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LAKE SUPERIOR COLLEGE RADIOLOGIC TECHNOLOGY WEB PAGE

https://degrees.lsc.edu/radiologic-technologist/?_sf_s=radiologic+technology

ACCREDITATION STATEMENT

This program is accredited by the Joint Review Committee on Education in Radiologic Technology; 20 North Wacker Drive, Suite 2850; Chicago, IL 60606-2901; (312)704-5300.

www.jrcert.org

Graduates of the Lake Superior College, Radiologic Technology program are eligible for the national certification examination given by the American Registry of Radiologic Technologists. Lake Superior College Radiologic Technology program follows the standards of education set forth by the JRCERT. A copy of these STANDARDS are available in the classroom and can be found online at http://www.jrcert.org/acc_standards.html. Students are encouraged to review the STANDARDS and direct any questions to the program director. Complaints of non-compliance with the STANDARDS should follow the same process as for petition/appeals found in this document.

Lake Superior College Radiologic Technology Program is preparing students to challenge the national certification exam, individual state licensing may require additional research on the part of the student.

RADIOLOGIC TECHNOLOGY PROGRAM MISSION

Lake Superior College Radiologic Technology program will produce competent entry level Radiologic Technologists. The program will prepare students for success in medical imaging through a broad didactic component and comprehensive clinical education in greater Minnesota.

GOAL #1 Students will improve critical thinking skills.

GOAL #2 Students will develop professional communication skills.

GOAL #3 Students will exhibit professionalism.

GOAL #4 Students will prove clinical competence.

BACKGROUND STUDY REQUIREMENTS

Minnesota (and Wisconsin) law requires that any person who provides services that involve direct contact with patients and residents at a health care facility licensed by the Minnesota Department of Health (and WI) have a background study conducted by both the state and federal agencies.

An individual who refuses to cooperate with the background study or who is disqualified from having direct patient contact as a result of the background study, and whose disqualification is not set aside by the Commissioner of Health, will not be permitted to participate in a clinical placement in a Minnesota or Wisconsin licensed health care facility. **Failure to participate in a clinical placement required by the academic program will result in ineligibility to qualify for a degree in this program.**

COMMON TERMS WITHIN

ARRT	American Registry of Radiologic Technologist	MRI	Magnetic Resonance Imaging
CT	Computerized Tomography	NC	No Credit – a major infraction that will reduce the clinical grade.
CBE	Competency Based Evaluation – process to prove competency in a specific radiographic procedure	NM	Nuclear Medicine
CC	Clinical Coordinator	NRC	Nuclear Regulatory Commission
CI	Clinical Instructor. The student's immediate supervisor.	PE	Performance Evaluation
GI	Gastrointestinal System	PLD	Personal Leave Day
GU	Genitourinary System	RAD	Radiation Absorbed Dose
JRCERT	Joint Review Committee on Education in Radiologic Technology	RadT	Abbreviation used for Radiologic Technology
LSC	Lake Superior College	rem	Unit of radiation measure for occupational workers
		Sono	Sonography

The Lake Superior College, Minnesota Community College System, and the Radiologic Technology program reserve the right to alter, change, delete, or add to any of the material presented in this handbook with a four-week notice.

GENERAL INFORMATION

ORIENTATION/CERTIFICATION SCHEDULE:

General Hospital Orientation requirements are found on the Radiologic Technology Online Orientation and are due in May.

Clinical Site Orientation: Mandatory for all students.

- All non-Duluth area students must contact their CI in July to arrange this prior to the start of Fall semester classes.
- All Duluth students will receive information on the orientation times/dates.

CPR certification: Mandatory for all students. Scheduled as part of RadT 1558 Clinical Radiography I.

Clinical Prep Meetings: Mandatory. Two meetings within the 1st 8 weeks of the program.

Attendance is required for all orientation and meetings. Material covered is necessary for the student to be allowed to participate in clinical experience at the health facilities. Site specific hospital orientation will be arranged by the site clinical instructors. Individual hospital policies, regulations, infection control, hospital emergency codes and phone systems will be discussed.

COLLEGE COMMUNICATIONS

E-mail is the official form of communication on the LSC campus. Important notices, program newsletters, and course information will be sent in this format. Be sure to sign-up for an LSC account. Visit the college webpage www.lsc.edu for information/ instructions.

HOUSING

Each student is responsible for his/her own accommodations. Student Life may offer assistance.

TEXTBOOKS/ EQUIPMENT

Textbooks are available each term in the bookstore with the majority of text being required for purchase the first term. If purchasing outside the LSC bookstore, be sure to confirm text information with your instructor. Some textbooks require online pass-codes. Total amount for textbooks is approximately \$700. Some courses require an equipment pack, also available in the bookstore.

FINANCIAL ASSISTANCE

Financial assistance is available to all qualified students through Student Services at Lake Superior College. For further information, refer to your college Student Handbook or contact the Student Services. Scholarships are available through the LSC Foundation.

HEALTH PHYSICAL

The student is required to have a physical examination, with a current immunization record, in the summer prior to starting the program. Hepatitis B immunization is strongly recommended. A completed Health Physical and immunization form must be scanned and submitted via online dropbox (Student Orientation course page) by **July 1st**.

Second year students must complete a one-year health update and annual Mantoux testing (see clarification below). This information is due within 12 months of the initial completion dates. See the Clinical Radiography homepage for deadlines.

Mandatory Mantoux Test Requirements: Evidence of a tuberculosis skin test (TST) (or QuantiFERON-TB blood test) within the previous 12 months. If the test is positive, there must be documentation of a medical evaluation (including a chest x-ray) by a health care provider.

Note: If first time testing, or it has been more than 12 months since a previous negative TST, **a two-step TST is required**. If the first TST is negative, the second TST must be administered 1-3 weeks after the first test is read.

HEALTH INSURANCE

It is the student's responsibility to provide his or her own health insurance. Injuries or illnesses that may occur during clinical rotations are the sole responsibility of the student. Neither the clinical site nor LSC is responsible for coverage therefore individual coverage is strongly encouraged. Students in need of insurance are advised to seek information regarding insurance plans through Lake Superior College, Student Services. Health insurance should be maintained throughout the entire program. Students with lapsed immunization/health information will be removed from clinical until they are once again compliant.

LIABILITY INSURANCE - PROFESSIONAL

A major focus of any medical profession must be patient safety. The Radiologic Technology student is responsible for his/her own acts. Liability insurance is provided each fall through Minnesota State College System and is part of the yearly tuition fees. Students repeating a clinical course will be required to purchase this in addition to the standard tuition and fees.

CPR CERTIFICATION

Students will be scheduled for CPR within the first 5 weeks of the semester. This will be an additional personal expense as the course is scheduled through LSC. CPR certification must remain current throughout the entire program. The student must be certified through the American Heart Association: BLS Healthcare Provider or American Red Cross: CPR/AED for the Professional Rescuer. Students with lapsed certification will be removed from clinical until certification is once again current.

BACKGROUND STUDY

State Law requires any person who provides services that involve direct contact with patients and residents at a health care facility licensed by the Minnesota (or other) Department of Health have a background study conducted by both the state and federal agencies. Background study approval is required from the state of Minnesota and/or Wisconsin. Background clearance is required yearly and the student is responsible for any associated fees. Students who are disqualified from having direct patient contact because of the background study, and whose disqualification does the Commissioner of Health not set aside, will not be permitted to participate in a clinical placement. Failure to participate in a clinical placement required by the academic program will result in dismissed from the program.

RADIOLOGIC TECHNOLOGY CODE OF ETHICS

The American Registry of Radiologic Technologists mandates that all candidates must comply with the "Rules of Ethics" set forth by the profession. The rules are ethical standards of accepted professional conduct for all Registered Technologists and Student Technologists, and are intended to promote the protection, safety and comfort of patients. Conviction (or profession of guilt) of a crime, including a felony, gross misdemeanor, or misdemeanor with the sole exception of speeding and parking violations may make a candidate ineligible to sit for the national board exam.

Students are strongly encouraged to visit www.arrt.org for more information on ethics requirements and examination eligibility. Early application with the ARRT (after the first day on entry into a program) is possible and is highly recommended.

PROFESSIONAL ORGANIZATIONS (ASRT, MNSRT, DISTRICT)

Students are strongly encouraged to join professional organizations. The American Society of Radiologic Technologists (ASRT) membership is required and is paid for via a special fee attached to tuition. Students will register at the start of Fall semester, first year. Special student membership rates are available for most organizations. Membership gives the student exposure to the profession and the latest technical advancements, information of continuing education opportunities and employment opportunities nationally as well as locally. Visit www.mnsrt.com and www.asrt.org for more information.

ATTENDANCE

The two-year (22-month) program consists of 6 consecutive terms. The program begins in the fall of each year. Scheduled college holidays and semester breaks will be observed unless otherwise scheduled to meet clinical objectives.

Attendance to all RadT classes is required. It is difficult to make up missed information within the normal time frame. Absence may lead to unsuccessful completion of a course. Attendance requirements for clinical assignments are found under the Clinical Radiography section of this program handbook.

LEAVE OF ABSENCE

Leave of absence (LOA) may be allowed for family emergency, extended illness, injury and maternity/paternity leave. LOA will be handled on an individual basis. A written request must be submitted to the program director. If approved, a contract for continuation will be created. Didactic instruction must be completed according to program standards. All missed clinical experience must be rescheduled. Students may be required to register for a remedial Clinical Radiography course. 1-6 credits will be required depending on the length of the leave. Medical leaves require a release for duty from a physician.

INJURIES/ILLNESS

Injuries or illnesses that require an extended absenteeism will be handled in the same fashion as a leave of absence. If a student becomes injured or has an extended illness, he/she must contact the program director. If special accommodations are needed to facilitate the return, the student will be directed to the disabilities counselor and a contract for completion will be required. Injuries that may conflict with the student's ability to meet technical standards (see *Technical Standards*) or the clinical site's safety standards may require that the student to withdraw from the program or take a leave of absence from clinical until the technical or safety standards can be met once again. A student who is absent from clinical experience due to an injury or extended illness (over 5 consecutive or assigned clinical days) must contact the clinical coordinator before re-entry to the clinical setting and will be required to have written release for duty from a physician. The program director will review re-entry requests on an individual basis.

HEALTH EDUCATION RESOURCES

Provides health education materials for all LSC students and is located in the E building on campus and online at <http://www.lsc.edu/current-students/health-education-resources/>

INTERVIEWS

Students may use personal leave days to attend interviews for educational programs or post-graduate employment.

JURY DUTY

If called for jury duty during the program, students may request a letter requesting exclusion from jury duty until graduation from the program. Contact the program director for this.

PREGNANCY POLICY

In accordance with Nuclear Regulatory Commission (NRC) regulations, any student who believes she is pregnant has the option of whether or not to inform program officials of her pregnancy. If the woman chooses to voluntarily inform officials of her pregnancy, it must be in writing, delivered to the program director, and indicate the expected date of delivery. In absence of this voluntary, written disclosure, a student cannot be considered pregnant.

If the student chooses to disclose her pregnancy, she will have the option to continue the Radiologic Technology program without modification or interruption. The student will not be treated differently than a non-pregnant person. Modifications in the clinical assignment and/or leave of absence from the program will require a contract between the student and the program. The student will be asked to present a written statement from her physician including the expected date of delivery and permission to continue the education and clinical experience of the program.

A withdrawal of pregnancy can be submitted/declared at any time. Students who have declared pregnancy are also required to declare, in writing, when they are no longer pregnant.

The National Council on Radiation Protection and Measurement recommends radiation dose to the mother and fetus not to exceed 0.5 REMS during the gestation period. The student will be required to purchase a second film badge for the fetus and the radiation dose will be carefully monitored during this time to assure this amount is not exceeded.

HOLIDAYS

Holidays will be observed as noted on the LSC academic calendar. Class and clinical rotations are not held on LSC observed holidays.

CLASS CANCELLATION POLICY

Class cancellation notices will be posted on the campus online homepage www.lsc.edu. Students are encouraged to register for the ALERT system through LSC to receive emergency notifications affecting the campus and their courses.

SCHOOL CLOSING POLICY *due to inclement weather:*

The president of the college will be responsible for canceling classes due to inclement weather. The official radio station announcing school closing is:

KDAL - 95.7- FM	KTCO 98.9 -FM	WDSM 710 - AM
KDAL - 610-AM	KRBR 102.5 - FM	

School Closing Policy for *Outreach Project* students:

In case of *inclement weather only*, if the area community college is closed on a scheduled clinical day, do not report to clinical but *do* call your CI to notify him/her of the cancellation.

