

TRITON COLLEGE RADIOLOGIC TECHNOLOGY PROGRAM

STUDENT HANDBOOK

This handbook outlines key policies, procedures, and expectations for students in the program.

Rev. 08/25

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Faculty Name	Position	Extension
Nancy Rizo	Program Chairperson	3480
Brian Melecio	Clinical Coordinator	3449

Clinical Site	Clinical Preceptors	Phone Number
Alexian Brothers Medical Center	Jaclyn Kronforst RT(R)	847 437 5500
Evanston Hospital	Rachel Flohr RT (R)	847 570 4620
Glenbrook Hospital	Jennifer Szeszol RT(R)	847 570 4620
Gottlieb Memorial Hospital	Tina Kovalcik RT(R)	708 538 5137
Highland Park Hospital	Rachel Flohr RT (R)	847 570 4620
Loyola Hospital Medical Center	Aide Bucio RT(R)	708 216 8124
	Jessica Limon RT(R)	
MacNeal Hospital	Michael Sciacotta RT(R)	
Northwest Community Hospital	Jennifer Bourmas RT(R)	847 618 5793
Rush Oak Park Hospital	Steve Wenke RT(R)	708 660 6674
Skokie Hospital	Rachel Flohr RT (R)	847 570 4620
Swedish Covenant Hospital	Tracy Kowalski RT(R)	773-878-8200
The University of Illinois Hospital & Health	Mariam Gevarghese	(866) 600-2273
West Suburban Hospital	Schunita Shavers RT(R)	708 763 2453

A. MISSION STATEMENT

The Radiologic Technology Program, through its curricular offerings, provides educational experiences to empower diverse learners and prepare students to function with the essential knowledge to meet employment needs in Radiologic Technology.

B. Program Goals and Student Learning of the Radiologic Technology Program

The program will graduate students with the knowledge and skills necessary to be clinically competent.

- Students will apply appropriate and safe care to patients in radiology.
- Students will select appropriate technical factors for optimal radiographic images.
- Students will comply with the appropriate radiation protection standards for patients and staff.
- Students will demonstrate proper positioning skills on radiography examinations in which they are proficient.

The program will graduate students with the ability to effectively communicate.

- Students will utilize effective oral communication skills in the clinical setting with patients, staff, and visitors.
- Students will employ effective written communication skills necessary to obtain accurate patient histories.

The program will prepare students to successfully apply critical thinking and problem-solving skills.

- Students will produce diagnostic quality radiographs on examinations in which they are proficient.
- Students will be able to manipulate, problem solve and critique aspects of difficult patients.

The program will provide the students with the knowledge to evaluate the importance of professional growth and development within the field of radiologic technology.

- Students will explain and support the importance of continued professional development in radiologic technology.
- Students will articulate the importance of attendance at professional meetings.

C. JRCERT Accreditation

Triton College is fully accredited by the Joint Review Committee on Education in Radiologic Technology (JRCERT). In this capacity, the College maintains the upholding of the Standards for an Accredited Educational Program in Radiologic Sciences published by the JRCERT, effective January 2021.

The Standards are available for student perusal. They are displayed in the x-ray lab on the student bulletin board. If you wish a personal copy, please ask the program chairperson; and one will be provided for you.

If you find the program in noncompliance with any Standard, you should first consult with the program chairperson. If a resolution is not achieved, the Dean of Health Careers is the next administrative option. You may directly inform the JRCERT at the following address at any time during the complaint process.

JRCERT
20 N. Wacker Drive; Suite 2850
Chicago, IL 60606-3182
(312) 704-5300
www.jrcert.org

D. Admissions

Recruitment and admission practices are non-discriminatory with respect to any legally protected status such as race, color, religion, sex, age, disability, national origin and any other protected class.

Job availability in radiography is ever changing and cyclical in nature. At times there are many jobs available in the Chicagoland area. At other times, there may be fewer jobs available; and graduates may have to consider relocating to secure employment. The Triton College Radiography Program faculty provides information on available jobs to students, but the faculty and Triton College do not guarantee job placement or continuity of employment.

Refer to the Triton College webpage, Radiologic Technology, for specific admission dates, deadlines and requirements for acceptance.

Tuition

Radiologic Technology courses are subject to a different tuition than general courses. See website for current rates. <https://www.triton.edu/admissions-aid/tuition/>

E. JRCERT STANDARDS

Joint Review Committee on Education in Radiologic Technology Standards for an Accredited Educational Program in Radiologic Technology
www.jrcert.org

In the event of any changes or updates by JRCERT, those changes shall apply as though set forth herein.

Standard One: Integrity

The program demonstrates integrity in the following: representations to communities of interest and the public, pursuit of fair and equitable academic practices, and treatment of, and respect for, students, faculty, and staff.

Standard Two: Resources

The program has sufficient resources to support the quality and effectiveness of the educational process.

Standard Three: Curriculum and Academic Practices

The program's curriculum and academic practices prepare students for professional practice.

Standard Four: Health and Safety

The program's policies and procedures promote the health, safety, and optimal use of radiation for students, patients, and the general public.

Standard Five: Assessment

The program develops and implements a system of planning and evaluation of student learning and program effectiveness outcomes in support of its mission.

Standard Six: Institutional/Programmatic Data

The program complies with JRCERT policies, procedures, and STANDARDS to achieve and maintain specialized accreditation. Awarding, Maintaining, and Administering Accreditation.

F. American Registry of Radiologic Technologists' Code of Ethics

Principle 1

The Registered Technologist acts in a professional manner, responds to patient needs, and supports colleagues and associates in providing quality patient care.

Principle 2

The Registered Technologist acts to advance the principal objective of the profession to provide services to humanity with full respect for the dignity of mankind.

Principle 3

The Registered Technologist delivers patient care and service unrestricted by the concerns of personal attributes or the nature of the disease or illness, and without discrimination on the basis of race, color, creed, religion, national origin, sex, marital status, status with regard to public

assistance, familial status, disability, sexual orientation, gender identity, veteran status, age, or any other legally protected basis.

Principle 4

The Registered Technologist practices technology founded upon theoretical knowledge and concepts, uses equipment and accessories consistent with the purposes for which they were designed, and employs procedures and techniques appropriately.

Principle 5

The Registered Technologist assesses situations; exercises care, discretion, and judgment; assumes responsibility for professional decisions; and acts in the best interest of the patient.

Principle 6

The Registered Technologist acts as an agent through observation and communication to obtain pertinent information for the physician to aid in the diagnosis and treatment of the patient and recognizes that interpretation and diagnosis are outside the scope of practice for the profession.

Principle 7

The Registered Technologist uses equipment and accessories, employs techniques and procedures, performs services in accordance with an accepted standard of practice, and demonstrates expertise in minimizing radiation exposure to the patient, self, and other members of the healthcare team.

Principle 8

The Registered Technologist practices ethical conduct appropriate to the profession and protects the patient's right to quality radiologic technology care.

Principle 9

The Registered Technologist respects confidences entrusted in the course of professional practice, respects the patient's right to privacy, and reveals confidential information only as required by law or to protect the welfare of the individual or the community.

Principle 10

The Registered Technologist continually strives to improve knowledge and skills by participating in continuing education and professional activities, sharing knowledge with colleagues, and investigating new aspects of professional practice.

The Registered Technologist refrains from the use of illegal drugs and/or any legally controlled substances which result in impairment of professional judgment and/or ability to practice radiologic technology with reasonable skill and safety to patients acts as an agent through observation and communication to obtain pertinent information for the physician to aid in the diagnosis and treatment of the patient and recognizes that interpretation and diagnosis are outside the scope of practice for the profession.

www.arrt.org In the event of any changes or updates by ARRT, those changes shall apply as though set forth herein.

Radiologic Technology Education Terms and Definitions

Program Chairperson

A full-time employee of the sponsoring institution with primary responsibilities to include organization, administration, periodic review, continued development, and general effectiveness of the program. In addition to these responsibilities, the Program Chairperson will teach didactic courses and labs, and ensure the effectiveness of the clinical education component of the program.

Clinical Coordinator

Individual responsible for coordination of all hospital affiliations and the student's subsequent rotations. The clinical preceptors along with the coordinator will assist all students with problems regarding clinical education. The coordinator also assists the Program Chairperson in curriculum planning & design as well as supervision and assisting all clinical faculty.

Didactic Instructor

An individual who teaches Radiologic technology classes on the college campus only.

Clinical Preceptor (Primary)

An individual is responsible for record-keeping, clinical instruction and clinical competency evaluation of students. The clinical preceptor will assist students with all matters regarding clinical education.

Clinical Preceptor (Secondary)

An employee of the clinical affiliate responsible for supervision of students in the absence of the primary clinical preceptor. The clinical Preceptor (secondary) will assist the student with problems regarding the department if the primary clinical preceptor is not available.

Direct Supervision

A technologist is in the radiographic room supervising the performance of radiographic exams by the student. Direct supervision is required prior to and during the completion of competency requirements. All portable, surgery exams and repeat radiographs/images always require direct supervision regardless of the level of student competency.

Indirect Supervision

A technologist is in the radiology department and readily available to assist students in the performance of radiographic examinations. (Not applicable to mobile/surgery competencies or repeat radiographs/exposures performed by a student where direct supervision is required.)

Laboratory Simulation

Demonstration of radiographic procedures or examinations followed by student practice, and simulation evaluation of skills on non-energized equipment prior to practice and performance on patients in the clinical setting.

