. Clinical Site Assignments
     Hospital Orientation
     Clinical Drug Screen
     Criminal Background Screening
  2. School Calendar
  3. Student Expenses
     Books
     Criminal Background Check
     Drug Screening
     Housing
     Influenza (Flu) Shot
     Liability Insurance
     Transportation
     Tuition
     Uniforms
  4. RADS Program Dress Code
  5. Student Records
  6. Student Health Program
     RADS Health Record
  7. Grading System
  8. Film Badge Return
  9. Library Privileges
 10. Registry Exams
 11. Attendance Policy
     Inclement Weather Policy
     Request for Time Off
     Bereavement Leave
     Financial Aid Day
 12. University Holidays
13. Communicable/Infectious Disease Policy
14. Insurance, Accidents and Incidents
15. Medical Insurance
16. Incidents and Accidents
17. Student Grievance Procedures
18. Academic Grievance
19. Academic Probation and Suspension
20. University Policy Concerning Sexual harassment

CHAPTER 3 - Professional Behavior.................................................................39-43
  1. General Statement
  2. Steps in Professional Behavior
  3. HIPAA
  5. Pregnant MRI/CT Student

CHAPTER 4 - Clinical Education.................................................................44-48
  1. Clinic Hours
  2. Clinic Exams
  3. Student Evaluation of Clinical Experience
  4. Clinic Education Requirements
  5. Clinic Radiation Protection Rules
  6. Student Supervision
  7. Clinic Rotation Assignments

APPENDIX A: Professional Ethics.................................................................48
  ARRT Standards of Ethics
  Magnetic Resonance Technologist Scope of Practice
  Computed Tomography Technologist Scope of Practice

APPENDIX B: SIUC Student Conduct Code....................................................54
  Acts of Academic Dishonesty
  Acts of Social Misconduct
  Sanctions and Conditions

APPENDIX C: Hospital and Department Orientations.....................................59
  Hospital Orientation
  Clinical Drug Screen
  Criminal Background Check
  Radiology Department Orientation (Form)

APPENDIX D: Grievance Procedures..............................................................64
  Academic Grievance
  Clinical Grievance
  Student Grievance Appeal
  Clinical Supervisor Grievance Appeal
  Unsatisfactory Progress
    Academic Probation and Suspension
Clinical Probation and Suspension

APPENDIX E: University Policy--Sexual Harassment .......................................................... 74

APPENDIX F: Infectious Disease Policies ........................................................................... 82
    SIUC Policy Statement on AIDS
    School of Allied Health & RADS Policy

APPENDIX G: Incident Report Form .................................................................................. 90
    Instructions for Completing University Injury Report
    Report of University Injury/Incident/Hazard
    Report of Injury/Incident/Hazard
    Bloodborne Pathogens Exposure Report

APPENDIX H: MRI Safety Policy ...................................................................................... 94

APPENDIX I: Health Claims to Student Health Center ...................................................... 96
    Submitting a Claim to University Health Services

APPENDIX J: Pregnancy Policy
    Pregnancy MRI/CT Student
    SIUC RADS Pregnancy Policy
    Pregnancy Status Declaration (Form)

APPENDIX K: Liability Insurance ................................................................................ .... 104

APPENDIX L: Clinic Internship Evaluation Form ................................................................. 106
    End of Clinic Rotation Evaluation Form

APPENDIX M: MRI/CT Student Health Record .................................................................. 109
    MRI/CT Student Health Record Form

APPENDIX N: Clinical Performance Evaluations ............................................................... 114

APPENDIX O: Understanding the Clinic Handbook ............................................................ 117

APPENDIX P: Daily Log Sheets and Competency Sheets .................................................. 119

APPENDIX Q: Additional Information ................................................................................ 120

SYLLABI ............................................................................................................................. 114
    RAD 404 – MRI and CT Clinical Internship I
    RAD 414 – Special Studies in MRI and CT
    RAD 424 – MRI and CT Clinical Internship II
    RAD 434 – Seminar in MRI and CT
    Time Sheet (Form) ........................................................................................................... 137

End of Program Evaluation Form ...................................................................................... 140
This clinical handbook consists of two separate sections: general policies common to all modalities in the Radiologic Sciences Program in the front; and, the specific clinical education policies for a specific modality in the back.

**IMPORTANT PHONE NUMBERS**

Jennifer Walker
- 618.453.8812 - Office
- (618) 453-7211 - School of Allied Health main office
- (618) 453-7020 - FAX
- jennifer.walker@siu.edu - E-mail

Mailing Address: Jennifer N. Walker M.S. Ed. RT(R)(CT)(MR)
OR
Arshia Iqbal MPA RT(R)(CT)(MR)
Clinical Instructor, Radiologic Sciences
School of Health Sciences
College of Applied Sciences and Arts
1365 Douglas Drive, Mail Code #6615
Southern Illinois University
Carbondale, IL 62901-6615

Michael Rowell, Academic Advisor
- (618) 453-8869 - office
- michael.rowell@siu.edu

Radiological Control
Matt Barnstable
- 536-2015—This is your “go to” person for film badges and radiation reports

Records
- 453-2985

Transcript Request
- 453-2976 OR 453-3109

Financial Aid
- 453-4334

**ADDRESSES AND NUMBERS TO KNOW**

American Society of Radiologic Technologists (ASRT)
1500 Central Avenue SE
Albuquerque, NM 87123-3917
Ph: (800) 444-2778 or (505) 298-4500
www.asrt.org

American Registry of Radiologic Technologists (ARRT)
1225 Northland Drive
St. Paul, MN 55120-1155
Ph.: (651) 687-0048
www.arrt.org

Joint Review Committee on Education in Radiologic Technology (JRCERT)
20 N. Wacker Drive, Suite 2850
Chicago, IL 60606-3182
Phone: (312) 704-5300 Fax: (312) 704-5304
www.jrcert.org
# SCHOOL CALENDAR

**Spring Semester 2020**
- Semester Classes Begin: January 13, 2020
- Martin Luther King Jr’s Birthday: January 20, 2020
- Spring Vacation: March 7-15, 2020
- Last Day of Spring Clinical Internship: May 1, 2020
- Finals Week: May 4-8, 2020
- Commencement: May 9, 2020

**Summer Semester 2020**
- Last Day of Clinical Internship: July 3rd, 2020

**ALL REMAINING PAPERWORK, FILM BADGE HOLDER, ETC, TO BE TURNED IN AND YOUR FILM BADGES WILL NEED TO BE MAILED IN***
  - January 20, 2020 (MLK Holiday)
  - May 27, 2020 (Memorial Day Holiday)
  - July 4, 2020 (4th of July Holiday)

**Weekly Assignments due for RAD 414, EVERY Monday an assignment is due for this class****

<table>
<thead>
<tr>
<th>WEEK</th>
<th>DATES</th>
<th>TRACT 1-MRI</th>
<th>TRACT 2-CT</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Jan 13-17</td>
<td>Select a Topic-RAD 414</td>
<td>Select a Topic-RAD 414</td>
</tr>
<tr>
<td>2</td>
<td>Jan 20-24</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Jan 27-31</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Feb 3-7</td>
<td>1st Comp Sheet Due</td>
<td>1st Comp Sheet Due</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1st MR-CPE</td>
<td>1st CT-CPE</td>
</tr>
<tr>
<td>5</td>
<td>Feb 10-14</td>
<td>RAD 414 Outline Due</td>
<td>RAD 414 Outline Due</td>
</tr>
<tr>
<td>6</td>
<td>Feb 17-21</td>
<td>Case Study Due</td>
<td>Case Study Due</td>
</tr>
<tr>
<td>7</td>
<td>Feb 24-28</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Mar 2-6</td>
<td>2nd MR-CPE</td>
<td>2nd Comp Sheet Due</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2nd Comp Sheet Due</td>
<td>2nd Comp Sheet Due</td>
</tr>
<tr>
<td>9</td>
<td>Mar 9-13</td>
<td>Spring Break</td>
<td>Spring Break</td>
</tr>
<tr>
<td>10</td>
<td>Mar 16-20</td>
<td>Time Sheet Due</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>2nd-CT CPE/CT Clinic Eval Due</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Mar 23-27</td>
<td>RAD 414 Rough Draft Due</td>
<td>TRACT 2-MRI STARTS</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>RAD 414 Rough Draft Due</td>
</tr>
<tr>
<td>12</td>
<td>Mar 30-Apr 3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Apr 6-10</td>
<td>Technical Data Due</td>
<td>Technical Data Due</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3rd Comp Sheet Due</td>
<td>3rd Comp Sheet Due</td>
</tr>
<tr>
<td>14</td>
<td>Apr 13-17</td>
<td>Time Sheet Due</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>3rd MR-CPE</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>RAD 414-PAPER DUE</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>MRI Clinic Eval Due</td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Apr 20-24</td>
<td>TRACT 1-CT STARTS</td>
<td>1st MR-CPE</td>
</tr>
<tr>
<td></td>
<td></td>
<td>ARRT Outline Due</td>
<td>ARRT Outline Due</td>
</tr>
<tr>
<td>16</td>
<td>Apr 27-May 1</td>
<td>Registry Review Tests Due</td>
<td>Registry Review Tests Due</td>
</tr>
<tr>
<td></td>
<td></td>
<td>4th Comp Sheet Due</td>
<td>4th Comp Sheet Due</td>
</tr>
<tr>
<td>17</td>
<td>May 4-8</td>
<td>FINALS WEEK</td>
<td>FINALS WEEK</td>
</tr>
<tr>
<td></td>
<td></td>
<td>MANDATORY REVIEW WEEK-TBA</td>
<td></td>
</tr>
</tbody>
</table>

**Summer 2020 Assignments:** (RAD 424 & 434)
<table>
<thead>
<tr>
<th>WEEK</th>
<th>DATES</th>
<th>TRACT 1-CT CONTINUES</th>
<th>TRACT 2-MRI CONTINUES</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>May 11-15</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>May 18-22</td>
<td>1st CT-CPE</td>
<td>2nd MRI-CPE</td>
</tr>
<tr>
<td>3</td>
<td>May 25-29</td>
<td>Case Study Due</td>
<td>Case Study Due</td>
</tr>
<tr>
<td>4</td>
<td>June 1-5</td>
<td>Comp Sheet Due</td>
<td>Comp Sheet Due</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1st Comp Sheets Due</td>
<td>1st Comp Sheets Due</td>
</tr>
<tr>
<td>5</td>
<td>June 8-12</td>
<td>Resume/Cover Letter Due</td>
<td>Resume/Cover Letter Due</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Professionalism Paper Due</td>
<td>Professionalism Paper</td>
</tr>
<tr>
<td>6</td>
<td>June 15-19</td>
<td>Technical Data Due</td>
<td>Technical Data Due</td>
</tr>
<tr>
<td>7</td>
<td>June 22-26</td>
<td>2nd CT-CPE</td>
<td>3rd MRI-CPE</td>
</tr>
<tr>
<td></td>
<td></td>
<td>ARRT Outline Due</td>
<td>ARRT Outline Due</td>
</tr>
<tr>
<td>8</td>
<td>June 29-July 3</td>
<td>Time Sheet Due</td>
<td>Time Sheet Due</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Clinical Site Evaluation</td>
<td>Clinical Site Evaluation</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Registry Review Tests Due</td>
<td>Registry Review Tests</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2nd Comp Sheets Due</td>
<td>2nd Comp Sheets Due</td>
</tr>
<tr>
<td>9</td>
<td>July 6-10</td>
<td>MAKE UP CLINICAL HOURS IF NEEDED</td>
<td>3rd Comp Sheets Due</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3rd Comp Sheets Due</td>
<td></td>
</tr>
</tbody>
</table>

***Make sure that you have turned in all assignments and end of the program things***
CHAPTER 1--INTRODUCTION AND PROGRAM GOALS

WELCOME

Welcome to the Magnetic Resonance Imaging / Computed Tomography (MRI/CT) specialization within the Radiologic Sciences Program (RADS). You are entering a paramedical career program that is interesting, diversified, and demanding. The program is designed to help you develop the knowledge and skills required to perform in a specialized area. Many subtle qualities besides knowledge and skills are required to complete the program successfully. An important personal quality that will be closely evaluated throughout your training is your ability to relate with the patient and to provide both physical and emotional support to the patient. Another quality or trait is your ability to work as part of a team and interact successfully with department and hospital personnel. The MRI/CT faculty wish you success in this specialization. We are here to assist you in pursuing your newly chosen profession.

PURPOSE OF HANDBOOK

This handbook is designed to serve as an informational guide to assist in the orientation of students new to the Radiologic Sciences Program. It serves to clarify policies and procedures governing your actions and practices as a student in the clinic setting of the MRI/CT specialization. Radiologic Sciences students are expected to be familiar with the following information.

SOUTHERN ILLINOIS UNIVERSITY FOCUS STATEMENT

Southern Illinois University Carbondale offers a full range of baccalaureate programs, is committed to graduate education through the doctoral degree, and gives high priority to research. It receives substantial federal support for research and development and annually awards a significant number of doctoral degrees balanced among selected liberal arts and sciences disciplines and professional programs. In addition to pursuing statewide goals and priorities, Southern Illinois University Carbondale:

- strives to develop the professional, social, and leadership skills expected of college students and to improve student retention and achievement;
- supports the economic, social, and cultural development of southern Illinois through appropriate undergraduate, graduate, and professional education and research;
- develops partnerships with communities, businesses, and other colleges and universities, and develops utilization of telecommunication technologies;
cultivates and sustains a commitment in research and instruction to problems and policy issues related to the region and the state’s natural resources and environment;

- strives to meet the health care needs of central and southern Illinois through appropriate health-related programs, services, and public health policy; and,

- cultivates and sustains diversity through a commitment to multiculturalism, including international programming.

MISSION STATEMENT OF THE COLLEGE OF APPLIED SCIENCES AND ARTS

The College of Applied Sciences and Arts seeks to inspire and cultivate vision through personal involvement of students with faculty toward achieving technical expertise for success in a diverse and changing society.

RADIOLOGIC SCIENCES PROGRAM MISSION STATEMENT

The faculty and staff of the Radiologic Sciences Program provide students the opportunity and resources to enable them to obtain entry-level competencies, recognizing individual differences and needs. We provide an environment that enhances critical thinking, professional behaviors, and life-long learning for the benefit of students, community and the profession.

RADIOLOGIC SCIENCES PROGRAM OBJECTIVES

To meet this Mission, the goals of the Program are:

1. To insure that all applicants have an equal opportunity to be accepted into the program.

2. To insure that all students have an equal opportunity to succeed when enrolled in the program.

3. To continually evaluate and modify curriculum requirements to comply with the Standards as defined by accrediting agencies specifically responsible for the Radiologic Sciences program and Southern Illinois University at Carbondale in general.

4. To provide the students with a course of study which will enable them to qualify to take the American Registry of Radiologic Technologists examinations in the advanced imaging modalities of MRI and CT.

5. To provide the student with accurate information concerning employment opportunities.
To provide the southern Illinois area health care facilities with a continual source of qualified MRI technologists and CT technologists.

MRI / CT PROGRAM MISSION STATEMENT:

The mission of the MRI/CT Program at Southern Illinois University Carbondale is to provide a quality program integrating education, research and service in order to meet the needs of the profession and improve health care of the people and communities we serve.

To meet this mission, the goals of the MRI/CT Program are to:

Goal 1: Prepare the student to practice as a competent entry-level professional MRI/CT technologist by offering a balanced curriculum and quality didactic and clinical instruction.

- Students will be clinically competent upon graduation.
- Graduates will pass ARRT MRI and/or CT certification exams on first attempt.
- Graduates indicate overall satisfaction with education from the program.
- Clinical Supervisors indicate graduate demonstrates essential skills and knowledge necessary to work effectively with other health care practitioners.

Goal 2: Provide didactic and clinical experiences that lead to research in educational, professional, or health care issues relating to MRI and CT.

- Students demonstrate essential skills to plan and execute research on various topics.

Goal 3: Provide avenues to students for professional development and growth within the profession.

- Graduates will become members of professional organizations.
- Graduates will maintain their CE activities to grow with the profession.

Goal 4: Provide avenues for students to develop and apply skills in effective communication necessary for successful MRI and CT practice.

- Students demonstrate effective verbal communication skills.
- Students demonstrate effective written communication skills.

Goal 5: Provide avenues for students to develop and apply skills in critical thinking for successful MRI and CT practice.

- Students demonstrate effective problem solving and critical thinking skills.
- Graduates demonstrate effective problem solving and critical thinking skills.

Goal 6: Provide avenues for students to develop and apply skills in problem solving areas necessary for successful MRI and CT practice.

- Students will be clinically competent upon graduation.
- Students demonstrate continual improvement of skills as they progress through the program.
- Students demonstrate professional development and growth as a result of didactic and clinical experiences.
PROFESSIONAL OPPORTUNITIES

Professional Organizations

In order to keep abreast with new developments and maintain a high degree of professionalism, the student enrolled in the MRI / CT specialization is strongly urged to become active in his/her professional societies and organizations.

American Registry of Radiologic Technologists (ARRT)  
1225 Northland Drive  
St. Paul, MN  55120-1155  
Ph: (651) 687-0048  
URL: www.arrt.org

Illinois State Society of Radiologic Technologists (ISSRT)  
310 W. Lake Street, Suite 111  
Elmhurst, IL  60126  
URL: www.issrt.org

American Society of Radiologic Technologists (ASRT)  
1500 Central Avenue SE  
Albuquerque, NM  87123-3917  
Ph: (800) 444-2778 or (505) 298-4500  
Fax: (505) 298-5063  
URL: www.asrt.org

Section for Magnetic Resonance Technologists (SMRT)  
2118 Milvia Street, Suite 201  
Berkeley, CA  94704  
Ph: (510) 841-1899  
Fax: (510) 841-2340  
Email: smrt@ismrm.org

American Registry of Diagnostic Medical Sonographers (ARDMS)  
51 Monroe Street, Plaza East One  
Rockville, MD  20850-2400  
Ph: (800) 541-9754  
URL: www.ardms.org

Society of Diagnostic Medical Sonographers (SDMS)  
27545 Dallas Parkway, Suite 350  
Plano, TX  75093-8730  
Ph: (214) 473-8057  (800) 229-9506

American Society of Therapeutic Radiology and Oncology (ASTRO)  
1891 Preston White Drive  
Reston, VA  20191  
Ph: (800) 962-7876, (703) 298-6760, or (703) 648-8900  
Fax: (703) 264-2443  
URL: www.astro.org

The Magnetic Resonance Imaging Program at Southern Illinois University at Carbondale is an accredited MRI Program by the Joint Review Committee on Education in Radiologic Technology (JRCERT).
Career Mobility

Radiologic Science graduates are prepared for employment in hospitals, medical centers, industry, physician's offices, and public health. Graduates may also be qualified for administration of x-ray departments or to assist in medical research.

Program graduates are not guaranteed job placement, but reasonable effort is made to assist them in finding a position. Medical imaging and therapeutic technologists are in great demand in other areas of the United States.

Many avenues for advancement within the field are available, depending on personal interests and ability. Additional education may be necessary.

These are as follows:

<table>
<thead>
<tr>
<th>Position</th>
<th>Hospital-Based Certificate</th>
<th>Associate Degree</th>
<th>Baccalaureate Degree</th>
<th>Masters Degree</th>
<th>Doctorate Degree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staff Technologist</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Advanced Modality Technologist</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PACS Manager</td>
<td>*</td>
<td>*</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chief Technologist or Supervisor</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Clinical Instructor</td>
<td>*</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Clinical Coordinator</td>
<td>*</td>
<td>*</td>
<td>X</td>
<td>X (preferred)</td>
<td></td>
</tr>
<tr>
<td>Program Director</td>
<td>*</td>
<td>*</td>
<td>*</td>
<td>X</td>
<td>X (preferred)</td>
</tr>
<tr>
<td>Imaging/Therapy Administrator</td>
<td>*</td>
<td>*</td>
<td>*</td>
<td>X</td>
<td>X (preferred)</td>
</tr>
</tbody>
</table>

* This is dependent upon years of experience.
American Registry of Radiologic Technologists

The mission of the American Registry of Radiologic Technologists (ARRT) is to promote high standards of patient care by recognizing qualified individuals in diagnostic imaging, interventional procedures and therapeutic treatment. The modalities of interest include, but are not necessarily limited to:

- radiography
- nuclear medicine
- radiation therapy
- mammography
- computed tomography
- magnetic resonance imaging
- bone densitometry
- quality management
- cardiovascular-interventional technology
- cardiac-interventional technology
- vascular-interventional technology
- sonography
- vascular sonography
- breast sonography

In support of this mission, the ARRT:

- adopts and upholds standards for educational preparations for entry into the profession;
- adopts and upholds standards of professional behavior consistent with the level of responsibility required by professional practice;
- develops and administers examinations that assess the knowledge and skills underlying the intelligent performance of the tasks typically required by professional practice in the modality.

Eligibility for certification in ARRT primary disciplines and advanced modalities include requirements in three important areas: ethics, education and examination.

Graduates of accredited programs are eligible for registration by examination sponsored by the American Registry of Radiologic Technologists upon completion of the didactic and clinical requirements of the program. The successful passing of the ARRT examination allows the graduate to place the initials RT(R)(ARRT) after his/her name.

"Candidates must be of good moral character. Generally, the conviction of either (1) a felony, or (2) any offense, misdemeanor or felony involving moral turpitude, indicates a lack of good moral character for Registry purposes. Those who have been convicted of a crime may be eligible for registration if they have served their entire sentence, including probation and parole, and have had their civil rights restored," (ARRT Examinee Certification Handbook).
ARRT Standards of Ethics

The Standards of Ethics of the ARRT apply solely to persons applying for examination and certification by ARRT (Candidates) and to persons holding current registrations by ARRT or formerly held registrations by ARRT (Registered Technologists). The Standards of Ethics are intended to be consistent with the mission statement of the ARRT, and to promote the goals it sets forth.

Applicants for registration by the American Registry of Radiologic Technologists (ARRT) must at the time of application and on subsequent occasions when the registration is renewed, agree to abide by the ARRT Code of Ethics. The Code of Ethics (ARRT Examinee Certification Handbook) is listed in APPENDIX A, General Policies Section.

Rules of Ethics

The Rules of Ethics form the second part of the Standards of Ethics. They are mandatory and directive-specific standards for minimally acceptable professional conduct for all present Registered Technologists and Candidates. Certification is a method of assuring the medical community and the public that an individual is qualified to practice within the profession. These Rules of Ethics are intended to promote the protection, safety and comfort of patients. These Rules of Ethics are enforced by the ARRT!

Registered Technologists and Candidates engaging in any of the conduct or activities noted in the Rules of Ethics, or who permit the occurrence of such conduct or activities, have violated the Rules of Ethics and are subject to sanctions. The twenty-one (21) Rules of Ethics and their subsections are listed at www.arrt.org/ethics.

One issue addressed by the Rules of Ethics is conviction of a crime—which includes felony, gross misdemeanor or misdemeanor, with the sole exceptions of speeding and parking violations. All alcohol and/or drug related violations must be reported when applying for certification by the ARRT. The ARRT defines conviction to include a criminal proceeding where a finding or verdict of guilt is made or returned but the adjudication of guilt is either withheld or not entered, or a criminal proceeding where the individual enters a plea of guilty or nolo contendere.
The scope of practice of the medical imaging and radiation therapy professional includes:

- Receiving, relaying and documenting verbal, written and electronic orders in the patient’s medical record.
- Corroborating patient's clinical history with procedure, ensuring information is documented and available for use by a licensed independent practitioner.
- Verifying informed consent.
- Assuming responsibility for patient needs during procedures.
- Preparing patients for procedures.
- Applying principles of ALARA to minimize exposure to patient, self and others.
- Performing venipuncture as prescribed by a licensed independent practitioner.
- Starting and maintaining intravenous (IV) access as prescribed by a licensed independent practitioner.
- Identifying, preparing and/or administering medications as prescribed by a licensed independent practitioner.
- Evaluating images for technical quality, ensuring proper identification is recorded.
- Identifying and managing emergency situations.
- Providing education.
- Educating and monitoring students and other health care providers.
- Performing ongoing quality assurance activities.

The scope of practice of the magnetic resonance technologist also includes:

1. Performing procedures or examinations under the order of a licensed independent practitioner for diagnostic interpretation or therapeutic intervention.
2. Applying principles of magnetic resonance safety to minimize risk to patient, self and others.
3. Selecting appropriate pulse sequences with consideration given to established protocols and other factors influencing data acquisition parameters.
4. Assisting the licensed independent practitioner with interventional procedures.
5. Manipulating and reconstructing digital data for display or hard copy records, ensuring proper identification is evident.
6. Maintaining archival storage of digital data as appropriate.

©2014, the American Society of Radiologic Technologists. All rights reserved. Reprinted with permission of the ASRT for educational purposes.
The ASRT - Computed Tomography Technologist Scope of Practice

The scope of practice of the medical imaging and radiation therapy professional includes:

- Receiving, relaying and documenting verbal, written and electronic orders in the patient’s medical record.
- Corroborating patient's clinical history with procedure, ensuring information is documented and available for use by a licensed independent practitioner.
- Verifying informed consent.
- Assuming responsibility for patient needs during procedures.
- Preparing patients for procedures.
- Applying principles of ALARA to minimize exposure to patient, self and others.
- Performing venipuncture as prescribed by a licensed independent practitioner.
- Starting and maintaining intravenous (IV) access as prescribed by a licensed independent practitioner.
- Identifying, preparing and/or administering medications as prescribed by a licensed independent practitioner.
- Evaluating images for technical quality, ensuring proper identification is recorded.
- Identifying and managing emergency situations.
- Providing education.
- Educating and monitoring students and other health care providers.
- Performing ongoing quality assurance activities.

The scope of practice of the computed tomography technologist also includes:

1. Performing computed tomography procedures as prescribed by a licensed independent practitioner.
2. Assisting a licensed independent practitioner with interventional computed tomography procedures.
3. Selecting appropriate technical factors with consideration given to established protocols and other factors influencing data acquisition.
5. Archiving data as appropriate and documenting patient exposures.

©2014, the American Society of Radiologic Technologists. All rights reserved. Reprinted with permission of the ASRT for educational purposes.
Southern Illinois University Carbondale (SIUC) is dedicated not only to learning, research, and the advancement of knowledge, but also to the development of ethical and responsible persons. The University seeks to achieve these goals through sound educational programs and policies governing conduct that encourages independence and maturity. By accepting membership in this University, an individual joins a community characterized by free expression, free inquiry, honesty, respect for others, and participation in constructive change. All rights and responsibilities exercised within this academic environment shall be compatible with these principles.

Students shall be free to examine all questions of interest to them and to express opinions. They shall be guaranteed all constitutional rights including free inquiry, expression, assembly, and disciplinary due process. All regulations shall seek the best possible reconciliation of the principles of maximum academic freedom and necessary order. Any behavior, which has been influenced by a student’s use of drugs or alcohol, will not limit the student’s responsibility for that behavior. (That is, the student is responsible for his/her behavior regardless of drug and/or alcohol use).