- **Ashland Students** will respond to WITC Ashland closing
- **Crosby/Aitkin/Brainerd area** students will respond to Central Lakes College closing
- **Hibbing Students** will respond to Hibbing Community College closing
- **Grand Rapids/ Deer River students** will respond to Itasca Community College closing
- **Bemidji Students** will respond to Bemidji State closing
- **Virginia Students** will respond to Mesabi Range Community College closing
- **Duluth Students** will respond to the Lake Superior College closing

If campus closings *do not* occur but you feel weather conditions are too hazardous for travel you may take a personal leave day. It is the student's responsibility to call the clinical instructor to communicate this just like any other day of absence.

STUDENT SERVICES

Student Services offers many services to LSC students such as: Advising, Counseling, Student Support Services (TRIO), Disability, Career, and Veterans Resource Center. These services are all housed in the S Building on campus, but information is also available online at <http://www.lsc.edu/current-students/student-services/>

CONFIDENTIALITY

Programmatic student confidentiality follows the same student confidentiality policy as the LSC campus. Policy 2.0 found online at <http://www.lsc.edu/policies/2-0-confidentiality-student-records/>

RADIATION MONITORING

To help insure that the student is working in a safe environment, the amount of radiation received will be monitored. Radiation dosimeters will be issued to each student and worn for a twenty-two month period. A fee is added to the student's registration at the beginning of each school year to cover this expense.

It is the responsibility of the student to wear the assigned dosimeter at all times while in the clinical setting. Proper handling is essential. A \$25.00 replacement fee will be issued to the student if the radiation monitor is lost. Dosimeters are not to be stored near a computer, in direct sunlight or hot, humid conditions. The dosimeter is to be worn on the front side of the body between the neck and waist line. When wearing a lead apron, it is to be worn on the outside of the apron. Dosimeters must face forward at all times for an accurate reading. Any variance involving the dosimeter must be documented in writing and sent to the program director. Exposure reports are available to students at all times on www.instadose.com. Students should review this on a monthly basis. A termination report/Form 5 report is available at all times for students on www.instadose.com. Records will be kept for the lifetime or 30 years after graduation/termination, whichever is less. To obtain further copies of these records, the student must make a written request to the program director.

- **DOSIMETERS ARE TO BE LOGGED BY THE FIRST WEDNESDAY OF EVERY MONTH.** Failure to log dosimeters at the appropriate time will result in an infraction. Late log-ins may result in inaccurate readings.

Threshold Dose

Yearly Dose	5 rem / 5000mrem (0.05 Sv)
Monthly Dose	0.2 rem / 200mrem (0.002 Sv)
Yearly Lens Dose	15 rem / 0.15mrem (0.15 Sv)
Yearly Shallow Dose	50 rem / 50000mrem (0.5 Sv)

GRADING

Grades in all RadT and science courses must be a C grade or better. Therefore, a "D" or "F" is considered unsatisfactory performance and will result in program probation for the remainder of the academic year or dismissal from the program. The student may be required to "stop out" (not continue as normal) until the course can be repeated successfully. A "stop out" could extend up to one academic year. Return from a "stop out" will require approval from program faculty (see *Readmission Policy*). All unsatisfactory course work must be repeated.

GRADING SYSTEM

For all RadT courses:	A	93-100	Excellent performance
	B	86-92	Good performance
	C	77-85	Average performance
	D	70-76	Unacceptable performance
	F	0-69	Failing performance

ACADEMIC ALERT

Students who are in jeopardy of receiving an unacceptable or failing performance grade will receive a mid-term academic alert from the instructors. It is the student's responsibility to contact the instructor for advice on building the course grade.

PROBATION

One probation is allowed during the 2-year program.

Students placed on probation will be required to meet with the program director and/or clinical coordinator to review and discuss area(s) of deficiency. The student will work with the clinical coordinator to schedule a repeat of clinical courses and set goals for future success. Students not meeting terms of probation or students not meeting academic/clinical standards after probation will be dismissed from the program.

Any of the following will constitute probation:

1. A grade less than 2.0 in any RadT course;
2. Unsatisfactory/Unsafe clinical performance;
3. Unprofessional behavior;
4. Two or more infractions in one term will result in probation or dismissal from the program

DISMISSAL

Dismissal will result from the following:

- A student not fulfilling requirements for a probation period.
- Two or more unsatisfactory grades, in any core RadT course.
- Unsatisfactory academic/clinical performance in the first semester of the program.
- Unsafe/unprofessional clinical performance.
- Excessive absenteeism.
- No Call-No Show (See below)
- Critical Infraction (page 20)

Cheating will result in the automatic termination from the program and the college.

NO CREDIT GRADE

A "no call-no show" is when the student fails to report an absence from clinical experience. The student will receive two infractions for each no call-no show. Two such incidents will result in failing grade for the term and program dismissal.

WITHDRAWAL FROM THE PROGRAM

Students withdrawing from the Radiologic Technology program should meet with the program director for an exit interview. Site issued ID badges, dosimeters and clips must be returned to the program. It is the student's responsibility to withdraw from all classes.

PETITIONS / APPEALS

Students seeking an exception to any program academic rule, regulation, or action may submit a letter of petition to the program director.

1. Appeals of program related decisions must be made, within one week of notification of grade, probation, action etc.
2. The appeal will be reviewed by the program director and faculty, who will render a decision

and notify the student within one week of the appeal hearing. Following the program's decision, a student may request to meet with the division dean.

<http://explore.lsc.edu/policies/Chapter2/Policy29.pdf> addresses the college-wide policy of academic probation and suspension.

3. Complaints of non-compliance with the JRCERT STANDARDS should be made directed to the Dean of Allied Health and Nursing.

READMISSION POLICY

Readmission **will not be considered** if the student has been out of the program for more than one academic year. **Students who have been dismissed from the Radiologic Technology program are ineligible to reapply however the student may petition this policy. See the LSC petition process.**

Students, who withdraw voluntarily and were in good standing academically and clinically, may re-enter the program on a space available basis by submitting a written request to the program director. Students will be required to register for 1-6 credits of remedial clinical radiography. During this time, the student will be required to repeat all previously completed competencies through actual procedure.

GRADUATION REQUIREMENTS

The Associate in Applied Science Degree in Radiologic Technology is awarded to students who:

1. Earns a minimum of 78 semester credits fulfilling all didactic requirements for the degree;
2. Earns at least a 2.0 grade in all RadT and science courses;
3. Submits an application for graduation.

Through successful completion of clinical and didactic education, the student will:

4. Complete the required Competency Based Evaluations (CBE) in accordance with ARRT standards.
5. Evaluate images for appropriate anatomy, positioning and image quality. A minimum of 20 CBE reviews will be required.
6. Participate in required activities that promote the profession and increase personal professional development and growth.
7. Complete venipuncture education requirements in accordance with ARRT standards.
8. Perform patient care skills in accordance with ARRT and LSC standards.
9. Successfully complete all final rotational objectives.
10. Return to the Clinical Coordinator: Facility Photo ID badge, Radiation Dosimeter and Clip.
11. Meets with the Clinical Coordinator for exit interview.

SAFETY AND SECURITY

Information related to safety and security on campus or the reporting of an incident may be directed to Campus Security at 218-733-6911 or online at <http://www.lsc.edu/security/>

DRUG POLICY

Because of the level of responsibility associated with this health care profession, radiographers and student radiographers must be in full control of their mental and physical capacities at all times when the patient's safety is at stake.

- The use of mood-altering drugs, including all forms of alcohol, narcotics, depressants, stimulants, hallucinogens, marijuana, or the use of prescription and over-the-counter drugs that result in behavior or appearance that adversely affects academic performance of patient's safety will be grounds for dismissal from the radiology program.
- Unprofessional behavior shall be determined to be present if the student is perceptibly impaired; has impaired alertness, coordination, reactions or responses; if the student's condition threatens the safety of himself, herself or others; or if the student's condition or behavior presents the appearance of unprofessional or irresponsible conduct detrimental to the public's perception of Lake Superior College Radiologic Technology program.

AIRBORNE PRECAUTIONS

Students are required to be fit tested for the N95 Respirator Mask in order to work with patients that are under Airborne Precaution status. Not all current clinical site facilities fit test students for the N95 Respirator Mask. If your clinical site facility has allowed you to be fit tested in the Respiratory Care Department and you are approved to wear the N95 Respirator Mask, then you may proceed in assisting in the care of Airborne Precaution patients. If you have not been properly fitted and tested, you are not allowed to assist in the caring of Airborne Precaution patients. Please check with your Clinical Instructor at your clinical site for further direction with this matter.

CLINICAL EDUCATION

The purpose of the clinical education in Radiologic Technology is to allow the student to apply theoretical principles of radiography, patient care and procedures to practical experience. Students will work under the supervision of registered technologists.

Students are assigned to the clinical rotation mid-fall semester. Students will receive a semester schedule with assigned clinical areas of experience each week. If the assigned area is not busy with patient exams or quality control assignments, the student may be, temporarily assigned to a different area within the clinical setting. In the event the student leaves the assigned clinical area for daily breaks or any other reason, the student must inform the technologist or clinical instructor and may be required to sign/clock out.

The importance of well-utilized clinical time cannot be stressed enough. It is expected that any low volume time will be used for discussing clinical procedures and cases with the technologist or clinical instructor, practicing simulated radiographic procedures, or completing laboratory requirements for competency-based evaluations.

It is partially the student's responsibility to maintain a clean, well-supplied environment. This includes the radiographic rooms, waiting rooms, hallways and office area.

It is recommended that students keep an accurate record of radiographic examinations observed, actively participated in, and those performed independently.

Smoking (including electronic cigarettes), and tobacco use are not allowed on clinical grounds (or on LSC campus). Eating and loud, unprofessional behavior are not allowed in the clinical areas. Students are required to follow all facility (hospital/clinic) protocols.

Departmental telephones are NOT to be used for personal calls. Personal calls are to be made during breaks on the available telephones. The student should, however, give a list of clinical site phone numbers to their families in case of an emergency. Incoming calls are to be kept to a minimum. Cell phones may not be used in the radiology department.

The student should have the following items on their person during every clinical rotation:

- Pen
- LSC Photo identification badge
- Site Photo identification badge if required
- Radiation Dosimeter
- Pocket log / technique book (see Clinical Portfolio section)
- Positioning Markers
- Program Handbook / Clinical Portfolio

American Registry of Radiologic Technologists
STANDARDS OF ETHICS

Code of Ethics – Part One

1. The Radiologic Technologist conducts himself or herself in a professional manner, responds to patient needs and supports colleagues and associates in providing quality patient care.
2. The Radiologic Technologist acts to advance the principle objective of the profession to provide services to humanity with full respect for the dignity of mankind.
3. The Radiologic Technologist delivers patient care and service unrestricted by concerns of personal attributes or the nature of the disease or illness, and without discrimination, regardless of sex, race, creed, religion, or socioeconomic status.
4. The Radiologic Technologist practices technology founded upon theoretical knowledge and concepts, utilizes equipment and accessories consistent with the purpose for which it has been designed, and employs procedures and techniques appropriately.
5. The Radiologic Technologist assesses situations, exercises care, discretion and judgment, assumes responsibility for professional decisions, and acts in the best interest of the patient.

(See the ARRT web site for the **Rules of Ethics** – part two of the Standard of Ethics)

6. The Radiologic Technologist acts as an agent through observation and communication to obtain pertinent information for the physician to aid in the diagnosis and treatment management of the patient, and recognizes that interpretation and diagnosis are outside the scope of practice for the profession.
7. The Radiologic Technologist utilizes equipment and accessories, employs techniques and procedures, performs services in accordance with an accepted standard of practice, and demonstrates expertise in limiting the radiation exposure to the patient, self and other members of the health care team.
8. The Radiologic Technologist practices ethical conduct appropriate to the profession, and protects the patient's right to quality radiologic technology care.
9. The Radiologic Technologist respects confidences entrusted in the course of professional practice, protects the patient's right to privacy, and reveals confidential information only as required by law or to protect the welfare of the individual or the community.
10. The Radiologic Technologist continually strives to improve knowledge and skills by participating in educational and professional activities, sharing knowledge with colleagues and investigating new and innovative aspects of professional practice. One means available to improve knowledge and skills is through professional continuing education.

The *Standards of Ethics* of the American Registry of Radiologic Technologists shall apply solely to persons holding certificates from ARRT who either hold current registrations by ARRT or formerly held registrations by ARRT and to persons applying for examination and certification by ARRT in order to become Registered Technologists. The *Standards of Ethics* are intended to be consistent with the Mission Statement of ARRT, and to promote the goals set forth in the Mission Statement

TECHNICAL STANDARDS

The following technical standards are typical for a career in Radiologic Technology. It is recommended that students follow these same standards. Individuals with disabilities may request accommodations or information by contacting the Lake Superior College Disabilities Coordinator.