Clinical Participation

Observation, assisting the technologist and performance of radiographic procedures and exams.

Exam Competency

Demonstration of the competent performance of radiographic procedures at the clinical affiliate during scheduled clinical hours. Students may perform exam competencies after classroom/lab positioning testing. Repeat radiographs will not be accepted for competencies. Exceptions may be made at the discretion of the clinical faculty.

Professional Behavior

Conduct or actions regarding the didactic & clinical environment.

Professional Attitude

One's disposition and manner of personal interactions in the didactic & clinical environment.

Program Accreditation

The Joint Review Committee on Education in Radiologic Technology accredits the Radiologic Technology program. The Standards for an Accredited Educational Program in the Radiologic Sciences are included in this manual.

www.jrcert.org

G. Americans with Disability Act: Center for Access and Accommodative Service

The CAAS can assess the needs of a student, make academic accommodations, coordinate access services and provide advocacy referral services. Students with medical, physical, sensory or learning disabilities who are participating in academic and continuing education programs at Triton can benefit from the services. Contact the CAAS at (708) 456-0300 Extension 3854 or visit the Center in room A125 and A141.

TECHNICAL STANDARDS FOR ADMISSION AND RETENTION

If you have any type of impediment/disability (ADHD, learning, physical, psychiatric or anything else) with which you need assistance, you must contact the CAAS office at Ext. 3917. Documentation must be supplied through the CAAS office by all students requesting accommodations. These non-academic criteria, technical standards, will apply to students admitted and enrolled in the Triton College Radiography Program.

Radiographers are health care professionals who possess the knowledge and skills to utilize diagnostic and therapeutic doses of radiation, and associated instrumentation, in the production of medical images, and for the treatment of specific diseases in the human body. These

individuals also provide basic nursing and medical care and assist with emergency patient treatment where indicated; therefore, to be admitted to one of the above-listed programs or to be retained in the program after admission, essential functions for all applicants include:

1. Sufficient strength and motor coordination required to stand and walk up to 90% of the day.
2. Sufficient visual acuity, such as is needed in the accurate preparation and administration of contrast media and other medications as directed and for the observation necessary for patient assessment and nursing care.
3. Sufficient auditory perception to receive verbal communication from patients and members of the health team and to assess health needs of people through the use of monitoring devices such as intercom systems, cardiac monitors, stethoscopes, intravenous infusion pumps, fire alarms, etc.
4. Sufficient gross and fine motor coordination to respond promptly and to implement the skills including the manipulation of equipment, positioning and lifting patients required in meeting health needs related to these professions. In addition, students must be able to lift and transport equipment utilized for procedures weighing up to 50 pounds.
5. Students are expected to demonstrate sufficient communication skills in English (speech, reading, and writing) to effectively interact with patients, instructors, and healthcare staff during clinical education experiences. This expectation is aligned with the communication demands typically encountered in clinical settings and is essential for ensuring patient safety and quality care.
6. Sufficient intellectual and emotional functions to exercise independent judgment and discretion in planning and implementing care for patients or to assess medical emergencies and respond quickly to summon qualified medical personnel.
7. The programs reserve the right to require the applicant or student to physically demonstrate any of the above-listed skills.

H. Counseling

The Program Chairperson and faculty are available for counseling and regular advisement. Students may be referred to the Counseling and Career Resource Center to meet with a licensed counselor. Records of student counseling will be maintained in the student files in a confidential manner.

II. Radiologic Technology Program Policies

Failure to comply with program policies may result in disciplinary action, up to and including dismissal.

A. Policy Revisions

Future changes in medical care, standards of accreditation, legal and other socioeconomic factors may necessitate modification or amendment of these policies at any time. In all cases, the modification or amendment shall determine the appropriate application of these policies.

B. Clinical Retention Policy

A student must maintain the following standards, or he/she may be dismissed from his/her respective program:

1. Completion of all requirements stated in the clinical syllabus
2. Completion of all competencies as stated on the clinical syllabus
3. Successful completion of semester clinical exam with a 77% or better
4. Passing of the Affective Evaluation with less than 3 categories marked "unsatisfactory".

C. Student Health Records

Prior to the first clinical day and/or following readmission to the Radiologic Technology Program, documentation of these items must be submitted to the current Health Records System.

1. Current Physical Exam and all of its components listed (Triton College form distributed at Orientation and on the Radiology webpage)
2. Proof of Quantiferon TB Test
3. Proof of Hepatitis B immunization or refusal form for Hepatitis B
4. 10-panel drug test
5. State of Illinois background check with no hits-refer to Radiology webpage for information and the disclosure statement

Prior to the first clinical day of (August of the second year)

Documentation must be submitted to the CastleBranch portal prior to the start of the 2nd fall semester.

1. Proof of QuantiFERON TB Test
2. Proof of Health Insurance

Must keep an updated CPR Certification at all times

D. Graduation Requirements

All students must complete the general requirements as prescribed by the college and specific requirements set forth for the associate degree sought. Refer to the Degree Requirements section of the Triton College catalog as well as appropriate program requirements for graduation. Each student must file an Intent to Graduate Form in the Office of Admissions and Records in the Fall semester prior to the expected May graduation date.

Graduation exercises are held at the end of the Spring Semester only. Students who anticipate completing their assignment during the current calendar year are eligible to participate in graduation exercises if the Graduate Forms have been officially processed in a timely manner. This is the sole responsibility of the student to complete.

E. Certification

Students successfully completing the Radiologic Technology program may apply to take the certification exam administered by the American Registry of Radiologic Technologists and obtain an Illinois license in Medical Radiation Technology. Students will complete online registration and submit payment to the American Registry of Radiologic Technologists (ARRT) and Illinois Emergency Management Agency (IEMA). It is the responsibility of each student to complete the necessary registration for all certification exams.

F. Due Process: Radiologic Technology Program Grievance Procedure

- a. Any grievance related to the Radiologic Technology Program, in general, must be submitted in writing to the Program Chairperson during the semester in which the grievance is perceived by the student.
- b. The Program Chairperson will respond to the grievance in writing within five working days.
- c. If the Program Chairperson's response fails to resolve the grievance or complaint, the student may appeal in writing within five working days to the Dean of Health Careers and Public Services, who will, within ten working days, respond in writing to the student.
- d. The Dean of Health Careers and Public Services will respond in writing to the student and all concerned parties within ten working days of receiving the student's written grievance. The decision of the Dean of Health Careers and Public Services is final.

G. Clinical Site Grievance

1. If a student has a grievance related to a clinical site, the student must contact the site's Clinical Preceptor and the Radiologic Technology's Program Chairperson. The incident must be reported within five (5) working days. The Program Chairperson may involve the Dean of Health Careers and Public Services. The Program faculty will make every effort to resolve the student's concern at the program level and will notify the student of any decision or action taken within five (5) working days of the reported incident.
2. The student may appeal to the Dean of Health Careers and Public Services within five (5) working days after notification of the Program Chairperson's decision. Within ten (10) working days, the Dean of Health Careers and Public Services will submit a written decision to the student and all concerned parties. The decision of the Dean of Health Careers and Public Services is final.
3. In the event that a clinical affiliate raises a concern regarding a student's conduct at the site, the relevant terms outlined in the current affiliation agreement between the college and the clinical site will govern the response and any subsequent actions. Students may be removed from the site if they violate any applicable policies or procedures. Triton College will comply with the removal of a student from the assigned clinical site if it is the opinion of the assigned clinical site, that the student's performance or conduct is detrimental to the patients or hospital personnel.

4. While enrolled in a clinical experience at the facility, students will be subject to applicable disciplinary policies of the Affiliate. Each party will be responsible for enforcing all applicable policies including that of the other party.
5. Students shall be dismissed from participation in the clinical experience only after the appropriate disciplinary policies and procedures of the Institution have been followed; however, the Affiliate may immediately remove from the premises any student who poses an immediate threat or danger. In either event, the due process policy for disciplinary actions will be followed as outlined above and as set forth in the Triton College student handbook.

H. Program Dismissal Includes but is not limited to:

Program dismissal may result from an unsatisfactory grade in any Radiology Program course including clinical application courses (RAS 150, 160, 170, 280, and 290) that results in a grade below 77%. The Program Chairperson/faculty will notify the student in the event of dismissal from the program.

Students dismissed from the Program may appeal the decision in writing within three (3) working days of dismissal. This appeal should be made to the Dean of Health Careers and Public Services. The Dean of Health Careers and Public Services will review the appeal and notify the student of the decision within ten (10) working days. The decision of the Dean of Health Careers and Public Services is final.

I. Grounds for Program Dismissal

1. Less than a grade of C or 77% in any Radiologic Technology (RAS) course.
2. Performing repeat radiographs without a registered technologist present in the radiographic room at the time of necessary modifications and subsequent exposure to the patient.
3. Incomplete or falsified information on health physical forms.
4. Performing mobile radiography without a registered technologist in attendance.
5. The known use of, distribution of, or possession of illegal drugs or controlled substances in violation of College or clinical assignment site policy.
6. Reasonable suspicion of drug or alcohol use during clinical assignments. A drug/alcohol-screening test - Breathalyzer or blood/urine - may be requested at the student's expense.
7. Failure to complete the required semester clinical competencies.
8. Unsatisfactory final Affective Evaluation.
9. Excessive absences from clinical assignments.
10. Excessive tardiness at the clinical assignment.
11. Unprofessional, unethical conduct, or noticeable body odor
12. Cheating in any course.
13. Falsification of records including exam competency book and time cards.