It is each student’s responsibility to know and comply with the SIUC Student Conduct Code and any policies referenced therein. In addition to the Student Conduct Code, students are also subject to other policies and procedures, including but not limited to, Student Behavior: Policy and Procedures for Administrative Review, Residence Halls Guidebook, departmental policies.

These regulations shall be known as the Student Conduct Code for SIUC. The regulations contained herein are established under the authority granted by law to the Board of Trustees to establish rules and regulations for SIU and pursuant to 3.C Policies of the Board of Trustees authorizing the Chancellor to develop regulations dealing with student rights and conduct. All students of the campus community have the responsibility to comply with these regulations. The responsibility for enforcement of the code rests with the Chancellor of SIUC.
CHAPTER 2--STUDENT INFORMATION

CLINICAL SITE ASSIGNMENTS

Throughout the length of the Magnetic Resonance Imaging / Computed Tomography (MRI/CT) - Radiologic Sciences Program (RADS), there are two clinical rotations for each modality. During each clinical semester the student will rotate through both MRI and CT modalities (see School Calendar pp6-7).

In order to provide the student with a satisfactory clinical experience, the Radiologic Sciences Program strongly discourages placing a student at a clinical site where a member of the student’s immediate family is employed in the Radiology Department. The Program defines “immediate family” as spouse, children, sibling(s), parent(s), in-law(s), grandparent(s), step-child(ren), step-parent(s), step-sibling(s), and former spouse.

Hospital Orientation

All hospitals and clinical sites affiliated with the SIUC Radiologic Sciences Program have the ethical and professional responsibility to their employees, patients and the community to provide an environment that maintains the highest standards for safety, health and productivity.

To introduce the MRI/CT student to the clinical setting and its standards, all our affiliated clinical facilities require each clinical internship student to participate in a hospital orientation, completed at least two weeks prior to the first day of the clinical semester. (Some facilities will do this the first day of clinical internship) INTRODUCE YOURSELF BEFORE YOUR FIRST DAY OF CLINICAL INTERNSHIP! You should have sent an email or called the facility by now to introduce yourself and make sure they have all the information from you that they need. Each student must bring to this hospital orientation a copy of his/her individual immunization record including the result of his/her:

(should have a hard copy and an electronic copy)

- most recent TB skin test (1 step or 2 step);
- proof of recent Hepatitis B immunity;
- proof of recent Influenza immunity; and,
- proof of Varicella (Chicken Pox) immunity.

The student’s immunization record enables the hospital to document the student’s health status prior to direct patient contact.

To ensure a greater focus on safe practices, for the protection of hospital patients, employees, visitors and the community-at-large, all our clinical sites are subjecting any clinical internship student (regardless of the medical field) to the same hospital orientation procedures that new employees attend. As such they require each clinical internship student to undergo a clinical drug screening and a criminal background check as a component of his/her hospital orientation, and as a condition of his/her attendance at the clinical site.
Any RADS student refusing to participate in this drug screening and background check will automatically be hindered from completing the Program!

Any convictions will be reviewed on a case-by-case basis. Under no circumstances will a RADS student be allowed to participate in a clinical internship if he/she has a misdemeanor and/or felony conviction in the following areas:

- Abuse
- Neglect
- Exploitation of an adult or a child
- Identification as an excluded provider by the Office of Inspector General (OIG; [www.oig.hhs.gov](http://www.oig.hhs.gov)).

Should the RADS clinical internship student have a criminal conviction deemed unacceptable to the hospital, the student will not be permitted to attend that clinical site for his/her RADS internship. This may also result in the student not being allowed to continue in the Program. Thus, the student would be removed from the RADS Program.

If the criminal background check shows no criminal convictions or a conviction that is deemed inconsequential to the removal of that student from the internship site, then the background check will be filed, and the student will be permitted to attend the clinical site for his/her internship semester.

SCHOOL CALENDAR

With the exception of the final summer clinical rotation (for the Advanced Modalities), holidays and vacations are scheduled to follow the University academic calendar. ([www.registrar.siuc.edu/calendars/academic.html](http://www.registrar.siuc.edu/calendars/academic.html)).

All SIUC Radiologic Sciences students are expected to attend to their clinical internship sites for the full semester. Any deviation from the full semester must be approved by the Program Director, the appropriate modality Clinical Coordinator and the Clinical Supervisor at the internship site.
STUDENT EXPENSES

**Books:** Book costs vary each semester depending on the modality. Most of the textbooks purchased for the Fall semester (sophomore year) will be used during the clinical semesters.

**Criminal Background Check:** Is performed to determine whether the student has history of past criminal convictions, arrests, or other criminal activity. The criminal background check examines the student’s:

- Residence History;
- County-Criminal History;
- Nationwide-Sexual Offender Index; and
- Nationwide-Healthcare Fraud and Abuse Scan

A few of the RADS clinically affiliated hospitals perform their own background check on student interns, at the hospital’s expense. While most of the RADS clinically affiliated hospitals require the student interns to acquire and pay for their own background check.

The criminal background check is performed by Certified Background.com ([www.certifiedbackground.com](http://www.certifiedbackground.com)). The background check has an approximate ‘life span’ of 12 months.

**Drug Screen:** (Urine Drug Screen): All RADS clinically affiliated hospitals have a ‘zero tolerance policy’ for controlled substance use by employees and student interns. The urine drug screen examines the student’s urine for evidence of controlled substances and their metabolites. The drugs/controlled substances (a.k.a. Ten Panel Drug Abuse Screen) identified include:

- Amphetamines
- Methadone
- Barbiturates
- Methaqualone
- Benzodiazepines
- Opiates
- Cocaine metabolites
- Phencyclidine
- Marijuana metabolites
- Propoxyphene

The urine drug screen is performed by Certified Background.com ([www.certifiedbackground.com](http://www.certifiedbackground.com)) or by the SIUC Student Health Center. The urine drug screen has an approximate ‘life-span’ of 30 days.
**Housing:** Students are responsible for securing their own housing to assigned clinical sites. The Radiologic Sciences Program faculty provides limited housing information for student convenience and assistance, but does not accept responsibility for the nature, condition, or location of the housing facilities. None of the facilities have been examined or approved by Program/University personnel. Neither Southern Illinois University Carbondale, nor any of its faculty, agents, or employees assume responsibility for any lease or rental agreements and cannot be held liable for nonpayment or damage.

**Influenza (Flu) Shot:** This immunization is acquired at the SIUC Student Health Center, from the student’s personal healthcare provider or at any local pharmacy. The flu shot has an approximate ‘life span’ of 12 months. Therefore, the student should get the flu shot 1-2 months prior to attending his/her clinical semester. If the student is participating in a Fall clinical semester, then the student should get the flu shot in late September/early October, or as soon as it becomes available.

**Liability Insurance:** For the duration of time that he/she is in the clinical setting of our Program, each student is provided liability insurance coverage by the Southern Illinois University self-insurance Program. This insurance policy is in the amount of $3,000,000 for each student. It applies to all University students assigned to serve internships with external facilities when the students are not paid by the facility and the student earns academic credit upon completion of the internship assignment. Such insurance coverage is not available to any student actually employed (paid) by the external facility or in situations in which no academic credit is available to the student upon completion. (Certificate of Insurance is in APPENDIX J, General Policies Section).

**Transportation:** Students are responsible for their own transportation to and from school and the clinical facilities. Students may park only in designated areas, both at the University and clinical sites.

**Tuition:** All Radiologic Sciences students are eligible to apply for any available financial aid. The College of Applied Sciences and Arts has a Scholarship Fund for qualified students. The University has incorporated a time-based payment plan at [www.registrar.siuc.edu/tuitionandfees/](http://www.registrar.siuc.edu/tuitionandfees/)

**Uniforms:** Students are to purchase their own uniforms according to the prescribed dress code of the Radiologic Sciences Program or the assigned clinical facility.
RADIOLOGIC SCIENCES PROGRAM DRESS CODE

Clothing is a form of non-verbal communication that reflects confidence in ability and judgment, personal behavior and sense of professional image. Our patients' perceptions of competence and professionalism of the radiographer are often based on first impressions, which are processed into stereotypic responses to the image the radiographer presents. Thus, the first impression of the radiographer in uniform is the strongest statement of professionalism.

It is essential as radiography faculty and students that we present ourselves as professionals. We must look and act in a manner that conveys authority and integrity. It is important to the overall impression of our Program that we maintain a high standard of professionalism. Therefore, a strict dress code policy has been developed. This policy will be enforced uniformly and final authority for interpretation lies with the Program Director.

Certain basic standards are to be observed by all Radiologic Sciences students. Among these are:

1. All clothing and jewelry must be consistent with professional/business dress standards applicable to the work responsibilities involved, and must be appropriate for reasonably anticipated public contact. Specifically,
   a. All outer garments are to be clean, pressed, properly sized and in good repair.
      (1) Scrub clothes are to be worn only when and where authorized.
           (a) In an operating room environment, including angiography.
           (b) When a student’s uniform has been soiled by patient body fluids.

      (2) The waistband of the dress pants/slacks must be at the level of the student’s natural waistline. A coordinating belt must be worn when the dress pants/slacks have belt loops.

      (3) All shirt-tails are to be tucked into the dress pants/slacks.

      (4) A knee-length white lab coat is part of the RADS student uniform and is to be clean, pressed, properly sized and in good repair.

   b. Clothing, including attached buttons/pins, will not include visible statements advertising commercial products or expressing controversial/divisive viewpoints.

   c. Upper arms, legs, abdomen, chest and back must be covered at all times.

   d. No head apparel is to be worn indoors unless specifically prescribed/authorized as part of a uniform.

   e. Shoes should be plain, laced, or with a strap, with leather uppers and synthetic soles. Heels must have a broad base to give stability when walking or lifting. Shoes are to be kept clean and polished. Clogs, slides, and sandals are prohibited.

   f. Sweatshirts, sweatpants, shorts, jumpsuits (unless part of an authorized uniform), and T-shirts or tank tops as outer garments are prohibited.

   g. For personal safety and infection control:
(1) Earrings should be limited to small button posts or studs; preferably one earring per ear, no more than 2 earrings per ear;

(2) Wedding rings and rings without stones may be worn, preferably one ring per hand;

(3) No dangling bracelets; and,

(4) Wrist watches should fit comfortably and be of modest size.

h. Appropriate undergarments are to be worn at all times.

2. No body piercings of the neck and face are to be worn indoors unless specifically prescribed/authorized as part of a uniform.

3. All tattoos and body art must be kept covered at all times.

4. All students must wear the name badge provided by the University or clinical facility during each clinical day. For facilities that supply the student with a separate badge, the identification badge must be worn so that the picture, name and department are easily visible at all times.

5. Hair, including beards and mustaches, is to be clean, neatly groomed, and kept in such a way as not to interfere with student duties or safety. Hair that is longer than the collar on males, or longer than the shoulder on females, is to be pulled back and fastened to prevent contamination and to decrease the spread of microorganisms such as pseudomonas and staphylococcus.

6. Make up, perfume and cologne are to be lightly applied.

7. Fingernails are to be clean, trimmed, and extend no further than 1/4” beyond fingertips. Clear or conservative light colored nail polish may be worn. Artificial and/or acrylic fingernails are prohibited in the clinical environment.

8. Personal hygiene practices are to be sufficient to ensure cleanliness and the absence of noticeable body odor and the absence of noticeable breath/mouth odor. -If it is a problem, the student may be sent home for the day in order to resolve the problem.

Clinical Attire for all SIUC Radiologic Sciences students:

RADS Program specific polo shirts in black, gray, navy or maroon
Dress pants/slacks (black, dark gray, navy or khaki) with matching belt
   For example: Docker style
Clean and pressed scrub top and pants, color dependent on rules of clinic facility
Clean dark dress shoes or clean athletic shoes, (walking or nursing shoes)
   For example: Nurse Mates, Reebok, New Balance, Nike, Adidas
Long white lab coat (mid-thigh or knee length) with SIU logo
   -Silkworm in Murphysboro can put the logo on your labcoat
Neutral hose or socks coordinated to dress pants/slacks
No long sleeves protruding from beneath the sleeves of the RADS Program specific polo shirts, may be allowed under scrub top if it is maroon, grey, or white.

No leggings, carpenter pants, cargo pants, or capri pants

No low-riding or hip hugging type pants

No pant legs stuffed into socks

No sandals, clogs or Croc™ type footwear

**Failure to comply with the dress code will result in dismissal from clinic for the day as an unexcused absence.**

**STUDENT RECORDS**

Files are maintained on the program's enrolled students. Those concerning grades, University admission forms, etc., are maintained in the Student Service building and are available to the student based on University policy.

The College of Applied Sciences and Arts maintains limited files regarding the student's progress upon admission into the School of Allied Health. The availability of these files is dependent upon secretarial staff to retrieve such files. Access to these records is limited to the office where the records are held and may not be removed for any reason.

**STUDENT HEALTH PROGRAM**

Provided the Student Health Fee is paid by the student each semester, all facilities and privileges of the campus program are available to the Radiologic Sciences students. ([www.bot.siu.edu/leg/appendix_a.html](http://www.bot.siu.edu/leg/appendix_a.html)). Should the student elect not to pay the fee, **he/she is responsible for providing proof of personal health/medical insurance, by a recognized insurance company, prior to attendance of each clinical rotation**, to the SIUC Radiologic Sciences faculty.

**RADS Health Record**

The Radiologic Sciences Advisory Committee has developed a professional observation form and a personal health record form.

Prior to starting the first clinical semester, each student must provide proof of good physical health and current immunizations. All Radiologic Sciences student will be in close contact with people who may have communicable diseases. This places the student at risk of contracting these diseases, especially if lacking recent immunizations.
The National Immunity Program (NIP) of the Centers for Disease Control and Prevention (CDC) lists the following vaccines as needed by all adults working in health care related professions.

- Hepatitis B vaccine
- Influenza vaccine
- Measles-Mumps-Rubella (MMR) vaccine
- Tetanus-Diphtheria vaccine
- Tuberculosis (TB)
- Varicella (chicken pox) vaccine

Additionally, the CDC and the National Meningitis Association (NMA; www.nmaus.org) recommend that college students living in dormitories get the meningitis vaccine (for meningococcal meningitis).

These vaccines are listed as either “required” or “strongly recommended” on the Radiologic Sciences Health Record form. More information on these vaccines is found on the Vaccine-Preventable Adult Diseases website (www.cdc.gov/vaccines/vpd-vac/adult-vpd.htm) and the 2014 Recommended Immunizations for Adults by Age at (http://www.cdc.gov/vaccines/schedules/downloads/adult/adult-schedule-easy-read.pdf).

**GRADING SYSTEM**

Each syllabus, distributed to the student at the onset of the semester, specifies criteria by which the grade for the course will be determined. University policy is used regarding the point system equivalency per grade; however, the scale for grade assignment is not standardized throughout the University and will be outlined by each instructor.

Clinical grades are derived by using a Clinical Semester Grade Sheet for the respective clinical semester. The intent of this evaluation tool is to objectively arrive at a clinical grade by utilizing a system that correlates weighted values to those factors that are important in assisting the students to become competent, responsible, MRI technologists, and CT technologists.

Students who fail one or more of the Radiologic Sciences courses will not be allowed to continue the sequence of the program. It may not be possible for the student to re-enter the program in the future. If circumstances permit, the student's records will be reviewed and he/she may be readmitted the following year pending University faculty decision and as space is available.
**FILM BADGE/DOSIMETERS RETURN**

Instructions for changing old dosimeter to new dosimeter:

Please change your dosimeter, returning the old badge(s) directly to our film badge company, Landauer Inc. The address for Landauer is:

Landauer, Inc.
2 Science Road
Glenwood, IL 60425-7586

To ensure that your dosimeter arrives safely, please tape the badge to a 3” x 5” index card and place the index card into a 4” x 8” padded envelope, and mail it to Landauer, Inc. at the above address.

Please make sure that you keep the gray dosimeter holder, and snap the new dosimeter into the gray holder.

- If you lose your dosimeter and you are in CT, you will need to sit out until your new one comes in.
- I will mail your new dosimeters out to you with an envelope to mail your old dosimeter back to Landauer.
- While in MRI, your film badge can’t go past Zone 4 (see MRI Safety Policy)
- ***We will need your new address when you move for your clinical internship so we can give you a new dosimeter.
LIBRARY PRIVILEGES (http://lib.siu.edu/)

Morris Library is located in the center of campus and is open to all registered students. It provides over one and a half million volumes, fifteen thousand current periodicals, and over one and a half million microforms. Additional reserve references, documents, phonograph records and art prints are present.

REGISTRY EXAMS

Students must have completed all requirements for sitting (taking) for the CT and/or MRI registry examinations offered by the American Registry of Radiologic Technologists (ARRT). Students are encouraged to sit (take) their specific registry examination as soon as they have completed all requirements of the MRI/CT Program and the ARRT. There will be two days of mandatory registry review during finals week of the spring semester.

CLINICAL ATTENDANCE POLICY

During the clinical semester, each student is required to attend his/her clinical internship site for thirty-eight hours per week, for the entire semester. Lunch time is excluded in the calculation of clinical hours. Students may participate in a 4 days instead of a 5 day schedule at the discretion of their clinical supervisor, in conjunction with the MRI/CT Clinical Coordinator, but can’t exceed a 10 hour work day.

At some of our clinical sites, the students will spend a portion of the clinical semester on evening shift. The specific hours of the evening shift (e.g., 12noon-8:30pm; 2-10:30pm; 3-11:30pm, etc.) are determined by the Clinical Supervisor/Clinical Instructor in cooperation with the MRI/CT Clinical Coordinator. Please notify Jen and Arshia when you switch to a different shift, THIS IS VERY IMPORTANT, so I know where you are.

During this semester, there are scheduled clinical days. All absences must be made up. You will be given ONE personal day. This day can be used to take the National Registry Exam or for an interview. If you do not use this day, you will be able to end your clinical internship one day early.

A make-up schedule will be determined by the Clinical Supervisor/Clinical Instructor in conference with the appropriate University staff. The only exceptions to this will be made at the Clinical Supervisor's discretion.

Even though the student makes up all absences, chronic absenteeism is not acceptable and it will have a negative impact on the student’s clinical grade.
Any student with three to four unexcused absences may have his/her final clinical grade reduced by one letter grade.

Any student with five to seven unexcused absences may have his/her final clinical grade reduced by two letter grades.

Any student with more than seven unexcused absences may be dismissed from the MRI/CT specialization.

- If a student is absent for three or more consecutive days due to illness/injury, it is required that he/she obtain a statement from his/her personal physician attesting to the student’s illness or injury, and his/her fitness to return to classes and clinical patient contact.
- The student is expected to report to the clinical facility at the designated time. Tardiness is not responsible, professional behavior.
- Habitual/chronic tardiness will not be tolerated, and the student will have his/her final clinical grade reduced by two letter grades. Likewise, students are not allowed to leave their clinic site early without permission.

If there is a SIU recognized holiday, you do not need to attend your clinical internship that day and that date does not need to be made up.

If equipment is DOWN, and there is not another unit to work on, the student is not required to make up that time. You will need to check with your clinical instructor on alternative learning for that time.

If extenuating circumstances are involved, requiring the student take an indefinite leave of absence, a committee comprised of clinical and SIUC faculty will review the situation and make appropriate recommendations for continuance in the Program.

If you are asked to leave for the day because you are not following rules of the facility, for example, on your phone or ipad while you are scanning, you will leave for the day and that entire day will need to be made up at a later date.

If a student is removed from a clinical site by the clinical instructor, the student will receive a failing grade for that course, resulting in NOT continuing in the program. They will be allowed to re-apply the following year.

**Inclement Weather Policy**

Should unsafe weather conditions occur, the student must use discretion in traveling to the clinical site. If staying off the road is the best decision, the student must contact the Clinical
Instructor/ Clinical Supervisor and the MRI/CT Clinical Coordinator within the first 30 minutes of his/her clinical day to explain his/her absence.

The student shall work with his/her Clinical Supervisor/ Clinical Instructor to arrange a suitable schedule to make-up the clinical time.

**Early Dismissal Guidelines**

In the event of afternoon weather and/or road conditions becoming unsafe, the Clinical Instructor/ Clinical Supervisor may use his/her discretion concerning early dismissal of students for that day. A suggested guide for early dismissal due to unsafe weather and/or road conditions could be the:

1. Cancellation of local high school sports and extracurricular activities for that evening.
2. Cancellation of evening classes at the local university, community college and educational extensions centers.
3. Cancellation of all evening civic, community and/or religious activities.

Students that are dismissed early due unsafe weather and/or unsafe road conditions are not required to make up the clinical time.

**Request for Time-Off**

Students requesting time off for personal reasons must present this request to the Clinical Supervisor/ Clinical Instructor **at least two weeks in advance**.

If granted, students must arrange and schedule "make-up" time with the Clinical Supervisor/ Clinical Instructor prior to the leave.

All jury duty time must be made up. All time off taken to meet training requirements for any military service (Reserves, ROTC, etc.) must be made up.

Attendance will be required for special field trips, observations or seminars. Any hours of absence will be treated as course hours missed.

Students are advised to schedule medical, dental and other appointments outside of class and/or clinic hours to avoid penalty.

Students with children are advised to have contingency arrangements made for child-care in case of illness or other unforeseen circumstance.

**Bereavement Leave**

When a member of a student’s immediate family dies, the student is permitted 2 days off for bereavement leave. These 2 days are not made up. If more than 2 days are needed, then the
student must make up those additional days. On the student’s Time Sheet, these days are marked with “BL”.

To document family relationship, the student must submit a copy of the obituary from the local newspaper, or a bulletin/flyer from the church, temple, mosque, or funeral home. The Program defines “immediate family” as spouse, children, sibling(s), parent(s), in-law(s), grandparent(s), step-child(ren), step-parent(s), step-sibling(s), and former spouse.

**Financial Aid Day**

When students are participating in their clinical internship semester, it is expected that they are at their assigned hospital Monday through Friday for 8 hours/day, 38 hours/week. As such, they don’t have an opportunity to come to Campus to correct financial aid problems, without missing a day of clinical. **If needed, these students may have one-half day off for correcting financial aid problems.**¹ Students assigned to facilities more than 55 miles from Carbondale, are permitted one day off for correcting financial aid problems. This day must be scheduled with both the Clinical Supervisor/Clinical Instructor and the appropriate person or persons at the University Financial Aid Office.

Clinical internship students that are attending their hospital for four 10-hour days are expected to use their “day off” for correcting financial aid problems.

**UNIVERSITY HOLIDAYS**

All students will follow the holiday schedule for Southern Illinois University at Carbondale ([www.registrar/siuc.edu/calendars/](http://www.registrar/siuc.edu/calendars/)) click on the appropriate academic year).

Clinical Instructors may use their discretion on hospital holidays that are not observed by SIUC. Hospital holidays not observed by SIUC may be used as make-up days. Otherwise, these hospital holidays are not made up.

---

¹ Students assigned to facilities more than 55 miles from Carbondale, Illinois, are permitted one day off for correcting financial aid problems.
COMMUNICABLE DISEASE POLICY

If a student, through patient contact, contracts a communicable disease, such as:

- measles
- mumps
- chicken pox
- rubella
- herpes
- tuberculosis (TB)
- mononucleosis
- HIV/AIDS
- hepatitis B
- AIDS-Related Complex (ARC)
- meningitis
- meningitis
- rubella
- HIV/AIDS
- C. Diff

It is the student's responsibility to inform the Clinical Supervisor and the MRI/CT Clinical Coordinator such disease and treatment. In the event of such disease contraction, MRI/CT faculty will attempt to counsel the student concerning career options and future plans.

Current Program policy and University policy toward infectious (communicable) disease will be followed. These policies are described in APPENDIX F, General Policies Section.

INSURANCE, ACCIDENTS AND INCIDENTS

Medical Insurance

Each student is required to have medical coverage through a private insurance company, or through the University Health Service Program. All injuries sustained by students at the clinical site or on campus must be reported to the MRI/CT Clinical Coordinator. Failure to report accidents and complete the required paperwork within 10 days from the time of injury may result in a rejection of the claim by the student's insurance company or the University Health Service.

Students may go to their personal physician or be treated in the Hospital Emergency Room (ER) if medical attention is needed. Treatment of students in the ER is not free regardless of whether or not hospital personnel suggest they go there.

Incidents and Accidents

Following every accident or incident involving injury or possible injury, the student is expected to notify his/her Clinical Supervisor immediately. Upon notification, the Clinical Supervisor is to arrange to have the student evaluated by a physician in the Emergency Room or in the Employee Health Clinic. A Radiology department or hospital incident report should be completed as soon as possible. The University Injury/Injury/Hazard Report is found in APPENDIX G in the General Clinical Policies Manual, and may be completed, as well.

The following table summarizes the responsibilities of the student, Clinical Supervisor and University faculty as they relate to student incidents and accidents at a clinical site.
PARTICIPANT ACTION—RESPONSIBILITY

Student

1. Incident without injury:
   a. Notifies Clinical Supervisor/Instructor as to what happened.
   b. Completes and signs the following documents within 24-48 hours of the incident/accident.
      (1) Radiology Department Incident Report or Unusual Occurrence Report.
      (2) University Injury/Incident/Hazard Report. (APPENDIX G)
   c. Both forms are sent to the designated University RADS faculty member and placed in the student’s active clinical file.
   d. Makes up all missed clinical time resulting from this incident.

2. Incident of unknowing exposure to a patient with active TB, Meningitis, Hepatitis B and/or HIV.
   a. As soon as student is notified of the patient’s positive disease status, the student must complete and sign the following documents within 24-48 hours of the notice.
      (1) Radiology Department Incident Report or Unusual Occurrence Report.
      (2) University Injury/Incident/Hazard Report. (APPENDIX G)
   b. Both forms are sent to the designated University RADS faculty member and placed in the student’s active clinical file.
   c. Student participates in all follow-up treatment along with all involved hospital personnel (i.e. TB skin test, blood sample drawn for Hepatitis titer and/or HIV testing, etc.).
   d. If the student is billed for the follow-up treatment, since s/he is not an employee of the clinical facility, then the student should follow items 3e,3g, 3h & 3i listed below.