The Radiologic Technologist must have sufficient strength, motor coordination, and manual dexterity to:

1. Transport, move, lift, and transfer patients from a wheelchair or cart to a radiographic table or to a patient bed.
2. Move, adjust, and manipulate a variety of equipment, including the ability to arrange and align the equipment with respect to the patient and the image receptor according to established procedure and standards of speed and accuracy. This requires repetitive forward bending.

The Radiologic Technologist must be capable of:

1. Handling stressful situations related to technical and procedural standards, and patient care situations;
3. Providing physical and emotional support to the patient during the radiologic procedures, being able to respond to situations requiring first aid and providing emergency care to patient in the absence of, or until the physician arrives;
3. Communicating verbally in an effective manner in order to direct patients and their families along with other health care workers, during radiologic examinations; and
4. Reading and interpreting patient charts and requisitions for radiologic examinations.

The Radiologic Technologist must have the mental and intellectual capacity to:

1. Calculate and select proper technical exposure factors according to the individual needs of the patient and requirements of the procedures standards of speed and accuracy; and
2. Review and evaluate the recorded images for the purpose of identifying proper patient positioning, accurate procedural sequencing, proper exposure, and other appropriate and pertinent technical qualities.

NOTICE: Students rotating to MRI shall not have any ferromagnetic metal fragments in the body or metal surgical implants or appliances that may be hazardous to their safety.

CLINICAL PERFORMANCE

The student is responsible for the following:

1. Provide own transportation to and from clinical sites and classrooms.
2. Prepare for clinical experience by:
 - a. Reviewing radiographic procedures and protocol routinely performed in

- the assigned area;
 - b. Reviewing clinical objectives
 - c. Reviewing emergency procedures;
 - d. Wearing radiation monitoring badges properly, and;
 - e. Preparing personal positioning markers for use.
 - f. Carry and use a pocket log/technique book
3. Arrive promptly for clinical experience.
 4. Report to clinical at the assigned time when healthy and able; notifies the clinical instructor and clinical site when ill, late, or unable to report for clinical experience between 8:00 to 8:15 a.m. Process: 1) Speak to CI or 2) Phone message.
 5. Arrange with the clinical instructor to complete clinical experience time each term.
 6. Assume legal responsibility for providing safe patient care.
 7. Provide effective patient care.
 8. Communicate effectively with peers, staff, and instructors.
 9. Communicate with patients and their families in a caring and helpful manner.
 10. Participate in image critique.
 11. Adhere to the dress code.
 12. Adhere to all policies, procedures, regulations, and rules of the clinical site.
- Students not following the above responsibilities may be asked to leave the clinical area. Infractions will result in a clinical grade reduction.

RADIATION SAFETY

Students will ensure every imaging study performed is thoughtful, appropriate, and individualized with regard to radiation safety.

Goals include:

- Positioning with accuracy
- Utilizing collimation and proper shielding
- Using alternate techniques that will reduce radiation exposure to the patient

60mR*/ Quarter Level I radiation exposure - notification to the student that this level has been reached.

100mR*/Quarter Level II radiation exposure - notification and questionnaire (to discover how this amount of radiation exposure occurred so radiation safety education and safer radiation practices can be done whenever possible) to the student.

*These levels are lower than the NRC recommended dosages.

Holding Policy: Holding patients or image receptors for exposures is not allowed. Immobilization devices should be used in place of physically holding a patient or image receptors.

DRESS CODE

Outreach project students refer to **Clinical Site Information** section for any site-specific variations; All students will adhere to the following clinical dress code:

1. Exposed chest, abdomen or lingerie is not acceptable.
2. Medium to long hair (touched shoulders) must be pinned up or neatly tied back for safety.
3. Perfume, cologne, and aftershave are discouraged. Patients are extremely sensitive to odors.
4. Official college ID badge must be worn at all times. Proper placement is one inch below the left clavicle.
5. Jewelry shall be discrete. No dangling earrings or necklaces.
Building the trust and confidence of your patient is essential. While we will not attempt to control all aspects of your personal appearance, the following is highly recommended:
6. Facial hair should be neatly groomed.
7. Hair and make-up should be moderate and appropriate for daytime wear within a health care setting.
8. Body piercing /tattoos should not be visible outside of your uniform. Piercing and tattoos may prevent rotations in MRI. Health Facility requirements must be followed. Some facilities require total coverage of tattoos.
9. Hair must be of a natural occurring color. Artificial colors such as pink, purple, green, orange, blue, etc... are not appropriate.

Any student not adhering to the above stated dress code will be asked to leave clinical and will receive the appropriate infraction.

Please Note: Site Specific Uniform/Shoe colors are found on the Clinical Site pages. Additional dress/appearance codes may be in place at the clinical facility. Those policies **must** be followed even if other than listed above.

CLINICAL CONFLICTS

If a problem, concern, or conflict arises with hospital staff, fellow students, or program clinical instructor; students should meet with their assigned clinical instructor for advice and counseling. The clinical instructor will act as the student's advocate and explore options to resolve the issue. All matters that require student counseling will be brought to the attention of the clinical coordinator and program coordinator who will oversee and, if necessary, assist with the process. If satisfaction is not gained by speaking with the clinical instructor, the student is advised to speak directly to the Clinical Coordinator, Program Director, Dean of Allied Health and Nursing, in respective order.

Whenever the issue of concern affects the clinical site and the health or safety of the student or patients, the student is advised to document the matter and speak to the clinical instructor immediately for advice on the proper procedure and paperwork.

SUPERVISION OF STUDENTS

Students must be supervised by a qualified, ARRT certified Radiologic Technologist. Students may not observe or perform exams under the guidance of limited scope x-ray operators (student techs, interns, etc.) Once the student achieves the required competency in a given area or on a given examination, indirect supervision may be allowed.

Direct Supervision is defined as:

1. The technologist reviews the request in relationship to the student's achievements and abilities;
2. The technologist evaluates the patient's condition in relation to the student's achievements and abilities;
3. The technologist reviews positioning and technical factors prior to exposure; and,
4. The technologist reviews and approves the image prior to exam completion.

Students shall not take the responsibility or the place of staff technologists. After demonstrating competency, the student may be permitted to perform procedures with indirect supervision.

Repeat radiographs will be done only in the presence of a qualified technologist.

Indirect Supervision is defined as:

1. The supervision provided by a qualified radiographer immediately available to assist the student at any level of achievement.
2. The technologist reviews and approves the image prior to exam completion

Students may complete portable and surgical procedures under indirect supervision (after proving competent) but a technologist must be in or just outside the room to immediately assist the student if necessary.

CLINICAL SCHEDULING

Clinical schedules are completed by the Clinical Coordinator (CC) and Clinical Instructors (CI). Schedules involve a great deal of planning to assure that each student has a quality clinical experience. Shifts are based on the area and patient flow at each health facility. The CC/CI will distribute clinical schedules approximately five weeks prior to the start of a new term. Student will not be scheduled more than 8.5 hours in any didactic or clinical day (.5 hours of time is for lunch). Rotations in specialized modalities are available upon request beginning semester 5.

Note: Students may be scheduled at other local facilities outside of their main clinical site to complete learning opportunities, i.e., trauma, fluoroscopy, cath lab, and surgery.

Any questions or concerns about the clinical scheduling should be addressed to the clinical coordinator. Students may not change the time or rotation unless prior approval is received from the clinical coordinator.

1 st YEAR FALL	2 ND YEAR FALL AND SPRING (BOTH)	SUMMER I AND II
29 hrs/wk x 8wks	30 hrs/wk x 16 wks	TBA

*This schedule is subject to change without prior notice.

EVENING, NIGHT and WEEKEND SHIFTS

The evening clinical (trauma) will be scheduled as part of the clinical rotation. The student may be assigned until midnight in most cases. The midnight shift (11p.m –7a.m.) will not be assigned. Students may be assigned to a weekend shift beginning spring semester, first year. Weekend shifts scheduled before final examinations and holidays are to be completed. Students on these shifts are supervised at all times by a registered Radiologic Technologist. Weekend and evening rotations are typically limited to 3 each/term.

ALLOWED BREAKS IN CLINICAL RADIOGRAPHY

5 hour shift	1 break – 15 minute maximum
6 hour shift	2 breaks – One @ 15 minute (max) and One meal break @ 30 minutes (max)*
8 hour shift	2 to 3 breaks – One in first half of shift, 15 minutes (max), One meal break @ 30 minutes (max)* One in last half of shift, 15 minutes (max) as the schedule allows.
PLEASE NOTE:	<ul style="list-style-type: none">• The meal break does not count in the total daily hours<ul style="list-style-type: none">◦ i.e. An 8-4:30 shift includes one, thirty minute meal break and is considered an 8 hour shift.• Breaks cannot be combined into one break of longer time.• Any overtime for missed breaks is issued at the discretion of the clinical instructor. Students cannot take "like-time" off without the advanced approval of the clinical instructor.• If the student leaves the campus/building during a break, he/she may be required to log-in and out on paper or verbally with the supervising technologist. The policy on this will be site specific.

UNION UNREST

Because of the urgent and unpredictable nature of a medical imaging department there is no assurance that the student(s) will receive the proper supervision when clinical staff are on strike. Therefore, LSC Radiologic Technology students will not be allowed to attend a clinical facility if staff technologists or college faculty are out on strike due to union unrest.
Students will not be rescheduled to alternate facilities.

STUDENTS RESPONSIBILITY

When a strike is in progress:

1. Check the class cancellation list on the college website, www.lsc.edu by 7:40 a.m. each morning for notification of clinical cancellation due to the strike.
2. Communicate with the clinical coordinator if a strike lasts longer than two weeks.

After a strike has ended:

1. Return to your assigned clinical rotation as previously scheduled.
2. Determine what clinical objectives have been missed and discuss re-scheduling clinical time with your CI.

CLINICAL ASSIGNMENT MAKE-UP DUE TO FACULTY STRIKE

- Students will not be required to make-up time (up to 4 days) if all clinical objectives and competencies are met by the end of the semester. If more than four days of clinical are lost due to the strike, or if clinical competencies/objectives are not met in the remaining term, students will be required to complete make-up time during the final week of the term. Students will work with their clinical instructor for rescheduling.

NO CREDIT GRADE

A "no call-no show" or NC is when the student fails to report an absence from clinical experience. The student will receive two infractions for each no call-no show. Two such incidents will result in failing grade for the term and program dismissal.

PERSONAL ELECTRONIC DEVICES

Modern technology can pose additional HIPAA concerns. Because of this, students may not operate or have on their person, any personal electronic device in patient care areas. Mobile phones, iPads, laptops etc. must be used in the public areas of the hospital where such devices are approved.

PERSONAL LEAVE DAYS /ABSENCE FROM CLINICAL EXPERIENCE

Students will be allowed two (2) days of personal leave the first semester of the program. Three (3) days of personal leave per term during the regular academic year (1st and 2nd year Fall/ 1st year Spring terms) Because of the short summer session, *no additional personal leave will be given for summer.* Personal leave allowances are to be used for absences including illness, injury, child or dependent illness, dental or medical appointments, exposure to contagious disease that may endanger the health of coworkers or patients, interviews, funeral leave, car problems.

Personal leave days (PLD) are **not** intended for extended vacation time.

If a student has an excellent attendance record and has not used all of the personal leave available to them during Spring semester, he/she may carry over a maximum of 2 personal leave days into summer session, without a negative effect on the attendance record. **Over 5 absences** in one term are considered excessive and will result in a clinical grade reduction. **Seven (7) absences**, in any one term, will result in dismissal from the program. Request for a leave of absence (LOA) is recommended for incidents of long-term absence. LOA may not be possible in all situations.

Absence from Clinical – Steps to Complete:

1. The student must notify the clinical instructor, at the clinical site where s/he is scheduled for clinical experience, when personal leave days are taken. Calls should be made between 8:00 to 8:15 a.m. Advance notice is suggested if possible.
2. The student must record the PLD on TRAJECSYS prior to the next scheduled shift.
 - a. Log on to www.trajecsys.com
 - b. Select "Time Exception"
 - c. Select the appropriate clinical "Site" on the dropdown box.
 - d. Assure the appropriate "Date" of the PLD is recorded in the dropdown box.
 - e. Click "absent"
 - f. Input a short, concise statement in the "comment" box. If taking a PLD you do not need to indicate the reason for the absence, simply indicate you are taking a PLD.
 - g. Click the "Submit" button

Leave for extensive illness or injury (beyond 5 days) will require the signature of a physician before the student will be allowed back in clinical. Any unexcused absence will result in a "NC" (see No Credit grade). Two such absences per term will result in a final grade of "F" for that Clinical Radiography course and will result in dismissal from the program.

