



**SANFORD MEDICAL CENTER
SCHOOL OF RADIOLOGIC TECHNOLOGY
SIOUX FALLS, SOUTH DAKOTA**



POLICIES

AND

PROCEDURES

STUDENT HANDBOOK

TABLE OF CONTENTS

Policy and Procedure Student Handbook	5
ARRT Code of Ethics.	7
Academic Calendar	8
Faculty & Organizational Charts	
School Faculty & Administration	10
Radiology Program and Dept. Organizational Charts. . .	12
Sanford Medical Center Organization Chart.	13
General Information	
Sanford Medical Center	15
School of Radiologic Technology.	15
Mission Statement.	15
Goals	15
Student Learning Outcomes	16
Accreditation	16
Certificate.	16
Tuition and Fees	17
Financial Aid.	17
Refund Policy	18
Technical Standards	18
Health Requirements / Vaccination Policy	19
Health Services	19
Crime Awareness and Campus Security.	20
Drug & Alcohol Free Workplace	32
Student Conduct Policy	33
Copyright Infringement	35
Meals	36
Library	36
Personal Counseling	36
Personal Counseling: Referral Resources - EAP	36
Professional Organizations.	36
Personal Days	37

Military Leave of Absence	38
Holidays / Christmas Break.	38
Student Grievances / Complaints	39
Student Grievances/to the State	39
Student Representatives	40
Privacy of Student Records/Family Education Rights and Privacy Act (FERPA)	41
Radiation Safety/Radiation Monitoring/Radiation Protection	42
Pregnancy Policy	44
MRI Safety Policy	45
Student Radiographer Employment	46
Non-Discriminatory Policy	46

DIDACTIC EDUCATION

Academic Calendar	47
Academic Curriculum	48
Academic Class Policy	50
Academic Grading Policy	50
SAP Policy	51

CLINICAL EDUCATION

Clinical Education	55
Clinical Education Requirements.	55
Mammography Policy	56
Clinical Flowchart	57
Clinical Grading Policy	58
Student Peer Mentor.	62
Trading Hours or Requesting Time off.	63
Telephone Policy	64
Smoking	64
Student Identification.	64
Image Identification Markers	65
Repeat Images	65
Student Supervision	65
Graduation Requirements	66
American Registry of Radiologic Technologists Examination	66

APPENDICES

Appendix A: Clinical Forms 67
Appendix B: JRCERT Mammography Statement68

**STANDARDS FOR AN ACCREDITED EDUCATIONAL PROGRAM
IN RADIOLOGIC SCIENCES 69**

Policy & Procedure Manual / Student Handbook

The purpose of this handbook is to inform students and prospective students of their responsibilities and to provide the policies and procedures for the Sanford Medical Center School of Radiologic Technology. The school and/or the hospital reserve the right to withdraw or amend the handbook at any time, without notice. Any changes that occur will be communicated to students both orally and in writing with students required to sign a new acknowledgement of any changed policy.

During student orientation, students will review this handbook and sign a form of acknowledgement and understanding of all policies.

Application Procedure

Applicants must submit the following materials:

- A completed application form.
- Official high school transcript or certificate of GED scores.
- American College Testing Program (ACT) scores. (May be included on the official high school transcript.)
- Official transcripts from all post-secondary schools.
- Three Sanford Medical Center School of Radiologic Technology reference forms. Each reference should complete the form, seal it in an envelope, and sign name over the seal of the envelope.
- A \$35 non-refundable application processing fee.

A personal interview will be arranged with those applicants who have met all of the admission requirements. For those applicants who do not meet the requirements, a written explanation will be provided.

Applicants will be notified of interview eligibility following the Jan. 31 deadline.

Following the interviewing process, 14 students will be selected.

Admission Requirements

Acceptance into the Sanford Radiologic Technology program is contingent upon submitting proper documentation of successful completion of the requirements listed below, prior to the July start date of the program. Failure to submit proper documentation will result in forfeiture of the \$250 acceptance fee.

- Students must have earned an academic degree to be eligible to apply to take the national certifying exam administered by the American Registry of Radiologic Technologists (ARRT). Prior to beginning the Sanford Radiologic Technology program, students must provide proof that they will meet the academic degree criteria by one of the following:
 - Earned an associate degree from an institution accredited by an agency acceptable to the ARRT. The degree does not have to be in the radiologic sciences. For more information and a list of acceptable agencies, please go to www.arrt.org
 - OR
 - Be enrolled as a radiology major in an affiliated college/university (listed under Affiliation Agreements) and completed all university requirements prior to the July start date for the Sanford Radiologic Technology program.
- The following college courses are not required, but they are recommended:
 - Anatomy / Medical Terminology / Physics
- Cumulative college GPA of 2.5 or above on a 4.0 scale.

- **Background checks** are required by Sanford Medical Center for all students and employees. There will be **NO COST** to you for the background check. Your acceptance into our program is **contingent** on the results of the background check.

Code of Ethics

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

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



THE AMERICAN REGISTRY
OF RADIOLOGIC
TECHNOLOGISTS®



ACADEMIC CALENDAR

The Radiography Program is a 24 month program, which consists of the following:

- First Monday following July 4th – program begins
- Labor Day – no classes or clinical assignments
- Thanksgiving Day – no classes or clinical assignments
- Christmas Day – no classes or clinical assignments
- Christmas Break – no classes or clinical assignments the week between Christmas and New Year’s Day
- New Year’s Day – no classes or clinical assignments
- Memorial Day – no classes or clinical assignments
- July 4th – no classes or clinical assignments
- Third full week Friday in June – graduation (Upon successful completion of all requirements)

The program is divided into eight quarters; each quarter consists of 13 weeks. Progress reports and grades are provided at the end of each quarter.

REVIEWED: 05/08, 05/09, 05/10, 02/11, 04/12, 05/13, 01/14, 6/15, 5/16, 5/17, 2/18, 5/19, 4/20, 3/22,
REVISED: 09/08, 02/11, 01/14, 5/16, 3/21, 3/23

2023 – 2024 Year Calendar		
Qtr.	Begins	Ends
<i>Qtr. 1</i> 1 st year students	Monday, July 10, 2023	Friday, Sept. 29, 2023
<i>Qtr. 2</i> 1 st year students	Monday, Oct.2 , 2023	Friday, Dec. 29, 2023
<i>Qtr. 3</i> 1 st year students	Monday, Jan. 1, 2024	Friday, Mar. 29, 2024
<i>Qtr. 4</i> 1 st year students	Monday, Apr. 1, 2024	Friday, June 28, 2024
<i>Qtr. 5</i> 2 nd year students	Monday, July 3, 2023	Friday, Sept 29, 2023
<i>Qtr. 6</i> 2 nd year students	Monday, Oct. 2, 2023	Friday, Dec. 29, 2023
<i>Qtr. 7</i> 2 nd year students	Monday, Jan.1, 2024	Friday, Mar. 29, 2024
<i>Qtr. 8</i> 2 nd year students	Monday, April 1, 2024	Friday, June 21, 2024

FACULTY

&

*ORGANIZATIONAL
CHARTS*

**SANFORD MEDICAL CENTER
SCHOOL OF RADIOLOGIC TECHNOLOGY**

SCHOOL FACULTY & ADMINISTRATION

PROGRAM DIRECTOR - RADIOLOGY EDUCATION

Candace McNamara

Work Telephone # (605) 333-7445

CLINICAL COORDINATOR – LEAD RADIOLOGY EDUCATOR

Emily Pociask

Work Telephone # (605) 333-6466

CT INSTRUCTOR

Greg Mehrer

CLINICAL INSTRUCTORS

Tamla Fluit

Steffey Jensen

Greg Mehrer

Olivia Lundquist

Megan Fuerst

Danice Hackman

Work Telephone (605) 333-6465

MEDICAL DIRECTOR / RADIOLOGY DEPARTMENT

Dr. Andrew Erie

Sanford Medical Center

Sioux Falls, SD 57117-5039

Telephone # (605) 333-7400

DIRECTOR OF RADIOLOGY DEPARTMENT

Annie Roggenbuck

Telephone #333-7414

MANAGERS / RADIOLOGY DEPARTMENT

Chad Borns #333-7411

Melissa Knutson #328-9110

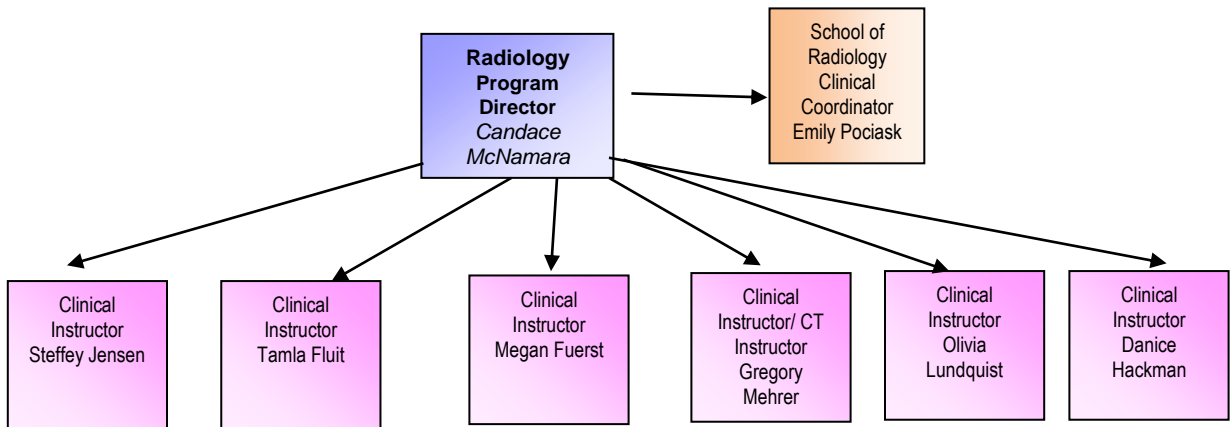
CHIEF EXECUTIVE OFFICER OF SANFORD MEDICAL CENTER
Bill Gassen

PRESIDENT OF SANFORD MEDICAL CENTER
Paul Hanson

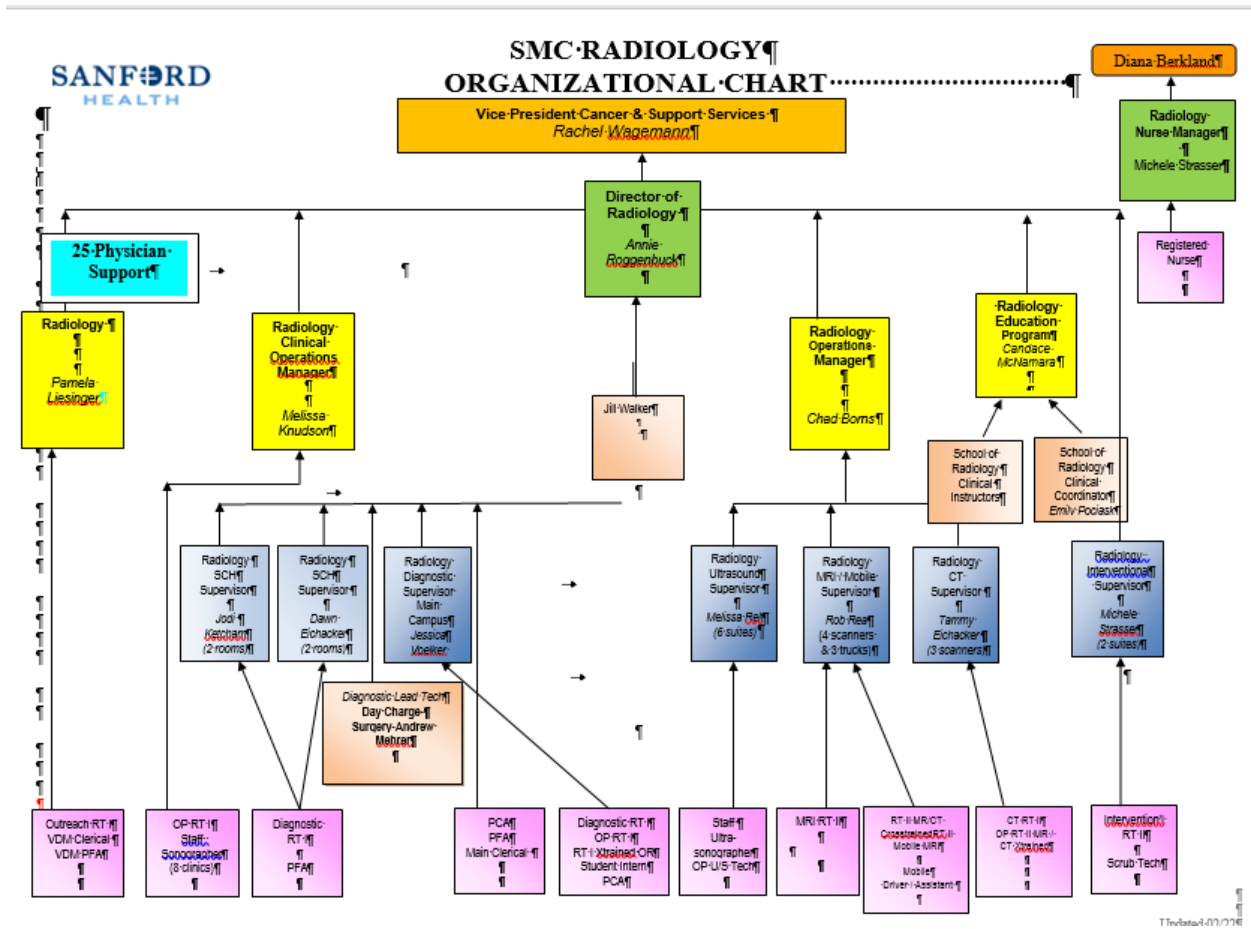
EXECUTIVE DIRECTOR OF SANFORD MEDICAL CENTER / CENTER OF EXCELLENCE CANCER & WOMEN'S
Rachel Wagemann

REVIEWED: 05/08, 05/09, 05/10/02/11, 04/12, 5/13, 4/14, 5/14, 10/14, 5/15, 12/15 5/16, 5/17, 2/18
REVISED: 11/08, 05/09, 02/11, 4/12, 5/13, 4/14, 5/14, 10/14, 5/16, 7/17, 11/18, 5/19, 4/20, 3/21, 3/22, 1/23

SMC RADIOLOGY TECHNOLOGY PROGRAM ORGANIZATIONAL CHART



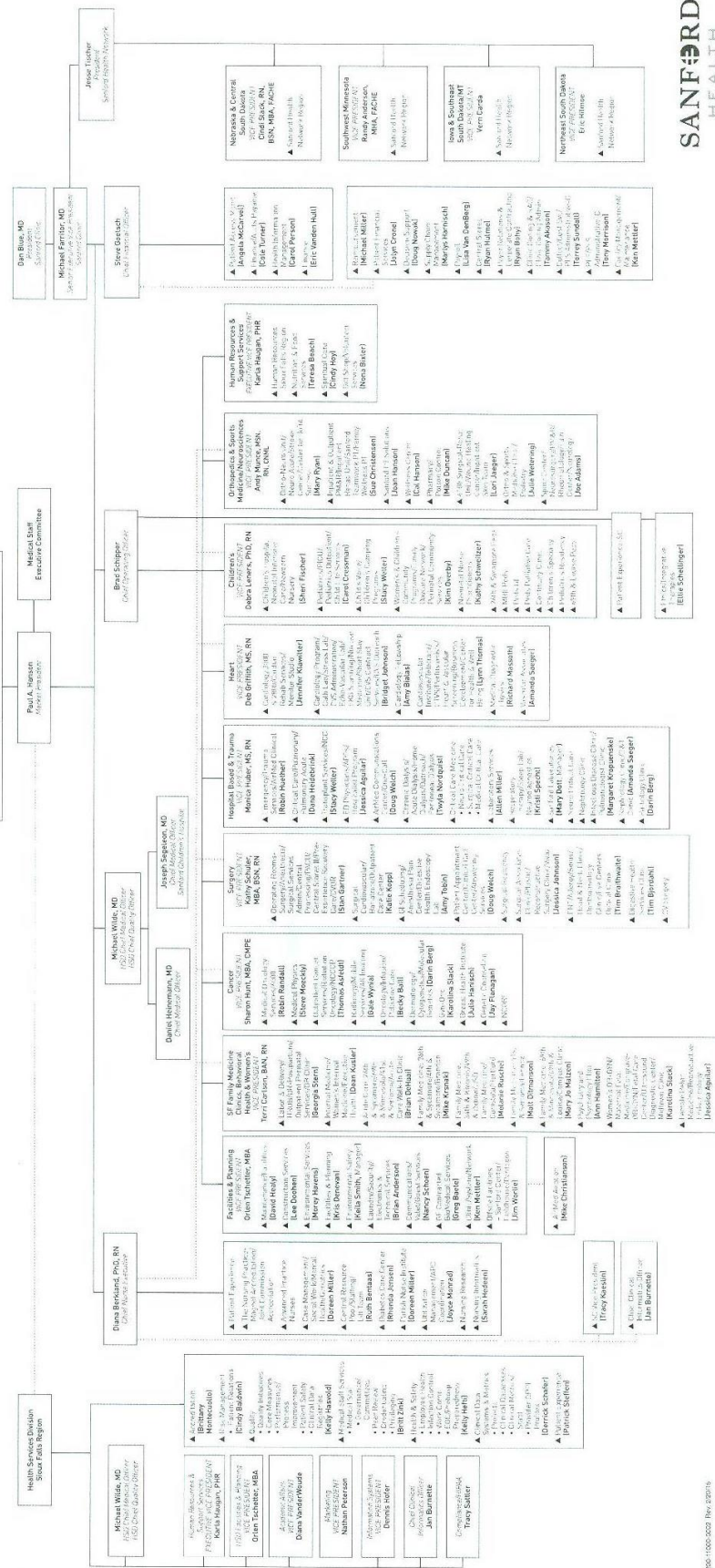
RADIOLOGY ORGANIZATIONAL CHART



REVIEWED: 05/08, 05/09, 05/10, 02/11, 04/12, 5/13, 4/14, 5/15, 5/16, 5/17, 2/18, 4/20
REVISED: 06/08, 7/15, 5/19, 6/20, 3/21, 3/22, 1/23

HOSPITAL ORGANIZATIONAL CHART

Sanford USD Medical Center Executive Management



REVIEWED: 05/08, 05/09, 05/10, 02/11, 04/12, 05/13, 4/14, 2/15, 5/16, 5/17, 2/18, 4/20, 3/22, 1/23
 REVISED: 06/08, 05/13, 4/14, 2/15, 3/21

GENERAL INFORMATION



SANFORD MEDICAL CENTER

Sanford Medical Center is operated on a non-profit basis and is governed by a board of Trustees for the people of the Sioux Falls area. The hospital offers educational opportunities for medical students, interns, and residents as well as those studying radiologic technology, medical technology, nursing, respiratory therapy, dietary, pharmacy, medical records, anesthesia, physical and speech therapy.

