



**DIVISION OF HEALTH SCIENCES  
STUDENT HANDBOOK  
AND POLICY MANUAL  
with the Radiologic Technology  
Associate Degree Addendum**

Revised for the Fall 2016 Semester

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## SECTION I: INTRODUCTION AND OVERVIEW

The purpose of this handbook is to provide to students, the college community, and the general public essential information about the educational and behavioral performance requirements expected of individuals entering the health professions. In order to ensure safe practice, DHS has developed specific policies and procedures, in addition to those already established by the College, that govern student matriculation in their respective programs. **It is the responsibility of the student to be familiar with and abide by the policies contained in this manual and in the College Catalog and Student Handbook and Planner, which are referenced throughout this document.**

Each student is issued a copy of the Division of Health Sciences Student Handbook and Policy Manual after admission to their respective program. The content is subject to change. Program specific policy amendments, supplements and requirements are contained in the program addenda. At the beginning of each course, the faculty member(s) will distribute a course syllabus. Students should refer to the course syllabus for additional policies including but not limited to: attendance, assessment instruments, make-up requirements, and criteria for successful completion.

Admission to one of the programs offered in the Division of Health Sciences (DHS) is the first step toward entering an exciting, rewarding career. In order to be successful in any Health Sciences program, engagement in the educational process is essential. Becoming a caring, competent health care professional requires a major commitment of time, energy, and focus of one's efforts toward the needs of clients. This selfless dedication is what makes true professionals stand out. The faculty and administration in DHS are dedicated in their efforts to help students become professionals and meet their educational and career goals.

Clinical agencies, hospitals, and facilities providing education to students may have policies and procedures in addition to those in this handbook.

## **Division of Health Sciences Mission Statement and Overview**

### **Mission**

The mission of the Division of Health Sciences is to prepare graduates to provide professionally competent, safe, ethical, compassionate healthcare and become life-long learners in their field.

### **Philosophy**

Administrators, faculty and staff within the Division of Health Sciences believe that education is a life-long endeavor where students are at the center of the learning continuum. Students ultimately become life-long learners when engaged in teaching and learning environments that help them to achieve their personal and professional goals. We believe that all students have the ability to learn. Students are encouraged to identify their preferred style of learning, determine strengths, and realize their potential. Students who develop the ability to think critically will be better equipped to learn new skills, acquire knowledge, and understand the attitudes and behaviors required to succeed in their field of study. Therefore, we believe the goal of the educational process is to teach for understanding and expand the view of the learner.

We believe that healthcare education requires a commitment to diversity, leadership, collaborative partnerships, and evidence-based practice. Accordingly, we are committed to a systematic review process to ensure programs maintain the highest standards and are reflective of current practice. All healthcare professional programs represent blend of theory and reflective clinical practice that embraces cross-cultural beliefs and values.

Graduates from the Division of Health Sciences have the ability to respond to healthcare needs within local, national, and global environments. All healthcare professionals have the responsibility to ensure that quality healthcare is provided by engaging in effective leadership and social advocacy initiatives.

### **Core Values**

Aligned with the Core Values of the College, the Division of Health Sciences believes that:

- Quality education in all health programs is based on current standards of practice, use of technology, and application of contemporary pedagogy.
- Students have the potential for success when academic and personal support services are provided throughout the educational process.
- Communication and team work are an integral part of the learning and working environment.
- Appreciation of diversity becomes the foundation for understanding and embracing the richness of differences in opinion, ethnicity, culture, and lifestyle.
- Change is embraced by a willingness to accept new ideas.
- Education becomes a pathway that fosters lifelong learning.

**Division of Health Science Goals:**

1. Prepare students for employment in a specific health career field.
2. Maintain external accreditation/approval of individual health science programs.
3. Establish academic benchmarks that assess student learning.
4. Promote engagement in community service activities.
5. Utilize a systematic evaluation process to maintain the highest current standard of practice.

September 9, 2009; revised October 16, 2009; revised November 13, 2009; revised January 27, 2010, March 24, 2010; revised May 3, 2013

*MassBay Community College does not discriminate on the basis of sex, religion, color, race, sexual orientation, age, national origin or disability in all of its educational programs, activities or employment policies, as required by Title IX of the 1972 Education Amendments and other federal and state anti-discrimination laws. MassBay makes a serious effort to represent a diverse group of students, faculty and staff, and to promote a climate of acceptance for minority groups.*

*If you have any questions about compliance with the Title IX, please contact the MassBay Community College Affirmative Action Officer in the Human Resources office at the Wellesley Hills Campus.*

## **Division of Health Sciences Program Accrediting Agencies**

### **Associate Degree Nursing**

Accreditation Commission for Education in Nursing, Inc. (ACEN)  
3343 Peachtree Road NE, Suite 850  
Atlanta, GA 30326  
[www.acenursing.org](http://www.acenursing.org)  
Phone: 404-975-5000

Massachusetts Board of Registration in Nursing (Approved)  
239 Causeway Street, 5<sup>th</sup> Floor, Suite 500  
Boston, MA 02114  
[www.mass.gov/dph/boards/rn](http://www.mass.gov/dph/boards/rn)  
Phone: 1-800-414-0168 or 617-973-0900

### **Radiologic Technology**

The Joint Review Committee On Education in Radiologic Technology (JRCERT)  
20 North Wacker Drive, Suite 2850  
Chicago, IL 60606-3182  
[www.jrcert.org](http://www.jrcert.org)  
Phone: 312-704-5300

### **Emergency Medical Technician and Paramedicine**

The Massachusetts Department of Public Health  
Office of Emergency Medical Services (OEMS)  
99 Chauncy Street, 11<sup>th</sup> Floor  
Boston, MA 02111  
<http://www.mass.gov/dph/oems>  
Phone: 617-753-7300

### **Surgical Technology**

Accreditation Review Council on Education in Surgical Technology and Surgical Assisting  
(ARC/STSA®)  
W. Dry Creek Circle, Suite #110  
Littleton, CO 80120  
[www.arcstsa.org](http://www.arcstsa.org)  
Phone: 303-694-9262

The Commission for Accreditation of Allied Health Education Programs (CAAHEP)  
1361 Park Street  
Clearwater, FL 33756  
[www.caahep.org](http://www.caahep.org) Phone: 727-210-2350

### **Practical Nursing**

Massachusetts Board of Registration in Nursing (Approved)  
239 Causeway Street, 5<sup>th</sup> Floor, Suite 500  
Boston, MA 02114  
[www.mass.gov/dph/boards/rn](http://www.mass.gov/dph/boards/rn); Phone: 1-800-414-0168 or 617-973-0900



## **SECTION II: Division of Health Sciences Policies**

### **Section A: Academic Policies**

#### **A.1.0 Attendance**

It is important to your academic success that you attend all classes in which you are enrolled and make up any work due to absences. For each course, your instructor will establish policies regarding class, clinical, and/or laboratory absences, and make-ups (if any), and will include these policies in the course syllabus. Your course instructor has full and final authority to allow make-up work and/or absences. If you miss more than five (5) class hours, your instructor has the right to withdraw you from the course by notifying the Registrar. Frequent tardiness and absenteeism is not tolerated in the health care professions or by the DHS faculty.

As a student in a Health Sciences program at MassBay, you must follow policies that have been developed to meet the requirements of the appropriate accrediting agencies. To ensure your successful completion of the program and accreditation requirements, attendance in all health programs is mandatory for classes, laboratory sessions, and clinical rotations.

If you have clinical clock hour requirements, you should speak with your instructors about class and clinical attendance policies. Absences may be cause for program withdrawal. Students who demonstrate a pattern of tardiness or absence will receive a counseling notice regarding the attendance policy.

**NOTE:** When taking courses in other Academic Divisions you are to follow the attendance policy set forth by that Division's faculty.

#### **A.2.0 Student Progress**

**Students are advised that it is important to purchase the required textbooks and read all assigned chapters to be successful. Textbooks contain copy written material, and photocopying it is illegal.**

To be considered in "good standing" within any of the DHS programs, students are required to achieve a minimum grade of 73% (C) in each Health Sciences Program course, except for Practical Nursing (PN) courses where the passing grade is a 75% (C), and the EMT and Paramedicine courses where the passing course grade is 77 % (C+). In science courses with a BI or CH prefix the passing grade is 73% (C). Students must pass all segments of courses (theory, laboratory, and/or clinical) in order to be successful in that specific health course.