Missed clinical time, beyond the allowed personal leave days, must be completed during the final (regular) week of the term. Time will be scheduled by the CI. PLD must be taken in a full day increment; the use of ½ days is not allowed. If a student begins a shift and then decides to leave mid-shift (sick or otherwise), a full PLD is to be used and no "comp" time is given for the

amount of time completed that day. Necessary absences of **less than 2 hours** will not be considered a PLD and must be approved by the CI and make-up time will be required. Students may be scheduled a maximum of 40 hours per week (8 hrs. /day), to include classroom and clinical. Failure to complete missed time as scheduled during the final week will result in dismissal from the program. **The student is responsible for contacting the clinical instructor to arrange clinical make-up. Time not approved by the CI will not be allowed.**

PROFESSIONAL BEHAVIOR

To prepare students for the high standards required of health care professionals, certain standards must be met in the clinical setting. INFRACTIONS of acceptable clinical behavior will result in an appropriate action taken for inappropriate behavior. Infractions will affect the student's clinical grade.

- The first occurrence will result in a verbal warning with each following resulting in a written notification of infraction. Two infractions will lower the student's clinical grade by (at minimum) 1 full grade. Two or more infractions in one term will result in probation or dismissal from the program.

INFRACTIONS THAT WILL DROP THE CLINICAL GRADE

1. Dress code violations;
2. Improper documentation on time log;
3. Continued tardiness beyond 5 minutes;
4. Insubordination;
5. Not having or using own: Name tag, radiation monitoring device, and positioning markers;
6. Unprofessional behavior;
7. Not calling CI at appropriate time when late or absent;
8. Leaving clinical site without permission from the CI;
9. Equipment abuse;
10. Inefficient use of clinical time;
11. Late reporting of radiation dosimeter;
12. Negative Interim report and,
13. Excessive absenteeism. See Personal Leave day policy;
14. Use of electronic devices during active clinical hours.

Critical Infractions are serious, inappropriate behavior/actions that are determined by the instructor/clinical facility as abusive, dangerous, negligent or deceitful. Critical infractions will result in program dismissal.

1. Falsification of documents including time record.
2. Theft
3. Negligence
4. Violent or threatening behavior
5. Under the influence of mood-altering drugs during clinical assignment
6. HIPAA violations

Cheating will result in automatic termination from the program and the college.

CLINICAL GRADE

Clinical Theory courses consist of mandatory structured image critique sessions, written assignments and a final exam.

Clinical theory must be passed with a 77% or higher.

GRADE BREAKDOWN	STRUCTURED IMAGE CRITIQUE	ONLINE ACTIVITIES	SEMESTER INFORMATION QUIZ	WRITTEN EXAM
		5%	5%	5%

Clinical Radiography courses are composed of those elements directly related to the quality of work done during the clinical internships and the retention of clinical theory to perform at an acceptable level. Clinical Radiography must be passed with a 77% or higher.

GRADE BREAKDOWN	CBE	ROTATIONAL OBJECTIVE/ASSESS MENT	PERFORMANCE EVALUATION (CI)
		If semester requirement is not met, the clinical grade will be reduced 0.1 GPA for each missing CBE and will result in probation or dismissal.	70%

IMPORTANT CLINICAL GRADE INFORMATION

Both Clinical Theory and Clinical Radiography must be mastered each semester.

- An overall grade of 77% or higher must be maintained in both courses.**

See probation policy.

CLINICAL THEORY EXAM

A written component of clinical radiography is required each term (as listed below). Students must earn a grade of 77% or higher to remain in good standing. Failure to do so will result in probation or dismissal from the Radiologic Technology Program. See probation policy.

CLINICAL EXAM CONTENT

- FALL I **Abdomen and Chest**
Information from textbook and film critique of routine views. Technical Factors and situational questions will be asked.
- SPRING I **Upper extremities/shoulder girdle.** Information from textbook and film critique of routine views. Technical Factors and situational questions will be asked.
- SUMMER I **Lower extremities/pelvic girdle**
Information from textbook and film critique of routine views. Technical Factors and situational questions will be asked.
- FALL II **Bony Thorax & Complete Spine/ Sacrum/Coccyx**
Information from textbook and film critique of routine views. Technical Factors and situational questions will be asked.
- SPRING II **Contrast Studies**
Information from textbook and film critique of routine views routine views of Upper and Lower GI, Urinary, and Biliary systems. Technical Factors and situational questions will be asked.
- SUMMER II **Image Evaluation and Critique;** includes images from all body systems. Technical Factors and situational questions will be asked.

CLINICAL GRADE COMPONENTS

Students are responsible to assure that all clinical records are complete and submitted (either via TRAJESYS or through the e-campus Clinical Radiography course) according to set deadlines (refer to Clinical Radiography Outlines and Syllabi for semester specifics).

MANDATORY CLINICAL PREP MEETINGS

Students are required to attend all clinical prep meetings. These are scheduled prior to the start of clinical radiography or during the first week of the semester. The unique requirements and objectives of the term are discussed at these meetings.

CLINICAL ROTATIONAL OBJECTIVES/Assessments – via TRAJESYS

Clinical rotational objective forms are required each clinical term and completed on the TRAJESYS system by staff technologists and Clinical Instructors. Students are responsible to initiate completion of these objectives. Rotational objectives will guide the experience for the term and help assure that the student has achieved the skills and goals of the clinical experience. The Rotational Objective forms include an assessment of the student's performance by the supervising technologist.

Rotational Objectives are unique each term and progressive. Students **must** review these prior to the start of each term. Refer to the course syllabi for details.

Semester 1-5: Clinical skills are learned on a progressive scale, it is expected that some objectives may not be completed at the end of a term. At minimum, 77% of each Rotational Objective must be met

successfully and objectives not met will drive goals for the subsequent semester.

- A minimum of two rotational objectives are required at mid-term each semester.
- Students should review assessment reports on a weekly basis

Semester 4-6: Special Imaging Rotations: 1 week rotations in specialized modalities of Nuclear Medicine, Sonography, and Radiation Therapy are available upon request beginning semester 5. Request should be made, in writing, to the Clinical Coordinator by October 1st. MRI and Angiography/CathLab are mandatory rotations. All special imaging rotations have unique rotational objective forms and required assessments.

Note: Students may be scheduled at other local facilities outside of their main clinical site to complete learning opportunities, i.e., trauma, fluoroscopy, cath lab, and surgery.

MRI Safety: Students are required to complete a pre-rotation screening to assure safe practice near the magnetic field of the MRI machine. Students will complete a MRI Screening form (found in the Clinical Radiography Forms section of this handbook) and submit it to the clinical instructor 3 weeks prior to the scheduled rotation.

Semester 6: All Final Rotation Objectives (semester 6) 100% of rotational objectives must be competed "successfully" for program completion.

- A minimum of one Rotational Objective must be completed in each of the following areas: General, General 2, Fluoroscopy, CT, Surgical Radiography and OR-Portable Radiography.
- Special Imaging objectives are to be completed via TRAJESYS. Students must initiate the completion of these forms and a form is to be completed for each special imaging area observed.
- Students should review assessment reports on a weekly basis.
- Students must meet with the Clinical Coordinator for an exit interview at the completion of Clinical Radiography VI

PERFORMANCE EVALUATIONS (CI) – via TRAJESYS

Students will be required to acquire a Performance Evaluations (PE) from the CI at the end of each term. Site rotations of 4 weeks (or more) will necessitate an additional PE (one from each site).

It is the student's responsibility to request a performance evaluation prior to the end of the semester. Missing evaluations will be averaged into the clinical grade as an "F" and may result in a probation or program dismissal.

- Students should discuss this evaluation with the CI and set goals for the next semester.

TIME LOG – Via TRAJESYS

Students are required to log in and out of specific clinical sites during each rotational assignment. If a student forgets to log in or out, a **Time Exception** must be completed. See specifics for documenting PLD under the Personal Leave Day portion of this handbook.

Login Time Requirements:

- The student will log in, on site, for clinical rotations no more than **10 minutes** prior to the start time.
- Students may not log in or out on cell phones. Use department computer for all time records.
- At log in the student must select the appropriate clinical site.
- If a computer is not accessible, complete a "time exception" indicating the actual start time.
- Late login is not acceptable work ethic. A few late logins will be tolerated however habitual tardiness will result in an infraction and possible grade reduction. It will also be documented on the clinical record.
- If a login (or logout) is forgotten, the student should complete a time exception as soon as it is discovered. This can be done from off-site. **More than 3 "forgot" logs will result in infractions and possible grade reduction.**
- Personal Leave Days – Students should complete a time exception when taking a PLD. See the PLD requirements for detailed instruction.

PROFESSIONAL ACTIVITIES LOG

See description under Program Policies.

Submit a hard copy with documented progress at the end of each semester.

POCKET LOG/TECHNIQUE BOOK

A clinical pocket log is **required** for the purpose of documenting procedures, routines, and techniques. This book is available in the bookstore and is to be with the student at all times in the clinical setting. Documentation within **MUST** be neat, legible, and up-to-date.

Submit hard copy at the end of each semester. The log may be reviewed periodically by the clinical instructor as well.

COMPETENCY BASED EVALUATIONS

AND PROCEDURE LOGS

RADIOGRAPHIC PROCEDURES LOG – via TRAJECSYS

Students must log all procedures that they have participated in during all Clinical Radiography Practicums. Students will log procedures on the Trajecsyst system according to the following categories:

OBSERVED – The student has observed the procedure and may have played a minimal role in communications, positioning, equipment operation. *All 1st semester procedures are to be logged as “observed”.*

ACTIVE PARTICIPATION - accomplished when a student performs the majority of a procedure with minimum to moderate assistance from a technologist. It included room prep, patient communication, technique selection, proper positioning and exam completion procedures.

In order to log a procedure under “Active Participation”, students must first study the material in the Radiographic Procedures course series **and**, complete a lab test on the procedure.

Exceptions are in place for exams covered in Radiographic Procedures III:

Arthrogram, Myelogram, Surgical and C-Arm Urinary and Biliary Studies	Active participations and CBEs may be completed after assignment due dates in Procedures III.
Pediatric and Geriatric studies	Can be completed throughout the program as soon as the exam area is covered in class and lab exam.
Skull and Facial bone studies	Can be completed after material is covered in class and lab practice.

See the following grid to determine the number of Active Participations to be complete prior to CBE.

COMPLETED – The student has tested on the procedure (previously or currently completing a CBE)

CBEs – via TRAJECSYS

Competency based evaluations are mandated by the American Registry of Radiologic Technologists and LSC for successful completion of the Radiologic Technology Program. Students have a minimum number of objectives to complete each term. Specifics are found on the course syllabi.

COMPETENCY BASED EVALUATIONS

Pink Areas require **3** AP boxes prior to CBE. Yellow Areas require **1** AP box prior to CBE. All unshaded areas require **2** AP boxes prior to CBE.

REQUIREMENTS: 37 MANDATORY AND 15 ELECTIVE

Pink Areas require **3** AP boxes prior to CBE. Yellow Areas require **1** AP box prior to CBE. All unshaded areas require **2** AP boxes prior to CBE.

Radiographic Procedure	Mandator y E lective	2	3	4	5	6
Pediatric Studies						
≤ age 6 Chest	M					
≤ age 6 Abdomen	E					
≤ age 6 Extremity, Upper	E					
≤ age 6 Portable Study	E					
EXTREMITIES						
Finger or Thumb	M					
Hand	M					
Wrist	M					
Forearm	M					
Elbow	M					
Humerus	M					
Shoulder	M					
Scapula	E					
Clavicle	M					
Acromioclavicular Joints						
Toes	E					
Os Calcis	E					
Foot	M					
Ankle	M					
Tibia-Fibula	M					
Knee	M					
Patella	E					
Femur	M					
Skull @ least one CBE required from this section						
Facial Bones	E					
Nasal Bones	E					
Paranasal Sinuses	E					
Skull (2 or more views)	E					
Orbit	E					
Zygomatic Arches	E					
Mandible panorex ok	E					
THORAX						
Chest, routine	M					
Chest, WC or stretcher	M					
Sternum	E					
Upper Arwy Soft tissue Neck	E					
ABDOMEN						
Abdomen, supine KUB	M					
Abdomen, Upright	M					
Abdomen, decubitus	E					
Intravenous Urography	E					

GERIATRIC 65 OR > W/PHYSICAL OR COGNITIVE IMPAIR DUE TO AGING						
Chest	M					
Upper Extremity	M					
Lower Extremity	M					

Radiographic Procedure	Mandator y E lective	2	3	4	5	6
TRAUMA STUDIES *						
Tx Extremity – upper non shlder	M					
Tx Extremity - lower	M					
Tx Shoulder/Humerus– with Y, transthoracic, or Axillary	M					
Tx Cervical Spine w/ xtable lat	E					
GI STUDIES @ least two required from this section, one of which is BE or UGI						
Esophagus Study - 2view min	E					
Upper G.I. Series – 3view min	E					
Small bowel Series – 2 timed	E					
Barium Enema -5 view minim. with Rectal Tipping	E					
Spine and Pelvis						
Cervical Spine	M					
Thoracic Spine	M					
Lumbosacral Spine	M					
Cross-table Lateral Spine	M					
Scoliosis Series	E					
Sacrum/Coccyx	E					
Sacroiliac Joints	E					
Pelvis	M					
Hip – AP & Lateral	M					
Hip – AP & X-table lateral	M					
Mobile and Surgical						
Portable Chest	M					
Portable Abdomen	M					
Portable Orthopedics	M					
C-Arm procedure - Ortho	M					
C- Arm procedure – non ortho	M					
Operative Cholangiography *	E					
Retrograde Urography *	E					
Fluoroscopy						
ERCP	E					
Arthrogram w/ tray & 3 views	M					
Myelography w/tray & 3 views	E					
Cystography or Cystourethrography	E					
Total CBEs	Fall 1st yr. Observation Only	Spring 1 st yr. 11 CBE's To include CXR	Summer 1 st yr. (10/21)			
37 Mandatory 15 Electives	Fall 2 nd yr. (10/31)	Spring 2 nd yr. (11/42)	Summer 2 nd yr. (10/52)			

* **TRAUMA** is considered a serious injury or shock to the body. Modifications may include variation in positioning, minimal movement of the body part, etc.