3. Incident with injury (including accidental needle stick):
   a. Notifies Clinical Supervisor/Instructor as to what happened.
   b. As needed, seeks treatment from Emergency Department (ED/ER) at clinical site, or in the Employee Health Clinic, or from personal physician, or from SIUC Student Health Center.
   c. Completes and signs the following documents within 24-48 hours of the incident/accident.
      (1) Radiology Department Incident Report or Unusual Occurrence Report.
      (2) University Injury/Incident/Hazard Report. (APPENDIX G)
   d. Both forms are sent to the designated University RADS faculty member and placed in the student’s active clinical file.
   e. Participates in all follow-up treatment, including Hepatitis B and HIV testing.
   f. If condition worsens, seeks treatment from personal physician, the Emergency Department or SIUC Student Health Center.
   g. **Pays for, or arranges for payment, of all treatment** (including initial treatment and any follow-up care) from personal physician, the Emergency Department or SIUC Student Health Center.
   h. Sends copy of Emergency Department itemized bill to personal insurance company and completes the appropriate accident claim forms(s) for that company, for payment or reimbursement.
   i. If SIUC Student Health Center is the student’s only source of health insurance, then the student must:
(1) Call the Student Health Programs Medical Benefits Office at (618) 453-4413 to obtain a **Claim Form**, a **Primary Insurance Information Form**, and to notify the Medical Benefits Office that a claim is being submitted. (Both forms are online at [www.shc.siu.edu/insurance/index.html](http://www.shc.siu.edu/insurance/index.html) click on “Forms”, then scroll down to “Primary Insurance Information” and “SIUC Extended Care Plan Claim Form”).

(2) Complete and return both forms and the Emergency Department itemized bill to the Student Medical Insurance Office. **If these forms are not completed, the claim will be denied.**

(3) Mail or fax a copy of the student’s Emergency Department treatment record to:

Medical Records Office  
SIUC Student Health Center  
374 E. Grand Ave. MC 6740  
Carbondale, IL 62901  
Fax # for Medical Records is 618-453-4088

j. **The student’s SIUC Dawg Tag # MUST be on all paperwork sent to any office within the SIUC Student Health Center.**

k. Makes up all missed clinical time resulting from this incident.

### Clinical Supervisor/Instructor

1. As needed, encourages student to receive medical treatment.
2. Signs the following document(s) within 24-48 hours of the incident/accident.
3. Places original document(s) in student’s departmental file.
4. Sends a copy of the following document(s) to the designated University RADS faculty member.
5. Counsels and advises student on incident/accident prevention.
6. If necessary, assigns student to noncritical area.
7. Schedules make-up time as soon as possible.
8. Keeps RADS faculty informed of student status or of potential problems.

### Designated RADS Faculty

1. Reviews all records.
2. Advises Clinical Supervisor/Instructor.
3. When necessary, advises and counsels student.
4. Makes final decisions concerning extended/prolonged absences resulting from injury.
5. Makes final decisions concerning disciplinary actions for repeated incidents or accidents.
At time of treatment, the status of the student’s tetanus immunity will also be reviewed and updated as appropriate. The Program Faculty will work with SIU’s Disability Office to determine if a student may continue the Program should illness or disability arise. The decision will be made on an individual basis, taking into account the nature and degree of the disability, as well as the physician’s recommendation that the student may continue the program. Students must make up all missed clinic and class time. Students unable to complete assigned time commitment by end of program, will not graduate until they successfully complete class and clinical rotations.

When the injury involves a percutaneous exposure to blood or other possibly infectious body fluids, and the source individual is known, and consents, a blood sample will be drawn from that individual, and tested for hepatitis B surface antigen (HBsAg), hepatitis B surface antibody (HBsAb), Meningitis, and/or HIV.
ACADEMIC PROBATION AND SUSPENSION

General information on scholastic (academic) probation and suspension is online. Go to [www.registrar.siu.edu/pdf/ugradcatalog1314.pdf](http://www.registrar.siu.edu/pdf/ugradcatalog1314.pdf) Scroll to page 34.

Additionally, failing to maintain satisfactory progress will have a negative impact on the student’s financial aid. Financial aid policy details are at [www.fao.siu.edu/forms/academic-progress-forms.html](http://www.fao.siu.edu/forms/academic-progress-forms.html)

**General Statement Regarding Clinical Setting**

While in the clinical environment, all MRI/CT students are expected to apply the knowledge learned in the classroom/laboratory in previous semesters to the clinical exams presented to them. Any failure to transfer this knowledge-base to the clinical setting is a frequent source of a poor grade on a student performance evaluation. Such a failure can be easily corrected via on-site remediation between the Clinical Supervisor/Instructor and the student.

Please keep in mind that one student may have a steeper learning curve than another, at any point during the semester. The MRI/CT faculty expect the student’s first performance to be “less than perfect” because it identifies areas for personal growth and improvement within the real world environment of the hospital.

However, repeated failures to properly perform clinical exams, and/or demonstrate appropriate professional attitudes are a few of the many causes of unsatisfactory clinical progress, even to the point of removing the student from the clinical site.

Therefore, any student that repeatedly fails in these areas should expect to have this poor performance noted on his/her clinical objectives and/or monthly clinical performance evaluation by the appropriate Clinical Instructor/Supervisor.

Repeated performance failures of any MRI/CT student is certain to cause irritation and frustration in both the respective Clinical Instructor/Supervisor as well as in the student. Just as there is a “Student Grievance Appeal” process, there is a similar appeal process for the Clinical Instructor/Supervisor (APPENDIX D, General Policies Section).
UNIVERSITY POLICY CONCERNING SEXUAL HARASSMENT

Radiologic Sciences Program Policy and General Statement.

Southern Illinois University at Carbondale is committed to creating and maintaining a community in which students, faculty, and staff can work together in an atmosphere free of all forms of harassment, exploitation, or intimidation. Sexual harassment, like harassment based on race or religion, is a form of discrimination expressly prohibited by law. It is a violation of Title VII of the Federal 1964 Civil Rights Act and Title IX of the Educational Amendments of 1972 and a civil rights violation of the Illinois Human Rights Act 1992.

In addition to being illegal, sexual harassment runs counter to the objectives of the Radiologic Sciences Program. When people feel coerced, threatened, intimidated, or otherwise pressured by others into granting sexual favors, or are singled out for ridicule or abuse because of their gender, their academic and clinical performance is liable to suffer.

Sexual harassment affects a person's health through physical and emotional suffering, fear, stress, decreased self-worth, absenteeism, and diminished quality of work. Family and working relationships suffer as well. It destroys trust, reputation, safety, productivity, and morale. Sexual harassment is costly in terms of absenteeism, time, recruiting, rehiring, and retraining, and in terms of legally resolving a sexual harassment complaint.

Such actions violate the dignity of the individual and the integrity of the University as an institution of higher learning.

In particular, the Radiologic Sciences Program will not tolerate the sexual harassment or abuse of any of our students, whether the initiator is another student, patient, clinical site employee, or visitor. Any student violating this policy will be subject to disciplinary actions up to and including suspension from the program. (APPENDIX E, General Policies Section).
CHAPTER 3--PROFESSIONAL BEHAVIOR

GENERAL STATEMENT

The professional conduct of the ideal student technologist should be such that the patient's confidence is inspired. Only a consistent professional attitude can accomplish this. One must endeavor to treat patients with kindness and courtesy and insure preservation of the patient's privacy and safety. With respect to the latter, after the patient has been placed in an imaging suite the door should be kept closed and care must be exercised to keep the patient covered at all times. Always introduce yourself to the patient and any additional people in the room; wear your name tag/ID badge at all times.

STEPS IN PROFESSIONAL BEHAVIOR

1. Always knock prior to entering any room.

2. Do not congregate in areas where the patients are waiting for radiographic procedures. Patients do not understand the presence of apparently idle technologists. The patient may feel he/she is being kept waiting unnecessarily.

3. Never discuss a patient's history or information on reports with them or their relatives. Patient charts and all other patient records should be kept out of the reach of unauthorized persons including patients. If they request this information, tell them it must be given to them by their physician.

4. Do not discuss matters pertaining to work in any areas where the patient may be present.

5. No conversation should take place within a patient's hearing, which is not directly intended for their ears.

6. Drinking coffee or any other beverage is prohibited around patients; it is permitted in the lounge and in designated areas of the department.

7. Gum chewing and food consumption is prohibited in the presence of patients.

8. Treat each technologist, doctor (radiologists as well as other specialists), and other health professionals with the respect due their profession. Under no circumstances are students to address members of the medical staff as anything other than "doctor" while in clinical settings.

9. Do not become involved in arguments with any member of the professional staff regarding procedures or routines of the Department of Radiology. Any differences of opinion with any doctors or health professionals should be referred immediately to the supervising technologist.
10. When answering the phone in the clinical areas, answer in the following manner: "Department of Radiology. Your name, May I help you?"

11. While walking in the hallways of the hospital, if you see a visitor who seems lost or wandering, stop and inquire if you may direct them.

**Health Insurance Portability and Accountability Act of 1996 (HIPAA)**

The first-ever federal privacy standards to protect patients’ medical records (including Radiology exam reports) and other health information provided to health plans, doctors, hospitals, and other health care providers took effect on April 14, 2003. Developed by the Department of Health and Human Services (HHS), these new standards provide patients with access to their medical records and more control over how their personal health information is used and disclosed. They represent a uniform, federal floor of privacy protections for consumers across the country.

HIPAA consists of five components, or rules.

- Standards for electronic health information transaction
- Mandate on providers and health plans, and timetable
- Privacy
- Pre-emption of State Law
- Penalties

Of these five rules, the Privacy Rule creates national standards to protect individuals’ medical records and other personal health information (PHI).

Listed below are the 18 Identifiers defined by HIPAA that **MUST** be removed from any assignments prior to submitting the assignment.

<table>
<thead>
<tr>
<th>Patient Name</th>
<th>Medical record number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient address</td>
<td>Health Plan beneficiary number</td>
</tr>
<tr>
<td>Date of exam except year</td>
<td>Device identifiers and their serial #’s</td>
</tr>
<tr>
<td>Telephone number</td>
<td>Vehicle identifiers and their serial #’s</td>
</tr>
<tr>
<td>FAX number</td>
<td>Biometric identifiers</td>
</tr>
<tr>
<td>Email address</td>
<td>Full face photos &amp; other images</td>
</tr>
<tr>
<td>URL address</td>
<td>IP address</td>
</tr>
<tr>
<td>Social Security Number</td>
<td>Account numbers</td>
</tr>
<tr>
<td>License numbers</td>
<td>Any other unique identifiers</td>
</tr>
</tbody>
</table>
All SIUC Radiologic Sciences students are required to attend the HIPAA training classes offered by their respective clinical sites.

Further information on the HIPAA Privacy Rule is on the following website of the US Department of Health and Human Services.

www.hhs.gov/ocr/hipaa, then click on “Answers to your Frequently Asked Questions”.
SAFETY PRACTICES FOR PREGNANT RADIATION WORKERS

Embryonic and Fetal Effects

The embryo-fetus is comprised of large numbers of rapidly dividing and radiosensitive cells. The amount and type of damage which may be induced are functions of the stage of development at which the embryo-fetus is irradiated and the absorbed dose.

Radiation received during the pre-implantation period may result in spontaneous abortion or resorption of the embryo. Radiation injury during the period of organogenesis (2 to 8 weeks) may result in developmental abnormalities. The type of abnormality will depend on the organ system under development when the radiation is delivered. Radiation to the fetus between 8 and 15 weeks after conception increases the risk of mental retardation and has more general adverse impact on intelligence and other neurological functions. The risk decreases during subsequent period of fetal growth and development and, during the third trimester, is no greater than that of adults.

Dose Limits for the Embryo-Fetus

The sensitivity of the embryo-fetus for both mental retardation and cancer should be considered in all situations involving irradiation of the embryo-fetus. Therefore, for occupational situations, NCRP Report #116 Section 10 (1993) recommends that the embryo-fetus dose should not exceed 0.5 mSv (50 mrem) in any month; not more than 5 mSv (500 mrem) during the entire gestational period. This is based on the philosophy that a monthly limit will control radiation exposure during potentially sensitive periods of gestation. The recommendation reflects:

1. the need to limit the total lifetime risk of leukemia and other cancers in individuals exposed in utero;
2. at doses below this limit, all deterministic effects including small head size and mental retardation are expected to be negligible; and,
3. the view of the embryo-fetus as an "involuntary visitor" brought into a radiation area as a result of the mother's occupational exposure, and therefore, is treated as a member of the general public.

It is important to realize that there is no such thing as a "radio-unique" effect. That is, a variety of other factors such as air pollution, food additives, tobacco, alcohol, drugs, and stress can all lead to the same effect to the embryo-fetus as radiation exposure.²

The Pregnant MRI/CT Student

A pregnancy policy, for MRI/CT students enrolled in the Southern Illinois University at Carbondale, College of Applied Sciences and Arts, Radiologic Sciences program, has been developed and is in **APPENDIX J** in the MRI/CT Clinical Education Manual. Students are requested to read this policy, sign and date the Policy, and return it to University faculty within the first two weeks of each clinical semester.
CHAPTER 4 – CLINICAL EDUCATION

CLINICAL EDUCATION

The clinical education received in this program provides the student with the necessary clinical background in the manipulation of equipment, the handling of all types of patients, the setting of proper selection of CT scanning techniques and MRI pulse sequences, RF coil selection, image storage, and filing skills. All areas of these basic skills must be mastered before the student can successfully complete the program and be eligible to be certified by the American Registry of Radiologic Technologists in the specialty areas of CT and MRI and licensed by the Illinois Department of Nuclear Safety. CT is the post primary route and MRI is the primary route through the ARRT.

During the MRI/CT Specialization program, the student must rotate through the following clinical assignments for the length of time prescribed by the Program Director, Clinical Coordinator and/or Clinical Instructors:

1. Front desk
2. PACS
3. Sit with Radiologist if possible to observe readings of exams
4. Computed Tomography
5. Magnetic Resonance Imaging

Clinical Hours

Clinic hours will be performed during regular weekday schedule. In the event the student is not able to experience certain examinations, they may be required to attend their clinic internship during evening hours or weekends as needed. These are cumulative hours and if a student does not complete these hours during the allotted time she/he may be put on Radiologic Sciences Program Probation with the possibility of dismissal from the Program. Individual consideration will be given to the student with a valid excuse after consultation with the Clinical Instructor and designated SIUC faculty. (38 Hours a week; 14 weeks of MRI and 10 weeks of CT). You may be able to do 4 days a week instead of five, but you cannot exceed 10 clinical hours a day. Your clinical instructor at your facility will determine the days to attend. Your lunch break needs to be deducted from your clinical time. For example, if you work 7-330 with a 30-minute lunch break, then you will log 8 hours only of clinical internship for that day.

Clinical Exams

Students are required to keep a record of the CT and MRI examinations they have performed according to the MRI and CT Clinical Experience Requirements required by the ARRT. Accurately maintaining these records of examinations performed is important in
preparing to apply for the MRI and CT registry examinations offered by the ARRT. As part of an audit, the ARRT will require a copy of these records to be sent to them.

**Student Evaluation of Clinical Experience**

At the end of the clinical course the student is required to complete an evaluation of the respective clinical experience (APPENDIX L). This is an opportunity for the student to provide an evaluation of her/his clinical experiences. Through candid evaluations, the faculty can identify the strengths and weaknesses of a particular clinical affiliate and utilize this information for continuing program evaluation. Another area where this information is useful is in matching student's clinical experience weaknesses with affiliates that rate high in providing clinical experiences that address a student's weaknesses.

**Clinical Education Requirements**

Clinical Education Requirements are designed to help the student learn to adjust to the policies and procedure of the professional work force.

**Rules**

1. Prompt attendance in all clinical assignments must be maintained.

2. The student must rotate through all clinical assignments and gain working knowledge of the equipment and procedures performed.

3. If time is missed from clinic, the student will required to makeup all missed clinic time. All missed clinic time must made up before **graduation**. If a prolonged illness or injury occurs which would not allow a student to make up the time prior to the beginning of the next semester, the make-up time will be left to the discretion of the Program Clinical Coordinator. However, all missed time will be made up before graduation.

4. The student must satisfactorily complete all clinic competency objectives on or before the required deadlines of the semester.

5. The required number of clinical evaluations, time sheets, examinations completed and the clinical objectives must be turned in by the deadline date of the semester. Late submission of clinical assignments may result in a lowering of the clinic grade.

6. The student must satisfactorily complete rotations through the specialty areas of Magnetic Resonance Imaging and Computed Tomography.
7. The student must maintain satisfactory clinical evaluations completed by CT and MRI technologists and the clinical instructor.

8. The student must satisfactorily handle emergency room patients and produce satisfactory images within the specified time as designed by the program.

9. The students must demonstrate compassion and professional conduct (see pp. 7 & 8) at all times while working with patients.

10. The student must communicate properly with patients.

11. The student must be able to communicate and work with fellow students and technologists.

12. Professional conduct and dress will be exhibited by the student at all times while assigned to the clinical area.

13. The student must be able to cope and function during stressful situations.

14. The student must complete the required competencies within the specified time and is expected to retain proficiency.

15. Students will not be permitted in the clinical area except during their scheduled hours. This means students are not to come to clinical during their time off unless approved by their Clinical Instructor. SIUC faculty are to be involved with any modification to the student's clinic schedule.

16. Cell phone usage is up to the facility. Follow the hospital’s policy.

Any infraction of the above rules will result in the necessary disciplinary actions. The student must display professional behavior at all times.

**Clinical Radiation Protection Rules**

*Policy*

The following safety rules have been established for the protection of the patient, other personnel, and you from ionizing radiation during your clinical education. These rules are a combination of state and federal regulations and/or laws and additional guidelines condensed from man's 90+ years experience with ionizing radiation. These rules are mandatory and any exception must be reported to the Clinical Instructor and Clinical Coordinator as soon as possible.
**Procedure**

1. Regarding dosimeters:
   a. A film badge, properly placed at collar level, must be worn at ALL times during the CT clinical education semester.
   b. When protective aprons are used, the film badge must be placed above the apron, at collar level.
   c. Dosimeters are changed every 60 days.
   d. Dosimeters/holder will be turned in at the end of the program.
   e. If your dosimeter goes thru the washer and dryer it may cause your dosimeter to produce an artificially low reading.

2. When a CT exposure is about to be made, you **MUST**:
   a. Leave the room, or
   b. Get behind the lead shield, or
   c. Be otherwise suitably protected during the CT procedure.

3. Under no circumstances while in Computed Tomography will you permit yourself or any other human being to serve as "patient" for test exposures or experimentation.

**STUDENT SUPERVISION**

**Policy on Supervision of Radiologic Sciences Students:**

1. Students must have adequate and proper supervision during all clinical assignments, which includes **direct supervision until competency is achieved**. The following conditions constitute direct supervision:
   a. A qualified registered Computed Tomography or Magnetic Resonance Imaging technologist reviews the request for the CT/MRI examination (a) to determine the capability of the student to perform the examination with reasonable success; or (b) to determine if the condition of the patient contraindicates performance of the examination by the student.
   b. If either of the above determinations is questionable or negative, a qualified, credentialed CT/MRI technologist should be present in the control room.
   c. The qualified registered CT and /or MRI technologists checks and approves the CT/MRI images prior to the dismissal of the patient. Medical judgment may supersede this provision.
2. After a student demonstrates competency on a CT and MRI imaging procedure, the student may be under **indirect supervision** of a registered CT/MRI technologist on the premises, in the vicinity of the CT/MRI area and available for immediate assistance to the student.

3. The student will be under **direct supervision when working with trauma patients during 100% of their clinical training**.

**CLINIC ROTATION ASSIGNMENTS**

There are two specialty rotations (i.e., Computed Tomography and Magnetic Resonance Imaging) in the Radiologic Sciences MRI/CT specialization’s program. For the Spring, you will have RAD 404 and RAD 414. For the Summer, you will have RAD 424 and RAD 434. These assignments are to be done in conjunction with your clinical internship.

**All CT/MRI students must pass each of their Radiologic Science courses (RAD) with a grade of "C" or better (the minimum requirement) in order to satisfy Program requirements and stay in the Program. Any CT/MRI student that does not meet the minimum course requirement (a course grade of "C" or better) will not be allowed to continue in the Program. The student is allowed to re-apply to the Program the following year.**

**EACH STUDENT MUST DEMONSTRATE PROOF OF PERSONAL HEALTH/MEDICAL INSURANCE PRIOR TO ATTENDING THEIR CLINICAL ROTATION.**

During the clinical rotation, students are assigned to an affiliate hospital for 38 hours every week. They will be predominantly dayshift hours; however, some evening shifts and weekends will be required. The dayshift hours vary at each institution. Students are not to exceed 10 hours per day in the clinic internship site. 14 week of MRI and 10 weeks of CT

**POLICY MANUAL**

While at clinic, the student is required to read MRI and CT Policy Manual, Radiology Department Manual and the Hospital Policy Manual during the first three weeks of the rotation. The Hospital Policy Manual/Department Orientation Form (APPENDIX C) must be signed and returned to the Radiologic Sciences faculty to be placed in your file
APPENDIX A

ARRT STANDARDS OF ETHICS
ARRT Standards of Ethics

The Standards of Ethics of the ARRT apply solely to persons applying for examination and certification by ARRT (Candidates) and to persons holding current registrations by ARRT or formerly held registrations by ARRT (Registered Technologists). The Standards of Ethics are intended to be consistent with the mission statement of the ARRT, and to promote the goals it sets forth.

Applicants for registration by the American Registry of Radiologic Technologists (ARRT) must at the time of application and on subsequent occasions when the registration is renewed, agree to abide by the ARRT Code of Ethics. The Code of Ethics (ARRT Examinee Certification Handbook) is listed below.

"This Code of Ethics shall serve as a guide by which Registered Technologists (MRI/CT Technologists) and Candidates may evaluate their professional conduct as it relates to patients, colleagues, other members of the medical care team, health care consumers and employers. The Code is intended to assist Registered Technologists (MRI/CT Technologists) and Candidates in maintaining a high level of ethical conduct and in providing for the protection, safety and comfort of patients.

1. The Radiologic Technologist (MRI/CT Technologist) conducts himself/herself in a professional manner, responds to patient needs and supports colleagues and associates in providing quality patient care.

2. The Radiologic Technologist (MRI/CT Technologists) acts to advance the principle objective of the profession to provide services to humanity with full respect for the dignity of mankind.

3. The Radiologic Technologist (MRI/CT Technologists) delivers patient care and service unrestricted by the concerns of personal attributes or the nature of the disease or illness, and without discrimination regardless of sex, race, creed, religion, or socioeconomic status.

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

5. The Radiologic Technologist (MRI/CT Technologists) assesses situations, exercises care, discretion and judgment assumes responsibility for professional decisions, and acts in the best interest of the patient.

6. The Radiologic Technologist (MRI/CT Technologists) acts as an agent through observation and communication to obtain pertinent information for the physician to aid in the diagnosis and treatment management of the patient, and recognizes that interpretation and diagnosis are outside the scope of practice for the profession.
7. The Radiologic Technologist (MRI/CT Technologists) utilizes equipment and accessories, employs techniques and procedures, performs services in accordance with an accepted standard of practice, and demonstrates expertise in limiting the radiation exposure to the patient, self and other members of the health care team.

8. The Radiologic Technologist (MRI/CT Technologists) practices ethical conduct appropriate to the profession, and protects the patient's right to quality Radiologic Sciences care.

9. The Radiologic Technologist (MRI/CT Technologists) 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 (MRI/CT Technologists) continually strives to improve knowledge and skills by participating in educational and professional activities, sharing knowledge with colleagues and investigating new and innovative aspects of professional practice. One means available to improve knowledge and skill is through professional continuing education.

**Magnetic Resonance Technologist Scope of Practice**

The scope of practice of the medical imaging and radiation therapy professional includes:

- Receiving, relaying and documenting verbal, written and electronic orders in the patient’s medical record.

- Corroborating patient's clinical history with procedure, ensuring information is documented and available for use by a licensed independent practitioner.

- Verifying informed consent.

- Assuming responsibility for patient needs during procedures.

- Preparing patients for procedures.

- Applying principles of ALARA to minimize exposure to patient, self and others.

- Performing venipuncture as prescribed by a licensed independent practitioner.

- Starting and maintaining intravenous (IV) access as prescribed by a licensed independent practitioner.

- Identifying, preparing and/or administering medications as prescribed by a licensed independent practitioner.

- Evaluating images for technical quality, ensuring proper identification is recorded.

- Identifying and managing emergency situations.

- Providing education.

- Educating and monitoring students and other health care providers.

- Performing ongoing quality assurance activities.
The scope of practice of the magnetic resonance technologist also includes:

1. Performing procedures or examinations under the order of a licensed independent practitioner for diagnostic interpretation or therapeutic intervention.

2. Applying principles of magnetic resonance safety to minimize risk to patient, self and others.

3. Selecting appropriate pulse sequences with consideration given to established protocols and other factors influencing data acquisition parameters.

4. Assisting the licensed independent practitioner with interventional procedures.

5. Manipulating and reconstructing digital data for display or hard copy records, ensuring proper identification is evident.

6. Maintaining archival storage of digital data as appropriate.

**Computed Tomography Technologist Scope of Practice**

The scope of practice of the medical imaging and radiation therapy professional includes:

- Receiving, relaying and documenting verbal, written and electronic orders in the patient’s medical record.

- Corroborating patient's clinical history with procedure, ensuring information is documented and available for use by a licensed independent practitioner.

- Verifying informed consent.

- Assumining responsibility for patient needs during procedures.

- Preparing patients for procedures.

- Applying principles of ALARA to minimize exposure to patient, self and others.

- Performing venipuncture as prescribed by a licensed independent practitioner.

- Starting and maintaining intravenous (IV) access as prescribed by a licensed independent practitioner.

- Identifying, preparing and/or administering medications as prescribed by a licensed independent practitioner.

- Evaluating images for technical quality, ensuring proper identification is recorded.

- Identifying and managing emergency situations.

- Providing education.
- Educating and monitoring students and other health care providers.
- Performing ongoing quality assurance activities.

The scope of practice of the computed tomography technologist also includes:

1. Performing computed tomography procedures as prescribed by a licensed independent practitioner.
2. Assisting a licensed independent practitioner with interventional computed tomography procedures.
3. Selecting appropriate technical factors with consideration given to established protocols and other factors influencing data acquisition.
5. Archiving data as appropriate and documenting patient exposures.
APPENDIX B

SIUC STUDENT CONDUCT CODE
Southern Illinois University Carbondale (SIUC) is dedicated not only to learning, research, and the advancement of knowledge, but also to the development of ethical and responsible persons. The University seeks to achieve these goals through sound educational programs and policies governing conduct that encourages independence and maturity. By accepting membership in this University, an individual joins a community characterized by free expression, free inquiry, honesty, respect for others, and participation in constructive change. All rights and responsibilities exercised within this academic environment shall be compatible with these principles.

Students shall be free to examine all questions of interest to them and to express opinions. They shall be guaranteed all constitutional rights including free inquiry, expression, assembly, and disciplinary due process. All regulations shall seek the best possible reconciliation of the principles of maximum academic freedom and necessary order. Any behavior, which has been influenced by a student’s use of drugs or alcohol, will not limit the student’s responsibility for that behavior. *(That is, the student is responsible for his/her behavior regardless of drug and/or alcohol use).*

It is each student’s responsibility to know and comply with the SIUC Student Conduct Code and any policies referenced therein. In addition to the Student Conduct Code, students are also subject to other policies and procedures, including but not limited to, Student Behavior: Policy and Procedures for Administrative Review, Residence Halls Guidebook, departmental policies.