Students whose grade is below the minimum required for courses in theory, clinical or laboratory courses at mid semester will receive a midterm warning consistent with the College's policy. Students who receive a midterm warning are required to make an appointment with the faculty responsible for the course to develop a learning remediation plan.

Students must successfully complete all required prerequisite and co-requisite courses to continue in a Health Sciences program. It is the professional responsibility of each student to insure

adequate preparation for all program, course, lab, practicum and/or clinical requirements.

**Incomplete Grades:** Should a student not complete all course requirements within the last two weeks of the semester but provides evidence of making significant progress toward such completion, he or she may submit a written request to the Health Sciences instructor to receive an incomplete (I) grade. In each case in which an Incomplete is requested, the circumstances must be compelling and beyond the control of the student. The Incomplete will not be awarded in cases of neglect on the part of the student nor will it be given as a substitute for a failing grade. At the instructor's discretion, the "I" grade may or may not be awarded.

Incomplete grades may be given only in the following circumstances:

- The student must be in good academic standing in class, laboratory, and clinical;
- Attendance has been satisfactory;
- Illness, accident, or other extenuating circumstances prevent the completion of required work;
- Documentation has been provided by the faculty;
- Required work may reasonably be completed in an agreed-upon time frame, no later than the beginning of the next semester.

Instruction to Students:

To request an Incomplete grade, complete section I of the "Request form" and submit it, along with forwarding documentation, to your instructor. A copy of this form is included on page 34.

The instructor will specify the terms and conditions for making up the coursework in section II of the request form. Signed forms will be sent to the Dean for approval. The Dean will forward all approved forms to the Registrar for processing.

When the coursework is completed and with the Dean's approval, the instructor will submit a "Change of Grade Form" to the Registrar's Office.

If the "I" grade is granted, conditions for completion of course requirements will be stipulated in a written agreement to be signed by the instructor, the student, and Dean of the Division prior to the start of the next course in the program sequence. Students who do not resolve their incomplete grade will receive an 'F' and will not progress in the program.

### **A.3.0 Testing Policy**

The specific testing policy for courses is found in the syllabus for each course. Any appeal of score/grade on an examination must be submitted in writing to the instructor within one week of the administration of the test. If a student must leave the room during the test, all test materials must be returned by the student to the testing proctor prior to leaving the testing room. Failure to comply with this stipulation may result in a failing grade for the test.

### **Test Review**

Tests or exams may be considered “Secured” and will not be given to the student to keep after the exam is completed. These tests will be kept on file in the appropriate program office. Specific Health Sciences programs have test review policies. If a test review is permitted, it will be monitored by course faculty.

### **Make-up Exams**

Students are expected to be present for all exams. The faculty recognizes that illness and emergencies occur and may, at their discretion, allow the student to take a make-up test / exam. Students must notify the faculty prior to the exam time and provide reasons and documentation for the absence. The student must contact the primary course instructor on the day he/she returns to request a makeup exam and, if approved, arrange for an exam date. Faculty have the right to ask for documentation verifying the illness or emergency as part of their decision process to allow or deny a retest. A different examination will be administered.

During exams, the following rules apply:

1. All books, purses, tote bags, cell phones and other electronic devices, etc., will be placed in a designated area and remain there during the exam.
2. Dictionaries of any kind may not be used during an examination.
3. The student’s name must be recorded on all test materials and Scantron forms as appropriate.
4. If a Scantron form is used, any erasures must be thorough for accurate scanning.
5. If a test review is offered, exam papers must be returned to faculty afterwards.

### **A.4.0 Performance Notification Process**

Students who are not performing satisfactory in any laboratory or clinical setting will receive a performance notification. The performance notification form can be found on page 37 of this handbook. The instructor will use the clinical objectives or competencies to determine the areas of weakness and what remediation is needed to become compliant in meeting student learning outcomes. Repeated performance notification may lead to a failing grade. Students are expected to complete all learning outcomes by the end of the course. Infractions of the policies, performance codes or inadequate levels of academic/clinical performance may be communicated to the student through the written warning. Record of such written warning shall be entered into the student’s file.

### **A.5.0 Student Grievance Procedure**

The student grievance procedure is described in the current MassBay Community College [Student Handbook](#).

### **A.6.0 Grade Appeals**

The first step in the grade appeal process is to contact the faculty member in writing, within 30 calendar days following the last day of the instructional period, stating that you would like a review of course grades. Grade appeals are to determine if there are any mathematical errors in computing the final course grade.

The student grade appeal process is described in the current MassBay Community College [Student Handbook](#).

## **Section B: Readmission and Appeal of Dismissal Policies**

### **B.1.0 Readmission Policy**

Students who have been dismissed or who have withdrawn from any program within the Division of Health Sciences at MassBay Community College will be considered only once for readmission to the same program. Students who have not been successful in one health science program can apply for admission to a different health program if they have an overall College GPA of 2.0 or better. Students who have been dismissed or withdrawn from a program for reasons of “clinically unsafe practice/behavior” as defined in the DHS Student Handbook and Policy Manual (see **E.14.0**) or who violate the College’s Student Code of Conduct are not eligible for admission/readmission to any DHS program. **See program addendums for specific requirements for admission/readmission.**

Application for readmission must be made within 12 months of withdrawal or dismissal from the original program. Readmission application deadlines are February 1 for the fall semester and June 1 for the spring semester. Qualified candidates will be selected from a readmission pool and based on the seat availability for that course and/or program.

Based on specific course/program requirements and accreditation standards, students may be required to retake courses, take competency exams or skill testing prior to readmission, even if courses have been completed successfully. Should the student not attain a passing grade on skill or competency testing, they will be required to retake course(s) in its entirety.

### **B.2.0 Medical Leave Policy**

Students who leave a course mid-semester with verified medical or family illness documentation will be withdrawn from the course but not the restricted health science program. Students who are granted a medical or family leave will be accommodated in the subsequent offering of that course, after first providing medical documentation approving their participation. Students will have 12 months to be re-instated in the withdrawn course for medical reasons. If additional time is required, the student will be withdrawn from the health science program and if eligible, provided the process for readmission. Students coming back from medical leave will be required to pay tuition for all enrolled courses. Students are only eligible for medical leave during a semester. Medical leaves will not be granted once the course is completed and/or grades have been issued.

### **B.3.0 Grounds for Immediate Dismissal without the Option for Readmission to Any Health Program.**

Demonstration of any of the following actions or behavior is grounds for immediate dismissal from a Division of Health Sciences program without the option for readmission:

1. Behavior that threatens the health and safety of clients, students, faculty, or college staff.
2. Academic dishonesty or plagiarism.
3. Impairment due to alcohol or drugs.
4. Behavior or actions that engage in or condone discrimination on the basis of race, gender, age, citizenship, religion, national origin, sexual orientation, or disability.

5. Violation(s) of client (HIPPA policies), student confidentiality (FERPA policies) or sharing any information that relates in any way to the proprietary interests of a clinical agency (e.g. photographs, videos, audio recording, policies, financial, security or general operational information/procedures).
6. Behavior that is incompatible with legal and ethical standards established by the discipline or profession the program represents.
7. Patient/client abandonment.

If the cause for dismissal in one of the categories listed above is also a violation of the College's Code of Conduct, the student name will be sent forward to the Code of Conduct Officer (CCO) in the Office of the Dean of Students.

#### **B.4.0 Appeal of Dismissal from Division of Health Sciences Programs**

A student has the right to appeal a dismissal from an Allied Health or Nursing program related to academic or affective domain infractions as outlined in the Division of Health Sciences Student Handbook, appropriate program addendum, and/or course syllabus should the student believe they were unfairly dismissed.

The following information outlines the appeal process accordingly.

Students have ten (10) calendar days from the date on the dismissal letter to appeal the decision.

##### **Step 1**

The student must submit, in writing, reason(s) why he or she believes the decision was unfair, reason(s) why the student should be reinstated, and any additional information or documentation that would support the appeal. The information will be sent to the Dean, Division of Health Sciences.

##### **Step 2**

A committee of designated College representatives will meet to determine the merits of the student's request to overturn the dismissal and for reinstatement into to the appropriate Allied Health or Nursing program.

##### **Step 3**

A letter will be sent to the student in question regarding the decision. The decision of the committee is final.