Procedures not included on the previous list may be added to your portfolio, however they will not count toward semester requirements nor will they take the place of any of the following ARRT requirements.

- Students must document type/extent of trauma on CBE Evaluation Record
- Routine study must be completed before CBEs on pediatrics/portable/trauma studies can be completed.
- Achieve active participation "boxes" and CBEs cannot be achieved until info has been tested on in class/lab.
- Arthrograms, Myelograms, Barium Enemas, Upper GI, and Esophogram studies, CBEs must include a minimum of two post-films (unless stated differently above) even if it requires simulation. CI will determine the views to be completed.

ARRT GENERAL PATIENT CARE ACTIVITIES CLINICAL COMPETENCY REQUIREMENTS

Requirement: Graduates must demonstrate competence in all six patient care activities listed below. Initial competency is completed during the Patient Care course, re-testing of a number of these competencies will occur the final semester. The activities should be performed on patients; however, simulation is acceptable for CPR and Venipuncture. Vital signs can be completed on peer.

General Patient Care
CPR
Vital signs (blood pressure, pulse, respiration, temperature)
Transfer of patient
Rectal Tipping (Lab experience and actual practice, verified by CBE)
Care of patient medical equipment (e.g., O2 tank, IV tubing)
Sterile and aseptic technique
Venipuncture

COMPETENCY BASED EVALUATION PROCESS

There are core clinical competencies that all individuals must demonstrate to establish eligibility for ARRT certification. Students must demonstrate competency in a **minimum of 52 procedures** (listed on the previous page) which include all **37** of the mandatory Radiologic Procedures. At least **47 procedures** must be demonstrated on patients (not phantoms or simulated). Students must demonstrate competency in at least **15** of the elective Radiologic Procedures listed.

WHO MAY COMPLETE COMPETENCY BASED EVALUATIONS

CBEs can be completed by a registered technologist with *one full year of experience* or more.

GUIDELINES FOR COMPLETING A CBE

1. Active participation check offs may begin only after the anatomy and positioning material has been covered in class and procedures lab.

2. You must complete the appropriate number of active participation boxes on the CBE form prior to test-out. Active participation includes performing the procedure with minimal assistance from the technologist.
3. Competency Based Evaluation of **routine** exams must be completed **prior** to final CBE on pediatric, portable and trauma extremity work. Speak to your CI for clarification.
4. You must inform the supervising technologist that you would like to “test-out” on the specific procedure prior to the beginning of the exam. The technologist will evaluate the patient to see if testing is appropriate.
5. Demonstration of competence includes:
 - requisition evaluation
 - patient assessment
 - room preparation
 - positioning skills
 - image processing
 - patient management
 - equipment operation
 - technique selection
 - radiation safety
 - image evaluation
 - Rectal tipping (Lower GI)
6. Students must complete these skills under direct **observation** of a supervising technologist. The above mentioned competencies must be completed without technologist input with the exception of the image evaluation as it should be an interactive process. If the technologist feels that the student cannot complete the exam safely or efficiently, he/she will assist as necessary and the CBE attempt would be unsuccessful.
7. Direct technologists to www.trajecsys.com to complete CBE within the appropriate time-frame.

PREPARING FOR COMPETENCY BASED PERFORMANCE

Many of these tasks should be performed before the patient enters the room. You must inform the supervising technologist of your plans for “test-out” prior to starting the procedure.

REQUISITION:

1. Identify procedure and review examination standards and department protocols.
2. Identify pertinent patient information and history.

ROOM PREPARATION:

1. Prepare the exam room prior to patient entry.
2. Set control panel for the procedure.
3. Exhibit a clean, orderly room.
4. Prepare exam table using clean linen.

PATIENT-STUDENT RELATIONSHIP:

1. Verify patient's identity.
2. Assess patient's condition.
3. Introduce self and any other person involved with the exam.

4. Assist patient to room.
5. Obtain and record complete history including onset of last menses (if appropriate).
6. Inform patient of procedure giving proper instructions for position and breathing.
7. Assist patient from chair/cart to table utilizing proper body mechanics.
8. Demonstrate respect for patient (modesty, comfort, and care of personal articles).
9. Communicate with patient and/or family in professional and sensitive matter.
10. Assure patient safety.
11. Follow recognized infection control procedures (standard precautions).
12. Perform exam related patient care tasks (rectal tipping, vitals, etc.)

POSITIONING:

1. Give patient clear and proper instruction prior to exposure.
2. Properly position patient for each required view.
3. Properly align patient/part to tube and image receptor.
4. Give patients clear and proper post exam instruction.

EQUIPMENT:

1. Turn on radiographic equipment (generator, table).
2. Warm tube (if appropriate) using proper procedure.
3. Properly measure patient for technique selection when necessary.
4. Use the appropriate size and type of image receptor
5. Make necessary technical adjustments according to patient condition or pathology
6. Collimate appropriately.
8. Utilize compensating filters and grids when appropriate.
9. Set correct source to image distance.
9. Proper identification and marking on image receptor prior to exposure..
10. R and L positioning marker must be included on the collimated image (in part or whole) that is sent for diagnosis. If the marker is not included on the exposed image, the student **will not** receive a CBE on the exam and will be required to re-test at a later time.
11. Properly expose the image receptor
12. **Repeat exposures must be completed under direct supervision. Exams that include repeat(s) may NOT be used for CBEs.**

RADIATION PROTECTION - Following ALARA standards

1. Question female patients, in childbearing years, about pregnancy, onset of menses.
2. Shield patient properly.
3. Collimate to film/part size.
4. Utilize aprons, gloves, and barriers properly.
5. Wear dosimeters correctly and consistently.
6. Select exposure factors with radiation safety in mind.
7. Minimize repeats by continued review of theory and anticipating problems before exposure.

SIMULATION POLICY

The ARRT requirements specify that certain clinical procedures may be simulated. Simulations must meet the following criteria:

- The student is required to competently demonstrate skills as similar as circumstances permit to the cognitive, psychomotor, and affective skills required in the clinical setting;
- The program director is confident that the skills required to competently perform the simulated task will generalize or transfer to the clinical setting.

A maximum of **five** CBEs may be simulated. Upper and Lower GI active participation (AP) boxes and CBEs may be simulated, *beginning the summer of the first year, under the following conditions:*

- With a supervising technologist, complete steps 4-6 of Guidelines for completing a CBE (page 17) on an actual patient.
- If the radiologist asks for less than the required films (Es/2 - GI/3 – BE/5), the student will be required to simulate the remaining views sometime soon after the exam was completed under the supervision of the Clinical Instructor.
 - Position for the required number of “after-images” via simulation on a mannequin, fellow student or technologist.
 - Set up control panel for exposure and verbalize the technique used.
 - Evaluate an image from teaching files to assure knowledge of image critique.

Arthrography and Myelography procedures may follow the same protocol by mid-term in the 2nd Fall semester. Both procedures require “after-images” (views to be determined by the CI). All other simulation must wait until the summer session, second year.

CBE GRADING

Once a student has successfully completed a CBE of an examination or procedure, the student is allowed to perform that examination or procedure with indirect supervision. Spot check evaluations will be performed periodically by clinical instructors and a final spot check will be completed the final semester.

The student will receive an “F” for the absence of each required CBE at the end of a term. Failure to meet the required number of CBEs in any given term will result in program probation. *The student has one term to become current with the required number of CBEs.* This review should be of the exam performed for competency. Students should keep a journal of patient condition, signs and symptoms to discuss with the clinical instructor at the review. HIPAA standards must be followed. If a student fails to meet the required number of CBEs two terms in a row, he/she will be dismissed from the program.

CBE REVIEW

Each term, students will be required to review, with a CI, radiographs from at least 5 CBEs completed that term.

- These must be images completed by the student for the CBE.
- Students must keep exam specifics on the Competency Based Evaluation Record for future reference.

This is a structured evaluation of the anatomy and technical quality of the radiograph. If the CI is not satisfied with the images, or the student's understanding of the exam/assessment of the images, the CI may revoke the competency and the student must re-do it at another time. Documentation of the CBE Review will be done, by the CI, on the Trajecs system.

CBE SPOT CHECKS

Graduating students are required to prove continued competency in Vital Signs (blood pressure, pulse, respiration, temperature). Spot Checks on Vital Signs may be completed on a patient or peer.

- Graduating students are required to prove continued competency in a minimum of ten (10) past CBEs.

- The Clinical Instructor must perform the spot check and can watch the student on an actual patient or may ask the student to simulate the procedure on a classmate or technologist.
- The **CI** will determine the procedures to be completed.
- Using the same criteria as required for an original CBE, the CI will assess the student's competency in the procedure. If the CI feels proficiency is lost, the student will be required to re-do a CBE.
- Inability to demonstrate competency in vital signs may require remedial training (which may require additional clinical credits and delayed program completion)

FOR REVIEW PRIOR TO CLINICAL I ROTATION

CLINICAL RADIOGRAPHY I
by the CI

TO BE completed online

PROFESSIONAL EVALUATION

	Unacceptable performance	Minor improvement needed	Requires experience for greater	Meets expectations
RESPECT FOR PATIENT PRIVACY:				
Respecting patient modesty--keeping patients covered as necessary.				
Not discussing patient with person not involved in care.				
Following HIPAA guidelines.				
PROPER PATIENT COMMUNICATION:				
Addressing patient by proper name.				
Introducing her/himself to the patient.				
Explaining the exam in understandable terms.				
Keeping patient informed of exam progress. Keeping patient informed of exam progress.				
Student shows respect for Radiologist and Staff Physician				
Student shows respect for Administrative Staff				
COOPERATION WITH CLINICAL STAFF SITE STAFF:				
Accepting constructive/ re-directive criticism.				
Observing college and clinical site rules and regulations.				
A CONSTANT EFFORT TO BECOME INVOLVED:				
Offering assistance to staff (especially when patient load is low).				
Seeking responsible assignments.				
Keeping busy: check clinical tasks and/or study				
DEPENDABILITY:				
Following instructions to carry out/complete various tasks.				
Practicing punctuality.				
Prompt notification, to CI, of absence, tardiness, etc.				
Practicing regular, assigned attendance.				
ADHERENCE TO COLLEGE DRESS CODE AND PERSONAL HYGIENE:				
Wearing clean, pressed, appropriate uniform and shoes.				
Have hair clean, well kept (long hair pulled back).				
Wearing proper ID and dosimeter (in correct location).				
In any type of emergency situation--knows emergency process/ and or numbers in the site department.				
Accesses CI first or technologist in any difficult situation.				
SELF-CONFIDENCE BY:				
Demonstrating adaptability and/or flexibility as necessary.				
Keeping patient care/safety foremost during radiology experience.				
Using thought processing skills for decision making i.e. patient care and/or technical/technique decisions.				
COMMENTS/FUTURE GOALS:				
CI/Student identified Goals to work toward next semester				

CLINICAL RADIOGRAPHY ROTATIONAL OBJECTIVES AND ASSESSMENT

1ST SEMESTER – FALL SEMESTER

RADT 1558

Students are expected to demonstrate the following work ethics in each weekly rotation. The supervising technologist will then assess work ethics and a grade is issued.

WORK ETHICS

Proved dependability by maintaining punctuality and being accessible in scheduled area. Includes beginning of shift, throughout shift and returning from breaks.

Took initiative to become actively involved in all exams/procedures.

Asked appropriate questions to understand the rotation and skills needed for it.