Sanford Medical Center has over 500 licensed beds. Sanford Medical Center was first established in 1894. It is approved by the Joint Commission and is a member of the American Hospital Association, Voluntary Hospitals of America and Novation.

REVIEWED: 05/08, 05/09, 05/10, 02/11, 04/12, 05/13, 4/14, 6/15, 5/16, 5/17, 2/18, 5/19, 4/20, 3/21, 3/22, 1/23

REVISED: 02/11

SCHOOL OF RADIOLOGIC TECHNOLOGY

The school of Radiologic Technology was organized in 1949. The school is under the direction of a Radiologist certified by the American Board of Radiology and a Program Director. The School of Radiologic Technology has a capacity to accept up to fourteen students each year. Our educational program combines academic effort and practical experience. We strive to combine a sense of personal dedication, motivation, and technical skills in our students so they may become capable and reliable members of the medical team.

REVIEWED: 05/08, 05/09, 05/10, 02/11, 04/12, 05/13, 4/14, 6/15, 5/16, 5/17, 2/18, 5/19, 4/20, 3/21, 3/22, 1/23

REVISED: 02/11

MISSION STATEMENT

Dedicated to the work of sharing God's love through the work of health, healing, and comfort ~ by developing competent radiographers who demonstrate a professional concern for patients.

REVIEWED: 05/08, 05/09, 4/10, 7/10, 02/11, 04/12, 04/13, 4/14, 4/15, 4/16, 5/17, 4/18, 4/20, 3/21, 3/22, 1/23
--

REVISED: 7/10, 2/19

GOALS

1. Students will be clinically competent.
2. Students will communicate effectively.
3. Students will demonstrate critical thinking skills.
4. Students will substantiate the importance of professional growth.

REVIEWED: 05/08, 05/09, 5/10, 7/10, 02/11, 04/12, 04/13, 4/14, 4/15, 4/16, 5/17, 4/18, 2/19, 4/20, 3/21, 3/22, 1/23
--

REVISED: 7/10, 4/14

STUDENT LEARNING OUTCOMES

1. Students will perform routine procedures.
2. Students will be competent in patient care skills.
3. Students will practice appropriate radiation protection.
4. Students will communicate with patients.
5. Students will demonstrate good written communication skills.
6. Students will perform non-routine procedures.
7. Students will evaluate images to determine for diagnostic quality.
8. Students will demonstrate professional behavior.
9. Students will distinguish between ethical and non-ethical behavior.

REVIEWED: 08/10, 02/11, 04/12, 04/13, 4/14, 5/14, 4/15, 4/16, 5/17, 4/18, 2/19, 4/20, 3/21, 3/22, 1/23

REVISED: 08/10, 5/14

ACCREDITATION

Sanford Medical Center School of Radiologic Technology is accredited by the Joint Review Committee on Education in Radiologic Technology (JRCERT), 20 N. Wacker Dr., Ste. 2850, Chicago, Ill. 60606-3182, 312-704-5300, www.jrcert.org. The program's current length of accreditation is 8 years.

Sanford Medical Center is accredited by The Joint Commission.

REVIEWED: 05/08, 05/09, 05/10, 02/11, 04/12, 05/13, 4/14, 6/15, 5/16, 5/17, 2/18, 5/19, 4/20, 3/21, 3/22, 1/23

REVISED: 12/10, 11/18

CERTIFICATE

Sanford Medical Center's School of Radiologic Technology is designed to be completed in 24 months. Students completing the radiologic technology program will be awarded a certificate of completion. Completion of the program qualifies the student to apply to the American Registry of Radiologic Technologists (ARRT) for the nationally recognized certification examination. This certification gives a student nationally recognized credentials to practice radiography.

The School of Radiologic Technology is **NOT** a degree granting institution; therefore credits from other institutions cannot be accepted to shorten the length of our program.

(NOTE: If you have been convicted of a misdemeanor or felony prior to or during the educational training, the board Registry may be denied by the ARRT).

REVIEWED: 05/08, 05/09, 05/10, 02/11, 04/12, 05/13, 4/14, 6/15, 5/16, 5/17, 2/18, 5/19, 4/20, 3/21, 3/22, 1/23

REVISED: 12/10, 02/11, 04/12

TUITION AND FEES

**The school of Radiologic Technology reserves the right to adjust tuition and fees presented in this document.*

First Year:

Tuition.....\$2500

Student Activity Fee.....\$250

Second Year:

Tuition.....\$2500

Student Activity Fee.....\$250

- * \$250 Non-refundable Acceptance Fee - Paid at the time of acceptance into the program and applied to the first year Student Activity Fee.
- * The Student Activity Fee is used for ASRT annual dues, SDSRT annual dues, SDSRT Conference fees, etc.
- * Books, BLS, and developmental tests are provided without charge.
- * The ARRT certification examination fee is the responsibility of the student.
- * The cost of uniforms, housing, meals, and transportation are the responsibility of the student.

1st year student tuition and fees must be paid in full by the end of the first year, or the student will be dismissed from the program.

2nd year student tuition and fees must be paid in full by the end of the 2nd year, or the student will not be allowed to graduate and all requests for official didactic and clinical grade transcripts will be denied.

*The Tuition / Expenses and Refund Policy are identical for **ALL** resident and non-resident students, including veterans and military members.*

REVIEWED: 05/08, 05/09, 05/10, 02/11, 06/11, 04/12, 05/13, 4/14, 10/14, 6/15, 5/16, 10/16, 5/17, 2/18, 5/19, 4/20, 3/21, 3/22, 1/23
--

REVISED: 05/09, 05/10, 02/11, 06/11, 04/12, 10/14, 10/16

FINANCIAL AID

The Sanford Medical Center School of Radiologic Technology does not award and disperse financial aid; however, we can provide student loan deferment

Students in the Radiologic Technology program may be eligible for scholarships. Scholarship information will be provided to students during the 24 month program when it is available.

For students who **ARE** eligible for financial aid through an affiliated college/university:

- 1) Contact your college advisor and Financial Office at the college/university in which you are enrolled as soon as possible after you are accepted into the Sanford Radiologic Technology Program.
- 2) Note: NDSU, USF, Mount Marty, University of Mary and St. Cloud State students' financial aid status and documentation will remain with the Financial Aid office at NDSU, USF, Mount Marty, University of Mary and St. Cloud State.

REVIEWED: 05/08, 05/09, 05/10, 02/11, 04/12, 05/13, 4/14, 10/14, 6/15, 6/16, 5/17, 2/18, 5/19, 4/20, 3/21, 3/22
REVISED: 09/08, 05/10, 02/11, 10/14, 8/20, 1/23, 6/23

REFUND POLICY

When a student withdraws, two separate calculations must be determined.

- 1) Refund of Tuition
- 2) Return of Title IV funds

Tuition refunds will be made only after the School of Radiologic Technology has been officially notified in writing, of withdrawal from the program. The withdrawal notice must be submitted to the Program Director. The date the withdrawal notice is received will be regarded as the student's last day of attendance. Failure to make proper notification (unofficial withdrawal) renders the student ineligible for a tuition refund.

First week	80 percent
Second week	60 percent
Third week	40 percent
Fourth week	20 percent
No refund thereafter	

NOTE: No refund will be given for tuition holding fee, books, vaccinations, or student activity fees.

REVIEWED: 5/08, 05/09, 05/10, 02/11, 04/12, 05/13, 4/14, 10/14, 6/15, 5/16, 5/17, 2/18, 5/19, 4/20, 4/21, 3/22, 1/23
REVISED: 02/11, 10/14

TECHNICAL STANDARDS

Admission to the School of Radiologic Technology is offered only to those applicants who present the highest qualifications for education and training in radiologic technology. Applicants to the radiology program at Sanford Medical Center must possess the following general qualities:

- Critical thinking
- Sound judgment
- Emotional stability and maturity
- Empathy

- Ability to work with a team
- Physical and mental stamina
- Compassion for patients
- Ability to learn and function in a wide variety of didactic and clinical settings
- Ability to perform effectively under stress

REVIEWED: 5/08, 05/09, 05/10, 02/11, 04/12, 05/13, 4/14, 6/15, 5/16, 5/17, 2/18, 5/19, 4/20, 3/21, 3/22, 1/23
REVISED: 05/09, 02/11, 4/23

HEALTH REQUIREMENTS / VACCINATION POLICY

For each student, his/her university will maintain documentation of the student's immunizations and will provide proof of documentation if requested by Sanford. For students who are not associated with a university, Sanford Radiography Program will maintain documentation of the student's immunization record.

Student Immunizations and Exposure Requirements	
Student must submit medical documentation of immunization records to their school/educational program. Discuss any medical and/or religious exemption requests with site contact.	
MMR (measles/mumps/rubella)	2 shots <u>or</u> titer (blood test)
Varicella (chicken pox)	Complete ONE of the following: <ul style="list-style-type: none"> • 2 shots <u>or</u> titer (blood test) • <u>Health care provider</u> documentation of varicella (chicken pox) <u>or</u> herpes zoster (Shingles); either are acceptable to verify immunity. A statement of history of the disease will not be accepted, even if written on the vaccination report.
Tuberculosis (TB)	Complete ONE of the following for initial TB test: <ul style="list-style-type: none"> • 2-step TB skin test (TST) • T-SPOT.TB • QuantiFERON (QFT) Must complete TB symptom screen. Discuss any student(s) with history of a positive TB test and student(s) who are experiencing TB signs and symptoms, with Sanford Health contact.
Influenza & COVID 19 vaccine	Influenza - 1 dose annually ; COVID 19 - as directed by Sanford Health
Hepatitis B series	3 doses of vaccine <u>or</u> titer (blood test); recommended, not required
Td/Tdap	Documentation of up-to-date Td/Tdap vaccination; recommended, not required

REVIEWED: 5/08, 05/09, 05/10, 02/11, 04/12, 05/13, 4/14, 6/15, 5/16, 5/17, 2/18, 5/19, 4/20, 3/21,
REVISED: 05/09, 02/11, 4/14, 5/16, 5/19, 3/22, 4/23, 7/23

HEALTH SERVICES

Health care service will be provided by the Health Service at Sanford Medical Center from 7:00 A.M. to 4:00 P.M. Monday through Friday. Students reporting a sudden onset of acute illness or injury will be offered medical diagnosis and treatment in the Trauma Center.

If a student is ill for more than three consecutive days, the student may need to have written consent from a physician in order to return to school.

Any student involved in an accident during clinical or classroom assignment must report the accident immediately to the Program Director and supervising technologist.

If the student has sustained an injury, he/she will be sent to the Health Care Service or Emergency Department for examination and treatment. An Employee/Student Injury and Investigation Report will be completed and routed to the Program Director of the school.

The Student Health Service does not cover hospitalization. Students are responsible for their own insurance coverage.

If an accident involves a patient, a Patient Event Report must be completed and signed by the student and supervising technologist and turned in to the Director of the radiology department.

REVIEWED: 5/08, 05/10, 04/12, 05/13, 4/14, 5/16, 2/17, 4/20, 3/21, 3/22, 1/23
--

REVISED: 05/09, 02/11, 6/15, 3/18, 5/19, 6/23
--

ANNUAL CRIME AWARENESS AND CAMPUS SECURITY

Sanford Medical Center School of Radiologic Technology believes in maintaining a safe, healthful, and efficient environment for all employees and students in protecting staff, hospital property, and equipment. The US Department of Education passed the *Crime Awareness and Campus Security Act of 1990* to create a required and consistent reporting process to provide information and documentation for post-secondary institutes to share important safety information with students, parents and employees.

In compliance with the *Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act*, or *Clery Act (amended by the Violence Against Women Reauthorization Act of 2013)*, Sanford Medical center publishes an annual report which provides students and families with detailed information about this Act.

Data for the Annual Security and Safety Report for Sanford USD Medical Center School of Radiologic Technology is compiled annually by Brian Anderson, Sanford Security Director. This report documents three calendar years of campus crime statistics. The Sanford USD Medical Center Security Director prepares this report to comply with *the Jeanne Clery Disclosure of Campus Security Policy and Crime Statistics Act*. This report is prepared in cooperation with the local law enforcement agencies surrounding the campus.

The report is published by October 1 each year and is available to the public online at <https://www.sanfordhealth.org/student-programs/radiography-program> . Campus crime statistics are also available at <http://ope.ed.gov/security>.

Prospective students, current students and employees can access the report from the school website.

All current students and school employees receive a paper copy of the report annually, in the fall. Along with the Annual Security Report, students and school faculty receive a copy of the Sanford Health Workplace Violence and Bullying Policy, Sanford USD Medical Center Security

Management Policy, Abusive Action and Discrimination and Harassment Policy, and Evacuation Plan Policy.

Individuals who are unable to obtain a hard copy from the web site may request one from:

Sanford Medical Center School of Radiologic Technology

1305 W. 18th St.

Sioux Falls, SD 57117-5039

Candace.McNamara@sanfordhealth.org

NOTE: For prospective students, a paper copy of the Sanford Health Workplace Violence and Bullying Policy, Sanford USD Medical Center Security Management Policy, Abusive Action and Discrimination and Harassment Policy, and Evacuation Plan Policy may be requested from Brian.anderson@sanfordhealth.org.

Hospital Access and Security

- Security services include 24 hour patrol of Sanford Medical Center and grounds, television surveillance, and escort service to parking ramp upon request. Employees and students should call Security (605-333-1111) to request an escort to the parking area.
- Photo ID/Security badges are issued at the beginning of the Radiologic Technology Program. ID badges must be worn in the clinical setting. The badge will permit access to clinical assignments in secured areas.

Authority of Sanford USD Medical Center Security Officers

Sanford Medical Center Security officers are not sworn police officers and do not carry firearms. Officers are empowered to enforce Sanford USD Medical Center policies and regulations and can make a citizen's arrest under the South Dakota State Law. Brian Anderson, Director of Security serves as the liaison between the Sanford USD Medical Center and local/state/federal law enforcement agencies.

Depending on the applicable South Dakota and Federal law, criminal incidents are generally referred to local law-enforcement agencies with jurisdiction over campus property. The Sanford USD Medical Center Security Department also maintains working relationships with neighbors and surrounding community groups.

Campus Security Authority (CSA)

Employees at the Sanford Medical Center who have significant responsibility for student activities on campus are designated as "Campus Security Authorities" as defined by the *Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act*.

The function of CSAs is to report to the official or office designated by the institution to collect crime report information such as campus security department any allegations of Clery Act crimes that he or she concludes were in good faith.

It is critical that all alleged crimes reported to CSAs be included in the annual campus security report pursuant to the *Clery Act*. Compliance with these provisions does not constitute a violation of regulations under the Family Educational Rights and Privacy Act of 1974 (FERPA).

Reporting a crime under the *Clery Act* does not require an investigation or disclosing identifying information about the victim. In addition, retaliation by an institution or officer or employee of an institution against any individual for exercising their rights or responsibilities to report crimes under any provision under the *Clery Act* is strictly prohibited.

Individuals whom students and employees should report criminal offenses

- The designated Campus Security Authority is Brian Anderson, Director of Security
605-333-1111

To Report a Crime

All employees and students are responsible for reporting violence or bullying to their respective supervisors. Supervisors are responsible to follow up concerning all reports of violence or bullying. If there is an immediate threat of bodily harm from any person, the student should call a security code and law enforcement for immediate assistance. Reports of patient or visitor-involved violence or bullying will be handled by Sanford Security, local law enforcement and/or the Risk Management Department.