The Appeals Committee will include three Division of Health Sciences faculty members, and the Dean of Health Sciences. Alternate members may be added as appropriate.

## **Section C: Professional Behavior**

### **C.1.0 Division of Health Sciences Code of Student Conduct: Professional Integrity / Behavior Policy & Affective Domain Standards**

The Division of Health Sciences Faculty has identified criteria for professional performance under the standards of affective domain. Faculty has a legal and ethical obligation to inform students of behaviors that are inconsistent with these standards and to take action to ensure that any inconsistency is acknowledged and corrected by the student. Students are responsible for integrating an understanding of professional and ethical standards associated with their discipline in order to meet the criteria identified below (see standard 7 below). Faculty have the right and the responsibility to apply reasonable judgment to determine if a standard has or has not been met.

#### **Standard 1: Accountability**

*Students demonstrating accountability exhibit a willingness to accept responsibility for one's their own actions and the consequences of their behavior.*

Rationale: Within the health care disciplines, standards and expectations are defined by professional organizations and governing bodies. The burden of adhering to these standards lies with the individual who has opted to pursue a career in the health care field. As learners and novice practitioners, students do not have the authority or expertise to challenge standards, expect that their own interpretations will be considered or determine what is important and what is not.

The student is expected to satisfactorily complete all assigned duties within the time frame established by faculty, staff and administrators. This includes showing up for class, lab, clinical and meetings on time, following instructions and directives and being cognizant of variables that may require a shift in behavior or attitudes. When faculty provides feedback or institutes corrective action for failure to meet expectations or adhere to standards, the student is expected to accept the consequences of the behavior and take constructive, corrective action.

Students who shift blame, split faculty or college staff (go from one faculty to the next in an effort to elicit a desirable response), rely on others to meet all of their needs, refuse to acknowledge or accept their responsibilities as a student or healthcare professional and/or consistently demonstrate a lack of awareness of what is expected of them they have violated the standard for accountability and will be issued an affective domain warning.

#### **Standard 2: Adaptability/Flexibility**

*The student demonstrates the ready capacity to adapt to new, different or changing requirements or circumstances positively and constructively.*

Rationale: Health care systems require professionals who are prepared for change and ambiguity and are able to manage the shifting demands positively and constructively. Variables that drive change include the need for continuous improvement, advances in science and technology, economic and political factors, sociocultural factors, and the limitations of educational and healthcare systems.

Students who fail to manage change, engage in repeated patterns of seeking assignments and schedules that meet their individual or group needs and/or engage in negativity or the inability to adapt and adjust to shifting demands have violated the standard for adaptability and flexibility will be issued an affective domain.

### **Standard 2: Assertiveness/ Effective Communication**

*The student integrates an understanding of respect and accountability to express concerns and needs effectively.*

Rationale: Assertiveness and effective communication is necessary to function effectively in the context of healthcare teams. Quality care depends on healthcare professionals who can undertake careful analysis of priority needs, convey those needs clearly and directly, work toward mutual understanding and participate in appropriate action.

Assertiveness should not be confused with aggressive communication in which individuals attempt to exert power over or intimidate others through words and gestures. It is also not consistent with passive-aggressive communication where the individual attempts to assert their needs or rights indirectly through covert or manipulative behaviors. Students who engage in aggressive, nonproductive or destructive communication or who demonstrate a persistent pattern of conveying needs inappropriately will receive an affective domain warning for this standard.

### **Standard 3: Compassion and Empathy**

*The student who demonstrates compassion and empathy views situations from the perspective of the other person and takes appropriate actions to preserve the dignity and worth of others.*

Rationale: Healthcare requires committed individuals who are willing to step out of the confines of their own needs and experiences. The primary outcome of all actions is the provision of safe, effective care. Faculty, staff and administrators are focused on educational practices that ensure the preparation of individuals who will ultimately serve to meet patient needs. The individual needs of the health student are secondary to these essential legal and ethical obligations.

Student behaviors that may result in the student receiving an affective domain for failure to demonstrate compassion and empathy and include but are not limited to persistent attempts to put the needs of oneself above others, failure to recognize and respond to vulnerability, pain and suffering, failure to recognize resource limitations, failure to acknowledge or respect personal or professional boundaries and the inability to make the necessary sacrifices required to carry out caring behaviors.



#### **Standard 4: Diligence and Dependability**

*Individuals demonstrating diligence and dependability demonstrate a strong work ethic, persistence toward positive outcomes and consistency in the performance of all duties and responsibilities.*

Rationale: Goal orientation and reliability is essential in quality healthcare systems. Diligent and dependable healthcare professionals must maintain focus on proficiency and system effectiveness in order to meet patient needs.

Students who are repeatedly tardy or absent, fail to carry through with assigned duties and responsibilities (class, lab, clinical and other college obligations) and/or shift the burden of their problems or shortcomings onto others or engage in any other behaviors that suggest they are not dependable or diligent will receive an affective domain warning for this standard.

#### **Standard 5: Honesty and Integrity**

*Individuals demonstrating honesty and integrity demonstrate truthfulness and accuracy in all actions, conduct themselves in a fair and ethical manner, and work to continuously uphold the values of the profession and/or the discipline they are affiliated with.*

Rationale: Failure to maintain honesty and integrity in all actions can significantly impact the individual's ability to provide safe, effective care. Public trust in the honesty and integrity of persons providing healthcare services is paramount. Patterns of dishonesty and lack of integrity that are observed outside of the clinical setting alert faculty to the risk that these behaviors and attitudes will continue in patient care domains.

Students who engage in any dishonest or fraudulent actions, or who act in a manner that undermines public trust in the profession or the educational system that prepares them, have violated the standard for honesty and integrity. Even if the student does not personally engage in dishonest behavior, they may be accountable for withholding information that compromises the safety or reputation of anyone in the college or clinical setting. Examples of violations include, but are not limited to, taking credit for another person's actions, falsifying documentation, failure to admit when they do not know something, carrying out actions that exceed the student's knowledge or ability, carrying out interventions without the supervision of a clinical instructor or preceptor, spreading rumors, falsely representing others and/or acting in a manner that diminishes or threatens to diminish the reputation of others. Nothing in this standard negates the policy for academic dishonesty, which will result in immediate dismissal from the program.

#### **Standard 6: Respect**

*Individuals who meet this standard exhibit esteem and deference to other persons or entities that reflects awareness of accepted cultural and social norms.*

Rationale: Respect is essential to the development and maintenance of the essential partnerships required to provide safe effective care to individuals across healthcare settings. Respectful behavior relates to all other standards identified within this domain.

Individuals who do not meet this standard engage in a variety of behaviors that are inconsistent with membership in academic and healthcare communities. Examples include but are not limited to expecting others to adopt your own values, culture or beliefs onto others, failure to defer to persons in authority, failure to address others properly, failure to maintain the privacy of others, entitlement, failure to adhere to the chain of command, disruptive behavior in class, clinical, lab and meetings with faculty, challenging behavior, the use of nonverbal gestures or mannerisms that convey disrespect (e.g. tone, volume, violating personal space, eye rolling) and/or any image or representation of self or others that lacks awareness of social and cultural norms appropriate to the situation.

### **Standard 7: Other Standards Specific to the Discipline**

In addition to all of the standards outlined above, students are responsible for adhering to the codes of ethics/conduct maintained by the profession or discipline they are preparing to enter. Please refer to the addendum specific to your program to find information on where to access these standards. Faculty will exercise best judgment in determining if these violations will result in a warning or constitute egregious actions that necessitate withdrawal from the program.

**Each program will assess individual students for any or all of those behaviors listed above. If a student does not demonstrate these behaviors at appropriate levels in all domains it may negatively affect his or her grade and/or ability to complete the program.**

### **C.1.1 Affective Domain Standards of Performance Violation Policies**

Should faculty determine that a student's behavior violates one or more of the affective domain standards, an affective domain warning will be issued to the student. Upon discovery of the violation, faculty has up to one week to determine the best process for issuing the warning and notifying the student. In certain instances, the student may be withheld from clinical until the process is carried out and the student completes corrective action. Once a student is notified that they will be receiving an affective domain, the student has 48 hours to meet with the faculty.