Demonstrated effective communication skills when interacting with staff

Maintained a Professional appearance and good hygiene as described in program/department policies.

Presented a positive attitude toward working and learning.

Protects the patient's right to quality care by following HIPAA guidelines and the ARRT Standards and Rules of Ethics.

Demonstrated an organized approach to complete daily tasks.

Worked effectively as part of the imaging team.

Communicated with the patient, while they were in the exam room, during wait time, or during transport to the exam room.

RUBRIC FOR WORK ETHIC ASSESSMENT	
Student's interaction was not appropriate	0 points
Student's interaction was minimal	2 points
Student's interaction was minimal to moderate but progression was demonstrated	3 points
Student's interaction was appropriate	4 points

UNIQUE ROTATIONAL OBJECTIVES exist for each weekly rotation. Students will use these as a guide to learning and supervising technologists will verify that the objectives have been met. There is no grade given to the objectives however, if less than half of the weekly objectives are met, students may be issued an infraction or may be required to repeat the rotation.

TRANSPORT

UNIQUE ROTATIONAL OBJECTIVES	Met	Didn't meet	No opportunity
Exhibit a positive and professional image.			
Introduce yourself and announce your purpose and intentions prior to entering a patient's room.			
Verify patient's identity by checking identification band prior to the procedure; verbally ask patient's full name as well as date of birth.			
Properly assist the patient in and out of a wheelchair/ on and off a stretcher			

TRANSPORT CONTINUED

Attend to patient right to privacy by properly covering patient prior to transport.			
Demonstrate proper body mechanics when handling/transporting patients and transport equipment			
Demonstrate proper and safe manipulation of wheelchairs, stretchers and IV standards while transporting patients			
Demonstrate the proper method of loading a stretcher/wheelchair patient into an elevator.			
Locate the linen supply, stretchers, and wheelchairs on each nursing units			
Share responsibility for cleanliness of transport equipment.			

OFFICE

UNIQUE ROTATIONAL OBJECTIVES	Met	Didn't meet	No opportunity
Observe duties performed and type of work done in reception, CD imaging, PACS computer station.			
Exhibit professionalism when answering the phone stating the site, department and their name			
Exhibit professionalism by greeting outpatient's at the reception area with respect and displays confidence with daily office procedures			
Display knowledge of basic computer functions and typing.			
Prepare (burn) CD for transport of patient data.			
Utilize proper medical terminology related to digital data (RIS, HIS, EMR, DICOM, PACS)			
Access patient data in the RIS/EMR.			

FLUOROSCOPY

UNIQUE ROTATIONAL OBJECTIVES	Met	Didn't meet	No opportunity
Properly instructed the patient to remove clothing and dress in the appropriate patient attire (gown, bottoms) for the imaging procedure.			
Verify physician orders in RIS (Radiology Information System).			
Review PACS (Picture Archiving and Communication System) for previous study information .			
Interview patient to obtain a history of current symptoms. Document per department protocols.			
Properly assist the patient on and off the radiology table; from a wheelchair, stretcher or walking (ambulatory).			

FLUOROSCOPY CONTINUED

Communicate effectively with the patient, while they are in the exam room, during wait time.

Verify patient's identity by checking identification band prior to the procedure; verbally ask patient's full name as well as date of birth.

Name the user components of the radiographic and fluoroscopic equipment.

Properly care for and handle patient's possessions.

Identify, locate and utilize accessory items and supplies used in the room.

Describe the methods of radiation protection for self and patient. Include thyroid, eye and gonadal shielding when appropriate.

Manipulate the equipment within the fluoroscopy room/suite.

Properly mark image receptor (IR) for identification before exposure.

Demonstrate a courteous, professional and respectful attitude toward patients, staff, and physicians.

Observe and assist with all procedures done in the fluoroscopy room.

Enter patient and exam information into computer for digital images.

Keep work area clean, stocked and in order.

Select the appropriate exam on the procedure menu of the control panel.

Process images using appropriate tools/annotations, etc.

Complete primary and secondary erasure of IR as per department protocols.

The student has been oriented to the proper handling of sharps supplies including scalpels, needles, catheters, guide wired, sheaths, trochar or long extended needles, syringes – with or without attached needles

The student has been directed how to dispose of any sharps/needles in the proper sharps container

The student has practiced no recap and/or one-handed recap for filling contrast syringes, as mandated by OSHA guidelines

The student is cleared to safely dispose of needles, scalpels, syringes, and other sharps supplies in this rotation and in this health care facility

PORTABLE

UNIQUE ROTATIONAL OBJECTIVES	Met	Didn't meet	No opportunity
Exhibit a positive and professional image.			
Review PACS (Picture Archiving and Communication System) for previous study information.			
Introduce yourself and announce your purpose and intentions prior to entering a patient's room.			
On the control panel: Select the appropriate exam on the procedure menu.			
Verbally identify components on the control panel of the portable equipment			
Verify patient's identity by checking identification band prior to the procedure; verbally ask patient's full name as well as date of birth.			
Demonstrate physical use of portable equipment: driving machine, manipulating machine in and out of patient rooms and ER, properly using locks			
Use proper patient lifting and sliding techniques (body mechanics)			
Verify physician orders in RIS (Radiology Information System).			
Observe and assist in positioning patients for portable exams. Use anatomical landmarks for proper centering.			
Properly mark image receptor (ID and R/L markers) before exposure			
Utilize proper radiation safety techniques and follow ALARA concepts.			
CR Processing: Correctly load and unload IR in CR Reader			
Access appropriate screen to flip and rotate images.			
CR Processing: Recognize appropriate exposure indexes. Determine if the image resulted in an over or under exposure			
Observe process for completion of exam.			
Identify basic anatomy on portable chest and abdomen radiographs			
Return patient and room to previous order at completion of exam			
Share responsibility for cleanliness of portable equipment.			
Properly set portable battery for recharging			

GENERAL

UNIQUE ROTATIONAL OBJECTIVES	Met	Didn't meet	No opportunity
Demonstrate a courteous, professional and respectful attitude toward patients, staff, and physicians			
Verify patient's identity by checking identification band prior to the procedure; verbally ask patient's full name as well as date of birth.			
Properly instructed the patient to remove clothing and dress in the appropriate patient attire (gown, bottoms) for the imaging procedure. Assure to remove items that may cause artifacts on the image			
Communicate effectively with the patient, while they are in the exam room, during wait time.			
Review PACS (Picture Archiving and Communication System) for previous study information.			
Observe and assist in interviewing patient to obtain pertinent history. Record as required per site			
Verify physician orders in RIS (Radiology Information System).			
Properly care for and handle patient's possessions.			
Prepare room for each exam by manipulating the tube for alignment with table or wall stand; clean linen on table; image receptors, markers, and accessories ready and available			
Manipulate the radiographic tube, move the table, bucky, and upright bucky utilizing the appropriate locks			
Properly assist the patient on and off the radiology table; from a wheelchair, stretcher or walking (ambulatory)			
Properly mark image receptor (IR) for identification before exposure utilizing R. or L. marker			
Select appropriate grid for exposures of the chest and abdomen			
Follow ALARA concept by utilizing appropriate radiation protection			
On the control panel: Select the appropriate exam on the procedure menu.			
CR Processing: Correctly load and unload IR in CR Reader			
Observe and assist with all exams in this area concentrating on (but not limited to) CXR and abdomen studies			
Keep work area clean, stocked and in order.			

FOR REVIEW PRIOR TO CLINICAL II-VI ROTATIONS

CLINICAL RADIOGRAPHY II-VI ROTATIONS

TO BE completed online by the CI

PERFORMANCE EVALUATION (CI)

0= Demonstrates limited knowledge/skill (major improvement needed)

3= Requires experience for efficiency

2= Demonstrates some knowledge/skill (avg. performance, minor improvements needed)

4= Demonstrates competency in knowledge/skills

Achievement

1. **Adaptability** – Ability to and openness for accepting new duties/skills while adjusting to changes/site rotations.

2. **Knowledge**- knowledge base of duties/skills/procedures is appropriate for academic level of student.

3. **Accuracy** – Quality of work/service is appropriate for academic level of student.

4. **Productivity** – Generates appropriate quantity of work/service without compromising patient care.

5. **Motivation** – Keeps busy, offers assistance, demonstrates initiative, and seeks responsible assignments.

6. **Professional attitude** – Practices positive and ongoing interest in the profession. Avoids gossip.

7. **Obtains pertinent history** by proper communication with patient. Listens to responses/documents information/history accurately, verbally and in writing, as necessary.

8. **Patient Communication** – Explains exams/procedures clearly and in appropriate terminology.

9. **Patient Care** – Demonstrates compassion, empathy and the ability to adapt to patient's needs.

10. **Professional Communication** - Interacts with medical, office, technical staff and fellow students with respect and courtesy.

11. **Educational Growth** – Asks appropriate questions of staff and listens to responses. Uses down time to practice and learn.

12. **Professional Growth** - Accepts constructive criticism

13. **Team Attitude** – Ability to cooperate, show courtesy and tact while practicing team concept.

14. **Responsibility** – Demonstrates ability to assume responsibility and follow through with specific instructions.

15. **Organization Skill** – Organizes thoughts/ work tasks to accomplish exam/procedure.

16. **Self-Confidence** – Displays a level of self-confidence appropriate for academic level of student.

17. **Actively** participates in film critique/ positioning review. **Uses time appropriately** when department patient load is slow. Works independently to review films/anatomy.

18. **Communicates** with the supervisor pertaining to absence, breaks also professional/educational needs.

19. **Conducts self** in a professional manner while at site and on grounds. Applies to appearance and mannerisms.

20. **Follows college/site policies** for reliability/punctuality.

21. **Documents**, on a routine basis, exposure/positioning information in personal notebook.

22. **Shows preparedness** by completing portfolio papers in a timely, orderly fashion.

23. **Works toward increasing proficiencies** while challenging self to overcome areas of weakness. Asks questions

24. **Works appropriately** with (ethnic) diverse staff, classmates, and patients.

25. **Keeps personal issues/emotions** in perspective during clinical internship.

PROFESSIONAL ACTIVITIES POLICY

Professional growth is important in the field of Radiologic Technology. The field is constantly changing and we, as professionals must stay current. Therefore, radiology students will be required to participate in activities that promote the profession and increase personal professional **development** and **growth** on a yearly basis.

Due:

- **Status check:** 1st Year Summer: July 20th. Submit original copy to the Clinical Coordinator. Professional activities must be started but no specific number of events is required.
- **Final Submission:** 2nd Year: March 15th. Submit original copy to the Clinical Coordinator. (log any anticipated April, May and June activities prior to submission)

CONTINUING EDUCATION - PROFESSIONAL GROWTH

Six hours of continuing education activities are required. Acceptable activities include, but are not limited to:

- LSC Student Success Day Educational Event
- MSRT Fall Conference
- Hospital/Departmental continuing education seminar
- ARRT Journal CE Directed Reading (Journals in classroom and LSC Library)
 - Read Article and complete the associated CE quiz.
 - Submit a copy of the article and your completed quiz along with the Professional Activities Form
- MNSRT Student Bowl – 1st year attendance is elective and will count as 3 hours of Continued Education. 2nd year attendance is mandatory and is in addition to the required Continuing Education requirements.

PROFESSIONAL VOLUNTEERISM - includes Promotion of Program, Career or Campus

Four hours of professional volunteerism is required. Acceptable activities include, but are not limited to:

- Lake Superior College Open House
 - Schedule with Program Director
 - Setup of presentation, talk with potential students about program and field. Explain technology and radiographic images on display. Breakdown and clean up as well.
- New Student Orientation
 - Schedule with Program Director
 - PD will assign a specific task
- Radiologic Technology Week presentation
 - Prepare a display for Radiologic Technology Week.
 - Design and content must be approved by program advisor.
- RadT club Activity
- Social Diversity Project / Activity - (pre-approval from program advisor required)
- Service Learning Project – Mentoring (pre-approval from program advisor required)
- High-school or community presentations related to Medical Imaging - (pre-approval from program advisor required)

Clinical Hours and Professional Activities

Students who are scheduled in Clinical Radiography during any of the professional activities listed above will be excused so he/she may participate however, this time must be made up during the sixteenth week of the term. Contact the clinical instructor to arrange this. State level professional events will not require make up time but must be pre-approved.

**LSC RADIOLOGIC TECHNOLOGY
PROGRAM
PROFESSIONAL
ACTIVITIES**

Student's Name _____

ASRT Number _____

Anticipated Graduation Year _____

CONTINUING EDUCATION

A minimum of 6 hours required

SESSION/ACTIVITY ATTENDED	DATE	HOURS	PRESENTER	SIGNATURE
2 nd Year MNSRT Student Bowl		NA	NA	

PROFESSIONAL VOLUNTEERISM

A minimum of 4 hours required

SESSION/ACTIVITY ATTENDED	DATE	HOURS	PRESENTER	SIGNATURE

Student Life Officer or member?