- **Security:** 605-333-1111
- **Sioux Falls Police Department:** 911

Staff, students, and the public are encouraged to report all crimes in a timely manner.

Confidential Crime Reporting

Sanford Medical Center Security Department encourages anyone who is the victim or witness to any crime to promptly report the incident to the police. Because police reports are public records under state law, reports to the police department are not confidential.

To the extent possible, Sanford will maintain the confidentiality of the reporting employee/student and the investigation; when appropriate Sanford may make certain disclosures concerning the incident and investigation.

Annual Disclosure of Crime Statistics

In compliance with the *Clery Act*, the Director of Security is responsible for maintaining the data required of all Title IV and for annual reporting of Crime Statistics on the Campus Security and Safety site at <http://ope.ed.gov/security>.

A crime report and crime logs are available upon request through the Sioux Falls Police Department, Community Services Division. Call 605-367-7226 and ask for the crime log for Sanford Medical Center, 1305 W. 18th St., Sioux Falls, SD,

Crime Logs

A crime report and logs are available upon request through the Sioux Falls Police Department, Community Services Division. Call 605-367-7226 and ask for the crime log for Sanford Medical Center, 1305 W. 18th St., Sioux Falls, SD. The crime log includes:

- Nature of crime
- Date/time of crime reported
- Date/time of crime occurred
- Location of crime
- Reference number to a full report

Alleged crimes reported to the Sanford Medical Center Security Department will not be withheld or removed from the crime statistics based on a decision by a court, coroner, jury, prosecutor or other non-campus official unless the crime is classified as “unfounded” by local law enforcement.

Procedures for investigating incidents of workplace violence

In the event of a reported crime, security staff will follow the procedure listed below:

- Visiting the scene of an incident as soon as practicable
- Interviewing injured and threatened persons and witnesses
- Examining the workplace for security risk factors associated with the incident, including reports of inappropriate behavior by the perpetrator
- Determining the cause of the incident
- Taking mitigating action to prevent the incident from recurring

Sex Offender Registration

In accordance with the “Campus Sex Crimes Prevention Act” of 2000, which amends the Jacob Wetterling Crimes Against Children and Sexually Violent Offender Registration Act, the Jeanne Clery Act and the Family Educational Rights and Privacy Act of 1974, a link is provided to the Minnehaha County Sex Offender Registry site. The registered sex offender list may be obtained from the Sioux Falls Police Department, Records Division, 320 W 4th St, Sioux Falls, SD or call 605-367-7226 or go to www.minnehahacounty.org and click on “sheriff”.

Crime Prevention and Security Awareness Programs

During student orientation, students attend a Safety In-service, which is presented by the Director of Security. Various topics are covered to educate the students on security and crime prevention and awareness. A common theme of all safety awareness and crime prevention programs is to encourage students and employee to be aware of their responsibility to report violent behavior or bullying to their respective supervisors. Annually, students and employees complete the following online educational courses regarding prevention of crimes;

- Understanding Workplace Discrimination and Harassment
- Workplace Violence Prevention

In addition, the Sanford Medical Center School of Radiologic Technology Policy & Procedure Manual contains information and guidelines related to a drug and alcohol free workplace. Crime prevention in-services for students, faculty, and staff can be arranged by contacting the Director of Security at 605-333-6535. Crime prevention education includes a “Protect Yourself Class; Basic Awareness of Your Surroundings”, which is available to students and employees at various times.

Referral Resources - Employee Assistance Program

Referral resources are available to employees and students through the Employee Assistance Program (Vital WorkLife) at 1-800-303-1908. Vital WorkLife staff is available 24/7 by phone or face to face sessions are available to speak with employees or students who are struggling with personal or work challenges. This program provides employees, students, and their families

access to a confidential counseling/assessment and referral service at **NO COST** to students or staff.

- Services include assistance in emotional, physical and marital issues; alcohol and drug related issues; legal, financial or other work/life issues.

Reportable Crimes

The following is a list of reportable crimes as mandated by the *Clery Act*: Definitions are taken from the Handbook for Campus Crime Reporting published by the U.S. Department of Education Office of Postsecondary Education and the FBI's Uniform Crime Reporting Hate Crime Collection Guidelines.

1. *Murder and Non-Negligent Manslaughter*: The willful (non-negligent) killing of one human being by another.
2. *Negligent Manslaughter*: the killing of another person through gross negligence.
3. *Sex Offenses-Non-Forcible*: Incidents of unlawful, non-consensual sexual intercourse. There are two types defined the Clery Act:
 - a. *Incest* : Non-forcible sexual intercourse between persons who are related to each other within the degrees wherein marriage is prohibited by law.
 - b. *Statutory Rape* : Non-forcible sexual intercourse with a person who is under the statutory age of consent.
4. *Sex Offenses – Forcible*: Any sexual act directed against another person, forcibly and/or against that person's will; or not forcibly or against the person's will where the victim is incapable of giving consent. This includes:
 - a. *Forcible Rape*: Carnal knowledge of a person, forcibly and/or against that person's will; or not forcibly or against the person's will where the victim is incapable of giving consent because of his/her temporary or permanent mental or physical incapacity (or because of his/her youth). This offense includes the forcible rape of both males and females.
 - b. *Forcible Sodomy*: Oral or anal sexual intercourse with another person, forcibly or against the person's will where the victim is incapable of giving consent because of his/her youth or because of his/her physical incapacity.
 - c. *Forcible Fondling*: The touching of the private body parts of another person for the purpose of sexual gratification, forcibly and/or against that person's will; not forcibly or against the person's will where the victim is incapable of giving consent because of his/her youth or because of his/her temporary or permanent mental or physical incapacity.
 - d. *Sexual Assault With an Object*: The use of an object or instrument to unlawfully penetrate, however slightly, the genital or anal opening of the body of another person, forcibly and/or against that person's will; or not forcible or against the person's will where the victim is incapable of giving consent because of his/her youth or because of his/her temporary or permanent mental or physical incapacity. An object or instrument is anything used by the offender other than the offender's genitalia. Examples are a finger, bottle, handgun, stick, etc.
 - e. *Sexual Assault*: Any nonconsensual sexual act , including when the victim lacks the capacity to consent.
5. *Robbery*: The taking or attempting to take anything of value from the care, custody, or control of a person or person by force or threat of force or violence and/or by putting the victim in fear.

6. Aggravated Assault: An unlawful attack by one person upon another for the purpose of inflicting severe or aggravated bodily injury. This type of assault usually is accompanied by the use of a weapon or by means likely to produce death or great bodily harm.
7. Simple Assault: An unlawful physical attack by one person upon another where neither the offender displays a weapon, nor the victim suffers obvious severe or aggravated bodily injury involving apparent broken bones, loss of teeth, possible internal injury, severe laceration, or loss of consciousness.
8. Burglary: The unlawful entry of a structure to commit a felony or a theft.
9. Motor Vehicle Theft: Theft or attempted theft of a motor vehicle.
10. Arson: Any willful or malicious burning attempt to burn, with or without intent to defraud, a dwelling house, public building, motor vehicle or aircraft, personal property of another.
11. Hate Crimes: A criminal offense committed against a person or property which is motivated, in whole or in part, by the offender's bias. Bias is a preformed negative opinion or attitude toward a group of persons based on their race, gender, actual or perceived gender identity, religion, disability, sexual orientation, or ethnicity/national origin.
12. Larceny/Theft: The unlawful taking, carrying, leading, or riding away of property from the possession or constructive possession of another (other than motor vehicle theft).
13. Other Assaults: (simple) Assaults and attempted assaults which are not of an aggravated nature and do not result in serious injury to the victim. Stalking, intimidation, coercion, and hazing are included.
14. Vandalism: To willfully or maliciously destroy, injure, disfigure, or deface any public or private property, real or person, without the consent of the owner or person having custody or control by cutting, tearing, breaking, marking, painting, covering with filth, or any other means specified by local law.
15. Domestic Violence: Felony or misdemeanor crime of violence by:
 - a. A current or former spouse or intimate partner.
 - b. A person with whom the victim shares a child in common.
 - c. A person who is cohabitating with or has cohabitation with the victim as a spouse or partner.
 - d. A person similarly situated to a spouse of the victim under the domestic or family violence laws of the jurisdiction receiving the grant monies (under VAWA).
 - e. Any other person against an adult or youth victim who is protected from the person's acts under the domestic or family violence laws of the jurisdiction.
16. Dating Violence: Violence committed against a person:
 - a. Who is or has been in a social relationship of a romantic or intimate nature with the victim.
 - b. Where the existence of such a relationship shall be determined based on a consideration of the following factors:
 - i. The length of the relationship
 - ii. The type of relationship
 - iii. The frequency of interaction between the persons involved in the relationship
17. Stalking: Engaging in a course of conduct directed at a specific person that would cause a reasonable person to:
 - a. Fear for his or her safety or the safety of others or
 - b. Suffer substantial emotional distress

Emergency Response and Evacuation Procedures

Overview: Because of the nature of Sanford Medical Center (SMC) operations, it is essential that the organization is prepared to operate at all times, even under unusual or adverse circumstances. As per the SMC Hazard Vulnerability Analysis (HVA), high probability circumstances could include natural causes such as severe weather, fire, exposure to hazardous materials, interruption of basic utilities, mass casualties or acts of violence. Sanford Medical Center's Emergency Operations Plan is designed to provide an organized response to the possible events.

Sanford Medical Center is recognized by the State of South Dakota as a NIMS compliant hospital facility. SMC utilizes the Incident Command System to coordinate its Hospital Command Center (JCC). Staff has been trained utilizing the FEMA-EMI ICS 100HC and ICS 200HC, as well as IS 700 programs.

To ensure that there is little to no delay in coordinating a response, the administrative staff has a 24/7 on call incident commander. The Hospital Administrator on call serves in the Incident Commander role. This enables the Hospital Administrator on call to immediately begin to coordinate command center responsibilities and initiate the appropriate response. All administrative staff is trained in the incident command process and all participate in the multi-year training and exercise plan.

Procedure to disseminate emergency information

The primary SMC Command Center is located on the administrative floor of the Medical Center. An alternate command center has been identified. The various forms of communication listed below are used to disseminate information internally, externally, and the larger community. Each command center is capable of redundant communications in the following formats:

- Telephone
- Fax
- Email
- Cellular
- Instant Messaging
- VHF Two way radio
- UHF Two way radio
- State Digital Radio
- Television
- Weather Radio

Description of the procedures used for a significant emergency or dangerous situation

The Emergency Operations Plan will be implemented in response to internal, external, regional, and national disasters at the discretion of Sanford Administration.

1. The Administrator on call will initiate the Emergency Operations Plan.
2. The individual initiating the plan will determine the need to call a Code Disaster, the need for decontamination, and the need for additional resources.
3. If activation is required for an event that is not expected to generate patients, but might impact business continuity, the administrator on call will coordinate with the Subject matter expert from the area of impact and activate an appropriate response.
4. Communications will be responsible for the Notification process.
5. If an event occurs that generates a direct impact on the campus, the Command team will order an immediate operational assessment and initiate the appropriate response level.

The Sanford Health Organization recognizes five levels of emergency activation:

Level 1 - Enterprise Emergency (National Incident)

- Incident that could tax the resources of the entire health system
- Ex. (Pandemic, power grid disruption, major catastrophe)

Level 2 - Regional Support (Area Command Activation)

- Incident that would require the system command center to provide resource and administrative support to affected facilities with the health system.
- Ex. (tornados, local outbreaks, ice storms, biohazard situations)

Level 3 - Code Disaster

- Incident that will generate the arrival of fifteen or more patients to one or more system facilities
- Ex. (mass casualty incident)

Level 4 - Code Disaster (Decon)

- Incident, regardless of patient count, that will generate patient arrivals requiring decontamination at one or more system facilities.
- Ex. (HAZMAT or Biohazard Incidents)

Level 5 - Facility Silent Activation

- Incident or impending incident with a high impact potential that could directly affect operations at one or more system facilities.
- Ex. (Utility failure, airport incidents, other potential or unconfirmed events, or if)

The only reason that Sanford Health Organization would not immediately issue a notification for a confirmed emergency or dangerous situation is if doing so will compromise efforts to:

- Assist a victim
- Contain the emergency
- Respond to the emergency
- Compromise the emergency

A list of Emergency Management Codes, along with the proper procedures to be followed, are included in the Sanford Medical Center’s Emergency Operations Plan, which may be accessed at the Safety site, and is included in the Safety Kardex, which is displayed in all areas of the hospital. Staff /students receive annual training (Sanford Learn courses) for each of the codes. The list of Emergency Management System Disaster codes are listed below.

TYPE	Incident Type	Code
<i>Medical</i>	Adult Code	Code Blue - Adult (location)
	Pediatric Code	Code Blue – Pediatric (location)
	Neo-Nate Code	Code Blue – Neonate (location)
	Adult Trauma	Adult Trauma Team – Level 1 or 2
	Pediatric Trauma	Pediatric Trauma Team – Level 1 or 2
	Stroke	Stroke Team – Level 1 or 2
	Rapid Response Team	Rapid Response – (location)
<i>Safety / Security</i>	Disruptive Individual	Security Alert – Manpower needed (location)
	Missing person/Elopement	Security Alert – Missing Person

-NOTICE-

The information found in this document is current as of the date of the print. Date - 7/31/2023.

	Infant Abduction	(age/gender) Security Alert – Missing Person (infant/gender)
	Dangerous Person	Security Alert – Armed Intruder (location)
	Bomb Threat	(Silent Activation)
	Controlled Access	Security Alert - Controlled Access
	Lockdown	Security Alert – Lockdown
	Fire	Fire Alarm – (location)
<i>Weather Related</i>	Surge, HASMAT, Other	Incident Command Activation (define incident)
	Other	
<i>Utility Failure</i>	Tornado Watch	Weather Alert – Tornado Watch
	Tornado Spotted	Weather Alert – Warning
	Severe Thunderstorm	Weather Alert – Severe Thunderstorm
	In progress	
	Winter Weather	Weather Alert – (Define Type)
<i>Utility Failure</i>	Water Outage	Facility Alert – Water Outage
	Electrical Outage	Facility Alert – Electrical Outage
	Natural Gas Outage	Facility Alert – Gas Outage
	Telephone Outage	Facility Alert – Telephone Outage

Notification Process / Timely Warnings

1. The Communications Department is responsible for the notification of staff during activations of the emergency operations plan. Notification and warnings would be decided on a case by case basis.
2. The Administrator on call will advise the Communications Department regarding the Level of Activation, Type of Activation, and Need for overhead page.
3. The Communications will launch the appropriate call trees in the HICS program.
 - a. Call trees are used to communicate with off duty staff, when additional staff is required. (eICS, telephone, utilization of local media, Email, Dark web)
4. The Communications will commence with the appropriate overhead page.
5. The Command Center will monitor all incoming availability responses from the electronic activation process.

Evacuation Plan

In the event that evacuation of the entire facility or a portion thereof is required, the Evacuation Plan will serve as an overall guide for the safe movement of patients, staff, and visitors. This plan establishes the line of authority for implementation of evacuation procedures and provides for alternative care sites following evacuation. Students and faculty will review the Evacuation Plan annually. Also, the plan can be accessed on the Safety Website and Safety Kardex in every area of the hospital.

Procedure for Testing Emergency Response and Evacuation Procedure

SMC maintains a multi-year training and exercise program that is compliant with the following requirements:

- National Incident Management System
- OSHA First Receivers
- Homeland Security Exercise and Evaluation Program
- Joint Commission EM Standards

-NOTICE-

The information found in this document is current as of the date of the print. Date - 7/31/2023.

All staff will know his / her role during a disaster exercise. All exercises that result in activation are evaluated in an after action process and are documented on an exercise/incident evaluation form. Following an exercise, the after action forms are reviewed by the emergency management committee to determine if any corrective actions are needed. Corrected actions are entered into the objective lists of subsequent exercises to ensure that unwarranted outcomes are corrected.

Command center power up is a practiced activity and training is conducted with administrative assistant staff at least once a year. All training is documented.

Drug Free Campus`

The Drug-Free Schools and Communities Act of 1989 mandates that institutions of higher education adopt and implement a program designed to prevent the unlawful possession, use or distribution of illicit drugs and alcohol by students and employees.

Sanford Medical Center is committed to providing a drug & alcohol free, healthy, safe and secure workplace at all locations where company business is conducted. Sanford Medical Center prohibits the manufacturing, distributing, diverting, possessing, selling/use of or being under the influence of illegal drugs or alcohol in the workplace.

Prospective students, current students and employees are made aware of this policy on the school website. During new student orientation, this policy is reviewed and a statement of understanding is signed by each individual. In addition, all current students and school employees receive a paper copy of this policy annually, in the fall.

Title IX

Title IX promotes equal opportunity by providing that no person may be subjected to discrimination on the basis of sex under any educational program or activity receiving federal financial assistance. A school must respond promptly and effectively to sexual harassment, including sexual violence, that creates a hostile environment. When responsible employees are aware of possible sexual harassment or sexual violence, they must notify the Title IX Coordinator.

Title IX Coordinator: Brian Anderson – Director of Security (605) 333-1111

The responsibility of the Title IX Coordinator is to oversee the implementation of Title IX and to review all Title IX complaints.

