## Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>GENERAL INFORMATION</td>
<td>0</td>
</tr>
<tr>
<td>THE HANDBOOK</td>
<td>6</td>
</tr>
<tr>
<td>LOCATION OF THE SCHOOL</td>
<td>6</td>
</tr>
<tr>
<td>DESCRIPTION OF WINCHESTER MEDICAL CENTER</td>
<td>6</td>
</tr>
<tr>
<td>HISTORY, OWNERSHIP, PROGRAM OFFERINGS AND ENROLLMENT</td>
<td>7</td>
</tr>
<tr>
<td>PROGRAM ADMINISTRATION</td>
<td>8</td>
</tr>
<tr>
<td>MISSION STATEMENT</td>
<td>9</td>
</tr>
<tr>
<td>GOALS AND OUTCOMES</td>
<td>9</td>
</tr>
<tr>
<td>DURATION OF THE PROGRAM</td>
<td>10</td>
</tr>
<tr>
<td>JOB PLACEMENT</td>
<td>10</td>
</tr>
<tr>
<td>ACCREDITATION</td>
<td>10</td>
</tr>
<tr>
<td>POLICY OF NON-DISCRIMINATION</td>
<td>11</td>
</tr>
<tr>
<td>APPLICATION TO THE PROGRAM</td>
<td>12</td>
</tr>
<tr>
<td>APPLICATION PROCEDURE</td>
<td>12</td>
</tr>
<tr>
<td>APTITUDE (TEAS) TEST</td>
<td>13</td>
</tr>
<tr>
<td>OBSERVATION</td>
<td>13</td>
</tr>
<tr>
<td>PRELIMINARY INTERVIEWS</td>
<td>14</td>
</tr>
<tr>
<td>FINAL INTERVIEWS</td>
<td>14</td>
</tr>
<tr>
<td>BACKGROUND CHECK/DRUG SCREEN</td>
<td>14</td>
</tr>
<tr>
<td>DEPOSIT AND BOOK FEES</td>
<td>14</td>
</tr>
<tr>
<td>TRANSFER STUDENTS</td>
<td>14</td>
</tr>
<tr>
<td>COST OF THE PROGRAM</td>
<td>15</td>
</tr>
<tr>
<td>TUITION</td>
<td>15</td>
</tr>
<tr>
<td>TRUTH IN LENDING POLICY</td>
<td>15</td>
</tr>
<tr>
<td>REIMBURSEMENT POLICY</td>
<td>15</td>
</tr>
<tr>
<td>BOOKS</td>
<td>16</td>
</tr>
<tr>
<td>OTHER EXPENSES</td>
<td>16</td>
</tr>
<tr>
<td>OPTIONAL EXPENSES</td>
<td>16</td>
</tr>
<tr>
<td>HOUSING AND MEALS</td>
<td>17</td>
</tr>
<tr>
<td>STUDENT HEALTH</td>
<td>17</td>
</tr>
<tr>
<td>HEALTH ASSESSMENT</td>
<td>17</td>
</tr>
<tr>
<td>HEALTH AND SAFETY</td>
<td>17</td>
</tr>
<tr>
<td>STUDENT ILLNESS/INJURIES WHILE IN SCHOOL</td>
<td>18</td>
</tr>
<tr>
<td>AMERICAN’S WITH DISABILITIES ACT</td>
<td>18</td>
</tr>
<tr>
<td>PROGRAM RECORDS</td>
<td>19</td>
</tr>
<tr>
<td>STUDENT RECORDS</td>
<td>19</td>
</tr>
<tr>
<td>RECORD RETENTION</td>
<td>19</td>
</tr>
<tr>
<td>ATTENDANCE POLICY</td>
<td>19</td>
</tr>
<tr>
<td>IDENTIFICATION BADGES</td>
<td>19</td>
</tr>
<tr>
<td>ATTENDANCE HOURS – DIDACTIC</td>
<td>20</td>
</tr>
<tr>
<td>ATTENDANCE HOURS – CLINICAL</td>
<td>20</td>
</tr>
<tr>
<td>MANDATORY EVENTS</td>
<td>21</td>
</tr>
<tr>
<td>Topic</td>
<td>Page</td>
</tr>
<tr>
<td>----------------------------------------------------------------------</td>
<td>------</td>
</tr>
<tr>
<td>LUNCH AND BREAK POLICY</td>
<td>21</td>
</tr>
<tr>
<td>NOTIFICATION OF UNPLANNED ABSENCE</td>
<td>22</td>
</tr>
<tr>
<td>REPORTING ABSENCES</td>
<td>22</td>
</tr>
<tr>
<td>MAKE-UP TIMES</td>
<td>22</td>
</tr>
<tr>
<td>VOLUNTARY HOURS</td>
<td>23</td>
</tr>
<tr>
<td>VACATIONS</td>
<td>23</td>
</tr>
<tr>
<td>ABSENTEEISM PRIOR TO OR IMMEDIATELY FOLLOWING VACATION</td>
<td>23</td>
</tr>
<tr>
<td>FUNERAL LEAVE</td>
<td>23</td>
</tr>
<tr>
<td>STUDENT PREGNANCY POLICY</td>
<td>24</td>
</tr>
<tr>
<td>MEDICAL LEAVE OF ABSENCE</td>
<td>24</td>
</tr>
<tr>
<td>ATTENDANCE PROBLEMS AND CORRECTIVE ACTION</td>
<td>25</td>
</tr>
<tr>
<td>DISMISSAL DUE TO EXCESSIVE ABSENTEEISM</td>
<td>25</td>
</tr>
<tr>
<td>MANAGEMENT PREROGATIVE</td>
<td>25</td>
</tr>
<tr>
<td>ABANDONMENT</td>
<td>26</td>
</tr>
<tr>
<td>RADIATION PROTECTION/MONITORING</td>
<td>26</td>
</tr>
<tr>
<td>RADIATION PROTECTION POLICY</td>
<td>26</td>
</tr>
<tr>
<td>RADIATION BADGES</td>
<td>26</td>
</tr>
<tr>
<td>RADIATION MONITORING</td>
<td>27</td>
</tr>
<tr>
<td>RADIATION MONITORING – EXCESSIVE EXPOSURE INCIDENTS</td>
<td>27</td>
</tr>
<tr>
<td>ENERGIZED CLASSROOM USAGE</td>
<td>28</td>
</tr>
<tr>
<td>MRI SAFETY</td>
<td>29</td>
</tr>
<tr>
<td>MRI SAFETY POLICY</td>
<td>29</td>
</tr>
<tr>
<td>DIDACTIC INSTRUCTION</td>
<td>30</td>
</tr>
<tr>
<td>HOURS OF INSTRUCTION</td>
<td>30</td>
</tr>
<tr>
<td>TEACHING METHODS AND EVALUATIONS</td>
<td>30</td>
</tr>
<tr>
<td>ASSIGNMENTS</td>
<td>30</td>
</tr>
<tr>
<td>ACADEMIC AND CLINICAL FACILITIES</td>
<td>30</td>
</tr>
<tr>
<td>REQUIRED COURSES</td>
<td>31</td>
</tr>
<tr>
<td>COURSES BY SEMESTER WITH ASSIGNED CREDIT</td>
<td>31</td>
</tr>
<tr>
<td>CREDIT ASSIGNMENT</td>
<td>31</td>
</tr>
<tr>
<td>COURSE DESCRIPTIONS</td>
<td>32</td>
</tr>
<tr>
<td>ANATOMY AND PHYSIOLOGY I AND II</td>
<td>32</td>
</tr>
<tr>
<td>ANATOMY AND PHYSIOLOGY III AND IV</td>
<td>32</td>
</tr>
<tr>
<td>INTRODUCTION TO RADIOLOGIC TECHNOLOGY AND PATIENT CARE I</td>
<td>32</td>
</tr>
<tr>
<td>INTRODUCTION TO RADIOLOGIC TECHNOLOGY AND PATIENT CARE II</td>
<td>33</td>
</tr>
<tr>
<td>INTRODUCTION TO RADIOLOGIC TECHNOLOGY AND PATIENT CARE III</td>
<td>33</td>
</tr>
<tr>
<td>INTRODUCTION TO RADIOLOGIC TECHNOLOGY AND PATIENT CARE IV</td>
<td>33</td>
</tr>
<tr>
<td>MEDICAL TERMINOLOGY I, II</td>
<td>34</td>
</tr>
<tr>
<td>RADIOGRAPHIC IMAGE ANALYSIS I, II, III, IV</td>
<td>34</td>
</tr>
<tr>
<td>RADIOGRAPHIC POSITIONING AND PROCEDURES I AND II</td>
<td>34</td>
</tr>
<tr>
<td>RADIOGRAPHIC POSITIONING AND PROCEDURES III AND IV</td>
<td>34</td>
</tr>
<tr>
<td>RADIOGRAPHIC POSITIONING AND PROCEDURES LAB I AND II (SIMULATIONS)</td>
<td>35</td>
</tr>
<tr>
<td>RADIOGRAPHIC PHYSICS I AND II</td>
<td>35</td>
</tr>
<tr>
<td>RADIOGRAPHIC PHYSICS III AND IV</td>
<td>35</td>
</tr>
</tbody>
</table>
INDEX

RADIOBIOLOGY I AND II .......................................................... 35
RADIOGRAPHIC PROCEDURES I (CLINIC) ................................ 35
RADIOGRAPHIC PROCEDURES II (CLINIC) .................................. 35
RADIOGRAPHIC PROCEDURES III (CLINIC) ................................ 36
RADIOGRAPHIC PROCEDURES IV (CLINIC) .................................. 36
RADIOGRAPHIC QUALITY AND RADIOGRAPHIC EXPOSURE I AND II ........................................... 36
RADIOGRAPHIC QUALITY AND RADIOGRAPHIC EXPOSURE III AND IV ........................................... 36
RADIATION PROTECTION I AND II .............................................. 36
RESEARCH PAPER AND ORAL PRESENTATION ........................................... 37
GRADING SYSTEM ................................................................. 37
GRADING SCALE ........................................................................... 37
GRADING PERIODS ....................................................................... 37
MID-SEMESTER GRADES ............................................................... 37
END OF SEMESTER GRADES ........................................................ 38
FAILURE OF ACADEMIC TESTS ..................................................... 38
EXAMINATIONS ............................................................................ 38
COMPREHENSIVE FINAL EXAMINATIONS ........................................... 38
RESEARCH PAPERS ...................................................................... 38
RESEARCH PAPER GUIDELINES .................................................... 39
SEMESTER PAPERS ....................................................................... 39
CLINICAL AND DEVELOPMENT CV ................................................. 40
SEMINAR ....................................................................................... 40
CLINICAL OBJECTIVES ............................................................... 40
CORRELATION OF DIDACTIC TO CLINICAL COMPONENT OF PROGRAM ........................................... 40
POSITIONING TEST FAILURES ...................................................... 40
SIMULATION FAILURES .................................................................. 41
COURSE OF STUDY ........................................................................ 41
INTRODUCTION TO THE CLINIC ..................................................... 42
LOCATION OF CLINICAL SITES ..................................................... 43
ORIENTATION TO ANCILLARY AREAS .................................................. 44
CLINICAL GRADES ........................................................................ 44
CLINICAL ROTATIONS .................................................................... 45
SUPERVISION OF STUDENTS IN THE CLINICAL SETTING ...................... 46
DIRECT SUPERVISION ..................................................................... 46
INDIRECT SUPERVISION .................................................................. 46
REPEAT RADIOGRAPHS .................................................................. 46
GRADING OF STUDENTS IN THE CLINIC ............................................. 47
POLICY FOR CLINICAL COMPETENCIES ........................................... 47
WMC-MRP REQUIRED CLINICAL COMPETENCIES ........................................... 49
CONFLICT OF INTEREST ................................................................ 51
DEFINITIONS .................................................................................. 51
STUDENTS WITHDRAWING FROM PROGRAM ...................................... 52
OUTSIDE EMPLOYMENT ................................................................ 52
REFERENCE LIBRARY .................................................................... 52
FINANCIAL ASSISTANCE ................................................................. 52
STUDENT CONDUCT .................................................................. 53
  STUDENT CONDUCT POLICY .................................................. 53
  STUDENT PARKING POLICY ..................................................... 53
  INTERNET USE ........................................................................ 53
SEXUAL/WORKPLACE HARASSMENT POLICY .............................. 54
HORIZONTAL VIOLENCE .......................................................... 54
SMOKING .................................................................................. 54
TELEPHONE POLICY .................................................................. 55
CAUSES FOR DISCIPLINARY ACTION ......................................... 55
  DRESS CODE VIOLATIONS ....................................................... 55
  GENERAL VIOLATIONS .......................................................... 57
  VIOLATIONS IN THE CLINICAL SETTING ................................. 58
  VIOLATIONS IN THE DIDACTIC SETTING .................................. 59
  VIOLATIONS RELATED TO UNPROFESSIONALISM .................. 59
  MARKER VIOLATIONS ........................................................... 60
  BREACH OF PROFESSIONAL ETHICS ...................................... 60
STUDENT COUNSELING/ADVISEMENT ...................................... 61
DISCIPLINARY ACTIONS ................................................................ 61
  SUSPENSION ........................................................................... 61
PROBATIONARY STATUS ............................................................ 62
REASONS FOR DISMISSAL FROM THE MEDICAL RADIOGRAPHY PROGRAM ........................................................................... 62
GRIEVANCE POLICY FOR STUDENTS ......................................... 63
  GRIEVANCE PROCEDURE FOR STUDENTS ............................... 63
COMMUNICABLE DISEASES .......................................................... 64
HANDWASHING POLICY / INFECTION CONTROL .............................. 64
OBTAINING TWO PATIENT IDENTIFIERS ...................................... 65
TERMINAL COMPETENCIES ....................................................... 65
GRADUATION ............................................................................ 66
COLLEGE CREDIT ........................................................................ 66
  ARTICULATION AGREEMENT WITH ST JOSEPH’S COLLEGE – ON-LINE ........................................................... 66
THE AMERICAN REGISTRY OF RADIOLOGIC TECHNOLOGISTS (ARRT) EXAMINATION .................................................. 67
  RESPONSIBILITIES OF THE APPLICANT .................................... 67
  RESPONSIBILITIES OF THE PROGRAM DIRECTOR ...................... 68
CONTINUING CERTIFICATION ....................................................... 68
STATE LICENSURE ....................................................................... 68
STANDARDS FOR AN ACCREDITED EDUCATIONAL PROGRAM IN RADIOGRAPHY .......................................................... 69
POLICY CHANGES ....................................................................... 69
PROGRAM OFFICIALS .................................................................. 70
WINCHESTER MEDICAL CENTER/VALLEY HEALTH SYSTEM OFFICIALS .......................................................... 71
APPENDIX .................................................................................... 72
  STUDENT ENROLLMENT AGREEMENT ....................................... 73
  SIGNATURE OF RESPONSIBILITY ............................................. 78
  EMERGENCY CONTACT INFORMATION FORM ............................. 79
GENERAL INFORMATION

THE HANDBOOK
This handbook is written with the purpose of providing information to the prospective student who is interested in a career in Radiologic Technology and as a guide to the student who is enrolled in the Winchester Medical Center Medical Radiography Program. Valley Health and Program policies are defined here. Other materials are provided to give information that will enrich any application or educational process. The Handbook does not contain all the information needed by the student. Students receive necessary information through various forms of communication (written and verbal) throughout the program. Please direct any questions or concerns to:

MEDICAL RADIOGRAPHY PROGRAM
Winchester Medical Center
220 Campus Boulevard, Suite 300
Winchester, Virginia 22601

Telephone: (540) 536-7935
Fax: (540) 536-7972

LOCATION OF THE SCHOOL
The Medical Radiography Program is located at the Winchester Medical Center in the heart of the beautiful Shenandoah Valley, approximately 75 miles west of our nation's capital in Winchester, Virginia. Classrooms are located in the System Support Building at 220 Campus Blvd., Suite 300, Winchester, VA.
DESCRIPTION OF WINCHESTER MEDICAL CENTER

Founded in 1901 as a private, non-profit institution, Winchester Medical Center originally was one of a few widely separated medical care facilities catering primarily to persons situated near Winchester, Virginia. The ensuing century has seen substantial population growth in the Shenandoah Valley of Virginia as well as the establishment of other hospitals in nearby counties, in both Virginia and West Virginia. Winchester Medical Center, Inc. has developed into a referral hospital of regional importance serving residents of northwestern Virginia and the surrounding territories. Winchester Medical Center is a not-for-profit hospital offering a full range of medical and surgical services for the 250,000 residents of our tri-state area. It is the only regional referral center within 75 miles of Winchester. As a health care provider for more than 100 years, Winchester Medical Center maintains its founding ideal to provide the highest quality health care with small town compassion.

In support of our commitment to quality, the hospital voluntarily submits to review by the Joint Commission on Accreditation of Healthcare Organizations. The commission has consistently awarded the hospital full accreditation.

Winchester Medical Center is a:

- Level II Trauma Center
- Chest Pain Center
- Advance Primary Stroke Center
- Level 4 Epilepsy Center
- Level III Neonatal Intensive Care Unit (NICU)
- Magnet Designated Hospital

The purpose and direction of Winchester Medical Center is as follows:

1. Winchester Medical Center is dedicated to the promotion and improvement of the general health of the population in its service area.

2. Consistent with need and feasibility, Winchester Medical Center is committed to providing a broad spectrum of acute and restorative services on an inpatient, outpatient and outreach basis.

3. Winchester Medical Center is committed to the enhancement of its role as a referral hospital and regional medical center, providing an educational and teaching environment for allied and medical professionals and to its patients as well as providing primary, secondary, and an expanding group of tertiary services as the need is demonstrated.

4. To aid in the development of its role as a regional medical center, Winchester Medical Center subscribes to the concept of developing shared or integrated health systems wherever feasible.

The Winchester Medical Center Mission is:

“Serving our Community by Improving Health.”
Winchester Medical Center is part of Valley Health, a non-profit organization with hospitals and medical facilities throughout West Virginia and the Top of Virginia region. Valley Health is a community partner. Based in Virginia, Valley Health is composed of six core hospitals:

- Hampshire Memorial Hospital
- Page Memorial Hospital
- Shenandoah Memorial Hospital
- War Memorial Hospital
- Warren Memorial Hospital
- Winchester Medical Center

Valley Health brings together 605 licensed inpatient beds, 166 long-term care beds, 5,300 employees, and a medical staff exceeding 500 professionals.

The Valley Health vision is:

“One system – one purpose: Leading with innovative healthcare.”

HISTORY, OWNERSHIP, PROGRAM OFFERINGS AND ENROLLMENT
The Medical Radiography Program is owned and operated by the Winchester Medical Center, a part of Valley Health Systems. The school began in 1948. In 2015, the school celebrated 65 years since the first student graduated. The program offers a certificate in Radiologic Technology and is accredited by the Joint Review Committee on Education in Radiologic Technology (JRCERT) for a program total capacity of 40 students.

PROGRAM ADMINISTRATION

**Winchester Medical Center - Board of Trustees**
Responsibilities – Approve budgets

**PRINCIPAL ADMINISTRATORS:**

**Mark H. Merrill, BA MSPH**
President and Chief Executive Officer, Valley Health Systems
Responsibilities – Approve budgets and operations

**Grady W. Philips, III, FACHE**
Senior Vice President, Valley Health – President, Winchester Medical Center
Responsibilities – Approve budgets and operations

**Paulette Duckrey, BSRT (R) (M), CRA**
Corporate Director of Medical Imaging
Responsibilities – Approve budgets and operations, liaison between clinical staff and Medical Radiography Program
MISSION STATEMENT
The mission statement of the Winchester Medical Center Medical Radiography Program:

“Providing healthcare excellence by educating caring, competent entry level Radiologic Technologists.”

GOALS AND OUTCOMES

Goal 1:
Students will complete the program with cognitive and psychomotor skills necessary to demonstrate clinical competence necessary to enable them to find and retain employment in the medical imaging field.

Outcomes:
- Graduates will provide a level of care to satisfy the needs of patients while in the medical imaging department.
- Graduates will demonstrate adequate clinical performance as an entry-level practitioner.
- Graduates will demonstrate competency.

Goal 2:
Students will graduate with the ability to interact as a healthcare worker in a compassionate, ethical and professional manner.

Outcomes:
- Graduates will demonstrate positive ethical behaviors.
- Students will perform tasks in a professional manner.
- Graduates will perform tasks in a compassionate manner.

Goal 3:
Students will graduate with the necessary oral and written communication skills to interact with patients and other healthcare providers.

Outcomes:
- Students will be able to demonstrate oral communication skills.
- Students will demonstrate effective written communication skills.

Goal 4:
Graduates will be able to think critically and solve problems in their clinical work environment integrating clinical and didactic (medical imaging, anatomy, positioning, equipment, patient care radiation biology/protection, radiographic quality/quality assurance and radiologic physics) instruction.
Outcomes:
- Students will develop critical thinking skills.
- Students will demonstrate the ability to verbalize solutions to problems regarding rejected images.
- Students will be aware of patient condition and be able to adapt positioning and technique as appropriate.

Goal 5:
Students will have a functioning knowledge of radiation protection for patients, self and others and be able to assess patients for safety and satisfaction during all medical imaging examinations.

Outcomes:
- Students will demonstrate radiation protection skills including time, distance, and shielding as appropriate.

Goal 6:
The program will promote professional growth and create an awareness of lifelong learning.

Outcomes:
- Students will recognize the significance of professional organizations and membership.
- Students will be active in the VSRT/ASRT meetings.
- Students will understand the importance of confidentiality pertaining to patient information.
- Students will demonstrate an understanding of the pathways of career advancement.

DURATION OF THE PROGRAM
The Winchester Medical Center Medical Radiography Program, according to JRCERT recommendation, chooses to follow the ASRT curriculum guide for radiography programs. The curriculum has been designed to be completed in four consecutive semesters (approximately 2 years).

JOB PLACEMENT
The Medical Radiography Program does not provide job placement services. On occasion, the school may learn of job openings and will pass this information to senior students or graduates who are seeking job opportunities.

ACCREDITATION
The Winchester Medical Center Medical Radiography Program has been a functioning program for over 65 years. The Program is governed by the Joint Review Committee on Education in Radiologic Technology (JRCERT). The status of full accreditation has been attained following a site visit to our institution by the JRCERT. The institution is reviewed at least once every eight years with an interim report at the end of four years. Periodic review by the JRCERT is conducted as needed. The curriculum taught in the program follows the curriculum guidelines set forth by the American Society of Radiologic Technologists (ASRT).

Our graduates are qualified to sit for the American Registry of Radiologic Technologists (ARRT) examination as a result of this accreditation and are sought by hospitals in the tri-state area and by many institutions throughout the country.
The Medical Radiography Program is certified by the State Council of Higher Education for Virginia (SCHEV).

Additional information concerning accreditation, certification, curriculum, and program outcomes may be obtained from the following websites:

**JRCERT:** [http://www.jrcert.org or mail@jrcert.org](http://www.jrcert.org or mail@jrcert.org)

Joint Review Committee on Education in Radiologic Technology  
20 N Wacker Dr., Suite 2850  
Chicago, IL 60606-3182  
Phone: (312) 704-5300

**ARRT:** [https://www.arrt.org](https://www.arrt.org)

American Registry of Radiologic Technologists  
1255 Northland Drive  
St. Paul, MN 55120  
*(651) 687-0048*

**ASRT:** [http://www.asrt.org](http://www.asrt.org)

American Society of Radiologic Technologists  
15000 Central Ave. SE  
Albuquerque, NM 87123-3909  
Phone: 800-444-2778  
505-298-4500

**SCHEV:** [http://www.schev.edu](http://www.schev.edu)

State Council of Higher Education for Virginia  
101 N. 14TH St., 10TH FL, James Monroe Bldg.  
Richmond, VA 23219  
Tel: (804) 225-2600

**POLICY OF NON-DISCRIMINATION**

The Winchester Medical Center Medical Radiography Program operates on a nondiscriminatory basis. This policy prohibits discrimination on the basis of race, color, creed, sex, national origin, sexual orientation or age toward persons applying for admission to the program or applicants for staff positions within the program.

