



Student Clinical Practicum Handbook

Programs in Radiology Technology

**Associate of Science in Radiology Technology
Diploma in Radiology Technology**

**Recognized by:
The America Registry of Radiologic Technologists
(ARRT)**

**Med Academy
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RT CLINICAL EDUCATION

Required Clinical Rotations:

- Clinical Externship I 90 Hours
- Clinical Externship II 180 Hours
- Clinical Externship III 240 Hours

Clinical Education Pre-requisites:

- Attend to the Clinical Orientation Session
- Complete Clinical Orientation on the Clinical Site
- Have current BLS certification
- Immunizations (as required by clinical facility only)
- Drug Test (as required by clinical facility only)
- Provide all documentation for clinical assignment as requested

Course Description

The goal of clinical rotations is to enhance the problem solving and technical skills of students making them capable of handling and resolving situations of suitable patient care, environmental and department safety, effective communication, and professional and ethical behavior. Students will be trained in patient positioning, general patient care procedures in the imaging department, contrast administration, departmental protocol, and radiation and personnel protection. Content is presented progressively in competency levels through clinical performance objectives and competency exams.

Course Objectives

Upon completion of the clinical education, the student will:

1. Maintain a safe work environment for patients, visitors and health care workers.
2. Properly schedule and prescreen patients.
3. Communicate professionally with patients and staff members.
4. Use standard protocols to perform routine radiologic examinations.
5. Use Digital Imaging and Communications in Medicine (DICOM).
6. Identify when to modify a protocol and successfully perform the modification.
7. Identify the probable cause of image quality problems and recommend an appropriate solution.
8. Perform and monitor quality assurance tests.
9. Power up and shut down the system.
10. Correlate the requested exam with clinical history and reported physical exam.
11. Ensure patient safety by correlating surgical, accident and occupational history.
12. Properly screen patients for contraindications to ordered procedures
13. Employ proper precautions to prevent disease transmission.
14. Monitor linens and supplies and restock when necessary.
15. Demonstrate an understanding of a patient's cultural, ethnic or value system differences.
16. Speak with patients in a professional and empathetic manner to alleviate any patient concerns
17. Demonstrate professional ethics by preserving the patient's modesty.
18. Demonstrate how to give proper instructions to optimize patient comfort and cooperation.
19. Respond appropriately in emergency situations.
20. Recognize patient adverse reactions during contrast administration and act appropriately.
21. Identify and report equipment problems.
22. Adhere to national, organizational and departmental standards, protocols, policies and procedures
23. Consistently maintain patient confidentiality standards.
24. Perform safe, ethical and legal practices.

RADIOLOGY TECHNOLOGY CLINICAL POLICIES

I. CPR

Policy:

It is the policy of the program to require that all students complete an approved training course in CPR prior to program completion. In addition, CPR is required by the ARRT as one of the general patient care competencies.

Procedure:

1. Incoming students will be scheduled for a CPR class during the patient care course.
2. If facilities or instructors are not available during the patient care course, students will be scheduled accordingly to participate in CPR classes sponsored by outside providers.
3. In order for the Program Director to certify that a student has met the eligibility requirements to take the ARRT examination (program completion), an approved CPR course must be completed and a copy of the card on file in the student's clinical file.
4. Students having already completed a CPR course prior to the start of the program must produce a current, valid card in order to be exempt from scheduled CPR classes. A copy will be made of the card and placed in the student's clinical file.
5. All students must have a valid CPR card prior to starting clinical rotations.

II. Assigned Clinical Rotations

Policy:

In order to ensure that all clinical activities are educationally valid and sound, it is the policy of the Program in Radiology Technology to assign students to clinical areas on a rotating basis throughout various settings and/or institutions. A clinical rotation schedule will be distributed to each student, clinical coordinator, and clinical sites prior to the commencement of clinical activities. Rotation schedules will define the start and end dates and area for each rotation. Any changes to clinical assignments must be approved by the Program Director prior to implementation.

Students are required to rotate through assigned areas only and are not permitted to be "pulled" by clinical supervisors to cover other, non-assigned rotations. Students are never to be utilized to supplement paid, technical staff. Furthermore, students are not permitted to "visit" in rotations other than their assigned area.

Procedure:

1. At the beginning of each academic year, the Clinical Coordinator will prepare a clinical rotation schedule for the entire year.
2. During clinical orientation, each student will receive a copy of the rotation schedule. Copies of the rotation schedule will also be distributed to area supervisors and clinical instructors.
3. No changes to the rotation schedule can be made without the permission of the Clinical Coordinator and/or Program Director.