In accordance with Title IX, Sanford USD Medical Center prohibits discrimination on the basis of sex in all academic activities. Sanford USD Medical Center has **NO** extracurricular programs or athletic activities.

Notice of Non-discrimination

Sanford Medical Center does not discriminate on the basis of race, color, national origin, sex or sexual orientation, gender identity, age, religion, mental or physical disability, genetic information, marital status, military/veteran status with regard to public assistance, pregnancy, or other category protected by local, state, or federal government.

-NOTICE-

The information found in this document is current as of the date of the print. Date - 7/31/2023.

Sexual Harassment Policy

Sexual harassment is a form of sex discrimination and is illegal. Sexual harassment is unwelcome conduct of a sexual nature, including unwelcome sexual advances, requests for sexual favors, and other verbal, nonverbal, or physical conduct of a sexual nature.

Sexual harassment encompasses any sexual attention that is unwanted and can take many forms. Most sexual harassment falls into 3 categories: verbal, visual and physical. All forms of sexual harassment cause the victim to feel uncomfortable or threatened by the behavior and may cause the victim to fear retaliation such as the loss of job or poor grades.

Any student or employee who feels that he or she has been or is being harassed and/or discriminated against, should immediately report it to the his or her immediate supervisor or designated CSA/Director of Security.

Privacy of the charging party and the person accused will be kept confidential to the fullest extent possible.

Confidential documentation of allegations and investigations will be maintained by the Risk Management. Risk Management department will handle corrective actions to resolve policy violations. For off campus locations, law enforcement shall be called for assistance.

The Sanford Health Policy for *Discrimination and Harassment* is located on the Sanford Connect website and it describes the procedure for reporting and handling of complaints of discrimination or harassment. New students will review this policy during student orientation. In addition, students and school faculty review this policy in the fall, annually.

Policy for Reporting Sexual Assault, Dating Violence, Domestic Violence, and Stalking

Any victim of a sexual assault should find safety, seek any necessary medical treatment, and report the incident as soon as possible to assure that evidence is collected and preserved. Security will make appropriate contacts to the employee or student's direct supervisor, Risk Management department, or Sioux Falls Police Department. This policy is intended to provide encouragement for reporting and prosecuting sexual assault and sexual contact while maintaining confidentiality to the fullest extent possible.

The report can be made to:

- Brian Anderson, Director of Security: (605) 333-1111
or
- Sioux Falls Police Department : 911

A victim has the options to:

- Notify proper law enforcement authorities, including campus security
- Be assisted by campus security in notifying law enforcement authorities if the victim so chooses
- Decline to notify such authorities

Filing a report with the Sanford USD Medical Center Security staff will:

- Not obligate the victim to prosecute.

Filing a police report will:

- Ensure that the victim of sexual assault receives the necessary medical treatment
- Provide the opportunity for collection of evidence helpful in prosecution, which cannot be obtained later
- Ensure that the victim has access to free confidential counseling from counselors specifically trained in the area of sexual assault crisis intervention

-NOTICE-

The information found in this document is current as of the date of the print. Date - 7/31/2023.

Confidentiality

To the extent possible, reported concerns will be handled in a confidential manner, recognizing Sanford’s need to investigate.

The reported crime will be included with *Clery Act* reporting and disclosures, without the inclusion of personally identifying information about the victim.

Sexual Assault Prevention and Response

Annually, students and employees complete the following online educational courses regarding prevention of crimes;

- Understanding Workplace Discrimination and Harassment
- Workplace Violence Prevention

In addition, the Sanford Medical Center School of Radiologic Technology Policy & Procedure Manual contains information and guidelines related to a drug and alcohol free workplace. Crime prevention in-services for students, faculty, and staff can be arranged by contacting the Director of Security at 605-333-6535. Crime prevention education includes a “Protect Yourself Class; Basic Awareness of Your Surroundings”, which is available to students and employees at various times.

Security services include 24 hour patrol of Sanford Medical Center and grounds, television surveillance, and escort service to parking ramp upon request. Employees and students should call Security (605-333-1111) to request an escort to the parking area.

No reprisals or retaliation will be taken against any person who reports workplace violence, Sexual Assault, Dating Violence, Domestic Violence, or Stalking.

In cases of domestic violence and/or the existence of court orders, the student or employee is encouraged to share such information with Security.

The Sanford Health Policy for *Workplace Violence and Bullying* is located on the Sanford Connect website. This policy describes the procedure for reporting, investigating, handling of reports, and disciplinary action of workplace violence. New students review this policy during student orientation. In addition, students and school faculty review this policy in the fall, annually.

Referral Resources - Employee Assistance Program

Referral resources are available to employees and students through the Employee Assistance Program (Vital WorkLife) at 1-800-303-1908. Vital WorkLife staff is available 24/7 by phone or face to face to speak with employees or students who are struggling with personal or work challenges. This program provides employees, students, and their family access to a confidential counseling/assessment and referral service at **NO COST** to students or staff.

- Services include assistance in emotional, physical and marital issues; alcohol and drug related issues; legal, financial or other work/life issues.

REVIEWED: 5/08, 05/09, 05/10, 02/11, 04/12, 05/13, 4/14, 6/15, 5/16, 5/17, 2/18, 5/19, 3/21, 3/22, 1/23
REVISED: 10/14, 6/15

-NOTICE-

The information found in this document is current as of the date of the print. Date - 7/31/2023.

DRUG & ALCOHOL FREE WORKPLACE POLICY

The purpose of this policy is to comply with all local, state and federal laws including the federal Drug-Free Workplace Act as well as Drug Enforcement Agency (DEA) regulations. Sanford Medical Center is committed to maintaining an environment, which is free from the influence of illegal drugs and alcohol to protect the health and safety of patients, employees, and visitors. Annually, each student and school employee will receive this Radiologic Technology Program Drug-Free Workplace Policy, along with a copy of the Sanford Medical Center Drug & Alcohol-Free Workplace Policy. During student orientation, students will review the policies and sign a form to confirm they have reviewed and understand the policies.

Possession or illegal use of controlled substances (drugs) or alcohol while on duty or the inability to report and/or perform job duties due to the illegal use of controlled substances or alcohol is prohibited. The Drug-Free Workplace Act of 1988 requires that a student notify the Program Director of the school of any drug-related conviction occurring in the workplace within 5 days of the conviction. Violations of this rule will result in automatic termination of their training without notice or accumulated benefits.

Students may be referred for drug/alcohol assessment if their performance warrants such action. Refusal to follow through with the assessment and recommended action will subject the student to termination.

Students/employees with a chemical dependency problem are encouraged to seek rehabilitation. Students/employees may confidentially seek assistance by contacting the Employee Assistance Program at 1-800-383-1908 or by visiting www.midwesteap.com. The hospital/school will grant a medical leave for up to 30 calendar days to students seeking assistance. The student's position will not be in jeopardy as long as the actions previously stated have not been violated. If such a program is accepted by the student, the student must satisfactorily participate in the program as a condition of continued program attendance.

The student is responsible for any didactic or clinical material missed during their day(s) off. Absences in excess of 10 days per year must be made up. The Program Director or Administrative Coordinator will determine the make-up days. Students will not be scheduled or allowed to make up time on holidays that are observed by Sanford Medical Center. The student's graduation will be delayed if the make-up days are not completed by the graduation date.

Students will be eligible for (1) one leave of absence for dependency treatment. Future violations of actions which were stated previously or work performance problems associated with drug or alcohol use will result in termination from the program.

REVIEWED: 05/08, 05/09, 05/10, 02/11, 04/12, 05/13, 4/14, 10/14/, 6/15, 5/16, 5/17, 2/18, 5/19, 4/20, 3/21, 3/22, 1/23
REVISED: 09/08, 10/14, 9/15

-NOTICE-

The information found in this document is current as of the date of the print. Date - 7/31/2023.

STUDENT CONDUCT POLICY

Sanford Radiology Students must live up to the high ideals of their profession. Their lives must be guided by the principles of honesty and integrity, in order to ensure that the public can regard their words and actions as unquestionably trustworthy. Students are held responsible for exhibiting the following professional attributes: honesty, integrity, accountability, confidentiality, and professional demeanor. Academic dishonesty and professional misconduct are considered unacceptable in health care professions. If there is doubt about whether or not academic or professional conduct is appropriate, ask the Program Director / Clinical Coordinator.

All students enrolled in the School of Radiologic Technology at Sanford Medical Center must complete all required courses (academic and clinical) with a grade of 80 percent or above.

Academic Conduct:

1. Cheating includes, but is not limited to the following:
 - a. The receipt, possession or use of any material or assistance not authorized by the Instructor.
 - b. Copying answers from another student during a test or quiz.
 - c. Arranging to have others take tests or complete assignments (i.e. papers, reports, laboratory data) for oneself, collaborating with another student on individual assignments or completing academic work for another student.
 - d. Stealing, or otherwise improperly obtaining, copies of a test or assignment before or after its administration, and/or passing it onto other students.
 - e. Misrepresenting your attendance or the attendance of others in a course, meeting or practical experience where credit is given and/or a mandatory attendance policy is in effect.
 - f. Plagiarism: Submitting work that is, in part or in whole, not entirely the student's own, without documenting such portions to the correct sources.
 - g. Aiding or abetting dishonesty: Knowingly giving assistance not authorized by the instructor to another in the preparation of papers, reports, presentations, examinations or laboratory data.
 - h. Utilization of a false/misleading illness to gain extension and/or exemption on assignments and tests.
 - i. Knowingly submitting a paper, report, presentation, test, or any class assignment that has been altered or corrected, in part or in whole, for reevaluation or re-grading, without the instructor's permission.

Professional Conduct:

- a. Falsifying an illness.
- b. Untruthful/lying to a school faculty member.
- c. Violation of conduct described in course policies or articulated by the instructor in writing.
- d. Contributing to, or engaging in any activity which disrupts or obstructs the teaching of any course material.
- e. Entering the classroom habitually late or leaving early, arriving late to a professional activity, without prior permission from the instructor.
- f. Approaching faculty, staff or students in less than a professional manner and treating faculty, staff, peers and patients in a disrespectful and inconsiderate way.
- g. Unprofessional dress (as outlined in the school Policy and Procedure Manual) during classes, clinical experiences, or when representing the hospital or radiology program.

-NOTICE-

The information found in this document is current as of the date of the print. Date - 7/31/2023.

- h. Bringing family members, guests, and pets to the classroom or any professional academic activities without prior consent of the instructor.
- i. Falsifying applications, forms, documents, reports or records of any kind or providing false information to Sanford Medical Center or School of Radiologic Technology prior to admission to the radiology program, or while a student in the radiology program.
- j. Unauthorized accessing or revealing of confidential information about faculty, staff, or students of the radiology program.
- k. Failure to provide quality patient care.
- l. Theft, damaging, defacing or unauthorized use of any property of the hospital or radiology program.
- m. Computer usage that violates hospital or radiology program policies to include, but not be limited to inappropriate use of Facebook, internet, etc.
- n. Sexual harassment as defined by Sanford Medical Center.
- o. Harassment, Threats of Violence as defined by Sanford Medical Center.
- p. Intoxication, abuse, possession, use and/or illegal sale of alcohol, drugs, chemicals, firearms, explosives or weapons within the hospital campus, in any practice/learning setting, or when representing Sanford Medical Center or School of Radiologic Technology.
- q. Any violation and/or conviction of any federal, state or municipal law as well as hospital and radiology program rules/policies.
- r. DUI & DWI (driving under the influence or driving while intoxicated) is considered by the hospital and radiology program as improper behavior and any individual violating this law may be required to undergo an alcohol/drug evaluation.
- s. Sleeping during scheduled/working didactic or clinical education.
- t. Unauthorized copying or distribution of power points, review materials, or tests.
- u. Unauthorized use of cell phones in the clinical and didactic areas.
- v. Violation of Sanford Health's HIPPA regulations.
- w. Employee/student devices cannot have protected health information in a text message and photos cannot be taken with personal devices.
 - Students are prohibited from taking pictures of patients or patient information (including radiographic images, even if patient information is removed/covered on the image). Students may not send messages or images of patients (including radiographic images) through social media apps; for example, Facebook, Facebook Messenger, Instagram, Snapchat, TikTok, etc.
 - Students are expected to avoid computer usage that violates hospital or radiology program policies to include, but not be limited to inappropriate use of Facebook, other social media apps, internet, etc.

Disciplinary Procedure:

While enrolled in the school of radiology, all students must conduct themselves professionally. Students must abide by the American Registry of Radiologic Technologists' Code of Ethics (listed in the school Policy & Procedure Manual). Students must also comply with the policies and procedures of Sanford Medical Center, the Radiology Department, and the radiography program. Any student who does not comply with policies and standards is subject to disciplinary action. The Program Director and Clinical Coordinator will determine the type and severity of disciplinary action – using verbal warning, written warning, probation, or dismissal if necessary. The Program Director, Clinical Coordinator, and Radiology Manager will be responsible for all decisions regarding student dismissal (termination).

*** If the student is enrolled in a university with whom the Sanford Program has an articulation agreement, the university advisor will be notified of the non-compliance incident and disciplinary action.**

-NOTICE-

The information found in this document is current as of the date of the print. Date - 7/31/2023.

The discipline procedure will follow the sequence listed below:

- 1) Step 1: Upon notification of substandard or inappropriate behavior to the Program Director, a meeting will be scheduled with the student to discuss the matter. The purpose of the meeting is to **verbally** inform the student of substandard or inadequate behavior. This discussion will be documented and placed in the student's file.
- 2) Step 2: If the specified substandard or inappropriate behavior continues, a second meeting will be scheduled. At this time, the Program Director will provide to the student a document listing the instances of substandard or inappropriate behavior and methods of improvement. A copy of this document will be provided for the student with the original being placed in the student's file. This will be documented as the **1st written** warning.
- 3) Step 3: If the specified substandard or inappropriate behavior continues, the student will receive a **final written** warning. The student may be suspended or placed on probation. If a student is suspended, he/she is responsible for making up the time missed during suspension.
- 4) Step 4: If the substandard or inappropriate behavior continues, the student will be dismissed from Sanford Medical Center School of Radiologic Technology will not be allowed admission back into the program.

REVIEWED: 05/08, 09/08, 05/09, 05/10, 02/11, 04/12, 05/13, 4/14, 6/15, 5/16, 5/17, 2/18, 4/20, 4/21, 3/22,
REVISED: 09/08, 02/11, 04/12, 4/14, 8/15, 9/19, 1/23

COPYRIGHT INFRINGEMENT POLICIES AND SANCTIONS

Unauthorized distribution of copyrighted material, including authorized peer-to-peer sharing, may subject students to civil and criminal liabilities.

Summary of the Civil and Criminal Penalties for Violation of Federal Copyright Laws:

Copyright infringement is the act of exercising, without permission or legal authority, one or more of the exclusive rights granted to the copyright owner under section 106 of the Copyright Act (Title 17 of the United States Code). These rights include the right to reproduce or distribute a copyrighted work. In the file-sharing context, downloading substantial parts of a copyrighted work without authority constitutes an infringement.

Penalties for copyright infringement include civil and criminal penalties. Anyone found liable for civil copyright infringement may be ordered to pay either actual damages or “statutory” damages affixed at not less than \$750 and not more than \$30,000 per work infringed. For “willful” infringement, a court may award up to \$150,000 per work infringed. A court can, in its discretion, also assess costs and attorneys’ fees. For details, see Title 17, United States Code, Sections 504 and 505.

Willful copyright infringement can also result in criminal penalties, including imprisonment of up to five years and fines of up to \$250,000 per offense. For more information, please see the website of the U.S. Copyright Office at www.copyright.gov.

NEW: 10/14
REVIEWED: 6/15 , 5/16, 5/17, 2/18, 5/19, 4/20, 3/21, 3/22, 1/23
REVISED:

-NOTICE-

The information found in this document is current as of the date of the print. Date - 7/31/2023.

MEALS / BREAKS

Meals may be purchased through the hospital cafeterias. Lunch periods will be assigned by the appropriate department supervisor. Each student will be given a lunch break during each assigned clinical rotation.

REVIEWED: 5/08, 05/09, 05/10, 02/11, 04/12, 05/13, 4/14, 6/15, 5/16, 5/17, 2/18, 5/19, 4/20, 3/21, 3/22, 1/23
--

REVISED: 02/11

LIBRARY

The radiology students are permitted to utilize the Wegner Center Library, which is located on the Sanford USD Medical Center campus. (605) 357-1400

REVIEWED: 5/08, 05/09, 05/10, 02/11, 04/12, 05/13, 4/14, 6/15, 5/16, 5/17, 2/18, 5/19, 4/20, 3/21, 3/22, 1/23
--

REVISED: 02/11, 04/12, 2/18

PERSONAL COUNSELING

Situations which arise, that are out of the ordinary may be discussed with school faculty at any time. The student is encouraged to present all areas of concern, personal or organizational, to the Program Director, Clinical Coordinator, or Clinical Instructor. Appropriate action may be taken, if so desired by the student, to correct the specific area of concern.