This policy is consistent with our objectives of providing equal education and employment opportunities and high quality health care.
APPLICATION TO THE PROGRAM

APPLICATION PROCEDURE
Applications for admission may be obtained by contacting the Medical Radiography Program or the hospital website www.valleyhealthlink.com. Applications are accepted at all times; however they are processed in the fall and early winter for classes beginning the following June. Deadline for applications for each year is December 15. **Official copies** of high school and college transcripts are required.

Application, application fee of $25.00 and official transcripts must be mailed to the following address:

Winchester Medical Center  
Medical Radiography Program  
220 Campus Boulevard, Suite 300  
Winchester, VA  22601

Beginning with the Class graduating in 2015 the ARRT requires all graduates who sit for the registry examination to have completed an Associate’s Degree or higher. Satisfactory grades of C (2.5) or higher must have been achieved in **each** of the prerequisite classes for consideration by the selection committee. The following Program prerequisites must be included in the degree or completed prior to entering the program.

- College level Math (Math for Allied Health or higher) – 3 credits
- College Composition (English Comp 101 or higher) – 3 credits
- Science (Physics, Anatomy, Biology, Chemistry) – 3 credits
- Ethics or a Humanities Elective – 3 credits
- Psychology or Sociology – 3 credits

*With the exemption of College Math and College Composition, some classes may be substituted at the discretion of the Program Director and faculty.*

NOTE: Applicants who are nearing completion of their degree **may** be considered, providing no more than **6 credit hours** remain upon entering the program. **Students will have one year after entering the program to complete all required credits for the Associate’s Degree and any lacking prerequisites. Failure to complete the Associate’s Degree and or any lacking prerequisites by the end of the 2nd semester of the program will result in dismissal from the program.**

**Academic degree requirement effective 2015 for primary certification:**

Eligibility requirements for ARRT certification in Radiography, Nuclear Medicine Technology, and Radiation Therapy and for the primary pathway to MRI and
Sonography will — effective January 1, 2015 — call for candidates to have earned an associate (or more advanced) degree from an accrediting agency recognized by ARRT.

ARRT believes that the general education courses required for an academic degree will provide a firm foundation to support the evolving role of the technologist and the lifelong learning necessitated by the increasing rate of technological change. Quantitative and communication skills and understanding of human behavior that are acquired through general education classes are believed by ARRT to have value in continuing to shape professionalism and advancement of a Registered Technologist’s role in healthcare.

The degree will not need to be in radiologic sciences, and it can be earned before entering the educational program or after graduation from the program. The degree requirement will apply to graduates on or after January 1, 2015.

Individuals who complete a recognized non-degree granting program prior to that date will not be subject to the degree requirement.

During the period while the academic degree requirement was posted for public comment and approved by the Board of Trustees, many R.T.s voiced support as a “great advancement” for our profession.

ARRT leadership fully expects non-degree granting programs to continue graduating well-qualified professionals who are eligible for ARRT certification — either through an articulation agreement with an ARRT-recognized degree-granting organization or by admitting only those who already have an academic degree. (www.arrt.org)

APTITUDE (TEAS) TEST

After application, fees, and transcripts are submitted, an aptitude test will be administered by the Medical Radiography Program. The fee for the aptitude test is $50.00 (subject to change). The aptitude test required for prospective students for the Medical Radiography Program is called the Test of Essential Academic Skills V for Allied Health Test (TEAS). The test focuses on math, grammar, and reading comprehension.

OBSERVATION

If the aptitude test results along with the prerequisite college courses demonstrate acceptable grades, applicants will be invited back for a preliminary interview and career preview within the WMC Medical Imaging department. Time spent in the Medical Imaging department will be in rotation with current students. This opportunity will confirm interest in the program by allowing the applicant to observe examinations that are offered at our institution and to speak with current students about classes, study times, etc. In an effort to confirm observation of clinical areas, applicants are signed off as having observed different examinations. This observation list is placed in the prospective applicant’s file. A preliminary interview with the school faculty will also take place at this time.
PRELIMINARY INTERVIEWS
Applicants will participate in a preliminary interview. A point system is used to evaluate the applicants. Points are awarded for punctuality, professional attire, number of prerequisites completed, and other criteria. Applicants with the highest scores will be invited back for final interviews.

FINAL INTERVIEWS
After all observations are completed, qualified applicants will be chosen for final interviews. Applicants are requested to read the handbook prior to their interview. Applicants chosen for final interviews will go before a Selection Committee. The Selection Committee consists of representatives from Radiology Management, the Medical Advisor to the Medical Radiography Program, the program faculty, a graduate of the program, and the Program Director. This committee determines who will be selected to participate in the Medical Radiography Program. Decisions for admission to the program are based on a point system. Applicants are scored on completion of prerequisites, average of the English and Math TEAS scores, interaction with staff and students, oral and written communication (essay) and other criteria.

Notification of acceptance into the program will be e-mailed to the student within 1 week of the final interview followed by a letter of acceptance which will be mailed within 2 weeks of the final interview.

Female students who are accepted to the program are notified by e-mail to read the pregnancy policy and confirm that they have done so prior to the beginning of the program.

BACKGROUND CHECK/DRUG SCREEN
Applicants selected for the program must submit to a background check and drug testing. Applicants are responsible for these fees. Drug testing and background checks must be completed by May 15. Failure to do so will result in the applicant forfeiting his/her seat in the class.

DEPOSIT AND BOOK FEES
Upon acceptance to the program, selected applicants will be required to place a non-refundable deposit of $100 to confirm their intention to enter the program. The deposit will be credited toward the first semester tuition fee of $3,000 which is due June 1. Book fees are also due June 1.

TRANSFER STUDENTS
Radiologic Technology Programs are not required to accept transfer students. Individual cases may be considered.
COST OF THE PROGRAM

TUITION
Tuition will be charged in the amount of $12,000.00 for the program payable on a semester basis (2 semesters per year at $3,000.00 per semester). Checks should be made payable to Winchester Medical Center, Medical Radiography Program. Students owing tuition to the Medical Radiography Program will be required to make payment on or before the first business day of the semester.

<table>
<thead>
<tr>
<th></th>
<th>June 1</th>
<th>June – December Semester</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>December 1</td>
<td>December – June Semester</td>
</tr>
</tbody>
</table>

FAILURE TO MEET PAYMENT DEADLINES WILL BE CAUSE FOR DISMISSAL FROM THE PROGRAM.

Fees are subject to change. However, tuition will remain the same once the student has entered the program.

TRUTH IN LENDING POLICY
The Winchester Medical Center, Medical Radiography Program does not extend credit to students. Tuition is required to be paid on the due date. No balances will be carried. Students unable to pay tuition on the due date will be dismissed from the program.

REIMBURSEMENT POLICY
Students, who withdraw from the program prior to the first day of orientation, will be refunded the full tuition minus the $100.00 non-refundable deposit. Students who withdraw or are asked to leave the program prior to the completion of a semester for which they have paid will be reimbursed based on time completed in the semester. There will be a $100.00 non-refundable deposit upon acceptance to the program. This will be applied towards the first semester’s tuition.

PRO-RATED AS BELOW:

<table>
<thead>
<tr>
<th>Time completed (per semester)</th>
<th>0 - 25%</th>
<th>26 – 50%</th>
<th>51 – 75%</th>
<th>76 - 100%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Institutional Refund</td>
<td>75%</td>
<td>50%</td>
<td>25%</td>
<td>0</td>
</tr>
</tbody>
</table>

The prorated amount minus the $100.00 non-refundable deposit will be paid to the student within 45 days of termination from the program.
Books and health assessment fees are non-refundable. Required texts are purchased by the student. A book order will be placed by the program assistant upon receipt of an acceptance letter from the student and the non-refundable deposit. The cost of books will be based upon the books required and the current price of the texts when the order is placed. Copies of supplemental texts and materials can be purchased by the student at a discounted fee through the Medical Radiography Program. Students will be notified of the cost of the books and payment will be due June 1. The approximate cost $1,300 (subject to change).

**OTHER EXPENSES**
Other expenses will include:

- Health assessment fee - $230.00 (subject to change)
- Uniforms
- Lab jackets (noted under dress code)
- Additional textbooks
- Meals
- Registry exam fee upon program completion - $200 (subject to change)
- Lab fees - $40.00 per semester
- Senior students will be required to attend an out of town seminar for registry review. The registration fee is due on January 15 of the senior year - approximately $100 (subject to change). Additional expenses for the seminar (transportation, room, meals will be the responsibility of the student.
- Laptop or tablet, flash drive, calculators and other school supplies
- Two sets of radiographic lead markers (purchased through the Medical Radiography Program
- Fees for CoretecReview and St. Catherine’s Mock Registry (due with the 4rd semester tuition) - approximately $200
- ASRT registration fee (due August 1 of each year - $40.00
- Computer access outside of class – required
- Internet access outside of class – required
- Access to printer outside of class – required
- Paper for printing in computer lab – required
- Graduation fee (due April 1, prior to graduation) - $100.00 - required

Fees and requirements are subject to change. All fees are non-refundable.

**OPTIONAL EXPENSES**
Optional expenses include:

- Thyroid shield
- Additional sets of lead radiographic identification markers
- Personal protective eyewear
- Additional textbooks or study materials
- Optional registry review seminar

Optional expenses subject to change
HOUSING AND MEALS
The program does not provide room or board for its students. Student may contact local real estate companies for information.

Students receive the employee discount at the cafeterias operated at WMC and other Valley Health clinical sites.

STUDENT HEALTH

HEALTH ASSESSMENT
Upon acceptance into the program a health assessment will be scheduled with WMC Employee Occupational Health Services (EOHS). The Hepatitis B vaccinations are included in the health assessment fee. Any additional vaccines required by Employee Health will be the financial responsibility of the applicant. The fee for the health assessment is approximately $230 and is due on the day of the assessment.

Failure to pay the required fee will result in the applicant being rescheduled for the assessment. On the second occurrence of failure to pay the required fee, the applicant will be denied admittance to the program.

HEALTH AND SAFETY
In order to assure the safety and well-being of the students, copies of their pre-placement exam and all required immunizations must be submitted to the WMC Employee Occupational Health Services (EOHS) prior to the students first day of class. Currently EOHS accommodates the school by administering new student assessments.

Students must fulfill the requirements of the EOHS Policy Duty EHD – MP 02 titled Guidelines for Handling Infectious Conditions Developing among Hospital Personnel. This policy as well as the Students Notice of Reportable Conditions form will be addressed during the students’ first weeks of class and orientation.

As part of the Valley Health tuberculosis surveillance program students are required to have a 2-Step Tuberculosis Skin Test (TST) during the first week of class. This testing will be offered through EOHS. The charge for said testing will be covered by student health assessment fee. A Tuberculosis Screening Questionnaire will be given in addition to the 2-Step TST. Chest x-rays will be given to detect tuberculosis in persons with previous positive TST reactions. The cost of the chest x-ray is the responsibility of the student.

The Hepatitis B Vaccine is available to all students as part of the health assessment fee through EOHS.

If a student is unable to provide their immunization record at their pre-placement exam, titers will be drawn for proof of immunity. Should a titer result as negative, the student will be notified by EOHS. It is the responsibility of the student to take the result of their negative titer to their healthcare provider and receive the proper immunization according to CDC guidelines. Documentation of the immunization will need to be provided to EOHS for the student’s file to be updated.
Failure to obtain required immunizations may result in dismissal from the program.

All student health records are maintained by EOHS.

**STUDENT ILLNESS/INJURIES WHILE IN SCHOOL**

Students are encouraged to maintain health insurance. Students will assume financial responsibility for any medical treatment for illnesses or injuries sustained going to or coming from clinical assignments or in connection with their participation during their educational experiences. Students who become ill or injured while at school may go to their Primary Care Provider, Urgent Care or report to the Emergency Department. Students are required to notify all staff prior to leaving for an illness or injury. Injuries sustained while on WMC or Valley Health property must be reported to a clinical instructor to have a risk report completed.

**AMERICAN’S WITH DISABILITIES ACT**

The purpose of the American Disability Act (ADA) is to ensure that students who may have special needs are provided with reasonable accommodations to help them achieve academic success. It is important to understand that while this disclosure is voluntary, a student with a disability has the legal responsibility to request any necessary accommodations in a timely manner and to provide the Medical Radiography Program with appropriate, current documentation of the disabling condition.

Students wishing to request accommodations under the Americans with Disabilities Act (ADA) you must fill out the request form and return it with the required documentation to the Program Director.

After the needs have been identified, the student will need to meet with the Program Director and all instructors to determine the accommodations that will be provided in the classroom. Due to the nature of the work in the clinic, patient care and safety must be considered when asking for accommodations.

Students will be given an Americans with Disabilities (ADA) Voluntary Disclosure form during the first week of the program. Students who wish to disclose a disability and apply for special accommodations will be provided with a student request for accommodations under the Americans with Disabilities Act (ADA) form which must be completed and returned to the Program Director within two weeks of beginning the program.
PROGRAM RECORDS

STUDENT RECORDS
Student records are confidential and maintained by the Winchester Medical Center Medical Radiography Program. Students are required to report promptly to the Program Assistant any personal data changes:

- name
- address
- e-mail address
- telephone number
- persons to notify in case of emergency
- emergency contact phone number

Student records are kept locked in the Program Director’s office. Tests and evaluations are locked in the Clinical Instructors’ offices.

Clinical notebooks containing grades or evaluations are kept in a locked cabinet in the classroom. Access to these notebooks must be gained from an Instructor to ensure student confidentiality.

Student records are subject to review by representatives of the JRCERT and SCHEV.

RECORD RETENTION
The school maintains a file on each student containing:

- Student’s application for admission
- Transcript of student’s academic/course work
- Record of academic/course progress
- Record of financial transactions (tuition and fees)

These records are maintained permanently and are available to the students upon request.

Student records can only be released after the school receives written permission from the student.

ATTENDANCE POLICY

IDENTIFICATION BADGES
Identification badges will be issued by Safety and Security to each new student. Badges must be openly displayed, with photo completely visible (no stickers or markers), above the waist, on the clothing so that they are readily seen when entering or leaving the Valley Health premises or when visiting departments other than one’s own. Due to safety issues, lanyards are not permitted to be used as badge holders. Replacement badges must be obtained from Safety and Security. One replacement badge will be permitted. There will be a charge for lost badges. Identification badges remain the property of Winchester Medical Center and students must return badges to the Program Director upon graduation or dismissal. Identification badges are used to "clock in and out"
so there is a record of attendance. Each student must clock him/herself in or out. **Any student found clocking another student will immediately be dismissed from the program.**

Students must clock in using their badges. If a student forgets his/her badge he/she must e-mail the Program faculty and leave and get their badge. The time missed will be counted as unplanned absent time. On the **fourth** occurrence in one semester, the student will receive a **corrective action**.

If a student forgets to clock in or clock out, he/she must e-mail the Program Assistant. On the **fourth** occurrence in one semester, the student will receive a **corrective action**. Failure to e-mail the Program Assistant his/her time missed will result in absent time being charged against the student.

Students are required to clock in upon arriving at an off-site rotation. The student must clock out when leaving their off-site rotation. Students returning for a portion of the day at WMC must clock in when they return to the WMC campus.

Students are required to clock out for lunch if they leave the campus of any clinical site and clock in when they return. Leaving the campus without clocking out will result in a verbal warning on the first occurrence and a **corrective action** on subsequent occurrences.

**ATTENDANCE HOURS – DIDACTIC**
Classes are scheduled from 8AM to 4PM. On rare occasions, class times may change. Students are never scheduled in class or clinic more than 10 hours per day or 40 hours per week. Schedules of classes, with information concerning dates of quizzes and tests, are given to the students each week.

**ATTENDANCE HOURS – CLINICAL**
Clinical hours will vary with the student’s rotation. Students assigned to the following areas will work the following shifts:

- OR – 7:00 -3:30, 7:30 -3:30 (depending on what shift assigned)
- Portable (optional) – 4:30 – 12:30 otherwise 8-4:00
- ED - 7:00 -3:00, 7:30 -3:30 (depending on what shift assigned)
- WMH – 7:00 – 3:00
- SMH – 7:30 – 3:30
- DC FLUORO – 7:00 – 3:00
- All other shifts are 8:00 – 4:00

**This list is not all inclusive and is subject to change.**

Students will be expected to be in attendance for their assigned rotations. Clinical and didactic schedules will be e-mailed to the students. It is likely that a class or two on Saturday will be assigned to students. When Saturday classes are assigned, the student is given another day off during that week in order to keep the total number of hours for the week to 40.

Evening rotations will be assigned to the students after the first semester of the program. These rotations will continue during the second, third, and fourth semesters. Due to the organizational
make-up of the Medical Imaging department, these evenings are prime time for trauma cases with which the student must become familiar.

The student is responsible to be in his/her assigned area at the appropriate time. Strict adherence to schedules of attendance hours is required. Students are only allowed in the clinic on their assigned days unless approval is obtained from a Clinical Instructor or the Program Director.

*Students leaving their assigned areas or found in the clinic on days they are not assigned are subject to corrective action.*

Regular class attendance is essential for satisfactory progression into each level of competency throughout the program. Students absent from class are responsible for notifying instructors of intended absence via phone call and for obtaining notes, etc. for classes missed. Missed tests and quizzes must be made up the first day of class that the student returns from an absence. *The student is responsible for contacting the instructor to schedule a time to make up the test.* If a test is not made up on the day the makeup test is scheduled a grade of 0 will be given for that test.

Missed assignments and/or homework must be turned in on the day the student returns to class. These assignments need to be turned in at 8:00 AM. A grade of 0 will be issued for any assignments not completed and submitted on the day the student returns to class.

Communication with the instructor is important to obtain notes and assignments and to schedule tests missed during the time the student was absent. It is the responsibility of the student to contact the instructors as soon as the student returns to class to set up a plan to complete missed assignments. Failure of the student to contact the instructor or instructors may result in a grade of 0 for missed assignments.

**MANDATORY EVENTS**

At least once a month there will be a mandatory event, such as a continuing education presentation. All students are required to attend these events.

Being on time to these events is a requirement. Students who are more than 5 minutes late will be counted absent from the event. *One point will be deducted from the student’s final clinical grade for every mandatory event missed.*

**LUNCH AND BREAK POLICY**

Students are eligible for one ten minute break for each four hours placed in the clinical setting as well as each afternoon or morning class session. Lunch breaks are scheduled by the Department Supervisor in the clinical setting and by the Program Director or Clinical Instructor in the didactic setting. Any problems with breaks should be addressed by or to the clinical instructor. *Students in the clinical setting who are assigned to technologists should go to lunch and return at the same time as the technologists.* Those students who are assigned without a technologist have the same amount of time for lunch as everyone else (30 minutes), unless otherwise specified by the didactic schedule. *If students leave the hospital campus during a lunch period, they must clock out when they leave and clock back in when they return.* Failure to clock out when
leaving for lunch will result in a warning on the first occurrence and a **corrective action** on subsequent occurrences. Time outside the hospital in excess of 30 minutes will count as absent time, unless otherwise specified by the Program Director.

**NOTIFICATION OF UNPLANNED ABSENCE**

When an unplanned absence is necessary, students are expected to do the following:

- Personally notify the Program Faculty at the beginning of the absence and daily there after by **phone call** to the Program Assistant and an e-mail to program staff. **All** emails are to be sent to everyone on the program staff. This ensures effective communication in case someone on the program staff is absent. *Notification of anyone other than program officials is not acceptable. Notification by a friend or family member is not acceptable unless the student is physically unable to do so.*

Students must give notification at least 1 hour in advance of the scheduled reporting time. On the fourth occurrence of failure to notify program staff at least an hour before arrival time, a **corrective action** will be issued.

**REPORTING ABSENCES**

Students who are going to be absent or late are to call the Program Director at least **one hour before** the time they are expected to appear at the hospital for either clinical or didactic assignments. An e-mail must be sent to **all** faculty members as additional notification. On the **fourth** occurrence of failure to notify school staff by phone and e-mail in a semester at least an hour before arrival time, a **corrective action** will be issued.

Students’ failure to notify the proper officials of absence will be considered a “**No Show**” and will result in **corrective action** documentation. *Any student who is absent for 2 consecutive days without notifying school officials will be dismissed from the program.*

Any student who needs to leave early for any reason is responsible for e-mailing **ALL** staff members. All school staff should be e-mailed to report any known future absences i.e. doctor’s appointments, court cases, etc. Failure to contact a faculty member by phone prior to leaving will result in a **corrective action**. All absences due to doctor’s appointments, court cases, etc. must be documented with a written excuse in order to be considered a planned absence.

**MAKE-UP TIMES**

All absent time in excess of the allotted time, 32 hours (4 days) in each semester must be made up. **No makeup time** will be permitted on **evenings** after a full day of school or on **weekends**. Make up time may not necessarily be completed in consecutive days. Make up time will be scheduled based upon the availability of adequate supervision in the clinical setting. Make-up time may be scheduled during program breaks if approval is obtained from the Program Director and **program clinical faculty must be present**. Time must be made up in order for the student to complete the program and be signed off to take the registry examination.

**No make-up time** can be scheduled during hospital holidays.
Time missed due to suspensions must be made up after the last day of the program in increments of 8 hours. Certificates will be issued once the make-up time is completed.

A daily evaluation is required for each make-up “time frame”. All make up time must be fulfilled in the clinical area where the student was absent. Make up time will be scheduled in 8 hour increments or at the request of the students in 10 hour increments when the student will not be scheduled more than 40 hours in a given week.

Issues concerning excessive absenteeism will be decided upon by the Program Director and program faculty based upon the student’s standing in the program and the time frame in which the abscess occurred. Students may be asked to repeat a year or be dismissed from the program for failure to maintain adequate attendance.

**VOLUNTARY HOURS**

Students may volunteer to spend extra hours in the clinic in order to obtain a competency grade or to increase their experience and skill level. These hours must be approved by a Clinical Coordinator and a form signed by the student requesting additional clinical hours. Students needing to stay over to finish a case or to obtain a clinical competency grade must e-mail the clinical coordinators. This will be documented on a log kept by the clinical coordinator.

**VACATIONS**

Vacations are assigned by the Program Director in coordination with clinical and didactic assignments. An academic calendar with scheduled vacations is given to the student at the beginning of the program.

**ABSENTEEISM PRIOR TO OR IMMEDIATELY FOLLOWING VACATION**

Unplanned absenteeism just prior to or immediately following scheduled vacation times will require positive proof to justify an illness was present at the time. A physician excuse is acceptable if the student was a patient of the physician who wrote the excuse. Should no acceptable documentation be provided by the student of the presence of illness, a corrective action will be issued.

**FUNERAL LEAVE**

Students are given leave when immediate family members pass away. (Leave begins on the day of death and continues until the day after the funeral). This policy is patterned after the Funeral Leave policy for Valley Health employees.

Students will be given 3 days for funeral leave. These 3 days will not be counted against attendance if documentation is received. If the leave needs to be extended, then subsequent days will be counted as a planned absence (students are allowed 32 hours of absence per semester).

Immediate family includes the student’s spouse plus the following relatives of either student or spouse: parents, grandparents and great grandparents, brothers and sisters, children, grandchildren and any other family member living in the immediate household of the student. Step relatives of the student only are also considered to be immediate family.
Special circumstances may be considered on a case by case basis.

**STUDENT PREGNANCY POLICY**

Due to the very great danger from radiation exposure to an unborn fetus, especially during the first trimester, a student who becomes pregnant at any time during the 24 months of training may declare to the Program Director the fact at the earliest possible pregnancy test. This declaration must be made in writing and signed by the student. The student will then be given a form for declaration of pregnancy which will be forwarded to the radiation safety officer.

Should the student decide not to inform the Program Director of the pregnancy, the responsibility will be that of the student and not the Winchester Medical Center Medical Radiography Program, the Winchester Medical Center, Valley Health or other clinical sites. Special provisions cannot be made to a student who is pregnant. All rotations must stand, as scheduled. Time missed as a result of pregnancy, in excess of the allotted time for the school year, will be made up after graduation and before the student can take the registry examination. Excessive time missed due to the pregnancy will be dealt with following the attendance policy. Each case will be reviewed by the Program Director and Faculty of the Winchester Medical Center Medical Radiography Program. Students will be required to complete a Medical Leave of Absence form prior to taking Maternity Leave.

Although it is both procedure and practice of this program to offer the utmost in radiation protection to the students, the School and the clinical sites will not be responsible for injury to either the mother or child due to radiation exposure during pregnancy.