The student will meet with faculty and be provided with the opportunity to review a written summary explaining the nature of the violation, any remedial action that is required and the implications for the student. Limited time will be provided for the student to address their concerns. A copy of the affective domain will go to the chair and will become part of the student's permanent record. Any affective domain violation may impact the student's ability to seek readmission, serve as a student representative or receive a favorable recommendation for professional or educational purposes.

Students may receive a maximum of two affective domain violations. A third affective domain violation constitutes grounds for dismissal from a Health Sciences program. Exceptions include instances where the student refuses to take corrective action, when the warning identifies multiple violations of standards and/or when the precipitating behavior or response is egregious (e.g. reckless, threatening, abusive or illegal). If in any case the violation may result in the dismissal of the student, a faculty committee will convene to review the situation.

Students always have the right to appeal any disciplinary action through the grievance process outlined in the college catalog and student handbook.

### **C.2.0 Cell Phone Policy**

In keeping with the “respect” affective domain above (Standard 6), the Division of Health Sciences adheres to the following policy regarding usage of cell phones during class time:

- Cell phones will be off during all class and lab time.
- Students and instructors will not make or receive cell phone calls during class and lab time.
- Students and instructors will not send or receive text messages during class and lab time.

In the case of an emergency where it is *vital* that the student or instructor keep a cell phone turned on, it should be in vibrate mode, and should be answered outside of the classroom or lab. *It is the student's responsibility to notify the instructor before the start of class that an emergency call is due and that the student's cell phone will be on. It is the instructor's responsibility to notify the students of this situation before the start of class that an emergency call is due and that the instructor's cell phone will be on.*

Texting, sexting, gaming, or use of a cell phone for any purpose during a class or lab other than for an emergency situation as stated above, will result in the student being asked to leave the class or lab for the remainder of class/lab time. The student is responsible for the material missed as well as for making up the time missed in class/lab. In addition, the student will receive a written warning indicating that the affective domain competency was not met.

### **C.3.0 Social Media/ Electronic Communication Policy**

For the purposes of this policy, social media/ electronic communication is defined as the use of email, electronic images, blogs, networking sites, applications, chat rooms, forums, video sites and other platforms. This policy applies to information posted in private or protected sites that can be accessed or shared by other users.

Faculty recognize that the use of social media as a means to communicate has become commonplace. The implications for healthcare providers and healthcare students are serious. The accessibility and efficiency of technology makes it easy to post content or images without

considering the proprietary, confidential or professional implications of such behavior.

The DHS holds the health science student to the highest standards for the responsible use of social media and electronic communication. Standards have been established that are aligned with the professional and ethical codes of each discipline.

The following behaviors are considered grounds for dismissal:

- The use of social media to make disparaging remarks about other students, faculty, staff or patients, the division, individual departments or clinical affiliates/partners and associated individuals and communities- even if nicknames or codes are used and/or identifying information appears to have been removed.
- The posting, distribution or dissemination of patient, student, facility, laboratory or classroom images or associated content (please note: taking pictures, videos or audio recordings in the classroom or clinical agency is strictly prohibited without the permission of all parties involved).
- The posting of any content or images that could in any way compromise the safety, reputation and/or professional image of the Health Sciences Department, staff, faculty or students.
- The posting of any content or images that could in any way compromise the safety, reputation and/or professional image of clinical affiliates, partners, communities or individuals associated with the Division of Health Sciences or its departments.
- Posting inappropriate, suggestive, abusive, violent, potentially threatening, derogatory or discriminatory content in networks, forums or platforms while identifying oneself as a student within the Health Sciences Division. Note: Identification as a Division of Health Sciences student can be established by both statements and images used in electronic and social media sites (e.g. wearing a uniform or posting a college, division or department logo).
- The use of any electronic communication or applications for the purpose of distributing or disseminating information that could be used to commit acts of academic dishonesty or fraud.
- The use of any electronic communication or applications to share or distribute proprietary academic or facility information including, but not limited to, policies, procedures or patient care tools.

Students are encouraged to view the following sites for tips for the responsible use of social media by healthcare professionals. Please note that nothing in these documents negates the policies established by the Division of Health Sciences.

<http://www.nursingworld.org/FunctionalMenuCategories/AboutANA/Social-Media/Social-Networking-Principles-Toolkit.aspx>

<https://www.ncsbn.org/2930.htm>

#### **C.4.0 Snow/Weather Emergency Policy**

If the College closes due to inclement weather or for any other reasons, all classes, clinical, and laboratory classes are cancelled. The student handbook and the College website ([www.massbay.edu](http://www.massbay.edu)) provide information regarding the various communications methods used by the College to notify everyone about the closure of the College and course cancellations.

Students are expected to attend their regularly scheduled classes, clinical and practicum when the College is open and no official announcement has been made to close the College or cancel classes.

Students who believe that conditions are unsafe for travel to class or clinical/practicum must call their instructor and the clinical agency to explain why they are not able to attend the regularly scheduled class or clinical/practicum.

If a student and faculty member arrive at a clinical site before the school closing is announced, students and faculty will remain at the clinical site until the closing is announced. Students will be expected to leave the agency, as soon as it is feasible to do so, after the closing announcement is made. Any student who is in a preceptor clinical experience will be notified of the College closure by each program Clinical Coordinator and/or Department Chair.

If the closing announcement occurs while students are reroute to classes and arrive as the College is closing, students will be expected to return home without attending any classes. Cancellations that occur while classes are in session, students and faculty will be expected to leave the campus as soon as possible after the announcement.

Make-up classes and clinical may occur at the discretion of each specific program within the Division of Health Sciences if the College had to close.

## Section D: Health and Immunization Requirements

Complete immunization and other required documentation are necessary for participation in a Health Sciences program. All immunization and CPR documentation is managed by Castle Branch, a secure, web-based platform. Students will receive instructions on how to create a personal profile called a “My CB Account” on [www.castlebranch.com](http://www.castlebranch.com) and upload their immunization and CPR documentation. Castle Branch will send the student email “alerts” when documentation is missing, incomplete, or in need of updating. The Division of Health Sciences faculty will refer to My CB data to determine whether a student is cleared for clinical. The following items are required by your selected program’s due date or within 30 days of the first day of the semester\* (see *Division of Health Sciences Program Grid* on [page 49](#)). **Failure to submit all of the forms below on time and in the proper format will jeopardize the student’s place in his/her program. Jeopardize means the student will not be allowed to start the program or will have to withdraw if they have started the program and documents are found to not meet submittal or compliance requirements.**

### **Immunizations:**

**Hepatitis-B** – One of the following is required: EITHER 3 vaccinations (0, one month, and five months) AND positive antibody titer (lab report or physician verification of results required) OR a positive antibody titer (lab report or physician verification of results required) OR documentation from a Healthcare Professional stating that you are a 'Non-Responder' to the vaccine. If series is complete but you still need a titer, submit your 3 vaccines and a new alert will be created for you to complete the titer. If the titer is negative or equivocal, new alerts will be created for you to receive 1 booster shot and provide a 2nd titer. If the 2nd titer results are negative or equivocal, you will be prompted to finish the series started with your booster shot and provide a 3<sup>rd</sup> Titer Result. If the 3rd titer result is negative or equivocal, you will be listed as a 'Non-Responder' to the Hepatitis B Vaccine. You must allow a minimum of 6 months to complete the series.

**2-Step TB/PPD Skin Test or Chest X-Ray or QuantiFERON-TB or T-Spot** - An initial 2-Step TB screening or negative Chest X-Ray is due by the published deadline for your program. This process for the 2-Step TB must be followed:

Step I: PPD (Purified Protein Derivative) “implant” is injected into the forearm. In 2 - 3 days, this implant must then be “read” as negative and documented by a clinician.

Step II: Within 3 weeks of completing Step I, students are required to return to the clinician’s office for a second “implant.” Again, the student is required to return in 2 - 3 days to have this implant read and documented as negative by the provider.

Once students have completed Steps I and II, only a single TB implant is required annually and must be updated each year to meet medical compliance.

If you have a positive TB/PPD result, submit documentation of a clear (negative) Chest X-ray.

A negative symptom review check by a health care provider is required annually thereafter.

**Tetanus & Diphtheria (Td) or Tetanus/Diphtheria/acellular Pertussis (Tdap)** - Documentation of a Tdap within the past 10 years or a Td booster within the past 2 years is required.