REVIEWED: 5/08, 05/09, 05/10, 02/11, 04/12, 05/13, 4/14, 6/15, 5/16, 5/17, 2/18, 4/20, 3/21, 3/22, 1/23
--

REVISED: 02/11, .04/12, 5/19

PERSONAL COUNSELING: REFERRAL RESOURCES – EMPLOYEE ASSISTANCE PROGRAM

Referral resources are available to employees and students through the Employee Assistance Program (Vital WorkLife) at 1-800-303-1908. Vital WorkLife staff is available 24/7 by phone or face to face to speak with employees or students who are struggling with personal or work challenges. This program provides employees, students and their families, access to a confidential counseling/assessment and referral service at **NO COST** to students or staff. Services include assistance in emotional, physical and marital issues; alcohol and drug related issues; legal, financial or other work/life issues.

NEW: 06/15, 5/16, 5/17, 2/18, 5/19, 4/20, 3/21, 3/22, 1/23

REVIEWED:

PROFESSIONAL ORGANIZATIONS

It is the goal of Sanford Medical Center School of Radiologic Technology to instill in students the desire to continue their education and learning through participation in continuing education, meetings, seminars and professional societies.

Students are required to belong to the South Dakota Society of Radiologic Technologists, and American Society of Radiologic Technologists (ASRT). The membership fees for these professional organizations are included in the student activity fee.

Students in their second year of the program are expected to attend the annual meeting of the South Dakota Society student activities, unless they have an excused absence which was approved by the Program Director or

-NOTICE-

The information found in this document is current as of the date of the print. Date - 7/31/2023.

Administrative Coordinator. Failure of the student to attend a scheduled session during the meeting will result in disciplinary action.

REVIEWED: 5/08, 05/09, 05/10, 02/11, 04/12, 05/13, 4/14, 5/16, 5/17, 2/18, 5/19, 4/20, 3/21,
REVISED: 02/11, .04/12, 3/22, 1/23

PERSONAL DAYS

Timely and regular attendance is a fundamental performance expectation of all students. Students have the personal responsibility to ensure they are in class and clinical assignments, unless the student is ill or has received prior approval for a Personal Day. Class and clinical times are vital to a student's education. Students are responsible for notifying the Program Director or Clinical Coordinator in advance or before the start of the scheduled assignment.

Students are allowed 10 personal days / year. These days may be used for an illness or may be requested ahead of time for personal reasons. If a student is not meeting attendance and tardiness expectations, progressive corrective action may be initiated.

A Personal Day may be used for vacation, illness, leave of absence, or any other type of excused absence. Personal Days do not include hospital observed holidays or the week of Christmas Break.

When requesting Personal Days, the following policies must be followed (except for illness and emergency situations):

- 1) Days must be scheduled in advance, preferably at least one week, with the Program Director or Clinical Coordinator.
- 2) Personal Days are approved at the discretion of the Program Director or Clinical Coordinator.
- 3) Any student requesting a Personal Day must: Complete the Personal Time Request form and turn it into the Program Director or Clinical Coordinator for approval, along with the Master Student Schedule to have the Personal Day logged in.
- 4) Personal Days may not be taken during off-hour clinical assignments.
- 5) The student is responsible for any didactic or clinical material missed during their day(s) off.
- 6) Any test(s) scheduled on a student's Personal Day off must be taken prior to that day off, unless approved in advance by the instructor.
- 7) Personal Days can not be saved up from year to year, or used to shorten the length of the program.
- 8) All Personal Days must be used two weeks prior to graduation.
- 9) Absences in excess of **10** days per year **MUST** be made up. The Program Director or Clinical Coordinator will determine the make-up days (Friday / Saturday / Sunday). Students will not be scheduled or allowed to make up time on holidays that are observed by Sanford Medical Center.
- 10) In the event that a student is scheduled to make up a day/s, and the does not show up for clinical assignment, the scheduled day will be counted as an additional unexcused absence and the student will be assigned two days to make up clinical time.
- 11) The student's graduation will be delayed if the make up days are not completed by the graduation date.

REVIEWED: 5/08, 05/09, 05/10, 02/11, 04/12, 05/13, 01/14, 4/14, 6/15, 5/16, 5/17, 3/18, 4/20, 3/21
REVISED: 02/11, 05/13, 01/14, 4/14, 5/19, 3/22, 1/23

-NOTICE-

The information found in this document is current as of the date of the print. Date - 7/31/2023.

MILITARY LEAVE OF ABSENCE POLICY

If a student is subject to short term military duty with the Reserves or National Guard (annual 2 weeks), the student will be granted a Leave of Absence without using personal days.

If a student is subject to long term military duty with the United States Armed Forces, the student's status in the program will be handled on an individual basis. The Program Director and school faculty will consider the length of time the student has spent in the program, along with the length of the Leave of Absence to determine the re-entry level of the student into the program based on:

- Didactic level of the student
- Clinical level of the student
- Program Total Capacity which is granted by Joint Review Committee on Education in Radiologic Technology (JRCERT)

All Graduation Requirements (per school policy) must be met to complete the program.

NEW: 10/14
REVIEWED: 6/15, 5/16, 5/17, 2/18, 5/19, 4/20, 3/21, 3/22 , 1/23
REVISED:

HOLIDAYS / CHRISTMAS BREAK

The program will follow the hospital observed holidays, which are listed below. No didactic classes or clinical assignments will be scheduled on these days. Students will not be allowed to make up time on any hospital observed holiday.

1. New Year's Day
2. Memorial Day
3. Fourth of July
4. Labor Day
5. Thanksgiving
6. Christmas

In addition, no didactic or clinical assignments will be scheduled during the week of Christmas. All students will have the week off for Christmas Break.

REVIEWED: 05/08, 05/09, 05/10, 02/11, 04/12, 05/13, 4/14, 6/15, 5/16, 5/17, 2/18, 5/19, 4/20, 3/21, 3/22, 1/23
REVISED: 09/08, 11/08, 02/11, 05/13, 4/14, 10/22, 6/23

-NOTICE-

The information found in this document is current as of the date of the print. Date - 7/31/2023.

STUDENT GRIEVANCES / COMPLAINTS

GRIEVANCES

A grievance is defined as a claim by a student that there has been a violation, misinterpretation, or inequitable application of any existing policy, procedure, or regulation. The steps for the Grievance Process are listed below:

1. Students wishing to file a grievance will complete the Student Grievance Form (found on the school website or school area) and submit the form to the Program Director within two weeks of the grievance. The Program Director will meet with the student to hear the grievance and gather specific information.
2. The Program Director will review the grievance and provide a response to the student within two weeks of receiving the grievance.
3. If a grievance is not resolved by the Program Director, the student will have two weeks to make an appeal and submit all information relative to the grievance to the Director of Radiology.
4. The Director of Radiology will meet with all involved parties to hear the grievance and receive additional information.
5. A decision will be made in two weeks and presented to the student.
6. If the student is not satisfied with the Director of Radiology's decision, the student will have two weeks to make a final appeal to the Vice President of Human Resources or a designee of the Human Resource Department. An appropriate investigation and decision will be rendered within two weeks and their decision will be final.

Records of all formal grievances and their resolution will be kept in the Program Director's office for a period of 5 years. Formal grievances will be reviewed annually to look for trends that could negatively impact the quality of the educational program.

If the student is unable to resolve the grievance with institution/program officials or believes that the concerns have not been properly addressed, he/she may submit allegations of non-compliance to the JRCERT.

The JRCERT website link to the complaint process is:

<https://www.jrcert.org/students/process-for-reporting-allegations/report-an-allegation/>

COMPLAINTS

If a student has a complaint relating to other issues that could negatively impact the program's ability to meet its mission (e.g., classroom cleanliness), the student may file a complaint by following the same process as when filing a grievance.

Records of all complaints and their resolution will be kept in the Program Director's office for a period of 5 years. Complaints will be reviewed annually to look for trends that could negatively impact the quality of the educational program.

REVIEWED: 05/08, 05/09, 05/10, 02/11, 04/12, 05/13, 4/14, 6/15, 5/16, 5/17, 2/18, 5/19, 4/20, 3/22, 1/23
REVISED: 05/08, 09/08, 02/11, 05/13, 4/14

-NOTICE-

The information found in this document is current as of the date of the print. Date - 7/31/2023.

STUDENT GRIEVANCES / COMPLAINTS TO THE STATE

GRIEVANCES

A grievance is defined as a claim by a student that there has been a violation, misinterpretation, or inequitable application of any existing policy, procedure, or regulation. The steps for the Grievance Process are listed below:

1. Students wishing to file a grievance will complete the Student Grievance Form and submit the form to the Program Director within two weeks of the grievance. The Program Director will meet with the student to hear the grievance and gather specific information.
2. The Program Director will review the grievance and provide a response to the student within two weeks of receiving the grievance.
3. If a grievance is not resolved by the Program Director, the student will have two weeks to make an appeal and submit all information relative to the grievance to the Director of Radiology.
4. The Director of Radiology will meet with all involved parties to hear the grievance and receive additional information.
5. A decision will be made in two weeks and presented to the student.
6. If the student is not satisfied with the Director of Radiology's decision, the student will have two weeks to make a final appeal to the Vice President of Human Resources or a designee of the Human Resource Department. An appropriate investigation and decision will be rendered within two weeks and their decision will be final.

Records of all formal grievances and their resolution will be kept in the Program Director's office for a period of 5 years. Formal grievances will be reviewed annually to look for trends that could negatively impact the quality of the educational program.

If the student is unable to resolve the grievance with institution/program officials or believes that the concerns have not been properly addressed, he/she may submit allegations of non-compliance to the SD Office of the Attorney General. This is in accordance with State Statute #13-48-40.

*SD Office of the Attorney General
Division of Consumer Protection
1302 E. Highway 14, Suite 3
Pierre, SD 57501
605-773-4400*

REVIEWED: 3/21, 3/22, 1/23

NEW: 02/20

STUDENT REPRESENTATIVE

A student representative will be appointed to attend various meetings, to provide constructive input.

REVIEWED: 05/08, 05/09, 05/10, 02/11, 04/12, 05/13, 4/14, 6/15, 5/16, 5/17, 2/18, 5/19, 4/20, 3/21, 3/22, 1/23

REVISED: 09/08, 02/11

-NOTICE-

The information found in this document is current as of the date of the print. Date - 7/31/2023.

PRIVACY OF STUDENT RECORDS / FAMILY EDUCATION RIGHTS AND PRIVACY ACT (FERPA)

The Family Educational Rights and Privacy Act (FERPA) affords eligible students certain rights with respect to their educational records. (An "eligible student" under FERPA is a student who is 18 years of age or older or who attends a postsecondary institution.)

Student rights include:

- 1) The right to inspect and review the student's education records within 45 days after the day the Sanford Medical Center Radiologic Technology Program receives a request for access. A student should submit to the Program Director, a written request that identifies the record(s) the student wishes to inspect. The school official will make arrangements for access and notify the student of the time and place where the records may be inspected.
- 2) The right to request the amendment of his/her education records that the student believes is inaccurate, misleading, or otherwise in violation of the student's privacy rights under FERPA.

A student who wishes to ask the school to amend a record should write the school official responsible for the record, clearly identify the part of the record the student wants changed, and specify why it should be changed.

If the school decides not to amend the record as requested, the school will notify the student in writing of the decision and the student's right to a hearing regarding the request for amendment. Additional information regarding the hearing procedures will be provided to the student when notified of the right to a hearing.

- 3) The right to provide written consent before the Radiologic Technology Program discloses personally identifiable information (PII) from the student's education records, except to the extent that FERPA authorizes disclosure without consent.

The school discloses education records without a student's prior written consent under the FERPA exception for disclosure to school officials with legitimate educational interests. A school official is a person employed by the Sanford Medical Center Radiologic Technology Program in an administrative, supervisory, academic, or support staff position (including law enforcement unit personnel and health staff); a person serving on the board of trustees; or a student serving on an official committee, such as a disciplinary or grievance committee. A school official has a legitimate educational interest if the official needs to review an education record in order to fulfill his or her professional responsibilities for the Sanford Medical Center Radiologic Technology Program.

- 4) The right to file a complaint with the U.S. Department of Education concerning alleged failures by the Sanford Medical Center School of Radiologic Technology to comply with the requirements of FERPA. The name and address of the Office that administers FERPA is:

Family Policy Compliance Office
U.S. Department of Education
400 Maryland Avenue, SW
Washington, DC 20202

For additional information, students can visit FERPA for Students at ED.Gov or <http://www.ed.gov/policy/gen/guid/fpco/ferpa/index.html>

-NOTICE-

The information found in this document is current as of the date of the print. Date - 7/31/2023.

To review or download the **complete document** from the Department of Education, CFR Part 99, Family Education Rights and Privacy; Final Rule from the National Archives and Records Administration of the Federal Register go to : <http://www.ed.gov/legislation/Fed/Register/finrule/2008-4/120908a.pdf>
Sanford Medical Center School of Radiologic Technology will provide a paper copy of this document upon request.

Sanford Medical Center School of Radiologic Technology Student Records will be maintained in accordance with the FERPA. The following records will be maintained in a secure and confidential location.

- 1) Radiation monitoring report
- 2) Didactic and Clinical Transcript
- 3) Attendance Record
- 4) Application for Admission

REVIEWED: 05/08, 05/09, 05/10, 02/11, 04/12, 05/13, 5/14, 10/14, 6/15, 5/16, 5/17, 2/18, 5/19, 4/20, 4/21, 3/22, 1/23
--

REVISED: 02/11, 04/12, 10/14

RADIATION SAFETY / RADIATION MONITORING / RADIATION PROTECTION

Radiation Safety:

The program assures that students are instructed in the utilization of imaging equipment, accessories, optimal exposure factors, and proper patient positioning to minimize radiation exposure to patients, selves, and others. Students **MUST NOT** hold image receptors during any radiographic procedure. Students **SHOULD NOT** hold patients during any radiographic procedure when an immobilization method is the appropriate standard of care. These practices assure radiation exposures are kept as low as reasonably achievable (ALARA).

Students will be educated on basic radiation safety practices for patients, selves, and others regarding dose limits, prior to clinical assignments. Radiation protection and dose limits for patients, selves, and others are discussed in the Introduction to Radiology and Radiation Protection courses.

During all clinical assignments, students will be directly or indirectly supervised by a qualified registered technologist, depending on their level of competency, to assure patient and student safety.

Protective devices, i.e., lead aprons, thyroid shields, gloves, barriers, and radiation monitoring devices are provided to students in the Radiology Department.

As students progress in the program, they will become increasingly proficient in the application of radiation safety practices for patients, selves, and others. Student proficiency in the application of radiation safety for patients, selves, and others is monitored by Clinical Instructors and/or qualified registered technologists on weekly Student Radiographer Clinical Assessment forms and during Clinical Competencies.

Radiation Monitoring:

Radiation monitoring devices and radiation-monitoring services are provided free of charge to all students. Students **MUST** wear their **STUDENT** radiation monitoring device during clinical assignments, simulations and in

-NOTICE-

The information found in this document is current as of the date of the print. Date - 7/31/2023.

laboratory practice. This radiation monitoring device must be worn for educational assignments **ONLY**. The radiation monitoring device is to be worn at the collar and outside the lead apron during fluoroscopic procedures.

Student radiation monitoring devices are not to be taken home. They are to be left in the classroom before leaving. Loss of a radiation monitoring device should be reported to the Program Director as soon as possible.

Radiation monitoring devices will be changed monthly or quarterly, depending on the Radiology Department policy. Within 30 days following receipt of the exposure reports, school faculty will bring the report to class. Exposure reports will be reviewed and the student is required to initial the monthly / quarterly report to acknowledge their monthly exposure level.

A permanent record of the student's radiation monitoring report will be kept in a secure area.

Monthly monitoring period:

Each month, the student must review and initial the radiation dosimetry report to verify his/her monthly exposure. Student exposure will not exceed the yearly exposure limit of 5 rem (50 mSv) per year.

If a student's monthly exposure reaches 175 mRem, the Program Director will meet with the student to determine the cause, and discuss ways to prevent a high exposure level. Documentation will be maintained.

Unusually high monthly readings, 200 mRem and higher, will be reported to the Radiation Safety Officer. An investigation will be conducted to determine the cause, in order to prevent a recurrence. A written report of the investigation results will be presented to the Radiation Safety Committee. The student will be reassigned to a non-fluoroscopic area for a 1 month period. A follow-up will be conducted after reviewing the student's dosimetry report the following month. Documentation of the investigation results and recommendations will be maintained.

Quarterly (3 month monitoring period)

Every 3 months, the student must review and initial the radiation dosimetry report to verify his/her quarterly exposure. Student exposure will not exceed the yearly exposure limit of 5 rem (50 mSv) per year.

If a student's quarterly exposure reaches 575 mRem, the Program Director will meet with the student to determine the cause, and discuss ways to prevent a high exposure level. Documentation will be maintained.

Unusually high quarterly readings, 600 mRem and higher, will be reported to the Radiation Safety Officer. An investigation will be conducted to determine the cause, in order to prevent a recurrence. A written report of the investigation results will be presented to the Radiation Safety Committee. The student will be reassigned to a non-fluoroscopic area for a 3 month period. A follow-up will be conducted after reviewing the student's next dosimetry report. Documentation of the investigation results and recommendations will be maintained.