Information regarding a student leaving due to pregnancy will be held in strictest confidence.

The student has the option to withdraw the declaration of pregnancy through a letter addressed to the Program Director.

Female students will be required to sign a statement that reads:

*I understand the pregnancy policy above and the fact that it is my responsibility to inform the Program Director, in writing, if I should become pregnant. I also understand that if I decide not to inform program officials, there is no responsibility to the Winchester Medical Center, Valley Health or other clinical sites regarding RADIATION EXPOSURE to my unborn child. I further understand that no special provisions will be made regarding scheduling or time missed by the Medical Radiography Program. I also understand that, at any time, I have the option of withdrawing the declaration of pregnancy and the withdrawal must be submitted in writing to the Program Director.*

**MEDICAL LEAVE OF ABSENCE**

Medical leave of absence is granted for students who are in good standing in the program and who are considered to be able to maintain their academic standing through electronic delivery of classroom materials. Tests will be given when the student is able to return to the classroom.

*The student must be in good academic standing and have completed the majority of their clinical grades for the semester.*
The student must keep up with assignments as their condition allows and remain in good academic standing throughout the medical leave in order to continue in the program. If academic standing is not maintained, the student will be dismissed or asked to repeat the year.

It is the under the discretion of the Program Director to grant Medical Leave based on the performance of the student in the program up to the point that the Medical Leave is requested and how long the leave will extend. Decisions are based on input from the entire faculty. Students who require an extended absence may be asked to repeat the year.

Upon return to the program and completion of all academic and clinical work, the student will be eligible to be signed off to take the American Registry of Radiologic Technologists (ARRT) examination.

**ATTENDANCE PROBLEMS AND CORRECTIVE ACTION**

**Corrective Action Sequence for Unplanned Absence:**

Upon the third occurrence of a full unplanned absence, or its equivalent, in a semester a counseling session will be held with the student. This counseling session will be documented as a written warning. At this time the student will be informed that his/her problems with attendance appear to be excessive, and that one more full unplanned absence, or its equivalent, within the same semester will result in a corrective action.

For every full unplanned absence, or its equivalent, within the same semester after a corrective action is issued, another corrective action will be given.

**DISMISSAL DUE TO EXCESSIVE ABSENTEEISM**

Students are permitted to miss 4 days (32 hours) per semester. This is in addition to the already scheduled vacation days. It’s recommended that these 4 days be used for emergencies, sickness and/or other unexpected events that may arise. If a student misses more than the allotted 4 days (32 hours) in a semester, that time will need to be made up after graduation. Occasionally, time may be made available during program holidays and breaks for students to make up time missed (at the discretion of the Program Director).

If a student accumulates 128 hours of absenteeism within 1 program year, or 16 days*, that student will go before the Program Director and be asked to repeat the year, or possibly be dismissed from the program. This is determined on a case by case basis at the discretion of the Program Director with input from the Program Faculty. **Make up time completed will not be deducted from the 128 hours, or 16 days missed.**

*Brief and partial absences are cumulative and will be counted toward the 16 days. For example, 4 brief unplanned absences will count as 1 full day.

**MANAGEMENT PREROGATIVE**

Where a chronic attendance problem is determined to have occurred, the Program Director will consult with the Program Faculty to review the history of occurrences. If it is judged to be a chronic problem with little or no effort by the student to correct the matter the Program Director may elect to dismiss the student based on the total attendance history.
The Program Director may agree to be more lenient in administering corrective actions to students with long histories of good attendance that experience temporary absenteeism, for legitimate reasons. This will be determined on a case by case basis and will required input from the entire faculty.

ABANDONMENT
Students, who fail to report for two consecutively scheduled didactic/clinical assignments, for any reason, without notifying program staff will be considered to have abandoned their role as student and will be dismissed from the program. Similarly, students who walk off from didactic/clinical assignments without approval from the Program Director or designee will be assumed to have abandoned their role as student without notice.

RADIATION PROTECTION/MONITORING

RADIATION PROTECTION POLICY
The Medical Radiography Program, in accordance with the professional code of ethics and the standards of the accrediting body, endeavors to instill an appreciation for radiation protection of the patient, the student radiographer, and other members of the healthcare team. Students are instructed to limit exposure according to ALARA. Student exposure is monitored and reviewed on a monthly basis. Those students who exceed the dose limit are counseled by the Radiation Safety Officer of the Winchester Medical Center. Further exceptions to the recommended exposure level may result in a request to repeat the radiation protection courses.

Students are required to wear lead aprons on all portable examinations and during fluoroscopic procedures. Failure to follow this radiation protection policy will result in a verbal warning and an e-mail at the first occurrence. A second occurrence will result in a counseling session. The third occurrence involving this policy will result in a corrective action.

RADIATION BADGES
Radiation monitoring devices will be issued by the X-ray department to each new student. Badges must be worn while here as a student at all times whenever working in an imaging department (regardless of facility) and are to be maintained by the student. Failure to follow this radiation monitoring policy will result in a verbal warning and an e-mail at the first occurrence. A second occurrence will result in a counseling session. The third occurrence involving this policy will result in a corrective action.

The position of radiation monitoring badges will be discussed early in the Introduction to Radiation Protection Course. Student radiation monitoring badges are to be left in the school each night except when the student is scheduled to rotate to an off-site facility the next day. Failure to follow this policy could result in disciplinary action.

Radiation monitoring badges remain the property of Winchester Medical Center and students must return badges to the Program Director upon dismissal or graduation.
RADIATION MONITORING

In compliance with JRCERT Standard 4.1, the program must maintain and monitor student radiation exposure data. This information must be made available to students within thirty (30) days following receipt of data.

Radiation reports are sent to the Radiation Safety Officer bi-monthly. Students will be advised when reports are received. Students must be allowed to view the reports within 30 days of receipt of the data by the Radiation Safety Officer. Students must initial reports when they have viewed them. Student badge reports are posted on-line by Landauer. Students have access to the on-line report.

Copies of radiation reports are kept on file in the Program Director’s office. Individual yearly reports are filed in the student’s file which is kept locked in the Program Director’s office.

RADIATION MONITORING – EXCESSIVE EXPOSURE INCIDENTS

Student exposure is monitored through monthly review of radiation monitoring device reports by the Radiation Safety Officer. A student whose report indicates that their exposure exceeds ALARA I will receive written notification and will be required to meet with the Program Director to review radiation safety practices.

<table>
<thead>
<tr>
<th>ALARA I LEVELS (mrem)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Per Quarter</td>
</tr>
<tr>
<td>Whole Body Deep</td>
</tr>
<tr>
<td>Lens of Eye</td>
</tr>
<tr>
<td>Extremity/Organ</td>
</tr>
<tr>
<td>Whole Body Shallow</td>
</tr>
</tbody>
</table>

Students whose radiation monitor report exceeds ALARA II will meet with the Radiation Safety Officer and the Program Director. The incident may require investigation and follow-up actions. Upon recommendation of the Radiation Safety Officer, the student may be removed from the clinic for a specified period of time. Any time missed in the clinic must be made up prior to graduation.

<table>
<thead>
<tr>
<th>ALARA II LEVELS (mrem)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Per Quarter</td>
</tr>
<tr>
<td>Whole Body Deep</td>
</tr>
<tr>
<td>Lens of Eye</td>
</tr>
<tr>
<td>Extremity/Organ</td>
</tr>
<tr>
<td>Whole Body Shallow</td>
</tr>
</tbody>
</table>
Winchester Medical Center’s ALARA Program is based on the NRC model program and guidelines.

Students in the Medical Radiography Program, provided they are at least 18 years old, are considered radiation workers by the state of Virginia.

ENERGIZED CLASSROOM USAGE
Winchester Medical Center Medical Radiography Program follows these procedures to monitor and ensure minimal radiation exposure to students while simulating activities in the energized classroom.

- Biomed services will provide an in-service on energized lab equipment (during orientation week to the program).

- Lab hours are from 7:30 a.m. to 4:30 p.m., Monday through Friday. Additional lab hours are available at students request with an instructor present.

- The energized lab panel box will be locked until an instructor is present during practice or any other activity.

- The key to the panel box is kept in the Program Director’s office. A second key is in a locked file cabinet in which the instructors have access.

- The machine and breaker box is locked each evening.

- The control panel should be turned off when not in use.

- Upon successful completion of the Biomed in-service a student is only allowed to make an exposure under the supervision of a CI or licensed radiographer.

- Unauthorized use of the energized lab by a student is grounds for immediate dismissal.
MRI SAFETY

MRI SAFETY POLICY
The MRI machine is located in an area accessible with keypad entry. Students do not have unrestricted access to this area until they are scheduled for their MRI rotation. This policy is addressed during the first week of the program, during orientation.

MRI rotations are scheduled during the 3rd and 4th semesters of the program. Prior to being assigned the MRI rotations, student will have an orientation to MRI given by a registered MRI technologist. This orientation includes a PowerPoint and lecture, followed by a quiz. This orientation makes sure that the student is fully aware of the danger of the magnet.

- The magnet is on at all times
- The potential danger involved to personnel and equipment can be life threatening if safety guidelines are ignored

All students, upon reporting to MRI for their rotation, will present a completed MRI screening form (the same MR safety questionnaire used for patients). The form asks if the student has a pacemaker, surgical implants, history of previous surgery and history of metal fragments from war injury, gunshot wounds or as a metal worker. The student is also screened for pregnancy and sickle cell anemia.

If the screening indicates there is a question of metal fragments in the eyes, the student must have orbital x-rays prior to entering the magnet room. An order will be obtained from Employee Occupation Health Services (EHOS) after sending the MR screening sheet to the EHOS department. These x-rays will be performed at no cost to the student. These images will be interpreted by a radiologist prior to the students entering the magnet room.

No one with a pacemaker, aneurysm clips or other implanted device is allowed to enter the restricted magnetic field area. No metal objects are permitted to be in or on the person when entering the restricted magnetic field.

The MRI technologist will determine the safety of the student entering the restricted magnetic field area or magnet room by re-verification and completion of the screening form. This record will be returned to the program and placed in the student’s file.

Students will be asked to remove jewelry, hairpins and all loose objects from their pockets. All students will be screened by the MRI technologists prior to entering the magnet room to ensure no metal is being carried on their person.
**DIDACTIC INSTRUCTION**

**HOURS OF INSTRUCTION**
Course hours are assigned in conjunction with clinical schedules and are designed to complement those schedules as much as possible. The amount of time it takes to cover particular subject matter varies from one group of students to another. Therefore it is important to recognize the flexibility that is necessary to sometimes accomplish this process. Schedules that are given will sometimes need to be changed.

Faculty is available to meet with students outside of class hours. Appointments may be scheduled via e-mail to the instructor.

Conferences are held at the middle and end of semester after grades have been issued. These conferences are held to discuss student progress in the program.

**TEACHING METHODS AND EVALUATIONS**
Teaching methods will include but not be limited to demonstration, group discussions, lectures, Power Point presentations, models, film, and student projects. These methods will all work together to meet the needs of the visual, kinesthetic, auditory, social and solitary learner.

**ASSIGNMENTS**
All student assignments will be made in advance of a due date. Narrative assignments must be typed. All assignments, unless otherwise requested, must be submitted as a hard copy. All assignments must be identified with the students’ name and date, class and instructor. If the assignment (including tests, quizzes and worksheets) is not properly identified a grade of zero will be issued. Students are required to make electronic copies of all research papers/written assignments. At the discretion of the instructor, some assignments will be required to be e-mailed to the instructor.

Students are expected to complete all assignments given. The school faculty is not responsible for assignments not received via email. Failure to complete an assignment will result in a grade of 0 and a counseling session with the instructor. Failure to complete another assignment will result in a grade of 0 and a corrective action due to insubordination.

**ACADEMIC AND CLINICAL FACILITIES**
Phases of academic instruction are conducted within the Medical Center. The curriculum has been designed to be completed in four consecutive semesters (approximately 2 years). Clinical assignments are made in conjunction with didactic assignments as much as possible. Flexibility is often necessary in order to be able to attain this goal. Evaluations of each area are necessary to advance to the next level of competency.
# REQUIRED COURSES

## COURSES BY SEMESTER WITH ASSIGNED CREDIT

<table>
<thead>
<tr>
<th>SEMESTER 1</th>
<th>SEMESTER 3</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>COURSE</strong></td>
<td><strong>CREDIT</strong></td>
</tr>
<tr>
<td>Anatomy and Physiology I</td>
<td>3</td>
</tr>
<tr>
<td>Introduction to Radiologic Technology and Patient Care I</td>
<td>1</td>
</tr>
<tr>
<td>Medical Terminology I</td>
<td>1</td>
</tr>
<tr>
<td>Radiographic Image Evaluation I</td>
<td>1</td>
</tr>
<tr>
<td>Radiographic Positioning and Procedures I</td>
<td>3</td>
</tr>
<tr>
<td>Radiographic Positioning Lab I (Simulations)</td>
<td>1</td>
</tr>
<tr>
<td>Radiologic Physics I</td>
<td>3</td>
</tr>
<tr>
<td>Radiobiology I</td>
<td>2</td>
</tr>
<tr>
<td>Radiographic Quality and Image Exposure I</td>
<td>2</td>
</tr>
<tr>
<td>Radiographic Procedures I (clinic)</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td><strong>18</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SEMESTER 2</th>
<th>SEMESTER 4</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>COURSE</strong></td>
<td><strong>CREDIT</strong></td>
</tr>
<tr>
<td>Anatomy and Physiology II</td>
<td>3</td>
</tr>
<tr>
<td>Introduction to Radiologic Technology and Patient Care II</td>
<td>1</td>
</tr>
<tr>
<td>Medical Terminology II</td>
<td>1</td>
</tr>
<tr>
<td>Radiographic Image Evaluation II</td>
<td>2</td>
</tr>
<tr>
<td>Radiographic Positioning and Procedures II</td>
<td>3</td>
</tr>
<tr>
<td>Radiographic Positioning Lab II (Simulations)</td>
<td>1</td>
</tr>
<tr>
<td>Radiologic Physics II</td>
<td>3</td>
</tr>
<tr>
<td>Radiographic Quality and Image Exposure II</td>
<td>2</td>
</tr>
<tr>
<td>Radiation Protection</td>
<td>2</td>
</tr>
<tr>
<td>Radiographic Procedures II (clinic)</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td><strong>20</strong></td>
</tr>
</tbody>
</table>

**TRANSFER CREDITS (PREREQUISITES)** 15

**TOTAL CREDITS** 65

**TOTAL CREDITS FOR PROGRAM** 80

## CREDIT ASSIGNMENT

Course credit is assigned using the following formula:

- 50 minutes of lecture per week/per semester = 1 credit hour
- 360 minutes of clinical time per week/per semester = 1 credit hour

**NOTE:**

Credits from this program may not transfer to a college one for one; however, some colleges will give a defined number of credits for completion of a radiography and/or ARRT registration.
COURSE DESCRIPTIONS
Course hours are assigned in conjunction with the clinical schedules and are designed to complement those schedules as much as possible. The amount of time it takes to cover particular subject matter varies from one group of students to another. Therefore, it must be recognized that flexibility is necessary to sometimes accomplish this process. Schedules that are given will sometimes need to be changed in order to accommodate student learning.

Due to the small size of the classes, material may be covered in a shorter amount of time with longer times being given for more difficult material. Instructors have the freedom to adjust the pace of the class to conform the ability of the students to grasp the information.

The courses in the program follow the ASRT curriculum guidelines. The curriculum is reviewed annually and changes are made according to ASRT guidelines and feedback from parties of interest.

ANATOMY AND PHYSIOLOGY I AND II
A basic course in anatomy is taught over two semesters with emphasis on body tissues, skeleton, joints and all body systems and their functions. Emphasis is placed on anatomy that is visualized on radiographic examinations and the physiology behind radiographic contrast absorption and excretion. Anatomy is taught in sequence with positioning and medical terminology classes.

ANATOMY AND PHYSIOLOGY III AND IV
A review of basic anatomy is taught. Cross sectional anatomy is introduced with emphasis placed on anatomy as it appears on CT, MRI and Ultrasound images.

INTRODUCTION TO RADIOLOGIC TECHNOLOGY AND PATIENT CARE I
Introduction to radiologic technology and basic patient care are covered in this course. The profession is defined, professional organizations are identified and the organizational structure of the hospital is discussed. Basic patient care including patient interactions, history taking transfer techniques, vital signs and infection control are taught. CPR for healthcare providers covers the role of the technologist in a hospital setting to provide CPR. Students are trained and assessed in CPR skills for adults, infants and children. Risk factors for sudden death in the various age groups are discussed. Training in the use of AED (automated external defibrillator) is included in this class. Basic information on the production of x-rays, x-ray equipment, and basic radiation protection and radiobiology are discussed. Quality Control and Quality Assurance are discussed. The importance of Quality Assurance is explained as well as discussion of programs hospital wide as required by The Joint Commission (TJC).

Subjects taught in this course include:

- Introduction to Radiation Safety
- Introduction to Radiologic Technology
- Introduction to Patient Care
- CPR
- Introduction to the clinic
- Imaging Equipment
INTRODUCTION TO RADIOLOGIC TECHNOLOGY AND PATIENT CARE II
Students become acquainted with patient care procedures with an emphasis on compassion and close attention to detail. Acquiring a patient history, obtaining vital signs, using Standard Precautions, and practicing safe patient transfer techniques are reinforced. Patient care including trauma and medical emergencies along with an introduction to pathology is included in this course. Pharmacology and contrast agents are covered. Students are given instruction in the ethical and legal responsibilities of a healthcare professional.

Subjects taught in this course include:
- Contrast Media
- Aseptic Technique
- Professional Ethics
- Medical Law
- Introduction to Pharmacology

INTRODUCTION TO RADIOLOGIC TECHNOLOGY AND PATIENT CARE III
Students study pharmacology more in depth, including the use of contrast and drugs in medical imaging, the effect of drugs on imaging procedures and drugs used in medical emergencies. Medical assisting skills are taught during this class as well.

Introductory classes to modalities are taught prior to the student rotating through specialized clinical areas.

Subjects taught in this course include:
- Introduction to Mammography
- Introduction to CT
- Introduction to US
- Introduction to MRI
- Introduction to Nuclear Medicine
- Health Information/Medical Records
- Pharmacology
- Medical Emergencies and Trauma
- Venipuncture

INTRODUCTION TO RADIOLOGIC TECHNOLOGY AND PATIENT CARE IV
Students study pathology as demonstrated in medical imaging across the modalities with emphasis placed on how certain pathologies affect imaging and adjustment in technique required by certain pathologies. Students learn how pathologies affect the patient’s ability to
cooperate for imaging examinations and how to recognize critical findings to alert a radiologist to view the images in a timely fashion. Medical assisting skills are continued in this class.

**Subjects taught in this course include:**

Pathology  
Vital Signs  

**MEDICAL TERMINOLOGY I, II**

A basic course in terms used by medical and paramedical personnel is taught with emphasis on radiologic terms. Prefixes, suffixes, abbreviations and terminology are covered. The course is taught over 2 semesters, each section building on the prior section and in sequence with anatomy courses.

**RADIOGRAPHIC IMAGE ANALYSIS I, II, III, IV**

A review of images taken by the students allows for better understanding of optimal radiographs and radiographic positioning. The course is taught over 4 semesters. Students present cases discussing, positioning, technique, signs/symptoms, and pathology. The course begins with basic concepts of evaluating images and advances to more complex image evaluation. Students will learn how to critique images for repeats and what is needed to be done to correct mistakes. Exposure factors in relation to patient dose are also emphasized.

**RADIOGRAPHIC POSITIONING AND PROCEDURES I AND II**

The student learns positioning terminology and routine positioning procedures used in diagnostic radiography. The student progresses into more technical procedures used in diagnostic radiography. Once the lectures have been given in each section, practice of the positions and simulations follow to ensure that the student has mastered the positioning.

**RADIOGRAPHIC POSITIONING AND PROCEDURES III AND IV**

The student learns positioning and procedures used for more specialized diagnostic examinations and how to adapt positioning for special circumstances and patient condition. Adaptations of routine procedures and positioning techniques to deal with the physical and emotional limitations of the pediatric age group are emphasized. Age specific needs are discussed. Monitoring, radiation protection, and pathologies specific to age groups are covered. Adaptations or routine procedures and positioning techniques to deal with physical and emotional limitations caused by aging are emphasized. Pathologies and their effects are discussed in this class. Patient care and monitoring are discussed as well. The student learns the mechanism of injury, adaptation of positioning techniques, recognition of and the type of treatment required for emergency situations and the role of the technologist as a member of the trauma team. Various pathologies that present as emergency situations are discussed.

At the end of this class a review of all the positioning material will be given prior to the final exam.
RADIOGRAPHIC POSITIONING AND PROCEDURES LAB I AND II (SIMULATIONS)
After each section of anatomy and positioning is taught, students spend time in laboratory sessions practicing positioning to reinforce learning of the material. Simulations of positioning are performed by clinical instructors to ensure mastery of material prior to allowing students to perform imaging examinations in the clinic. Mastery of each section of anatomy is required before the student is allowed to progress to the next level.

RADIOGRAPHIC PHYSICS I AND II
Fundamentals of x-ray physics and its application to radiography are taught. The course includes basic physics and elementary principles of electricity and magnetism required to understand production and properties of x-rays, electrical components of x-ray equipment as well as x-ray tube components, x-ray production and emission and interaction of radiation with matter. Physics II focuses on the x-ray interactions with matter, fluoroscopy, digital fluoroscopy, computers and additional equipment (mobile radiography, dedicated equipment, tomography and interventional radiography).

RADIOGRAPHIC PHYSICS III AND IV
Radiographic Physics III reviews the material covered in Physics I. Radiography Physics IV reviews material covered in Physics II so that students have a more in depth understanding of the material. Reviews are aimed at increasing practical and working knowledge of radiographic physics. Additional emphasis is placed on preparation for the registry examination.

RADIOBIOLOGY I AND II
The Radiobiology I course begins with a review of human biology. Molecular and cellular radiobiology, radiation effects on DNA, acute radiation syndromes, deterministic and stochastic effects of radiation exposure are also covered.

The Radiobiology II course give a more in depth coverage of material presented in Radiobiology I and relates concepts taught to the radiation protection benefits in the environment and workplace.

RADIOGRAPHIC PROCEDURES I (CLINIC)
During the first semester of the program, student will become familiar with the x-ray equipment through room orientation and observations of technologists in the clinical setting. Students will also study, test, simulate and perform competencies from a designated list of anatomical parts.

RADIOGRAPHIC PROCEDURES II (CLINIC)
During the second semester of the program, student will continue to assist radiographers in the clinic. Evening shift rotations will begin during this semester with students being assigned to a technologist for supervision. Off-campus rotations to Urgent Care will begin during this semester. Students will perform competencies from a designated list of anatomical parts.
**RADIOGRAPHIC PROCEDURES III (CLINIC)**
During the third semester of the program, students will begin to perform exams they have proved competency on under indirect supervision in an effort to build confidence. The student will be required to complete a designated number of clinical competencies by the end of the semester. Evening shift rotations will continue through this semester as well as rotations to off-campus sites. Modality rotations begin this semester.

**RADIOGRAPHIC PROCEDURES IV (CLINIC)**
During the fourth semester of the program, students will continue to increase the amount of examinations they perform under indirect supervision, as competency is proven, to continually increase their knowledge base. Students are expected to perform most exams with a high level of confidence with minimal assistance from technologists. Evening shift rotations, modality rotations and off-campus rotations will continue through this semester.

**RADIOGRAPHIC QUALITY AND RADIOGRAPHIC EXPOSURE I AND II**
Students gain an in-depth understanding of the theories of exposing the x-ray image receptor and the technical factors regulating correct density/brightness, radiographic contrast, recorded detail/spatial resolution and how to limit distortion. Students will gain understanding of how radiation interacts with the body to form a radiographic image and learn adjustments necessary to create high quality images. Students will learn about scatter radiation and the effect it has on patient dose and radiographic quality, as well as the tools and technical adjustments required to limit the amount of scattered radiation present. Students will learn to apply specific mathematical formulas to adjust and optimize technical factors used in creating high quality radiographic images. Students will gain an in-depth understanding of computer and digital radiography that will include the image receptors and equipment used, processing and display of digital images and processes used to minimize patient dose and maximize radiographic quality. The student will learn to identify and recognize artifacts affecting digital and film images and the tools used to prevent and fix these types of errors. Students will have an opportunity to apply what is learned in the classroom during lab activities.