14. If a clinical affiliate refuses to allow a student on hospital property, the student will thereby be unable to complete the clinical requirements and thus will receive a grade of F in that clinical course.
15. Radiographing a fellow student, family or friends without a physician's order.
16. Sexual Harassment issues or any other form of harassment involving other students, family members, or employees at the clinical affiliate.
17. HIPAA Violations as described by both program and affiliate sites.

J. Drug and Alcohol Policy

If a faculty member, clinical preceptor, or member of the staff at a clinical facility determines that a student is exhibiting suspicious behaviors indicative of drug or alcohol consumption that is impairing that student's ability to perform in a safe manner in the clinical setting, that person should immediately report the occurrence.

The professional(s) observing the student's behavior must immediately document their observations of the student's behaviors as well as any incidents observed including interactions with patients and or facility staff.

To Report an Occurrence (Reasonable Suspicion):

All incidents of reasonable suspicion must be immediately reported to the Program Chairperson or Clinical Coordinator.

The Program Chairperson and/or Clinical Coordinator will then be responsible for notifying the Associate Dean of Health Careers. The reporting of the incident must happen at the time of the incident.

Further Actions (in accordance with Due Process outlined above):

It is the Program Chairperson, Clinical Coordinator's, and/or Clinical Preceptor's position that there is reasonable suspicion to believe the student is in violation, the student can be suspended, from the Radiology Program, until the results of the drug or alcohol tests come back. If the results are positive, the Program Chairperson will hold a hearing on the merits of the case. If the results of the drug or alcohol tests are positive, a hearing will be held to review the merits of the case. The hearing process will follow the College's established disciplinary procedures, including appropriate representation from program leadership, clinical education staff, and college administration, as applicable. If test results are negative, the student will be allowed back to clinicals and will be allowed to return to class and make-up any assignments.

Onsite security should be alerted to stand by in case a student becomes violent. If you have a strong feeling that the student could become violent, you could have security be in the same room. If a student refuses to submit to a drug test, he/she should be summarily suspended. A

disciplinary hearing will follow. The student's refusal to submit to drug or alcohol testing will greatly affect his/her probability of return to the program. The student signed a contract to submit to testing when he/she entered the program if reasonable suspicion was established.

1. The student should be directed to the appropriate facility for drug and/or alcohol testing.
2. The student will incur all costs of transportation and testing.
3. The student will be directed to contact a family member for transportation to a clinical site if drug testing is not available at the affiliate where the suspicious behavior has been observed.
4. If necessary, the faculty member or clinical facility staff member may call the police to transport the student. Faculty should not restrain nor transport the student.
5. The student will not be allowed to return to the clinical site until the Program Chairperson has met with the student, investigated the incident, received test results, and a decision based upon test results.
6. Students may review the avenues for appeal outlined in the Due Process Procedures outlined above.

K. Consent to Drug and Alcohol Testing

This form is included in new student Orientation.

L. Pregnancy Policy / Options

During the first semester in the medical imaging program, all students will be taught basic radiation protection procedures. These instructions will include enough background so that female student will be able to understand the possible biological risks of ionizing radiation to the embryo and fetus. Female students shall read the United States Nuclear Regulatory Commission (NRC) guide #8.13: <http://www.nrc.gov/reading-rm/doc-collections/reg-guides/occupational-health/rg/division-8/division-8-1.html> for possible biological risks to the fetus and embryo and sign an acknowledgment form stating that they understand these risks. NRC guide #8.13 and the acknowledgment form are found in the Office F110-A and also attached to the bulletin board within the Radiology Laboratory. The signed forms will be placed in the female student's file located in F110-A.

The possible risks to the embryo and fetus shall be reviewed and signed by the Radiology Program Chairperson, Radiology Clinical Coordinator, and the pregnant student. The student will then meet with the Radiology Program Chairperson for discussion and documentation of pregnancy options. The student will decide on one of the options and the program chairperson document one from the list below:

1. A leave of absence may be taken until the birth of the child. All medical imaging grades will be recorded as withdrawn (W) if the student's grades are acceptable at the time. This will permit the student to return with no penalty the following year upon successful completion of the readmission policy. Student re-admittance to clinical facilities depends upon the availability of sites. There are no guarantees that a student will return to the same clinical site or return to the program.
2. The student may continue in the program upon receipt of the student's voluntary written declaration of pregnancy and a written recommendation of the student's obstetrician or prenatal agency that has the student under its care. In this case, two radiation monitors will be used, one worn at the collar and outside of the apron during fluoroscopy for the student's whole body dose and one worn at the waist level under the lead apron during fluoroscopy to record the student exposure and the embryo/fetus exposure respectively. The student who chooses to continue in the program must acknowledge that all course objectives and clinical experiences shall be equivalent to any and all students enrolled in those program courses. Other counseling on radiation procedures shall be done as needed. Exposure to the pregnant woman, once the pregnancy is declared, should be limited to no more than 0.05 rem/500 mrem (0.5 mSv) per month and 0.5 rem/500 mrem (5 mSv) for the entire pregnancy.
Should recorded fetal exposure reach 0.05 rem/500 mrem at any time during the pregnancy, the student will be required to take a leave of absence.
3. The student may terminate the program. All medical imaging grades will be recorded as withdrawn (W) if the student grades are acceptable at the time of termination.

***The college's counseling department is available to counsel students but has no responsibility for the decisions made by students regarding educational choices if they become pregnant during the educational period. Students should also speak with their medical professional regarding decisions for completing this program.

M. Pregnancy Declaration Form

Included in Form Section of Handbook

N. Program Completion Assurance

Students who are assigned to a clinical site that withdraws their affiliation with Triton College will be placed at another clinical site thereby assuring that the student will complete the Radiologic Technology Program without interruption. The student will be assigned to an alternative clinical site/s; clinical hours may vary based on clinical site capacity of students. The clinical coordinator will work with the student and clinical sites to ensure clinical hours and competencies are met. The student has the option of working with the clinical coordinator to fulfill their requirements or may choose to return the following year to re-enter the program.

Students are given notice that in these situations personal requests to be assigned to a particular clinical site cannot be accommodated.

O. Resolution of Non-Compliance with JRCERT Standards

The Program assures a timely and appropriate resolution of complaints regarding allegations of non-compliance with JRCERT STANDARDS with appropriate documentation.

A copy of the JRCERT STANDARDS is posted in the Radiologic Technology Lab (F110) on the Triton College Campus and in the Student Handbook. The JRCERT Standards are also available on the JRCERT website under the heading of Accreditation. Website: www.jrcert.org

Upon receipt of allegations of non-compliance with the STANDARDS, the Program Chairperson will contact the Dean of Health Careers to review the complaint. The Dean of Health Careers will then proceed by following the Radiologic Technology's due process policy to investigate the complaint. Upon resolution, copies of all complaints and their resolution will be sent to the JRCERT and maintained by the Radiologic Technology Program and by the Dean of Health Careers.

III. Clinical Education Information and Policies

A. Introduction

Students enrolled in the Triton College Radiologic Technology Program will be responsible for observing college rules and regulations as stated in the current College Catalog and Student Handbook.

The Radiological Technology Program, through its curriculum offerings, will provide educational experiences to prepare students to function with essential knowledge and skills to meet employment needs in Radiologic Technology and to qualify for application to the American Registry of Radiologic Technologists.

The rules and regulations stated in this handbook represent an agreement between Triton College, the clinical affiliate, and the Radiologic Technology student for the entire time he/she is enrolled in the program. Failure to comply with the rules and regulations in this handbook will affect student evaluations. Repeated infractions of these rules and regulations, or major violations, may result in the student being expelled from the clinical agency and/or the program. If a student is removed from a clinical site, they along with any family or friends are not allowed to return to the clinical site. Clinical identification badges, markers, and radiation badges are to be returned to the Clinical Coordinator.

Clinical facilities, while separately located, are considered an integral part of the college campus. The Program Chairperson and Clinical Coordinator and clinical faculty are responsible for the scheduling of all clinical assignments. Students cannot alter their clinical assignments. Triton and clinical faculty will observe, evaluate and/or counsel students as needed. Faculty will intervene when a student is not progressing by program standards.

Time Keeping

Students will clock in and out promptly. Students are to clock in through the Trajecsyst system, using their geolocation. If a time clock system is not available, a designated person(s), such as the clinical preceptor or supervising technologist, must observe the student sign in and out times each day. This includes time keeping during lunch hours.

Personal Medical Needs

Students should not approach doctors for attention to their personal needs. Students who feel the need for the attention of a physician should make suitable arrangements outside the clinical hours.