Radiation Protection:

Students hold the responsibility for protecting patients from unnecessary radiation during imaging procedures. Student responsibility includes the following:

- Radiographic images performed on all patients should be collimated to the area of specific interest.
- Students are responsible for following the Radiology Department policy regarding shielding for imaging

-NOTICE-

The information found in this document is current as of the date of the print. Date - 7/31/2023.

- exams.
- The student and technologist have the responsibility of asking the patient about the possibility of pregnancy and last menstrual period. This information must be documented on the patient's Electronic Medical Chart.
- The student and technologist should refer any pregnant patient's history to the Radiologist /ordering physician before taking any images of the patient.

For each student, proper radiation protection of patients will be monitored on the weekly Student Radiographer Clinical Assessments.

REVIEWED: 05/08, 05/09, 05/10, 02/11, 03/12, 05/13, 06/13, 07/13, 4/14, 6/15, 5/16, 5/17, 2/18, 5/19, 4/20, 3/22, 1/23
REVISED: 02/11, 03/12, 06/13, 07/13, 5/16, 3/21, 6/23

PREGNANCY POLICY

It is the policy of the school and radiology department to provide for the least possible radiation exposure to the student and embryo/fetus.

Since the embryo/fetus of the pregnant student may become exposed to radiation during the performance of radiographic and fluoroscopic examinations, the guidelines of the National Council on Radiation Protection & Measurements (NCRP) and the Nuclear Regulatory Commission (NRC) will be adhered to in regard to the exposure doses allowed to pregnant female students.

No student will be considered pregnant until she **voluntarily declares** her pregnancy in **writing** to the Program Director.

In the event of a declared pregnancy, the following courses of action shall be implemented:

- 1) The student will review past exposure reports with school faculty to determine her dose since conception.
- 2) The student will receive a copy of the NRC Regulation 8.13 and will be asked to sign a letter stating she has received a copy and understands the material.
- 3) She will be given the option to continue in the program with no change in her clinical rotations, or withdraw and be enrolled in the next year's class, providing a position is available.
- 4) The student will be provided a second radiation monitoring device (free of charge) to be worn at waist level to monitor any exposure to the fetus.
- 5) The established limits for fetal exposure are 0.5 mSv (50 mrem) in a one-month period, or 5 mSv (500 mrem) total exposure for the gestation period. If the student's level of exposure approaches the established limit, the student may be reassigned to a clinical area where exposure is minimal.
- 6) Continue to meet all didactic and clinical objectives.
- 7) At any time, the student may **voluntarily revoke** her declaration of pregnancy (**in writing**), even if she remains pregnant.

Students may request a maternal leave of absence. The leave of absence may start at the time the student's physician recommends no further activity due to complications. The student may continue in the program as long as she is capable of performing her responsibilities. The Program Director may request the student to begin her leave of absence if her performance is affected.

Following termination of pregnancy, the student may not return to the program without written physician consent and approval from the Employee Health Service at Sanford Medical Center. If a student is

-NOTICE-

The information found in this document is current as of the date of the print. Date - 7/31/2023.

absent more than three consecutive months due to her pregnancy, the student will have the option to withdraw from the radiography program or be enrolled in the next year's class, providing a position is available.

Although it is the policy and practice of the program to offer the utmost in radiation protection, the school, radiology department and Sanford Medical Center will not be responsible for injury to the mother or fetus from radiation exposure during pregnancy.

REVIEWED: 05/08, 05/09, 05/10, 02/11, 04/12, 05/13, 06/13, 4/14, 6/15, 5/16, 5/17, 2/18, 5/19, 4/20, 3/21, 3/22, 1/23
REVISED: 09/08, 02/11, 04/12, 06/13

MRI SAFETY

The establishment of a thorough and effective screening procedure, in addition to education is important to insure that students are prepared for magnetic resonance safe practices. An important aspect of magnetic resonance safety is making sure that students understand:

- The risks associated with various implants, devices, and equipment
- The four MRI zones

During the 1st year in the Radiologic Technology Program, students **are not** assigned to any clinical rotations in MRI. However, because students may have potential access to the magnetic resonance environment, the program assures that students are educated on magnetic resonance safe practices for patients, selves, and others during student orientation.

During orientation, the student will:

- Receive a copy of the MRI Safety Policy (MRI – 110)
 - o The policy is reviewed and discussed
- Be aware of zones I - IV
- Complete Sanford Learn sc-0038 MRI Safety Video
- Complete the MRI screening form

During the 2nd year in the Radiologic Technology Program, each student will be assigned to 2 weeks of MRI rotation. During this rotation, the student will be directly supervised by a qualified registered MRI technologist to assure patient and student safety.

Prior to this rotation, the student will:

- Review the MRI Safety Policy (MRI – 110)
- Be aware of zones I - IV
- Complete Sanford Learn sc-0038 MRI Safety Video
- Be thoroughly screened by the MRI personnel and complete the MRI screening form.

NOTE: If the status of a student changes regarding information on the MRI screening form, the student **MUST** notify the Program Director of the change.

NOTE: The declared pregnant student who may be around the MR environment should not remain within the MR scanner room or Zone IV during actual data acquisition or scanning.

NEW: 05/15, 5/16, 5/17, 2/18, 5/19, 4/20, 3/21, 3/22, 1/23
REVISED: 5/16, 4/20

-NOTICE-

The information found in this document is current as of the date of the print. Date - 7/31/2023.

STUDENT EMPLOYMENT

A student's clinical and didactic schedule will not be changed to accommodate his/her employment.

If employment interferes with the clinical and/or didactic educational process the student will be subject to disciplinary action which could include suspension and/or dismissal from the radiology program.

REVIEWED: 05/08, 05/09, 05/10, 02/11, 04/12, 05/13, 4/14, 6/15, 5/16, 5/17, 2/18, 5/19, 4/20, 3/21, 3/22, 1/23

REVISED: 02/11, 6/15

NON-DISCRIMINATORY POLICY

Sanford Medical Center School of Radiologic Technology is an equal opportunity program. The School of Radiologic Technology does not discriminate against applicants because of age, gender, race, color, religion, national origin, disability, or any other protected class, except bonafide occupational disqualification.

REVIEWED: 05/08, 05/09, 05/10, 02/11, 04/12, 05/13, 4/14, 6/15, 5/16, 5/17, 2/18, 5/19, 4/20, 3/21, 3/22

REVISED: 05/10, 1/23

-NOTICE-

The information found in this document is current as of the date of the print. Date - 7/31/2023.

DIDACTIC EDUCATION

ACADEMIC CALENDAR

The Radiography Program is a 24 month program, which consists of the following:

- First Monday following July 4th – program begins
- Labor Day – no classes or clinical assignments
- Thanksgiving Day – no classes or clinical assignments
- Christmas Day – no classes or clinical assignments
- Christmas Break – no classes or clinical assignments the week of Christmas
- New Year’s Day – no classes or clinical assignments
- Memorial Day – no classes or clinical assignments
- July 4th – no classes or clinical assignments
- Third Friday in June full week – graduation (Upon successful completion of all requirements)

The program is divided into eight quarters; each quarter consists of 13 weeks. Progress reports and grades are given at the end of each quarter.

2023 – 2024 Year Calendar		
Qtr.	Begins	Ends
<i>Qtr. 1</i> 1 st year students	Monday, July 10, 2023	Friday, Sept. 29, 2023
<i>Qtr. 2</i> 1 st year students	Monday, Oct. 2, 2023	Friday, Dec. 29, 2023
<i>Qtr. 3</i> 1 st year students	Monday, Jan. 1, 2024	Friday, Mar. 29, 2024
<i>Qtr. 4</i> 1 st year students	Monday, Apr. 1, 2024	Friday, June 28, 2024
<i>Qtr. 5</i> 2 nd year students	Monday, July 3, 2023	Friday, Sept 29, 2023
<i>Qtr. 6</i> 2 nd year students	Monday, Oct. 2, 2023	Friday, Dec. 29 2023
<i>Qtr. 7</i> 2 nd year students	Monday, Jan. 1, 2024	Friday, Mar. 29, 2024
<i>Qtr. 8</i> 2 nd year students	Monday, April 1, 2024	Friday, June 21, 2024

REVIEWED: 05/08, 05/09, 05/10, 02/11, 04/12, 05/13, 01/14,
REVISED: 09/08, 02/11, 01/14, 6/15, 5/16, 5/17, 2/18, 5/19, 4/20, 3/21, 3/22, 1/23

-NOTICE-

The information found in this document is current as of the date of the print. Date - 7/31/2023.

ACADEMIC CURRICULUM

The following is a list of courses, which are taught at Sanford Medical Center. The content is structured to include those courses of a curriculum recognized and accepted by the JRCERT (ASRT Curriculum). The program requires full-time attendance.

FIRST YEAR COURSES - First Quarter

<i>Course Number</i>	<i>Course</i>	<i>Clock Hours</i>
Rad. Tech. 1111	Introduction to Radiology	25
Rad. Tech. 1112	Patient Care & Education I	36
Rad. Tech. 1113	Medical Terminology I	15
Rad. Tech. 1114	Anatomy & Physiology I	30
Rad. Tech. 1115	Radiation Protection	60
Rad. Tech. 1116	Imaging Procedures I	30
Rad. Tech. 1119	Applied Radiography I	250

FIRST YEAR COURSES - Second Quarter

<i>Course Number</i>	<i>Course</i>	<i>Clock Hours</i>
Rad. Tech. 1212	Patient Care & Education II	36
Rad. Tech. 1213	Medical Terminology II	15
Rad. Tech. 1214	Anatomy & Physiology II	30
Rad. Tech. 1216	Imaging Procedures II	30
Rad. Tech. 1118	Image Evaluation I	12
Rad. Tech. 1117	Image Acquisition I	32
Rad. Tech. 1219	Applied Radiography II	265

FIRST YEAR COURSES - Third Quarter

<i>Course Number</i>	<i>Course</i>	<i>Clock Hours</i>
Rad. Tech. 1314	Anatomy & Physiology III	30
Rad. Tech. 1316	Imaging Procedures III	30
Rad. Tech. 1218	Image Evaluation II	13
Rad. Tech. 1217	Image Acquisition II	32
Rad. Tech. 1319	Applied Radiography III	350

FIRST YEAR COURSES - Fourth Quarter

<i>Course Number</i>	<i>Course</i>	<i>Clock Hours</i>
Rad. Tech. 1414	Anatomy & Physiology IV	40
Rad. Tech. 1416	Imaging Procedures IV	40
Rad. Tech. 1318	Image Evaluation III	25
Rad. Tech. 1419	Applied Radiography IV	350

-NOTICE-

The information found in this document is current as of the date of the print. Date - 7/31/2023.

SECOND YEAR COURSES – Fifth Quarter

<i>Course Number</i>	<i>Course</i>	<i>Clock Hours</i>
Rad. Tech. 2111	Radiation Physics	45
Rad. Tech. 2112	Imaging Equipment & QC	69
Rad. Tech. 2212	CT Imaging	16
Rad. Tech. 2118	Image Evaluation IV	15
Rad. Tech. 2119	Applied Radiography IV	310

SECOND YEAR COURSES – Sixth Quarter

<i>Course Number</i>	<i>Course</i>	<i>Clock Hours</i>
Rad. Tech. 2114	Radiation Biology	30
Rad. Tech. 2218	Image Evaluation V	12
Rad. Tech. 2116	Scientific Research Paper	28
Rad. Tech. 2219	Applied Radiography VI	350

SECOND YEAR COURSES – Seventh Quarter

<i>Course Number</i>	<i>Course</i>	<i>Clock Hours</i>
Rad. Tech. 2318	Image Evaluation VI	15
Rad. Tech. 2115	Radiographic Pathology I	30
Rad. Tech. 2117	Comprehensive Review I	60
Rad. Tech. 2319	Applied Radiography VII	350

SECOND YEAR COURSES – Eighth Quarter

<i>Course Number</i>	<i>Course</i>	<i>Clock Hours</i>
Rad. Tech. 2418	Image Evaluation VII	15
Rad. Tech. 2215	Radiographic Pathology II	30
Rad. Tech. 2217	Comprehensive Review II	50
Rad. Tech. 2419	Applied Radiography VIII	290

REVIEWED: 05/08, 05/09, 05/10, 02/11, 08/11, 04/12, 05/13, 4/14, 10/14, 6/15, 5/16, 10/16, 5/17, 2/18, 5/19, 4/20, 3/21, 3/22, 1/23

REVISED: 05/10, 02/11, 08/11, 10/14, 5/16, 10/16

-NOTICE-

The information found in this document is current as of the date of the print. Date - 7/31/2023.

ACADEMIC CLASS POLICY

Classes will be scheduled in advance by the Program Director and Clinical Coordinator. Under no circumstances, will students be allowed to remain in the clinical setting if they are scheduled to be in class, unless authorized by the instructor.

The number of re-tests per course will be determined by the course instructor involved with that course. Upon notification of his/her test grade, the student must decide if they wish to re-take that test. The instructor will schedule the re-test for that student. The grades of both tests will be averaged together for a final unit test grade. There will be no re-tests given for a quiz or final test.

Assigned worksheets will have a grade value. If the worksheet is not completed and handed in by the designated time, 10 points will be deducted from that grade. Each additional day the student is late turning in the worksheet, an additional 10 points will be deducted.

Upon completion of the course, if a student does not have at least an 80%, he / she will be dismissed from the program.

REVIEWED: 05/08, 05/09, 05/10, 02/11, 04/12, 05/13, 4/14, 6/15, 5/16, 5/17, 2/18, 5/19, 4/20, 3/21, 3/22, 1/23

REVISED: 02/11, 7/23

ACADEMIC GRADING POLICY

Grades are based on the student's work in the didactic (classroom) and clinical setting.

Students must obtain a minimum average of 80% in both clinical and didactic courses. A final grade of less than 80% in a course will result in dismissal from the program.

Grading System

A+	4.0	99 – 100%
A	3.9	96 – 98%
A-	3.7	94 – 95%
B+	3.3	92 – 93%
B	3.0	89 – 91%
B-	2.7	87 – 88%
C+	2.3	85 – 86%
C	2.0	82 – 84%
C-	1.7	80 – 81%
F	0	Below 80%

Chapter tests will count for 50% of the student's grade, quiz grades will make up 10% of the student's total grade, and final tests will count for 40% of the student's grades.

REVIEWED: 05/08, 05/09, 05/10, 02/11, 04/12, 05/13, 4/14, 6/15, 5/16, 5/17, 2/18, 5/19, 4/20, 3/21, 3/22, 1/23

REVISED: 02/11

-NOTICE-

The information found in this document is current as of the date of the print. Date - 7/31/2023.

SAP POLICY

Academic and Financial Aid Satisfactory Academic Progress policies are the same for all students. All students will be evaluated under the requirements below.

- 1) Federal and state regulations require that a recipient of financial aid makes satisfactory academic progress towards a degree, diploma, or certificate to remain eligible for financial aid. These laws also require that the standards used must be based on cumulative measure and must include all periods of a student's enrollment, regardless of whether the student received financial aid. Federal Student Aid includes Federal Pell Grant, Federal Stafford Loan (Subsidized and Unsubsidized), and Federal Plus Loans.
- 2) The academic record of all students will be monitored to ensure compliance with the requirements specified below. Failure to meet the following standards could result in financial aid suspension of eligibility for Federal Student Aid.
- 3) **Qualitative Measure:**
To meet satisfactory academic standards toward a certificate, students must attend full time and must maintain a minimum of 80% in each didactic and/or clinical course. Failure to obtain a minimum of 80% as a final grade at the end of each didactic and clinical course will result in dismissal from the program. The grading system is listed below.

Grading System

- A+ 4.0 99 – 100%
- A 3.9 96 – 98%
- A- 3.7 94 – 95%
- B+ 3.3 92 – 93%
- B 3.0 89 – 91%
- B- 2.7 87 – 88%
- C+ 2.3 85 – 86%
- C 2.0 82 – 84%
- C- 1.7 80 – 81%
- F 0 Below- 80%

- 4) **Quantitative Measure:**
To meet satisfactory academic standards, all students must attend full time and must complete the program within 150% of the program length. The length of the program is 24 months and the student must complete the program within 36 months of the beginning of the program.

Note: If at any point it is determined that a student will not be able to finish the Radiologic Technology Program within the 150% time frame, financial aid eligibility will be suspended immediately. If suspension is the result of unusual circumstances, the student may appeal the decision.
- 5) *Students' Satisfactory Academic Progress* will be reviewed at the end of each quarter (13 weeks). Students will be notified within 2 weeks (in person and a formal notice) if he/she does not make satisfactory academic progress.

-NOTICE-

The information found in this document is current as of the date of the print. Date - 7/31/2023.

- 6) Students who fail to make satisfactory academic progress and are suspended from Academic/Financial Aid eligibility have the right to appeal based on unusual circumstances or extenuating circumstances such as:
- a) The death of a relative of the student
 - b) An injury or illness of the student
 - c) Other special circumstances

7) **Appeal Process:**

NOTE: If a student receives a final grade of less than 80% in a course, he/she will be dismissed from the program, and there is **NO** option for an appeal.

*However, if a student is found to be ineligible for Federal Student Aid because satisfactory academic progress requirements were not met due to unusual circumstances, the student may appeal this decision to the school's Director of Financial Aid by stating – in writing—the reasons why the minimum requirements were not met and why financial aid should not be terminated. The Financial Aid Officer will review the appeal and determine whether suspending financial aid is justified. The student will be advised, in writing within 2 weeks, of the decision.