**RADIOGRAPHIC QUALITY AND RADIOGRAPHIC EXPOSURE III AND IV**
Material taught in Radiographic Quality and Radiographic Exposure I and II is reviewed in order to obtain a more in-depth knowledge and understanding of the material. Lab activities are used to give students a further understanding of the material. Preparation for the registry examination is included in this class.

**RADIATION PROTECTION I AND II**
The responsibilities of the radiographer for radiation protection of patients, personnel and the public are presented. The importance of radiation protection, methods of protections, and radiation dose are covered. ALARA and regulatory involvement are discussed. The course describes human sensitivity to radiation including the study of the effects of ionizing radiation at the atomic, molecular, cellular, organ and whole body levels. The course will provide information concerning early and late effects of radiation exposure including acute radiation syndromes.
Radiation Protection II reviews material presented in Radiation Protection I but emphasizes practical application for future technologists in the work environment. This course also gives more extensive preparation and practice for the registry examination.

RESEARCH PAPER AND ORAL PRESENTATION
This class teaches students to write a research paper and case study using APA formatting. Assignments are given each week to complete a portion of the paper. The paper combines elements of anatomy, physics, pathology, radiation protection and biology as well as image critique. A case study will be presented to the class in which a patient has been imaged using at least 3 imaging modalities. The student will describe the disease process, signs and symptoms of the disease, how the disease is diagnosed, treatment for the disease, and prognosis for the patient. Students are graded on writing mechanics using APA format as well as oral communications.

GRADING SYSTEM

GRADING SCALE
The grading scale for all courses will be as follows:

<table>
<thead>
<tr>
<th>Score</th>
<th>Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>96-100</td>
<td>A</td>
</tr>
<tr>
<td>90-95</td>
<td>B</td>
</tr>
<tr>
<td>85-89</td>
<td>C</td>
</tr>
<tr>
<td>0-85</td>
<td>F</td>
</tr>
</tbody>
</table>

Students receiving scores below 85% will be determined to have not achieved a passing score. Failure to obtain and/or maintain a passing overall average of 85% didactically during each grading period (grading periods are at the middle and end of each semester) will lead to counseling and probation. The probation extends to the next grading period. The student must have a passing average by the next grading period. Failing overall averages during the next grading period will result in the student being dismissed from the program. Failing overall averages in any other grading period thereafter will result in dismissal from the program.

Failure to obtain and/or maintain a passing overall average of 85% in clinic at the end of a semester will result in dismissal from the program.

GRADING PERIODS
Grading periods occur at mid-semester and at the end of the semester. Advisement sessions are held with each student at the end of each grading period to review the student’s progress in the program.

MID-SEMESTER GRADES
Students are required to have ½ of their clinical competencies for each semester at the mid-semester grading period (unless waived by the clinical coordinator due to unavailability of exams for clinical competencies).

Didactic and clinical grades will be reported at mid and end of semester grading periods.
ENDOR OF SEMESTER GRADES
At the end of the semester grades are weighted as follows:

- Quizzes/Worksheets/Written Assignments = 25% of the final grade.
- Tests = 50% of the final grade.
- The final exam = 25% of the final grade

Evaluation of student performance will be in the form of observations, written quizzes, written examinations, research papers, presentations, clinical simulations, daily evaluations and clinical evaluations.

Clinical grades not completed at the end of the semester due to clinical rotations will be simulated. These grades must be made up in subsequent semesters.

FAILURE OF ACADEMIC TESTS
Students failing tests may be given additional assignments or asked to repeat the test in order to ensure mastery of the material (at the discretion of the instructor). Original scores of tests will be placed in the student’s file. Repeat test scores are only for the purpose of documenting mastery of the material and will not affect the original grade.

EXAMINATIONS
Examinations will be assigned as deemed appropriate by the Program Director and Instructors. Comprehensive tests combining material from several chapters may be given at the discretion of the instructor.

Students are required to take St. Catherine’s exams each month during the senior year of the program.

COMPREHENSIVE FINAL EXAMINATIONS
Comprehensive final examinations will be given in each didactic area at the conclusion of each subject area and after completion of the review in each semester.

RESEARCH PAPERS
Research papers are to be prepared by the student and some papers or projects will be presented orally to the class. Topics need to be discussed with the Program Director or Instructor for approval before beginning research.
RESEARCH PAPER GUIDELINES

- The student is required to have a basic knowledge in the preparation of a research paper when accepted into the program.

- An introductory course on research and APA formatting will be given prior to the assignment of the first research paper.

- Topics must be discussed with and approved by the Instructor of the class, the research/clinical paper is required.

- Topics must pertain to radiology and demonstrate the student's knowledge of the various imaging modalities within radiography.

- Papers must be submitted to the Instructor on the scheduled date. Papers not submitted on the date they are due will have 5 points deducted from the grade for each day the paper is late, up to 1 week. Papers more than 1 week late will receive a grade of 0.

- Papers must be typed following the format required by the instructor.

- HIPAA regulations must be followed at all times in the conduction of research, in written materials and display of images pertaining to the assignment. HIPAA violations may result in corrective action, suspension or dismissal.

SEMESTER PAPERS

Criteria for each paper will be given to the student by the instructor.

An Instructor must approve the project. Proposed topics must be submitted to the instructors via e-mail. Students will be notified once his/her topic is approved.

Papers not submitted by the deadline will have 5 points deducted for each day the deadline has passed, up to one week. Papers over one week late will receive a grade of 0.

Papers equipment will not be allowed to use program equipment to print or copy any research paper or assignment. The program will not be responsible for opening and printing files for students. This will not be necessary since all students should have access to a computer and printer.

The student cannot complete a case study on a friend, neighbor, relative, or employee. If there is any question about whether this pertains to the selected patient, please see the Instructor.

Students are aware of HIPAA requirements and must maintain patient confidentiality at all times. Students who violate HIPAA are subject to dismissal from the program.
The required papers for each semester are as follows:

<table>
<thead>
<tr>
<th>Semester</th>
<th>Paper Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>1(^{ST}) SEMESTER</td>
<td>PATIENT CARE - POWERPOINT</td>
</tr>
<tr>
<td>2(^{ND}) SEMESTER</td>
<td>RADIOGRAPHIC TECHNIQUE</td>
</tr>
<tr>
<td>3(^{RD}) SEMESTER</td>
<td>COMPUTERIZED TOMOGRAPHY</td>
</tr>
<tr>
<td>4(^{TH}) SEMESTER</td>
<td>MODALITY</td>
</tr>
</tbody>
</table>

A grading rubric will be given to the students when the assignment is made. Grades for the semester paper will account for 10% the clinical grade.

Other papers may be assigned throughout the course of study at the discretion of the instructors.

**CLINICAL AND DEVELOPMENT CV**

The clinical experience is designed to allow students to successfully demonstrate Radiographic Procedures. Each student is expected to submit a portfolio that reflects the outcomes of the clinical experience. The CV should demonstrate completion of established objectives along with evidence of other activities in which the student was involved. Each month an assignment is provided along with a narrative that addresses clinical experience. Initially, critical thinking and problem solving are not as detailed as it is in later months. Clinical and developmental notebooks will be reviewed each month. All requirements must be met to receive a grade of 100; incomplete notebooks will receive a grade of 0.

*Clinical notebooks containing grades or evaluations are kept in a locked cabinet in the classroom. Access to these notebooks must be gained from an Instructor to ensure student confidentiality.*

**SEMINAR**

Students are required to attend the VSRT Student/Educator Seminar which is held in Virginia Beach, VA each April. The student is responsible for all expenses (food, hotel, transportation).

An additional seminar which is optional may be available to the students.

**CLINICAL OBJECTIVES**

**CORRELATION OF DIDACTIC TO CLINICAL COMPONENT OF PROGRAM**

In an effort to offer a well-integrated didactum of anatomy, positioning and clinical simulations, which are individual classes, the student will follow an organized course of study. Initially the student will learn a specific area of anatomy, learn the positioning for that anatomy and then simulate positioning. Each step has its own evaluation mechanism. It is ideal to pass each step in order, but it is understood that it is not always possible.

**POSITIONING TEST FAILURES**

Students who do not successfully pass the positioning test on a section of anatomy must retest before simulating. Instructors may make additional assignments before the retest is given to reinforce the material that the student has not mastered.
If the student is not successful the **second time**, this will be documented and the student will be informed that the next occurrence of failure, for this section of material, will be cause for **corrective action**. The student will be asked to study the material again, retest on the anatomy, and then retest on the positioning. All of these obligations must be met within a **three week** time period.

**SIMULATION FAILURES**

Students passing their positioning test, but then failing the simulation on a section of anatomy will be allowed to re-simulate with no penalty.

If the simulation is unsatisfactory a second time, it will be documented and the student will be required to retest on positioning and then re-simulate. All of these obligations must be met within a **three week** time period. **Failure to receive a passing grade on either the retest or the re-simulation will result in corrective action.**

The original failing scores on tests or simulations will stand in the student's record to be averaged for the grade each semester. Retest and re-simulation scores will be placed on record for documentation purposes only. Scheduling of assignments, retests and simulations will be at the discretion of the instructors.

It must be understood that repeated failures can result in probation and could lead to a student's dismissal. The reason for this dismissal would be **failure to accomplish clinical assignments and objectives**. Tests missed for any reason must be made up immediately upon the student’s return to school with simulations to follow as the schedule permits.

**COURSE OF STUDY**

Anatomy –

An element of anatomy is covered in the classroom.

*Example: Respiratory system*

Positioning –

After the student has learned the anatomy, positioning is taught and demonstrated in the classroom and energized laboratory.

*Example: Chest x-ray*

Practice –

There are practice sessions in the clinic. The Clinical Instructors work with the students to reinforce material taught in class.

*Example: PA and Lateral Chest*

Simulate –

Once the positioning class has been completed and the student has practiced the examination, he or she will demonstrate the positioning of the exam. Simulation grades will be recorded as a positioning lab grade.
Clinic –

Once the student has been simulated on an examination he or she can complete the examination in the clinic under the direct supervision of a registered radiographer.

Competencies-

With most radiographic examinations, the student must complete several exams in the clinic before a competency is required. Exams that are seldom ordered will be practiced repeatedly in practice sessions in order to make the student comfortable with the examination prior to performing a competency grade.

It is important for the student to understand that a mastery level of less than 85% for a clinical competency will require **two** repeat performances. One of these performances must be with the original evaluator and the other with a Clinical Instructor. Competency grades may be given by registered radiologic technologists designated by the program or by the Clinical Instructors.

INTRODUCTION TO THE CLINIC

Over the first several weeks, clinical instructors will structure activities with students to provide a progressive introduction to the clinic. During these activities, students will be introduced to ancillary work areas, radiographic rooms, radiographic equipment, radiation safety, and policies/procedures of both the program and the Medical Center.

HANDBOOK

During the first weeks of the program, program officials will discuss highlights from the student handbook regarding rules and regulations. The student will be given a handbook worksheet during the first week of the program. Time will be given during program hours to complete this assignment which will be placed in the student’s file upon completion.

After the end of the first week, a quiz will be given on the material covered in the handbook to ensure that the student understands what is expected during the program.

ORIENTATION TO DEPARTMENTS

The student will be oriented to the departments by the clinical instructors and supervisors of those areas in regards to:

- Location
- Utilization
- HIPAA and patient confidentiality
  - Winchester Medical Center
  - Medical Imaging Department
- Introduction to Clinic
  - Introduction to Radiologic Technology class
    - Patient Interaction
    - History Taking
ORIENTATION TO RADIOGRAPHIC ROOMS AND SPECIALTY AREAS

A clinical instructor or appointee will conduct an in-service demonstration on the operation and functions of each exam room in the main department, emergency department, the Diagnostic Center and specialty areas. Areas covered during this phase of orientation include:

- Radiation Protection –
- A clinical instructor will conduct a class in basic radiation protection
- Diagnostic Radiography & Fluoroscopy
- OR – sterile procedure
- CT
- MRI
- MINS
- Ultrasound
- Nuclear Medicine
- Radiation Therapy (optional)
- Special Procedures
- Cardiac Catheterization (optional)
- Mammography
- Endoscopy
- Bone DEXA

ROTATIONS AT OFF CAMPUS SITES

During the second semester, student will rotate through the Urgent Care Center. During the third and fourth semesters of the program students will rotate through Urgent Care Center, Warren Memorial Hospital, Shenandoah Memorial Hospital, and Hampshire Memorial Hospital. The supervisor at each of these areas will be responsible for orientation to the facility which will include an in-service on the equipment as well as a review of policies and procedures at that facility. **Other rotations may become required as more affiliation agreements are written.**

These off-site rotations are required. Students who are absent during these rotations will be required to make up the time at the location where they were assigned during the absence.

LOCATION OF CLINICAL SITES

Shenandoah Memorial Hospital
759 S. Main Street
Woodstock, VA 22664
Approximately 35 miles from the WMC campus

Warren Memorial Hospital
1000 N. Shenandoah Ave.
Front Royal, VA 22630
Approximately 25 miles from the WMC campus

Hampshire Memorial Hospital
363 Sunrise Blvd.
Romney, WV 26757
Approximately 41 miles from the WMC campus
ORIENTATION TO ANCILLARY AREAS
Supervisors from each of these areas will give a brief lecture on the role and responsibilities of these departments. Students will rotate through these areas following the lectures.
- Front office (main department and/or the diagnostic center)
- Imaging Library
- Transport
- Collating

CLINICAL GRADES
Various tools are used to follow the students’ clinical progression.

Daily evaluations –
The student is assigned to a registered technologist in clinic. At the start of the day the student should request that the technologist complete a clinical daily evaluation. This evaluation will be completed by the technologist at the end of the student’s clinical assignment for the day. The evaluation is submitted electronically through the hospital internet or may be completed in writing in areas where the site is unavailable. Information received from the evaluations will be shared with the students on a monthly basis.

Clinical Competencies –
This is a numeric grade given to a student following the completion of an examination on a patient. A clinical competency cannot be completed until a student has been simulated on that examination. Certain exams, as designated by the Clinical Instructors require preliminary competencies prior to obtaining a competency grade. Students may receive clinical competencies from approved staff technologists. No more than 4 clinical competencies from the same technologist will be permitted during a semester. However, there is no limit to the number of competencies that may be obtained from a Clinical Instructor or Clinical Coordinator. Technologists will complete part of the evaluation form (items 1-8), clinical instructors will complete the rest of the evaluation (items 9 and 10) and assign the final grade.

Competency forms are filled out completely by the CT technologists.

The list of required ARRT clinical competencies can be found on the ARRT website (www.arrt.org).

Critical Thinking / Developmental CV –
When in the clinical phase of education, students are required to keep records of all patient examinations observed, assisted or performed to include the exam, patient ID number and date. The purpose of this is to assure the versatility of clinical education and to track exams for the ARRT requirements.
Due to patient and student confidentiality issues, all Critical Thinking / Developmental CVs need to be kept in a locked cabinet in the classroom and will include:

- exams
- critical thinking assignments
- continuing education certificates
- commendations written by hospital staff
- room and ancillary check off sheets
- OR check off sheets

_Instructor’s evaluation_ –
At mid-semester and at the end of the semester, an instructor’s evaluation of student performance in the clinic is performed.

_Required papers_ – A formal written paper discussing some aspect of radiology, as assigned by instructors, will be required for each semester of the program. These grades will apply to the clinical grade for that semester. Assignments are as follows but are subject to change:

<table>
<thead>
<tr>
<th>Semester</th>
<th>Assignment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Semester I</td>
<td>Patient care</td>
</tr>
<tr>
<td>Semester II</td>
<td>Digital radiography/film</td>
</tr>
<tr>
<td>Semester III</td>
<td>Computerized Tomography</td>
</tr>
<tr>
<td>Semester IV</td>
<td>Modality Career Path</td>
</tr>
</tbody>
</table>

_CLINICAL ROTATIONS_
Every effort is made to rotate each student an equal number of times in each clinical area. Please keep in mind that student absences and vacations may result in an unequal number of rotations in specific clinical areas.

**Semester I**
During the first semester the student will be oriented to the clinical setting. A great deal of time is spent observing exams and assisting technologists. Students will begin to perform exams under direct supervision*. Students will be required to complete a specific number of clinical competencies in the first semester.

**Semester II**
Students will continue to perform exams independently with direct supervision*. Students are required to complete a list of competencies.

(Nota: each student will be assigned evening rotations during the second semester and may begin off-site rotations).

**Semester III**
Students will continue to perform exams with direct supervision* and may begin performing exams under indirect supervision* (when competency is achieved). Students are required to complete competencies listed for the third semester. During the third semester students will be rotated through specialty areas.

(Nota: each student will be assigned evening and off-site rotations during the third semester)
Semester IV-

Students in the fourth semester may perform the majority of patient examinations under indirect supervision* (when competency is achieved). Students in the fourth semester are required to complete competencies listed and will continue to rotate through specialty areas. (Note: each student will be assigned evening and off-site rotations during the fourth semester)

Senior students, in the last month of their 4th semester, may be eligible to request a specific clinical assignment once all clinical competencies have been completed. Requests will be granted on availability in the clinical area. Priority will be given students that need grades in a particular area.

Indirect supervision in the 3rd and 4th semester will not begin until competency is achieved on a particular exam. A list of students and exams they have achieved competency on will be communicated to Clinical Instructors on a regular basis. The Clinical Instructors will be responsible for notifying Technologists of a student’s status. Exams where a clinical competency grade is not required can still be performed under indirect supervision if the student simulated the procedure and achieved a 90 or higher.

SUPERVISION OF STUDENTS IN THE CLINICAL SETTING

DIRECT SUPERVISION

*Direct supervision is defined as “student supervision by a qualified practitioner who reviews the procedure in relation to the student’s knowledge, is present during the procedure, and reviews and approves the procedure. A qualified radiographer is present during student performance of a repeat of any unsatisfactory radiograph.” (JRCERT standard 4.4)

INDIRECT SUPERVISION

*Indirect supervision is defined as “for radiography, that supervision provided by a qualified practitioner immediately available to assist students regardless of the level of student achievement. Immediately available is interpreted as the physical presence of a qualified practitioner adjacent to the room or location where a radiographic procedure is being performed. This availability applies to all areas where ionizing radiation is in use.” (JRCERT standard 4.5) Indirect supervision is only used after a student demonstrates competency.

REPEAT RADIOGRAPHS

A qualified radiographer must be present during the evaluation of images and during the repeat of any unsatisfactory radiograph. Documentation of their presence is indicated by initials on the images as well as in the EPIC (JRCERT Standard 4.6) Violations will result in a corrective action.
GRADING OF STUDENTS IN THE CLINIC

Students are required to obtain a list of competency grades by semester.

As grades become available the policy for clinical competencies must be followed.

POLICY FOR CLINICAL COMPETENCIES

1st Semester:
Required competency list

2nd Semester:
Required competency list and 3 chest x-rays obtained between January and April and 1 upper and 1 lower extremity competency obtained between April and June.

3rd and 4th Semester:
At the beginning of the 3rd semester, a list of competency grades required prior to graduation will be given to the students. Grades on the list can be obtained at any time. The first 15-grades will be assigned to the 3rd semester, remaining grades will be assigned to the 4th semester in the grade book. In addition to the required competencies, 1-stretcher chest x-ray per month will be required.

Additional required monthly chest x-ray competencies must be recorded on a light blue competency sheet. Failure to do so will result in the competency being voided.

- Semester 1 – 2 clinical competencies must be performed by a CI
- Semester 2 – 2 clinical competencies must be performed by a CI
- Semester 3 – 3 clinical competencies must be performed by a CI
- Semester 4 – 3 clinical competencies must be performed by a CI
- Students must remain in assigned areas unless approved by a CI.
- When an exam is available in the area to which the student is assigned, the student should attempt the exam for a grade. If the student has not had sufficient experience with that examination he/she should perform the exam with the help of a staff technologist in order to gain the needed experience. This examination may not be offered to another student for a grade.
- If an exam becomes available in an area and the student assigned to that area has been graded on that exam, the examination may be offered to another student to perform for a grade. A clinical instructor should be contacted and the names of all students working in the nearby areas should be entered into a drawing to be offered the examination. No student should be removed from an ongoing examination to receive a grade on another patient. No patient should be made to wait for the availability of a student to perform the
examination. A clinical member of the program faculty should be contacted if a question or conflict arises.

- Near the end of the semester the program clinical faculty will review the exams needed by each student and adjust schedules accordingly. Students must be aware that it is their responsibility to take advantage of available examinations as the opportunity to receive a competency grade on some exams may be limited.

- Records will be kept on exam availability. Students refusing an examination when it becomes available will have that occurrence documented. Failure to perform an examination for a grade may result in the student receiving a grade of 0 on that exam, should another exam not become available prior to the end of the semester.

- Students are required to fill out the upper portion of the grade sheet and give the sheet to the technologists prior to beginning the examination for a competency grade. Failure to do so will result in the grade being voided.

- Technologists grading a student must be present with the student and observe the examination from the control booth. The technologist must be with the student and patient from the beginning of the examination until discharge of the patient. The technologist’s lead markers must be placed on the image and their initials entered into EPIC along with the student’s initials. Failure to do so will result in the grade being voided.

- Technologists will check off each step of the procedure on the competency sheet, designated TECHNOLOGIST, the remaining portion designated FACULTY will be completed by a program instructor and the final grade will be assigned.

- Only students assigned to the clinic during program hours or make-up time are eligible to be graded. **Students will not be excused from class to receive a competency grade unless approved by a Clinical Coordinator.**

- Grades should be submitted the day they are given. Grades received after 8 AM the following day will not be counted.

It is important that these rules are followed so that all students have an equal opportunity to learn, practice and receive grades. This is a JRCERT and SCHEV standard and must be upheld.
WMC-MRP REQUIRED CLINICAL COMPETENCIES

WMC REQUIRED CLINICAL COMPETENCIES
ARRT: Requires 37 mandatories and 15 elective (www.arrt.org)

1st Semester
Chest (10 preliminaries)

2nd Semester:
AP chest (stretcher or wheelchair) - 5 preliminaries
Abdomen supine (KUB) 1 preliminary
Abdomen - upright
Chest - pediatric
Thumb or Finger
Hand (1 preliminary)
Wrist (1 preliminary)
Forearm
Elbow (1 preliminary)
Foot (1 preliminary)
Ankle (1 preliminary)
Knee (1 preliminary)
Tibia/Fibula
Mobile Chest
Mobile Abdomen
Mobile Orthopedic

* Pediatric defined - age 6 or younger

3rd and 4th semester
Humerus
Shoulder (3 preliminaries)
Trauma - Shoulder/Humerus (scapular Y, transthoracic or axial)
Trauma - Upper Extremity (non-shoulder)
Clavicle
Femur
Trauma - Lower Extremity
Cervical Spine (3 preliminaries)
Thoracic Spine
Lumbar Spine (2 preliminaries)
Spine - Cross table lateral (horizontal beam)
Pelvis
Hip
Hip - Cross table (horizontal beam)
Geriatric Chest - routine
Geriatric Upper Extremity
Geriatric Lower Extremity

* Geriatric defined - 65 years of age or older
  physically or cognitively impaired due to age
Mobile C- Arm procedure (more than one projection)
Surgical C-Arm (manipulation around a sterile field)

**WMC Mandatories (from ARRT electives)**
- Paranasal Sinuses
- Upper GI
- Contrast Enema (one observed and one tipped exam)
- CAGB/Unit CXR
- CT (2) without contrast

**WMC/ARRT Elective (Select 12 out of the 15 listed below)**
- Chest - Lateral Decubitus
- Scapula
- Toes
- Skull
- Orbits
- Sacrum/Coccyx
- Abdomen - Lateral Decubitus
- Intravenous Urography
- Esophagus
- Small bowel series
- Pediatric Upper Extremity
- Pediatric Lower Extremity
- Pediatric Abdomen
- Neonatal Chest (NICU)

*Pediatric defined - age 6 or younger*
CONFLICT OF INTEREST

This policy is designed to protect the fairness and integrity of the learning process for the student. Each student should have an equal and unbiased experience when being evaluated by a technologist, faculty member or Program Director.