III. Student Supervision

Policy:

The clinical education portion of the curriculum is a structured competency-based program interrelated with the didactic portion of the program. Through the interaction between students, the clinical instructors and staff, and the patients to be imaged, students have an opportunity to complete mandatory and elective competencies (as defined by the ARRT) and to achieve the program's mission and goals.

The presence of students in the clinical areas is not intended to supplement or replace staff. Clinical education opportunities are provided under the supervision of qualified, licensed general radiographers, clinical instructors and clinical supervisors.

Direct Supervision defined:

Until a student demonstrates clinical competency for a specific radiographic procedure, all medical imaging procedures must be performed under the direct supervision of a licensed radiographer.

The licensed radiographer will review the examination request in relation to the student's achievement relative to obtaining a passing score on the clinical competency evaluation. The student possesses the necessary knowledge and skill level required to perform the examination. The radiographer must remain in the room observing the student's performance. The radiographer will complete a competency evaluation form as documentation of the student's ability level relative to the examination performed.

All students must work under direct supervision (a licensed radiographer physically present in the examination room) until such time that they have successfully completed a competency evaluation as described above.

Indirect Supervision defined:

When a student successfully completes a competency evaluation for a particular examination, they are permitted to perform only those examinations under the indirect supervision of a qualified, licensed radiographer. Indirect supervision is defined as a licensed radiographer is immediately available to the student radiographer in an adjacent room or in a nearby area to assist the student should the need arise. The licensed radiographer is also available to answer any questions the student may have relative to the procedure and patient condition.

The student's ability to work under indirect supervision following successful completion of a competency evaluation shall be at the discretion of the supervising licensed radiographer or clinical instructor and may vary according to the area of clinical rotation.

Students may perform portable radiographic procedures under indirect supervision (following successful completion of a competency evaluation) provided that a licensed radiographer is readily available to assist the student should the need arise.

Although students will rotate through the operating room and will complete area specific competencies, all students in the operating room will work only under the direct supervision of a licensed radiographer.

If a student feels that the supervision policies described above are not being adhered to, written notification must be immediately submitted to the Program Director and/or the coordinator so that the necessary corrective actions may be taken. No student retaliation will be permitted following notification of policy violations.

IV. Repeat Procedures

Policy:

In order to ensure that appropriate radiation protection practices are observed, should a procedure need to be repeated for any reason, it must be done so only under the direct supervision of a licensed radiographer, regardless of a completed competency evaluation on the specific procedure. This policy must be adhered to at all times in order to maintain patient and student radiation doses to an absolute minimal level. This policy is enforced in all areas of clinical rotation.

Procedure:

In the even a radiographic image must be repeated for any reason:

1. The student radiographer must review the image with the supervising technologist.
2. The supervising technologist must accompany the student radiographer into the radiographic room to directly supervise the student during the repeated projection (see Direct Supervision under the Student Supervision Policy).
3. Disciplinary action will result if this policy is not observed which may include clinical probation, program suspension, or dismissal at the discretion of the Program Director and Clinical Instructor.
4. Student must have technologist that supervised the repeat study sign on the daily's procedure log that this repeat study was a "supervised".

V. Leaving Clinical Areas

Policy:

Students are not allowed to leave their assigned clinical areas during the scheduled clinical time without permission of the clinical supervisor or clinical instructor. Students will be assigned a lunch break by the area supervisor.

If a student leaves an assigned area without the permission of the area supervisor or clinical instructor disciplinary action will result.

Students are not to leave their clinical areas at the end of the day until all work in progress is completed unless permission is given to the student and appropriate transfer of patient care is done. Under no circumstances are students permitted to invest more than forty hours per week in program activities consisting of class and clinical schedules combined.

VI. Clinical Responsibilities

Policy:

Students are required to maintain a clean environment in their assigned clinical area/examination room. This may also include stocking of rooms and replenishment of the room linen supply. Students must exercise care and fully comply with all established radiographic safety standards when performing examinations.

Students are responsible for all technical, clerical, and other duties relative to the performance of their clinical duties. This includes, but is not limited to, all necessary exam paperwork and computer functions. All students will perform patient examinations and studies according to their skill-level and will assist staff technologists with the following:

- a. caring for the needs of patients
- b. lifting and moving patients as necessary
- c. cleaning examination rooms and equipment
- d. emptying laundry hampers in examination rooms if necessary
- e. recording the procedure in the hospital's HIS system and completing associated paperwork.

Under no circumstances may a student eat or drink in patient areas including radiographic examination rooms. Food and beverage consumption must be done only in designated areas within the hospital. Each area supervisor will inform students of the designated area.