These regulations shall be known as the Student Conduct Code for SIUC. The regulations contained herein are established under the authority granted by law to the Board of Trustees to establish rules and regulations for SIU and pursuant to 3.C Policies of the Board of Trustees authorizing the Chancellor to develop regulations dealing with student rights and conduct. All students of the campus community have the responsibility to comply with these regulations. The responsibility for enforcement of the code rests with the Chancellor of SIUC.

The campus community has a responsibility to provide its members those privileges, opportunities, and protections that encourage and maintain an environment conducive to educational development. Therefore, the SIUC Student Conduct Code applies to:

1. Events and meetings sponsored by University-recognized student organizations.
2. Meetings or events when students represent the University or University-recognized organizations.
3. Off-campus housing zoned by the City of Carbondale as fraternity or sorority and displaying Greek letters or the name of the fraternal organization.

4. Practicum, internship, student field trip, student teaching, clinical settings, extension centers, residence centers, and independent study settings.

5. Other off-campus conduct that substantially interferes with the mission of the University including but not limited to, interference with the educational pursuits of its students, faculty or staff.

The University reserves the right to initiate disciplinary proceedings for violations of the Student Conduct Code where the University has jurisdiction, even when criminal charges are brought by the appropriate authority. Disciplinary actions by the University are independent of any criminal or civil proceedings.

Violations of the University Student Conduct Code are encompassed in two categories: acts of academic dishonesty and acts of social misconduct.

**Acts of Academic Dishonesty**

1. Knowingly furnishing false information to a University official relative to academic matters;

2. Plagiarism, representing the work of another as one’s own work;

3. Preparing work for another that is to be used as that person’s own work;

4. Cheating by any method or means;

5. Knowingly and willfully falsifying or manufacturing scientific or educational data, and representing the same data to be the result of scientific or scholarly experiment or research;

6. Soliciting, aiding, abetting, concealing, or attempting acts of academic dishonesty.

**Acts of Social Misconduct** There are 17 “Acts of Social Misconduct” listed in the Student Conduct Code. The “Acts” of particular importance to the Radiologic Sciences Program are noted below.

1. Violence
   a. Sexual Misconduct (includes any form of coerced or unwanted sexual activity including, but not limited to, rape or unwanted fondling or unwanted touching).
   b. Physical abuse
   c. Direct threat of violence and/or intimidation
   d. Participation in any activity to disrupt any function of the University by force or violence
   e. Violent behavior representing a danger to person(s)
2. Deception—Furnishing false information to the University with intent to deceive.

3. Threats to Safety

4. Stalking
   a. A person commits stalking when he or she on at least 2 separate occasions, follows another person or places the person under surveillance, knowingly and without lawful justification; and
      (1) at any time transmits a threat to that person of immediate or further bodily harm, sexual assault, confinement, or restraint; or
      (2) places that person in reasonable apprehension of immediate or future bodily harm, sexual assault, confinement, or restraint.
   b. For the purpose of this section, a person “places a person under surveillance” by remaining present outside the person’s place of residence, classroom, or other building on campus.
   c. For the purpose of this section, “follows another person” means
      (1) to move in relative proximity to a person as that person moves from place to place, or
      (2) to remain in relative proximity to a person who is stationary or whose movements are confined to a small area.

5. Disorderly Conduct: A person commits the offense of disorderly conduct when he/she knowingly does any act in such unreasonable manner as to alarm or disturb another and to provoke a breach of the peace.

Sanctions and Conditions

There are 10 “Sanctions and Conditions” listed in the Student Conduct Code. The “Sanctions” of particular importance to the Radiologic Sciences Program are noted here.

The following are sanctions which may be imposed for a violation of this Code.

Conditions may accompany a sanction. Conditions include, but are not limited to, restitution of damages, work projects, required counseling or therapy, required academic performance, etc. A condition may include loss of certain University privileges. If a condition accompanies a sanction, the condition must be related to the violation.

1. Failure of an assignment, quiz, test, examination or paper: A failing grade (F) may be assigned for the work in connection with which the violation occurred.

2. Failure in a course: A failing grade (F) may be assigned for the course in which the violation occurred.

3. Disciplinary Suspension: Disciplinary suspension is an involuntary separation of the student from the University for a stated period of time not to exceed three (3) years and until an imposed condition is met. A notation is entered on the student’s transcript and will remain there for the duration of the suspension. When the suspension is concluded, the notation will be removed.
4. **Expulsion**: A permanent involuntary separation of the student from the University.

5. **Additional Sanctions Associated with Suspension or Expulsion:**

   a. Students shall not be awarded degrees if, at the time of commencement, they are subject to disciplinary action or to charges under this Code that could lead to suspension or expulsion.

   b. A student separated from the University for disciplinary reasons is subject to the normal guidelines for the refund of tuition and fees, the issuance of grades, and the imposition of financial penalties for terminating a housing contract.

   c. If the conduct which led to disciplinary separation constitutes an ongoing threat to the safety of the University, its employees, or its students, the sanction may be accompanied by a condition which bars the disciplined student from University property.

The Vice Chancellor for Student Affairs and Enrollment Management, with the approval of the Chancellor, may establish a system of cost recovery measures to be assessed to students who are found in violation of the Student Conduct Code. The purpose of the cost recovery measures is to offset the costs specific to a sanction or a condition of a sanction. The cost recovery measures shall not be used as a sanction, in and of itself.
APPENDIX C

HOSPITAL ORIENTATION

DEPARTMENTAL ORIENTATION
Hospital / Department Orientation

All hospitals and clinical sites affiliated with the SIUC Radiologic Sciences Program have the ethical and professional responsibility to their employees, patients and the community to provide an environment which maintains the highest standards for safety, health and productivity.

To introduce the RADS student to the clinical setting and its standards, all our affiliated clinical facilities require each clinical internship student to participate in a hospital orientation, completed at least two weeks prior to the first day of the clinical semester. Some facilities will have the student complete the orientation the first day of their clinical internship. Each student must bring to this hospital orientation a copy of his/her individual immunization record including the result of his/her most recent TB skin test. The student’s immunization record enables the hospital to document the student’s health status prior to direct patient contact.

During July 2001, and based upon the “Quality of Health Care in America” project from the Institute of Medicine (IOM), the Joint Commission on Accreditation of Healthcare Organizations (JCAHO, the organization that accredits the clinical sites affiliated with the RADS Program) published and began enforcing a broad set of standards that focused on supporting medical/healthcare error reduction programs in its accredited organizations, as well as supporting new patient safety standards.

To ensure a greater focus on safe practices, for the protection of hospital patients, employees, visitors and the community-at-large, all our clinical sites are subjecting any clinical internship student (regardless of the medical field) to the same hospital orientation procedures that new employees attend. As such they require each clinical internship student to undergo a clinical drug screening and a criminal background check as a component of his/her hospital orientation, and as a condition of his/her attendance at the clinical site.

Any RADS student refusing to participate in this drug screening and background check will automatically be hindered from completing the Program!

Clinical Drug Screen

The use, sale, transfer or possession of controlled substances or alcohol by clinical internship students creates a potential for harm. It also questions the qualifications of the student to be a responsible caregiver. Therefore, during the hospital orientation, each RADS student will report to the hospital’s Laboratory, where a urine specimen will be collected for substance abuse screening and urinalysis.
Results of the substance abuse screening will be confidentially reported to the hospital’s Occupational Health Nurse or designated medical staff. The Occupational Health Nurse/designated medical staff will notify the Clinical Liaison Coordinator or the appropriate hospital Radiology Clinical Supervisor/Instructor of the positive or negative results of the screening. Since confirmation tests are automatically performed on all positive screening results, the RADS faculty strongly recommend that each clinical student take a list of his/her prescription medications and over-the-counter medications to the hospital orientation, to assist in the explanation of any unusual results.

If the drug screen is confirmed positive, the student will not be permitted to attend the clinical site for his/her RADS internship. Students will not be permitted to begin their clinical semester until negative drug screen results have been received.

A negative drug screen produces no additional testing. However, if during the clinical semester circumstances arise, additional testing may be conducted at that time.

**Criminal Background Check**

The Office of Inspector General (OIG) was established in the U.S. Department of Health and Human Services to identify and eliminate fraud, waste and abuse in the Department’s programs and to promote efficiency and economy in Departmental operations. The OIG carries out this mission through a nationwide program of audits, inspections, and investigations.

Additionally, the OIG has the authority to exclude from participation in Medicare, Medicaid, Tricare, the Veterans programs, and other Federal health care programs individuals and entities who have engaged in fraud or abuse, and to impose civil money penalties (CMPs) for certain misconduct related to Federal health care programs (sections 1128 and 1128A of the Social Security Act). ([http://oig.hhs.gov/faqs/exclusions-faq.asp](http://oig.hhs.gov/faqs/exclusions-faq.asp))

The effect of an exclusion (not being able to participate) is:

- No program payment will be made for anything that an excluded person furnishes, orders or prescribes. This payment prohibition applies to the excluded person, anyone who employs or contracts with the excluded person, any hospital or other provider where the excluded person provides services, and anyone else. This exclusion applies regardless of who submits the claims and applies to all administrative and management services furnished by the excluded person.

- No federal program payment may be made to cover the excluded person’s salary, expenses or fringe benefits, regardless of whether this excluded individual is providing direct patient care.
Civil money penalties of $10,000 for each item or service furnished by the excluded individual may be imposed by the OIG and the responsible party may have to pay three times the amount claimed for each item or service. Situations that could expose excluded persons and their employers to civil money penalties include (and are not limited to):

- Services performed by excluded nurses, technicians (radiographers, and advanced modality practitioners) or other excluded individuals who work for a hospital, nursing home, home health agency or physician practice, where such services are related to administrative duties, preparation of surgical trays or treatment plan reviews if such services are reimbursed, directly or indirectly, by a federal health care program, even if the individuals do not furnish direct care to federal program beneficiaries.

- Services performed by excluded pharmacists or other excluded individuals who input prescription information (contrast agent information) for pharmacy billing or who are involved in any way in filling prescriptions for drugs reimbursed, directly or indirectly, by a federal health care program.

These are the kinds of CMPs that can put most providers (hospitals, clinics, physician offices) out of business. (http://oig.hhs.gov/exclusions/files/sab-05092013.pdf accessed 11/13/2013).

If the former employer, of an SIUC Radiologic Sciences student, was convicted of Medicare fraud, Medicaid fraud and/or convicted of defrauding any other Federal health care program, then the student may also be listed in the conviction statement as well as being listed on the List of Excluded Individuals/Entities (LEIE; http://oig.hhs.gov/exclusions/exclusions/list.asp)

Once the specified period of exclusion ends, reinstatement of excluded entities and persons is not automatic.

For example: the previously excluded SIUC Radiologic Sciences student must apply for reinstatement and receive authorized notice from the OIG that reinstatement has been granted.

To apply for reinstatement, go to http://oig.hhs.gov/exclusions/reinstatement.asp for the specific details on the reinstatement procedure.

**Please note:** any previously excluded SIUC Radiologic Sciences student who does not apply for reinstatement may be disqualified from sitting for the ARRT Registry exam in radiography and the advanced modalities.

Students who have been criminally convicted of certain misdemeanors and/or felonies create a potential for harm. They may also be disqualified from sitting for the ARRT Registry exam in radiography and the advanced modalities.
APPENDIX C

RAD 404
HOSPITAL POLICY MANUAL
and
DEPARTMENT ORIENTATION FORM

I, ___________________________ have read and understand the Hospital Policy Manual at _________________________________. I agree to acknowledge and abide by the policies in the manual of _________________________________. Hospital/Clinic. If I do not abide by the policies as stated, I understand that I will be subject to expulsion from the clinical site.

I also have been given a hospital orientation as well as a Radiology Department orientation. The purpose of these orientations is to familiarize myself with the following:

- hazards (fire, electrical, chemical);
- emergency preparedness;
- medical emergencies;
- HIPAA;
- Standard Precautions;
- locations of various departments throughout the hospital;
- the hierarchy of the Radiology Department;
- image processing;
- the patient flow procedure from the beginning paperwork through the filing system; and
- routine protocols and procedures of the department.

_____________________________________________  ______________________
Student Signature                      Date

_____________________________________________  ______________________
Witness                                 Date
GRADES GIVEN AT THE END OF A COURSE ARE FINAL AND MAY NOT BE CHANGED BY ADDITIONAL WORK OR BY SUBMITTING ADDITIONAL MATERIALS.

EXTENUATING CIRCUMSTANCES WHICH TRANSCEND PROFESSIONAL JUDGMENT OF THE INSTRUCTOR MAY BE APPEALED THROUGH PROCEDURES ESTABLISHED BY THE INSTRUCTOR’S SCHOOL OR COLLEGE. MATTERS RELATED TO FACULTY JUDGMENT IN GRADING MAY NOT BE APPEALED.

A matter relating to academic evaluation is the responsibility of the department responsible for the program in which it occurs and the office of the dean of the College of Applied Sciences and Arts. Every effort should be made to resolve such academic evaluation problems quickly and at the program level where they occur prior to director involvement.

Grades may be appealed only on procedural grounds and not on substantive grounds. Grades may not be appealed beyond the level of the dean.

Matters pertaining to evaluation of a course in which the student is or has been registered that are not resolved between the persons directly involved will be adjudicated in the following manner:

1. A student who has reason to be aggrieved will file the complaint in writing with the department chairperson responsible for the program in which the incident occurs.
   a. The complaint must be presented in sufficient detail that a proper response may be made.
   b. The complaint must be received by the department chairperson within 30 working days of the occurrence of the incident.

2. The department chairperson will submit a copy of the complaint to the other party named in the complaint within three working days.

3. The other party will respond in writing to the complaint to the department chairperson within 15 working days of receipt of the copy of the complaint.

4. The department chairperson will, within seven working days of receipt of the response to the complaint, transmit a written decision in the matter to both parties along with notification of appellate procedures. A copy of the response to the complaint will also be sent to the dean of the College. Failure of either party to respond through the appropriate appellate channels within 15 working days will be interpreted as acceptance of the decision and its implementation by the appropriate office.
5. Should either party be unwilling to accept the decision of the department chairperson, an appeal may be made to the dean of the College. Such appeal must be submitted in writing within 15 working days of the receipt of the decision by the department chairperson. The appeal must specify:

a. The original complaint;

b. The grounds for the appeal; and

c. Recommendation(s) for resolution of the complaint.

6. The appellant, after consultation with the dean of the College, will select one of the following procedures for adjudication:

a. **Administrative:** The Dean of the College will review the matter with each of the parties involved and render a decision in writing within 30 working days of the review.

b. **Panel:** The dean of the College will appoint a panel consisting of three faculty members with no administrative appointment and three students to review the matter and render a decision within 30 working days of the review. Written records of the review proceedings will be placed in the student's permanent record in the College.

7. When a decision is reached by one of the above methods, the dean of the College will notify each of the parties of the decision in writing. A copy of the decision will be filed with the student's permanent record in the College. An information copy will also be sent to the dean of the Graduate School if the matter involves a graduate student. There is no appeal for grades above the level of the college dean.
STUDENT ACADEMIC GRIEVANCE PROCEDURES

Southern Illinois University at Carbondale

A student who believes he or she has been unreasonably denied an educational benefit due to his or her religious belief or practices may petition in writing as follows:

Cases involving class attendance or class examinations that are unresolved at the class instructor level may be appealed by the student by filing a petition in writing, within thirty (30) calendar days of the incident being appealed, to the chair or coordinator of the department or program in which the course is offered. In the event the case is not resolved to the student’s satisfaction at the department/program level within five (5) working days after the chair’s receipt of the petition, the student may petition in writing to the dean of the school or college to which that teaching department or program reports.

The student’s petition to the school or college level must be filed with the dean within five (5) working days of the decision at the department level. Should the case not be resolved to the student’s satisfaction at the school or college level within five (5) working days of the petition filing at that level, the student may petition the Provost. If the student is still not satisfied at that level within the five (5) working day time period, he or she may petition to the Chancellor within another five (5) working days. Decisions of the Chancellor may be appealed to the President, and to the Board of Trustees if necessary, in accordance with Bylaws of the Board of Trustees. In cases involving admissions, the grievance process should follow the time frames described above, with the initial petition being filed with the Director of Admissions, which is the only filing point prior to the Provost.

Only after a student has exhausted all other prospects concerning a grievance with a JRCERT accredited program, should the student involve the JRCERT directly.

If the student wishes to contact the Joint Review Committee on Education in Radiologic
Technology.

JRCERT
20 N. Wacker Drive
Suite 2850
Chicago, IL 60606-3182
Phone: (312) 704-5300
Fax: (312) 704-5304
Email: mail@jrcert.org
APPENDIX D
STUDENT COUNSELING FORM

Student Name: ____________________________________________________________

Date: _________________________________________________________________

Reason: ______________________________________________________________

Summary of Discussion:

_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________

Plan of Action and Follow-up Date:

_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________

Program Faculty Signature   *Student Signature

Date   Date

*Your signature on this document does not indicate agreement but verifies the conversation took place.
**Clinical Grievance**

We realize that problems may occur during your education in our Radiologic Sciences program. We want to help you solve these problems, but can only do so if we are made aware of them.

Any problems incurred in the clinical facility should first be brought to the attention of the appropriate Clinical Instructor/Clinical Supervisor. The procedure for resolving a problem at a clinical facility is listed in the section "Student Grievance Appeals" (APPENDIX D, General Policies Section).

Any problems dealing with the program as a whole, whether with your classes at SIUC or problems that cannot be resolved to your satisfaction, please refer to the section of the handbook on Student Academic Grievance Procedures.

**UNSATISFACTORY CLINICAL PROGRESS**

**Clinical Probation**

Determination of unsatisfactory performance in the clinical area will be based on clinical objectives, clinical observations, film critique sessions, a student's professionalism and the ability to follow college and hospital policy based on safe and competent practice.

A conference will be held for failure(s) to transfer classroom knowledge to clinical training; for failure(s) to adhere to hospital, college or program policy; or for failure(s) to follow generally accepted rules of personal cleanliness, professional ethics and conduct, academic failure, and for failure to demonstrate knowledge, skill and judgment at the expected level. The Clinical Coordinator and Clinical Supervisor will confer with the student and discuss the reasons for, and means of, correcting the cause for the conference.

A remediation plan will be drawn up for discussing/documenting the cause of the Radiologic Sciences program probation, the terms of the probation and the length of time identified for improvement and reevaluating. The student will receive the original copy and a copy will be placed in her/his personal file. The situation and remediation plan will be discussed between the Clinical Supervisor, and the student.

If a student receives an unsatisfactory clinical performance evaluation, the student may be placed on probation for the remainder of the semester. Failure to show satisfactory improvement and/or comply with remediation will result in dismissal from the Program.
Clinical Suspension

If a situation arises that requires immediate and effective discipline, where extremely serious infractions of rules have occurred, then the student will be placed on suspension from the clinical setting pending a full investigation of the situation. Examples of actions that may lead to immediate suspension and possible dismissal include (but are not limited to):

1. A student behavior that constitutes a real or potential threat to the welfare of patients assigned to his/her care, to hospital visitors, or to other students or faculty (including radiology and medical staff).
2. Illegal activities such as stealing, assault, battery, etc.
3. Professional misconduct such as falsifying records, working under the influence of alcohol or drugs, pilfering hospital property for personal use, betrayal of patient confidentiality, etc.
4. Physical abuse: striking, pinching, biting, sexual abuse, etc.
5. Verbal abuse: ridicule, threats, use of foul language, etc.
6. Neglect: failure to perform assigned care, treatments, etc.
7. Negligence: failure to perform or performing something that causes harm to the patient.

All RADS students must be aware of how their attitudes and behavior interrelate and apply to the ARRT Code of Ethics, the ARRT Standards of Ethics, and the SIUC Student Conduct Code. The rationale being that the above examples of poor/criminal behavior are direct violations of these Codes and Standards. Violations that will prevent the student from completing the RADS Program will most likely will prevent the student from completing his/her education at SIUC.

Please keep in mind that our each of our affiliate clinical sites has a signed contract Memorandum of Understanding (MOU) with the SIUC Radiologic Sciences Program. Each signed contract is kept in the office of the Director of the School of Allied Health. Our hospitals have the responsibility to protect the health and safety of their patients, medical staff, employees and visitors. Therefore, these hospitals have the right to request the removal of any student from participation in the clinical experience at that facility when the hospital deems the student poses a danger to the health and safety of patients or staff, or such removal is in the best interest of patient care and treatment.
Any student found guilty of unsafe clinical practice will be suspended from the Radiologic Sciences Program with no opportunity for readmittance. Additional University sanctions may be applied affecting the student’s University standing.

A student who believes he or she has been unreasonable denied an educational benefit due to his/her religious beliefs or practices may petition in writing as follows:

Cases involving class attendance or class examinations that are unresolved at the class instructor level may be appealed by the student by filing a petition in writing, within thirty calendar days of the incident being appealed, to the chair or coordinator of the department or program in which the course is offered. In the event the case is not resolved to the student’s satisfaction at the department/program level within five working days after the chair’s receipt of the petition, the student may petition in writing to the dean of the school or college to which that teaching department or program reports.

The student’s petition to the school or college level must be filed with the dean within five working days of the decision at the department level. Should the case not be resolved to the student’s satisfaction at the school or college level within five working days of the petition filed at that level, the student may petition the Provost. If the student is still not satisfied at that level within the five working day time period, he/she may petition to the Chancellor within another five working days. Decisions of the Chancellor may be appealed to the President, and to the Board of Trustees if necessary, in accordance with Bylaws of the Board of Trustees. In cases involving admissions, the grievance process should follow the time frames described above, with the initial petition being filed with the Director of Admissions, which is the only filing point prior to the Provost.
APPENDIX E

RADIOLOGIC SCIENCES PROGRAM POLICY ON SEXUAL HARASSMENT

UNIVERSITY SEXUAL HARASSMENT POLICY
Radiologic Sciences Program Policy and General Statement.

Southern Illinois University at Carbondale is committed to creating and maintaining a community in which students, faculty, and staff can work together in an atmosphere free of all forms of harassment, exploitation, or intimidation. Sexual harassment, like harassment on the basis of race or religion, is a form of discrimination expressly prohibited by law. It is a violation of Title VII of the Federal 1964 Civil Rights Act and Title IX of the Educational Amendments of 1972 and a civil rights violation of the Illinois Human Rights Act 1992.

In addition to being illegal, sexual harassment runs counter to the objectives of the Radiologic Sciences program. When people feel coerced, threatened, intimidated, or otherwise pressured by others into granting sexual favors, or are singled out for derision or abuse because of their gender, their academic and clinical performance is liable to suffer.

Sexual harassment affects a person's health through physical and emotional suffering, fear, stress, decreased self-worth, absenteeism, and diminished quality of work. Family and working relationships suffer as well. It destroys trust, reputation, safety, productivity, and morale. Sexual harassment is costly in terms of absenteeism, time, recruiting, rehiring, and retraining, and in terms of legally resolving a sexual harassment complaint.

Such actions violate the dignity of the individual and the integrity of the University as an institution of higher learning.

In particular, the Radiologic Sciences program will not tolerate the sexual harassment or abuse of any of our students, whether the initiator is another student, patient, clinical site employee, or visitor. Any student violating this policy will be subject to disciplinary actions up to and including suspension from the program.

Sexual harassment may involve the behavior of a person of either sex toward a person of the opposite or the same sex. Examples of behavior that would be considered sexual harassment include, but are not limited to, the following:

1. Sexual cooperation affecting the condition of future employment;
2. Sexual cooperation affecting the results of a behavior rating, clinical competency exam, and/or advanced modality rotation;
3. Repeated flirtation, advances, and propositions;
4. Inappropriate touching and/or physical assault;
5. Persistent requests to date;
6. Sexual comments;
7. Names or labels;
8. Continuing behavior after objection;
9. Sexually explicit material.

**Appropriate Actions**

Any student experiencing sexual harassment during a clinical internship should follow the procedure for "Student Grievance Appeal," in the Clinic Handbook, with specific attention to:

1. Know your rights;
2. Speak out, say "NO!" or "STOP THAT!"
3. State your wishes assertively, do not apologize for the perpetrator's offensive behavior;
4. Pay attention to cues and body language;
5. Report it immediately to the Clinical Supervisor;
6. Keep a record noting time, date, words spoken, location and circumstances, feelings/other responses, names of other people in area, etc. This record helps document repeated behavior.

If a student comes to another student, staff technologist, the Clinical Supervisor, or University faculty for help with a sexual harassment complaint, we strongly encourage following the procedures listed below.

1. Listen - do not preach or offer your own opinion.
2. Provide assurances of no retaliation; offer to reassign the person to another area during the investigation;
3. If you are the appropriate person, conduct a swift and thorough investigation;
4. If not, encourage the student to tell someone who can take action;
5. Take the appropriate action.

Any other procedures identified in the Hospital Radiology Department's policy on sexual harassment should be followed and documented.

Further information on sexual harassment is located on-line at

[http://policies.siu.edu/personnel_policies/chapter4/ch4-all/sexual.html](http://policies.siu.edu/personnel_policies/chapter4/ch4-all/sexual.html)

[http://equity.siu.edu](http://equity.siu.edu)


Kay W Doan
Title IX Coordinator
618-453-4807
75
UNIVERSITY POLICY CONCERNING SEXUAL HARASSMENT

For Faculty, Administrative/Professional Staff,
Civil Service Employees and Students
Effective August 16, 1993

General Policy Statement

Southern Illinois University Carbondale is committed to creating and maintaining a community in which students, faculty, and staff can work together in an atmosphere free of all forms of harassment, exploitation, or intimidation. Sexual harassment, like harassment based on race or religion, is a form of discrimination expressly prohibited by law. It is a violation of Title VII of the Federal 1964 Civil Rights Act and Title IX of the Educational Amendments of 1972 and a civil rights violation of the Illinois Human Rights Act 1992.

In addition to being illegal, sexual harassment runs counter to the objectives of the University. When people feel coerced, threatened, intimidated, or otherwise pressured by others into granting sexual favors, or are singled out for derision or abuse because of their gender, their academic and work performance is liable to suffer. Such actions violate the dignity of the individual and the integrity of the University as an institution of higher learning. Academic freedom can exist only when every person is free to pursue ideas in a non-threatening, non-coercive atmosphere of mutual respect. Sexual harassment is harmful not only to the persons involved, but also to the entire University community. (See “Sexual Harassment in Higher Education is Illegal” at http://ode.siu.edu/posters/Required/Required_Sexual_Harassment_Posters_1.pdf)

The University will take whatever action is needed to prevent, stop, correct, or discipline behavior that violates this policy. Disciplinary action may include, but is not limited to, oral or written warnings, demotion, transfer, suspension, or dismissal for cause.