8) **Probation / Suspension of Financial Aid:**

If disciplinary action is taken, a student may be placed on probation or suspension of Federal Student Aid. Sanford Medical Center School of Radiologic Technology policies will be adhered to in all disciplinary actions.

9) **Regaining Eligibility:**

If a student is deemed ineligible from receiving Federal Student Aid for failure to maintain satisfactory progress and has appealed the decision, he/she must meet all requirements for minimum overall grade by the end of the next quarter before eligibility for aid can be reinstated.

10) **Other Considerations:**

- a) **Withdrawals:** If a student withdraws from the program, Sanford Medical Center School of Radiologic Technology policies will be followed in reference to the measurement of a student's SAP and the *Tuition Refund Policy* and *Return to Title IV Policy* will be implemented.
- b) **Transfer Credits:**
Transfer credits are not accepted or do not take the place of any course in the 24 month program. The School of Radiologic Technology is NOT a degree granting institution; therefore credits from other institutions cannot be accepted to shorten the length of our program. When calculating the cumulative GPA, only the grades from the program courses are included.
- c) **Course Incompletes:**
If a student does not complete a course, he/she will be dismissed from the program. Sanford Medical Center School of Radiologic Technology policies will be followed in reference to the measurement of a student's SAP and the *Tuition Refund Policy* and *Return to Title IV Policy* will be implemented.
- d) **Repeat Courses:**
When a student fails to obtain a minimum of 80% at the end of a course, there is NO option to repeat the course in the program. The student will be dismissed from the program and Sanford

-NOTICE-

The information found in this document is current as of the date of the print. Date - 7/31/2023.

Medical Center School of Radiologic Technology policies will be followed in reference to the measurement of a student's SAP and the *Tuition Refund Policy* and *Return to Title IV Policy* will be implemented.

REVIEWED: 10/14, 6/15, 5/16, 5/17, 2/18, 5/19, 4/20, 3/21, 3/22, 1/23

REVISED: 10/14

-NOTICE-

The information found in this document is current as of the date of the print. Date - 7/31/2023.



CLINICAL EDUCATION

-NOTICE-

The information found in this document is current as of the date of the print. Date - 7/31/2023.

CLINICAL EDUCATION

The clinical education in this program provides an environment for supervised, competency-based clinical education. Students experience a wide variety of procedures, routine and trauma situations, along with advanced modality rotations. In addition, students work with patients with various degrees of illness, different cultures, and ages from elderly to infant. The student will be able to:

1. Evaluate each examination order
2. Demonstrate proper physical facilities readiness
3. Demonstrate proper patient-student technologist relationship
4. Demonstrate correct positioning skills
5. Manipulate equipment effectively
6. Show evidence of radiation protection
7. Evaluate the radiographic image for:
 - a. anatomical parts
 - b. proper alignment
 - c. radiographic technique
 - d. image identification
 - e. evidence of radiation protection

FIRST YEAR CLINICAL ROTATIONS

During the first year, students will rotate through the following areas:

1. Clerical Rotation (1 week)
2. Routine Radiographic Rooms
3. Fluoroscopic Rooms
4. Mobile Radiography
5. Surgery
6. Emergency Department
7. Interventional Radiography
8. Sanford Children's Hospital
9. Sanford Heart Hospital
10. Medical Building 2 / OP Clinic
11. Vandemark Outpatient Clinic
12. Weekday Evening Rotation
13. Weekend Rotation
14. Patient Transport (1 week)
15. Imagenetics Clinic
16. Sanford Clinic 69th & MN*

*(NOTE: All clinical rotation sites are directly connected to the main hospital, except those marked with *)*

SECOND YEAR CLINICAL ROTATIONS

During the second year, students will rotate through the following areas:

1. Routine Radiographic Rooms
2. Fluoroscopic Rooms
3. Mobile Radiography
4. Surgery
5. Emergency Department
6. Interventional Radiography
7. Sanford Children's Hospital
8. Sanford Heart Hospital
9. Medical Building 2 / OP Clinic
10. Vandemark Outpatient Clinic
11. Sanford Clinic Medicine 49th & Oxbow*
12. Weekday Evening Rotation
13. Weekend Rotation
14. Computerized Tomography
15. Magnetic Resonance Imaging
16. Ultrasound – *Elective*
17. Mammography – *Elective*
18. Nuclear Medicine – *Elective*
19. Radiation Therapy – *Elective*
20. Interventional PA - *Elective*

For the safety of students and patients, not more than 10 clinical hours shall be scheduled in any one day. Scheduled didactic and clinical hours combined cannot exceed 40 hours per week. Hours exceeding these limitations must be voluntary on the student's part.

REVIEWED: 05/08, 05/09, 05/10, 02/11/, 04/12, 05/13, 4/14, 6/15, 5/16, 5/17, 2/18, 5/19, 3/21 , 3/22, 1/23

REVISED: 05/10, 12/10, 02/11, 04/12, 05/13, 4/14, 11/18, 4/20
--

-NOTICE-

The information found in this document is current as of the date of the print. Date - 7/31/2023.

MAMMOGRAPHY POLICY

The radiography program sponsored by Sanford Medical Center has revised its policy, effective 05/2019 regarding the placement of students in clinical mammography rotations to observe breast imaging. Under this policy, all students, male and female will be offered the opportunity to participate in clinical mammography rotations at the Edith Sanford Breast Health Institute. The program will make every effort to place a male student in a clinical mammography rotation if requested; however, the observation is subject to permission from each individual mammography patient.

This program's policy regarding the placement of students in clinical mammography rotations is consistent with a position statement on student clinical mammography rotations adopted by the Board of Directors of the Joint Review Committee on Education in Radiologic Technology (JRCERT) at its April 2016 and October 21 meetings. The JRCERT position statement is included as Addendum B to this policy and is also available on the JRCERT Web site, www.jrcert.org, Programs & Faculty, Program Resources.

NEW: 08/2015
REVIEWED: 06/17, 05/19, 4/20, 4/21, 3/22, 1/23
REVISED: 05/19, 7/23

CLINICAL EDUCATION REQUIREMENTS

1. Prompt attendance in all clinical assignments must be maintained.
2. Clinical assignments are as follows:
 - 7:00 A.M. – 3:00 P.M. (Monday – Friday)
 - 11:00A.M – 7:00 P.M. (Monday – Thursday)
 - 1:00 P.M. – 9:00 P.M. (Monday – Friday)
 - 3:00 P.M. – 11:00 P.M. (weekend rotation)
 - 12:00 A.M. – 6:00 A.M. (weekend rotation)
3. Students will have sufficient access to clinical education settings that provide a wide range of procedures for competency achievement, including mobile, surgical, and trauma examinations. Clinical education settings will include the Sanford Medical Center, Vandemark Outpatient Clinic, Medical Building 2 Outpatient Clinic, Sanford Children's Hospital, Sanford Heart Hospital, Imagenetics Clinic, and Sanford Medical Clinic 49th & Oxbow, Sanford Clinic 69th & Minnesota. All clinical rotation sites are directly connected to the main hospital, except for Sanford Medical Clinic 49th & Oxbow and 69th & Minnesota Clinic. These two clinics are approximately 2 miles away from the Sanford campus.
4. With the exception of observation site assignments, students will be provided the opportunity to complete required program competencies during clinical assignments. Clinical placement will be non-discriminatory in nature and solely determined by the program.

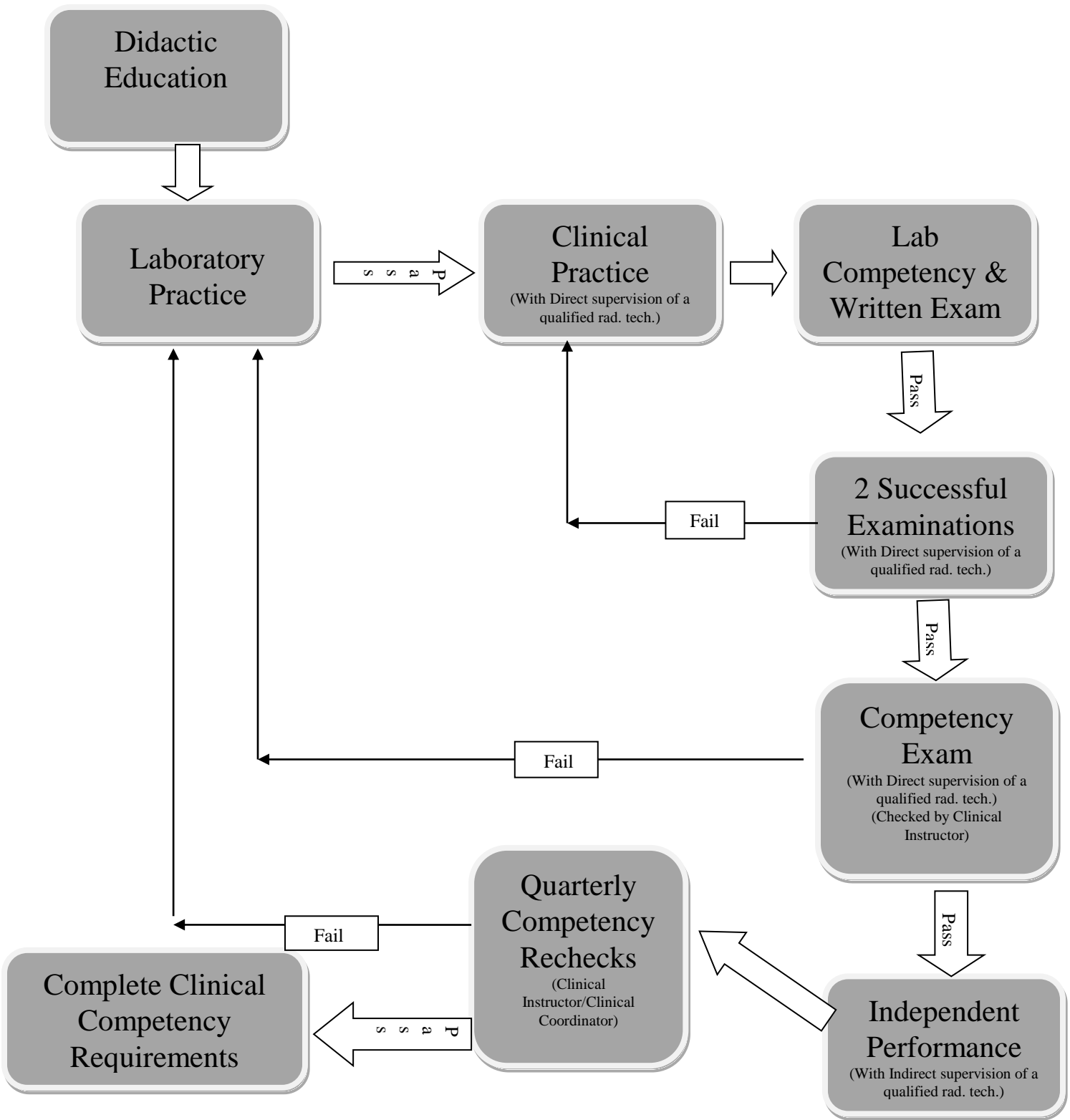
REVIEWED: 05/08, 05/09, 05/10, 02/11, 04/12, 05/13, 4/14, 6/15, 5/16, 5/17, 2/18, 5/19, 3/21, 3/22, 1/23
REVISED: 05/10, 02/11, 04/12, 11/18, 4/20

Clinical education includes cognitive, psychomotor, and affective learning. Cognitive includes the didactic education in the classroom. (Didactic section of the Clinical Education Flow Chart). Psychomotor refers to the student using material learned in the classroom setting and utilizing the information to work with patients and equipment (Lab practice, clinical practice section of the Clinical Education Flow Chart). The affective aspect of learning involves the student's attitude and ability to relate to patients and situations (Exam performance).

-NOTICE-

The information found in this document is current as of the date of the print. Date - 7/31/2023.

Clinical Education Flow Chart



REVIEWED: 05/08, 05/09, 05/10, 02/11, 04/12, 05/13, 4/14, 6/15, 5/16, 5/17, 2/18, 5/19, 4/20, 3/21, 3/22, /123
REVISED: 6/18

-NOTICE-

The information found in this document is current as of the date of the print. Date - 7/31/2023.

CLINICAL GRADING POLICY

Grading System

A+	4.0	99 – 100%
A	3.9	96 – 98%
A-	3.7	94 – 95%
B+	3.3	92 – 93%
B	3.0	89 – 91%
B-	2.7	87 – 88%
C+	2.3	85 - 86%
C	2.0	82 – 84%
C-	1.7	80 – 81%
F	0	Below 80%

<i>FIRST YEAR</i>	<i>Course Number</i>	<i>Course Name</i>	<i>Clock Hours</i>
First Quarter:	Rad. Tech. 1119	Applied Radiography I	250
Second Quarter:	Rad. Tech. 1219	Applied Radiography II	265
Third Quarter:	Rad. Tech. 1319	Applied Radiography III	350
Fourth Quarter:	Rad. Tech. 1419	Applied Radiography IV	350

<i>SECOND YEAR</i>	<i>Course Number</i>	<i>Course Name</i>	<i>Clock Hours</i>
Fifth Quarter:	Rad. Tech. 2119	Applied Radiography V	310
Sixth Quarter:	Rad. Tech. 2219	Applied Radiography VI	350
Seventh Quarter:	Rad. Tech. 2319	Applied Radiography VII	350
Eighth Quarter:	Rad. Tech. 2419	Applied Radiography VIII	290

-NOTICE-

The information found in this document is current as of the date of the print. Date - 7/31/2023.

Clinical grades are determined in five areas:

- (I) Weekly Assessments
- (II) Competency Exams
- (III) Attendance/Tardiness/Illness
- (IV) Dress Code/Ethics
- (V) Record Keeping (Paperwork)

I. WEEKLY ASSESSMENTS

Quarter 1 and Quarter 8: eight clinical assessment forms must be turned in (no more than 2 per week).

Quarters 2 – 7: eleven clinical assessment forms must be turned in (no more than 2 per week).

Assessments are required to be turned in to Program Director or Administrative Coordinator.

A maximum of 2 assessment forms may be turned in per week. Failure to turn in the required number of assessments will result in a 5% reduction in the student's clinical grade for each assessment not turned in.

The average of these assessments will account for 35% of the clinical grade.

II. CLINICAL COMPETENCY EXAMS

Under the supervision of a registered technologist, the student must perform a minimum of two satisfactory examinations for all required radiographic procedures. Upon completion of the two satisfactory exams for each radiographic procedure, the student will request to be competency tested for that particular examination. The decision to be evaluated on an examination must be made before the procedure is started.

A qualified radiographer will perform the competency evaluation and complete an evaluation form based upon the predetermined criteria. A clinical instructor or school faculty will review the images with the student and will grade the competency.

Failure of any clinical competency examination will require the student to repeat the clinical competency cycle with a 6% grade reduction.

Recheck clinical competency examinations will be performed during the 5th – 8th clinical quarters. The same grading policy will be utilized for recheck examinations or procedures.

Failure to complete required number of clinical competency exams by the designated time will result in a minus 10% for each exam not completed. The required exam(s) must then be completed by the end of the next quarter. If the exam(s) are not completed by the end of the next quarter, the student will be dismissed from school.

The average of these clinical competencies will account for 45% of the clinical grade.

III. ATTENDANCE / TARDINESS / ILLNESS

Attendance/Tardiness/Illness

Infractions of this policy will result in a 10% deduction in the student's clinical grade for each infraction.

-NOTICE-

The information found in this document is current as of the date of the print. Date - 7/31/2023.

Attendance:

Students are expected to attend all didactic and clinical assignments as scheduled, on time, and prepared for his/her duties. Habitual unexcused absences will result in disciplinary action.

Any student leaving their clinical assignment early without permission will be subject to disciplinary action.

Compassionate Leave - Students are eligible to receive up to 5 days to bereave the death of the following relatives:

- Husband, wife, common law spouse, same-sex domestic partner
- Son, daughter, step son, step daughter, adopted children and guardian children
- Father, step father
- Mother, step mother

And up to 3 days to bereave the death of the following relatives:

- Parental guardian
- Brother, step brother, brother-in-law
- Sister, step sister, sister-in-law
- Son-in-law, daughter-in-law
- Grandparent, great grandparent, step grandparent and grandchildren
- Mother-in-law, father-in-law

Additional time or time missed for funerals of other family members or friends must be taken as a Personal Day.

Inclement Weather - In the event of inclement weather, such as a blizzard, students are expected to attend all scheduled clinical and classroom assignments unless notified of cancellation by the Program Director.

Special consideration will not be given to students choosing to live long distances from the hospital. Any absences as the result of inclement weather will be handled according to the program's Attendance / Tardiness Policy.

Tardiness:

Tardiness will be enforced according to the following policies:

1. Each student will be allowed one legitimate tardiness without a deduction in his/her clinical grade during each quarter.
2. Each consecutive tardy will result in a 10% grade deduction.
3. Time missed for tardiness must be made up at the end of the student's clinical shift.
4. Excessive tardiness will result in disciplinary action.