VII. Clinical Site Photo Identification

Policy:

During the orientation for new radiography students, appointments will be scheduled with the school and clinical site for obtaining hospital-issued photo identification badges if applicable. For security reasons, students must wear their hospital photo identification badge (if applicable) and your Med Academy badge at all times while on hospital property.

The front of the badge denoting the individual as a student must be prominently displayed at all times. If a student loses their photo identification badge, they must notify the Program Director or Clinical Coordinator immediately.

Procedure:

In the event a hospital-issued identification badge is lost:

1. The student must contact the program director or clinical coordinator immediately.
2. The program director will supply the student with a memorandum on school letterhead to take with them to the site in order to obtain a replacement badge.

VIII. Professional Demeanor

Policy:

It is the policy of the program to expect each student to conduct himself or herself in a professional manner at all times. Failure to do so will result in the appropriate disciplinary action including the probation, program suspension, and/or program dismissal. The disciplinary action taken will be at the discretion of the Program Director and will reflect the in appropriate action displayed by the student.

Clinical site policies, procedures, and rules are to be followed at all times. Any questions regarding these rules should be directed to the area supervisor or Program Director for clarification.

IX. Clinical Equipment & Supplies

Policy:

Clinical equipment and supplies are to be used only for the purpose intended. Students are not permitted to remove any equipment or supplies from the clinical premises. Students in violation of this policy are subject to disciplinary action up to and including program dismissal and possible criminal prosecution. Furthermore, equipment and supplies should be cleaned and returned to their proper location following completion of the radiographic procedure they are being used for.

X. Holding Patients During Examinations

Policy:

Students are forbidden from holding patients during radiographic exposures. Violation of this policy will result in appropriate disciplinary actions including, but not limited to, the assignment of probation and possible program suspension. Repeat violations will result in program dismissal (see also Student radiation Protection policy and Radiation Safety policy).

XI. Use of Cellular Phones in Clinical Area

Policy:

Student radiographers must not bring cellular telephones into the clinical areas. Phones must be turned off or be placed on silent mode if they are to be stored in the student's locker. Violation of this policy will result in the assignment of probation, program suspension for repeat offenses leading up to the possible program dismissal, as this is disruptive to the learning and clinical environments; and may be hazardous to the electronic circuitry of some medical equipment.

XII. Uniform Requirements and Grooming

Policy:

It is the policy of the program that students conform to acceptable standards of grooming at all times. Acceptable standards of grooming may be defined as follows:

- The uniform should be neat and clean.
- Shoes should be clean and polished at all times.
- All students must maintain a conservative hairstyle. Hair that falls below the shoulder must be fastened up or back.
- Students must be clean-shaven or facial hair must be neatly trimmed.
- Excessive use of cosmetics or perfumes is not permitted.
- Fingernails must be kept at a suitable length and neatly trimmed.
- Canvas shoes are not permitted.

For the purpose of clarification, **uniform restrictions** will be defined as follows:

- Shoes: Clogs (including those sold in uniform stores), sandals, ankle-laced, platform, open-toe, or open-backed shoes.
- Denim materials including jeans.
- Jump suits, knickers, harem pants, and coveralls.

Students not conforming to uniform requirements will be sent home. Demerits will be issued for the first occurrence. Subsequent occurrences will result in program suspension and/or program dismissal for repeat offenses.

XIII. Clinical Performance Evaluation

Policy:

It is the policy of the program that all student radiographers be evaluated with regard to clinical performance at the conclusion of each assigned rotation. At the end of each clinical rotation assignment, a "Clinical Evaluation" form will be given to the area supervisor for each student. The area supervisors and clinical instructors will either complete the evaluation or may elect to have the staff technologist(s) complete it. The area supervisor will countersign all completed evaluations.

Procedure:

At the completion of each rotation assignment:

1. The Program Director or clinical coordinator will forward a Clinical Evaluation form for each student to the area supervisors.

2. The Area Supervisor and Clinical Instructor may either complete the evaluation or forward it to the staff technologist(s) working with the individual student during a majority of the rotation.
3. Upon completion, the evaluation will be signed by the area supervisor and forwarded to the Clinical Coordinator for scoring.
4. The Clinical Coordinator will meet with each student individually, at which time the student will be given an opportunity to review the evaluation and sign acknowledging they have had an opportunity to discuss its contents.
5. Clinical evaluations will be filed, and a student may request an additional conference (in writing) to review clinical evaluations.