Definitions and Examples

Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, verbal or other expressive behaviors, or physical conduct commonly understood to be of a sexual nature, when:

1. Submission to, or toleration of, such conduct on or off campus is made, either explicitly or implicitly, a term or condition of instruction, employment, or participation on other University activities;

2. Submission to, or rejection of, such conduct is used as a basis for employment or for academic decisions or assessments affecting the individual's status as an employee or student; and,
Conduct has the purpose or effect of unreasonably interfering with an individual's status as a student or employee or creates an intimidating, hostile, or offensive work or educational environment.

Sexual harassment may involve the behavior of a person of either sex toward a person of the opposite or the same sex. Examples of behavior that would be considered sexual harassment include, but are not limited to, the following:

1. physical assault;
2. direct or implied threats that submission to sexual advances will be a condition of employment, work status, promotion, grades, or letters of recommendation.
3. a pattern of conduct, annoying, humiliating in a sexual way, that includes comments of a sexual nature and/or sexually explicit statements, questions, jokes, or anecdotes;
4. a pattern of conduct that would annoy or humiliate a reasonable person. Such conduct includes, but is not limited to gestures, facial expression, speech, or physical contact understood to be sexual in nature or is repeated after the individual signifies that the conduct is perceived to be offensively sexual.

Consenting Relationships

Consenting romantic and sexual relationships between a faculty member and a student, or between a supervisor and an employee, while not expressly forbidden, are discouraged. Taking note of the respect and trust accorded a professor by a student and of the power exercised by the professor, a relationship between a faculty member and a student should be considered one of professional and client, in which sexual relationships are inappropriate. A similar relationship exists between a supervisor and an employee. The power differential inherent in such relationships compromises the subordinate's free choice. A faculty member or supervisor, who enters into a sexual relationship with a student or an employee, where a professional power differential obviously exists, must realize that if sexual harassment is filed, then the burden will be on the faculty member or supervisor to prove immunity on grounds of mutual consent.

Relationships between a graduate student and an undergraduate, when the graduate student has some supervisory responsibility for the undergraduate, belong in this category. Among other relationships included are those between a student or employee and an administrator, coach, program director, counselor, or residential staff member who has supervisory responsibility for that student or employee. See the following website for further information:

http://policies.siu.edu/personnel_policies/chapter4/ch4-all/consenting_relationships.html


Protection of the Complainant and Others

No student, faculty member, or staff member may be subjected to any form of reprisal for seeking information on sexual harassment, filing a sexual harassment complaint, or serving as a witness in a proceeding involving a complaint of sexual harassment. Any retaliatory action will be a violation of this policy and will be grounds for disciplinary action. Individuals who believe they have been subjected to reprisal for their participation in a sexual harassment complaint may use the procedures of this policy to seek redress.

Protection of the Accused

Accusations of sexual harassment are damaging and can have far-reaching serious effects on the careers and lives of accused individuals. Allegations of sexual harassment must be made in good faith and not out of malice. Individuals who believe they have been falsely accused of sexual harassment may use the procedures of this policy to seek redress.

Responsibility of Supervisors

Supervisory personnel are charged with maintaining an atmosphere that discourages sexual harassment and ensuring that the University policy is enforced in their areas. Supervisors are directed to discourage all behavior that might be considered sexual harassment and to respond promptly to sexual harassment complaints. University officials who knowingly condone incidents of sexual harassment or instances of reprisal for reporting such complaints will be subject to disciplinary action.

Procedures for supervisors, faculty, etc. is found on the SIUC website.

http://affact.siu.edu/SH%20ON%20CAMPUS.doc
Complaint Resolution Office

The University President has assigned responsibility for the administration of this policy to Personnel Services and Labor Relations and has named its Executive Director as the complaint resolution officer for the University. The complaint resolution officer will disseminate the policy to the University community, devise education and training programs, maintain centralized records of sexual harassment complaints, oversee grievance process, coordinate the resolution of complaints, and evaluate the effectiveness of the complaint resolution procedures and related educational programs.

For further information about the sexual harassment policy and complaint resolution procedures, you may contact one of the Sexual Harassment Information Centers.

Affirmative Action (618) 536-6618
Counseling Center (618) 453-5371
International Programs & Services (618) 453-5774
Personnel Services & Labor Relations (618) 536-3369
Women's Services (618) 453-3655
Graduate School (618) 453-4540

ILLINOIS HUMAN RIGHTS ACT 1992

Forbids sexual harassment in employment.

Sexual harassment is any unwelcome sexual advances, requests for sexual favors, and any conduct of a sexual nature when:

1. submission to such conduct is made either explicitly or implicitly a requirement of employment;

2. submission to or rejection of such conduct is used as the basis for employment decisions affecting that individual; or

3. the harassment has the purpose or effect of unreasonably interfering with a person's work performance or creating an intimidating, hostile, or offensive working environment.

Employers are strictly liable for harassment committed by their agents or supervisors--with knowledge or not.

Employers are only liable for harassment by non-employees or non-supervisory employees if the employer knows or should have known of the conduct and did not take immediate and appropriate corrective action.
The Illinois Human Rights Act 1992 prohibits retaliation against an individual because of filing a charge, complaint, testifying, or assisting in an investigation.

Bidders and public contractors must have a written sexual harassment policy. For further information on the Illinois Human Rights Act 1992, contact:

Chicago Office
Illinois Department of Human Rights
100 W. Randolph Street, 10th Floor
Intake Unit
Chicago, Illinois 60601
Phone: (312) 814-6200
TTY: (866) 740-3953

Springfield Office
Illinois Department of Human Rights
222 South College, Room 101-A
Intake Unit
Springfield, IL 62704
Phone: (217) 785-5100
TTY: (866) 740-3953

Marion Office
Illinois Department of Human Rights
2309 West Main Street, Suite 112
Intake Unit
Marion, IL 62959
Phone: (618) 993-7463
TTY: (866) 740-3953
APPENDIX F

SIUC POLICY STATEMENT ON AIDS

SCHOOL OF ALLIED HEALTH
GUIDELINES FOR DEALING WITH INFECTIOUS DISEASE
(Including AIDS & Hepatitis B)
APPENDIX F
SIUC POLICY STATEMENT ON AIDS

GENERAL POLICY

After careful study, the University AIDS Task Force has accepted the conclusions of the American College Health Association, that:

Current knowledge...indicates that college and University students or employees with AIDS, ARC [AIDS Related Complex] or a positive HTLV-III antibody test do not pose a health risk to other students or employees in the usual academic or residential setting.

AIDS on the College Campus (1986)

The following policies are based on the current state of medical knowledge, and are subject to change as new information becomes available.

POLICY FOUNDATIONS

1. University decisions involving persons who suffer from AIDS shall be based on current and well-informed medical information.

2. Current prevailing medical authorities agree that AIDS is not communicated through casual contact but requires intimate sexual contact or an exchange of body fluids.

3. For the purpose of this policy statement, the term "AIDS" shall include AIDS, AIDS-Related Complex and a positive test for Human Immunodeficiency Virus.

4. This policy should be reviewed periodically to ensure that it reflects the most current information available from both governmental and medical authorities.

Nondiscriminating

1. The University shall not discriminate in enrollment or employment against an individual with AIDS.

2. No one shall be denied access to campus activities or facilities solely on the ground that they suffer from AIDS.

CONFIDENTIALITY

1. The University shall comply with all pertinent statutes and regulations which protect the privacy and welfare of persons in the University community who suffer from AIDS as well as the welfare of others within the University community.

2. The University will maintain procedural safeguards throughout the University with the objective of protecting the privacy of persons living with AIDS.

3. All confidential medical information about an individual will be handled in compliance with legal requirements and professional ethical standards.

4. The University will not disclose the identity of any student or employee who has AIDS, except as authorized by law or pursuant to guidelines following the general
standards include in the American College Health Associations' Recommended Standards and Practices for a College Health Program, fourth edition:

In general, it is recommended that no specific or detailed information concerning complaints or diagnosis be provided to faculty, administrators, or even parents, without the expressed written consent of the patient in each case.

UNIVERSITY RESPONSIBILITIES

1. The University shall develop and maintain a comprehensive educational program about AIDS.

2. The University shall identify sources of competent and confidential testing for AIDS as well as counseling services upon request.

3. The University shall identify sources of qualified medical care and encourage those with AIDS to utilize such sources.

4. The University shall adopt and implement safety guidelines as proposed by the U.S. Public Health Service for handling and disposing of blood and other body fluids.

5. Decisions in all situations involving students or employees with health problems are to be made on a case by case basis, based on the medical facts in each case and with concern for the confidentiality and best interests of all parties involved. The President, or his designee, shall identify the person(s) to be involved in each case.

Further information on HIV/AIDS exposure and follow up procedures are found on-line.

www.cehs.siu.edu/biological/Bbp/oecp10600.htm

www.cehs.siu.edu/fix/medmicro/retro.htm

www.cehs.siu.edu/biological/Bbp/attach3.htm

ANTIBODY TESTING OF STUDENTS AND FACULTY

General Screening
See SIUC Student Wellness Center at:

www.siu.edu/~shp/Wellness2001/Wellness1.html

www.aidsinfor.nih.gov/

Accidental Exposure (ARC/AIDS)
See the following websites of the University’s Center for Environmental Health and Safety.

www.cehs.siu.edu/biological/Bbp/oecp10600.htm

www.cehs.siu.edu/biological/Bbp/oecp10700.htm
Purpose

This policy:
- provides the guidance for management of health care workers with infectious diseases;
- is intended to enhance the safety of patients and healthcare workers, and;
- acknowledges that a patient's right to informed consent must outweigh the worker's right to privacy when a risk of disease transmission is present.

The determination of risk is made based on scientific evidence and current legal and policy precedent.

Background

Healthcare workers have an obligation to provide care to all members of the public that present for healthcare/treatment, regardless of the patient's infectious disease status. Universal precautions, and as necessary, standard precautions, are adopted to prevent the transmission of infectious diseases from patient to healthcare worker, healthcare worker to patient, or from patient to patient.

The SIUC Radiologic Sciences Program has a commitment to the rights and integrity of all involved in the educational process, including students, faculty and staff who have infectious diseases. SIUC makes the commitment within this policy that no person shall be excluded from participation in, denied the benefits of, or be subject to discrimination under any Program or activity sponsored or conducted by the SIUC Radiologic Sciences Program on any basis prohibited by applicable law including, but not limited to, race, color, national origin, religion, handicap or gender.

These guidelines are made in light of current scientific evidence, which supports the fact that the risk of transmission of infectious diseases from healthcare worker to patient is small to negligible if the Radiologic Sciences practitioner adheres strictly to the Centers for Disease Control Infection Control Guidelines, and follows the highest standards of professional conduct and behavior. It is within this frame of reference that the following Radiologic Sciences Program policies on infectious diseases were developed.
Policy Statement

Healthcare workers have an ethical obligation to their patients to know their own infectious disease status. For this reason, all workers who believe they are at risk for contracting human immunodeficiency virus (HIV), hepatitis B virus (HBV), hepatitis C virus (HCV) or other bloodborne diseases are encouraged to discuss their health status with their personal physician.

All students the Radiologic Sciences Program will be required to submit information regarding their HBV immunity status prior to the start of their first clinical internship. When possible, the vaccination series and post-vaccine testing for surface antibody should be completed before enrollment.

All students that have not verified immunity to HBV must submit results of a hepatitis B surface antigen (HbsAg) test within two months after acceptance to the Program, and before matriculation day. Students accepted to the Program after June 1 must submit this information no later than two weeks following beginning of classes. If that test is positive, a hepatitis B e-antigen (HbsAg) test result is also required. The risk of transmission of HBV from individuals positive for the e-antigen is considered to be significantly higher than the risk posed by those that do not carry the e-antigen.

Students that are e-antigen carriers of the hepatitis B virus will be offered the benefit of an expert review panel to explain the implications, both professionally and medically, of their condition. On an individual basis, the expert panel may offer the student a medical leave of absence if he or she decides to attempt to resolve the e-antigen status through medical treatment. Due to the nature and duration of current treatment regimens and the requirements of the Radiologic Sciences Program, the student would not be eligible to re-enter the Program during the current academic year. A reassessment of his or her medical condition with the expert panel will be offered to consider admission the following year. Those who decline the expert panel will not be allowed to continue in the Radiologic Sciences Program.

Faculty and Staff

The Radiologic Sciences Program encourages HIV, HCV or HbeAg-infected faculty, staff and employees with direct patient contact to discuss their situation with School of Allied Health Director.

Information shared with the School of Health Sciences Director will be held in confidence and the identity of the person will not be disclosed without their permission. However, if an individual wishes institutional intervention or the Director deems intervention necessary, strict confidentiality cannot be maintained. Minimally, it will be necessary for the School of Allied Health Director to discuss the situation with the Program Director and the College of Applied Science and Arts Dean. This will not be done, however, without the person's full knowledge.

Any modification of the clinical training, working conditions or privileges of HIV, HCV or HbeAg-infected students, faculty, staff, or employees will be determined on a case-by-case basis. The nature of the clinical activity, the technical expertise of the infected person, and the risks posed by the infection, attendant functional disabilities, and the transmissibility of simultaneously carried infectious agents will all be considered. The SIUC Radiologic Sciences Program may legitimately monitor the clinical activities of students, faculty, staff, or employees who are believed to pose an unwarranted risk to patients. The Radiologic Sciences Program shall cooperate with the HIV, HCV or HbeAg infected person, his or her personal physician, and other medical experts as appropriate in identifying and implementing precautions and Program
Confidentiality and HIV Infection

It is expected that all students, faculty staff and employees will be bound to the principle of strict confidentiality in all patient and health care related activities.

The SIUC Radiologic Sciences Program encourages students, faculty, staff and employees who believe they are at risk of HIV-infection to seek testing and counseling.

Student, Faculty, and Healthcare Staff Interaction with Patients with AIDS or HIV-Infection

Entry into the healthcare professions is a privilege offered to those who are prepared for a lifetime of service to the ill. Students, faculty and health care staff have a fundamental responsibility to provide care to all patients assigned to them, regardless of diagnosis as in accordance with the SIUC HIV/AIDS policy. A failure to accept this responsibility violates a basic tenet of the medical profession - to place the patient's interest and welfare first.

Individuals who feel that their activities within the School of Allied Health pose a special risk to their health because of exposure to HIV-infected patients, working conditions presenting a risk of exposure to HIV organisms, or the presence of HIV infection in the individual himself or herself, should seek the assistance of their immediate supervisor.

Education of Students, Faculty, and Staff of the School of Allied Health about AIDS and its Prevention.

The SIUC Radiologic Sciences Program provides a Program on prevention of exposure to infectious organisms in professional and personal situations early in the student's educational experience.

Implementation

Upon acceptance into the SIUC Radiologic Sciences Program, the student will be required to provide medical information. The information to be included on the medical record is determined by the Radiologic Sciences Program and the SIUC Radiologic Sciences Advisory Committee in consultation with the appropriate individuals, committees and departments.

Responsibility

All responsible parties will maintain the confidentiality of the affected individual(s) to the greatest extent possible. The members of the SIUC Radiologic Sciences Program listed below will consult with one another as necessary to provide the best possible outcome for the SIUC Radiologic Sciences Program, the students and the medical imaging profession.

ASA Dean

Participates in decisions regarding the management of individuals covered under this policy. Interacts with the affected individual, family members and medical professionals as necessary.
**SHS Director**
Convenes expert panel as necessary. Provides guidance to the affected individuals and other members of the School of Health Sciences as deemed necessary and appropriate. The Executive Associate Dean will determine the make-up of the expert panel and contact members to participate.

**Director of Environmental Health and Safety (At the University level)**
Maintain the *Policy on Infectious Diseases*, updating as necessary to reflect current medical, scientific and legal evidence. Disseminate policy to all responsible parties. Participate in expert panel as assigned by **______.** Ensure appropriate education of students and employees regarding this policy and the individual's rights and responsibilities under the policy.

Permission to use this adapted policy from:

Ms Eve Cuny  
Director of Environmental Health and Safety  
Assistant Professor, Pathology and Medicine  
University of the Pacific School of Allied Health  
2155 Webster St.  
San Francisco, CA  94115

Permission obtained and material adapted to the SIUC Radiologic Sciences Program by  
Rosanne M. Szekely, MSEd, RT(R) and Joan M. Davis, RDH, MS on 11/28/06.
References

ADA News. CDC probes hepatitis infection of 18 patients. April 4, 1994


CDC. Possible transmission of human immunodeficiency virus to a patient during an invasive dental procedure. MMWR 1990; 39:489-93.

CDC. Recommendations for Preventing Transmission of Human Immunodeficiency Virus and Hepatitis B Virus to Patients During Exposure-Prone Invasive Procedures. MMWR 1991; 40; 1-9.


Levin, ML, Maddrey, WC, Wands ,JR, Mendeloff, AI. Hepatitis B transmission by dentists. JAMA 1974; 228:1138-40


U. S. Department of Health and Human Services, Office for Civil Rights. Docket #07923091. Chang v. University of Iowa School of Allied Health
APPENDIX G

THE UNIVERSITY REPORT OF

INJURY/INCIDENT/HAZARD

and/or

EXPOSURE TO BLOODBORNE PATHOGENS
Instructions for completing the University report of Injury/Incident/Hazard and the University Bloodborne Pathogens Exposure Report

The SIUC University Report of Injury/Incident/Hazard and/or the SIUC University Bloodborne Pathogens Report are completed by the injured Radiologic Sciences student or by the appropriate Clinical Supervisor on behalf of the injured student when the imaging/therapy department does not have its own student-oriented ‘Incident Report’ form.

THE UNIVERSITY REPORT OF INJURY/INCIDENT/HAZARD

I. Parts I – V are to be completed by the injured Radiologic Sciences student or by the Clinical Supervisor on behalf of the injured student.

Additional copies of this Injury/Incident/Hazard Report form can be downloaded at www.cehs.siu.edu/_common/documents/incident_report_2.pdf

II. Once this form is completed:

   A. Send a copy of this completed form to the appropriate SIUC Radiologic Sciences Program Director or Clinical Coordinator.
      1. Sandi Watts for Diagnostic Radiography
      2. Jennifer Walker for MRI/CT.
      3. Shannon Anderson for Medical Sonography

   B. Place the original in the student’s radiology department file.

   C. Where applicable, send a copy of this completed form to the SIUC Student Health Center Medical Records Department and send a copy of this completed form to the student’s personal physician for follow-up treatment. Please make sure the injured student’s SIUC DawgTag number is on all documents sent to the University Student Health Center.

III. Exposure to Bloodborne Pathogens


   B. Place the original in the student’s Radiology department file, and send a copy this completed form to the appropriate SIUC Radiologic Sciences Program Director or Clinical Coordinator.
      1. Sandi Watts for Diagnostic Radiography
      2. Jennifer Walker for MRI/CT.
      3. Shannon Anderson for Medical Sonography.

   C. Where applicable, send a copy of this completed form to the SIUC Health Center Medical Records Department and send a copy of this completed form to the student’s personal physician for follow-up treatment. Please make sure the injured student’s SIUC DawgTag number is on all documents sent to the University Health Center
Report of Injury/Incident/Hazard

It is the responsibility of each supervisor to ensure that this report is filed with the Center for Environmental Health and Safety within 24 hours of becoming aware of an incident or hazard related to SIU facilities or operations. 

I. PERSON INVOLVED IN INCIDENT

<table>
<thead>
<tr>
<th>Name (Last, First, Mi)</th>
<th>Sex ☐ F ☐ M</th>
<th>E-Mail</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date Of Birth</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Address (Local)</td>
<td>Social Security #:</td>
<td></td>
</tr>
<tr>
<td>Status At Time Of Incident</td>
<td>Phone (W) _______ _____ _____</td>
<td></td>
</tr>
<tr>
<td>☐ Employee ☐ Visitor ☐ Student ☐ Other (Specify):</td>
<td>(H) _______ _____ _____</td>
<td></td>
</tr>
<tr>
<td>If An Employee, Give Job Title And Department</td>
<td>If A Visitor, State Purpose Of Campus Visit</td>
<td></td>
</tr>
</tbody>
</table>

IF OTHERS WERE INVOLVED, ATTACH ADDITIONAL COPIES OF THIS FORM FOR EACH PERSON.

Did Incident Arise Out Of And In The Course Of University Employment? ☐ Yes ☐ No

II. INCIDENT/OR HAZARD DESCRIPTION

<table>
<thead>
<tr>
<th>Place Where Accident/Incident Occurred Or Hazard Is Located</th>
<th>Date &amp; Time Of Incident</th>
<th>Name Of Area Supervisor Where Incident Occurred Or Hazard Is Located.</th>
</tr>
</thead>
</table>

Describe Activity Being Performed By Person Involved In Incident (I.E. Driving Truck, Lifting Crate, Etc.)

Fully Describe Incident/Hazard (Attach Additional Sheets If Necessary.)

List Any Witness Present

Name | Address | Phone (W) _______ _____ _____ |

Additional Witness(es) Present

Name | Address | Phone (W) _______ _____ _____ |

III. INJURY

Did This Incident Result In Injury To The Person Involved? ☐ Yes ☐ No

IF INJURY OR ILLNESS RESULTS FROM AN INCIDENT ARISING OUT OF AND IN THE COURSE OF UNIVERSITY EMPLOYMENT, THE INJURED PERSON OR THEIR SUPERVISOR (If injured person is unable) MUST CALL CareSys, Inc. AT 1-800-773-3221 AND REPORT THE INJURY OR ILLNESS

Describe Nature And Scope Of Personal Injury, If Any

Was Medical Care Sought? ☐ No ☐ Yes: Place & Date of Treatment ________________________________

IV. PROPERTY DAMAGE

Describe Property Damage, If Any

V. SIGNATURE

Printed Name Of Person Completing Form | Job Title/Occupation |

___________________________ | ____________________________ |

Phone Number (W) _______ _____ _____ | (H) _______ _____ _____ |

Signature Of Person Completing Form | Date |

___________________________ | ____________________________ |
BLOODBORNE PATHOGENS EXPOSURE REPORT

Southern Illinois University at Carbondale

In case of exposure to bloodborne pathogen(s), complete this form and return to the Center for Environmental Health and Safety within 24 hours. A copy must be taken to the SIUC Health Service or other healthcare provider for post-exposure evaluation. If other persons were involved, attach additional copies of this form for each person involved.

Date of Report: ______________________  Time of Report: ______________________

Name (Last, First, M.I.): ______________________________

Sex: [ ] M   [ ] F  Social Security Number: ____________________________

Address (Local): ____________________________  Date of Birth: ______________________

Work Phone: ____________________________  Home Phone: ____________________________

Status at time of exposure: Employee [ ]  Student [ ]  Faculty [ ]  Other (Explain): [ ]

Job title: ____________________________  Duties related to exposure: ____________________________

Has the exposed individual been immunized against hepatitis B virus?  Yes [ ]  No [ ]

Dates of immunization (1)_______(2)_______(3)_______

Place where exposure incident occurred: Date: ______________________  Time: ______________________

Did incident arise out of and in the course of University employment?  
Yes [ ]  No [ ]

Name of individual in charge of area where exposure occurred: ____________________________

List any witnesses present:

Name: ____________________________  Address: ____________________________  Telephone: ____________________________

Personal protective equipment in use at time of exposure:

Exposure to:

[ ] Blood  [ ] Internal body fluids (circle one)

[ ] Body fluid with visible blood  cerebrospinal, synovial, pleural,

[ ] Vaginal secretions  amniotic, pericardial, peritoneal

[ ] Seminal fluid

Type of Exposure:

[ ] Needlestick/sharps accident

[ ] Contact with mucous membranes (eyes, mouth, nose)

[ ] Contact with skin (circle all that apply)

  broken, chapped, abraded, dermatitis, prolonged contact, extensive contact
MRI SAFETY POLICY

The SIUC Radiologic Sciences CT/MRI Program created this policy to define safe MRI practices for the CT/MRI students. SIUC follows the ACR guidelines. There are no known biological risks associated with the magnetic field or radiofrequencies associated with MRI. The main magnetic field of MRI is always on, which requires that Zone III and Zone IV be secured at all times. Ferromagnetic objects, such as certain wheelchairs and oxygen tanks can become projectiles that may cause damage to the equipment, serious injury, or even death.

ZONE I:
All areas freely accessible to the public without supervision. Magnetic fringe fields in this area are less than 5 Gauss (0.5mT).

ZONE II:
Still a public area, but the interface between unregulated ZONE I and the strictly controlled ZONES III and IV. MRI safety screening typically occurs here under technologist supervision.

ZONE III:
An area near the magnet room where the fringe, gradient, or RF magnetic fields are strong to present a physical hazard to unscreened patients and personnel.

ZONE IV:
Synonymous with the MRI magnet room itself. Has the highest field (the greatest risk) and from which all ferromagnetic objects must be excluded.

All students will complete the MRI safety screening form and attend the MRI safety portion of RAD 384 in the Fall Semester, prior to their clinical internship. Once these have been completed as well as the Hospital Orientation, the students may enter all zones, however, MRI students may not grant any individual access to ZONE IV. Only a MRI credentialed, safety trained technologist may grant individuals access to ZONE IV.
APPENDIX I

SUBMITTING A CLAIM TO UNIVERSITY HEALTH SERVICES
Submitting a claim to the SIUC Health Center

In order for a claim to be covered under the Student Medical Extended Care Benefits Plan, a written claim must be filed with the Student Health Programs Medical Benefit Office within 90 days of the date on which the accident, injury, or illness giving rise to the claim occurred.

1. If there is any other insurance policy or policies under which a Student is eligible for benefits, that policy or policies is considered primary. If you have primary insurance, please submit your bills to that insurance first. The Explanation of Benefits (EOB) information explaining what was paid or denied by the primary coverage(s) must be sent to the Student Health Programs Medical Benefits Office when submitting a claim and/or bills. Explanation of Benefits must be submitted within 180 days from the date of the service for eligible charges.

2. An Extended Claim Form and Primary Insurance Form will need to be completed for each illness or injury. The Student may obtain these forms in person at the Student Health Programs Medical Benefit Office or on-line: http://shc.siu.edu/insurance then click on “Forms” in right column. Or access each form directly:
   Primary Insurance Form: http://shc.siu.edu/_common/pdfs/insurance/PrimaryIns.pdf
   Extended Care Claim Form: http://shc.siu.edu/_common/pdfs/insurance/Extend_Care_Claim.pdf

   If these forms are not completed, the claim will be denied. Submission of bills without completed claim forms is NOT sufficient to submit a claim.

3. The itemized bills (not just “Balance Due” statements) must be mailed or delivered in person to the Student Health Programs Medical Benefit Office within 90 days from the end of the semester in which the care was received. Claims submitted after this date will not be considered without reasonable justification (SIUC’s sole determination of reasonableness) for the delay in filing the claim. When Hospital charges are incurred, the Hospital must file a standard insurance acceptable bill (UB92) with the claim for consideration of payment. For Physician’s charges and other expenses, itemized bills from each provider must be submitted.