Students will not receive evaluations, clinical and didactic grades from family members or persons with whom they have close personal relationships. This policy is designed to eliminate the opportunity and/or the appearance of bias in student evaluations, clinical and didactic grades.

DEFINITIONS

Equal and unbiased experience

The Winchester Medical Center Medical Radiography Program schedules students for equal rotations through all clinical sites. Please keep in mind that student absences may result in an unequal number of rotations in specific clinical areas.

Staff Member

A registered Radiologic Technologist who is working with students on a daily basis filling out daily evaluations and clinical competencies. This includes technologists working in specialty modalities. This includes any staff member in a supervisory position.

Family Member

Family is defined as: spouse, child, parent, step mother, step father, brother, sister, step sister, step brother, niece, nephew, aunt, uncle, grandparent, grandchild, step child, step grandparent, step grandchild, adopted child, half-brother or sister, and the corresponding in-law relationships.

Personal relationship

Personal relationships are those of a romantic nature, and/or other close friendship such that evaluations might be in danger of being biased or viewed as biased. Roommates will also be considered to have a personal relationship for the purpose of this policy.

Anyone meeting any of the above criteria must sign the form included in the handbook as documentation to be placed in the student’s file.
STUDENTS WITHDRAWING FROM PROGRAM
Students who withdraw from the program are required to have an exit interview with the Program Director. A student is asked to complete a form indicating his/her reasons for withdrawing and how the program could have assisted the student to remain in the program. Information from this document is used for program improvement.

OUTSIDE EMPLOYMENT
Students are encouraged not to seek outside employment while attending the program. Employment hours could conflict with school hours and/or changes which occur. However, there are times when students must work. It is suggested that the student be very careful when seeking a job. Employment hours may interfere with the educational process. It is not the responsibility of the program personnel to arrange test schedules to accommodate work or social activities. Students employed by the hospital will not be allowed to wear school uniforms during employment hours. If employed by Valley Health, all personal work-related business during school hours must be approved by program staff and the student will be required to clock out during that time missed from school.

Students employed by Valley Health must inform the Program Director of their employment status.

Any student who is terminated as an employee of Valley health and not eligible for rehire, will be dismissed from the program. (This is due to the fact that the student would not be able to complete clinical assignments. All clinical rotations are through Valley Health.)

REFERENCE LIBRARY
A library is available within the classroom for student use. No books will be permitted out of the classroom without approval of a program official (Director, Faculty Member, or Program Assistant). Students must check with the radiologists in order to remove any materials from their library.

Students also have access to an on-line library through the Valley Health Intranet Website.

FINANCIAL ASSISTANCE
Currently, no financial assistance is available through the Medical Radiography Program.

Several scholarships are available to students in the radiography program. The following are examples. Other scholarships may be available. The student is encouraged to seek out other scholarships and grants.

- Jan Digges/Winchester Radiologists Scholarship – awarded in June to a rising senior. Details for application are available from the Program Director.

- WMC Ladies Auxiliary Scholarships- accepting applications from January to April 15th. Scholarships are awarded in May.

- Virginia Society of Radiologic Technologists (VSRT) Applicants must be in a radiography program 6 months before applying for this scholarship. [http://vsrt.org/Scholarships.aspx](http://vsrt.org/Scholarships.aspx)
• American Society of Radiologic Technologists (ASRT) Information found on the following website:

http://www.asrtfoundation.org/Content/Scholarships_and_Awards/Entry_Level_Scholarships/CurrentEntryLevelScholarships.aspx

STUDENT CONDUCT

STUDENT CONDUCT POLICY
At all times students must strive to put forth their best effort. Habits developed as a student radiographer carry over into the role as a staff radiographer. In order to meet obligations to oneself, the patient and fellow associates it is necessary to maintain optimal standards of professionalism at all times, in the clinic and in the classroom.

As representatives of the Winchester Medical Center and Valley Health, students are expected to convey an image of professionalism. This includes presenting a neat, clean, well-groomed appearance according to the dress code set forth in the student handbook. Students are expected to conduct themselves in a professional manner in their interactions with patients, coworkers, other students and program faculty treating them with respect, compassion and dignity. Loud conversations and the use of profane language will not be tolerated.

Students are expected to follow the guidelines for professional ethics set forth in the student handbook. Any breach of professionalism will result in a corrective action and depending on the severity of the infraction, could lead to suspension or dismissal.

STUDENT PARKING POLICY
During orientation week, students will file a form with safety and security and be given a parking sticker.

This sticker must be affixed to the back window or back bumper of the car. When assigned to the Winchester campus, all students must park on the 5th floor of the parking garage, regardless of assignment.

Students who fail to park in the designated area will be ticketed by Safety and Security. Students who are observed by school staff parking in other than the designated area will be issued a warning (verbally and by e-mail). A 2nd occurrence of a student found parking in other that the designated area will receive a corrective action.

Off campus parking will be addressed at the orientation to each facility. Students are expected to park in the areas designated for students at those areas.

INTERNET USE
Unauthorized use of the hospital internet is prohibited. Students are provided with an e-mail address that is accessible without internet access through the hospital intranet. Internet access will be granted to specific sites as needed for a specific class. Students will be given a copy of the internet policy to sign prior to receiving an e-mail account and internet password.
Activity on the hospital intranet and internet sites is monitored by Valley Health Information Systems. Failure to follow the internet policy will result in a corrective action. Abuse of this privilege by students is grounds for disciplinary action up to and including dismissal.

SEXUAL/WORKPLACE HARASSMENT POLICY
The policy of Sexual Harassment is the same as that of Winchester Medical Center. Its purpose is to provide an environment free from all forms of sexual/work place harassment or intimidation. Sexual harassment is defined by the Equal Opportunity Employment Commission (EEOC) as “unwelcome sexual advances, request for sexual favors, and other verbal or physical conduct of a sexual nature when submissions to such conduct are made either explicitly or implicitly a term or condition of an individual's employment.”

HORIZONTAL VIOLENCE
The program’s policy for horizontal violence follows the Valley Health policy.

Horizontal violence is hostile and aggressive behavior by individuals or group members towards another member or groups of members of the larger group. This has been described as inter-group conflict (Duffy 1995).

All acts of unkindness, discourtesy, sabotage, divisiveness, infighting, lack of cohesiveness, and criticism are deemed horizontal violence.

The following are some examples:

- Belittling gestures e.g. deliberate rolling of eyes, folding arms, staring into space when communication is being attempted. (Body language designed to discomfort the other).
- Verbal abuse including name calling, threatening, intimidating, dismissing, belittling, undermining, humorous ‘put downs’.
- Gossiping (destructive, negative, nasty talk), talking behind the back, and backbiting.
- Sarcastic comments.
- Fault finding (nitpicking) (different to those situations where professional and clinical development is required).
- Ignoring or minimizing another’s concerns.
- Slurs and jokes based on race, ethnicity, religion, gender or sexual orientation.

These behaviors will not be tolerated. Students exhibiting these behaviors will be subject to disciplinary action (counseling, corrective action, suspension or dismissal).

SMOKING
The Winchester Medical Center is a smoke free institution. This policy extends to all clinical sites within Valley Health. Smoking is prohibited for all students and any other persons transacting business in all Valley Health facilities. If the student insists on not following the policy written documentation will be necessary in the form of a corrective action.

Tobacco use in any form and vaping is prohibited and will result in a corrective action.
TELEPHONE POLICY
The purpose of the policy on personal telephone calls is to ensure that telephones are used exclusively to conduct Medical Center business. **The use of Medical Center telephones for personal matters is discouraged. Personal calls should be made on personal phones during free time. Personal calls may be made during breaks or meal time. Incoming student calls will be received by the Program Assistant or faculty member and a message will be taken. In case of emergency the Program Assistant will reach the student or forward the call if needed.**

*Cell phones are not permitted in clinic. Students using cell phones in the classroom/clinic will receive a corrective action.*

*Students will be required to sign up for “remind” which will be used to communicate information to the students concerning classes, assignments and school closures due to inclement weather. Students are not permitted to use cell phones in a clinical area to retrieve messages. To do so will result in a corrective action.*

*Other communication will be sent using the hospital e-mail. Students are required to check their e-mail accounts at the beginning and end of each shift.*

CAUSES FOR DISCIPLINARY ACTION
Disciplinary actions are issued in order to make the student aware that rules have not been followed and to help the student adjust their behaviors so that they may remain in the program.

The following reasons for disciplinary action are not all inclusive.

DRESS CODE VIOLATIONS
Unprofessional hair/make up colors and styles/tattoos

- Unnaturally bright colors.
- Mohawks.
- Spikes.
- Hair must be kept off the shoulders when in the clinic, due to Infection Control Policy.
- Hair must be neat and clean at all times.
- Cosmetics and body spray must be used sparingly (no perfumes or colognes when assigned to the OR)
- Finger nail polish/acrylic nails are not permitted due to the Infection Control policy.
- Visible tattoos must be covered.
- Scarves, caps and other headwear are not permitted except when ordered by a physician or safety or religious reasons. Approval of headwear must be obtained from Infection Control
- Fake eyelashes – Infection Control policy
Jewelry

- No hoop or dangling earrings.
- No more than 2 earrings in each ear, only standard size posts are permitted (no plugs).
- No eye, cheek, lip, nose piercing, or any visible piercing other than two earrings in each ear.
- No tongue pins (clear or not).
- No bracelets (1 watch is allowed); medical alert bracelet is the only exception.
- Only one ring on each hand or a wedding band and engagement ring together will be allowed.
- No long necklaces that hang down.
- No more than 1 necklace.
- No dark glasses.
- No lanyards for ID badges.
- No jewelry of any kind is permitted during OR rotations.

Attire

Clean pressed scrub jackets, in designated color and style, must be worn to and from the assigned clinic area. (The school selects the entire acceptable uniform)

Exception: Scrub jackets may be removed while working in a clinical area. Jacket must be worn any time the student leaves his/her assigned area i.e. lunch, when moving to a different area (moving from clinic to class).

- Scrubs – color and style designated by class.
- No low cut or low rise pants.
- No cropped shirts (no visible belly's or back sides).
- Only white, black or gray tee shirts can be worn under scrubs. Tee shirts must be tucked in.
- No open heel or toe shoes or clogs.
- Minimal neon colored shoes.
- Badges must be worn and visible at all times. Stickers or markers are not allowed on the front of the badges.
- Radiation monitoring devices must be worn at all times in clinical setting.
- No hoodies or sweatshirts in the clinic or class (hospital policy)
- Dress codes to specific clinical rotation (such as the OR) must be followed.
- Casual day attire will be business casual:
  - No jeans
  - No shorts
  - Only radiology approved T-shirts

Students improperly attired may be sent home to change clothes. Times missed will count as an unexcused absence.
GENERAL VIOLATIONS

Personal belongings:

Cell phones, IPods, tablets, lap top computers and other personal electronic devices:

- IPods, tablets or personal lap top computers are **NOT** permitted in the clinic. Cell phone use is prohibited in the clinic. **Cell phones in the clinic are a HIPAA violation.**

- Students found with any personal electronic device or observed using a cell phone in the clinic will be given a corrective action; if there is a **second occurrence**, the student will be **dismissed** from the program.

- **NO cell phone use is permitted in the classroom during scheduled class time.** Cell phones ringing during class will be documented as a **corrective action**. Use of cell phones in the classroom during class periods is grounds for a **corrective action**.
  
  Students needing to use the cell phone must leave the classroom.

- Cell phones must be placed face down on the desk during class time.

- Electronic devices may not be used to record lectures. Recordings made in the classroom will result in corrective action.

- Cell phones, IPods, tablets, computers or other electronic devices found in the possession of a student during a test will be **grounds for dismissal**. **NO EXCEPTIONS!**

- Students found using tablets or computers during class for anything other than the current class will be subject to **corrective action**.

- School items should be stored in lockers provided, not left in the classroom or any clinical area (Neither the program or hospital will be responsible for theft of any items)

- Lunch items should be stored in the staff lounge refrigerators.
VIOLATIONS IN THE CLINICAL SETTING

- Use of foul language and distasteful jokes are prohibited.
- Any use of foul language, distasteful jokes or derogatory comments against the program, the medical center or staff transmitted through e-mail is prohibited. Documentation of misuse of the hospital intranet and internet is subject to a corrective action, suspension and/or dismissal from the program. Intranet and internet use is monitored by Information Systems.
- Drinks are permitted only in designated areas in the clinical setting and break rooms.
- **Food is prohibited in the clinical setting. Students found eating in the clinical setting outside of designated areas are subject to corrective action (Hospital Infection Control Policy).**
- Conversations about student’s sexual experiences are forbidden.
- Loud and obnoxious conversations are prohibited.
- Students must arrive on time to each clinical assignment.
- Students needing to repeat an image for any reason must perform the repeat in the presence of a registered radiographer or clinical instructor.
- Students are **not** allowed to perform a portable exam alone.
- Students are **not** allowed to work alone in the OR.
- Students are **not** allowed to work under the supervision of another student or a graduate student who is not yet registered.
- Students are not permitted to chew gum or tobacco in the clinic.
- Gossiping: Any student found gossiping in the clinic (regarding the program, another student or any other inappropriate communication) will immediately receive a corrective action and be suspended for the remainder of the day. **On the second occurrence, the student will be suspended from the program for 3-days.**
- **Students failing to adhere to the above policies are subject to corrective action.**
VIOLATIONS IN THE DIDACTIC SETTING

- Students must arrive on time to class.

- Unexcused lateness to any class will be considered a tardy.

- No chewing tobacco in the classroom.

- Students are required to stay alert during lectures. If a student goes to sleep in class he/she will be asked to leave for the day and counted absent. Repeat offenses could result in a corrective action.

- Disruptions in class, in the form of excessive talking and bantering will not be tolerated. Students engaging in this disrespectful conduct will be asked to leave for the day. Written documentation will be placed in the student’s file. Repeated offenses could result in a corrective action.

- Corectec Review assignments will be due by 11:59 pm on the deadline announced. Students not meeting the deadline, will be sent home to complete the assignment. Time missed will be counted as absent time. Corectec Review is recorded as a single course on the transcript.

- Failure to complete 2 assignments in any class (including Corectec Review) will result in a corrective action.

- Use of laptop/tablets in the classroom for reasons unrelated to the class being taught will result in a corrective action, suspension and/or dismissal.

VIOLATIONS RELATED TO UNPROFESSIONALISM

- Students are expected to conduct themselves at all times in a professional manner while on Valley Health property and all other clinical sites.

- Non-payment of tuition by due date or payment in the form of a bad check may result in dismissal from the program.

- Clocking in prior to parking your vehicle is prohibited.

- Smoking is not permitted on any Valley Heath premises.

- Students must park in designated area. Violations will result in a written warning and counseling for the first offense and a corrective action for any subsequent offense. Students are responsible for any parking fines.

- Disrespect for classmates, instructors and program staff will result in corrective action, suspension and/or dismissal.

- Gossiping: Any student found gossiping in the clinic or in the classroom (regarding the program, another student or any other inappropriate communication) will immediately receive a corrective action and be suspended for the remainder of the day. On the second occurrence, the student will be suspended from the program for 3 days.
MARKER VIOLATIONS

- Students must use their assigned markers during clinical rotations. Students failing to have their markers will retrieve their extra set that is stored at the classroom. These markers must be returned at the end of the day. If the student is off campus, he/she must return to WMC to retrieve their markers and be reassigned on campus. Time missed will count as unexcused absence time and missed time from off-site rotation must be made up. Documentation will be recorded. The first occurrence of the student forgetting his/her markers will result in a verbal warning. A second occurrence will result in a corrective action.

- Use of another student’s or technologist’s markers by the student is forbidden and will result in a corrective action.

- Clinical competencies must have the student’s lead markers and the supervising technologist’s lead markers on the images. Failure of a student to have his/her own markers and the supervising technologist’s markers on the images will void the competency grade.

Students are required to purchase 2 sets of markers. It is strongly suggested that the student purchase extras sets of markers to keep in case original sets of markers are lost or misplaced. No orders will be placed prior to payment.

BREACH OF PROFESSIONAL ETHICS

Any of the following items will be grounds for dismissal:

- Failure to follow ALL HIPAA regulations at all times.
- Failure to adhere to patient, student, staff and technologist confidentiality.
- Clocking another student in or out. Each student is responsible for clocking him/herself in and out.
- Falsification of patients’ medical records.
- Falsification of students’ clinical records.
- Plagiarism.
- Cheating
- Possession of unauthorized instructional materials (quizzes, tests, etc.).
- Mistreatment or disrespect shown to patient or patient’s family member.

Employees who induce or assist students in violating work rules, policies, performance standards or organization values also will be reported to their managers.
It must be stressed that the above list is not all inclusive. Students will be subject to discipline for any inappropriate conduct. Infraction involving safety, respect for co-workers, faculty, managers, and above all, respect and care for persons we serve, are of particular concern to Valley Health.

Breach of ethics will be addressed by the Medical Radiography Program and Valley Health.

**STUDENT COUNSELING/ADVISEMENT**

The staff of the educational program will provide necessary counseling for students. Advisement sessions will be held at the end of a grading period to review the student’s grades and identify any areas that need to be improved.

Advisement /counselling session will be documented and a copy of the documentations will be placed in the student’s file.

If a problem is noticed with a student’s relationships with any of the student’s peers, staff technologists and or program faculty, an immediate session will be arranged with the program staff or the Program Director to discuss this problem. Problems with the student’s clinical performance will warrant a counseling session as well.

Counseling sessions will take place with a minimum of two members of the program staff.

The program faculty is here to assist students in the education and adjustment to a health career. Program staff members are available to meet with students during program hours. Occasionally special meetings need to be conducted between the student and one or more of the program staff. In this case an appointment must be scheduled by email.

If additional counselling is needed by a student, the Program Director can provide a list of local services the student may contact. Any fees for these services are the responsibility of the student.

**DISCIPLINARY ACTIONS**

Disciplinary actions include verbal warnings (face to face or through e-mails), written documentation with counseling, and Corrective Actions. Some disciplinary actions may lead to suspension and or dismissal depending on the severity of the infraction and the number of occurrences.

Corrective Actions are written warnings to the student that current behavior patterns are unacceptable. The student will receive the Corrective Action by the program official who has reported the incident(s) in the presence of the Program Director. Documentation is signed by the person reporting the incident and the student. Documentation and is retained in the student file.

Corrective actions will make the student ineligible to apply for certain scholarships.

**SUSPENSION**

Students requiring disciplinary action may be subject to suspension. Suspensions are issued based on the severity of the infraction. All suspensions are issued under the discretion of the Program Director. Any time missed from school as a result of suspension must be made up after
the program ends. Quizzes missed as a result of suspension will receive a grade of “0”. Tests will be made up on the day the student returns from the suspension, or as scheduled by the instructor for that class. The student is responsible for obtaining missed handouts and assignments from each instructor and for scheduling a time to take any missed tests.

Students are required to report suspensions to the American Registry of Radiologic Technologists (ARRT) when applying to take the ARRT credentialing examination. Students sign a consent under FERPA to allow the ARRT to communicate freely and openly with the Program Director regarding reasons for suspension and whether a not it involved an ethics violation.

PROBATIONARY STATUS
The following are reasons for placing a student on probation:

- If a student has below 85% overall didactic average at mid-semester, or end of a semester, he/she will be placed on academic probation.
- If a student receives two corrective actions within a semester he/she will be placed on probation.

A student who is put on probation will remain there until the next grading period when the student’s case will be reviewed. At that time, if logical progression hasn’t occurred or the student has showed non-compliance, he/she will be required to appear before the program staff and the Program Director. Failure to progress during a probationary period may be grounds for dismissal.

REASONS FOR DISMISSAL FROM THE MEDICAL RADIOGRAPHY PROGRAM

- Any four Corrective Actions during the program.
- Any two Probations.
- Any two suspensions during the program.
- The conviction and/or known use, distribution of, or possession of illegal drugs or controlled substances.
- Intoxication or consumption of alcohol during scheduled hours. If a student is unable to function in the clinic or the didactic portion of the program he/she will be asked to consult with employee health. (An alcohol or drug screen may then be required. If a drug screen is required it will be ordered by the Medical Director of the program). Refusal of compliance will be evidence of guilt and grounds for dismissal.
- Two (2) consecutive absences without notification to the program.
- Breach of professional ethics.
- Cheating/plagiarism
- Excessive absenteeism

The above list is not all inclusive. Individual cases will go before the Program Director, Program Faculty and the Director of Medical Imaging for a final decision.

**GRIEVANCE POLICY FOR STUDENTS**

The purpose of the grievance procedure is to afford a fair method for resolution of disputes which may arise between the Program and students or department staff and students. A **grievance** shall be a complaint or dispute of a student regarding the application, meaning or interpretation of policies or procedures as they affect the total educational activity of the student. **Days** as used in this policy shall be scheduled days for clinical and/or didactum for the student and working days for the program or staff representative involved.

**GRIEVANCE PROCEDURE FOR STUDENTS**

**Step one**

A student who wishes to file a grievance shall present the grievance orally to the Program Director or designee. The grievance will be presented within **ten days** of occurrence. The Program Director will reply to the grievance within **three days** of the day following the **step one** meeting.

**Step two**

If the Program Director’s reply is not acceptable to the student, he/she shall reduce the grievance to writing and request a meeting with the Program Director, program faculty, and the Medical Advisor. The request for the **second step** meeting shall be made within **three days** of the receipt of the Program Director’s reply, and the second step meeting shall be held within **three days** following such a request.

The Director shall reply in writing to the grievance within **three days** following the **second** meeting (based on the consensus of the program faculty, the Medical Advisor for the Medical Radiography Program, and the Program Director).

**Step three**

If the Program Director’s reply is not acceptable to the student, he/she may request a meeting with an Administrator from the Winchester Medical Center, specifically, the Vice President of Operations and Professional Services. Such a request for a **third step** meeting shall be made within **three days** of the receipt of the Program Director’s reply, and the **third** meeting shall be held within **three days** following such a request. The administrator shall reply to the grievance within **three days** following the **third step** meeting. The decision of the administrator is final.

A copy of a grievance form is located in the handbook.
The grievant, the Program, and the department staff member may have, at every step, witnesses and evidence required, which specifically pertain to the grievance. Failure to process a grievance by the grievant within the time limits, or agreed upon extension, shall constitute termination of the grievance.

Students will not be subject to unfair actions as a result of filing a complaint.

In addition to the program grievance procedures, students have the right to file a complaint with The State Council of Higher Education for Virginia (SCHEV).

SCHEV can be contacted at:

State Council of Higher Education for Virginia  
101 North 14th St., 10th FL. James Monroe Bldg.  
Richmond, VA 23219 Phone: 804-225-2600  
http://www.schev.edu

Following a grievance procedure, if the student feels that this issue was not resolved he/she may contact the Joint Review Commission for Education in Radiologic Technology (JRCERT)

JRCERT can be contacted at:

Joint Review Committee on Education in Radiologic Technology  
20 N Wacker Dr., Suite 2850  
Chicago, IL 60606-3182  
Phone: (312) 704-5300  
http://www.jrcert.org or mail@jrcert.org

COMMUNICABLE DISEASES

To ensure continued high-quality patient care while maintaining a safe work environment for student and employees, the Infection Control Committee has established policies which provide the means for reporting and preventing infections of communicable disease. The policies regarding students who are exposed to or infected with any virus are available either in the work area or are available for review with the Employee Health Nurse in the Human Resources Department. Students will be familiar with these policies and adhere strictly to protocol. IT IS IMPORTANT FOR THE STUDENT TO REMEMBER THAT STANDARD PRECAUTIONS NEED TO BE TAKEN WITH ALL PATIENTS.

HANDWASHING POLICY/INFECTION CONTROL

Hand washing is the most important step in preventing the spread of hospital acquired infections. In order to protect our patients, fellow students and staff members, it is vital that we wash our hands before and after each exam we perform. Hand washing with soap should be a minimum of 15 seconds. The hospital provides an alcohol-based waterless antiseptic. Washing hands with soap and water must be done after caring for a patient on contact precautions for C-difficile and when hands are visibly soiled. Hand washing with the use of alcohol-based waterless antiseptic must be done in front of the patient.
Failure to follow this policy will result in a verbal warning and an e-mail at the first occurrence. A second occurrence will result in a counseling session. The third occurrence involving this policy will result in a corrective action.