B. Physical Examination and Hospital Insurance

The following applies to all students who are required to be in the clinical areas or practicum sites as part of their curriculum in the health careers/public service areas:

1. The physical examination form and the health/hospitalization form should be completed and submitted to Castlebranch prior to the first assigned clinical day. The blank forms are given to accepted and enrolled students who are scheduled for clinical applications courses. The physical examination and health/hospitalization forms are valid for two academic years. A 2-step PPD is initially required and must be completed before the start of the fall semester. A 2-step PPD (gold quantiferon TB Test) is to be completed at the start of the 4th semester of study. In cases of a positive PPD, a chest x-ray is required. A chest x-ray is valid for two years.
2. Following completion of all health requirements, Castlebranch will approve all health records. No student will be accepted for a clinical assignment without a valid verification. An electronic copy of the students Health Records is kept in Castlebranch. Students should also keep a copy for their own records.
3. Prior to the start of the 4th semester, students must complete a 2-step PPD (gold quantiferon TB Test) and show a valid health insurance card and be approved by CastleBranch. CPR must be maintained throughout the 22-month Radiology program. Students must maintain health insurance while they are in attendance in the clinical sites as stipulated by the contracts of the clinical affiliates. It is the students' responsibility to keep records up to date and submitted to the proper personnel.
4. Drug testing must be completed prior to entrance into the Radiology Program. Mandatory drug testing is completed prior to the start of the 1st Fall semester and the cost is the responsibility of the student. Positive drug testing may result in the inability of the student to be enrolled in the program. False- positive claims require retesting by the start of the program. A second positive drug test will result in the inability to be enrolled in the program.

5. Background checks- All students are required to undergo a criminal background check with the Illinois State Police using Castlebranch. Students with a positive background check that contain disqualifying conditions may be prohibited from attending clinical rotations, sitting for board examinations and future employment. Students are responsible for the cost of performing the background check. Full disclosure of convictions is required before starting the Radiology program to ARRT/Program Chairperson.
6. Any applicant to the clinical portions of Health Career programs who is afflicted with epilepsy or any other condition that causes loss of consciousness or otherwise may impair his/her ability to perform will furnish the Office of the Dean of Health Careers with a verified statement from a licensed physician to the effect that the applicant's condition does not pose a direct health or safety threat or significant risk to the student, patients, hospital staff or others in the Health Career program or clinical facility. In addition, the applicant will agree to remain under the care of a physician and follow treatment as prescribed. Furthermore, each applicant must report immediately to the College any changes, made by their physician, in the event that the applicant's ability to function safely in the clinical portion of the program. Any default in this agreement will constitute cause for the removal of the student from the clinical portion of the program.

C. Competency Requirements

While enrolled in the 22-month Radiologic Program at Triton College, the student is assigned to the clinical agency in order to develop:

- A. Expertise in a variety of diagnostic procedures by applying previously learned principles and theories with established levels of competency to be reached before graduation.

Given the patient and essential equipment, the student will perform the following procedures according to the acceptance criteria at the specific clinical affiliate, by the end of the designated school semester.

1. First Semester

MANDATORY	ELECTIVE						
<p>Equipment Competency</p> <p>PA-Lateral chest-Completed by the specified date in the clinical syllabus.</p> <p>Chest: Cart or Wheelchair</p> <p>Abdomen (KUB/supine)</p> <p>Upper Extremities</p> <table> <tr> <td>Humerus</td><td>Wrist</td></tr> <tr> <td>Elbow</td><td>Hand</td></tr> <tr> <td>Forearm</td><td>Fingers/Thumb</td></tr> </table>	Humerus	Wrist	Elbow	Hand	Forearm	Fingers/Thumb	
Humerus	Wrist						
Elbow	Hand						
Forearm	Fingers/Thumb						

2. Second Semester

MANDATORY	ELECTIVE
Abdomen upright Foot Ankle Portable Chest Fluoroscopy Equipment Competency Geriatric Chest	Digital Fluoroscopy (Candidates must select two procedures from this section and perform per site protocol). Esophagus (NOT Swallowing Dysfunction Study) Small Bowel UGI Single /Double LGI Single/Double ERCP Cystography/cystourethrography Myelography Arthrography Hysterosalpingiography

3. Third Semester

MANDATORY	ELECTIVE
Trauma Upper Extremity (Non-shoulder) Trauma Lower Extremity Knee Femur Tibia and Fibula Portable Abdomen Geriatric Upper Extremity Geriatric Lower Extremity Chest - age 6 or under	Toes Os Calcis Patella Upper and Lower Extremity – age 6 or younger Pediatric Abdomen Surgery Hours Decubitus Abdomen Lateral Decubitus Chest

4. Fourth Semester

MANDATORY	ELECTIVE
Shoulder Ribs Spines Cervical Thoracic Lumbar Portable Orthopedics Hip Trauma cross-table lateral spine (horizontal beam)(Pt recumbent) Cross-table Lateral Hip (Pt recumbent/horizontal beam) Pelvis Trauma Shoulder or humerus Clavicle	Scapula Sternum A-C joints Sacrum Coccyx S-I joints Scoliosis Series Surgery Hours SC Joints

5. Fifth Semester

MANDATORY	ELECTIVE
2 C-Arm procedures: (1-Surgical C-Arm Requiring Manipulation Around a Sterile Field) and (1-Requiring Manipulation to Obtain More Than One Projection) Surgery hours 60-80 (clinical site specific)	Facial Bones/ Paranasal Sinuses Skull Nasal Bones Orbits Zygomatic Arches Mandible Soft Tissue Neck TMJs IVU Portable Pediatric Surgery Hours

D. Competency Standards

1. Direct and Indirect Supervision

Direct Supervision of Radiologic Examinations and Procedures

Every radiologic procedure for which a student has not yet achieved competency must be performed in the presence of a registered, RT(R), radiologic technologist. Students are not permitted to perform radiographic procedures without direct supervision and appropriately documented by the clinical preceptor. Once they have demonstrated proficiency for the examination, indirect supervision is permitted in the sole discretion of the clinical site.

- a. A chart, listing the examinations for which each student has achieved competency, is posted in every radiology department. The chart is readily accessible to all supervisory and technical personnel. A copy of the chart is available in Section III of the Student Handbook.
- b. Direct Supervision is defined in Section ID of the Student Handbook
- c. Indirect Supervision of Radiologic Examinations and Procedures.
Students are not permitted to perform radiographic procedures without direct supervision and appropriately documented by the clinical preceptor. Once they have demonstrated proficiency for the examination, indirect supervision is permitted in the sole discretion of the clinical site.
- d. Indirect Supervision is defined in Section ID of the Student Handbook

2. Portable Radiography

Student radiographers **MAY NOT** at any time perform portable radiographs on an unaccompanied basis. All portable radiographic procedures must be performed on a directly supervised basis. All students must have a technologist present when performing portable/surgery exams, regardless of the level of student competency.

The JRCERT does not accept electronic devices as a form of direct supervision. They define direct supervision as supervision provided by a qualified radiographer immediately available to assist the students. "Immediately available" is interpreted as present in the room or location. This availability applies to all areas where ionizing radiation equipment is in use, including mobile radiography and surgery exams. A student can be dismissed from the program for performing mobile radiography without the supervision of a registered technologist.

3. Maintenance of Clinical Proficiency

At any time during the clinical education period a student demonstrates a deficiency in an exam in which proficiency has previously been demonstrated, the clinical preceptor may require the student to repeat and pass the proficiency test for that exam. An exam competency will be revoked if the student consistently performs that same exam and it is deemed of non-diagnostic quality by a radiologist, clinical preceptor or staff technologist. A student has 3 attempts to complete a competency. After 3 attempts, the student will be withdrawn or given an "F" for the clinical course in which they are registered. It will depend on the time in which the failing

competency was given. If it falls within the timeframe of withdrawal, the student will be given a choice. If it does not fall within the timeframe of withdrawal, students will be given an “F”.

The Anecdotal Record form for Clinical Performance (copy available in Section III of the Student Handbook) will be filled out by both the clinical and Triton faculty documenting the clinical deficiency. A corrective plan will be formulated and implemented. Failure to re-demonstrate the competency of the exam during the semester will result in clinical failure for the semester.

4. Affective Evaluations

In addition to the documented competency requirement, the student must also demonstrate the following as evaluated by the clinical preceptor and/or technologist to which student is assigned:

1. Thorough working knowledge of principles and theories relative to the administration of ionizing radiation in diagnostic procedures
2. Healthy attitudes and ethical-professional behavior, thereby creating a caring and dignified relationship with patients and other health care workers
3. Empathy toward patients
4. Professional interactions with patients
5. Cooperation with supervisors and peers
6. Dependability in performing duties
7. Positive and decisive behavior
8. Courtesy to patients and co-workers
9. Ability to follow instructions
10. Self-discipline
11. Dependability through attendance and punctuality

5. Evaluation of Student Radiographs

All radiographic examinations completed by students must be reviewed and approved by a registered radiographer or clinical preceptor upon completion of the exam.

6. Repeat Radiography

If at any time an entire radiographic exam or portion of an exam performed by a student requires repetition, a registered radiographer must be in attendance and assist the student with the repeat procedure. The student must obtain the initials of the technologist present during the repeat exam on the requisition. A student can be dismissed from the program for performing a repeat radiograph without the supervision of a registered technologist.

7. Exam Evaluation for Competency

Students will not be evaluated for proficiency for examinations for which they have not received didactic information, practiced the exam in the laboratory or at a clinical site, and have been observed and assisted with the examination several times by a registered technologist.

Three attempts are the maximum number of times a student may have to pass any competency in a semester. Failure to pass a specific competency on the third try in a semester prohibits any further attempt in that semester.