Any student receiving a monthly evaluation of **less than 2.5** or fails to progress according to the Clinical Performance Objectives or to complete an appropriate number of clinical competency evaluations will be placed on clinical probation.

XIV. Radiation Safety

Policy:

It is the policy of the Program to comply with all institution and state radiation safety guidelines and policies. Student radiographers will be operating radiation-producing equipment only as part of their training under the supervision of licensed, qualified general radiographers during regularly scheduled school hours.

No patient shall be exposed to ionizing radiation except for those procedures authorized by a physician. Exposure of any individual to ionizing radiation solely for educational purposes will not be permitted.

Only equipment in good mechanical and electrical condition will be utilities. All radiation-producing equipment is inspected regularly and certified safe for utilization. The program's radiation protection policies and practices reflect adherence to the ALARA Principle, which is to limit radiation exposure to a level that is "As Low As Reasonably Achievable". This principle applies to patients, the public, hospital staff, and the operators of radiation-producing equipment. Each of these categories will be addressed relative to program policy.

Patient Protection

Only x-ray systems with clearly indicated technique charts and reproducible exposures will be used on patients. The radiation exposure to the patient shall be the minimum required to produce images of appropriate diagnostic quality. The speed of film-screen combinations shall be the fastest speed consistent with departmental requirements and Radiologist preference.

The size of the primary beam shall never be larger than the image receptor employed during a radiographic exposure. Proper collimation must be employed at all times to restrict the primary beam only to the specific area of interest.

Gonadal shields of not less than 0.25 mm lead shall be regularly employed for all patients of reproductive age (approximately age 12 to 50 for female patients) during radiographic procedures in which the gonads are in or near the primary beam and not of clinical interest, except for cases in which this would interfere with the radiographic images.

All female patients of childbearing age shall be asked, prior to exposure to x-rays, if they are pregnant or suspect they may be. If suspected or confirmed, a supervisor must be notified prior to the commencement of any radiographic procedures. A Radiologist may also be notified. In cases where known pregnant patients must be radiographed, every effort should be taken to maintain the lowest radiation dose possible to the fetus. This will include precise positioning and collimation and lead shielding whenever possible.

Immobilization devices shall be employed when necessary to prevent the need for repeat exposures due to patient motion. The patient's family, with the exception of pregnant females, will be allowed in the radiographic room only under special circumstances. These individuals must be provided with the protective apparel and instructed on radiation protection practices prior to any radiographic exposure. Effective communication will be utilized to ensure patient cooperation with positioning and procedural needs, thus reducing the possibility of repeat radiographic exposures.

Radiographs may only be repeated in the presence of a qualified, licensed general radiographer in accordance with program supervision policies (see Repeat Radiograph policy).

Student Radiation Protection

Whenever possible, students assisting in radiographic procedures must remain behind protective barriers. Students that may be exposed to scattered radiation during fluoroscopic studies will be provided with lead-impregnated protective apparel of not less than 0.25 mm Pb equivalence. In addition to a lead apron, a thyroid shield will also be provided to individuals who could receive a dose in excess of 0.2 rem in any one-month period or a total dose of 1 rem per year. During radiographic procedures, all students shall be positioned such that the primary beam will not strike any part of their body.

Whenever a patient or film must be held in place during exposure, mechanical devices must be employed. Student radiographers shall never be used for the purpose of holding patients or films during exposures.

Portable radiographic equipment shall be provided with an exposure switch cable that will permit the student to make an exposure at a distance of at least 12 feet from the tube head and from the patient. Regardless of the distance from the tube and patient during portable examinations, a lead apron must be worn. No exceptions to this policy will be made.

Pregnant students are encouraged to notify the Program Director in writing if a pregnancy is suspected or confirmed. Please refer to the Declared Pregnant Student Radiographer Policy for additional information.

All student radiographers will be issued a whole-body dosimeter in the form of a film badge.

- a. The film badge shall be worn at the collar level
- b. When a lead apron is worn, the film badge must be located on the outside of the apron during exposures.
- c. Film badge reports will be made available to students for inspection and signing indicating that they have had an opportunity to inspect the readings.
- d. Students receiving radiation exposures will be counseled by either the Program Director or Radiation Safety Officer as to the source of exposure and a review of basic radiation protection principles relative to their areas of assignment.
- e. The Radiation Safety Officer or his designee will also review radiation exposure reports on a monthly basis.
- f. The Program Director and the Radiation Safety Officer keep student exposure records indefinitely.
- g. In the event a film badge is lost or damaged, the Program Director must be notified immediately. Students will be responsible for the cost of replacement.