OBTAINING TWO PATIENT IDENTIFIERS

It is a requirement that two patient identifiers be obtained from our patients prior to doing their exam. Two patient identifiers consist of the patient stating the full name and date of birth. This information should be given in the exam room, not in the hallway or patient holding bay. Obtaining these identifiers helps ensure that we are doing the correct exam on the correct patient.

Failure to follow this policy will result in a verbal warning and an e-mail at the first occurrence. A second occurrence will result in a counseling session. The third occurrence involving this policy will result in a corrective action.

TERMINAL COMPETENCIES

The Essentials and Guidelines of an Accredited Educational Program for the Radiographer define terminal competencies as “terminal evaluations which serve as a reliable indicator of the effectiveness of instruction and course design.”

"Criteria for successful performance should be equitably applied without discriminations, and provision for dismissal from the program should be made for students who do not make satisfactory progress according to these criteria."

Terminal competencies shall include, but not be limited to, the following list.

The graduate shall be able to:

1. Anticipate and provide basic patient care and comfort, recognize emergency patient conditions, and initiate first aid and basic life support.

2. Operate radiographic equipment, positioning the patient to perform radiographic examinations and procedures, while practicing radiation protection for the patient, oneself and others.

3. Determine exposure factors to obtain diagnostic quality radiographs with minimum radiation exposure.

4. Utilize critical thinking skills to modify standard procedures to accommodate for patient condition and other variables.

5. Evaluate radiographic images for appropriate positioning and quality. Demonstrate knowledge and skills relating to quality assurance including the knowledge of safe limits of equipment operation.
Student must have completed the program with an overall average of 85% in each semester in both clinical and didactic courses. College courses required for graduation from the program must be completed with a grade of C or higher. College courses must be completed by the end of the second semester of the program.

**GRADUATION**

A certificate will be awarded during graduation ceremonies at the successful completion of the fourth semester. Graduation will be conducted at the WMC Conference Center. A check-off sheet will be given to the student prior to graduation to ensure that all criteria for graduation have been met.

Students lacking competency grades or required make-up time may be allowed to participate in the graduation ceremonies but will not receive a certificate until all criteria for graduation is met.

Students who have received a suspension, may not be eligible to participate in graduation depending on the reason for the suspension and if the student has completed all didactic and clinical work.

All time missed due to suspension must be made up at the end of the program. Certificates will be issued upon completion of make-up time.

**COLLEGE CREDIT**

Many Colleges and Universities will give credit for our certificate program. A list of colleges is available from the Program Director. Please be advised that it is solely at the discretion of the receiving institution which credits and/or coursework, if any, will be accepted.

**ARTICULATION AGREEMENT WITH ST JOSEPH’S COLLEGE – ON-LINE**

The Winchester Medical Center, Medical Radiography Program has an articulation agreement with St. Joseph’s College Online, an on-line program that will allow credit for classes taken through the Medical Radiography Program. These credits may be applied toward a BS degree. Information regarding this agreement may be obtained through the Program Director or by contacting the college at info@sjcme.edu.
THE AMERICAN REGISTRY OF RADIOLOGIC TECHNOLOGISTS (ARRT) EXAMINATION

To sit for the National Registry Examination (ARRT), it is necessary to have completed an accredited program in Radiologic Technology. Application for this examination will be made prior to the completion date of the program.

Students graduating after January 1, 2015 must meet all the requirements of the Radiography Program and the ARRT requirements for completion of an Associate’s Degree in order to be able to sit for and receive the results of the AART examination.

RESPONSIBILITIES OF THE APPLICANT

It is the sole responsibility of the applicant to complete the requirements of the application for certification process once he/she has received the application and on-line instruction and has met the primary deadlines (as previously indicated) highlighted by the Program Director or designee.

Those responsibilities of the applicant include (but are not limited to):

- Reading the application and on-line instructions.
- Completing the application form.
- Obtaining and attaching a passport photograph.
- Attaching application fees as required.
  - The current registry examination fee is $200.00.
  - Application fees for the registry examination are subject to change.
- Obtaining appropriate signatures and notarization if required.
- Mailing application.
- Providing documentation to substantiate the ARRT qualifications for clinical competency.
- Providing documentation to substantiate ASRT requirement for 15 core course credits (program prerequisites)
- Providing documentation to substantiate ARRT requirement for completion of an Associate’s Degree or higher.
- Providing any additional documentation to satisfy ARRT requirements.
  - Explanation of any suspensions that occurred during the program
  - Explanation of any felonies charged to the applicant
- Obtain verification from the Program Director that he/she has been signed off with the ARRT to take the examination
- Schedule testing date.

The applicant for the ARRT examination must meet all requirements of the Radiography Program and the ARRT requirements for an Associate’s Degree in order to be able to sit for and receive the results of the examination. Failure to follow policy and procedure may result in the applicant incurring penalty fees and retaking the examination.
RESPONSIBILITIES OF THE PROGRAM DIRECTOR

- It is the responsibility of the Program Director to obtain an adequate number of copies of the application for certification examination from the American Registry of Radiologic Technologists for each graduating class.

- Copies of the application will be given to those students who are expected to successfully complete the educational program.

- The Program Director will point out application fees due, photo ID requirement, and signatures needed to properly complete the application for certification examination processing.

- Upon receipt of proof that the student has met all the ASRT/ARRT requirements the Program Director will sign the application form.

- After the ARRT has received and processed the student’s application, contact will be made with the Program Director to verify that the student has met all qualifications to complete the Medical Radiography Program. The Program Director will then inform the ARRT whether or not the student has met the qualifications.

- The Program Director will notify the student when verification has been made to the ARRT.

CONTINUING CERTIFICATION

Certification is renewable yearly and is the responsibility of the radiography. The radiography must obtain 24 continuing education credits within each 2 years period (biennium) to be eligible for registry renewal.

Upon receipt of registered status, it is suggested that the radiographer join local, state, and national professional associations for radiographers if he/she has not participated as a student. These organizations offer continuing education and scholarship opportunities that should prove useful to technologists.

STATE LICENSURE

The graduate of the program of Radiologic Technology is responsible to apply for state licensure, where applicable, after the results of the ARRT examination have been released. Most states accept the successful completion of the ARRT examination to grant the license.
STANDARDS FOR AN ACCREDITED EDUCATIONAL PROGRAM IN RADIOGRAPHY

The Winchester Medical Center Medical Radiography Program follows the standards set forth by the Joint Review Commission for Education in Radiologic Technology (JRCERT).

Joint Review Committee on Education in Radiologic Technology

20 N Wacker Dr., Suite 2850
Chicago, IL  60606-3182
Phone:  (312) 704-5300

A copy of the standards may be accessed through the following website:


Additional information about program accreditation, certification, curriculum and program outcomes (program effectiveness data) may be obtained through the JRCERT website at:

http://jrcert.org/

Questions regarding accreditation may be sent to:

mail@jrcert.org

POLICY CHANGES

Over the period of the school term, it may be necessary to change or add policies to the handbook. When this occurs, students will be notified and documented with signatures of the students on the new policy.
PROGRAM OFFICIALS

Patti Hershey
BSRS, MA Ed
R.T. ARRT (R) (CT) (M) ARDMS (AB) (OB) (NE) (BR) RVT (VT)
Program Director

Eric Chard
BS, R.T. ARRT (R) (CT)
Clinical Coordinator

Roxanne Kitzmiller
BSRS, R.T. ARRT (R)
Clinical Coordinator

Robin Cullen
R.T. ARRT (R)(M)(QM)
Clinical Instructor

Heather Harding
R. T. ARRT (R)
Clinical Instructor

Kim Shirley
Program Assistant

Joseph Poe, MD, MBA
American Board of Radiology Certification – Diagnostic Radiology
American Board of Radiology Certificate of Additional Qualification – Neuroradiology
Medical Advisor

Paulette Duckrey
BSRT(R)(M), CRA
Corporate Director - Medical Imaging
WINCHESTER MEDICAL CENTER/VALLEY HEALTH SYSTEM OFFICIALS

Paulette Duckrey  
BSRT (R)(M) CRA  
Corporate Director – Medical Imaging

James Sherwood  
BSN, MS Healthcare Administration  
Vice President, Operations and Professional Services, Winchester Medical Center

Grady W. (Skip) Philips, III  
FACHE  
Senior Vice President, Valley Health; President Winchester Medical Center

Mark H. Merrill  
BA, MSPH  
President and CEO - Valley Health Systems
STUDENT INFORMATION

Student name: _____________________________________________________________

Address: ______________________________________________________________________

City/State/Zip: ______________________________________________________________________

Telephone # H: _______________________ C: __________________ W: ________________

E-mail: ___________________________________________

Social Security #: __________________________

Emergency Contact: _____________________________________________________________

Relationship: ___________________________ Telephone #: _____________________________

PROGRAM INFORMATION

Date of admission: ____________________________ Program Course: Certificate in Radiologic Technology

Program Start Date: __________________________ Program End Date: __________________________

The program is full-time and classes/clinic assignments are 5 days a week – Monday through Friday.

Time of day: Day classes 8 am TO 4 pm, Portable Rotations 8 am to 4 pm with optional shift 4:30 am to 12:30 pm, Evening Rotations 11 am to 7 am (1st and 2nd semesters) – 12pm to 8 pm (3rd and 4th semester)

Site rotations: HMH – 8 am to 4 pm, SMH- 7am to 3:30 pm, Urgent Care 8 am to 4 pm and/or 11 am to 7 am (1st and 2nd semesters) – 12pm to 8 pm (3rd and 4th semester), WMH - 7am to 3 pm.

Number of weeks: APPROXIMATELY 100 weeks. Total credit hours – transfer 15 credits, program credits 65 = total credits 80.
TUITION

THE TOTAL COST OF THE WINCHESTER MEDICAL CENTER – MEDICAL RADIOGRAPHY PROGRAM

TUITION: $12,000.00
NON-REFUNDABLE REGISTRATION DEPOSIT $100.00
BOOKS $1,300.00
MISC. FEES FEES ARE SUBJECT TO CHANGE $850.00
TOTAL COST $14,250.00

CANCELLATION REFUND POLICY:

Three-Day Cancellation:

An applicant who provides written notice of cancellation within three (3) business days of program admission, excluding weekends and holidays, of executing the enrollment agreement is entitled to a refund of tuition and fees paid, excluding books and the non-refundable registration deposit.

Withdrawal Procedure:

A. A student choosing to withdraw from the school after the commencement of classes is to provide a written notice to the Program Director. The notice must include the expected last date of attendance and be signed and dated by the student.

B. If special circumstances arise, a student may request, in writing, a leave of absence, which should include the date the student anticipates the leave beginning and ending. The withdrawal date will be the date the student is scheduled to return to and from the leave of absence but fails to do so.

C. A student will be determined to be withdrawn from the institution if the student misses three (3) consecutive instructional days and all the days are unexcused.

D. All refunds must be submitted within 45 days of the determination of the withdrawal date.

Tuition refunds will be determined as follows:

<table>
<thead>
<tr>
<th>Proportion of Total Program Taught by Withdrawal Date</th>
<th>Tuition Refund</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 25%</td>
<td>75% of program tuition</td>
</tr>
<tr>
<td>25% to 49%</td>
<td>50% of program tuition</td>
</tr>
<tr>
<td>50% to 74%</td>
<td>25% of program tuition</td>
</tr>
<tr>
<td>75% or more</td>
<td>No Refund</td>
</tr>
</tbody>
</table>
NOTICE TO BUYER:

1. Do not sign this agreement before you have read it or if it contains any blank spaces.
2. This agreement is a legally binding instrument. Both sides of the contract are binding only when the agreement is accepted, signed, and dated by the authorized official of the school. Read the entire document before signing.
3. You are entitled to an exact copy of this agreement and any disclosure pages you sign.
4. This agreement and the school handbook/catalog constitute the entire agreement between the student and the school.
5. Although the school will provide placement assistance, the school does not guarantee job placement to graduates upon program completion or upon graduation.
6. The school reserve the right to reschedule the program start date when the number of students scheduled is too small.
7. The school reserves the right to terminate student’s training for unsatisfactory progress, nonpayment of tuition or failure to abide by established standards of conduct.
8. The school does not guarantee the transferability of credits to a college, university or institution.
9. Any decision on the comparability, appropriateness and applicability of credit and whether they should be accepted is the decision of the receiving institution.

STUDENT ACKNOWLEDGEMENTS AND AUTHORIZATIONS:

1. I hereby acknowledge receipt of the school catalog/handbook dated ____________________, which contains information describing programs offered and equipment/supplies provided. The school catalog/handbook is included as part of this enrollment agreement and I acknowledge that I have received a copy of this catalog.

____________________  Student initials

2. I have carefully read and received an exact copy of this enrollment agreement.

____________________  Student initials

3. I understand that the school may terminate my enrollment if I fail to comply with attendance, academic and financial requirements or if I fail to abide by established standards of conduct, as outlined in the school handbook. While enrolled in the school, I understand that I must maintain satisfactory academic progress as described in the school handbook and that my financial obligation to the school must be paid in full before a certificate may be awarded.

____________________  Student initials

4. I understand that the school does not guarantee job placement to graduates upon program completion or upon graduation.

____________________  Student initials
5. I understand that complaints which cannot be resolved by direct negotiation with the school in accordance to its written grievance policy, may be filed with the State Council of Higher Education for Virginia, 101 N. 14th Street, 9th Floor, James Monroe Building, Richmond VA, 23219. All student complaints must be submitted in writing.

__________________Student initials

6. I understand that during the course of the program, I will have on-site clinical experience at Valley Health System (VHS) facilities. As a condition of participating in the program, I will comply with VHS policies and procedures as well as VHS standards of conduct. In addition, I authorize the Program Director and school personnel to discuss with VHS and VHS personnel my clinical experiences and participation in the program. This authorization includes, but is not limited to, discussion with VHS human resources if I apply for employment with VHS upon program completion or graduation. I understand that the Program Director and school personnel will not disclose information that may be subject to confidentiality requirements under accreditation standards applicable to the school and/or federal and state laws and regulations.

__________________Student initials

**CONTRACT ACCEPTANCE:**

I, the undersigned, have read and understand this agreement and acknowledge receipt of a copy. It is further understood and agreed that this agreement supersedes all prior or contemporaneous verbal or written agreement and may not be modified without the written agreement of the student and the Program Director. I also understand that if I default upon this agreement I will be responsible for payment of any collection fees or attorney fees incurred by the Winchester Medical Center – Medical Radiography Program.

*My signature below signifies that I have read and understand all aspect of this agreement and do recognize my legal responsibilities in regard to this contract.*

Signed this ______________________ day of ____________________, 20 _______________.

__________________________________

Printed name of student

__________________________________

Signature of Student Date

__________________________________

Signature of Program Director Date
REPRESENTATIVE’S CERTIFICATION:

I hereby certify that ___________________________________________________________ has been interview by me and the Selection Committee and in our judgement, meets all requirements for acceptance as a student in the Winchester Medical Center – Medical Radiography Program, as described in the school catalog/handbook. I further certify that there have been no verbal or written agreement or promises other that those appearing on this agreement.

__________________________________________________________
Signature of Program Director

______ Date
SIGNATURE OF RESPONSIBILITY

WINCHESTER MEDICAL CENTER
MEDICAL RADIOGRAPHY PROGRAM

SIGNATURE OF RESPONSIBILITY

These policies and procedures have been prepared to assist you in successful completion of the Medical Radiography Program. You are expected to become thoroughly familiar with this Handbook and to keep it available for ready reference.

If you have difficulty understanding anything in this Handbook, please consult the Program Director, clinical instructors or program assistant.

I hereby acknowledge that I have read the current handbook.

________________________________________
Signature of Student:

________________________________________
Date:

By signing this statement, I acknowledge receipt of Winchester Medical Center –Medical Radiography Program Handbook and accept my responsibility to observe the policies and procedures outlined in this Handbook. (To be retained in your personal file)

Sections of this Handbook are subject to change due to curriculum or function. It is the responsibility of the Medical Radiography Program to inform students of those changes by written memo or written Handbook changes.
EMERGENCY CONTACT INFORMATION FORM

WINCHESTER MEDICAL CENTER
MEDICAL RADIOGRAPHY PROGRAM

EMERGENCY CONTACT INFORMATION

Student name: ________________________________

Address ____________________________________________________________

Home phone ___________________ Cell phone _______________________

Home e-mail address ________________________________________________

Emergency Contact #1 ______________________________
Relationship ______________________ Phone # _______________________

Emergency Contact #2 ______________________________
Relationship ______________________ Phone # _______________________

Any special comments in case of an Emergency:
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________

STUDENT HANDBOOK – Student Records –

“Student records are confidential and are maintained by the Winchester Medical Center, Medical Radiography Program. Students are required to report promptly to the Program Assistant any personal data changes; name, address, e-mail address, telephone number and persons to notify in case of emergency along with their telephone numbers.”
CONFLICT OF INTEREST STATEMENT

WINCHESTER MEDICAL CENTER
MEDICAL RADIOGRAPHY PROGRAM

CONFLICT OF INTEREST STATEMENT

I, ____________________________________________, have read the conflict of interest section in the Winchester Medical Center Medical Radiography Program Handbook and understand the policy is designed to protect the fairness and integrity of the learning process for each student.

I understand that I will not be allowed to receive evaluations, clinical and didactic grades from family members or persons with whom I have a close personal relationship (as defined in the policy).

_____ I have no persons to declare at this time.

_____ I have the following persons to declare:

Name: ____________________________________________
Relationship: ____________________________________________
Place of employment within Valley Health: _______________________

Name: ____________________________________________
Relationship: ____________________________________________
Place of employment within Valley Health: _______________________

Name: ____________________________________________
Relationship: ____________________________________________
Place of employment within Valley Health: _______________________

I understand that should there be a change in relationship between myself and another person who is in a position to issue evaluations, clinical or didactic grades it is my responsibility to notify the Program Director and sign an additional form.

By signing this statement, I acknowledge my responsibility to observe the conflict of interest policy.

______________________________
Signature of Student:

______________________________
Date:

Form to be kept in student’s file.
The purpose of the American Disability Act (ADA) is to ensure that students who may have special needs are provided with reasonable accommodations to help them achieve academic success.

It is important to understand that while this disclosure is voluntary, a student with a disability has the legal responsibility to request any necessary accommodations in a timely manner and to provide the Medical Radiography Program with appropriate, current documentation of the disabling condition.

If you wish to request accommodations under the Americans with Disabilities Act (ADA) you must complete the request form and return it with the required documentation to the Program Director within two weeks.

After your needs have been identified, you will need to meet with the Program Director and all instructors to determine the accommodations that will be provided in the classroom. Due to the nature of the work in the clinic, patient care and safety must be considered when asking for accommodations.

I have read the above and understand how I must apply for accommodations under the Americans with Disabilities Act.

______________________________
Signature of Student:

______________________________
Date:

_____ I wish to apply for accommodations under the Americans with Disabilities Act (ADA)

_____ I do not wish to apply for accommodations under the Americans with Disabilities Act (ADA)
PREGNANCY POLICY
Winchester Medical Center
Medical Radiography Program

STUDENT PREGNANCY POLICY

Due to the very great danger from radiation exposure to an unborn fetus, especially during the first trimester, a student who becomes pregnant at any time during the 24 months of training may declare to the Program Director the fact at the earliest possible pregnancy test. This declaration must be made in writing and signed by the student. The student will then be given a form for declaration of pregnancy which will be forwarded to the radiation safety officer.

Should the student decide not to inform the Program Director of the pregnancy, the responsibility will be that of the student and not the Winchester Medical Center Medical Radiography Program, the Winchester Medical Center, Valley Health or other clinical sites. Special provisions cannot be made to a student who is pregnant. All rotations must stand, as scheduled. Time missed as a result of pregnancy, in excess of the allotted time for the school year, will be made up after graduation and before the student can take the registry examination. Excessive time missed due to the pregnancy will be dealt with following the attendance policy. Each case will be reviewed by the Program Director and Faculty of the Winchester Medical Center Medical Radiography Program. Students will be required to complete a Medical Leave of Absence form prior to taking Maternity Leave.

Although it is both procedure and practice of this program to offer the utmost in radiation protection to the students, the School and the clinical sites will not be responsible for injury to either the mother or child due to radiation exposure during pregnancy.

Information regarding a student leaving due to pregnancy will be held in strictest confidence.

The student has the option to withdraw the declaration of pregnancy through a letter addressed to the Program Director.

Female students will be required to sign a statement that reads:

I understand the pregnancy policy above and the fact that it is my responsibility to inform the Program Director in writing if I should become pregnant. I also understand that if I decide not to inform program officials, there is no responsibility to the Winchester Medical Center, Valley Health or other clinical sites regarding RADIATION EXPOSURE to my unborn child. I further understand that no special provisions will be made regarding scheduling or time missed by the Medical Radiography Program. I also understand that, at any time, I have the option of withdrawing the declaration of pregnancy and the withdrawal must be submitted in writing to the Program Director.

_______________________________________________________________________
Student’s Printed Name

_______________________________________________________________________
Student’s Signature Date
Voluntary Declaration of Pregnancy

Radiation Safety Department
Winchester Medical Center
1840 Amherst Street
Winchester, VA. 22601

PART 1 (TO BE COMPLETED BY WORKER):

1. Provide the information requested below
2. Read the information provided
3. Sign and Date at the end of Part 1
4. Return completed form to the Radiation Safety Officer

<table>
<thead>
<tr>
<th>Name (Last, First, MI - Please Print)</th>
<th>Employee Number</th>
<th>Estimated Conception Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Job Title</th>
<th>Department</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Will you be performing and procedures that will require you to wear a lead apron? YES / NO (circle one)
If "Yes", please indicate the type of work/equipment to be performed/used:

I have been advised of the potential health risks to the embryo/fetus associated with radiation exposure.
I have also been advised of the Nuclear Regulatory Commission (NRC) requirements of 10CFR20 that the dose to the embryo/fetus for occupational exposure of the expectant mother be limited to 500 mrem for the entire gestation period.
I have read and understand Department Policy MIS-PC-46 Radiation Safety of Pregnant Medical Imaging Personnel located on the hospital Intranet.
I understand the the radiation exposure of pregnant employees must be limited in accordance with the following:
1. The dose to an embryo/fetus during pregnancy, due to occupational exposure of a declared pregnant woman shall not exceed 500mrem.
2. Efforts will be made on my part to avoid substantial variation above a uniform monthly exposure rate so as to satisfy the 500mrem limit per pregnancy and 45mrem limit per month.

I hereby declare my pregnancy and request the the RSO issue a fetal badge to me. I understand that I must notify the RSO when I am no longer pregnant. I also understand that I my withdraw my request at any time for any reason prior to the end of my pregnancy.

Signature                          Date

PART 2 (TO BE COMPLETED BY THE RSO):

Date Badge issued:                  Badge series

Remarks

RSO Name (Please Print) RSO Signature Date received by RSO
Voluntary Declaration of Pregnancy - Withdrawal

Radiation Safety Department
Winchester Medical Center
1640 Amherst Street
Winchester, VA 22601

PART 1 (TO BE COMPLETED BY WORKER):
1. Provide the information requested below
2. Read the information provided
3. Sign and Date tand the end of Part 1
4. Return completed form to the Radiation Safety Officer

<table>
<thead>
<tr>
<th>Name (Last, First, Mi - Please Print)</th>
<th>VH Employee Number</th>
</tr>
</thead>
</table>

Job Title | Department
---|---

I have been advised of the potential health risks to the embryo/fetus associated with radiation exposure. I have also been advised of the Nuclear Regulatory Commission (NRC) requirements of 10CFR20 that the dose to the embryo/fetus for occupational exposure of the expectant mother be limited to 500 mrem for the entire gestation period.

I have previously declared my pregnancy to the RSO and have received a fetal badge. I understand that I may withdraw my request at any time and for any reason prior to the end of my pregnancy.

I hereby withdraw my request for a fetal monitoring badge.

I understand that, by withdrawing my request, the RSO will apply the NRC dose limits applicable to occupational workers. I make this decision voluntarily and have had the opportunity to ask questions concerning the potential health risks to me and my embryo/fetus.