8. Exam Log

All exams which a student observes or in which student participates must be logged. Written or computerized logs are acceptable. Log sheets are available in Trajecsyst. Student logs, during the course of clinical study, will be archived into Trajecsyst. Upon graduation, in the event of having to use paper files, all student paperwork will be stored and kept in the Radiology office, F110-A for accreditation purposes.

9. Exam Competency

Students will need to complete an Exam Competency in Trajecsyst during the first weeks of their first semester and throughout the Radiologic Technology Program. All exam competency submissions must be saved in the Trajecsyst system during the course of the 22-month program.

10. Rotation Assignments

Areas of rotation will differ from one semester to the next. The areas of rotation will be based on the student's progress in the program and in conjunction with the course of study for the semester. In the clinical area, the student is responsible for remaining in the assigned area for the purposes of observation, assistance, and practice of examinations.

Internal rotations will include:

- Radiographic/fluoroscopic rooms -Emergency Room - Portables -Special Procedures
- Surgery - Outpatient -Evening and Weekend Rotations

A student may spend eight hours (one day) observing in a different modality other than diagnostic radiography; such as CT, Nuclear Medicine, Ultrasound, Radiation Therapy, or Magnetic Resonance Imaging. These rotations will be scheduled by the clinical preceptor during the student's 3rd, 4th, and 5th semesters only if the student is up to date with required competencies. Students cannot rotate if they are missing required competencies or hours.

11. Student Instructor Ratio

The number of students assigned to each clinical affiliate agrees with capacity designations as approved by the JRCERT. Students are under the direct supervision of either the clinical preceptor or registered radiographer on a 1:1 basis; once competency is demonstrated, indirect supervision may be implemented. Documentation of competency is completed on the clinical performance evaluation tool.

12. Holding patients

PATIENT HOLDING POLICY

A student shall not hold, restrain patients, or hold an image receptor during radiographic exposures. They are encouraged to use restraining devices such as pigg-o-stats, tape, sandbags, sheets, etc. If a mechanical restraint is impossible, a non-pregnant parent, friend, or relative accompanying the patient should be requested to hold the patient. If such a person is not available, a nurse or non-radiology staff member may be asked to help. Those persons assisting in holding the patient shall be provided with protective aprons and gloves and be positioned so that they are not in the path of the useful, primary beam.

We have a strict policy regarding students holding during radiographic exposures. The following is from the Safety Guidelines for Clinical Education section of our handbook.

1. Students are never permitted to hold patients or an image receptor during a radiographic exposure.
2. Students may not be in the imaging room during the exposure. This excludes fluoroscopy where the appropriate lead apron is worn. Students may not hold patients during fluoroscopy.
3. Every student will take an MRI safety test and pass with a 100% as part of the Radiology Program Orientation, first day of class. All materials and testing are available in the LMS Blackboard.

E. Clinical Attendance Policy

It is the responsibility of the student to be in attendance at the clinical education site for the assigned days and times only. Switching days and or times is not allowed unless prior approval from the Clinical Preceptor and Program Chairperson are given. All assigned clinical time missed during the course of a semester must be made up. In case of a student's absence, the clinical preceptor or appropriate supervisor in the Radiology Department must be notified.

1. Arrangements for the make-up of an absence are to be approved by the clinical preceptor.
2. Make-up time must be scheduled on days where comparable experiences to that planned on the day of absence can occur and must be completed within the semester during which the absence occurred.
3. Make-up time not completed prior to the end of the semester will result in a grade of incomplete. Failure to complete make-up time within the first 30 calendar days of the next regular semester (fall or spring) will result in a grade of "I" being changed to an "F" and subsequent dismissal from the program. In cases where summer session is the next semester, the student has 15 calendar days to make up the time before an "I" changes to an "F."
4. In case of possible snow days, please be aware of school closures. If the school is closed, you will be notified via phone and email by Triton College. Be sure all of your contact information is up to date at Triton. You can also check the website for notification. The time of notification is dependent upon the situation, but our current President has notified us previously in the 5-6 am range.

If school is closed, you CANNOT go to clinicals. It is not safe, and you are not covered by malpractice insurance.

If school is closed and you go to clinicals, you will be required to LEAVE immediately.

If school is closed, time will be provided at the end of the semester to allow to make up clinical hours. Necessary paperwork is required to be filled out. ALL students must make up missed days. If you have banked hours, they may be used first. Arrangements should be made with your Clinical Preceptor.

If school is open, classes/clinicals will be in session. If you feel it is not safe to travel, then DO NOT come to Triton. All missed days must be made up by filling out the form and getting approval from your CP. If school is open, any missed material is the student's responsibility to locate via classmates.

1. Clinical Site Call-in Policy

It is the responsibility of every student to notify the clinical preceptor at the site to which they have been assigned if they are going to be late in arrival or are in need of an unscheduled day off.

The student must call and speak either directly to the preceptor or to the senior technologist in charge of the department. This call must take place within 20 minutes of their scheduled start time. Failure to observe this regulation will result in the following Disciplinary Policy for Failure to Properly Notify Clinical Preceptor of Tardiness or Absence:

1. Verbal warning (documented) when a student fails to call in for the first time
2. Written warning of impending on the second disregard of call-in policy
3. One day suspension on the third occurrence
4. Termination from the clinical site on the 4th occurrence

2. Clinical Start Times

Observe College regulations restricting routine clinical start times to:

6:30 a.m. – 3:00 p.m. 7:00 a.m. – 3:30 p.m.
7:30 a.m. – 4:00p.m. 8:00 a.m. – 4:30 p.m.

Start times can extend into the evenings and weekends if supervision exists and the student is willing to participate. Evening and weekend rotations are optional.

3. Excessive Absence Policy

Absences in the clinical applications courses shall not exceed the hours the course meets per week in a semester. In the clinical courses that meet for 2 clinical periods per week, two absences will be considered excessive. In the semester courses that meet for 3 clinical periods per week, three absences will be considered excessive. The three occurrence policy remains effective for courses in which students meet 4 and 5 periods per week.

Disciplinary Policy for Excessive Absences

- A. Verbal warning (documented) when a student reaches the day of occurrence of first excessive absence
- B. Written warning of impending suspension on next absence
- C. One day suspension on next occurrence
- D. Termination from clinical on next occurrence

4. Excessive Tardiness Policy

Tardiness in clinical applications courses shall not exceed the hours the course meets per week in a semester. In the clinical courses that meet for 2 clinical periods per week, two late occurrences will be considered excessive. In the semester courses that meet for 3 clinical periods per week, three late occurrences will be considered excessive. The three late occurrence policy remains effective for courses in which students meet 4 and 5 periods per week.

Disciplinary Policy for Excessive Tardiness

- A. Verbal warning (documented) when a student reaches the day of occurrence of first excessive tardy
- B. Written warning of impending suspension on next tardy. (on conference form)
- C. One day suspension on next occurrence
- D. Termination from clinical on next occurrence

5. Long-Term Illness / Extended Absence

Any student experiencing a need to be absent from a clinical site for an amount of time equal to 25% or more of the total amount of weeks in a semester will be required to withdraw from the clinical course. The student will be allowed to re-enter the clinical course the following year if a clinical site is available. There is no guarantee that the student will return to the same clinical site. If a site is available and the student is not willing to take it, the student must consider re-applying the following year in the program. A case-by-case review will occur to best fit the needs of the clinical sites and the student. The clinical hours accumulated during the semester in which the student decided to withdraw WILL NOT count as accumulated hours in any successive enrollment.

Any student experiencing a need to be absent from a clinical site for more than three consecutive days will be required to have a physician's note approving his/her return to the clinical site. If unable to return, students will be withdrawn from the clinical course and have the option of completing their didactic course for that semester. However, they may not continue with the program. At that point the students may reapply to the program following the readmission process.

6. Perfect Attendance Award

In an effort to reward those students who have no absences and no days tardy at a clinical site during the semester, the following procedure will be followed:

The student will be awarded four (4) clinical hours. The time will be awarded at the conclusion of the semester and must be taken as the last 4 clinical hours of the semester in which the award is earned. Accumulation of these as personal hours for several semesters will not be allowed nor may the 4 hours be carried over into the next semester. Students must be present on all scheduled days within the semester, according to the College calendar, to qualify. Scheduling days off disqualifies the student from receiving this award.

7. Pre-Approved Day Off

Students who are in need of a particular clinical day off may arrange for pre-approval and make-up time with a clinical preceptor per the banking of clinical hours policy listed below. A pre-approved day off will not be considered an absent day. The absence day must be pre-approved by the clinical preceptor. A minimum of two (2) days' notice will be required for a day to be considered pre-approved. A student who calls in 24 hours or less before his/her scheduled clinical time will be considered absent.

If a student arrives at clinicals on an unscheduled day, without prior documentation, the student will be removed from the clinical site with the possibility of suspension, depending on circumstances. The Radiology Program Chairperson's decision is final.

8. Banking of Clinical Hours

Students may bank a maximum of 24 hours per semester; if those hours are not used in that semester they may be used in the following semester. This may be accomplished by completing extra assignment hours at the clinical site after regular hours have been finished for the day. Students may also bank hours by completing extra assignments during an evening or weekend shift per approval of the clinical preceptor ONLY. Appropriate supervision must be verified by the clinical preceptor prior to approval.

Banked hours may be used to cover a pre-approved day off or sick time. Under NO circumstance may a student bank any more than 24 hours, exceed 10 hours per day or 40 hours per week. If a student banks more than 24 hours, no additional hours will be allowed. Clinical Preceptors will document the non-adherence to the banking hours policy and a written warning will occur. If additional incidents occur, students will be given a one day suspension followed by termination from the program.