   HOW TO APPEAL A CLAIM

Claim Denial

In most cases, the Student Medical Benefit Office will furnish a written notice of denial of a claim within 30 days after the claim is filed. If additional time is needed, a notice will be sent to the claimant explaining the need for additional time which may extend us to 180 days. In the event the claim is denied, the notice will state:

1. The specific reason or reasons for the denial.
2. The specific reference to the pertinent Plan provisions which prompted the denial.

3. When appropriate, a description of any additional material or information that is needed, and an explanation of why it is necessary.

4. Information on how to contact the Student Medical Benefit Office if the covered person has any questions regarding the claim.

Claim Appeals

If a claim has been partially or fully denied, the claimant is entitled to a further review. The claimant or the claimant’s duly authorized representative may request a review of pertinent documents, and submit issues and comments in writing to support the claimant’s position. All appeals must be submitted in writing no more than 60 days after the denial to the Student Health Programs Medical Benefits Office at:

**Student Medical Insurance Office**

**Student Health Center, Mail Code 6740**

**374 East Grand Avenue**

**Southern Illinois University Carbondale**

**Carbondale, IL 62901**

The Claims Administrator will acknowledge receipt of the appeal, conduct the review and notify the claimant of the decision within 60 days. In the event that additional time to review the claim is necessary, the Claims Administrator will notify the claimant that an additional 60 days is necessary to complete the review of the appeal.

From the booklet, Student Medical Insurance Plan (SMIP) 2012-2013 Plan Year of the SIUC Student Health Services [http://shc.siu.edu/_common/pdfs/insurance/SIUCPlandocument2012.pdf](http://shc.siu.edu/_common/pdfs/insurance/SIUCPlandocument2012.pdf)
APPENDIX J

PREGNANCY POLICY FOR RADIOLOGIC SCIENCES STUDENTS
APPENDIX J

The Pregnant MRI/CT Student

The embryo-fetus is a rapidly reproducing cell system. As such, it is especially sensitive to radiation damage. The effects of radiation in utero are time related and dose dependent. These effects include prenatal death, neonatal death, congenital abnormalities especially of the central nervous system, malignancy induction, general impairment of growth, genetic effects and mental retardation.

Digital radiography, digital fluoroscopy, and angio-interventional procedures use high frequency generators where the radiation intensity at the tabletop can be 20 R per minute, and the radiation dose to the patient approaches 300 rad (3.0 Gy). As such, the scatter radiation has a greater intensity than that produced during routine fluoroscopy.

Similarly, the pregnant student must be aware of the hazards from Nuclear Medicine examinations. For example, radioiodine is known to concentrate in the thyroid gland. The fetal thyroid gland begins functioning at 10 weeks gestation. Radioiodine readily crosses the placenta, enters fetal circulation and concentrates in the fetal thyroid gland, thus impairing the growth and function of this vital organ. The pregnant Radiologic Sciences student must use extreme caution when working with Nuclear Medicine patients to reduce her chances of absorbing minute amounts of radioiodine and/or other radioactive substances.

Objective 8.3, of the "Standards for an Accredited Educational Program in Radiologic Sciences" of the Joint Review Committee on Education in Radiologic Technology (JRCERT) states that "...the program assures that Nuclear Regulatory Commission regulations regarding the declared pregnant student (declared pregnant worker) are published and made known to accepted and enrolled female students." In order to comply with Objective 8.3, the SIUC Radiologic Sciences Diagnostic Radiography faculty in conjunction with the Radiologic Science Advisory Committee believes it is the responsibility of the pregnant Radiologic Sciences student to advise her Clinical Instructor and Program Clinical Coordinator voluntarily and in writing of her pregnancy and estimated date of the baby's birth (delivery). Formal, voluntary notification (declaration of pregnancy) is the only means by which the clinical facility and the SIUC Radiologic Sciences program can ensure that the dose to the embryo-fetus is limited during the pregnancy. In the absence of the voluntary, written disclosure, a student cannot be considered pregnant. (This policy of voluntary notification is based on U. S. Nuclear Commission Regulatory Guide 8.13, Revision 3, June1999, "Instruction Concerning Prenatal Radiation Exposure").

The total dose limit to the embryo-fetus, during pregnancy is 5 mSv (500 mrem). Once the pregnancy is declared, the fetal exposure must not exceed 0.5 mSv (50 mrem) per month, as monitored by a "Baby" film badge, and worn at waist level beneath a lead apron. To comply with this embryo-fetus dose limit, the pregnant Radiologic Sciences student has the option to:
1. Continue her clinical and didactic education without modification or interruption. The student accepts full responsibility for her own actions and the health of her baby. Furthermore, the student absolves from liability her Clinical site and its Radiology staff, the SIUC Radiologic Sciences program and its faculty, and SIUC, from all complications that may occur during fetal growth, the birth, and the postnatal development of her baby.

2. Continue her clinical and didactic education with some modification of her clinical assignments. The pregnant student will not participate in portable radiography, fluoroscopic/C-Arm procedures, angiography, Nuclear Medicine exams, and high-dose rate brachy-therapy rotations. A grade of incomplete "INC" will be given until the student has completed all clinical education missed during the pregnancy. The completion of the "INC" may delay the student's sitting for the ARRT Radiography Exam, or any of its Advanced Exams.

3. Take a leave of absence from the clinical assignments during her pregnancy. A grade of incomplete "INC" will be given until the student has completed all clinical and didactic education missed during the pregnancy. The completion of the "INC" may delay the student's sitting for the ARRT Radiography Exam, or any of its Advanced Modality Exams.

4. Take a leave of absence from the Radiologic Sciences program. If the student notifies the Program Director of her desire to return, she will be offered a position in the next class, in the following year.

Additionally, Appendix B in the Diagnostic Radiography Clinical Evaluation Manual contains the Diagnostic Radiography Pregnancy Policy and directs the student to the following state and federal documents:

1. Joint Committee on Administrative Rules, Administrative Code, Title 32, Chapter 2, Section 340.280, Subchapters a-e. (www.ilga.gov/commission/jcar/admincode/032/032003400C02800R.html)


**SIUC RADILOCIG SCIENCES PREGNANCY POLICY**

The Radiologic Sciences Advisory Committee and the SIUC Radiologic Sciences faculty strongly believe that to limit the pregnant student to nonexposure activities would prevent her from completing the course objectives and thus compromise her education.

Furthermore, the Radiologic Sciences Advisory Committee and the SIUC Radiologic Sciences faculty recognize the basic premise of providing the pregnant student with the information
to make an informed decision based on her individual needs and preferences. Thus all SIUC Radiologic Sciences students are provided with the following documents:

1. Joint Committee on Administrative Rules (JCAR), Administrative Code, Title 32, Chapter 2, Section 340.280, Subchapters a-e.


Finally, the Radiologic Sciences Advisory Committee in conjunction with the SIUC Radiologic Sciences faculty believe it is the responsibility of the pregnant Radiologic Sciences student to advise her Clinical Instructor and Program Clinical Coordinator voluntarily and in writing of her pregnancy and estimated date of the baby’s birth (delivery). Formal, voluntary notification (declaration of pregnancy) is the only means by which the clinical facility and the SIUC Radiologic Sciences program can ensure that the dose to the embryo-fetus is limited during the pregnancy (not to exceed 5 mSv [500 mrem]). In the absence of the voluntary, written disclosure, a student cannot be considered pregnant.

Therefore, prior to attending each clinical semester, each SIUC Radiologic Sciences student shall read the documents in this Appendix, have his/her questions answered to his/her satisfaction, and choose to proceed with his/her Radiologic Sciences education as indicated on the Pregnancy Policy form contained herein.

If a Radiologic Sciences student becomes pregnant during a clinical semester, it is still her responsibility to advise her Clinical Instructor and Program Clinical Coordinator voluntarily and in writing of her pregnancy and estimated date of the baby’s birth (delivery), and to indicate, on the Pregnancy Policy form, her decision towards the Radiologic Sciences program.

The voluntary, written disclosure of her pregnancy and her decision towards the Radiologic Sciences program will be kept in the pregnant student’s clinical file, maintained by the program’s respective Clinical Coordinator. Release of such information may occur only upon the written permission of the student in question.

The Radiologic Sciences student has the option to withdraw a previous declaration of pregnancy. It is her responsibility to advise her Clinical Instructor and Program Clinical Coordinator voluntarily and in writing of the change in declaration.

Additionally, the student must return the previously acquired “Baby” dosimeter for proper processing, and for the closing of the “Baby’s” dosimeter record.
PREGNANCY STATUS DECLARATION

The Southern Illinois University at Carbondale (SIUC) Radiologic Sciences faculty in conjunction with the Radiologic Technology Advisory Committee believe it is the responsibility of the pregnant CT/MRI student to advise her Clinical Instructor and Program Clinical Coordinator voluntarily and in writing of her pregnancy and estimated date of her baby’s birth (delivery). Formal, voluntary notification of pregnancy is the only means by which the clinical facility and the University Radiologic Sciences program can ensure that the dose to the embryo-fetus is limited during the pregnancy not to exceed 5 mSv (500 mrem). In the absence of the voluntary, written disclosure, a student cannot be considered pregnant.

To comply with this embryo-fetus dose limit, the pregnant CT/MRI student has been given the following documents to read:

a. The January 1994 issue of the 32 Illinois Administrative Code, Chapter II Section 340.280, Subchapter b, Subsections (a) through (e) “Dose to an Embryo/Fetus”.
b. NCRP Report #116, 1993, Section 10 “Protection of the Embryo-Fetus”.

I have received and reviewed the pregnancy policy.

I am fully aware of SIUC’s pregnancy policy and choose to continue my clinical and didactic education without modification or interruption. If I am currently pregnant or become pregnant while in the CT?MRI program, I may notify my Clinical Instructor and Program Director voluntarily and in writing of my pregnancy with one of the options below if I want to declare pregnancy.

I am not pregnant and choose to continue my clinical and didactic education without modification or interruption. If I become pregnant while in the Radiologic Sciences program, I accept the responsibility to advise my Clinical Instructor and Program Clinical Coordinator voluntarily and in writing of my pregnancy and estimated date of my baby’s birth.

I am pregnant and choose to continue my clinical and didactic education without modification or interruption. I accept full responsibility for my own actions and the health of my baby. Furthermore, I absolve, discharge, release, and hold harmless my Clinical site and its Oncology staff, and the Board of Trustees for Southern Illinois University together with its officers and employees (the Medical Dosimetry program its faculty) for any legal liability, claims, damages or complications that may occur during fetal growth, birth, and postnatal development of my baby.

I am pregnant and choose to continue my clinical and didactic education with some modification of my clinical assignments. I will not participate in brachytherapy or gamma knife procedures. A grade of Incomplete “INC” will be given until I have completed all clinical education missed during my pregnancy. The completion of the “INC” may delay my sitting for the MDCB Exam.

I am pregnant and choose to take a leave of absence from the clinical assignments during my pregnancy. A grade of Incomplete “INC” will be given until I have completed all clinical education missed during my pregnancy. The completion of the “INC” may delay my sitting for the MDCB Exam.

I am pregnant and choose to take a leave of absence from the CT/MRI portion of SIUC Radiologic Sciences program. If I notify the Program Director of my desire to return, I will be offered a position in the next class, the following year.

I wish to withdraw my previous declaration of pregnancy.

I agree to comply with the above-stated policy and with my decision as indicated above.

____________________________________  ______________________
Student Signature                        Date

____________________________________  ______________________
Supervising Clinical Instructor          Date

____________________________________  ______________________
MRI/CT Clinical Coordinator              Date
APPENDIX K

UNIVERSITY LIABILITY INSURANCE
APPENDIX K

General Coverage Information

Due to copyright restrictions instituted by the SIU Board of Trustees, the reader is directed to the following webpages pertaining to University Risk Management, section 5 of the University President’s Guidelines (www.siu.edu/pres/guidelines/).

Introduction www.siu.edu/pres/guidelines/section51.html

Comprehensive General and Professional Liability www.siu.edu/pres/guidelines/section53.html

Certificate of Insurance

Any clinical facility desiring a hard copy of the Certificate of Insurance governing the SIUC Radiologic Sciences Program, may request it from:

Sherri Phillips
University Risk Management
Mail Code 6829
Southern Illinois University Carbondale
Carbondale, IL 62901

Phone: 618-536-2101
E-Mail: sherrip@siu.edu
Fax: 618-453-5442
APPENDIX L
Clinical Internship Evaluation Form
End of CT Clinical Rotation Evaluation Form

Clinical Location: ________________________________________________________________
Clinical Rotation (CT): ______________________ Date: ________________________________

Please rate the following categories: 5=Excellent  4=Very Good  3=Good  2=Fair  1=Poor  0=Not Applicable

This evaluation will be held in confidence and is performed to insure that the facility is meeting the needs of the CT/MRI student. If any difficulties arise prior to the end of the semester, it is the responsibility of the student to notify the CT/MRI program director or clinical coordinator immediately.

1-The facility provided adequate opportunity for completion of the required competencies:
   5 4 3 2 1 0

2-The CT technologists were courteous, informative, and helpful:
   5 4 3 2 1 0

3-The clinical instruction helped me apply what I learned in the classroom:
   5 4 3 2 1 0

4-Radiologist input was informative and helpful:
   5 4 3 2 1 0

5-The overall clinical experience was a positive contribution toward my clinical education:
   5 4 3 2 1 0

Please list any positive or negative comments below regarding the clinical site:

Student comments:
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

Student Signature: ________________________________________________________________

Thank you,
Jennifer Walker
End of MRI Clinical Rotation Evaluation Form

Clinical Location: _______________________________________________________________
Clinical Rotation (MRI): ________________________Date: ____________________________

Please rate the following categories:  5=Excellent  4=Very Good  3=Good  2=Fair  1=Poor  0=Not Applicable

This evaluation will be held in confidence and is performed to insure that the facility is meeting the needs of the CT/MRI student. If any difficulties arise prior to the end of the semester, it is the responsibility of the student to notify the CT/MRI program director or clinical coordinator immediately.

1-The facility provided adequate opportunity for completion of the required competencies:
   5  4  3  2  1  0

2-The MRI technologists were courteous, informative, and helpful:
   5  4  3  2  1  0

3-The clinical instruction helped me apply what I learned in the classroom:
   5  4  3  2  1  0

4-Radiologist input was informative and helpful:
   5  4  3  2  1  0

5-The overall clinical experience was a positive contribution toward my clinical education:
   5  4  3  2  1  0

Please list any positive or negative comments below regarding the clinical site:

Student comments:
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

Student Signature: __________________________

Thank you,
Jennifer Walker
Name ________________________________________ Last First MI ________________________________

Address ______________________________________ Street
City State Zip code ________________________________

Date of Birth (DOB) ____________________________ Local/Cell Phone # ____________________________

Name and address of person to contact in an emergency:

<table>
<thead>
<tr>
<th>Name of Emergency Contact Person</th>
<th>Relationship to Student</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Address ______________________________________ Street
City State Zip code Phone Number ________________________________

Name and address of family physician or healthcare provider:

<table>
<thead>
<tr>
<th>Name of Physician/Healthcare Provider</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

Address ______________________________________ Street
City State Zipcode Phone Number ________________________________

**PERSONAL HISTORY and PHYSICAL EXAMINATION:** (completed by medical provider)
Check only if they apply to you. Explain details or abnormal results on the third page of this form.

- Allergy — Asthma
- Anxiety – Depression
- Back Injury
- Diabetes
- Fainting or Blackouts
- Heart Disease
- Hepatitis
- High Blood Pressure
- Hyperactivity
- Immunosuppressed
- Migraine Headaches
- Skeletal Deformity

Vaccinations for:
- Chicken Pox
- Small Pox
- Rheumatic Fever
- Measles
- Tetanus
- Typhoid Fever
- Mumps
- Polio
- Influenza
- Rubella
- Other

Prosthesis & Sensory Aides, such as:
- Glasses
- Contact Lenses
- Ocular Implant
- Hearing Aid
- Artificial Limb
- Cochlear Implant
- Other

Doctor, students entering the field of Radiologic Sciences must have the following abilities in order to complete the SIUC Radiologic Sciences Program. On the third page, please indicate and explain, in your opinion, which ability(ies) the student has difficulty performing.

a. Lift 50 pounds of weight and/or assist in lifting patients using proper body mechanics.
b. Push large pieces of equipment such as mobile radiographic units or mobile fluoroscopic units.
c. Push patients in wheelchairs or on stretchers.
d. See, hear, and respond quickly to patients in emergency situations.
e. Communicate with patients and other health care professionals in oral and written forms.
f. Understand requisitions and other records necessary for proper patient care.
g. See the patient and collimator lights to properly position for radiographs.
h. Move radiographic tubes, tables, upright Bucky trays, etc., as necessary for each exam.
i. Walk for long distances as is necessary for mobile (portable) radiography.
j. Performs all duties as required of a medical Radiographer.
REQUIRED IMMUNIZATIONS (completed by medical provider; based upon the CDC Recommended Adult Immunization Schedule, 2013. www.cdc.gov/vaccines/recs/schedules/downloads/adult/mmwr-adult-schedule.pdf. All dates must include month/day/year).

MMR (Measles, Mumps, Rubella): Two doses required, at least one month apart, after age 12 months AND after live vaccine available (05/01/1971).

    Dose 1 ___/____/____       Dose 2 ___/____/____

If MMR was not given, list individual immunizations below, OR attach lab report of MMR titer.

Measles (Rubella, Hard Red, 10 Day Measles)
1. Two doses required, at least one month apart, after 12 months of age AND after live vaccine available (01/01/1968).
    Dose 1 ___/____/____       Dose 2 ___/____/____

OR, 2. Date disease diagnosed and certified by physician. ___/___/___

OR, 3. Lab report of Measles titer proving immunity (attach lab report) ___/___/___

Rubella* (German Measles, 3 Day Measles)
1. One dose required, after 12 months of age AND after live vaccine available (06/19/1969). ___/____/____

OR, 2. Lab report of Rubella titer proving immunity (attach lab report) ___/___/___

* History of Rubella disease is not acceptable as proof of immunity.

Mumps
1. One dose required, after 12 months of age AND after live vaccine available (01/01/1968). ___/___/___

OR, 2. Date disease diagnosed and certified by physician. ___/___/___

OR, 3. Lab report of Mumps titer proving immunity (attach lab report) ___/___/___

Tetanus/Diphtheria: Three doses of Diphtheria/Pertussis/Tetanus (DPT) in childhood and a booster of Tetanus/Diphtheria within last 10 years OR a 1-time dose of Tetanus/Diphtheria/Acellular Pertussis (Tdap), within the last 2 years.

    Dose 1 ___/____/____       Booster Dose ___/____/____ (must be within last 10 years) OR
    Dose 2 ___/____/____       Tdap Dose ___/____/____ (must be given within last 2 years)

Tuberculosis: Two-Step Mantoux skin test/PPD skin test (Performed no earlier than June 1st).

    Dose 1: ___/____/____       Dose 2: ___/____/____ Results of skin test _____ mm

Has patient had a history of previous positive skin test? ☐ Yes ☐ No

Has patient received BCG? ☐ Yes ☐ No Has patient received INH? ☐ Yes ☐ No

If “yes” is answered for any of the above 3 questions, attach supporting documentation, including the results of the student’s QuantiFERON-TB Gold test (QFT) and Chest x-ray reports (where applicable).

Varicella** (Chicken Pox)

    Date of Disease ___/____/____    And Varicella titer to prove immunity ___/____/____ (attach lab report)

    Or, Dose 1 ___/____/____    And Dose 2 ___/____/____

** History of Varicella disease is not acceptable as proof of immunity.

Hepatitis B

    Dose 1 ___/____/____       Dose 2 ___/____/____       Dose 3 ___/____/____

Influenza (Flu Vaccine; Given in October or as soon as available) ___/____/____
STRONGLY RECOMMENDED IMMUNIZATIONS (completed by medical provider; based upon the CDC Healthcare Personal Vaccination Recommendations www.immunize.org/catg.d/p2017.pdf. All dates include month/day/year).

Meningitis ____/____/____
   □ Menactra
   □ Menomune
   □ Meningococcal (unspecified)

Second Mumps Vaccine ____/____/____

List all prescriptions and non-prescription medications, injections or drugs currently in use. List the purpose for the use of each medication. Please indicate how these medications will affect the student's behavior and ability to provide proper patient care.

Please use this space to comment or explain any abnormal result, and to indicate how this will affect patient care or professional behavior. Also, please explain which technical ability the student has difficulty performing.

________________________________________
_____________________
Physician's Signature
Office Phone Number

_____________________
Date

WAIVER:
I ________________________________ acknowledge the accuracy of this medical history and permit the release of this information to any of my assigned clinical supervisors. Additionally, for any medical test/treatment that I may receive at any of my assigned clinical sites, I permit the release of that information/related results to my Radiologic Sciences Program Clinical Coordinator or his/her designee.

________________________________________
_________________________
APPENDIX N

CLINICAL PERFORMANCE EVALUATIONS
SIUC CT/MRI Student  
Clinical Performance Evaluation  
1st MRI Evaluation

Student Name: ___________________________  Clinic Site: ___________________________  
Date: ___________________________

Please rate each statement by placing the number that best describes the student’s professional and clinical performance (based upon the amount of time they have been in that rotation) in the space provided:

0=Unacceptable  
1=Required Major Improvement  
2=Requires Minor Improvement  
3=Acceptable  
4=Good Performance  
5=Excellent Performance (consistently performs without need for direct supervision)

<table>
<thead>
<tr>
<th>Evaluation Item</th>
<th>Score and Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Organizational Skills:</td>
<td></td>
</tr>
<tr>
<td>Shows an efficient and methodical approach to each</td>
<td></td>
</tr>
<tr>
<td>patient exam by preparing the patient and the room</td>
<td></td>
</tr>
<tr>
<td>for the exam.</td>
<td></td>
</tr>
<tr>
<td>2. Quality of Work:</td>
<td></td>
</tr>
<tr>
<td>Shows evidence of wanting to learn by taking notes</td>
<td></td>
</tr>
<tr>
<td>or asking questions.</td>
<td></td>
</tr>
<tr>
<td>3. Comprehension and Demonstration of Imaging</td>
<td></td>
</tr>
<tr>
<td>Procedures:</td>
<td></td>
</tr>
<tr>
<td>Degree to which the student applies knowledge of</td>
<td></td>
</tr>
<tr>
<td>landmarks and scan ranges to produce quality images.</td>
<td></td>
</tr>
<tr>
<td>4. Performance under Pressure:</td>
<td></td>
</tr>
<tr>
<td>Maintains composure in a stressful environment.</td>
<td></td>
</tr>
<tr>
<td>Performs well in a continuously changing setting.</td>
<td></td>
</tr>
<tr>
<td>5. Judgement and Critical Thinking:</td>
<td></td>
</tr>
<tr>
<td>Exhibits entry-level knowledge about MRI.</td>
<td></td>
</tr>
<tr>
<td>Demonstrates respect for confidential patient</td>
<td></td>
</tr>
<tr>
<td>information and HIPAA policies.</td>
<td></td>
</tr>
<tr>
<td>6. Perseverance:</td>
<td></td>
</tr>
<tr>
<td>Shows an interest in learning despite criticism or</td>
<td></td>
</tr>
<tr>
<td>feedback.</td>
<td></td>
</tr>
<tr>
<td>7. Self-Confidence:</td>
<td></td>
</tr>
<tr>
<td>Demonstrates the ability for self-reliance as the</td>
<td></td>
</tr>
<tr>
<td>student gains experience.</td>
<td></td>
</tr>
<tr>
<td>8. Professional Ethics/Attitude Behavior:</td>
<td></td>
</tr>
<tr>
<td>Demonstrates appropriate behavior for hospital</td>
<td></td>
</tr>
<tr>
<td>setting.</td>
<td></td>
</tr>
<tr>
<td>9. Initiative and Quantity of Work:</td>
<td></td>
</tr>
<tr>
<td>Seeks out additional exams. Shows an interest in</td>
<td></td>
</tr>
<tr>
<td>participating in exams.</td>
<td></td>
</tr>
<tr>
<td>Actively seeks learning opportunities and readily</td>
<td></td>
</tr>
<tr>
<td>helps others in need.</td>
<td></td>
</tr>
</tbody>
</table>
10. **Attitude towards Assigned Tasks:**
   Accepts all tasks and assignments with a positive attitude.

11. **Attitude towards Advice/Criticism/Correction:**
   Is receptive to suggestions or corrections, exercises self-control, and demonstrates interest in assignments. Accepts advice without negative comments or behavior.

12. **Punctuality and Attendance:**
   Extent to which student is present at clinical internship without absence and/or tardiness. Arrives early/on time and ready to work.

13. **Personal Appearance/Attire:**
   Dresses appropriately and good hygiene

14. **Interpersonal Relationship with Peers and Patients:**
   Demonstrates courtesy and empathy. Ability to establish a good rapport with the patient. Interaction with peers is respectful, supportive, and kind.

15. **Effective Communication:**
   Communicates effectively with other technologists and has good teamwork.

   Total Possible Points: 75

Evaluator’s Comments:

________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

Clinical Instructor’s Signature: _____________________ Date:____________________

**I have reviewed this evaluation with the Clinical Instructor.**

Student’s Signature: _____________________ Date:____________________

Student’s Comments:

________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
Please rate each statement by placing the number that best describes the student’s professional and clinical performance (based upon the amount of time they have been in that rotation) in the space provided:

0=Unacceptable
1=Required Major Improvement
2=Requires Minor Improvement
3=Acceptable
4=Good Performance
5=Excellent Performance (consistently performs without need for direct supervision)

<table>
<thead>
<tr>
<th>Evaluation Item</th>
<th>Score and Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Organizational Skills:</td>
<td>_______________</td>
</tr>
<tr>
<td>Shows an efficient and methodical approach to each patient exam by having all necessary items ready for the exam.</td>
<td></td>
</tr>
<tr>
<td>2. Quality of Work:</td>
<td>_______________</td>
</tr>
<tr>
<td>Shows evidence of being able to distinguish quality images.</td>
<td></td>
</tr>
<tr>
<td>3. Comprehension and Demonstration of Imaging Procedures:</td>
<td>_______________</td>
</tr>
<tr>
<td>Degree to which the student applies knowledge of landmarks and scan ranges to produce quality images.</td>
<td></td>
</tr>
<tr>
<td>4. Performance under Pressure:</td>
<td>_______________</td>
</tr>
<tr>
<td>Maintains composure in a stressful environment. Performs well in a continuously changing setting.</td>
<td></td>
</tr>
<tr>
<td>5. Judgement and Critical Thinking:</td>
<td>_______________</td>
</tr>
<tr>
<td>Exhibits logical thought and good judgement in making decisions, recommendations, and demonstrates respect for Confidential patient information and HIPAA policies. Ability to evaluate needs of a technical situation before Procedure starts.</td>
<td></td>
</tr>
<tr>
<td>6. Perseverance:</td>
<td>_______________</td>
</tr>
<tr>
<td>Maintains focus despite setbacks. Shows an interest in learning despite criticism or feedback.</td>
<td></td>
</tr>
<tr>
<td>7. Self-Confidence:</td>
<td>_______________</td>
</tr>
<tr>
<td>Starting self-reliance but asks for help when appropriate. Conveys confidence to the patient and to others.</td>
<td></td>
</tr>
<tr>
<td>8. Professional Ethics/Attitude Behavior:</td>
<td>_______________</td>
</tr>
<tr>
<td>Demonstrates appropriate behavior for hospital setting.</td>
<td></td>
</tr>
</tbody>
</table>
9. **Initiative and Quantity of Work:**
   Seeks out additional exams. Shows an interest in participating in exams. Actively seeks learning opportunities and readily helps others in need.