**Measles, Mumps, Rubella (MMR) 2-Dose Vaccine or Titers\*** - There must be documentation of either a positive antibody titer for all 3 components OR documentation of each vaccination. If titer is negative or equivocal, 1 booster plus a new titer is required.

**Varicella 2-Dose Vaccine or Titer\*** - There must be documentation of either a positive antibody titer for Varicella OR documentation of vaccination. If titer is negative or equivocal, 1 booster plus a new titer is required.

**Seasonal Influenza Vaccine (when available)** – Submit documentation of a flu shot administered during the current flu season OR a declination waiver. It is highly recommended to take the Flu vaccination as early as possible, but not later than October 31<sup>st</sup>. Students who cannot be immunized for the flu may be required to wear a mask in clinical settings.

**Report of Physical Examination & Immunization Record** - This requires the student’s signature authorizing the release of immunization information to clinical affiliating agencies. It also requires your physician to fill in confirmation of immunizations you’ve received and your physical exam results within the past year.

*\* Titers are laboratory blood tests to determine immunity to specific diseases. They are not immunizations.*

*Some clinical facilities where students will be assigned may require additional information and/or screenings prior to clinical placement. Examples include submission of social security number; Finger-printing; Drug-testing; CORI checks; CNA Registry Check, and additional immunizations.*

**Additional Notes:** Students who have previously taken the required MMR, Varicella, and Hepatitis B vaccines discussed above but who are unable to produce acceptable documentation, must have titers drawn. Students who refuse to be vaccinated due to religious or medical reasons may be in jeopardy of losing their seat in the respective program, as most clinical agencies will not allow unvaccinated students to participate in direct patient care. Some clinical facilities where students will be assigned may require additional information and/or screenings prior to clinical placement.

**Other Related Requirements:**

**CPR Certification** – The CPR certifications that are acceptable for health students are the “BLS for the Health Care Provider” from the American Heart Association (AHA), and the American Red Cross or the equivalent from the American Military Training Network. The copy must be front & back of the card and it has to be signed.

**Technical Standards** - Students must meet certain physical demands of performance so that they can successfully progress in their course work and ultimately graduate. This form is completed and signed by the student.

**National Background Check** – A national county records search is also conducted through Castlebranch.com.

**CORI and SORI forms** –The student must complete the CORI (Criminal Offender Record



Information) form to authorize a search of conviction and pending criminal case information under Standard Required Level I by the DCJIS (Department of Criminal Justice Information Services). As required, the student must provide the last six digits of their social security number on the CORI form and present a valid government issued ID (such as a license or passport) to verifying staff. The student must also complete the SORI (Sex Offender Registry Information) form. The CORI and SORI completion process will occur prior to the beginning of clinical/practicum experiences. If a student is late or is absent the day the CORI/SORI check is completed, it is his/her responsibility to complete and CORI and SORI request forms at the Division of Health Sciences Administrative Office. The Division of Health Sciences may conduct subsequent CORI checks within one year of the date the form was signed by the student. The Division of Health Sciences will first provide the student of written notice of the check. The student may also be required to complete subsequent CORI and SORI request forms according to clinical facility requirements. If a CORI and/or SORI Report is returned with a finding(s), it may or may not prohibit progression in a Health Sciences Program. CORI and/or SORI finding(s) will be forwarded to a College-wide Review Committee and the student will be invited to the review session. The final decision regarding the student's progression in a Health Sciences program will be determined at that time.

*\*30-Day Grace Period: Massachusetts Law states that students subject to 105 CMR 220.600 (Immunization Requirements for Post-Secondary Students) may have a 30-day grace period after enrolling before all required immunization records must be submitted. Upon entering a Health Sciences program, students may also have a 30-day grace period from the start of the semester before being subject to withdrawal from their program provided this does not interfere with the start of a required clinical rotation. If a program's clinical rotation starts sooner than 30 days, students in that clinical course must comply with the Division of Health Sciences' published deadlines in order to meet the standards of the clinical sites and begin their rotation on time. If the student does not have all records submitted and in the proper format by published deadlines or by the end of the 30-day grace period, whichever applies, he or she may be withdrawn from the program.*



## Section E: Clinical/Practicum Policies

### Introduction & Definitions

The purpose of this section is to present those policies and procedures which are most relevant to the clinical/practicum component of the programs. **The information contained in this handbook is subject to revision. Students will be given written notice of any amendments or revisions.**

The policies and practices are in addition to those stipulated in official College publications, the didactic policies portion of this handbook, and specific program course syllabi. **It is the policy of the College to reserve the right to add, withdraw, or revise any provision or requirement.**

To promote understanding of the scope of this handbook, the terms clinical, clinical fieldwork, clinical affiliations, and clinical rotations are used interchangeably and refer to the required clinical experiences of each of the programs.

Terms used for the various individuals involved with clinical education in the Health Programs include:

- **Clinical Instructor:** This term refers to any person recognized by the program as having the responsibility to supervise and assess the performance of any student while on clinical. This term is used interchangeably with **Clinical Supervisor, Clinical Faculty, Faculty and/or Clinical Preceptor**. Either the college or the clinical site may employ the individual with this title, dependent upon the program.
- **Clinical Coordinator (CC):** This term refers to the college faculty member responsible for securing and/or assigning clinical placements, and for assessing the student's clinical performance. Other terms used to describe this individual include: **Academic Fieldwork Coordinator (AFC), and Clinical Coordinator (CC)**. In the case of the ADN and PN programs the CC is the Program Chair.
- **Center Coordinator for Clinical Education (CCCE):** This term refers to the person employed by the clinical site whose responsibility it is to coordinate and supervise the clinical program at each site. Other terms used to describe this individual include: **Clinical Site Supervisor (CSS) and/or Clinical Instructor (CI)**.
- **Preceptor:** This term refers to the person on staff at clinical facility who supervises and instructs students in clinical experiences.

**Individual clinical sites may use different titles for those serving in the above positions within their institution. Refer to program appendices for this information.**

The clinical experience(s) is integrated within the overall program requirements. It provides practical experiences that augment laboratory and classroom learning and facilitates the transition from student to health care practitioner.

### **E.1.0 Professionalism**

The student will adhere to all accepted standards, policies, procedures, rules and regulations of the College, DHS, the program, the clinical site, and his/her profession's code of conduct. The student's performance and behavior must be safe and appropriate at all times. **Refer to the Professionalism and Affective Domain Standards and the program appendices for professional codes of conduct specific to each program/profession.**

### **E.2.0 Confidentiality**

Of equal importance to the confidentiality of student records is the unequivocal requirement to preserve the confidentiality of any and all patient / client medical information. It is the moral, ethical and legal responsibility of health professionals, and DHS students to insure that any and all medically related information is held in confidence. Client information should only be shared with appropriate clinical personnel within the context of that personnel's need to know for delivery of quality care. Students are required to adhere to any and all such policies while in the clinical environment. All students will receive from the College patient privacy training (HIPPA) prior to clinical.

### **E.3.0 Health Status**

It is the student's responsibility to insure that completed physical exam and immunization records are submitted to and approved by Castle Branch. (See Section D. Health and Immunization Requirements.) Failure to submit this information and other required documentation could affect clinical placement and ability to complete a Health Sciences program. Health forms are available on the MassBay Community College website.

Should the student's health status change in a manner that would restrict clinical participation after he/she has health clearance and has matriculated in a DHS program, he/she **MUST** immediately notify the Department Chair. The student must also submit to the CC a note from his/her primary care provider indicating the nature of the restriction and the date at which the restriction(s) must be imposed. To re-enter the clinical environment, the student must submit a note from his/her primary care provider to the CC affirming the removal of restrictions and the date at which the student can resume unrestricted participation in clinical activities. If a student is unable to resume his/her participation in the program, he/she should refer to the Division of Health Sciences' Medical Leave Policy (Section B.2).

### **E.4.0 Communicable Disease Statement**

Students have an ethical and legal responsibility to maintain a high standard of health. When providing care, the student should routinely and without discrimination take all precautions against exposure and transmission of communicable diseases consistent with the policies and procedures of the clinical site. The DHS student who has a communicable disease must inform the CC and appropriate clinical instructor. Should there be any questions as to potential restrictions or

precautions relating to clinical participation, the student may be required to seek medical advice and documentation from his/her primary care provider.