9. Clinical Breaks

Coffee breaks, lunch and/or dinner schedules will be assigned at the discretion of the clinical preceptor when students are on clinical assignments. Clinical time will be deducted for abuse of time allotted. Only the Clinical Preceptor or designated supervisor will authorize additional breaks. Lunch/dinner breaks are mandatory and cannot be used to leave early for the day.

10. No-Loitering Policy

A student who requests permission to leave a clinical site must depart from the site. Each clinical sites individual policy concerning loitering will be followed. If a student's friends or family

arrive at the clinical sites Radiology Department during course time, they will be asked to leave. Students can meet family and/or friends outside of the department as long as it does not interfere with clinical requirements.

F. Radiation Protection

Radiation Monitoring Badges

Radiation Monitoring badges for monitoring individual amounts of radiation exposure will be provided by the clinical affiliates. Students must always wear their badges while on clinical assignments. The designated area for the badge to be worn on the collar, depending on the area of greatest exposure possibilities (according to State regulations listed below). The badge must always be left in the designated areas within the clinical site's Radiology Department.

Radiation Monitoring badges for monitoring individual amounts of radiation exposure will also be provided by the College to use during laboratory time. These badges must be left at the College in the designated area and should not be taken home. Failure to leave the monitor in the laboratory will result in a fee to the Dosimetry Company. Current price is \$20, subject to change without notification. Radiation exposure reports are provided to the students, by the program, within thirty (30) school days following receipt of the data students will initial and date these reports to confirm receipt.

Lead Apron and Thyroid Shields

All students must wear a lead apron and thyroid shield when performing a fluoroscopy examination. If circumstances warrant that a student must remain in the radiographic room with a patient while an exposure is made, a lead apron and thyroid shield must also be worn.

Energized Laboratory

All students must follow the energized laboratory rules as posted in the lab, as follows:

- No eating/drinking in x-ray rooms
- Not allowed to x-ray each other or any person
- Badges must be worn, at collar level, while in the lab and placed back in the basket at the end of lab
- Notify the lab instructor immediately if you lose your TLD dosimeter or take it home
- No phones allowed in lab rooms
- Help clean up at the end of lab

Direct supervision by a qualified instructor is required in order to operate the energized lab. Students must wear their appropriate radiation monitoring badges during lab.

Location of Individual Monitoring Devices

Each licensee or registrant shall ensure that individuals who are required to monitor occupational doses in accordance with Section 340.520(a) wear individual monitoring devices as follows:

- a) An individual monitoring device used for monitoring the dose to the whole body shall be worn at the unshielded location of the whole body likely to receive the highest exposure. When a protective apron is worn, the location of the individual monitoring device is typically at the neck (collar).
- b) An individual monitoring device used for monitoring the dose to an embryo/fetus of a declared pregnant woman, pursuant to [Section 340.280\(a\)](#), shall be located at the waist under any protective apron being worn by the woman.
- c) An individual monitoring device used for monitoring the eye dose equivalent, to demonstrate compliance with [Section 340.210\(a\)\(2\)\(A\)](#), shall be located at the neck (collar), outside any protective apron being worn by the monitored individual, or at an unshielded location closer to the eye.
- d) An individual monitoring device used for monitoring the dose to the extremities, to demonstrate compliance with [Section 340.210\(a\)\(2\)\(B\)](#), shall be worn on the extremity likely to receive the highest exposure. Each individual monitoring device shall be oriented to measure the highest dose to the extremity being monitored.

The exposure record is available for student review at any time. The exposure records may be reviewed by requesting them from the clinical preceptor. All current reports should remain at the clinical site until the student graduates, withdrawals or leaves the program. At that time, they will be stored and kept in the Radiology office, F110-A.

If the monthly student exposure should exceed 100 mrem, an immediate report is given to the College. Students will follow clinical site policy in the cases of excess exposure in accordance with Illinois Emergency Management Agency (IEMA) regulations listed below.

SUBPART C: OCCUPATIONAL DOSE LIMITS

Section 340.210 Occupational Dose Limits for Adults

- a) The licensee or registrant shall control the occupational dose to individual adults, except for planned special exposures pursuant to [Section 340.260](#), to the following dose limits:
 - 1) An annual limit, which is the more limiting of:
 - A) The total effective dose equivalent being equal to 0.05 Sv (5 rem); or

- B) The sum of the deep dose equivalent and the committed dose equivalent to any individual organ or tissue other than the lens of the eye being equal to 0.5 Sv (50 rem).
- 2) The annual limits to the lens of the eye, to the skin and to the extremities which are:
 - A) An eye dose equivalent of 0.15 Sv (15 rem), and
 - B) A shallow dose equivalent of 0.5 Sv (50 rem) to the skin or to any extremity.
 - C) If a student chooses to inform the Radiologic Technology Program of her pregnancy, the following conditions apply according to State of Illinois Regulation:

Section 340.280 Dose to an Embryo/Fetus

- a) Except as otherwise provided in [subsections \(d\)](#) and [\(e\)](#) below, the licensee or registrant shall ensure that the dose to an embryo/fetus during the entire pregnancy, due to occupational exposure of a declared pregnant woman, does not exceed 5 mSv (500 mrem).
- b) The dose to an embryo/fetus shall be taken as the sum of:
 - 1) The deep dose equivalent to the declared pregnant woman during the entire pregnancy; and
 - 2) The dose to the embryo/fetus from radionuclide's in the embryo/fetus and radionuclide's in the declared pregnant woman during the entire pregnancy.
- c) The licensee or registrant shall make efforts to avoid substantial variation above a uniform monthly exposure rate to a declared pregnant woman so as to satisfy the limit in [subsection \(a\)](#) above.

AGENCY NOTE: The National Council on Radiation Protection and Measurements report entitled "Recommendations on Limits for Exposure to Ionizing Radiation," NCRP 91, published June 1, 1987, recommends that no more than 0.5 mSv (50 mrem) of the allowed dose to the embryo/fetus be received during any one month during a declared pregnancy.

- d) If the declared pregnant woman has not notified the licensee or registrant of the estimated date of conception, the licensee or registrant shall ensure that the dose to an embryo/fetus, as specified in [subsection \(b\)](#) above, due to occupational exposure of the declared pregnant woman does not exceed 0.5 mSv (0.05 rem) per month, during the remainder of the pregnancy. If after initially declaring her pregnancy, a declared pregnant woman advises the licensee or registrant of the estimated date of conception, the dose limits specified in [subsections \(a\)](#) and [\(e\)](#) of [this Section](#) shall apply.

AGENCY NOTE: The Department encourages licensees and registrants to explain to declared pregnant workers that providing an estimated date of conception will enable the licensee or registrant to more accurately assess the radiation dose to the embryo/fetus and assist the licensee or registrant in determining appropriate precautions to be taken for the remainder of the pregnancy.

- e) If by the time the woman informs the licensee or registrant of the estimated date of conception the dose to the embryo/fetus has exceeded 4.5 mSv (45 mrem), the licensee or registrant shall be deemed to be in compliance with [subsection \(a\)](#) above if the additional dose to the embryo/fetus as specified in [subsection \(b\)](#) above does not exceed 0.5 mSv (50 mrem) during the remainder of the pregnancy.

G. Dress Code

The dress code is established by the College faculty and the clinical faculty. The personal appearance of the Radiologic Technology students should reflect pride in themselves and in their profession.

Students are required to adhere to the following dress code. Non-compliance can result in the loss of clinical time as a result of being sent home. Continued non-compliance can result in dismissal from the program.

Warnings include:

1. Verbal Warning
2. Written Warning
3. Suspension
4. Removal from the Radiology Program will be followed.

NOTE: Clinical Preceptors may identify and take appropriate action, if program guidelines are not adhered to.

Uniform

1. The designated Triton College Uniform consisting of the navy blue scrub top and navy blue scrub pants with a Triton patch sewn to the upper left sleeve. Pants must be worn at the waist level, not tight or loose fitting. No dresses or skirts are allowed.
2. Appropriate white or black shirt may be worn under the tunic top. No designs are visible.
3. A white lab coat may be worn over the designated uniform. Some clinical sites require the student to have lab coats to use as a cover-up when assigned to a surgery rotation. Check with your clinical site before purchasing a lab coat.
4. ALL UNIFORMS AND LAB COATS must have the Triton patch sewn to the upper left sleeve and be worn whenever the student is performing in the capacity of a student radiographer. It must be sewn on and not taped, glued, Velcroed or pinned.

5. Uniforms must be clean and in good condition.
6. Uniforms must be clean, free of strong odors (including smoke or heavy fragrances), and maintained in a hygienic condition consistent with professional healthcare standards.
7. Students arriving without proper uniform may be sent home.
8. Students must wear proper clinical site identification.
9. A mask must be worn during lab hours and during clinical rotations with COVID-19 restrictions, at all times.

Shoes - Socks

1. Shoes may be white or dress brown or black. No high heels or sandals may be worn. All parts of the foot must be covered within the shoe.
2. Shoes are to be kept clean and in good condition.
3. Sturdy shoes are recommended to ease discomfort and protect feet.
4. Socks should coordinate with the uniform.