Other Hospital Staff

During portable examinations on patient floors, intensive care and other areas of the hospital, the student radiographer must be aware of other hospital staff at all times. The student

radiographer must announce that an x-ray exposure is about to be made in an effort to allow hospital staff and nurses an opportunity to increase their distance from the immediate area. Those staff members not permitted to leave the immediate area (less than 6.5 feet from the patient being radiographed) must be provided protective apparel or a portable shield for protection during the exposure. Failure to comply with this policy can result in serious consequences including expulsion from the program for failure to exercise proper radiation safety practices.

XV. Declaration of Pregnancy

Policy:

It is the policy of the Program in Radiologic Sciences to comply with all federal regulations regarding disclosure of pregnancy by the student radiographer. If a female student becomes pregnant (or suspects she may be pregnant), it is recommended that she notify the Program Director as soon as possible in writing. Disclosure of pregnancy status is voluntary. Every effort will be made to protect the health of the student and developing fetus. Furthermore, all enrolling females will be made aware of this policy during program information sessions.

Procedure:

1. If the student decides to disclose, the notification must be in writing and will include the estimated date of conception and projected due date.
2. The program Director will immediately order the appropriate radiation monitoring badge. The determination of the student's ability to engage in didactic and clinical education will be determined ultimately by the student and her physician. Input from the Program Director and Radiation Safety Office should also be considered.
3. Following written documentation from her physician that she is permitted to continue clinical activities, the students will meet the Program Director to discuss educational options. Each pregnant student will be handled on a case-by-case basis. Option included, but are not limited to, the following:
 - a. Continue without modification
 - b. Continue on with the didactic portion of the program and take a leave-of absence, with continuation of the clinical portion of the program following delivery.
 - c. Continue on with didactic and clinical education portions of the program, but with an altered rotation schedule so as to ensure the lowest possible radiation dose to the developing fetus. As a result, altered rotation schedules may prevent the student from participating in fluoroscopy, mobile, surgical, and special procedure examinations.
 - d. If a pregnant student radiographer is able to continue with the clinical portion of the program, she will be provided a second fetal dosimeter to be worn at waist level.
 - e. Program officials will closely monitor both the student and fetal exposures, any radiation exposure shown on monitoring reports may result in a conference between the student, Radiation Safety Officer, and Program Director to evaluate continuation with clinical activities relative to risk of radiation exposure; at the discretion of the student.
 - f. Following delivery, the student can be assigned to the clinical areas of fluoroscopy, mobile and surgical radiography and special procedures to ensure completion of all necessary competency evaluations; should the student opted to skip those rotations during her pregnancy.

Additional Guidelines will be followed:

- The second radiation dosimeter (fetal badge) should be worn at all times while in the clinical rotations areas.
- During all x-ray exposures, the pregnant student should remain behind fixed protective barriers.
- At no time will a student hold a patient during exposure.
- A student who does not declare her pregnancy will be treated as if she is not pregnant.
 - a. The ultimate decision on what education option to be taken will be made by the student and should depend upon physician recommendations, remaining length of the pregnancy, remaining program length, and input from the Program Director and/or clinical coordinator.
 - b. The obstetrician's recommendations will be followed in all cases when provided.
- Time lost from the program will be up in terms of clinical hours before certification of graduation will be awarded.

Upon completion of a leave of absence, the student will be allowed to resume her studies without prejudice. In all cases, however the student must meet academic and clinical education standards. (See also Leave-of-Absence Policy).

CLINICAL COMPETENCIES

It is the expectation that all graduates of the RT programs will apply for the ARRT certification examination in Radiography. Therefore, Med Academy follows the clinical competency requirements as outlined by the ARRT. The following is an insert from the ARRT website that outlines the specific clinical competency requirements in order to meet examination eligibility requirements and successful program completion requirements. You may review the content of the ARRT requirements in their entirety by visiting the ARRT website:

https://www.arrt.org/docs/default-source/discipline-documents/radiography/rad-competency-requirements.pdf?sfvrsn=396002fc_24.

Clinical Competency Requirements

The purpose of the clinical competency requirements is to verify that individuals certified and registered by the ARRT have demonstrated competency performing the clinical activities fundamental to a particular discipline. Competent performance of these fundamental activities, in conjunction with mastery of the cognitive knowledge and skills covered by the radiography examination, provides the basis for the acquisition of the full range of procedures typically required in a variety of settings. Demonstration of clinical competence means that the candidate has performed the procedure independently, consistently, and effectively during the course of his or her formal education. The following pages identify the specific procedures for the clinical competency requirements. Candidates may wish to use these pages, or their equivalent, to record completion of the requirements. The pages do NOT need to be sent to the ARRT.