10. **Attitude towards Assigned Tasks:**
    Accepts all tasks and assignments with a positive attitude.

11. **Attitude towards Advice/Criticism/Correction:**
    Is receptive to suggestions or corrections, exercises self-control, and demonstrates interest in assignments. Accepts advice without negative comments or behavior.

12. **Punctuality and Attendance:**
    Extent to which student is present at clinical internship without absence and/or tardiness. Arrives early/on time and ready to work.

13. **Personal Appearance/Attire:**
    Dresses appropriately and good hygiene.

14. **Interpersonal Relationship with Peers and Patients:**
    Demonstrates courtesy and empathy. Ability to establish a good rapport and effective communication with the patient. Interaction with peers is respectful, supportive, and kind.

15. **Effective Communication:**
    Communicates effectively with other technologists and has good teamwork.

Total Possible Points: 75

Evaluator’s Comments:
________________________________________________________________________________________________________________________________________________
________________________________________________________________________________________________________________________________________________
________________________________________________________________________________________________________________________________________________
________________________________________________________________________________________________________________________________________________
________________________________________________________________________________________________________________________________________________

Clinical Instructor’s Signature: _____________________ Date: _____________________

**I have reviewed this evaluation with the Clinical Instructor.**

Student’s Signature: _____________________ Date: _____________________

Student’s Comments:
________________________________________________________________________________________________________________________________________________
________________________________________________________________________________________________________________________________________________
________________________________________________________________________________________________________________________________________________
________________________________________________________________________________________________________________________________________________
________________________________________________________________________________________________________________________________________________
________________________________________________________________________________________________________________________________________________

116
Please rate each statement by placing the number that best describes the student’s professional and clinical performance (based upon the amount of time they have been in that rotation) in the space provided:

0=Unacceptable
1=Required Major Improvement
2=Requires Minor Improvement
3=Acceptable
4=Good Performance
5=Excellent Performance (consistently performs without need for direct supervision)

<table>
<thead>
<tr>
<th>Evaluation Item</th>
<th>Score and Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Organizational Skills:</td>
<td></td>
</tr>
<tr>
<td><em>Shows an efficient and methodical approach to each patient exam.</em></td>
<td></td>
</tr>
<tr>
<td>2. Quality of Work:</td>
<td></td>
</tr>
<tr>
<td><em>Shows evidence of proper image quality.</em></td>
<td></td>
</tr>
<tr>
<td>3. Comprehension and Demonstration of Imaging Procedures:</td>
<td></td>
</tr>
<tr>
<td><em>Degree to which the student applies knowledge of landmarks and scan ranges to produce quality images.</em></td>
<td></td>
</tr>
<tr>
<td>4. Performance under Pressure:</td>
<td></td>
</tr>
<tr>
<td><em>Maintains composure in a stressful environment. Performs well in a continuously changing setting.</em></td>
<td></td>
</tr>
<tr>
<td>5. Judgement and Critical Thinking:</td>
<td></td>
</tr>
<tr>
<td><em>Exhibits logical thought and good judgement in making Decisions, recommendations, and demonstrates respect for Confidential patient information and HIPAA policies. Ability to evaluate needs of a technical situation before Procedure starts, and demonstrates speed and accuracy In performing clinical exams/duties.</em></td>
<td></td>
</tr>
<tr>
<td>6. Perseverance:</td>
<td></td>
</tr>
<tr>
<td><em>Maintains focus despite setbacks. Shows an interest in Learning despite criticism or feedback.</em></td>
<td></td>
</tr>
<tr>
<td>7. Self-Confidence:</td>
<td></td>
</tr>
<tr>
<td><em>Demonstrates self-reliance but asks for help when appropriate. Conveys confidence to the patient and to others.</em></td>
<td></td>
</tr>
<tr>
<td>8. Professional Ethics/Attitude Behavior:</td>
<td></td>
</tr>
<tr>
<td><em>Demonstrates appropriate behavior for hospital setting</em></td>
<td></td>
</tr>
</tbody>
</table>
9. **Initiative and Quantity of Work:**
   Seeks out additional exams. Shows an interest in participating in exams. Actively seeks learning opportunities and readily helps others in need.

10. **Attitude towards Assigned Tasks:**
    Accepts all tasks and assignments with a positive attitude.

11. **Attitude towards Advice/Criticism/Correction:**
    Is receptive to suggestions or corrections, exercises self-control, and demonstrates interest in assignments. Accepts advice without negative comments or behavior.

12. **Punctuality and Attendance:**
    Extent to which student is present at clinical internship without absence and/or tardiness. Arrives early/on time and ready to work.

13. **Personal Appearance/Attire:**
    Dresses appropriately and good hygiene

14. **Interpersonal Relationship with Peers and Patients:**
    Demonstrates courtesy and empathy. Ability to establish a good rapport and effective communication with the patient. Interaction with peers is respectful, supportive, and kind.

15. **Effective Communication:**
    Communicates effectively with other technologists and has good teamwork.

Total Possible Points: 75

Would this student be hirable upon completion?  YES  NO  (Please circle one)

If No, then please explain.

Evaluator’s Comments:
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Clinical Instructor’s Signature: ___________________________ Date: __________________________

I have reviewed this evaluation with the Clinical Instructor.

Student’s Signature: ___________________________ Date: __________________________

Student’s Comments:
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
SIUC CT/MRI Student  
Clinical Performance Evaluation  
1st CT Evaluation  

Student Name: _______________________________  
Clinic Site: _______________________________  
Date: _______________________________

Please rate each statement by placing the number that best describes the student’s professional and clinical performance (based upon the amount of time they have been in that rotation) in the space provided:

0=Unacceptable  
1=Required Major Improvement  
2=Requires Minor Improvement  
3=Acceptable  
4=Good Performance  
5=Excellent Performance (consistently performs without need for direct supervision)

<table>
<thead>
<tr>
<th>Evaluation Item</th>
<th>Score and Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Organizational Skills: Shows an efficient and methodical approach to each</td>
<td></td>
</tr>
<tr>
<td>patient exam by having all necessary items ready for the exam.</td>
<td></td>
</tr>
<tr>
<td>2. Quality of Work: Shows evidence of being able to distinguish quality images.</td>
<td></td>
</tr>
<tr>
<td>3. Comprehension and Demonstration of Imaging Procedures: Degree to which the</td>
<td></td>
</tr>
<tr>
<td>student applies knowledge of landmarks and scan ranges to produce quality images.</td>
<td></td>
</tr>
<tr>
<td>4. Performance under Pressure: Maintains composure in a stressful environment.</td>
<td></td>
</tr>
<tr>
<td>Performs well in a continuously changing setting.</td>
<td></td>
</tr>
<tr>
<td>5. Judgement and Critical Thinking: Exhibits logical thought and good judgement</td>
<td></td>
</tr>
<tr>
<td>in making decisions, recommendations, and demonstrates respect for confidential</td>
<td></td>
</tr>
<tr>
<td>patient information and HIPAA policies. Ability to evaluate needs of a technical</td>
<td></td>
</tr>
<tr>
<td>situation before procedure starts.</td>
<td></td>
</tr>
<tr>
<td>6. Perseverance: Maintains focus despite setbacks. Shows an interest in learning</td>
<td></td>
</tr>
<tr>
<td>despite criticism or feedback.</td>
<td></td>
</tr>
<tr>
<td>7. Self-Confidence: Starting self-reliance but asks for help when appropriate.</td>
<td></td>
</tr>
<tr>
<td>Conveys confidence to the patient and to others.</td>
<td></td>
</tr>
<tr>
<td>8. Professional Ethics/Attitude Behavior: Demonstrates appropriate behavior for</td>
<td></td>
</tr>
<tr>
<td>hospital setting.</td>
<td></td>
</tr>
</tbody>
</table>
9. **Initiative and Quantity of Work:**
   
   Seeks out additional exams. Shows an interest in participating in exams. Active seeks learning opportunities and readily helps others in need.

10. **Attitude towards Assigned Tasks:**
    
    Accepts all tasks and assignments with a positive attitude.

11. **Attitude towards Advice/Criticism/Correction:**
    
    Is receptive to suggestions or corrections, exercises self-control, and demonstrates interest in assignments. Accepts advice without negative comments or behavior.

12. **Punctuality and Attendance:**
    
    Extent to which student is present at clinical internship without absence and/or tardiness. Arrives early/ on time and ready to work.

13. **Personal Appearance/Attire:**
    
    Dresses appropriately and good hygiene

14. **Interpersonal Relationship with Peers and Patients:**
    
    Demonstrates courtesy and empathy. Ability to establish a good rapport and effective communication with the patient. Interaction with peers is respectful, supportive, and kind.

15. **Effective Communication:**
    
    Communicates effectively with other technologists and has good teamwork.

Total Possible Points: 75

Evaluator’s Comments:

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

Clinical Instructor’s Signature: ___________________________ Date: ___________________________

I have reviewed this evaluation with the Clinical Instructor.

Student’s Signature: ___________________________ Date: ___________________________

Student’s Comments:

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________
# SIUC CT/MRI Student

## Clinical Performance Evaluation

### 2nd CT Evaluation

**Student Name:** ____________________________________

**Clinic Site:** _____________________________

**Date:** _______________________________________

Please rate each statement by placing the number that best describes the student’s professional and clinical performance (based upon the amount of time they have been in that rotation) in the space provided:

0=Unacceptable  
1=Required Major Improvement  
2=Requires Minor Improvement  
3=Acceptable  
4=Good Performance  
5=Excellent Performance (consistently performs without need for direct supervision)

<table>
<thead>
<tr>
<th>Evaluation Item</th>
<th>Score and Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. <strong>Organizational Skills:</strong></td>
<td></td>
</tr>
<tr>
<td>Shows an efficient and methodical approach to each patient exam.</td>
<td></td>
</tr>
<tr>
<td>2. <strong>Quality of Work:</strong></td>
<td></td>
</tr>
<tr>
<td>Shows evidence of proper image quality.</td>
<td></td>
</tr>
<tr>
<td>3. <strong>Comprehension and Demonstration of Imaging Procedures:</strong></td>
<td></td>
</tr>
<tr>
<td>Degree to which the student applies knowledge of landmarks and scan ranges to produce quality images.</td>
<td></td>
</tr>
<tr>
<td>4. <strong>Performance under Pressure:</strong></td>
<td></td>
</tr>
<tr>
<td>Maintains composure in a stressful environment. Performs Well in a continuously changing setting.</td>
<td></td>
</tr>
<tr>
<td>5. <strong>Judgement and Critical Thinking:</strong></td>
<td></td>
</tr>
<tr>
<td>Exhibits logical thought and good judgement in making Decisions, recommendations, and demonstrates respect for Confidential patient information and HIPAA policies. Ability to evaluate needs of a technical situation before Procedure starts, and demonstrates speed and accuracy In performing clinical exams/duties.</td>
<td></td>
</tr>
<tr>
<td>6. <strong>Perseverance:</strong></td>
<td></td>
</tr>
<tr>
<td>Maintains focus despite setbacks. Shows an interest in Learning despite criticism or feedback.</td>
<td></td>
</tr>
<tr>
<td>7. <strong>Self-Confidence:</strong></td>
<td></td>
</tr>
<tr>
<td>Demonstrates self-reliance but asks for help when appropriate. Conveys confidence to the patient and to others.</td>
<td></td>
</tr>
<tr>
<td>8. <strong>Professional Ethics/Attitude Behavior:</strong></td>
<td></td>
</tr>
<tr>
<td>Demonstrates appropriate behavior for hospital setting.</td>
<td></td>
</tr>
</tbody>
</table>
9. **Initiative and Quantity of Work:**
   Seeks out additional exams. Shows an interest in participating in exams. Actively seeks learning opportunities and readily helps others in need.

10. **Attitude towards Assigned Tasks:**
    Accepts all tasks and assignments with a positive attitude.

11. **Attitude towards Advice/Criticism/Correction:**
    Is receptive to suggestions or corrections, exercises self-control, and demonstrates interest in assignments. Accepts advice without negative comments or behavior.

12. **Punctuality and Attendance:**
    Extent to which student is present at clinical internship without absence and/or tardiness. Arrives early/on time and ready to work.

13. **Personal Appearance/Attire:**
    Dresses appropriately and good hygiene.

14. **Interpersonal Relationship with Peers and Patients:**
    Demonstrates courtesy and empathy. Ability to establish a good rapport and effective communication with the patient. Interaction with peers is respectful, supportive, and kind.

15. **Effective Communication:**
    Communicates effectively with other technologists and has good teamwork.

Total Possible Points: 75

Would this student be hirable upon completion? YES NO (Please circle one)

If No, then please explain.

Evaluator’s Comments:
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Clinical Instructor’s Signature: _____________________ Date: _____________________

I have reviewed this evaluation with the Clinical Instructor.

Student’s Signature: _____________________ Date: _____________________

Student’s Comments:
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

122
APPENDIX O

UNDERSTANDING THE CLINICAL RESPONSIBILITIES IN THE HANDBOOK
Understanding of Clinical Responsibilities in the Handbook

I, ______________________________ hereby acknowledge that I have read and understand the contents of this handbook and agree to abide by these policies as stated, or be subject to University recourse.

____________________________________            ________________
Student Signature                        Date

____________________________________            ________________
Witness (SIUC Faculty)                   Date

**To be kept in the student’s file at the program office.
MRI Examination Daily Log Sheet:
(O=Observed, A=Assisted, P=Performed/Comped)
If you observed, assisted, or performed write the name of the tech in the column, IF YOU COMPED, then I need the technologist’s initials in the column.

<table>
<thead>
<tr>
<th>DATE</th>
<th>EXAM</th>
<th>O, A, P</th>
<th>COMPED</th>
<th>TECH</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
CT Examination Daily Log Sheet:
(O=Observed, A=Assisted, P=Performed/Comped)
If you observed, assisted, or performed write the name of the tech in the column, IF YOU COMPED, then I need the technologist’s initials in the column.

<table>
<thead>
<tr>
<th>DATE</th>
<th>EXAM</th>
<th>O, A, P</th>
<th>COMPED</th>
<th>TECH</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
CT and MRI:
I will put the ARRT information for each modality on D2L.

ADDITIONAL INFORMATION:

- Spring-38 hours a week x 16 weeks (minus one week of spring break and 10 hours for MLK Holiday)- 560 Clinical Hours.
- Summer-38 hours a week x 8 weeks (minus 10 hours for Memorial Day and 10 hours for 4th of July)-286 Clinical Hours
- 14 weeks of MRI and 10 weeks of CT
- You can only have one ARRT window open at a time. Cannot have CT information and MRI information submitted to ARRT at the same time.
- Need updated addresses from everyone to mail dosimeters, etc..
- MRI Primary Route and CT is Post Primary Route

CT:

- Your Clinical Instructor (not Jen or Arshia) will sign off on your CT exams (comps), they will all be logged on to the ARRT website.
- When you sign up to take the CT Registry, you will need to click on SIU RAD-RAD 364 (Computed Tomography Class)
- Once you hit submit for CT you are locked in to take that registry
- **CT comps are Logged on the ARRT website**

MRI:

- I will mail you out the MRI ARRT Application.
- I have to sign off for you to take your MRI exam in order to sit for your registry.
- **MRI comps ARE NOT logged on the ARRT website, you will fill out the clinical and didactic form from the ARRT.**
RAD 404
MRI and CT Clinical Internship I
RAD 404-10 - MRI and CT Clinical Internship I

INSTRUCTOR: Jennifer Walker M.S. Ed RT(R)(MR)(CT)
Clinical Instructor, Radiologic Sciences
School of Allied Health
College of Applied Sciences and Arts
(618) 453-8812
e-mail: Jennifer.walker@siu.edu

COURSE DESCRIPTION:

This is the first clinical internship in a two-course sequence. During the first clinical internship, the student will be assigned to a selected clinical education center for the entire semester. During this semester, the student is expected to practice and perfect the professional skills developed the previous semester on campus. Not for graduate credit. Co-requisite: RAD 414. Prerequisite: “C” or better in RAD 364, 374, 384, and 394.

PREREQUISITE TO: RAD 424 and 434

COURSE OBJECTIVES:

1. Observe, assist, and perform exams of the following anatomical areas: head/spine, neck, chest/mediastinum, abdomen, pelvis, and musculoskeletal system.
2. Maintain clinical exam records as provided by the University.
3. Observe the radiologist interpreting the images a minimum of one hour per week during clinic internship.
4. Properly prepare the patient for the examination requested.
5. Input patient data correctly into the computer.
6. Produce hardcopy images according to protocol.
7. Perform computer tasks.
8. Provide a safe environment for the patient and staff.
9. Perform as a MRI/CT technologist.

TOPICAL OUTLINE:

<table>
<thead>
<tr>
<th>Topics</th>
<th>Percentages of Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>I. Patient relations</td>
<td>25%</td>
</tr>
<tr>
<td>II. Practice and perfect professional MRI and CT skills</td>
<td>75%</td>
</tr>
</tbody>
</table>

TEXTBOOKS:

Required:

None. All course material will be distributed by the instructor

GRADING SCALE:

The grading will be on a straight scale. ALL INCOMPLETE OR LATE ASSIGNMENTS ARE SUBJECT TO THE REDUCTION OF A LETTER GRADE DETERMINED BY THE INSTRUCTOR.
EVALUATION AND POINT VALUE FOR THE COURSE:

All students are expected to complete his/her assignments and upload to D2L by the due date. This course will be offered in the clinical setting with the registry preparation offered during finals week on the SIUC campus. If you start your rotation in CT then you will do the CT side of the homework and vice versa if you start in MRI. During the RAD 424, you will do the exact same homework except in the other modality.

ALL LATE ASSIGNMENTS ARE REDUCED BY ONE POINT FOR EVERYDAY IT IS LATE.

If a student receives two or more Performance Evaluations that are an 80% or below during one semester; their continuation in the CT/MRI Program is at the discretion of the Program Director and Clinical Instructor. It is expected that all students consistently show “normal progress” in the development of their CT or MRI skills and always demonstrate a positive attitude. Not meeting the normal progress guidelines justifies removal from the program as well. A grade of an “F” will be given for the semester in which the student is removed from the program.

If a student is removed from a clinical site for behavioral reasons, they must leave immediately and will not be allowed to continue the CT/MRI Program. A grade of an “F” will be given for the semester they are removed.

ALL EXAM COMPETENCIES MUST BE COMPLETED IN ORDER TO PASS THIS COURSE.
A grade of an “F” will be given for the semester in which the student does not fulfill the competency requirements.

If a student misses 4 days throughout the program their clinical grade will be lowered one letter grade. If a student misses six or more days during the year, the student can be removed from the program.
COURSE EVALUATION:

CT or MRI ARRT Outline 200 points
Technical Data for CT or MRI 100 points
3 Clinical Performance Evaluations (75 points each) 225 points
Case Study for MRI or CT 50 points
Comp Sheet (10 points each for 4 separate times, January-April) 40 points
ARRT Competency Sheet 10 points
Time Sheet 20 points
Clinical Site Evaluation 20 points
Mandatory Registry Review (25 points each day) 50 points

Total Points 715 points

A = 93 – 100%
B = 85 – 92%
C = 77 – 84%
D = 70 – 76%
F = Below 70%

All CT/MRI students must pass each of their Radiologic Science courses (RAD) with a grade of "C" or better (the minimum requirement) in order to satisfy Program requirements and stay in the Program. Any CT/MRI student that does not meet the minimum course requirement (a course grade of "C" or better) will not be allowed to continue in the Program. The student is allowed to re-apply to the Program the following year. If you are removed from your clinical internship, you will not continue on in the program and receive a failing grade for this course.

**ALL ASSIGNMENTS MUST BE TURNED IN FOR YOU TO MOVE FORWARD IN THIS PROGRAM. IF YOU DO NOT COMPLETE ONE OF THE ASSIGNMENTS, THEN YOU WILL FAIL THAT COURSE.

Homework Assignment Instructions:

- Outline: The outlines will be based off the ARRT Content Specifications for MRI and CT. I will provide you with a basic outline for you to add in the information. You will upload the outline (CT or MRI depending on which modality you are working in) to D2L when finished. Instructions: Please explain/elaborate on each individual bullet point concerning the content for the ARRT MRI and CT Examinations.

- Technical Data: Prepare a list (Table Format) of “Technical Data. Select 10 exams from the CT list or 10 exams from the MRI list, depending on which modality you are currently working in. Be sure to use at least one from each category. Provide a list of the imaging application used for the exam.
<table>
<thead>
<tr>
<th>CT</th>
<th>MR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brain/Spine</td>
<td>Brain/Spine</td>
</tr>
<tr>
<td>Routine Brain</td>
<td>Routine Brain</td>
</tr>
<tr>
<td>Brain CTA</td>
<td>Brain MRA</td>
</tr>
<tr>
<td>Soft-tissue Neck</td>
<td>Neck</td>
</tr>
<tr>
<td>Cervical spine</td>
<td>Cervical spine</td>
</tr>
<tr>
<td>Thoracic spine</td>
<td>Thoracic spine</td>
</tr>
<tr>
<td>Lumbar spine</td>
<td>Lumbar spine</td>
</tr>
<tr>
<td>Chest</td>
<td>Chest</td>
</tr>
<tr>
<td>Routine Chest</td>
<td>Breast</td>
</tr>
<tr>
<td>Hi-resolution Chest</td>
<td>Cardiac/Coronary MRA</td>
</tr>
<tr>
<td>Calcium scoring</td>
<td></td>
</tr>
<tr>
<td>Cardiac/Coronary CTA</td>
<td></td>
</tr>
<tr>
<td>Abdomen/Pelvis</td>
<td>Abdomen/Pelvis</td>
</tr>
<tr>
<td>Routine Abdomen/Pelvis</td>
<td>Routine Abdomen/Pelvis</td>
</tr>
<tr>
<td>Abdomen CTA</td>
<td>Abdomen MRA</td>
</tr>
<tr>
<td>Musculoskeletal</td>
<td>Musculoskeletal</td>
</tr>
<tr>
<td>Lower extremity joints</td>
<td>Lower extremity joints</td>
</tr>
<tr>
<td>Upper extremity joints</td>
<td>Upper extremity joints</td>
</tr>
</tbody>
</table>
## Technical Data: CT Table Example:

**EXAM TYPE:**

<table>
<thead>
<tr>
<th>Localizer (scout)- Patient/Part Landmark</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Indication for exam</td>
<td></td>
</tr>
<tr>
<td>Patient Position</td>
<td></td>
</tr>
<tr>
<td>Body Part Position</td>
<td></td>
</tr>
<tr>
<td>Breathing Instructions</td>
<td></td>
</tr>
<tr>
<td>If Contrast Used, Dose, Type, Contraindications</td>
<td></td>
</tr>
<tr>
<td>Scan Range (anatomical structures)</td>
<td></td>
</tr>
<tr>
<td>Angulation (alignment, anatomical structures)</td>
<td></td>
</tr>
<tr>
<td>Scan Direction</td>
<td></td>
</tr>
<tr>
<td>kV and mA</td>
<td></td>
</tr>
<tr>
<td>Slice Thickness</td>
<td></td>
</tr>
<tr>
<td>Detector Configuration (mm)</td>
<td></td>
</tr>
<tr>
<td>Pitch (beam pitch/beam collimation)</td>
<td></td>
</tr>
<tr>
<td>Rotation Speed (tube/gantry)</td>
<td></td>
</tr>
<tr>
<td>Contrast Media (type/amount and injection rate)</td>
<td></td>
</tr>
<tr>
<td>Automatic Tracking (placement)</td>
<td></td>
</tr>
<tr>
<td>Reconstruction Algorithm</td>
<td></td>
</tr>
<tr>
<td>Maximum Tube Heat Capacity</td>
<td></td>
</tr>
<tr>
<td>Dimensions of the gantry aperature</td>
<td></td>
</tr>
<tr>
<td>kVp and mA ranges</td>
<td></td>
</tr>
<tr>
<td>Type of MDCT unit you are using</td>
<td></td>
</tr>
<tr>
<td>Maximum Table Weight Limit</td>
<td></td>
</tr>
</tbody>
</table>
## Technical Data: MRI Table Example:

<table>
<thead>
<tr>
<th>EXAM TYPE</th>
<th>Pulse Sequence</th>
<th>Pulse Sequence</th>
<th>Pulse Sequence</th>
<th>Pulse Sequence</th>
<th>Pulse Sequence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Slice Orientation</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Indication for exam</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Patient Position</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Body Part Position</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Breathing Instructions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>If Contrast Used, Dose, Type, Contraindications</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Landmark</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Scan Range</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sagittal Angle</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Coronal Angle</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Axial Angle</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TE</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TI (as needed)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>NEX</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FOV</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PE Steps</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FREQ Steps</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ETL/TF</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Slice thickness</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Receiver BW</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Scan Time</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Name of MRI Unit and Tesla</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Type of Shielding</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Types of Cryogens</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Maximum Table Weight Limit</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Type of Coil Used</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Oxygen Monitor Device</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Case Study: During the course of the semester, you are to prepare one case study for the modality you are currently in. Use the following guidelines.

1. Select a case or pathology interesting to you.

2. Research your pathology using medical dictionaries, pathology textbooks, etc. Include pertinent data as listed below. This is to be typed using a font size of 12, with 1-inch margins. Include a list (reference) of the material you used to type your report.

The first section should focus on the pathology and include:
A. Description
B. Etiology
C. Epidemiology
D. Signs and symptoms
E. Diagnosis as seen on CT and MRI
F. Current treatment
G. Prognosis statements of the pathology.

The second section should include:
A. Include if possible: age, gender, ethnicity, and a brief patient history
B. Why the patient is having this imaging procedure
C. Patient’s chief complaint
D. Any additional signs and symptoms
E. How the imaging procedure was performed according to the technical data listed below
F. Indicate which specific images the pathology is best seen.
RAD 414

Special Studies in MRI and CT
RAD 414-2
Special Studies in MRI and CT

INSTRUCTOR: Jennifer N. Walker M.S. Ed. RT(R)(CT)(MR)
Clinical Instructor, Radiologic Sciences
School of Allied Health
College of Applied Sciences and Arts
(618) 453-8812

COURSE DESCRIPTION:

Individual projects in MRI and CT will be selected by the student with approval of the instructor and culminate in case study reviews. In addition, the student will prepare to challenge The American Registry of Radiologic Technologists professional examinations in either MRI or CT. A portion of this course is on-campus. Not for graduate credit. Prerequisite: “C” or better in RAD 364, 374, 384, and 394.