### **E.5.0 Emergency Care**

The College's contractual agreement with clinical agencies states that emergency care will be provided by the clinical facility if that facility maintains an emergency room. Furthermore, the agreement stipulates that the student will assume the cost of such emergent care. Therefore, students should refer to their health insurance policy for coverage in the event of an emergency in the clinical area.

### **E.6.0 Latex Sensitivity & Allergy Policy**

Latex products are common in the medical environment. Allergic responses to latex can range from irritation and allergic contact dermatitis to the possibility of life-threatening anaphylactic shock. Guidelines have been established at MassBay Community College to provide information to potential allied health and nursing program applicants/students who are sensitive to latex.

Latex free environments are seldom available in either clinical or academic settings. Therefore, an individual with a latex allergy/sensitivity wearing alternative vinyl or nitrile gloves is still exposed to latex residue of others working in the area or to latex present in the equipment, models and mannequins. Although latex gloves are the most prominent source of latex allergen, many other products contain latex including, but not limited to:

- Blood pressure cuffs, medication vials, syringe connectors and wound drains;
- Stethoscopes, catheters, respirators, and goggles;
- Oral and nasal airways, surgical masks, and electrode pads;
- Endotracheal tubes, syringes, IV tubing, and tourniquets.

Any student who has or develops symptoms consistent with latex allergy/sensitivity is advised to consult a qualified allergist for evaluation prior to enrollment in the Division of Health Sciences. If a student is already admitted to a Health Science program he/she must consult a qualified allergist for evaluation of latex allergies should signs and symptoms develop. All such evaluations are at the student's expense. If it is determined that a student suffers from a latex sensitivity/allergy and the student desires an academic adjustment, including auxiliary aids or service, or reasonable accommodation due to this condition, the student must contact the College's Office of Disability Services.

As with all matters related to one's health, the utmost precautions should be taken by the student to reduce the risk of exposure and allergic reactions. This may include the carrying of an epi-pen by the individual or other precautions as advised by the student's health care provider. It is the responsibility of the student with a latex sensitivity to understand and acknowledge the risks associated with continued exposure to latex during a clinical education, fieldwork, and healthcare career, even when reasonable accommodations are made and to regularly consult with his/her health care provider.

In an effort to minimize the presence of latex in the Division lab facilities, MassBay Community College will provide latex-free and powder-free gloves in all College lab facilities. Should a

clinical agency site NOT provide latex-free gloves, the College will provide latex-free gloves for clinical use. Additionally, the College is taking the following steps to minimize latex in its lab facilities: 1) *replacement of all gloves in use by faculty and students with nitrile or vinyl gloves;* 2) *maintaining an inventory of products/equipment and supplies in each health science program that contain or could contain latex;* and 3) *future purchasing of latex-safe supplies and equipment whenever possible.*

As with all students in the Division of Health Sciences programs, a student with a latex sensitivity or allergy is required to satisfactorily complete all requirements and technical standards of the program to which they have been accepted.

### **E.7.0 Blood and Body Fluid Exposure Policy and Procedure** **Occupational Exposure Guidelines**

According to the Centers for Disease Control and Prevention, the primary means of preventing occupational exposure to HIV and other blood borne pathogens is the strict adherence to infection control standards, with the assumption that the blood and other body fluids of all individuals is potentially infectious. The routine utilization of barrier precautions when anticipated contact with blood or body fluids, immediate washing of hands or other skin surfaces after contact with blood or body fluids, and careful handling/disposing of contaminated sharp instruments or other equipment during and after use is recommended.

For more information: <http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5409a1.htm>

### **Faculty & Student Responsibilities**

1. Receive agency/unit orientation regarding infection control policy and post exposure management procedures.
2. Utilize appropriate barrier precautions during the administration of care to all individuals.
3. Utilize appropriate safety devices for the handling/disposing of contaminated sharp instruments or other equipment.
4. Immediately report accidental exposure to blood or body fluids.
5. Initiate immediate intervention of the management of accidental exposure to blood or body fluids.
6. Provide health education to individuals and groups regarding the prevention, transmission and treatment of HIV.

### **Accidental/Occupational Exposure Procedure**

In the event of an accidental/occupational exposure to blood or body fluids, students and faculty should:

1. **Immediately** wash the area of exposure with soap and water.
2. **Immediately** report the incident to instructor and/or supervisory personnel.
3. Complete appropriate documentation according to agency standards and provide a copy of the report to the Division of Health Sciences department chair. Another copy will be kept in the student's file.

4. Complete the Division of Health Sciences' Incident Report. This form is included as an appendix in this handbook; this **must be completed within 24 hours of the incident.**

**PLEASE NOTE:**

1. Decisions regarding post-exposure management, prophylaxis, and follow-up will be at the discretion of individual and his/her health care provider.
2. The injured party will be financially responsible for emergency treatment, prophylaxis and follow-up care resulting from the incident.

**E 8.0 Accommodation for Disability Conditions**

DHS students who request accommodations in lecture, lab, or clinical due to a documented disability must inform the College Office of Disability Resources. The Office of Disability Resources, the Department Chair and the Academic Coordinator of Clinical Education will determine if the accommodations are appropriate and reasonable. This means that the accommodations do not compromise either the essential duties/student teaching responsibilities at the clinical/practicum site or the requirements of the program's competency based educational equivalents. (See Technical Performance Standards description and form in the Health and Immunization Requirements section of this Handbook.)

**E 9.0 Clinical Sequence and Placement**

- E.9.1 The CC or Program Chair determines the clinical placement of students. The primary consideration in arranging clinical placements is the academic integrity and value of the educational experience. A student shall not be placed at a site if he/she or an immediate relative volunteer or work in a department or unit within that site which is similar to his/her chosen field of study. When possible, advance notice will be given so that the student may make appropriate arrangements and clinical practicum sites may prepare for the student.
- E.9.2 Contacting and arranging for clinical affiliate placements is the purview of the Program Chair and/or CC. Students **shall not** contact a present or prospective clinical site without obtaining prior approval from the CC or Department Chair.

**E.10.0 Transportation, Housing, and Parking Fees**

The student is responsible for transportation to and from the clinical/student teaching sites as well as any parking fees. For programs with out-of-state clinical/student teaching sites, students are responsible for the cost of housing, transportation, meals, and other expenses unless otherwise provided.

**E.11.0 Professional Appearance - Dress Code**

While each program may have specific uniform requirements, all programs have the following expectations. The student must at all times:

- E.11.1. appear neat, clean, and well-groomed.
- E.11.2. maintain good personal hygiene.
- E.11.3. adopt a conservative approach to dressing, minimizing jewelry and cosmetic/ fragrances, not wearing clogs, open-toed shoes or sandals, nor extremely loose-

fitting or tight clothing.

E.11.4 wear MassBay student identification pin with name and his/her program of study.

E.11.5 remove personal pagers and/or cell phones before entering the clinical site.

E.11.6 limit body piercings to small, post-type earrings. Only one earring in each ear is permitted. No other body piercing jewelry is permitted in the clinical and laboratory settings.

E.11.7 cover visible tattoos upon request in the clinical setting.

E.11.8 keep fingernails short and clean. Clear nail polish may be worn. Artificial fingernails are not permitted.

**Refer to individual program appendices for specific requirements.**

**E.12.0 Attendance**

Attendance during the clinical affiliation is mandatory. Students are expected to report promptly consistent with the schedule of the site and clinical faculty. It is unacceptable to schedule personal appointments during clinical hours. Tardiness and early departures are also unacceptable. If a student for any reason misses more than one-quarter of the scheduled clinical/student teaching day, he/she will be considered absent for the whole day.

E.12.1 Should illness or any other reason prevent the student from reporting to the clinical facility on time, the student must notify his/her clinical instructor, CC, or appropriate College office at least 30 minutes before the scheduled start of the clinical day. Failure to notify either the clinical instructor or College of an absence is a serious breach of professional conduct.

E.12.2 If a student is ill and in danger of exceeding the attendance policy of his/her program, a note from his/her health care provider must be submitted to the Clinical Instructor at the affiliate and to the CC at the college. The student will not be permitted to resume the clinical experience without a note from the health care provider stating that the student is capable of resuming (without restriction) all activities associated with the clinical education component of the program.

E.12.3 Any clinical skill acquisition or experiences missed due to absence, tardiness, or early departure must be made up at the discretion of the clinical instructor, and approved by the CCCE and CC. The determination as to which alternative assignments and locations may be required to make up missed days/hours and/or substitute for any missed clinical skill acquisition or experiences will be made at the discretion of the clinical affiliate, CC, CI, and/or Dept. Chair at the College.