<table>
<thead>
<tr>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
</table>

PART 2 (TO BE COMPLETED BY THE RSO):

Date Received | Time
---|---

Remarks

<table>
<thead>
<tr>
<th>RSO Name (Please Print)</th>
<th>RSO Signature</th>
<th>Date</th>
</tr>
</thead>
</table>
POLICY OF USE OF HOSPITAL E-MAIL ACCOUNTS BY RADIOGRAPHY STUDENTS

WINCHESTER MEDICAL CENTER
MEDICAL RADIOGRAPHY PROGRAM

POLICY ON THE USE OF HOSPITAL E-MAIL ACCOUNTS
BY RADIOGRAPHY STUDENTS

Hospital e-mail accounts are given to the student in order to be able to communicate with school staff and to keep up on assignments and schedule changes. This is a privilege granted by the hospital. Abuse of e-mail accounts can result in having that account closed.

- Hospital e-mail accounts may not be used by students for personal e-mail. These accounts are to be used for hospital and school business only.
- Students are not permitted to send “chain” e-mails.
- Students must always use professional language when sending e-mails.
- Students must refrain from derogatory comments concerning fellow students, hospital employees or school staffs as these are considered a form of horizontal violence and subject to disciplinary action.
- All messages distributed via the VHS electronic messaging system are the property of the Valley Health System, and VHS may, without notification or approval, monitor, access, and review any and all electronic communications on this system. VHS has systems in place to monitor all e-mail communications and e-mail attachments. Users should have no expectation of privacy in regard to e-mail communications (Valley Health policy IM VH1.300).
- Student e-mail accounts will be randomly audited by Information Systems (IS) for content and language.
- The use of profanity or abusive language in a message is grounds for disciplinary action including:
  1. counseling session
  2. corrective action
  3. suspension
  4. dismissal
  5. legal action
- Time missed due to suspension for e-mail policy violations must be made up after graduation.
- Assignments, quizzes and tests given during a student’s suspension will result in a grade of 0.
- Users who are not VHS employees must adhere to the guidelines within this policy. Any misuse of the system will be subject to removal of service and possible legal action (Valley Health policy IM VH1.300).

I have read the above policy and have been given the opportunity to ask questions. By signing below I acknowledge an understanding of the policy and the consequences if this policy is not followed.

Student: ___________________________ Date: __________

Witness: __________________________ Date: __________
POLICY ON STUDENT BEHAVIOR IN THE CLASSROOM

POLICY ON STUDENT BEHAVIOR IN THE CLASSROOM

- Students are expected to conduct themselves in a professional manner in the classroom.

- Instructors and classmates must be treated with respect.

- Students having an issue with an instructor must follow school policy:
  1. The student should request a meeting with the instructor to discuss the issue.
  2. The student must not discuss the issue with another instructor prior to this meeting.
  3. If a student is unable to resolve the issue with the instructor, the student may request a meeting with the Program Director.
  4. Issues not resolved by the Program Director will be considered a grievance and the grievance policy in the handbook must be followed.

- Outbursts in the classroom will not be tolerated.

- Students engaging in personal conversations while an instructor is teaching, disrupting the class or not responding to instructor will be considered as not being interested in learning. At the discretion of the instructor the student may be sent back to clinic or suspended for the remainder of the day.

- Time missed from class due to suspension must be made up after graduation.

- Any assignments, quizzes, or tests missed during the suspension will receive a grade of 0.

*I have read the above policy and understand the consequences for not following this policy.*

<table>
<thead>
<tr>
<th>Student:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Student:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>
DOCUMENT OF COUNSELING OF STUDENTS FOR ACADEMIC OR CLINICAL PROGRESSION

WINCHESTER MEDICAL CENTER
MEDICAL RADIOGRAPHY PROGRAM

DOCUMENTATION FOR COUNSELING OF STUDENTS FOR ACADEMIC OR CLINICAL PROGRESSION.

Name:

Completed by:

COMPLAINT:


COMMENTS:


STUDENT COMMENTS:


Staff Signature

Student Signature

Program Director Signature

Date

Date

Date
DOCUMENT FOR COUNSELING OF STUDENTS FOR INFRINGEMENT OF SCHOOL POLICIES OR UNPROFESSIONAL CONDUCT

WINCHESTER MEDICAL CENTER
MEDICAL RADIOGRAPHY PROGRAM

DOCUMENTATION FOR COUNSELING OF STUDENTS FOR INFRINGEMENT OF SCHOOL’S RULES & REGULATIONS & FOR UNPROFESSIONAL CONDUCT (CORRECTIVE ACTION)

Name: ____________________________________________

Completed by: ______________________________________

COMPLAINT:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

COMMENTS:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

STUDENT COMMENTS:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Staff Signature __________________________________________ Date ______________

Student Signature __________________________ Date ______________

Program Director Signature __________________________ Date ______________
STUDENT COUNSELLING FORM

WINCHESTER MEDICAL CENTER
MEDICAL RADIOGRAPHY PROGRAM
STUDENT COUNSELLING FORM

This form is to be used to document when a student requests a counselling session for grades, personal issues and/or advisement.

Name of student __________________________________________ Date ___________

Name of instructor(s) ________________________________________

Nature of counselling session:

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Advisement given to student:

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Time spent with student during session:

______________________________________________________________________________
VH POLICY FOR PERSONNEL SCREENING FOR MR

Category: Provision of Care

<table>
<thead>
<tr>
<th>TITLE</th>
<th>Personnel Screening for MR</th>
<th>CODE #</th>
<th>MIS-MR-40</th>
</tr>
</thead>
<tbody>
<tr>
<td>FACILITY</td>
<td>Winchester Medical Center</td>
<td># of PAGES</td>
<td>2</td>
</tr>
<tr>
<td>DEPARTMENT(S)</td>
<td>Medical Imaging Services</td>
<td></td>
<td></td>
</tr>
<tr>
<td>EFFECTIVE DATE</td>
<td>October 2011</td>
<td>JCAHO FUNCTION</td>
<td>PC- Provision of Care</td>
</tr>
<tr>
<td>REVIEWED</td>
<td></td>
<td>RESOURCE</td>
<td></td>
</tr>
<tr>
<td>REVISED</td>
<td>12/12</td>
<td>LOCATION</td>
<td>Magnetic Resonance Imaging</td>
</tr>
</tbody>
</table>

Purpose:

To identify safety for hospital personnel within the Magnetic Resonance (MR) suite.

Policy:

No person shall enter the room without the permission of the MR technologist.

When determined that an employee must assist in MR, the employee will be made fully aware of the danger of the magnet.

- The magnet is on at all times.
- The potential danger involved to personnel and equipment can be life threatening if safety guidelines are ignored.

Pertinent screening questions will be asked to help ensure the safety of the personnel/staff members and the MR equipment.

Upon arrival to the department, employees will be asked to complete the same MR safety questionnaire as the patients.
**MRI SCREENING FORM**

**Winchester Medical Center Imaging Center**

**MRI Screening Form**

---

**Patient Name:**

---

**MR #:**

---

**Ordering Physician:**

---

**Exam:**

---

**Reading Physician: Radiology or Neuroradiology**

---

**Date to be done:**

---

**Diagnosis:**

---

---

Please indicate if you have any of the following items:

(Contact MRI Technician for any "YES" responses to the following questions)

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pacemaker</td>
<td>Bullet or Shrapnel Wounds</td>
</tr>
<tr>
<td>Metallic Heart Valve</td>
<td>Bone Growth Stimulator</td>
</tr>
<tr>
<td>(Starr-Edwards) Stent</td>
<td>Tattooed Makeup</td>
</tr>
<tr>
<td>If yes, when placed</td>
<td>or other tattoos</td>
</tr>
<tr>
<td>Implant Cardiac defibrillator</td>
<td>Ear or Eye Implants</td>
</tr>
<tr>
<td>Implant drug infusion device</td>
<td>Aneurysm Clips</td>
</tr>
<tr>
<td>or pump</td>
<td></td>
</tr>
<tr>
<td>Electrode</td>
<td>Surgical Clips</td>
</tr>
<tr>
<td>Neurostimulator</td>
<td>Are you Pregnant</td>
</tr>
<tr>
<td>Body Piercing</td>
<td>Barium Studies in past 7 days</td>
</tr>
<tr>
<td>Transdermal (medicated) patches</td>
<td>YES</td>
</tr>
</tbody>
</table>

**Have you ever had any metal removed from your eyes?**

---

**If Yes, ask the patient if they have had an MRI or CT of the head at WMC.**

**If No, the patient must have orbits**

---

**Have you ever done any filing, grinding, welding, sharpening of metal?**

---

**Are you claustrophobic? (If Yes, patient must arrive 1 hour prior for sedation)**

---

**Ask ordering MD for prescription for sedation. MUST HAVE DRIVER**

---

**Must have medication filled prior to arrival and bring with you for test.**

---

**Do you have a history of kidney disease?**

---

**Have you had any previous surgeries? (List types and dates)**

---

---

**Do you have any other metal in body, not listed above?**

---

---

**Inpatients**

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>Rectal Probe</th>
</tr>
</thead>
<tbody>
<tr>
<td>Temporary Pacing Wire</td>
<td>Swan Catheter</td>
<td></td>
</tr>
<tr>
<td>Thermal Foley</td>
<td>Oxygen (no portable tanks)</td>
<td></td>
</tr>
<tr>
<td>Incisional Staples</td>
<td>Transdermal patches</td>
<td></td>
</tr>
</tbody>
</table>

---

Reminders: Do not wear jewelry the day of the exam. Wear comfortable clothing without metal zippers or snaps. Please call ASAP if you need to cancel and don’t forget to bring your physician’s order with you. Please leave all valuables at home.

---

Signature of Screener: ____________________________

Title: ____________________________

Date/Time: ____________________________
Re-verification and completion of the screening form is to be done and approved by the MR technologist. This form will be signed and dated by the employee and the MR technologist. This record will be kept for review within the MR area.

The technologists will question each person as to the presence of a cardiac pacemaker, cerebral aneurysm clips, other surgically implanted metal devices or possibility of metal within the eyes.

If the screening indicates there is a question of metal fragments in the eyes, the employee must have orbit x-rays prior to being in the magnet room.

An order will be obtained from the EHOS, after sending MR screening sheet to EHOS department.

These films will be interpreted by a radiologist prior to the patient entering the magnet room.

The employee will be asked to remove jewelry, hairpins and all loose objects from their pockets.
CONSENT FOR MRI IMAGING CLINICAL STUDIES

CONSENT FOR MAGNETIC RESONANCE IMAGING (MRI) CLINICAL STUDIES
DEPARTMENT OF RADIOLOGY
WINCHESTER MEDICAL CENTER

I hereby authorize the staff of the Winchester Medical Center MRI to perform a magnetic resonance (MRI) scan on me. I understand that my doctor has conferred with Winchester Medical Center staff physicians certified in MRI by Winchester Medical Center and has determined that this procedure may be of potential benefit in the diagnosis/treatment of my illness.

I understand that for the MRI study I will lie on a couch and be placed inside of a large device, which will make pictures of my body, by the use of magnetic fields. There is no discomfort or physical pain. The study will require that I remain still (so that the pictures can be made) for up to one hour.

The MRI machine does not use ionizing radiation (such as x-rays) and is thought, by current knowledge, to have no significant risks to me unless I have certain types of metallic objects in my body. Examples of this include metal surgical clips or staples, metal fragments from metalworking, cardiac stents, certain implants, and electrodes.

I am not pregnant, do not have a heart pacemaker, and have not had prior surgery for an aneurysm (bulging of a large vessel) in my body or head.

I have completed the patient information and eligibility forms and have been given the opportunity to ask questions about this procedure and have received satisfactory answers.

Date: ________________________ Patient Signature ________________________

Print Patient’s Signature ________________________

If a minor or Incompetent: Legally Authorized Representative ________________________

Witness ________________________

Unresponsive Patients:

Chest x-ray Cleared by: ________________________ Physician ________________________

Head CT/X-rays cleared by: ________________________ Physician ________________________

The above screening for has been reviewed for MRI contraindications ________________________

Date ________________________ MRI Technologist ________________________
# Absence Form

**Winchester Medical Center**  
**Medical Radiography Program**

## Absence Request

<table>
<thead>
<tr>
<th>Absence Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student Name:</td>
</tr>
</tbody>
</table>

**Type of Absence Requested:**
- [ ] Sick
- [ ] Vacation
- [ ] Bereavement
- [ ] Other
- [ ] Military
- [ ] Jury Duty
- [ ] Maternity/Paternity

**Dates of Absence:**  
From: ___________________  
To: ___________________

**Reason for Absence:**

*You must submit requests for absences, other than sick leave, two days prior to the first day you will be absent.*

<table>
<thead>
<tr>
<th>Student Signature</th>
<th>Date</th>
</tr>
</thead>
</table>

## Program Director Approval

<p>| |</p>
<table>
<thead>
<tr>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ] Approved</td>
</tr>
<tr>
<td>[ ] Rejected</td>
</tr>
</tbody>
</table>

**Comments:**

<table>
<thead>
<tr>
<th>Program Director Signature</th>
<th>Date</th>
</tr>
</thead>
</table>
MEDICAL LEAVE FORM

WINCHESTER MEDICAL CENTER
MEDICAL RADIOGRAPHY PROGRAM
MEDICAL LEAVE FORM

(This form is to be completed by the certified treating physician, practitioner or counselor) CONFIDENTIAL MEDICAL FORM

STUDENT'S NAME:

______

1. I certify that
☐ Does have a serious health condition* and qualifies under the category checked below:

1) 2) 3) 4) 5) 6)

☐ Does not have a serious health condition.* (provide signature and return form to address listed)

*Refer to the attached sheet which describes what is meant by a "serious health condition" under the Family and Medical Leave Act.

2. Patient was seen by me and treated for this serious health condition on the following dates:

______

3. Describe the medical facts regarding the serious health condition that impede the employee's ability to work or requires the employee to care for the patient:

______

4. Duration
A. Date condition commenced: _______ Probable duration of condition: _______

If need is for full-time leave, complete 4B. If need is for intermittent or part-time leave, complete number 6 and number 7 (if applicable) on backside of this form.

B. Probable duration of patient’s inability to work, attend school, or perform other regular daily activities: _______ through _______

______
5. To be completed only if category 3 (pregnancy) or category 4 (chronic conditions) was checked as the serious health condition in Section 1.
State the likely duration and frequency of episodes of inability to work, attend school or perform other regular activities.

This section is to be completed only if the request is for intermittent or part-time leave for the student.

6. If the absence is due to the student's own health condition:
   (A) Provide a medical recommendation for the amount of leave, e.g., hours/day, days/week, etc.

   (B) Provide a list of the clinical school functions the student is unable to perform, if any, due to the medical condition. (List of physical requirements is attached).

Physician/Practitioner Signature

Physician/Practitioner Name (Please print)

Physician Telephone

Physician/Practitioner Address

Date

Please return completed, signed form to the person authorized to retain confidential Medical information (DLR) at the following address:

Program Director
220 Campus Blvd. Suite 300
Winchester, VA 22610
Important Note:

A “Serious Health Condition” means an illness, injury, impairment, or physical or mental condition that involves one of the following:

1. Hospital Care
   - Inpatient care (i.e., an overnight stay) in a hospital, hospice, or residential medical care facility, including any period of incapacity or subsequent treatment in connection with or consequent to such inpatient care.

2. Absence Plus Treatment
   A period of incapacity of more than three consecutive calendar days (including any subsequent treatment or period of incapacity relating to the same condition), that also involves:
   a. Treatment two or more times by a health care provider, by a nurse or physician’s assistant under direct supervision of a health care provider, or by a provider of health care services (e.g., physical therapist) under orders of, or on referral by, a health care provider; or
   b. Treatment by a health care provider on at least one occasion which results in regimen of continuing treatment under the supervision of a health care provider.

3. Pregnancy
   Any period of incapacity due to pregnancy, or for prenatal care

4. Chronic Conditions Requiring Treatments
   A chronic condition which:
   a. Requires periodic visits for treatment by a health care provider, or by a nurse or physician’s assistant under direct supervision of a health care provider;
   b. Continues over an extended period of time (including recurring episodes of a single underlying condition);
   c. May cause episodic rather than a continuing period of incapacity (e.g., asthma, diabetes, epilepsy, etc.).

5. Permanent/Long-Term Conditions Requiring Supervision
   A period of incapacity which is permanent or long-term due to a condition for which treatments may not be effective and the employee or family member must be under the continuing supervision of, but need not be receiving active treatment by, a health care provider. Examples include Alzheimer’s, a severe stroke, or the terminal stages of a disease.

6. Multiple Treatments (Non-Chronic Conditions)
   Any period of absence to receive multiple treatments (including any period of recovery therefrom) by a health care provider or by a provider of health care services under orders of, or on referral by, a health care provider, either for restorative surgery after an accident or other injuries, or for a condition that would likely result in a period of incapacity of more than three consecutive calendar days in the absence of medical intervention or treatment, such as cancer (chemotherapy, radiation, etc.), severe arthritis (physical therapy), kidney disease (dialysis).

---

1 Treatment includes examinations to determine if a serious health condition exists and evaluations of the condition. Treatment does not include routine physical examinations, eye examinations, or dental examinations.

2 A regimen of continuing treatment includes, for example, a course of prescription medication (e.g., an antibiotic) or therapy requiring special equipment to resolve or alleviate the health condition. A regimen of treatment does not include the taking of over-the-counter medications such as aspirin, antihistamines, or salves; or bed-rest, drinking fluids, exercise, and other similar activities that can be initiated without a visit to a health care provider.
PHYSICAL DEMAND CHECK OFF LIST

Medical Radiography Program
Physical Demand Checklist - Imaging Technologist/Students

The following tasks reflect the essential functions of the diagnostic radiographer/student and are derived from the Medical Imaging Job Description. Designation of these behaviors as essential functions is related to current equipment and technology within the facility and is subject to change.

1. Able to engage in frequent handwashing
   ______

2. Full range of motion for handling and lifting objects above head.
   ______

3. Eye/Hand coordination to handle objects/equipment and assist with patient transfers.
   ______

4. Sufficient muscle strength to ambulate for long distances and/or stand for extended periods of time and wearing a lead apron.
   ______

5. Sufficient muscle strength to push manipulate and control portable imaging equipment up to 50 pounds
   ______

6. Sufficient muscle strength to stand, kneel, push, lift, bend, and reach at arm’s length and engage in repetitive movements for extended periods of time.
   ______

7. Tolerance for fluctuating temperatures.
   ______

8. Vision and depth perception sufficient to identify the printed word, instruments and instructions. Visual ability for distance and at close (corrected 20/40) range and able to identify color or shades of color.
   ______

9. Hearing and verbal communication skills sufficient to interact with patient and healthcare staff both directly & indirectly.
   ______

10. Manual dexterity sufficient to manipulate imaging equipment and computer keyboards, set sterile trays and draw up medications
    ______

11. Mental acuity sufficient to engage in technical problem solving, organization and communication skills, and focus for extended periods of time
    ______

Signature of student ___________________________ Treating Healthcare Provider ___________________________

Date ___________________________

Printed Name of Student ___________________________ 6/2017/nnk
PHYSICIAN’S RELEASE FORM

Valley Health System, Employee Occupational Health Services

Date: ____________________________

Dear Provider,

Your patient, ______________________ has applied for or is currently working as a ______________________ at a VHS facility. Attached please find a copy of the position’s job description including physical job requirements. Based upon all of the information available to us, it appears that your patient may be limited in their ability to perform some or all of these job duties. Specifically,

We are concerned about whether your patient is able to perform such job duties without posing a significant risk of harm to self and others. We need your opinion as to whether your patient would present a significant risk of substantial harm to them self or others while performing the essential functions of this position. In making this determination please consider the following factors (1-4):

(1) The nature and severity of the potential harm
(2) The duration of the potential harm
(3) The imminence of the potential harm
(4) The probability of the harm occurring

We certainly would not want your patient to harm them self or others in performing these duties. If there are accommodations that you believe would be required to allow your patient to perform these duties without being a direct risk of harm as described above, please list them in the space provided below. Please feel free to contact us if you need additional information in making this assessment (see contact information below).

By signing below, I attest that I am a healthcare provider qualified to make this determination.

My patient is _____ able _____ unable

to perform the job requirements both mentally and physically per the attached job description # ____________________________

and PJP # ____________________________ without presenting a significant risk of substantial harm to them self or others.

Comments/Required Accommodations:

_____________________________________________________________

Signature of treating provider ____________________________ Date ____________________________

Provider printed name, address, and phone number ____________________________

(Form NOT acceptable without provider information.)

VHS EOHS Contact Information:

- Hampshire Memorial Hospital P (304)822-2194 F (304)822-4950
- Janis Memorial Hospital P (304)367-8046 F (304)741-8096
- Shannondale Memorial Hospital P (304)258-6572 F (304)258-7429

* The Genetic Information Nondiscrimination Act of 2008 (GINA) prohibits employers and other entities covered by GINA Title II from requesting or requiring genetic information of an individual or family member of the individual, except as specifically allowed by this law. To comply with this law, we are asking that you not provide any genetic information when responding to this request.
REQUEST FOR ADDITIONAL HOURS ON VOLUNTARY BASIS

WINCHESTER MEDICAL CENTER – MEDICAL RADIOGRAPHY PROGRAM
REQUEST FOR ADDITIONAL CLINICAL HOURS ON VOLUNTARY BASIS

JRCERT standard 1.4  Limits required clinical assignments for students to not more than 10 hours per day and the total didactic and clinical involvement to not more than 40 hours per week. Students may volunteer to be involved in the clinical and or didactic setting more than 40 hours per week or 10 hours per day.

Additional clinical time approval:

Students requesting additional volunteer clinical time must complete a request for volunteer clinical time form and present it to a clinical coordinator.

All scheduled volunteer time must be approved by a clinical coordinator. The clinical coordinator will approve time based on the availability of supervision in the clinic and will assign the student to a technologist. The student must remain with the technologist during that assignment.

An evaluation must be obtained by the student from the technologist to determine if the assignment was beneficial to the student’s education.

The student will clock in and out during the time they are in the clinic to document their presence at the clinical site. This time will be noted in Kronos as volunteer time.

The student is responsible for having the technologist complete the evaluation form for the volunteer time and return the form to the Clinical Coordinator the following day.

No hours will be scheduled after 9:00 PM, on weekends or on holidays observed by the clinical site.

I, ____________________________, request that I may participate in additional clinical hours on a voluntary basis in order to obtain the competency grades that I am lacking, gain more clinical experience, and to increase my confidence and skill level. I understand the conditions of participating in volunteer time.
WINCHESTER MEDICAL CENTER – MEDICAL RADIOGRAPHY PROGRAM

REQUEST FOR ADDITIONAL CLINICAL HOURS ON VOLUNTARY BASIS

JRCERT standard 1.4  Limits required clinical assignments for students to not more than 10 hours per day and the total didactic and clinical involvement to not more than 40 hours per week.

Students may volunteer to be involved in the clinical and or didactic setting more than 40 hours per week or 10 hours per day.

Name_________________________________________ Date _____________

Hours requested to work __________________________
Date of volunteer time __________________________

Approval by Clinical Coordinator:

Area assigned __________________________________
Hours assigned __________________________________
Technologist assigned to supervise student _________________

Approved by ___________________________ Date _____________

Evaluation form attached:
GRIEVANCE FORM

WINCHESTER MEDICAL CENTER
MEDICAL RADIOGRAPHY PROGRAM

GRIEVANCE FORM

Grievant:

Date Grievance Submitted
in FIRST STEP: ____________________________

Date of Occurrence Which Prompted Grievance:

Date of FIRST STEP meeting:

GRIEVANCE: (Explain in your own words what has occurred)

WHAT STUDENT POLICY OR POLICIES ARE REFERRED TO ABOVE?
GRIEVANCE FOR 1ST STEP MEETING – REPLY OF PROGRAM DIRECTOR

WINCHESTER MEDICAL CENTER
MEDICAL RADIOGRAPHY PROGRAM

GRIEVANCE FORM

FIRST STEP MEETING

REPLY OF PROGRAM DIRECTOR:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Signature of Program Director: ________________________________ Date: ____________

THIS DECISION  ☐ IS  ☐ IS NOT ACCEPTABLE.