Hair

1. Hair must be clean, neat, and should not fall into the face of patients. If necessary, hair should be fastened up and off the shoulders. Hair color should be of natural color and not anything deemed unprofessional. Clinical sites and the Program Chairperson will make a final decision that must be abided by in order to stay in the program.
2. Beards and/or mustaches must be kept well-trimmed, clean and neat. Students may be required to wear a mask if the beard, the mustache is considered too long to the radiology cleanliness standards.

Cosmetics

Make-up should be applied in a manner that maintains a professional appearance appropriate for a healthcare setting. Perfumes, colognes, and scented lotions should be avoided or used minimally, as strong scents can cause discomfort or adverse reactions in patients.

Jewelry

Jewelry should be minimal and appropriate for clinical practice. Dangling earrings, necklaces, and bracelets can be a source of injury to the student as well as to the patient. All valuable items should be left at home and not worn at the clinical site.

Nails

Nails should be trimmed short and kept clean. Extremely long nails can be a source of injury and infection to the patient as well as to the student. Artificial nails are not allowed.

Clinical Site Dress Codes

Students must conform to all dress code rules and regulations at the clinical site to which they are assigned.

Facial Piercings

Students must adhere to all dress code rules and regulations set by the clinical site to which they are assigned. Visible facial piercings are not permitted during clinical rotations, with the exception of a reasonable number of ear piercings. All other facial piercings must be removed while at the clinical site, unless worn for religious or cultural reasons and approved in advance by the program or clinical site administration.

Tattoos

Students must conform to all dress code rules and regulations at the clinical site to which they are assigned, which may require that students cover all tattoos while on clinical rotation at a clinical site.

H. Confidentiality

Students must adhere to all HIPAA (Health Insurance Portability and Accountability Act of 1996) Regulations. All departmental and hospital records are legal documents and must be kept confidential. Precautions should be maintained to see that only the proper personnel handle these records. Under no circumstances should these charts or information be shown to a patient, a member of the family or other unauthorized persons.

Confidential hospital matters, including patient information, can only be released by following individual hospital policy. Revealing confidential information to unauthorized sources may result in a lawsuit and/or dismissal from the clinical agency and the Radiologic Technology Program.

Radiographs/Images must never be shown to the patient or unauthorized person. If anyone insists upon seeing the radiographs/images, contact the Clinical Preceptor or department supervisor.

I. Student Identification

Students must at all times wear identification name badges provided by the clinical affiliates.

J. Accidents / Injuries

Students are responsible for all costs of medical care, including care rendered at a clinical site. Questions regarding payment of medical expenses should be addressed to the student's health insurance provider.

In the event of an accident or injury, the following steps must be followed:

1. Inform all clinical preceptors that in cases of accidents or injuries occurring on duty, the student must be attended to immediately in the facilities emergency room if necessary. It is ultimately the student's decision to go to the emergency room or not.
2. All decisions regarding care shall be made by the emergency room physician regarding the care management after the initial assessment. The student must receive appropriate laboratory testing and immunization immediately at the clinical facility unless otherwise desired by the student. If so, the decision to seek treatment at another facility must be obtained in writing.
3. Cost of diagnostic tests and treatment should be charged to the student's hospitalization insurance. If a student is a veteran and has VA hospitalization, he/she must be sent to the appropriate facility for follow-up treatment (after emergency assessment and treatment).
4. The injury/accident must be reported, by phone, to the chairperson of the program or Dean's office as soon as possible.

An incident report must be submitted by the individual directly supervising the student at the time of the injury/accident, utilizing the clinical affiliate's incident report form. The clinical preceptor is responsible for reporting and submitting the incident report to the Program Chairperson or Clinical Coordinator. The Triton College Health Service Accident Report form must also be completed by the Program Chairperson or Clinical Coordinator and submitted to health service.

K. Student Behavior in Clinical Setting

The course syllabi for all clinical courses include a statement that when a student is at a clinical site, the rules and regulations of that affiliating institution are to be followed in addition to those of Triton College. The Code of Conduct outlines the responsibilities that Triton College students must follow as part of the academic community. It specifies acceptable behavior and consequences for breaching these responsibilities. This is in accordance with the affiliation agreement signed by representatives of Triton College and the affiliating agency. If a student does not comply, the following procedures should be observed:

Radiologic Technology Program Grievance and Conduct Procedure

Grievance Process

Students with a grievance related to the Radiologic Technology Program must submit the concern in writing to the Program Chairperson during the semester in which the issue is perceived. The Program Chairperson will provide a written response within five (5) working days.

If the student is not satisfied with the Program Chairperson's response, they may submit a written appeal to the Dean of Health Careers and Public Services within five (5) working days of receiving the initial response. The Dean will review the grievance and respond in writing to the student and all relevant parties within ten (10) working days. The decision of the Dean of Health Careers and Public Services is final.

Informal Resolution of Clinical Concerns

When unacceptable or inappropriate behavior is observed in the clinical setting by a clinical preceptor or reported by agency staff, the preceptor must promptly notify both the student and the Program Chairperson. Together, the clinical preceptor and Program Chairperson will review the student's clinical history to determine if the behavior is a first-time or repeated offense.

If the incident is a repeated offense, the formal grievance procedure may be initiated. Regardless, documentation of the behavior must be presented to the student during a conference held within one (1) week of the incident. The *Triton College Incident Report* form must be used for this documentation. A corrective action plan will also be discussed and presented at this conference. The student is expected to adhere to the corrective plan; failure to do so may result in further action under the formal resolution process.

Formal Resolution

If the student's inappropriate behavior continues and their record reflects repeated violations of agency or college policies, faculty must complete a *Triton College Incident Report* and refer the matter to the Dean of Health Careers and Public Services. The formal grievance procedure will then be followed as outlined above.

Additional Support

The Dean of Student Services, located in Room B-250A of the Student Center (Ext. 3865), oversees the Student Services division and handles disciplinary actions, student grievances, and other student welfare matters, including access to basic needs support on campus.

3. Critical Incident

A Critical Incident refers to a situation where the behavior or performance of a student at the clinical agency presents an immediate threat to the safety of the client/patient, self, or others, as observed by the preceptor or clinical agency staff.

- a. The student must be informed of the significance of the incident immediately and must be temporarily removed from the clinical site by the clinical preceptor. The student may be suspended by the Program Chairperson for up to three days or until a formal hearing occurs.
- b. The Dean of Health Careers must be notified verbally of the incident as soon as possible and shall review the incident report form.
- c. The preceptor must send, immediately, a formal notification of the incident to the Vice President of Student Affairs using the *Triton College Incident Report* form. If

the incident involved clinical staff, a report from the staff must be obtained utilizing the clinical agency form. If an agency form is not available, the Triton College Incident form may be completed by agency staff.

- d. The student must be scheduled for a hearing at the College with the Vice President or designee, as soon as possible, but in no case longer than three days. The Program Chairperson and dean will be notified of the scheduled hearing by the Vice President and will be in attendance.
- e. The decision of whether or not to readmit the student to the clinical area will be made after the hearing with the Vice President or designee. In accordance with the Student Handbook, the Vice President or designee will render a decision on the appropriate level of discipline.
- f. If the student is allowed by the Vice President or designee, to return to the clinical site, the clinical affiliate may request that the involved student NOT be reassigned to the same agency, as stated in the contractual agreement with each clinical affiliate. In this case, all possible efforts will be made by the preceptor, program chairperson, and/or department chair to reassign the student to another facility. When a student cannot be reassigned because no affiliate is available or other affiliates refuse the student, the student is subject to termination for the course with an incomplete grade. Removal of the incomplete must be done the next time the course is offered. Should all clinical affiliates refuse to accept a student, the student must be terminated from the program.

L. Transportation

Students will be responsible for providing their own transportation to attend clinical assignments.

M. Work Policy

Students may not be employed by the clinical facility during their assigned clinical time. Students may be employed after assigned clinical time for duties and responsibilities other than those directly related to the performance of the academic program. The College is in no way responsible for the “employee’s” actions while working in this capacity.

For those students who work after class hours, either in campus work study or off campus, work obligations should not negatively impact academic progress. Counselors are available to assist students in planning a schedule that enables academic success. Students cannot work overnight shifts prior to attending clinicals to ensure safe patient care practices. It is the student’s responsibility to disclose any conflicts.

N. Malpractice Insurance

Malpractice insurance is paid for by part of lab fees when registering for clinical practice. Coverage for malpractice is arranged through the College business office. It is the student’s responsibility to pay all fees/tuition due to the College. If a student is not registered for clinical

courses RAS150, RAS160, RAS170, RAS280 or RAS290, they CANNOT attend their clinical internship. Failure to abide by this rule will result in the critical incident policy being enforced and student suspension. NO exceptions.

O. Libraries Facilities

Library facilities are available on the College Campus and at some clinical sites. Contact the clinical preceptor for the procedure for library utilization at the clinical sites.

P. Cell phone and Electronic Devices

The use of cell phones or other electronic devices is prohibited while the student is on assignment in the clinical setting. Their use is only permitted during breaks and lunch periods. If a contact number is needed in case of emergency, then speak with your clinical preceptor to provide a department number that can be used in case of emergency. If a student is seen with a cell phone during any part of their clinical internship with a patient, that student will be immediately removed from the clinical site pending critical incident review. Failure to comply may result in dismissal from the program.