4.1 General Performance Considerations

4.1.1 Patient Diversity

Demonstration of competence should include variations in patient characteristics such as age, gender, and medical condition.

4.1.2 Simulated Performance

The ARRT requirements specify that certain clinical procedures may be simulated as designated in the specific requirements below. Simulations must meet the following criteria:

- *The candidate must simulate the procedure on another person with the same level of cognitive, psychomotor, and affective skills required for performing the procedure on a patient. Examples of acceptable simulation include positioning another person for a projection without actually activating the x-ray beam and performing venipuncture by demonstrating aseptic technique on another person, but then inserting the needle into an artificial forearm or suitable device;*
- *The program director must be confident that the skills required to competently perform the simulated procedure will transfer to the clinical setting, and, if applicable, the candidate must evaluate related images.*

4.1.3 Elements of Competence

Demonstration of clinical competence requires that the program director or the program director's designee has observed the candidate performing the procedure independently, consistently, and effectively during the course of the candidate's formal educational program.

4.2 Radiography-Specific Requirements

As part of the educational program, candidates must demonstrate competence in the clinical activities identified below:

- *Ten mandatory general patient care activities;*
- *37 mandatory imaging procedures;*
- *15 elective imaging procedures selected from a list of 34 procedures;*
- *One of the 15 elective imaging procedures must be selected from the head section; and*
- *Two of the 15 elective imaging procedures must be selected from the fluoroscopy studies section, one of which must be either upper GI or contrast enema.*

4.2.1 General Patient Care

Candidates must be CPR certified and demonstrate competence in the remaining nine patient care activities listed below. The activities should be performed on patients whenever possible, but simulation is acceptable.

4.2.2 Imaging Procedures

Candidates must demonstrate competence in all 37 procedures identified as mandatory. Procedures should be performed on patients whenever possible. A maximum of eight mandatory procedures may be simulated if demonstration on patients is not feasible.

Candidates must demonstrate competence in 15 of the 34 elective procedures. Candidates must select at least one of the 15 elective procedures from the head section. Candidates must select either upper GI or contrast enema plus one other elective from the fluoroscopy section as part of the 15 electives. Elective procedures should be performed on patients whenever possible. If demonstration on patients is not feasible, electives may be simulated.

Institutional protocol will determine the positions and projections used for each procedure.

Demonstration of competence must include:

- *patient identity verification*
- *examination order verification;*
- *patient assessment;*
- *room preparation;*
- *patient management;*
- *equipment operation;*

- *technique selection;*
- *patient positioning;*
- *radiation safety;*
- *imaging processing;*
- and
- *image evaluation.*

During clinical orientation, students will be provided with a detailed list of procedures that must be completed. This procedures list will be used to document your successful completion and competency, as deemed by the clinical preceptor. This list must be completed in its entirety in order to graduate from the program.

CLINICAL GRADING SYSTEM

Grading Criteria:

The final grade will be based on:
 Attendance: 25%
 Clinical Performance 25%
 Clinical Competencies 50%

Grading System:

Score / Final Average:	Letter Grade:
90% - 100%	A
80% - 89%	B
70% - 79%	C
Below 70%	F
Incomplete	I
Withdraw	W

Clinical Attendance

Course Attendance:

Attendance to Clinical Externship is mandatory. Students must complete a minimum of 20 hours per week during this class.

Student must turn in the attendance log and the procedures log in a monthly basis

The attendance log must include the date, starting and ending time, total number of hours per day and must be signed by the supervising technologist.

- The procedures log must include: procedure performed, date, start and completion time, scan type, and if it was observed (O), or performed under direct supervision (DS) or indirect supervision (IS).

Students must complete the clinical training within a twelve (12) months period unless unusual circumstances occurs. Extensions to the length of training due to unusual circumstances that must be approved by Program Director.

If student does not complete the required number of hours during schedule time, three (3) things might happen:

- First, the student will have to find his own place to complete the remaining hours. The school must approve clinical site and obtain an affiliation Agreement or
- Second, the student must paid an additional \$500 fee to the school per every additional month required for the student to complete the training or
- Third, the student will be withdraw from the program.

Attendance Reports:

Clinical attendance logs must be completed daily. Students not recording attendance daily in the attendance log will count as an absence.

Attendance log is to be at the clinical site at all times. Under no circumstances (except if requested by a school official) the student will remove the attendance log from the facility. If attendance log is not at the clinical site at the time of clinical coordinator visit, the attendance for that period will not count, and the student will be marked absent.