No

Yes

If "yes" list office held and length of term.

Professional Activities above and beyond requirements should be recorded above (attach additional page if needed).

<p>Chequamagen Clinic –St. Luke's 415 Ellis Ave. Ashland, WI 54806 715-685-6600 888-860-2322 CI: Christina Swanson, R.T.(R) cswanson@slhduluth.org</p>	<p>LAKE SUPERIOR COLLEGE CLINICAL AFFILIATIONS RADIOLOGIC TECHNOLOGY PROGRAM</p>	<p>Cuyuna Regional Medical Center 320 East Main Crosby, Minnesota 56441 218-546-7000 Ext 2158 CI: Julie Hella, R.T.(R)(M) jhella@cuyunamed.org Mandy Lubovich, R.T.(R) mandy.lubovich@lsc.edu</p>
	<p>Essentia Health Deer River 115 10th Ave. NE Deer River, MN 56636 218-246-4433 CI: Abe Latvala, R.T.(R)(CT) Abram.latvala@essentiahealth.org</p>	<p>Essentia Health Duluth Clinic 400 East Third Street Duluth, MN 55805 1st Street: 218-786-3729 3rd Street: 218-786-3363 CI: Colleen Coughlin, R.T.(R) Colleen.Coughlin@essentiahealth.org</p>
<p>Essentia Health – St. Joseph's Hospital & Brainerd Clinic 2024 S. 6th St. – Clinic 523 North Third Street - Hospital Brainerd, MN 56401 218-822-3964 (work area) CI: Nicholas Ferry R.T.(R) Nicholas.Ferry@essentiahealth.org Matt Windorski, R.T.(R)(CT) matt.windorski@essentiahealth.org</p>	<p>Essentia Health St. Mary's Medical Cntr 407 East Third Street Duluth, MN 55805 Main hospital: 218-786-4000 Dept: 218-786-4975 CI: Dinah Johnson, R.T.(R)(M) d.johnson@lsc.edu Meghan Josephson, R.T. (R) meghan.josephson@essentiahealth.org</p>	<p>Essentia Health St. Mary's – Superior 3500 Tower Avenue Superior, WI 54480 715-817-7600 CI: Kathy Montgomery, R.T. (R) kathleen.montgomery@essentiahealth.org</p>
<p>Essentia Health- Virginia Hospital 901 9th St. N. Virginia, MN 55792 218-741-3340 CI: Julie Ruotsalainen R.T. (R) Julie.ruotsalainen@essentiahealth.org Amanda Moylan R.T (R) Amanda.moylan@essentiahealth.org</p>	<p>Fairview Range Medical Center 750 East 34th Street Hibbing, MN 55746 218-262-4881 CI # 218-362-6626 CI: Natalie Petrich, R.T.(R)(CT) npetric1@range.fairview.org</p>	<p>Grand Itasca Clinic and Hospital 1600 Golf Course Road Grand Rapids, MN 55744 Radiology Work Room: 218-999-1643 Hospital : 218-326-3401 CI: Kim Morse, R.T.(R)(M) K.Morse@granditasca.org</p>
<p>Hayward Area Memorial Hospital 11040 N. State Rd. 77 Hayward, WI 54843 Switchboard : 715-934-4321 Work Area : 715-934-4237 CI: Pamela Brestan, R.T. (R)(M) pambrestan@yahoo.com</p>	<p>Memorial Medical Center 1615 Maple Lane Ashland, WI 54806 715-685-5383 CI: Maria Wickman, R.T.(R)(CT) mewickman@yahoo.com</p>	<p>Mercy Hospital 4572 County Road 61 Moose Lake, MN 55767 218-485-4481 ext # 578 direct dial 218-485-5578 CI: Brenda Hutar, R.T.(R)(CT) bhutar@mercymooselake.org</p>
<p>Riverwood Healthcare Center 200 Bunker Hill Drive Aitkin, MN 56431 218-927-5573 CI: Jenna Peterson, R.T. (R)(CT) jpeterson@riverwoodhealthcare.org</p>	<p>Sanford Bemidji Health Systems 1233 34th Street NW Bemidji, MN 56601 Work Area: 218-333-6074 CI: Amy Muller, R.T.(R)(ARRT) Amy.Muller@sanfordhealth.org Angela Bjerknes, R.T.(R) Angela.Bjerknes@sanfordhealth.org</p>	<p>St. Luke's Regional Trauma Center 915 East First Street Duluth, MN 55805 Main hospital: 218-249-5555 Dept: 218-249-5222 CI desk: 218-249-3002 CI: Dinah Johnson, R.T.(R)(M) d.johnson@lsc.edu Mandy Lubovich, R.T.(R) mandy.lubovich@lsc.edu</p>

CLINICAL AFFILIATION SITE PAGES

<p>Chequamagen Clinic–St.Luke’s 415 Ellis Ave. Ashland , WI 54806 715-685-6600 888-860-2322 CI: Christina Swanson, R.T.(R) cswanson@slhduluth.org</p> <div style="border: 2px solid black; border-radius: 15px; padding: 10px; margin-top: 20px;"> <p>This site is a secondary site for Ashland students. You must contact both Ashland site CIs in July to arrange orientations at both facilities</p> </div>	<p>DRESS CODE:</p> <ul style="list-style-type: none"> • Solid colored scrubs - solid colored lab coat optional • Solid white undershirt acceptable • Clean, primarily white or black work shoe
	<p>ID BADGE:</p> <p><input type="checkbox"/> Site ID is required. Issued ID must be turned in upon exit from the program.</p>
	<p>SITE ORIENTATION:</p> <p><input type="checkbox"/> Contact the CI in July to arrange.</p>
	<p>TRAJCSYS ACCESS:</p> <p><input type="checkbox"/> Back of Radiology office or in tech work area.</p>
	<p>PARKING:</p> <p><input type="checkbox"/> Back parking lot in the white stripe area. (MMC)</p>
	<p>ON-SITE LOCKER WILL BE ASSIGNED. BRING YOUR OWN LOCK</p>

<p>Cuyuna Regional Medical Center 320 East Main Crosby, Minnesota 56441 Switchboard: 218-546-7000 Ext 2158 Work Area: 218-546-2317 CI: Julie Hella, R.T.(R)(M) jhella@cuyunamed.org Mandy Lubovich, R.T.(R) mandy.lubovich@lsc.edu</p> <div style="border: 2px solid black; border-radius: 15px; padding: 10px; margin-top: 20px;"> <p>Bring copies to CI prior to clinical start :</p> <ul style="list-style-type: none"> <input type="checkbox"/> Immunization records <input type="checkbox"/> CPR card <input type="checkbox"/> Background clearance </div>	<p>DRESS CODE:</p> <ul style="list-style-type: none"> • Solid Black - black lab coat optional • Solid Black or solid white undershirt acceptable <input type="checkbox"/> Clean work shoe
	<p>ID BADGE:</p> <p><input type="checkbox"/> Photo ID badge will be issued at orientation. This ID must be turned in upon exit from the program.</p>
	<p>SITE ORIENTATION:</p> <p><input type="checkbox"/> Contact CI in July. Orientation will be held 1st day of fall clinical</p>
	<p>TRAJCSYS ACCESS:</p> <p><input type="checkbox"/> Any department computer</p>
	<p>PARKING:</p> <p><input type="checkbox"/> Across from the hospital next to the Crosby Eye Clinic.</p>
	<p>ON-SITE LOCKER WILL BE ASSIGNED. BRING YOUR OWN LOCK.</p>

Essentia Health Deer River 115 10 th Ave. NE Deer River, MN 56636 Switchboard: 218-246-2900 Work Area: 218-246-4433 CI: 218-246-4433 CI: Abe Latvala, R.T.(R)(CT) Abram.latvala@essentiahealth.org	DRESS CODE: <ul style="list-style-type: none"> • Solid Navy Blue - blue lab coat optional • Solid white undershirt acceptable • Clean, primarily white or black work shoe
	ID BADGE: <ul style="list-style-type: none"> <input type="checkbox"/> Site ID Badge required. Contact Kacey Holt 218-246-3056 before start of clinical radiography. This ID must be turned in upon exit from the program.
	SITE ORIENTATION: <ul style="list-style-type: none"> <input type="checkbox"/> Contact CI in July. Department tour will be arranged.
	TRAJCSYS ACCESS: <ul style="list-style-type: none"> <input type="checkbox"/> In Radiology Department
	PARKING: <ul style="list-style-type: none"> <input type="checkbox"/> Main parking lot SE ON-SITE LOCKER WILL BE ASSIGNED

Essentia Health Duluth Clinic 420 East 1 st Street Duluth, MN 55805 Switchboard: 218-786-8364 1st Street: 218-786-3729 3rd Street: 218-786-3363 CI: Colleen Coughlin, R.T.(R) Colleen.Coughlin@essentiahealth.org	DRESS CODE: <ul style="list-style-type: none"> • Solid Navy Blue - blue lab coat optional • Solid white undershirt acceptable • Clean, primarily white or black work shoe
	ID BADGE: <ul style="list-style-type: none"> <input type="checkbox"/> Site ID is required and will be issued the first day of clinical. Bring \$10, for site ID, the first day of clinical. This ID must be turned in upon exit from the program. \$5 will be refunded at turn in.
	SITE ORIENTATION: <ul style="list-style-type: none"> <input type="checkbox"/> Department tour will be arranged the first day of clinical.
	TRAJCSYS ACCESS: <ul style="list-style-type: none"> <input type="checkbox"/> Any department computer
	PARKING: <ul style="list-style-type: none"> <input type="checkbox"/> Calendar and metered street parking. 1st street ramp available for \$2.00/day. Fitger's ramp available for \$10/mo. ON-SITE LOCKER WILL BE ASSIGNED.

<p>Essentia Health St. Joseph’s Med Ctr 523 North Third Street Brainerd, MN 56401 Switchboard: 218-828-7660 Work Area: 218-822-3964 CI: Diane Freid R.T.(R)(CT) Diane.Freid@essentiahealth.org Matt Windorski, R.T.(R)(CT) matt.windorski@essentiahealth.org</p> <div style="border: 2px solid black; border-radius: 15px; padding: 10px; margin-top: 10px;"> <p>Bring copies to CI prior to clinical start:</p> <ul style="list-style-type: none"> • Immunization records • CPR card • Background clearance </div>	<p>DRESS CODE:</p> <ul style="list-style-type: none"> • Solid Black or Orchid - black/orchid lab coat optional • Solid white undershirt acceptable • Clean, primarily white or black work shoe
	<p>ID BADGE:</p> <p><input type="checkbox"/> HR will issue a badge on the first day of clinical. This ID must be turned in upon exit from the program.</p>
	<p>SITE ORIENTATION:</p> <p><input type="checkbox"/> Contact the CI in July to arrange.</p>
	<p>TRAJCSYS ACCESS:</p> <p><input type="checkbox"/> Any department computer, usually in the Traumex room.</p> <p>PARKING:</p> <p><input type="checkbox"/> Across from the hospital next to the Crosby Eye Clinic.</p> <p>ON-SITE LOCKER WILL BE ASSIGNED. BRING YOUR OWN LOCK.</p>

<p>Essentia Health St. Mary’s Medical Cntr 407 East Third Street Duluth, MN 55805 Switchboard: 218-786-4000 Work Area: 218-786-4975 CI: Dinah Johnson, R.T.(R)(M) d.johnson@lsc.edu</p> <div style="border: 2px solid black; border-radius: 15px; padding: 10px; margin-top: 10px;"> <p>Bring copies to CI prior to clinical start :</p> <ul style="list-style-type: none"> <input type="checkbox"/> Immunization records <input type="checkbox"/> CPR card <input type="checkbox"/> Background clearance </div>	<p>DRESS CODE:</p> <ul style="list-style-type: none"> • Solid Navy Blue - blue lab coat optional • Solid white undershirt acceptable • Clean, primarily white or black work shoe
	<p>ID BADGE:</p> <p><input type="checkbox"/> Site ID is required and will be issued the first day of clinical. Bring \$10, for site ID, the first day of clinical. This ID must be turned in upon exit from the program. \$5 will be refunded at turn in.</p>
	<p>SITE ORIENTATION:</p> <p><input type="checkbox"/> Department tour will be arranged the first day of clinical.</p>
	<p>TRAJCSYS ACCESS:</p> <p><input type="checkbox"/> QC area of department</p> <p>PARKING:</p> <p><input type="checkbox"/> Calendar and metered street parking. 1st street ramp available for \$2.00/day. Fitger’s ramp available for \$10/mo.</p> <p>ON-SITE LOCKER WILL BE ASSIGNED. BRING YOUR OWN LOCK</p>

Essentia Health St. Mary's – Superior 3500 Tower Avenue Superior, WI 54480 Switchboard: 715-817-7000 Work Area: 715-817-7600 CI: Kathy Montgomery, R.T. (R) kathleen.montgomery@essentiahealth.org	DRESS CODE:
	<ul style="list-style-type: none"> • Solid Navy Blue - blue lab coat optional • Solid white undershirt acceptable • Clean, primarily white or black work shoe
	ID BADGE:
	<input type="checkbox"/> LSC ID Badge
	SITE ORIENTATION:
	<input type="checkbox"/> Department tour will be arranged the first day of clinical.
TRAJESYS ACCESS:	
<input type="checkbox"/> Main Tech room or front office	
PARKING:	
<input type="checkbox"/> Any general lot on site.	
ON-SITE LOCKER WILL BE ASSIGNED.	