Illness:

1. If a student is ill and cannot attend his/her day clinical assignment, he/she is to call the Program Director (333-7445) or the Clinical Coordinator (333-6466) by 7:00 A.M. If the Program Director or the Clinical Coordinator are not available, the student must leave a detailed message on each person's voice mail.
2. If a student is ill and cannot attend his/her weekday P.M. clinical assignment, he/she is to call the Program Director (333-7445) or the Clinical Coordinator (333-6466) as early as possible. If the Program Director and the Clinical Coordinator are not available, the student must leave a detailed message on each person's voice mail.
3. If a student is ill or cannot attend his/her weekend clinical assignment, he/she is to call the Radiology Department Charge Technologist (605-333-7400).

The grade a student receives for attendance / tardiness accounts for 10% of the clinical grade. .

-NOTICE-

The information found in this document is current as of the date of the print. Date - 7/31/2023.

IV. DRESS CODE / ETHICS

Dress Code / Ethics

Any infraction of the dress code or ethical conduct will result in a 10% deduction in the student's clinical grade for each infraction.

Abiding by the school's dress code is a part of the student's clinical grade. A student not conforming to the dress code will be required to leave the clinical area. Any time missed as a result of dress code violations will be made up at the discretion of the Program Director or Administrative Coordinator. Failure to abide by the dress code may lead to disciplinary action.

Dress Code:

1. Dark gray scrubs
2. Socks are required
3. Clean, appropriate nursing/tennis shoes
4. Dark gray lab coats are optional/ Sanford branded jackets (Gray, navy, or black) may substitute for the lab coats
5. Solid white , gray, or white & gray patterned t-shirts are optional

Dress Code Procedure:

1. Students must properly wear clean and complete uniforms.
2. Students are expected to avoid extreme styles in dress and personal grooming.
3. Students must take precautions to assure personal cleanliness at all times because of their close personal contact with patients, co-workers, and the public.
4. Any difficulties encountered in enforcing or interpreting appropriate dress or personal grooming shall be handled by the Program Director.
5. Basic requirements are:
 - Name badges and radiation monitoring devices must be worn at all times when in the clinical setting.
 - Body Art (tattoos, piercing/jewelry) that may be offensive to patients, family members, guests of patients, other customers or employees, or if deemed inappropriate at the discretion of the Program Director of the radiology program are not allowed to be visible. Examples of inappropriate tattoos include anything of an obscene or sexual nature and/or anything that may be construed to be discriminatory against any sex, race, ethnic background or religion.
 - Examples of inappropriate piercing jewelry include facial jewelry, large ear jewelry.
 - Jewelry shall be modest and simple in design.
 - Hairstyle and makeup must not be extreme or distracting.
 - Artificial Nails: Artificial nails, add-ons or extenders are not to be worn by healthcare staff that provide patient care, handle patient care equipment/supplies or food. If nail polish is worn, it must be free of chips or cracks due to potential harboring of bacteria.
 - Excessive Smells or Scents/Fragrance.
 - Students scheduled for Surgery or Interventional Procedures may only wear hospital surgical scrubs.
 - NO surgical attire may be worn home.

The average of these areas will account for 5% of the clinical grade.

-NOTICE-

The information found in this document is current as of the date of the print. Date - 7/31/2023.

V. RECORD KEEPING (PAPERWORK)

Record Keeping

Each form not turned in on time will result in a 10% reduction per day in the student's clinical grade.

RECORD KEEPING

1. Introduction To Applied Radiography

2. Mandatory Orientation forms.

3. Program Monthly Time Sheets

The student is required to keep accurate logs of hours that they spend in clinical and didactic sessions.

The documentation and record keeping is important for the structure of the program and to aid in legal accountability for the student and hospital. A form will be provided for the student to keep track of course and clinical time each month.

4. Quarterly off- hour objectives and Repeat cards.

The grade a student receives for record keep accounts for 5% of the clinical grade.

REVIEWED: 05/08, 05/09, 05/10, 02/11, 06/11, 04/12, 05/13, 4/14, 6/15, 5/16, 5/17, 2/18, 4/20, 3/22, 1/23
--

REVISED: 09/08, 05/10, 02/11, 06/11, 04/12, 5/16, 3/18, 5/19, 3/21

STUDENT PEER MENTOR POLICY

The purpose of the student (peer) mentor program is to provide an opportunity for 1st and 2nd year students to become acquainted and facilitate the incoming students' transition from a college atmosphere to patient care environment.

NOTE: During orientation, 1st year students are scheduled for small group orientations at the Vandemark Clinic, Sanford Children's Hospital, fluoroscopy rooms, OR, diagnostic rooms, mobile radiography.

STUDENT MENTEES

Responsibilities and Benefit – New students will:

- Complete orientation objectives.
- Meet technologists in all modalities.
- Become familiar with all areas of the Radiology Department.
- Obtain general advice/encouragement about school.
- Develop time management skills.
- Become aware of experiences and perspectives of 2nd year students.
- Develop interpersonal skills.
- Develop friendships.

STUDENT MENTORS

Responsibilities- 2nd year students will:

- Meet with 1st year students for introductions and breakfast get together.
- Assist with tours of the facility.
- Help new students to become familiar with resources such as cafeteria and HR Department.

-NOTICE-

The information found in this document is current as of the date of the print. Date - 7/31/2023.

- During orientation period, review the location of fire/safety equipment with new students and refresh your knowledge.
- Act as a positive role model.
- Encourage new students to show initiative during clinical assignments.
- Share knowledge and experience, thereby improving your own understanding of information.

Benefits: A student mentorship experience will:

- Contribute to your own professional growth
- Develop and enhance leadership skills/qualities
- Improve communication and personal skills
- Increase confidence and motivation
- Reinforce your own study skills and knowledge

NEW: 3/16	REVIEWED: 5/17, 2/18, 5/19, 4/20, 3/21, 3/22, 1/23
REVISED 5/16	

TRADING HOURS OR REQUESTING TIME OFF

Any students requesting to trade hours must first have it approved by the Program Director/ Manager-Radiology Education or Clinical Coordinator.

When trading hours:

1. The students must bring the official schedule to school staff.
All students involved with the trading of hours/shifts must be present.
2. Students may not trade out of assigned clinical rotations on a regular basis.
3. Only the Program Director/ Manager-Radiology Education Clinical Coordinator will make changes on the schedule. (Students are not allowed to make changes on the official schedule.)

Scheduled time off requests:

1. Must be put in writing, to include the date and time
2. All requests must be turned into the Program Director
3. Requests will not be granted for evening/weekend clinical assignments

If school staff feels that the request will not interfere with the student’s rotation, an attempt will be made to grant the request.

If more than one student requests a certain day or weekend off, priority will be given to the first submitted request.

Any infractions of the regulations will result in disciplinary action. Excessive infractions of the regulations may result in probation or dismissal from school.

REVIEWED: 05/08, 05/09, 05/10, 02/11, 04/12, 05/13, 4/14, 6/15, 5/16, 5/17, 2/18, 4/20, 3/21, 1/23
REVISED: 02/11, 5/19, 3/22

-NOTICE-

The information found in this document is current as of the date of the print. Date - 7/31/2023.

.TELEPHONE POLICY

The telephones located in the Radiology Department are for professional and business use. Personal calls are to be limited.

All students are required to have a cell phone or telephone at their place of residence.

Personal cell phones are prohibited in the clinical areas. Non-compliance will be subject to disciplinary action.

Cell phones must be turned off while in class. Students, who are expecting an emergency call, should inform the instructor before class.

REVIEWED: 05/08, 05/09, 05/10, 02/11, 04/12, 05/13, 4/14, 6/15, 5/16, 5/17, 2/18, 5/19, 4/20, 4/21, 3/22, 1/23

REVISED: 5/09, 02/11, 04/12, 4/23
--

SMOKING

Sanford USD Medical Center is a smoke free facility. Smoking is prohibited on all Sanford property. Students found smoking in an undesignated area will be subject to disciplinary action.

REVIEWED: 05/08, 05/09, 05/10, 02/11, 04/12, 05/13, 4/14, 6/15, 5/16, 5/17, 2/18, 5/19, 4/20, 3/21, 3/22, 1/23

REVISED: 02/11

STUDENT IDENTIFICATION

Student ID badges are furnished for students at the beginning of the program. It is an absolute necessity that the student wears an ID badge at all times in the clinical setting. Failure to wear an ID badge will result in disciplinary action.

If a Student ID badge is lost or damaged, the student must replace the badge at his/her cost.

REVIEWED: 05/08, 05/09, 05/10, 02/11, 04/12, 05/13, 4/14, 6/15, 5/16, 5/17, 2/18, 5/19, 4/20, 3/21, 3/22, 1/23

REVISED: 02/11

-NOTICE-

The information found in this document is current as of the date of the print. Date - 7/31/2023.

IMAGE IDENTIFICATION MARKERS

Image identification markers will be furnished for students at the beginning of the program. The care of these markers is the responsibility of the individual student. These markers must not be loaned to other students or technologists.

After receiving the markers, the student is expected to have them available during all scheduled clinical times. These markers are to be used on every image the student produces.

If the ID markers are lost or damaged, the student must replace the marker/s at his/her cost.

REVIEWED: 05/08, 05/09, 05/10, 02/11, 04/12, 05/13, 4/14, 6/15, 5/16, 5/17, 2/18, 5/19, 4/20, 3/21, 3/22, 1/23

REVISED: 02/11

REPEAT IMAGES

All repeat images must be performed under the direct supervision of a registered technologist. For all repeat exposures, the student must have a registered technologist with them regardless of whether the student has passed the clinical competency for that procedure. The registered technologist must check the position and technical factors before the repeat exposure is made, and must initial the student's repeat card for verification. Repeat cards must be turned in at the end of each quarter.

REVIEWED: 05/08, 05/09, 05/10, 02/11, 04/12, 05/13, 4/14, 6/15, 5/16, 5/17, 2/18, 5/19, 4/20, 4/21, 3/22, 1/23

REVISED: 04/12, 4/14

STUDENT SUPERVISION

The radiology department will be staffed so that there will be Radiologic Technologist(s) present at all times. The student to radiography clinical staff ratio must be 1:1. However, it is acceptable that more than one student may temporarily be assigned to one technologist during uncommonly performed exams. A list of specified Uncommon Exams is displayed outside of each radiographic room.

Students who have not completed competency requirements will be under the direct supervision of a Registered Technologist.

➤ Direct Supervision:

- A qualified radiographer reviews the procedure in relation to the student's achievement.
- A qualified radiographer evaluates the condition of the patient in relation to the student's knowledge.
- A qualified radiographer is present during the conduct of the procedure.
- A qualified radiographer reviews and approves the procedure.
- A qualified radiographer is present during student performance of any repeat of any unsatisfactory radiograph.

Students who have completed competency requirements will be under indirect supervision of a registered technologist.

➤ Indirect Supervision:

- Supervision provided by a qualified radiographer immediately available to assist students regardless of the level of student achievement.
- Immediately available is interpreted as the presence of a qualified radiographer adjacent to the room or location where a radiographic procedure is being performed.

-NOTICE-

The information found in this document is current as of the date of the print. Date - 7/31/2023.

Direct supervision of students is required during all surgical procedures and mobile procedures, regardless of the level of competency.

Students utilizing radiographic rooms to practice positioning for exams must have a registered technologist readily available for assistance and guidance.

REVIEWED: 05/08, 05/09, 05/10, 02/11, 04/12, 05/13, 4/14, 6/15, 5/16, 5/17, 2/18, 3/21, 1/23, 3/22
REVISED: 02/11, 8/15, 5/19, 4/20

GRADUATION REQUIREMENTS

1. Pass all didactic courses with at least an 80% average.
2. Pass all mandatory clinical competencies with at least an 80% average.
3. Successfully complete all clinical requirements.
4. Meet all financial obligations of the School of Radiologic Technology.

There is no early graduation from the program.

AMERICAN REGISTRY OF RADIOLOGIC TECHNOLOGISTS (ARRT) EXAMINATION

Upon completion of the Sanford Medical Center School of Radiologic Technology, a student is eligible to apply for the American Registry of Radiologic Technologists (ARRT) examination to become a registered technologist. Students are responsible for applying and scheduling their own examination. Applicants may apply prior to graduation, but must graduate before being deemed eligible to take the certification examination. The Program Director will sign the application for the ARRT certification examination when the student has met all of the requirements for graduation from the program.

REVIEWED: 05/08, 05/09, 05/10, 02/11, 04/12, 05/13, 4/14, 6/15, 5/16, 5/17, 2/18, 5/19, 4/20, 4/21, 3/22, 1/23
REVISED: 02/11, 04/12

-NOTICE-

The information found in this document is current as of the date of the print. Date - 7/31/2023.

APPENDICES

Appendix A: Clinical Forms

The following clinical forms can be found in the Competencies & Objectives Manual, which is located in the Clinical Coordinator's Office.

1. Clinical Competency Requirements List
2. Clinical Competency Evaluation Form
3. ERCP Competency Evaluation Form
4. Arthrogram Competency Form
5. Scoliosis Competency Form
6. Surgery C-Arm Competency Form
7. Myelogram Competency Form
8. Voiding Cysto-Urethrogram Competency Form
9. Small Bowel Competency
10. Mock Trauma Competency Form
11. Re-Check Competency Evaluation Form
12. Introduction to Applied Radiography – New Student Orientation
13. Interventional Rotation Objective Checklist
14. OR Rotation Objective Checklist
15. Sanford Children's New Student Orientation
16. CT Rotation Checklist
17. Clinical Assessment Form / Diagnostic
18. Clinical Assessment Form / CT
19. Clinical Assessment / MRI
20. Clinical Assessment / Mammography (ESBC)
21. Clinical Assessment / Nuclear Medicine
22. Clinical Assessment / Radiation Therapy
23. Clinical Assessment / Ultrasound
24. Clinical Time Sheet
25. Clinical Lab Evaluation
26. Evaluation of Images
27. Personal Time Request Form
28. Absence Form
29. Demerit Form
30. Counseling Form
31. Document of Radiation Monitoring Badge Reading Over 200 MREM
32. Voluntary Withdrawal of Declaration of Pregnancy
33. Student Grievance Form
34. Student Complaint Form
35. Radiologic Technologist Clinical Assessment Form (Completed by student)
36. MRI Screening Form

-NOTICE-

The information found in this document is current as of the date of the print. Date - 7/31/2023.

Appendix B: JRCERT Position Statement on Mammography Clinical Rotations

Adopted by the JRCERT Board of Directors (April 2016)

The Joint Review Committee on Education in Radiologic Technology (JRCERT) **Standards for an Accredited Educational Program in Radiography** are designed to promote academic excellence, patient safety, and quality healthcare. The JRCERT accreditation process offers a means of providing assurance to the public that a program meets specific quality standards. The process helps to maintain program quality and stimulates program improvement through program assessment.

Standard One - Objective 1.2 of the JRCERT Standards requires a program to document that it “provides equitable learning opportunities for all students.”

The JRCERT does not provide legal advice to program officials. Nevertheless, the JRCERT has received numerous inquiries regarding the placement of students in mammography clinical rotations. The JRCERT understands that there have been significant concerns regarding the interpretation of the JRCERT Standards regarding equitable learning opportunities for all students. As a point of clarification, the JRCERT notes that equitable means dealing fairly with all concerned. It does not necessarily mean equal.

The JRCERT has analyzed statistical data that indicates current imaging practices in mammography have resulted in minimal employment opportunities for males. Certification demographic data indicates that less than 1% of the approximately 50,000 technologists registered in mammography by the American Registry of Radiologic Technologists (ARRT) are males. Overwhelmingly, clinical site policies prohibit male students from participation in mammography rotations. Such participation is limited due to liability concerns, as well as consideration for the interests of the patient. These policies are established not only for mammography exams, but also for other gender-specific examinations performed by professionals who are the opposite gender of the patient.

With regard to mammography, the JRCERT has determined programs must make every effort to place a male student in a mammography clinical rotation if requested; however, programs will not be expected to attempt to override clinical site policies that restrict mammography rotations to female students. Male students should be advised that placement in a mammography rotation is not guaranteed and, in fact, would be very unlikely. To deny mammography educational experience to female students, however, would place those students at a disadvantage in the workforce where there is a demand for appropriately educated professionals to address the needs of patients. It is noted that the same clinical site policies that are in place during the mammography educational rotations are most likely applicable upon employment, thus limiting access for males to pursue careers in mammography.

The JRCERT reiterates that it is the responsibility of each clinical site to address any legal challenges related to a program’s inability to place male students in a mammography rotation. All students should be informed and educated about the various employment opportunities and potential barriers that may affect their ability to work in a particular clinical staff position. 4/8/16.

-NOTICE-

The information found in this document is current as of the date of the print. Date - 7/31/2023.

STANDARDS FOR AN ACCREDITED EDUCATIONAL PROGRAM IN RADIOLOGIC SCIENCES

STANDARDS FOR AN ACCREDITED EDUCATIONAL PROGRAM IN RADIOLOGIC SCIENCES

A copy of the current JRCERT Standards can be found on the school bulletin board, student website, and on the desktop of all the classroom computers. Students are made aware of the locations during student orientation and student meetings.

-NOTICE-

The information found in this document is current as of the date of the print. Date - 7/31/2023.