**Refer to the appendices for individual program policies and/or syllabi.**

**E.13.0 Evaluation of Clinical Performance**

Each program develops instruments and assessments used to evaluate student clinical performance. Refer to appendices for the clinical grading policies for the respective program. The

CC /CI/Dept. Chair will issue grades consistent with the policy contained in the College catalog and course syllabus. In most programs, clinical experiences are graded pass/fail. Grades Clinical grades below the programs specific minimum will result in withdrawal from the program. Refer to minimum grade chart include in section A2. Students who are having difficulty meeting the established learning objectives of the clinical experience are encouraged to seek prompt advice and/or assistance from the CCCE, CC, and /or the clinical instructor/faculty to develop a learning plan to address concerns.

E.13.1 Unsatisfactory clinical performance is defined as performance within the clinical environment which demonstrates:

E.13.1.1 consistent pattern of weakness in one or more clinical behaviors/skills objectives

E.13.1.2 failure to demonstrate progressive mastery of clinical behaviors and objectives

E.13.1.3 performance requiring more guidance and instruction than that required by other students at the same level.

If a student does not comply with the academic, professional, or clinical listed in this policy manual, or the MassBay Student Handbook, a DHS administrator or faculty will issue a written warning. The student must sign the warning. NOTE: **Signature on the warning** does not constitute the student's agreement with the content of the warning. Space is provided for the student to indicate his or her non-agreement and comments. The original signed copy of the written warning will be placed in the student's record and a copy will be given to the respective program chair. Should the student refuse to sign the form, the faculty will obtain a witness signature attesting that the notice was given to the student.

#### **E.14.0 Clinically Unsafe Behavior**

The following are examples of clinically unsafe behavior:

E.14.1 Any incident in which the student's action has or may seriously jeopardize patient care and/or safety. Examples such actions include, but are not limited to:

E.14.1.1 errors of omission/commission in patient care;

E.14.1.2 any pertinent intervention which places another in danger;

E.14.1.3 failure to report changes in patient status promptly;

E.14.1.4 acting outside of the legal and ethical role of the student as defined by professional standards;

E.14.1.5 abusive behavior;

E.14.1.6 not being accurate regarding any personal conditions that may jeopardize patient care or about the student's own learning needs;

E.14.1.7 repeated and/or consistently unsatisfactory clinical performance which compromises quality of care when the student also demonstrates one or more of the following:

E.14.1.7.1 multiple failed assignments, lab assessment scores or didactic average that falls below the acceptable standard set in the course syllabus.

When a faculty member determines that a student has been clinically unsafe,



1. the student will be immediately removed from clinical and lab settings.
2. the student will be notified immediately that they have been given an unsafe clinical grade and will not be permitted to return to clinical or lab. If the student is in another health course with a clinical component, the student will not be allowed to attend the clinical or lab unless the faculty member and department chair determine that patient safety is not at risk. Written notice by the faculty member will be given to the student documenting the reasons for the clinically unsafe determination.
3. the faculty will notify the department chair and appropriate academic administrator that a failure grade has been issued.

The grade submitted for the course where the unsafe clinical practice occurred will be an F. Any student who receives an F due to unsafe clinical practice will not be eligible for re-admittance to a health program. The student may appeal the unsafe clinical grade by following the Grade Appeal Process described in the MassBay Student Handbook.

### **E.15.0 Drug Screening Policy**

All current students and those admitted into a Division of Health Sciences educational program may be required to provide proof of a negative nine-panel urine drug screening in order to be eligible for placement in a clinical rotation. Drug screening must be done at an approved testing site within 30 days before the start of a clinical rotation during each clinical semester. Clinical rotation start dates vary by program. Students taking prescription or over-the-counter medications should provide the testing facility with a list of these medications at the time of testing. All cost associated with drug testing is the responsibility of the student. Some health care facilities which provide clinical sites may also have policies on random and scheduled drug-screenings of students. Students must comply with clinical facility policies. If there is a positive drug result from the clinical, students may be withdrawn from the program.

Students who do not successfully complete this drug screening within the 30 day time frame will be withdrawn from the Division of Health Sciences program in which they are enrolled. All drug screening results will be sent to the Dean of Health Sciences in a confidential manner. Students will only be notified if their screening results are positive.

Students who do not pass the drug screening test the first time have the right to request a second drug screening at an approved testing site within the 30-day period prior to their clinical rotation. The student will be notified by the Dean of Health Sciences if the second test is positive. If the second drug test is negative, the student will be placed in a clinical rotation. If the second test is positive, the student will be withdrawn from a health program. The student can appeal to the Dean of Health Sciences for a hearing regarding withdrawal from a health program due to a positive drug screening test.

Any student who is withdrawn from a Division of Health Sciences program due to a positive drug test may reapply based on current College and Division of Health Sciences readmission policies.





## Section III: Division of Health Sciences Forms

## Division of Health Sciences Technical Standards Form

It is necessary for all Division of Health Sciences students to review and sign the following. **Please circle your program from the list below**, then sign and return as directed.

ADN Associate Degree Nursing	CPT Central Processing Technology
EMT Emergency Medical Technician	PM Paramedicine
NA Nursing Assistant	PN Practical Nursing
PB Phlebotomy	ST Surgical Technology
RT Radiologic Technology	

TECHNICAL PERFORMANCE STANDARDS		ADN	PN	PB	PM/EMT	NA	RT	ST/CPT
MUSCULAR And SKELETAL	Work at areas located at various positions and elevation levels for durations of at least 30 minutes at a time alternating with the need to make frequent changes in body positions	X	X	X		X	X	
	Maintain a standing body position for a minimum of two hours, while performing work related functions	X	X	X		X		X
	Transfer and position movement dependent patients from / to various positions and surfaces, such transfer / positioning frequently requiring a minimum of a 50 lb. weight bearing load	X	X	X	X	X	X	X
	Move / push / pull / reach equipment and accessories of various weights and sizes from a variety of heights to a variety of heights	X	X	X	X	X	X	X
	Perform CPR on adults, infants, and toddlers	X	X	X	X	X	X	X
	Detect and distinguish between variations in human pulse, muscle spasm & contractions, and / or bony landmarks	X	X	X	X	X	X	
	Safely guide patient in ambulation on level as well as inclined surfaces and stairs, often while the patient is using a variety of assistive devices. In either case, guard patient against falls or other injury	X	X	X		X	X	
	Apply graduated manual resistance to patient's individual muscular actions in order to determine patient's strength or to apply exercise techniques for stretching or strengthening	X	X	X		X		
	Quickly move from one site to all other areas of the health care facility	X	X	X	X	X	X	
AUDITORY	Detect and appropriately respond to verbally generated directions and acoustically generated monitor signals, call bells, and vital sign instrumentation output	X	X	X	X	X	X	X
VISUAL	Detect and discriminate between various human gestures and non-verbal responses	X	X	X	X	X	X	X
	Detect and discriminate between large and small gradations in readings on dials, graphs, and displays, such detection made at various distances from the source.	X	X	X	X	X	X	X
	Read printed and computer screen manuscript text	X	X	X	X	X	X	X
	Discern a patient's physical status at distances in excess of 10 feet and in subdued lighting	X	X	X	X	X	X	
	Detect and discriminate between the range of image brightness						X	

	values present on radiographic and computer screen images							
MANUAL DEXTERITY & FINE MOTOR SKILLS	Manipulate/adjust various types of switches, levers, dials, control, and/or hand-held equipment and/or in various combinations	X	X	X	X	X	X	X
	Hold and use a writing instrument for recording patient history or pertinent information	X	X	X	X	X	X	X
	Apply gown, gloves, and mask for Universal Precautions when needed	X	X	X	X	X	X	X
VERBAL	Articulate clearly to a patient in conversational English regarding therapeutic goals and procedures	X	X	X	X	X	X	X
OLFACTORY	Detect changes in environmental odor and (temperature)	X	X	X	X	X	X	X
ENVIRONMENTAL	Function within environments which may be stressful due to fast pace, need for accuracy, and distracting sights and sounds	X	X	X	X	X	X	X
	Recognize that the academic/clinical environment includes exposure to disease, toxic substances, bodily fluids, and/or radiation	X	X	X	X	X	X	X
	Exhibit social skills necessary to interact effectively with those of the same or different cultures with respect, politeness, and discretion	X	X	X	X	X	X	X
	Maintain cleanliness of personal grooming consistent with close personal contact	X	X	X	X	X	X	X
	Function without causing harm to self or others if under the influence of prescription or over the counter medications	X	X	X	X	X	X	X

### Technical Performance Standards Informed Consent

1. I have received, read and understand the meaning of MassBay Community College's Health Professions Technical Performance Standards.
2. I understand that the Standards indicated, as applicable to my intended program of study, relate to the full array of essential performance competencies inherent to my chosen program of study.
3. I also understand that in order to successfully graduate from the program of my choice, I must be able to satisfactorily perform the tasks listed in the standards.
4. It is my responsibility to submit a request to the College's Disability Resources Office should I wish to receive a determination of reasonable accommodation in performing any of the stated standards.
5. Lastly, I understand that there may be instances where a reasonable accommodation for a method of satisfying the required performance tasks may not be possible.