Essentia Health- Virginia Hospital 901 9 th Street North Virginia, MN 55792 Work Area: 218-749-9463 CI Desk: 218-749-9463 CI: Julie Ruotsalainen R.T.(R) Julie.ruotsalainen@essentiahealth.org Amanda Moylan R.T.(R) Amanda.moylan@essentiahealth.org <div style="border: 2px solid black; border-radius: 15px; padding: 10px; margin-top: 20px;"> Bring copies to CI prior to clinical start : <ul style="list-style-type: none"> <input type="checkbox"/> Immunization records <input type="checkbox"/> CPR card <input type="checkbox"/> Background clearance </div>	DRESS CODE:
	<ul style="list-style-type: none"> • Solid Navy Blue - blue lab coat optional • Solid white undershirt acceptable • Clean, primarily white or black work shoe
	ID BADGE:
	<input type="checkbox"/> Site ID is required and will be issued the first day of clinical. Bring \$10, for site ID, the first day of clinical. This ID must be turned in upon exit from the program
	SITE ORIENTATION:
	<input type="checkbox"/> Contact CI in July. Department tour will be arranged the first day of clinical.
	TRAJESYS ACCESS:
<input type="checkbox"/> Technologist break room and in the Department.	
PARKING:	
<input type="checkbox"/> Street parking/parking lot	
ON-SITE LOCKER WILL BE ASSIGNED. Please bring your own lock.	

Fairview Range Medical Center 750 East 34 th Street Hibbing, MN 55746 Switchboard: 218-262-4881 CI # 218-362-6626 CI: Natalie Petrich, R.T.(R)(CT) npetrich1@range.fairview.org	DRESS CODE: <ul style="list-style-type: none"> • Solid Navy Blue - blue lab coat optional • Solid white undershirt acceptable • Clean, primarily white or black work shoe
	ID BADGE: <ul style="list-style-type: none"> <input type="checkbox"/> Site ID is required and will be issued the first day of clinical. This ID must be turned in upon exit from the program.
	SITE ORIENTATION: <ul style="list-style-type: none"> <input type="checkbox"/> Department tour will be arranged the first day of clinical.
	TRAJECYS ACCESS: <ul style="list-style-type: none"> <input type="checkbox"/> Specific computer assigned.
	PARKING: <ul style="list-style-type: none"> <input type="checkbox"/> South lot.
ON-SITE LOCKER WILL BE ASSIGNED. BRING YOUR OWN LOCK	

Grand Itasca Clinic and Hospital 1601 Golf Course Road Grand Rapids, MN 55744 Radiology Work Room: 218-999-1643 Switchboard: 218-326-3401 Work Area : 218-999-1643 CI : 218-999-1655 CI: Kimberlee Morse, R.T.(R)(M) KMorse@granditasca.org	DRESS CODE: <ul style="list-style-type: none"> • Solid Navy Blue - blue lab coat optional • Solid white undershirt acceptable • Clean, primarily white or black work shoe
	ID BADGE: <ul style="list-style-type: none"> <input type="checkbox"/> Site ID is required. Bring 2 forms of ID the 1st day of clinical. Issued ID must be turned in upon exit from the program.
	SITE ORIENTATION: <ul style="list-style-type: none"> <input type="checkbox"/> Contact the CI in July. Orientation will be set up during the summer before the semester begins. Orientation is the 3rd Monday of July.
	TRAJECYS ACCESS: <ul style="list-style-type: none"> <input type="checkbox"/> Main work area.
	PARKING: <ul style="list-style-type: none"> <input type="checkbox"/> Employee parking lot
ON-SITE LOCKER WILL BE ASSIGNED. BRING YOUR OWN LOCK	

Bring copies to CI prior to clinical start :

- Immunization records
- CPR card
- Background clearance

<p>Hayward Area Memorial Hospital 11040 N. State Rd. 77 Hayward, WI Switchboard : 715-934-4321 Work Area : 715-934-4237 CI: Pamela Brestan, R.T. (R)(M) pambrestan@yahoo.com</p> <div style="border: 2px solid black; border-radius: 15px; padding: 10px; margin: 10px 0;"> <p>Bring copies to HAMH HR 1 mo prior to clinical start:</p> <ul style="list-style-type: none"> • Student Enrollment Form • Immunization records • Proof of current Influenza Vaccine • CPR card • WI Background clearance • State of Residency Background clearance </div> <p>Appropriate paperwork will be sent from the LSC CC in June prior to start.</p>	<p>DRESS CODE:</p> <ul style="list-style-type: none"> • Solid Navy Blue - blue lab coat optional • Solid white or black undershirt acceptable • Clean, primarily white or black work shoe
	<p>ID BADGE:</p> <p><input type="checkbox"/> Site ID is required. Issued ID must be turned in upon exit from the program.</p>
	<p>SITE ORIENTATION:</p> <p><input type="checkbox"/> Contact the CI in July to arrange.</p>
	<p>TRAJCSYS ACCESS:</p> <p><input checked="" type="checkbox"/> Any department computer.</p>
	<p>PARKING:</p> <p><input type="checkbox"/> Designated staff parking</p> <p>ON-SITE LOCKER WILL BE ASSIGNED. BRING YOUR OWN LOCK</p>

<p>Memorial Medical Center 1615 Maple Lane Ashland, WI 54806 Switchboard : 715-685-5500 Work Area : 715-685-5383 CI: Maria Wickman, R.T.(R)(CT) mwickman@ashlandmmc.com</p> <div style="border: 2px solid black; border-radius: 15px; padding: 10px; margin: 10px 0;"> <p>Bring copies to MMC CI prior to clinical start:</p> <ul style="list-style-type: none"> • Immunization records • CPR card • Background clearance </div>	<p>DRESS CODE:</p> <ul style="list-style-type: none"> • Solid colored scrub - solid colored lab coat optional • Solid white undershirt acceptable • Clean, primarily white or black work shoe
	<p>ID BADGE:</p> <p><input type="checkbox"/> Site ID is required. Issued ID must be turned in upon exit from the program.</p>
	<p>SITE ORIENTATION:</p> <p><input type="checkbox"/> Contact the CI in July to arrange.</p>
	<p>TRAJCSYS ACCESS:</p> <p><input type="checkbox"/> Back of Radiology office or in tech work area.</p>
	<p>PARKING:</p> <p><input type="checkbox"/> Back parking lot in the white stripe area. (MMC)</p> <p>ON-SITE LOCKER WILL BE ASSIGNED. BRING YOUR OWN LOCK</p>

<p>Mercy Hospital 4572 County Road 61 Moose Lake, MN 55767 Switchboard: 218-485-4481 Work Area: 218-485-5578 CI: Brenda Hutar, R.T.(R)(CT) bhutar@mercymooselake.org</p> <div style="border: 2px solid black; border-radius: 15px; padding: 10px; margin-top: 10px;"> <p>Bring copies to CI prior to clinical start :</p> <ul style="list-style-type: none"> <input type="checkbox"/> Immunization records <input type="checkbox"/> CPR card <input type="checkbox"/> Background clearance </div>	<p>DRESS CODE:</p> <ul style="list-style-type: none"> • Solid Navy Blue - blue lab coat optional • Solid white undershirt acceptable • Clean, primarily white or black work shoe
	<p>ID BADGE:</p> <ul style="list-style-type: none"> <input type="checkbox"/> LSC ID Badge.
	<p>SITE ORIENTATION:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Contact the CI in July to arrange HIPAA info.
	<p>TRAJCSYS ACCESS:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Any Imaging Department computer – 2 department computers at Gateway Clinic
	<p>PARKING:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Lot across from Out Patient Entrance (Hospital)Employee lot (Clinic) <p>ON-SITE LOCKER WILL BE ASSIGNED. BRING YOUR OWN LOCK</p>

<p>Riverwood Healthcare Center 200 Bunker Hill Drive Aitkin, MN 56431 Switchboard : 218-927-2121 Work Area : 218-927-5573 CI : Jenna Peterson, R.T. (R)(CT) jpeterson@riverwoodhealthcare.org</p> <div style="border: 2px solid black; border-radius: 15px; padding: 10px; margin-top: 10px;"> <p>Bring copies to CI prior to clinical start :</p> <ul style="list-style-type: none"> <input type="checkbox"/> Immunization records <input type="checkbox"/> CPR card <input type="checkbox"/> Background clearance </div>	<p>DRESS CODE:</p> <ul style="list-style-type: none"> • Solid Colored Scrubs - solid color coat optional • Solid white undershirt acceptable • Clean, primarily white or black work shoe
	<p>ID BADGE:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Site ID is required. Issued ID must be turned in upon exit from the program.
	<p>SITE ORIENTATION:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Contact the CI in July to arrange.
	<p>TRAJCSYS ACCESS:</p> <ul style="list-style-type: none"> <input type="checkbox"/> In the Radiology department.
	<p>PARKING:</p> <ul style="list-style-type: none"> <input type="checkbox"/> First two rows outside the Radiology door. <p>ON-SITE LOCKER WILL BE ASSIGNED. BRING YOUR OWN LOCK</p>

<p>Sanford Bemidji Health Systems 1233 34th Street NW Bemidji, MN 56601 Work Area: 218-333-6074 CI: Amy Muller, R.T.(R)(ARRT) Amy.Muller@sanfordhealth.org Angela Bjerknes, R.T.(R) Angela.Bjerknes@sanfordhealth.org</p> <div style="border: 1px solid black; border-radius: 15px; padding: 10px; margin-top: 10px;"> <p>Bring copies to CI prior to clinical start :</p> <ul style="list-style-type: none"> <input type="checkbox"/> Immunization records <input type="checkbox"/> CPR card <input type="checkbox"/> Background clearance </div>	<p>DRESS CODE:</p> <ul style="list-style-type: none"> • Solid Gray - blue lab coat optional • Solid white undershirt acceptable • Clean, primarily white or black work shoe
	<p>ID BADGE:</p> <ul style="list-style-type: none"> • Site ID is required. CI will instruct in July. • Issued ID must be turned in upon exit from the program.
	<p>SITE ORIENTATION:</p> <p><input type="checkbox"/> Contact CI in July to arrange.</p>
	<p>TRAJESYS ACCESS:</p> <p><input type="checkbox"/> In Tech work area</p>
	<p>PARKING:</p> <p><input type="checkbox"/> Staff parking</p> <p>ON-SITE LOCKER WILL BE ASSIGNED. BRING YOUR OWN LOCK</p>

<p>St. Luke's Regional Trauma Center 915 East First Street Duluth, MN 55805 Switchboard: 218-249-5555 Work Area: 218-249-5222 CI desk: 218-249-3002 CI: Dinah Johnson, R.T.(R)(M) d.johnson@lsc.edu Mandy Lubovich, R.T. (R) mandy.lubovich@lsc.edu</p> <div style="border: 1px solid black; border-radius: 15px; padding: 10px; margin-top: 10px;"> <p>Bring copies to CI prior to clinical start :</p> <ul style="list-style-type: none"> <input type="checkbox"/> Immunization records <input type="checkbox"/> CPR card <input type="checkbox"/> Background clearance </div>	<p>DRESS CODE:</p> <ul style="list-style-type: none"> • Solid Navy Blue - blue lab coat optional • Solid white undershirt acceptable • Clean, primarily white or black work shoe
	<p>ID BADGE:</p> <p><input type="checkbox"/> Site ID is required. Issued ID must be turned in upon exit from the program. Lost/defaced badges are charged a \$10 replacement fee.</p>
	<p>SITE ORIENTATION:</p> <p><input type="checkbox"/> 1st day of clinical</p>
	<p>TRAJESYS ACCESS:</p> <p><input type="checkbox"/> 1st floor radiology department..</p>
	<p>PARKING:</p> <p><input type="checkbox"/> Street parking</p> <p>ON-SITE LOCKER WILL BE ASSIGNED. BRING YOUR OWN LOCK</p>