TEXTBOOKS:

Required:
Instructor Handouts given on D2L.

COURSE OBJECTIVES:

Upon completion of this course, the student will be able to:

1. Write a short research paper on a selected topic related to either MRI and/or CT.

2. Prepare for The American Registry of Radiologic Technologists national examinations in either magnetic resonance imaging (Primary Route) or computed tomography (Post Primary Route).

GRADING SCALE:

The grading will be on a straight scale. Course grades will be based on the quality of the research paper and review questions.

All CT/MRI students must pass each of their Radiologic Science courses (RAD) with a grade of "C" or better (the minimum requirement) in order to satisfy Program requirements and stay in the Program. Any CT/MRI student that does not meet the minimum course requirement (a course grade of "C" or better) will not be allowed to continue in the Program. The student is allowed to re-apply to the Program the following year.

**ALL ASSIGNMENTS MUST BE TURNED IN FOR YOU TO MOVE FORWARD IN THIS PROGRAM. IF YOU DO NOT COMPLETE ONE OF THE ASSIGNMENTS, THEN YOU WILL FAIL THAT COURSE.
### EVALUATION AND POINT VALUE FOR THE COURSE:

<table>
<thead>
<tr>
<th>Assignment</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Research Paper</td>
<td>100</td>
</tr>
<tr>
<td>MRI Registry Review Exams</td>
<td>400</td>
</tr>
<tr>
<td>CT Registry Review Exams</td>
<td>330</td>
</tr>
<tr>
<td>Weekly review questions on D2L</td>
<td>375</td>
</tr>
</tbody>
</table>

**Total Points:** 1205

- **A** = 93 – 100%
- **B** = 85 – 92%
- **C** = 77 – 84%
- **D** = 70 – 76%
- **F** = Below 70%

All students are expected to complete his/her assignments and mail or email them so they arrive on the scheduled due date. **ALL LATE ASSIGNMENTS ARE REDUCED BY ONE POINT FOR EVERYDAY IT IS LATE.** **THESE INCLUDE: THE PAPER OUTLINE, PAPER ROUGH DRAFT, PAPER FINAL DRAFT, WEEKLY ASSIGNMENTS, AND REGISTRY TESTS.** I will post on D2L every Tuesday the weekly assignments and you will have one week to complete. So EVERY Monday a weekly assignment is due. For example, during week 1, that Tuesday (1st day of school) I will post the week 1 assignment and at the end of week 1 that assignment is due Monday of week 2.

For the Registry Review Exams in CT and MRI. You will take the exams and the questions that are missed, you will describe in detail why the correct answer was right and why the other answer choices were wrong. **THIS HAS TO BE COMPLETED** in order to get your points for this assignment. All students will receive full points for this assignment once the corrections have been made. **If corrections are not made, it will be a grade of ZERO!**

### RAD 414-2

**SPECIAL STUDIES IN CT AND MRI**

**Research Paper Instructions**

During the first part of the semester you are to select a topic that is related to some aspect of CT or MRI (i.e., imaging applications, pulse sequences, contrast agents, safety) and submit your proposal for approval. Once approved, you will be required to submit an outline of your approved topic. Next, prepare your research paper and submit. Your research paper should be between 5 - 8 pages in length, not counting the title page, abstract page, or reference pages(s). The paper is to be typed using a font size of 12, with 1-inch margins, and double-spaced with page numbers. The references used should be listed numerically in the order used within the paper. There should be a minimum of 5 references. The completed research paper is to be arranged in the following order: title page, abstract page, research paper, and reference list. Any figures, graphs, and/or images used should be placed on separate sheets(s) of paper with captions typed below.

The grading form used to evaluate this assignment is provided on the following page.
### RAD 414-2

**SPECIAL STUDIES IN CT AND MRI**

**Research Paper—Grading Form**

<table>
<thead>
<tr>
<th>Title:</th>
<th>Excellent</th>
<th>Poor</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>CONTENT</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A. Accuracy of information</td>
<td>5</td>
<td>4</td>
</tr>
<tr>
<td>B. Completeness of information</td>
<td>5</td>
<td>4</td>
</tr>
<tr>
<td>C. Evidence of research</td>
<td>5</td>
<td>4</td>
</tr>
<tr>
<td>D. Documentation of resources</td>
<td>5</td>
<td>4</td>
</tr>
<tr>
<td>E. Audience appropriateness</td>
<td>5</td>
<td>4</td>
</tr>
<tr>
<td><strong>ORGANIZATION</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A. Appropriateness of format</td>
<td>5</td>
<td>4</td>
</tr>
<tr>
<td>B. Logic/coherence</td>
<td>5</td>
<td>4</td>
</tr>
<tr>
<td>C. Flow/transition of information</td>
<td>5</td>
<td>4</td>
</tr>
<tr>
<td>D. Use of headings/graphics</td>
<td>5</td>
<td>4</td>
</tr>
<tr>
<td>E. Use of appropriate closing(s)</td>
<td>5</td>
<td>4</td>
</tr>
<tr>
<td><strong>STYLE</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A. Clarity</td>
<td>5</td>
<td>4</td>
</tr>
<tr>
<td>B. Clear sentence structure</td>
<td>5</td>
<td>4</td>
</tr>
<tr>
<td>C. Paragraph development</td>
<td>5</td>
<td>4</td>
</tr>
<tr>
<td>D. Word choice</td>
<td>5</td>
<td>4</td>
</tr>
<tr>
<td>E. Use of technical terms</td>
<td>5</td>
<td>4</td>
</tr>
<tr>
<td>F. Concise expression of ideas</td>
<td>5</td>
<td>4</td>
</tr>
<tr>
<td><strong>MECHANICS/GRAMMAR</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A. Punctuation/Capitalization</td>
<td>5</td>
<td>4</td>
</tr>
<tr>
<td>B. Spelling</td>
<td>5</td>
<td>4</td>
</tr>
<tr>
<td><strong>OTHER</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A. Completion by due date</td>
<td>5</td>
<td>4</td>
</tr>
<tr>
<td>B. Overall appearance/neatness</td>
<td>5</td>
<td>4</td>
</tr>
</tbody>
</table>

**TOTAL POINTS: __________**
RAD 424-4

MRI and CT Clinical Internship II

INSTRUCTOR: Jennifer Walker, MS Ed RT(R)(CT)(MR)
Clinical Instructor, Radiologic Sciences
School of Allied Health
College of Applied Sciences and Arts
(618) 453-8812
E-Mail: Jennifer.walker@siu.edu

COURSE DESCRIPTION:

This is the second clinical internship in a two-course sequence. The student will be assigned to a selected clinical education center. During this semester, the student will continue to perfect his/her professional skills developed during the previous clinical internship. In addition, the student will focus on developing hands-on skills in radiation therapy treatment simulation, interventional techniques, stereotactic procedure and trauma. Not for graduate credit. Prerequisite: “C” or better in RAD 404 and 414. Concurrent enrollment in RAD 434.

PREREQUISITE TO: None.

COURSE OBJECTIVES:

Upon completion of this course, the student will be able to:

1. Demonstrate mastery level competency of exams of the head/spine, neck, chest/mediastinum, abdomen, pelvis, and musculoskeletal system.

2. Assist and perform specialty examinations including radiation therapy treatment simulation, trauma imaging, stereotactic procedure and interventional procedures.

3. Assist and observe the radiologist during interventional procedures.

4. Maintain clinical records as provided by the instructor.

TOPICAL OUTLINE:

<table>
<thead>
<tr>
<th>Topics</th>
<th>Percentage of Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>I. Patient Relations</td>
<td>25%</td>
</tr>
<tr>
<td>II. Practice and Perfect Professional MRI and CT Skills</td>
<td>75%</td>
</tr>
</tbody>
</table>

TEXTBOOK:

Required:

The instructor will distribute all course material.
GRADING SCALE:

The grading will be on a straight scale. Course grades will be based on clinical competency examinations, performance evaluations, and documentation of relevant site-specific information and course material.

EVALUATION AND POINT VALUE FOR THE COURSE:

All students are expected to complete his/her assignments and upload to D2L by the due date. This course will be offered in the clinical setting with the registry preparation offered during finals week on the SIUC campus.

If you start your rotation in CT then you will do the CT side of the homework and vice versa if you start in MRI. During the RAD 424, you will do the exact same homework except in the other modality.

ALL LATE ASSIGNMENTS ARE REDUCED BY ONE POINT FOR EVERYDAY IT IS LATE.

If a student receives two or more Performance Evaluations that are an 80% or below during one semester; their continuation in the CT/MRI Program is at the discretion of the Program Director and Clinical Instructor. It is expected that all students consistently show “normal progress” in the development of their CT or MRI skills and always demonstrate a positive attitude. Not meeting the normal progress guidelines justifies removal from the program as well. A grade of an “F” will be given for the semester in which the student is removed from the program.

If a student is removed from a clinical site for behavioral reasons, they must leave immediately and will not be allowed to continue the CT/MRI Program. A grade of an “F” will be given for the semester they are removed.

ALL EXAM COMPETENCIES MUST BE COMPLETED IN ORDER TO PASS THIS COURSE.
A grade of an “F” will be given for the semester in which the student does not fulfill the competency requirements.

If a student misses 4 days throughout the program their clinical grade will be lowered one letter grade. If a student misses six or more days during the year, the student can be removed from the program.
COURSE EVALUATION:

CT or MRI ARRT Outline 200 points
Technical Data for CT or MRI 100 points
2 Clinical Performance Evaluations (75 points each) 150 points
Case Study for MRI or CT 50 points
Comp Sheet (10 points each for 3 separate times, May-July) 30 points
ARRT Competency Sheet 10 points
Time Sheet 20 points
Clinical Site Evaluation 20 points

Total Points 580 points

A = 93 – 100%
B = 85 – 92%
C = 77 – 84%
D = 70 – 76%
F = Below 70%

Homework Assignment Instructions:

• Outline: The outlines will be based off the ARRT Content Specifications for MRI and CT. I will provide you with a basic outline for you to add in the information. You will upload the outline to D2L when finished. Instructions: Please explain/elaborate on each individual bullet point concerning the content for the ARRT MRI and CT Examinations.

• Technical Data: Prepare a list (Table Format) of “Technical Data. Select 10 exams from the CT list or 10 exams from the MRI list. Be sure to use at least one from each category. Provide a list of the imaging application used for the exam.

All CT/MRI students must pass each of their Radiologic Science courses (RAD) with a grade of ”C” or better (the minimum requirement) in order to satisfy Program requirements and stay in the Program. Any CT/MRI student that does not meet the minimum course requirement (a course grade of ”C” or better) will not be allowed to continue in the Program. The student is allowed to re-apply to the Program the following year. If you are removed from your clinical internship, you will not continue on in the program and receive a failing grade for this course.

**ALL ASSIGNMENTS MUST BE TURNED IN FOR YOU TO MOVE FORWARD IN THIS PROGRAM. IF YOU DO NOT COMPLETE ONE OF THE ASSIGNMENTS, THEN YOU WILL FAIL THAT COURSE.**
<table>
<thead>
<tr>
<th>CT</th>
<th>MR</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Brain/Spine</strong></td>
<td></td>
</tr>
<tr>
<td>Routine Brain</td>
<td>Routine Brain</td>
</tr>
<tr>
<td>Brain CTA</td>
<td>Brain MRA</td>
</tr>
<tr>
<td>Soft-tissue Neck</td>
<td>Neck</td>
</tr>
<tr>
<td>Cervical spine</td>
<td>Cervical spine</td>
</tr>
<tr>
<td>Thoracic spine</td>
<td>Thoracic spine</td>
</tr>
<tr>
<td>Lumbar spine</td>
<td>Lumbar spine</td>
</tr>
<tr>
<td><strong>Chest</strong></td>
<td></td>
</tr>
<tr>
<td>Routine Chest</td>
<td>Breast</td>
</tr>
<tr>
<td>Hi-resolution Chest</td>
<td>Cardiac/Coronary MRA</td>
</tr>
<tr>
<td>Calcium scoring</td>
<td></td>
</tr>
<tr>
<td>Cardiac/Coronary CTA</td>
<td></td>
</tr>
<tr>
<td><strong>Abdomen/Pelvis</strong></td>
<td></td>
</tr>
<tr>
<td>Routine Abdomen/Pelvis</td>
<td>Routine Abdomen/Pelvis</td>
</tr>
<tr>
<td>Abdomen CTA</td>
<td>Abdomen MRA</td>
</tr>
<tr>
<td><strong>Musculoskeletal</strong></td>
<td></td>
</tr>
<tr>
<td>Lower extremity joints</td>
<td>Lower extremity joints</td>
</tr>
<tr>
<td>Upper extremity joints</td>
<td>Upper extremity joints</td>
</tr>
</tbody>
</table>
## TECHNICAL DATA: CT Table Example:

### EXAM TYPE:

<table>
<thead>
<tr>
<th>Localizer (scout)- Patient/Part Landmark</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Indication for exam</td>
<td></td>
</tr>
<tr>
<td>Patient Position</td>
<td></td>
</tr>
<tr>
<td>Body Part Position</td>
<td></td>
</tr>
<tr>
<td>Breathing Instructions</td>
<td></td>
</tr>
<tr>
<td>If Contrast Used, Dose, Type, Contraindications</td>
<td></td>
</tr>
<tr>
<td>Scan Range (anatomical structures)</td>
<td></td>
</tr>
<tr>
<td>Angulation (alignment, anatomical structures)</td>
<td></td>
</tr>
<tr>
<td>Scan Direction</td>
<td></td>
</tr>
<tr>
<td>kV and mA</td>
<td></td>
</tr>
<tr>
<td>Slice Thickness</td>
<td></td>
</tr>
<tr>
<td>Detector Configuration (mm)</td>
<td></td>
</tr>
<tr>
<td>Pitch (beam pitch/beam collimation)</td>
<td></td>
</tr>
<tr>
<td>Rotation Speed (tube/gantry)</td>
<td></td>
</tr>
<tr>
<td>Contrast Media (type/amount and injection rate)</td>
<td></td>
</tr>
<tr>
<td>Automatic Tracking (placement)</td>
<td></td>
</tr>
<tr>
<td>Reconstruction Algorithm</td>
<td></td>
</tr>
<tr>
<td>Maximum Tube Heat Capacity</td>
<td></td>
</tr>
<tr>
<td>Dimensions of the gantry aperature</td>
<td></td>
</tr>
<tr>
<td>kVp and mA ranges</td>
<td></td>
</tr>
<tr>
<td>Type of MDCT unit you are using</td>
<td></td>
</tr>
<tr>
<td>Maximum Table Weight Limit</td>
<td></td>
</tr>
</tbody>
</table>
# TECHNICAL DATA: MRI Table Example

<table>
<thead>
<tr>
<th>EXAM TYPE</th>
<th>Pulse Sequence</th>
<th>Pulse Sequence</th>
<th>Pulse Sequence</th>
<th>Pulse Sequence</th>
<th>Pulse Sequence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Slice Orientation</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Indication for exam</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Patient Position</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Body Part Position</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Breathing Instructions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>If Contrast Used, Dose, Type, Contraindications</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Landmark</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Scan Range</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sagittal Angle</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Coronal Angle</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Axial Angle</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TE</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TI (as needed)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>NEX</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FOV</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PE Steps</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FREQ Steps</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ETL/TF</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Slice thickness</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Receiver BW</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Scan Time</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Name of MRI Unit and Tesla</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Type of Shielding</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Types of Cryogens</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Maximum Table Weight Limit</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Type of Coil Used</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Oxygen Monitor Device</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Case Study: During the course of the semester, you are to prepare one case study for the modality you are currently in. Use the following guidelines.

1. Select a case or pathology interesting to you.

2. Research your pathology using medical dictionaries, pathology textbooks, etc. Include pertinent technical data as listed below. This is to be typed using a font size of 12, with 1-inch margins. Include a list (reference) of the material you used to type your report.

The first section should focus on the pathology and include:
A. Description
B. Etiology
C. Epidemiology
D. Signs and symptoms
E. Diagnosis as seen on CT and MRI
F. Current treatment
G. Prognosis statements of the pathology.

The second section should include:
A. Include if possible: age, gender, ethnicity, and a brief patient history
B. Why the patient is having this imaging procedure
C. Patient’s chief complaint
D. Any additional signs and symptoms
E. How the imaging procedure was performed according to the technical data listed below
F. Indicate which specific images the pathology is best seen.
RAD 434
Seminar in MRI and CT

INSTRUCTOR: Jennifer Walker, MS Ed RT(R)(CT)(MR)
Clinical Instructor, Radiologic Sciences
School of Allied Health
College of Applied Sciences and Arts
(618) 453-8812
E-Mail: Jennifer.walker@siu.edu

COURSE DESCRIPTION:
This course is designed to prepare the student to challenge The American Registry of Radiologic Technologists professional examinations in either MRI or CT. During the course the student will take mock registry exams in either MRI or CT and review pertinent material. Career development activities will include interviewing techniques, resume and cover letter preparation, and the application process. Not for graduate credit. Prerequisite: “C” or better in RAD 404 and RAD 414. Concurrent enrollment in RAD 424.

PREREQUISITE TO: None

COURSE OBJECTIVES:
1. Prepare a professional resume.
2. Review interview techniques.
3. Review the application process.
4. Prepare for The American Registry of Radiologic Technologists national examinations in either Magnetic Resonance Imaging or Computed Tomography.

TOPICAL OUTLINE:

<table>
<thead>
<tr>
<th>Topics</th>
<th>Percentages of Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. MRI or CT Examination Preparation</td>
<td>80%</td>
</tr>
<tr>
<td>2. Resume Development and Interview Techniques</td>
<td>20%</td>
</tr>
</tbody>
</table>

TEXTBOOK:
Required:

The instructor will distribute all course material.

GRADING SCALE:

The grading will be on a straight scale.
EVALUATION AND POINT VALUE FOR THE COURSE:
All students are expected to complete his/her assignments and e-mail them by the scheduled due date. This course will be offered in the clinical setting with the registry preparation offered during finals week on the SIUC campus.
ALL LATE ASSIGNMENTS ARE REDUCED BY 1 POINT FOR EVERYDAY IT IS LATE.

<table>
<thead>
<tr>
<th>Assignment</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Resume and Cover Letter</td>
<td>100</td>
</tr>
<tr>
<td>Professionalism Paper</td>
<td>100</td>
</tr>
<tr>
<td>MRI Test</td>
<td>200</td>
</tr>
<tr>
<td>CT Test</td>
<td>165</td>
</tr>
<tr>
<td><strong>Total Points:</strong></td>
<td>565</td>
</tr>
</tbody>
</table>

A = 93 – 100%
B = 85 – 92%
C = 77 – 84%
D = 70 – 76%
F = Below 70%

HOMEWORK ASSIGNMENTS:
- Write a resume and cover letter and upload to D2L, I will give suggestions on how to improve.
- Write a paper on professionalism (and upload to D2L) to answer these questions.
  - What is professional development?
  - What is the ASRT and ARRT?
  - What does the ASRT and ARRT do for the CT/MRI Field?
  - What are the benefits for being a member of the ASRT and ARRT?
  - What is IEMA and the benefits you have in being a member of is?
  - What is HIPAA?
  - What are some violations of HIPAA?
  - What is professionalism to you?
  - What do you believe affect professionalism in our field?
  - Discuss your professional career plans.

Take CT and MRI Exams. You will take the exams and the questions that are missed, you will describe in detail why the correct answer was right and why the other answer choices were wrong. **THIS HAS TO BE COMPLETED** in order to get your points for this assignment. All students will receive full points for this assignment once the corrections have been made. **If corrections are not made, it will be a grade of ZERO!**

All CT/MRI students must pass each of their Radiologic Science courses (RAD) with a grade of "C" or better (the minimum requirement) in order to satisfy Program requirements and stay in the Program. Any CT/MRI student that does not meet the minimum course requirement (a course grade of "C" or better) will not be allowed to continue in the Program. The student is allowed to re-apply to the Program the following year.

**ALL ASSIGNMENTS MUST BE TURNED IN FOR YOU TO MOVE FORWARD IN THIS PROGRAM. IF YOU DO NOT COMPLETE ONE OF THE ASSIGNMENTS, THEN YOU WILL FAIL THAT COURSE.**
# Time Sheet

Name: __________________________________________

Hospital: _______________________________________

Legend:
- P - Present
- A - Absent
- T - Tardy
- H - Holiday
- R - Registration/Financial Aid/Personal Day
- SN - Snow Day, no make-up is needed
- B - Bereavement Leave, must document relationship to the deceased

<table>
<thead>
<tr>
<th>January</th>
<th>Time In</th>
<th>Time Out</th>
<th>Hours Present</th>
<th>Hours Absent</th>
<th>Hours Made-Up</th>
<th>Total Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

TOTAL HOURS FOR THE MONTH: _____
# Time Sheet

Name: ________________________________________
Hospital: _______________________________________

Legend:
- P - Present
- A - Absent
- T - Tardy
- H - Holiday
- R - Registration/Financial Aid/Personal Day
- SN - Snow Day, no make-up is needed
- B - Bereavement Leave, must document relationship to the deceased

<table>
<thead>
<tr>
<th>February</th>
<th>Time In</th>
<th>Time Out</th>
<th>Hours Present</th>
<th>Hours Absent</th>
<th>Hours Made-Up</th>
<th>Total Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

TOTAL HOURS FOR THE MONTH: _____
<table>
<thead>
<tr>
<th>March</th>
<th>Time In</th>
<th>Time Out</th>
<th>Hours Present</th>
<th>Hours Absent</th>
<th>Hours Made-Up</th>
<th>Total Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**TOTAL HOURS FOR THE MONTH:** _____
## Time Sheet

Name: _______________________________________

Hospital: _______________________________________

Legend:
- P-Present
- A-Absent
- T-Tardy
- H-Holiday
- R-Registration/Financial Aid/Personal Day
- SN-Snow Day, no make-up is needed
- B-Bereavement Leave, must document relationship to the deceased

<table>
<thead>
<tr>
<th>April</th>
<th>Time In</th>
<th>Time Out</th>
<th>Hours Present</th>
<th>Hours Absent</th>
<th>Hours Made-Up</th>
<th>Total Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**TOTAL HOURS FOR THE MONTH:** _____
# Time Sheet

Name:___________________________________________

Hospital:_________________________________________

Legend:  
P - Present  A - Absent  T - Tardy  H - Holiday  
R - Registration/Financial Aid/Personal Day  
SN - Snow Day, no make-up is needed  
B - Bereavement Leave, must document relationship to the deceased

<table>
<thead>
<tr>
<th>May</th>
<th>Time In</th>
<th>Time Out</th>
<th>Hours Present</th>
<th>Hours Absent</th>
<th>Hours Made-Up</th>
<th>Total Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

TOTAL HOURS FOR THE MONTH:______
<table>
<thead>
<tr>
<th>June</th>
<th>Time In</th>
<th>Time Out</th>
<th>Hours Present</th>
<th>Hours Absent</th>
<th>Hours Made-Up</th>
<th>Total Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

TOTAL HOURS FOR THE MONTH:_____
# Time Sheet

Name: ____________________________________________

Hospital: _________________________________________

Legend:

- P - Present
- A - Absent
- T - Tardy
- H - Holiday
- R - Registration/Financial Aid/Personal Day
- SN - Snow Day, no make-up is needed
- B - Bereavement Leave, must document relationship to the deceased

<table>
<thead>
<tr>
<th>July</th>
<th>Time In</th>
<th>Time Out</th>
<th>Hours Present</th>
<th>Hours Absent</th>
<th>Hours Made-Up</th>
<th>Total Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

TOTAL HOURS FOR THE MONTH:_____

159
**End of CT/MRI Program Evaluation:**
It has been a great pleasure teaching you this past year and now I need your help to make the program better.

Jennifer Walker, MS Ed RT(R)(CT)(MR)
Clinical Instructor, Radiologic Sciences
School of Allied Health
College of Applied Sciences and Arts
(618) 453-8812
E-Mail: Jennifer.walker@siu.edu

Please rate the following categories:
5=Strongly Agree    4=Agree    3=Neutral    2=Disagree    1=Strongly Disagree

1a- The lectures and clinical internships adequately prepared me for the ARRT CT registry examination:

<p>| | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
</tbody>
</table>

1b- The lectures and clinical internships adequately prepared me for the ARRT MRI registry examination:

<p>| | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
</tbody>
</table>

2a- The CT registry review session held during finals week helped a great deal with preparation for the registry examination:

<p>| | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
</tbody>
</table>

2b- The MRI registry review session held during finals week helped a great deal with preparation for the registry examination:

<p>| | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
</tbody>
</table>

3- I would recommend the MRI/CT program to future students:

<p>| | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
</tbody>
</table>

4- More mock examinations would be helpful in preparing for the ARRT registry examinations:

<p>| | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
</tbody>
</table>
5a- I feel prepared in applying what I learned in the clinical setting and the classroom for CT to produce quality, diagnostic images:

5  4  3  2  1

5b- I feel prepared in applying what I learned in the clinical setting and the classroom for MRI to produce quality, diagnostic images:

5  4  3  2  1

6. What areas (e.g., lecture course, clinical internship) do you believe were not taught in enough depth? Briefly explain.

7. What area (e.g., lecture course, clinical internship) of the program needs “improvement”? Please explain.

8. What are the “strong” areas (e.g., lecture course, clinical internship) of the program? Please explain.

Please list any comments or constructive criticism that would be helpful in improving the program:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Thank you for your time,
Jennifer Walker
SIU CT/MRI EMERGENCY CONTACT INFORMATION:

Your Name: ___________________________________________________________

Phone Number: ________________________________________________________

Facility You Are At: __________________________________________________

Name of Emergency Contact: ___________________________________________

Phone Number: ________________________________________________________

Relationship: _________________________________________________________
Go to ARRT.org and login:

- Go to top left corner and select “complete business”
  - Click pursue Postprimary.
• Scroll down to Computed Tomography to complete initial setup.
  ○ Once you complete initial setup you will come back into this page to the CT category and “continue documentation”, or it will be within your dashboard on main login screen.

- Bone Densitometry
- Breast Sonography
- Cardiac-Interventional Radiography
- Computed Tomography
- Magnetic Resonance Imaging
- Mammography
- Sonography (Postprimary eligibility pathway available only until Dec. 31, 2019)
- Vascular-Interventional Radiography
- Vascular Sonography

According to our records, you qualify to pursue post primary certification and registration in the following disciplines. If you believe this list is inaccurate, please contact us by calling (817) 687-0094, ext. 8370.

To get started, simply click on the discipline that you want to become certified and registered in.

• Once you have added verifiers and a facility you can start logging procedures.
- Under the structured education tab you can enter your CT, cross sectional anatomy, and pathology class to fulfill requirement.