If student is attending more than one facility, the student must have an individual attendance log for each site.

The procedures log must be completed daily. Students who do not complete the procedures log on a daily basis will also be considered absent for those days, even if the attendance log is completed.

Students accumulating three (3) absences will be subject to disciplinary action. Students failing to comply with the above process in three (3) occasions, will automatically be terminated from the program.

Course Schedule:

The clinical hours schedule depends on the assigned facility hours of operation. School guarantees clinical hours during weekdays, Monday through Friday during office business hours (7 am to 5 pm). Students will select facility, day, and time desire to attend. Med Academy will decide student schedule based on availability.

Clinical Performance

Quarterly Performance Evaluation

Every three months the student will be evaluated by the clinical supervisor. This evaluation includes:

- Punctuality
- Readily and availability
- Uniform and appearance
- Professionalism and manners
- Interest in learning and Improvement
- Environmental care

Affiliated Clinical Sites

- Palm Springs Hospital
- Larkin Hospital
- La Colonia Medical Centers
- Vital Imaging
- Universal Imaging
- Lakes Radiology
- Medical City
- Doral Medical Imaging

Clinical Site Orientation

Every student will receive a clinical orientation every time the student starts a clinical rotation in a new affiliated clinical site. This orientation will be conducted by the clinical coordinator and the clinical site student supervisor.

The clinical orientation will include:

- Introduction to the staff members and managers
- Tour of the facility
- Review of the clinical site privacy policy
- Review of the institution general health and safety plans
- Review of allergic reactions policies and procedures
- Review of the safety policies and procedures
- Review of the equipment, and patient protection

Clinical Site Visit Report

A clinical site visit report will be completed by the clinical coordinator every time he or she visits the clinical site. This report will include:

- Was the student present at the clinical site on schedule day
- Was the student properly dressed according to the school uniform policy
- The clinical instructor and other staff members provide a positive feedback from the student
- Is the student showing progress on training and performing to the level of training?
- Is the student providing satisfactory patient care according to the level of training?
- Is the student taking care of the equipment and maintaining a clean environment?

Student Guidelines

- Wear School uniform at all times
- Wear School ID Badge at all times
- Wear Facility ID badge (If required)
- No cell phones, tablets or any other electronic device is permitted in the patient care area.
- Student in need of making a phone call must ask for permission and step out the patient care area.

Notifications

- Students must notify the clinical coordinator in advance of any schedule change.
- Any schedule change must be approved by clinical coordinator and clinical instructor.
- Student must also notify the clinical coordinator and clinical instructor if not attending to training in any particular day(s).

CLINICAL FORMS



MED Academy

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Clinical Instructor Evaluation (Form 303)

Clinical Instructor: _____

Evaluator: _____

Date of Evaluation: _____

Purpose: The purpose of this evaluation is to provide feedback of faculty classroom presentation, student interaction, lecture preparation, and other pertinent elements necessary for optimal class facilitation. This evaluation is to be used as a performance evaluation tool for professional improvement and to ensure that faculty are meeting expected instructional standards.

Performance Standards

Clinical Instructor demonstrates efficiency of:	Exceeds Standard	Meets Standard	Below Standard
1. The instructor was on time and readily available during clinic hours. Comments:			
2. The instructor was responsible for including conference time in this clinic (rotation). Comments:			
3. The instructor displayed a courteous and professional manner toward the student and the patients. Comments:			
4. The instructor provided the student with clear, specific feedback about clinical performance. Comments:			
5. The instructor taught performance and thinking skills by assisting in the use of instruments and giving demonstrations. Comments:			
6. The instructor had expertise in the clinic areas assigned. Comments:			

Overall Comments:

Instructor Signature: _____

Date: _____

Evaluator Signature: _____

Date: _____

MED Academy
3418 West 84th Street, Suite 106 Hialeah, FL 33018

Clinical Competency Procedure (Form 304)

Student Name: _____

Date: _____

Evaluated by: _____

Procedure: _____

Pass Equivalent (6.66)

Fail (0)