Q. Triton College Student Complaint Process

Triton College, in its mission, is committed to student success through institutional and academic excellence and providing a student-centered, lifelong learning environment for our diverse community. To that end, our desire is for you to have a positive experience at Triton College. We recognize that at times situations may occur whereby students need to have the opportunity to voice a complaint.

The student complaint process governs any case in which a student has a complaint on an action that is deemed objectionable by the complainant against Triton College or a member of the faculty, administration, or employee of the institution. The student complaint process does not apply to grade appeals, complaints of sexual harassment, or complaints of discrimination. Please refer to the student handbook for procedures regarding these types of complaints (i.e., “change of grades,” “sexual harassment,” “non-discrimination policy”).

https://www.triton.edu/globalassets/media/documents/student_handbook_2025a.pdf

Students are strongly encouraged to resolve any concern informally through the appropriate individual or department with whom the concern resides. If, however an issue or problem still exists, there is a formal complaint process that students may initiate.

Procedure

All complaints should be submitted in writing (complaints may also be submitted via email) in complete detail promptly after the occurrence and must include the name and contact information for the student who is communicating the concern. In addition, the complaint should include the name of the person(s) involved and the nature of the complaint, the name of any witnesses and the signature of the complainant. A delay in reporting can make it difficult to investigate and address the concern. The complainant should clearly and concisely describe the

concern as well as the desired remedy. All complaints must be filed within 30 days of the date that the incident occurred.

Step I.

Academic Student Complaint

Student confers with the involved faculty and/or staff member in order to resolve the issue informally. If the complaint is not resolved, the student may submit a written complaint to the individual's supervisor (Department Chairperson, Dean, Associate Vice President). The supervisor will attempt to reach a mutually acceptable resolution.

Step II.

If the student feels that the issue is still unresolved, she/he may submit a written complaint to the appropriate Academic Dean who supervises that area. The Academic Dean discusses the complaint with the student and affected party and attempts to reach a mutually acceptable resolution.

Step III.

If the resolution presented by the Academic Dean is not reached, the student may appeal the resolution to the Vice President of Academic Affairs. The Vice President of Academic Affairs may:

- A. Offer a resolution to the complaint
 - B. Dismiss the complaint
 - C. Take appropriate action
- The decision of the Vice President is final.**

Step I. Non-Academic Student Complaint

Student confers with the employee involved in order to resolve the issue.

Step II.

If the student feels that the issue is still unresolved, a formal complaint should be made to the immediate supervisor of the person involved in the alleged violation. The administrative officer or immediate supervisor discusses the complaint with the student and affected party and attempts to reach a mutually acceptable resolution.

Step III.

If the resolution presented by the administrative officer or immediate supervisor is not reached, the student may appeal the resolution to the appropriate Dean of the area. In the absence of a Dean, the student may appeal to the appropriate Vice President. The Vice President may:

- A. Offer a resolution to the complaint
 - B. Dismiss the complaint
 - C. Take appropriate action
- The decision of the Vice President is final.**

In the event a student complaint should be brought forward to the Office of the Vice President, Office of the President, or Board of Trustees, the complaint should be redirected in order to ensure the student complaint process is adhered.

R. DETAILS REGARDING BACKGROUND CHECKS

All accepted students must successfully complete a background check performed by the Illinois State Police in order to participate in the clinical phase of the program.

Accepted students will be required to provide relevant information and sign an authorization for the background check to be completed in order to confirm their position in the program.

The Triton College Radiology Program requires all prospective students to undergo a criminal background check as part of the admission process. The presence of convictions or findings related to healthcare fraud, abuse, or exclusions from federal healthcare program participation may affect eligibility for clinical placement and program completion, as determined in accordance with College policies, applicable laws, and ARRT policies.

Information obtained will be reviewed in comparison to disclosures made by the applicant. Any material misrepresentation or falsification may result in denial of admission or, if discovered after enrollment, disciplinary actions consistent with the College's Critical Incident policies.

*Please note that clinical placement sites may impose additional eligibility requirements, including but not limited to background screenings and exclusion checks, and may deny placement based on their own policies and regulatory obligations. The College cannot guarantee clinical placement for students who do not meet the requirements of the assigned clinical site.

In the event of falsification, the prospective student is eligible to reapply for the program after a period of twelve months from the date on the original application. After the 12- month period expires, any information disclosed will be evaluated in accordance with current policy. If a pending case is discovered and its disposition as "guilty" would render the applicant not eligible for enrollment according to this policy, the application process is stopped until the disposition of the case occurs.

To fully understand the circumstances that can disqualify you from being a student in the clinical phase of the program, please be aware of how we define the following terms and use them in this document:

- Conviction: Any violation of a law or ordinance for which a prospective student was found guilty by a judge and/or jury or to which the prospective student pleaded guilty.
- Falsification: Providing or omitting information contrary to that obtained in a background investigation (unless the background investigation is proven to be inaccurate) and/or providing false, incomplete or misleading information.

The following convictions will disqualify an applicant or accepted the student from the clinical phase of the program: (ARRT Handbook) <https://assets-us-01.kc-usercontent.com/406ac8c6-58e8-00b3-e3c1-0c312965deb2/c4646bef-14f6-4604-a88f-522e64302c22/arrt-primary-handbook.pdf>

1. A sex crime.
2. The exploitation of an endangered adult.
3. Failure to report battery, neglect, or exploitation of an endangered adult.
4. Theft*, if the prospective student's conviction for theft occurred less than five years before the prospective student's application. **
5. Murder.
6. Voluntary manslaughter.
7. Involuntary manslaughter within the previous five years. **
8. The battery within the past five years. **
9. A felony offense relating to controlled substances within the last five years. **
10. Abuse or neglect of a minor, child or dependent.
11. Failure to report the abuse of a minor, child or dependent.
12. Any act that, if it occurred at the organization, could compromise the safety or well-being of patients, employees, visitors, or volunteers of the organization.

*Theft includes but is not limited to criminal conversion, receiving stolen property, shoplifting and identity theft.

**Time frames are measured from the date of disposition (conviction).

In addition, we will not accept any individual:

13. Who has abused, neglected, or mistreated a patient or misappropriated a patient's property, as reflected in the state nurse aide registry, or
14. Whose name appears in a state Sex Offender Registry?
15. Anyone who has been incarcerated and released unless that individual has prior approval from the Program Chairperson.
16. Enrolled students must report, in writing, any criminal charge, conviction, or sanction to their Program Chairperson during the program.

For students in clinical courses, the notification must occur at least 24 hours prior to the next clinical class after the charges are filed or after the conviction or sanction occurs, or immediately if the charge/ conviction/sanction occurs within 24 hours of the next clinical day.

Failure to report a charge, conviction, or sanction could be grounds for immediate termination of participation in the student's clinical activity.

During an investigation of a charge, the student can be suspended. If the charge is related to drugs or alcohol, an immediate drug test is ordered for the student. If positive, the student will be referred for corrective action consistent with the Health Sciences Education policies up to and including termination from the program. If the student is placed on a leave of absence to receive therapy, a release must be provided indicating readiness to return to clinical and/or class.

IV. Clinical Forms

Forms may be found at the clinical site you are assigned, in Trajecsys (electronic), or in Blackboard (paper backups).

Affective Midterm Evaluation
Affective Final Evaluation
Bi-weekly Clinical Conference Form
Competency Chart
Cumulative Clinical Hours Record (excel file)
Student Radiation Exposure Report
Technical Standards Survey Test
Technologist Evaluation of Students
Student Supervision Requirements
Pregnancy declaration Form
Student Orientation check list
Equipment Competency
Patient Care check list
Fluoroscopy Competency
Consent to Drug and Alcohol Testing
Student Evaluation Addendum
Daily Clinical Log
Make-up time
Surgery hours log

References:

<https://assets-us-01.kc-usercontent.com/406ac8c6-58e8-00b3-e3c1-0c312965deb2/c4646bef-14f6-4604-a88f-522e64302c22/arrt-primary-handbook.pdf>

<https://iemaohs.illinois.gov/>

<https://iemaohs.illinois.gov/content/dam/soi/en/web/iemaohs/nrs/documents/iema-206-rad-info-for-the-emergency-worker.pdf>

<https://www.nrc.gov/docs/ML1114/ML111430769.pdf>

<https://iemaohs.illinois.gov/laws/regs-title32.html#:~:text=Standards%20for%20Protection%20Against%20Radiation,or%20registratio ns%20issued%20by%20IEMA>

https://www.triton.edu/globalassets/media/documents/student_handbook_2025a.pdf

[triton.edu/globalassets/media/documents/boardpolicy-manual/5000/policy_5105_042120.pdf](https://www.triton.edu/globalassets/media/documents/boardpolicy-manual/5000/policy_5105_042120.pdf)

V. Acknowledgment of Receipt of Handbook

I, _____, (_____)
 _____ Print Name _____ colleague number
 (_____) acknowledge the
 receipt of the Birth Date (mm/dd/yy)

Radiologic Technology Student Clinical Handbook.

The Radiology Program Handbook is not an irrevocable contract between the student and the Program. Program assessment is an ongoing process, and the Radiology Program reserves the right to make changes at any time, notwithstanding any information set forth in the Radiology Program Handbook in accordance with Triton College policies and procedures.

The rules and regulations contained in this handbook have been explained to me by a member of the Triton Faculty. By signing this document, I fully understand and will abide by its rules and regulations.

Student's Signature

Date _____