Grievant Signature: ________________________________ Date & Time ________________
GRIEVANCE FORM 2ND STEP

WINCHESTER MEDICAL CENTER
MEDICAL RADIOGRAPHY PROGRAM

GRIEVANCE FORM

Grievant: ____________________________________________________________

Date Grievance Submitted
In SECOND STEP: ____________________________ Date of SECOND STEP meeting:

Date of Occurrence Which Prompted Grievance: ______________________________

GRIEVANCE: (Explain in your own words what has occurred)

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

WHAT STUDENT POLICY OR POLICIES ARE REFERRED TO ABOVE?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
GRIEVANCE FORM 2ND REPLY OF PROGRAM DIRECTOR

WINCHESTER MEDICAL CENTER
MEDICAL RADIOGRAPHY PROGRAM

GRIEVANCE FORM

SECOND STEP MEETING:

DATE: ________________________ TIME: _________

REPLY OF PROGRAM DIRECTOR:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Program Director Signature ________________________ Date and Time

Clinical Instructor Signature ________________________ Date and Time

Medical Advisor Signature ____________________________ Date and Time

THIS DECISION □ IS □ IS NOT ACCEPTABLE.

Grievant Signature: ____________________________ Date & Time:
GRIEVANCE FORM 3RD STEP

WINCHESTER MEDICAL CENTER
MEDICAL RADIOGRAPHY PROGRAM

GRIEVANCE FORM

Grievant: ____________________________________________

Date Grievance Submitted
In THIRD STEP: ________________________________

Date of Occurrence Which Prompted Grievance: ________________________________

GRIEVANCE: (Explain in your own words what has occurred)

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

WHAT STUDENT POLICY OR POLICIES ARE REFERRED TO ABOVE?

________________________________________________________________________

________________________________________________________________________
WINCHESTER MEDICAL CENTER
MEDICAL RADIOGRAPHY PROGRAM

GRIEVANCE FORM

THIRD STEP MEETING: DATE: ________________ TIME: __________

REPLY OF ADMINISTRATOR:

________________________________________

________________________________________

________________________________________

________________________________________

________________________________________

________________________________________

________________________________________

________________________________________

________________________________________

________________________________________

________________________________________

Administrator Signature: Date & Time
EXIT INTERVIEW FORM

WINCHESTER MEDICAL CENTER
MEDICAL RADIOGRAPHY PROGRAM

Exit Interview Questions

Name: ___________________________________________ Date: ______________________

1. What is the reason for your decision to leave the program?
____________________________________________________________________________
____________________________________________________________________________

2. What could have helped you make a clearer decision about attending Radiologic technology school from the very beginning?
____________________________________________________________________________
____________________________________________________________________________

3. Do you believe you had a good overview of the program during your observation time (during your application process)?
____________________________________________________________________________
____________________________________________________________________________

4. Which portion of the program was enjoyable for you?
____________________________________________________________________________
____________________________________________________________________________

5. Which part of the program was difficult for you?
____________________________________________________________________________
____________________________________________________________________________

6. Is there anything we could have done to help you remain in the program?
____________________________________________________________________________
____________________________________________________________________________

7. How do you think the program flows? (Didactic and Clinical)
____________________________________________________________________________
____________________________________________________________________________

8. What are your thoughts about the evaluation forms in the clinic (daily, clinical competency, etc.)?
____________________________________________________________________________
____________________________________________________________________________

9. What would (in your opinion) be a better way to train students in the clinic?
____________________________________________________________________________
____________________________________________________________________________

10. Overall, how would you rate the WMC School of Radiologic Technology?
____________________________________________________________________________
____________________________________________________________________________
<table>
<thead>
<tr>
<th>Date</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>6/26/2017</td>
<td>New Class Begins</td>
</tr>
<tr>
<td>7/3 - 7/10/2017</td>
<td>SUMMER BREAK</td>
</tr>
<tr>
<td>7/11/2017</td>
<td>Classes resume</td>
</tr>
<tr>
<td>9/1 - 9/5/2017</td>
<td>LABOR DAY BREAK</td>
</tr>
<tr>
<td>9/6/2017</td>
<td>Classes resume</td>
</tr>
<tr>
<td>9/22/2017</td>
<td>Mid-semester (1st and 3rd)</td>
</tr>
<tr>
<td>10/6 - 10/9/2017</td>
<td>COLUMBUS DAY BREAK</td>
</tr>
<tr>
<td>10/10/2017</td>
<td>Classes resume</td>
</tr>
<tr>
<td>11/22 - 11/26/2017</td>
<td>FALL BREAK</td>
</tr>
<tr>
<td>11/27/2017</td>
<td>Classes resume</td>
</tr>
<tr>
<td>12/21/2017</td>
<td>END OF SEMESTER (1st and 3rd)</td>
</tr>
<tr>
<td>12/22 - 1/7/2018</td>
<td>WINTER BREAK</td>
</tr>
<tr>
<td>1/8/2018</td>
<td>Classes resume</td>
</tr>
<tr>
<td>2/19/2018</td>
<td>PRESIDENT'S DAY BREAK</td>
</tr>
<tr>
<td>2/20/2018</td>
<td>Classes resume</td>
</tr>
<tr>
<td>3/9/2017</td>
<td>Mid-semester (2nd and 4th)</td>
</tr>
<tr>
<td>3/30 - 4/2/2018</td>
<td>SPRING BREAK</td>
</tr>
<tr>
<td>4/3/2018</td>
<td>Classes resume</td>
</tr>
<tr>
<td>TBA</td>
<td>VSRT SEMINAR</td>
</tr>
<tr>
<td>5/28/2018</td>
<td>MEMORIAL DAY BREAK</td>
</tr>
<tr>
<td>5/29/2018</td>
<td>Classes resume</td>
</tr>
<tr>
<td>6/1/2018</td>
<td>END OF SEMESTER (2nd and 4th)</td>
</tr>
<tr>
<td>6/8/2018</td>
<td>GRADUATION</td>
</tr>
</tbody>
</table>
### Example of Clinical Rotational Schedule

<table>
<thead>
<tr>
<th>Student 1</th>
<th>Student 2</th>
<th>Student 3</th>
<th>Student 4</th>
<th>Student 5</th>
<th>Student 6</th>
<th>Student 7</th>
<th>Student 8</th>
<th>Student 9</th>
<th>Student 10</th>
<th>Student 11</th>
<th>Student 12</th>
<th>Student 13</th>
<th>Student 14</th>
</tr>
</thead>
<tbody>
<tr>
<td>ED</td>
<td>ED</td>
<td>M</td>
<td>OR3</td>
<td>DC</td>
<td>ED</td>
<td>OR3</td>
<td>OR4</td>
<td>OR3</td>
<td>DC</td>
<td>ED</td>
<td>DC</td>
<td>ED</td>
<td>ED</td>
</tr>
<tr>
<td>DC</td>
<td>DC</td>
<td>M</td>
<td>OR4</td>
<td>M</td>
<td>DC</td>
<td>M</td>
<td>M</td>
<td>M</td>
<td>DC</td>
<td>DC</td>
<td>M</td>
<td>M</td>
<td>M</td>
</tr>
<tr>
<td>M</td>
<td>M</td>
<td>M</td>
<td>OR3</td>
<td>DC</td>
<td>M</td>
<td>M</td>
<td>M</td>
<td>M</td>
<td>DC</td>
<td>DC</td>
<td>M</td>
<td>M</td>
<td>M</td>
</tr>
<tr>
<td>DC</td>
<td>M</td>
<td>M</td>
<td>DC</td>
<td>OR3</td>
<td>DC</td>
<td>M</td>
<td>M</td>
<td>M</td>
<td>DC</td>
<td>DC</td>
<td>M</td>
<td>M</td>
<td>M</td>
</tr>
<tr>
<td>M</td>
<td>M</td>
<td>M</td>
<td>DC</td>
<td>M</td>
<td>M</td>
<td>M</td>
<td>M</td>
<td>M</td>
<td>DC</td>
<td>DC</td>
<td>M</td>
<td>M</td>
<td>M</td>
</tr>
</tbody>
</table>

### Schedules

- **Clinical Rotation Schedule**
- **Class 2018**
- **Class 2019**

### Notes
- Additional columns for **Ancillary**, **Clinical**, **Rotation**
- **Columns:** Classroom, Into Patient Care, Radiology

---

**Winchester Medical Center**

MEDICAL RADIOGRAPHY PROGRAM | 6/1/2017

**110**
## Clinical Rotation Schedule

**WMC Medical Radiography Program 2018-2019**

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Student 1</strong></td>
<td>WMH</td>
<td>ED</td>
<td>OR4</td>
<td>Port</td>
<td>DCFL</td>
<td>DCFL</td>
<td>M</td>
<td>EV</td>
<td>DC</td>
<td>CT</td>
<td>CT</td>
<td>ED</td>
<td>UCC</td>
</tr>
<tr>
<td><strong>Student 2</strong></td>
<td>ED</td>
<td>WMH</td>
<td>WMH</td>
<td>MINS</td>
<td>Port</td>
<td>DC</td>
<td>Ma/BD</td>
<td>OR4</td>
<td>EV</td>
<td>OR1</td>
<td>OR2</td>
<td>M</td>
<td>DCFL</td>
</tr>
<tr>
<td><strong>Student 3</strong></td>
<td>M</td>
<td>SMH</td>
<td>SMH</td>
<td>OR4</td>
<td>MINS</td>
<td>Port</td>
<td>EV</td>
<td>Ma/BD</td>
<td>WMH</td>
<td>WMH</td>
<td>OR3</td>
<td>DC</td>
<td>ED</td>
</tr>
<tr>
<td><strong>Student 4</strong></td>
<td>CT</td>
<td>DC</td>
<td>Ma/BD</td>
<td>UCC</td>
<td>ED</td>
<td>DC</td>
<td>Port</td>
<td>EV</td>
<td>WMH</td>
<td>WMH</td>
<td>M</td>
<td>OR1</td>
<td>OR2</td>
</tr>
<tr>
<td><strong>Student 5</strong></td>
<td>MINS</td>
<td>CT</td>
<td>CT</td>
<td>OR1</td>
<td>OR2</td>
<td>HMM</td>
<td>HMM</td>
<td>Port</td>
<td>EV</td>
<td>Ma/BD</td>
<td>ED</td>
<td>DC</td>
<td>M</td>
</tr>
<tr>
<td><strong>Student 6</strong></td>
<td>DC</td>
<td>DCFL</td>
<td>Port</td>
<td>SMH</td>
<td>SMH</td>
<td>CT</td>
<td>CT</td>
<td>Ma/BD</td>
<td>Port</td>
<td>EV</td>
<td>DC</td>
<td>ED</td>
<td>M</td>
</tr>
<tr>
<td><strong>Student 7</strong></td>
<td>Ma/BD</td>
<td>ED</td>
<td>WMH</td>
<td>WMH</td>
<td>M</td>
<td>EV</td>
<td>HMM</td>
<td>HMM</td>
<td>Port</td>
<td>UCC</td>
<td>M</td>
<td>DC</td>
<td></td>
</tr>
<tr>
<td><strong>Student 8</strong></td>
<td>UCC</td>
<td>OR1</td>
<td>OR2</td>
<td>ED</td>
<td>WMH</td>
<td>HMM</td>
<td>SMH</td>
<td>DC</td>
<td>UCC</td>
<td>Port</td>
<td>EV</td>
<td>OR4</td>
<td></td>
</tr>
<tr>
<td><strong>Student 9</strong></td>
<td>SMH</td>
<td>DC</td>
<td>DCFL</td>
<td>DCFL</td>
<td>ED</td>
<td>WMH</td>
<td>WMH</td>
<td>EV</td>
<td>Ma/BD</td>
<td>HMM</td>
<td>HMM</td>
<td>Port</td>
<td>DC</td>
</tr>
<tr>
<td><strong>Student 10</strong></td>
<td>WMH</td>
<td>UCC</td>
<td>M</td>
<td>CT</td>
<td>CT</td>
<td>ED</td>
<td>DCFL</td>
<td>DCFL</td>
<td>DCFL</td>
<td>ED</td>
<td>SMH</td>
<td>M</td>
<td>Port</td>
</tr>
<tr>
<td><strong>Student 11</strong></td>
<td>UCC</td>
<td>M</td>
<td>ED</td>
<td>OR3</td>
<td>Ma/BD</td>
<td>M</td>
<td>CT</td>
<td>CT</td>
<td>EV</td>
<td>DCFL</td>
<td>ED</td>
<td>M</td>
<td>Port</td>
</tr>
<tr>
<td><strong>Student 12</strong></td>
<td>DC</td>
<td>WMH</td>
<td>WMH</td>
<td>ED</td>
<td>Ma/BD</td>
<td>M</td>
<td>OR3</td>
<td>MINS</td>
<td>OR1</td>
<td>OR2</td>
<td>EV</td>
<td>CT</td>
<td>CT</td>
</tr>
<tr>
<td><strong>Student 13</strong></td>
<td>Port</td>
<td>HMM</td>
<td>HMM</td>
<td>Ma/BD</td>
<td>DC</td>
<td>WMH</td>
<td>WMH</td>
<td>M</td>
<td>DCFL</td>
<td>ED</td>
<td>OR1</td>
<td>OR2</td>
<td></td>
</tr>
<tr>
<td><strong>Student 14</strong></td>
<td>HMM</td>
<td>Port</td>
<td>DC</td>
<td>WMH</td>
<td>WMH</td>
<td>OR1</td>
<td>OR2</td>
<td>ED</td>
<td>M</td>
<td>EV</td>
<td>Ma/BD</td>
<td>OR4</td>
<td>DC</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Student 1</strong></td>
<td>Port</td>
<td>M</td>
<td>ED</td>
<td>DC</td>
<td>DCFL</td>
<td>M</td>
<td>ED</td>
<td>DC</td>
<td>Port</td>
<td>M</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Student 2</strong></td>
<td>M</td>
<td>Port</td>
<td>DC</td>
<td>ED</td>
<td>MINS</td>
<td>DCFL</td>
<td>M</td>
<td>ED</td>
<td>DC</td>
<td>M</td>
<td>Port</td>
<td>M</td>
<td></td>
</tr>
<tr>
<td><strong>Student 3</strong></td>
<td>DC</td>
<td>ED</td>
<td>Port</td>
<td>M</td>
<td>DC</td>
<td>MINS</td>
<td>DCFL</td>
<td>ED</td>
<td>M</td>
<td>DC</td>
<td>ED</td>
<td>M</td>
<td>DC</td>
</tr>
<tr>
<td><strong>Student 4</strong></td>
<td>M</td>
<td>DC</td>
<td>ED</td>
<td>Port</td>
<td>M</td>
<td>ED</td>
<td>MINS</td>
<td>DCFL</td>
<td>ED</td>
<td>M</td>
<td>DC</td>
<td>ED</td>
<td>DC</td>
</tr>
<tr>
<td><strong>Student 5</strong></td>
<td>DC</td>
<td>ED</td>
<td>M</td>
<td>ED</td>
<td>Port</td>
<td>DC</td>
<td>MINS</td>
<td>DCFL</td>
<td>ED</td>
<td>M</td>
<td>DC</td>
<td>ED</td>
<td>DC</td>
</tr>
<tr>
<td><strong>Student 6</strong></td>
<td>M</td>
<td>DC</td>
<td>ED</td>
<td>Port</td>
<td>M</td>
<td>MINS</td>
<td>DCFL</td>
<td>ED</td>
<td>M</td>
<td>DC</td>
<td>ED</td>
<td>M</td>
<td>DC</td>
</tr>
<tr>
<td><strong>Student 7</strong></td>
<td>DC</td>
<td>ED</td>
<td>M</td>
<td>DC</td>
<td>ED</td>
<td>Port</td>
<td>DC</td>
<td>MINS</td>
<td>DCFL</td>
<td>M</td>
<td>DC</td>
<td>ED</td>
<td>M</td>
</tr>
<tr>
<td><strong>Student 8</strong></td>
<td>DCFL</td>
<td>M</td>
<td>DC</td>
<td>ED</td>
<td>M</td>
<td>Port</td>
<td>DC</td>
<td>MINS</td>
<td>DCFL</td>
<td>M</td>
<td>DC</td>
<td>ED</td>
<td>M</td>
</tr>
<tr>
<td><strong>Student 9</strong></td>
<td>ED</td>
<td>DCFL</td>
<td>M</td>
<td>DC</td>
<td>ED</td>
<td>M</td>
<td>Port</td>
<td>M</td>
<td>DC</td>
<td>MINS</td>
<td>DCFL</td>
<td>ED</td>
<td></td>
</tr>
<tr>
<td><strong>Student 10</strong></td>
<td>ED</td>
<td>DC</td>
<td>DCFL</td>
<td>M</td>
<td>ED</td>
<td>DC</td>
<td>Port</td>
<td>DC</td>
<td>ED</td>
<td>MINS</td>
<td>DCFL</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Student 11</strong></td>
<td>ED</td>
<td>M</td>
<td>DC</td>
<td>DCFL</td>
<td>M</td>
<td>ED</td>
<td>DC</td>
<td>Port</td>
<td>ED</td>
<td>M</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Clinical Rotation Schedule

<table>
<thead>
<tr>
<th>Class 2018</th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>11-Dec</td>
<td>TREN</td>
<td>DREX</td>
<td>OR3</td>
<td>M</td>
<td>DC</td>
<td>M</td>
<td>DC</td>
<td>M</td>
<td>DC</td>
<td>M</td>
<td>DC</td>
<td>M</td>
<td>DC</td>
<td>M</td>
<td>DC</td>
<td>M</td>
<td>DC</td>
</tr>
<tr>
<td>18-Dec</td>
<td>TREN</td>
<td>DREX</td>
<td>OR3</td>
<td>M</td>
<td>DC</td>
<td>M</td>
<td>DC</td>
<td>M</td>
<td>DC</td>
<td>M</td>
<td>DC</td>
<td>M</td>
<td>DC</td>
<td>M</td>
<td>DC</td>
<td>M</td>
<td>DC</td>
</tr>
<tr>
<td>25-Dec</td>
<td>TREN</td>
<td>DREX</td>
<td>OR3</td>
<td>M</td>
<td>DC</td>
<td>M</td>
<td>DC</td>
<td>M</td>
<td>DC</td>
<td>M</td>
<td>DC</td>
<td>M</td>
<td>DC</td>
<td>M</td>
<td>DC</td>
<td>M</td>
<td>DC</td>
</tr>
<tr>
<td>3-Jan</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
</tr>
<tr>
<td>10-Jan</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
</tr>
<tr>
<td>17-Jan</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
</tr>
<tr>
<td>24-Jan</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
</tr>
<tr>
<td>31-Jan</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
</tr>
<tr>
<td>7-Feb</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
</tr>
<tr>
<td>14-Feb</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
</tr>
<tr>
<td>21-Feb</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
</tr>
<tr>
<td>28-Feb</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
</tr>
<tr>
<td>4-Mar</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
</tr>
<tr>
<td>11-Mar</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
</tr>
<tr>
<td>18-Mar</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
</tr>
<tr>
<td>25-Mar</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
<td>Port</td>
<td>UCC</td>
<td>Port</td>
<td>M</td>
</tr>
</tbody>
</table>

### Class 2019

<table>
<thead>
<tr>
<th>11-Dec</th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>18-Dec</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>25-Dec</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3-Jan</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10-Jan</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17-Jan</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24-Jan</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>31-Jan</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7-Feb</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14-Feb</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21-Feb</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>28-Feb</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4-Mar</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11-Mar</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18-Mar</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>25-Mar</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Notes

- TREN: CT, MRI, Ultrasound, OR3
- DREX: CT, MRI, Ultrasound, OR3
- OR3: CT, MRI, Ultrasound, OR3
- M: Medical
dc: DFL
- MRT: MRI, Ultrasound
- Port: Port
- UCC: UCC
- ED: ED
- NM: NM
- SP: SP
- COL: COL
- EV: EV
- UCC: UCC
- DFL: DFL
**Clinical Rotation Schedule**

**WMC Medical Radiography Program 2018-2019**

<table>
<thead>
<tr>
<th>Class 2018</th>
<th>4-Jun</th>
<th>11-Jun</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student 1</td>
<td>R</td>
<td></td>
</tr>
<tr>
<td>Student 2</td>
<td>C</td>
<td></td>
</tr>
<tr>
<td>Student 3</td>
<td>C</td>
<td></td>
</tr>
<tr>
<td>Student 4</td>
<td>M</td>
<td></td>
</tr>
<tr>
<td>Student 5</td>
<td>S</td>
<td></td>
</tr>
<tr>
<td>Student 6</td>
<td>E</td>
<td></td>
</tr>
<tr>
<td>Student 7</td>
<td>R</td>
<td></td>
</tr>
<tr>
<td>Student 8</td>
<td>R</td>
<td></td>
</tr>
<tr>
<td>Student 9</td>
<td>R</td>
<td></td>
</tr>
<tr>
<td>Student 10</td>
<td>R</td>
<td></td>
</tr>
<tr>
<td>Student 11</td>
<td>R</td>
<td></td>
</tr>
<tr>
<td>Student 12</td>
<td>R</td>
<td></td>
</tr>
<tr>
<td>Student 13</td>
<td>R</td>
<td></td>
</tr>
<tr>
<td>Student 14</td>
<td>R</td>
<td></td>
</tr>
</tbody>
</table>

**Class 2019**

<table>
<thead>
<tr>
<th>Class 2019</th>
<th>4-Jun</th>
<th>11-Jun</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student 1</td>
<td>ED</td>
<td>DC</td>
</tr>
<tr>
<td>Student 2</td>
<td>DC</td>
<td>DCFL</td>
</tr>
<tr>
<td>Student 3</td>
<td>M</td>
<td>DC</td>
</tr>
<tr>
<td>Student 4</td>
<td>ED</td>
<td>M</td>
</tr>
<tr>
<td>Student 5</td>
<td>DC</td>
<td>ED</td>
</tr>
<tr>
<td>Student 6</td>
<td>Port</td>
<td>DC</td>
</tr>
<tr>
<td>Student 7</td>
<td>DC</td>
<td>Port</td>
</tr>
<tr>
<td>Student 8</td>
<td>M</td>
<td>ED</td>
</tr>
<tr>
<td>Student 9</td>
<td>OR</td>
<td>ED</td>
</tr>
<tr>
<td>Student 10</td>
<td>OR</td>
<td>M</td>
</tr>
<tr>
<td>Student 11</td>
<td>DCFL</td>
<td>OR</td>
</tr>
</tbody>
</table>

**All Rotation Subject to Change**

- **EV/IT** = 12:00-4:00 Informatic Technology—4:00-8:00 Emergency Department
- **EV/UCC** = UCC 1200-8pm EV - 11am to 7pm
- **CT** = Computed Tomography
- **NM/SP** = Nuclear Medicine/SPECIALS
- **MRI/US** = Magnet Resonance/Ultrasound
- **Ma/BD** = mammo & bone dexta

**Evening rotation Seniors: Main, DC, IT & Urgent Care = 1200pm - 800pm**

**PLEASE NOTE:**

- ***All Rotation Subject to Change***

**Definitions Terms:***

- **TRAN** = transport
- **FR** = film room
- **COL** = collating desk
- **DCO** = diagnostic desk
- **EV/IT** = Informatic technology
- **EV/M/IT** = evening rotation/main/informatic (1230-900pm)
- **PC/RR (PC/Rad Recovery)** = Medical Imaging
- **EV** = Evening 1130-730pm
- **EV/UCC** = Urgent Care 1130-730pm
- **PC/MAIN** = Patient holding - collating
  
**Evening rotation Juniors: Main, DC, IT & Urgent Care = 1130 to 730pm**

- **EV/UCC** = Urgent Care 1130-730pm
  
**Evening rotation Juniors: Main, DC, IT & Urgent Care = 1130 to 730pm**

* See Academic Calendar
Clinical Competency List

Winchester Medical Center                      MEDICAL RADIOGRAPHY PROGRAM | 6/1/2017

1st Semester:

2nd Semester:

3rd & 4th Semester:

ART: Requires 37 MandatorieS and 15 electives (www.arcga)

1st Semester:

2nd Semester:

3rd & 4th Semester:

Clinical Competency List

WMC Medical Radiography Program