Competency Grade: _____

Item #	Description	Pass	Fail
1	Patient Identification: Identify the patient with more than one source (name, picture ID, wrist band)		
2	Patient assessment and safety: patient interview, safety questionnaire assessment, and anti-noise devices		
3	Standard (Universal) precautions		
4	Patient communication: clear and concise directions for patient to understand and follow		
5	Patient monitoring: monitor the patient during procedure		
6	Evaluation of the doctor's order: type of exam, patient history,		
7	Equipment manipulation: X-Ray tube, patient table, bucky.		
8	Position skills: patient position, landmark selection, patient comfort		
9	Imaging Technique: KVP, MAS selection depending on body part and patient body habits.		
10	Anatomic coverage: demonstrate required anatomy-anatomic structures optimally		
11	Optimal image production/quality.		
12	Performance speed: exam performed within reasonable time frame within consideration of the level of difficulty of procedure and patient condition		
13	Anatomy identifier: ability to identify anatomic structures in radiology images		
14	Caring disposition: demonstrate compassion and empathy for the patient's condition and vulnerable state. Exhibits understanding, knowledge and gentle care.		
15	Post examination follow-up: assist the patient off the table, communicate proper post-examination instruction, direct patient to dressing area/exit, clean exam room		

Comments:

Oriente Signature: _____

Date: _____

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Student Clinical Evaluation (Form 306)

Evaluation Period: _____

Student Name: _____

Date: _____

Evaluated by: _____

Grade: _____

SA - Strongly Agree (10)

A - Agree (7.5)

N - Neutral (5)

D - Disagree (2.5)

SD - Strongly Disagree (0)

Question	SA	A	N	D	SD
The student was on time for clinical training.					
The student was readily available during clinic hours.					
The student wears the complete uniform and looks professional during clinical hours.					
The student displayed a courteous and professional manner to patients.					
The student displayed a courteous and professional manner to staff members.					
The student shows interest in learning during the clinical training.					
The student was on time back from breaks.					
The student shows improvement during this clinical training period.					
The student took good care of the equipment during training.					
The student maintained a clean environment in the MRI area during training.					

Comments:

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Clinical Site Visit Report

Clinical Site: _____ **Date:** _____

Student Name: _____

Topic	Yes	No
1. The student was at the clinical site assigned on visited day	<input type="checkbox"/>	<input type="checkbox"/>
2. The Student was properly dressed according to school uniform policy	<input type="checkbox"/>	<input type="checkbox"/>
3. The clinical instructor provided positive feedback of the student	<input type="checkbox"/>	<input type="checkbox"/>
4. Staff members provided positive feedback of the student	<input type="checkbox"/>	<input type="checkbox"/>
5. The student is showing process in training	<input type="checkbox"/>	<input type="checkbox"/>
6. The student is capable of performing RT procedures according to the level of training	<input type="checkbox"/>	<input type="checkbox"/>
7. The student provides satisfactory patient care according to the level of training	<input type="checkbox"/>	<input type="checkbox"/>
8. The student displayed a courteous and professional manner to patients and staff members.	<input type="checkbox"/>	<input type="checkbox"/>
9. The student takes care of the equipment	<input type="checkbox"/>	<input type="checkbox"/>
10. The student maintains a clean environment	<input type="checkbox"/>	<input type="checkbox"/>

Student Feedback:

Clinical Coordinator Signature: _____

Date: _____

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Clinical Orientation Section Acknowledgment

Student Name: _____

As a student of Med Academy, I certify attending to the Clinical orientation section where the following topics were explained to me:

- a) Copy of the Clinical Practicum Handbook was provided to me.
- b) Clinical policies listed in the Clinical Practicum Handbook were explained to me.
- c) Must wear uniform to all clinical activities.
- d) Must wear ID at all times while are at the clinical sites.
- e) Must wear facility ID at all times while are at the clinical sites (When applicable).
- f) Agree not to use cell phone or any other electronic devices in the patient care area.
- g) Protect patient confidentiality
- h) Adhere to the clinical site policies and procedures.
- i) Comply with safety regulation
- j) Maintain the attendance and procedures log up to date.
- k) Understand that the Clinical Training must be completed within a twelve (12) months period unless unusual circumstances occurs.
- l) Understand and comply with satisfactory academic process. To avoid any difficulties, keep your grade and evaluations above 75%.
- m) Maintain the clinical standards and understand the measures which will be taken if I do not maintain these standards.
- n) Demonstrate competency in clinical procedures covered in the length of the course.
- o) Understand that for graduation I must successfully complete all specified clinical requirements for the program of study which includes:
 - Complete all clinical hours listed on the Enrollment Agreement.
 - Maintain a satisfactory progress evaluation throughout the entire clinical training.
 - Demonstrate competency in all clinical procedures covered in the length of the course.
- p) Understand that if clinical hours and competencies are not completed in a timely manner:
 - School will charge the amount of \$500.00 per every additional month required to complete clinical hours or competencies.

I was informed and advise on all of the above items.

Student's Signature

Date

Clinical Coordinator

Date