Student Name (print): \_\_\_\_\_ ID#: \_\_\_\_\_ OR SS#: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**MASSBAY COMMUNITY COLLEGE  
DIVISION OF HEALTH SCIENCES  
Performance Notification Form**

Student's Name \_\_\_\_\_

Faculty / Administrator's Name \_\_\_\_\_

Date \_\_\_\_\_

It has come to the attention of the faculty member / administrator named above that your performance has fallen below acceptable standards or your behavior has violated one or more of the policies of the program, division, college and/or clinical affiliate. The specific lapse in performance level / policy infraction is as follows:

If appropriate corrective action is possible, you must satisfy the following expectancies by any dates / time frames specified:

Should you fail to effect the above requirements as stipulated by the dates / time frames stipulated, the following consequence will occur:

FACULTY / ADMINISTRATOR SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Student Comments:

I agree with the above described assessment and prescribed action:  yes  no

STUDENT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

(NOTE: Student signature indicates only that the student was given this notification, not that the student agrees with the content of the notification.)

WITNESS SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

(NOTE: Witness signature verifies that this notification was given to the student, but the student refused to sign as required)

**MASSBAY COMMUNITY COLLEGE  
DIVISION OF HEALTH SCIENCES  
Counseling Record Form**

**Date:** \_\_\_\_\_

**Student:** \_\_\_\_\_ **Student ID#:** \_\_\_\_\_

**Faculty/Staff/Advisor Name:** \_\_\_\_\_

**Program:** \_\_\_\_\_ **Course:** \_\_\_\_\_

**Present at Meeting:** \_\_\_\_\_

**Discussion:**

**Student Comments:**

**Recommendation(s):**

**Referral(s) to College Services?**    **yes**                      **no**

**Faculty/Staff/Advisor Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

4/15/10 kcc

**MASSBAY COMMUNITY COLLEGE  
DIVISION OF HEALTH SCIENCES  
Affective Domain Standards of Performance Warning Form**

**Date:** \_\_\_\_\_ **Student:** \_\_\_\_\_ **Student ID #:** \_\_\_\_\_

**Faculty/Advisor Name:** \_\_\_\_\_

**Program:** \_\_\_\_\_ **Course:** \_\_\_\_\_

**Notice of Affective Domain Violation (Check One):** #1 \_\_\_\_\_ #2 \_\_\_\_\_ #3 \_\_\_\_\_

**Nature of Violation:**

**Affective Domain Standard(s) Violated:**

**Remediation Plan (Violation #1 & #2):**

**Student Comments:**

**Faculty/ Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Copy of Document Sent to Program Chair and Advisor:**

**Program Chair** \_\_\_\_\_ **Date Copy of Document Sent** \_\_\_\_\_

**Advisor** \_\_\_\_\_ **Date Copy of Document Sent** \_\_\_\_\_

4/21/10 kcc

**MASSBAY COMMUNITY COLLEGE  
DIVISION OF HEALTH SCIENCES  
Academic/Lab/Clinical Alert FORM**

Student Name \_\_\_\_\_

Course \_\_\_\_\_

Instructor \_\_\_\_\_

The Division of Health Sciences faculty wants to provide you with the assistance you need to succeed in your program. We are concerned about your progress and urge you to take the step (s) indicated below immediately.

<b>Academic Concern</b>	<b>Attendance / Clinical Concern / Professionalism</b>
<input type="checkbox"/> The grade you earned on Quiz/exam _____ was unsatisfactory  Date: _____ Grade _____  <input type="checkbox"/> <b>WARNING:</b> Your current test grade average indicates you are in danger of not progressing to the next level. Current test average _____	<input type="checkbox"/> You have had one class/lab/clinical absence on _____  <input type="checkbox"/> <b>WARNING:</b> You are in danger of being administratively withdrawn (AW) due to excessive absences  <input type="checkbox"/> Your clinical performance on _____ was unsatisfactory  <input type="checkbox"/> You have violated the Affective Domain Standards of Performance in the classroom/lab/clinical setting on _____

**Recommended Activity:**

- See me in my office after class or during office hours by (date) \_\_\_\_\_ Office # \_\_\_\_\_ Phone: \_\_\_\_\_
- Complete the prescribed remediation lab \_\_\_\_\_ by (date) \_\_\_\_\_
- Attend open lab for review \_\_\_\_\_ skills by (date) \_\_\_\_\_
- See the Academic Tutor for content including math review by (date) \_\_\_\_\_
- Utilize appropriate college resources (counseling/disability) \_\_\_\_\_

---

Instructor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Comments:**

Did the student come for help by the date indicated?     YES             NO

**Comments:**

Students Signatures:

**Comments:**



**MASSBAY COMMUNITY COLLEGE  
DIVISION OF HEALTH SCIENCES  
Report of Exposure, Injury, or Incident Form**

**To be completed by the clinical supervisor and student**

Name of Individual involved: \_\_\_\_\_

Immediate Faculty/Preceptor: \_\_\_\_\_

Clinical facility where exposure occurred: \_\_\_\_\_

Date/Time of Exposure: \_\_\_\_\_ Type: Needle Stick:\_\_\_\_ Splash:\_\_\_\_  
Mucous Membrane\_\_\_\_\_ Other:\_\_\_\_\_

Describe how the incident occurred: \_\_\_\_\_

---

---

Personal Protective Equipment Being Used \_\_\_\_\_

---

---

Actions taken (decontamination, clean-up, reporting, counseling, etc.) \_\_\_\_\_

---

---

Date and Time Incident was reported to Infection Control/Occupational Health: \_\_\_\_\_

Name/Title of Individual to whom the incident was reported: \_\_\_\_\_

---

CHECK LIST

Student was provided with the *Division of Health Sciences Blood and Body Fluid Exposure Policy and Procedure*

I have received and read the *Division of Health Sciences Blood and Body Fluid Exposure Policy and Procedure guidelines*. I understand that I have been advised to contact my health care provider for care that is needed as a result of the exposure that has occurred.

\_\_\_\_\_  
Student Name (Printed) and Signature

\_\_\_\_\_  
Date

**MASSBAY COMMUNITY COLLEGE**

**Incomplete Grade Request Form**

**Section I and II** (to be completed by the Student)

Student Name: \_\_\_\_\_ Major: \_\_\_\_\_

Student ID Number: \_\_\_\_\_ Semester and Year: \_\_\_\_\_

Instructor: \_\_\_\_\_ Course Name and Number: \_\_\_\_\_

Reason(s) for not completing the course work before the end of term:  Health  Other

Brief description (submit all supporting documentation):

Student Signature: \_\_\_\_\_

**Section III** (to be completed by the Instructor)

Instructor's Name: \_\_\_\_\_

Assignments and/or exams needed to complete this course:

- |          |          |
|----------|----------|
| 1. _____ | 3. _____ |
| 2. _____ | 4. _____ |

Instructor's signature: \_\_\_\_\_

Completion Deadline: \_\_\_\_\_

Student's signature indicating acceptance of the terms: \_\_\_\_\_

**Section IV** (to be completed by the Dean)

Dean: \_\_\_\_\_  Approved  Not Approved

**Section V**

Date Received by Registrar: \_\_\_\_\_

Cc. Division Office  
Student, Instructor

# APPENDIX A: Health Sciences Program Grid

Program	Day	Evening	Weekend	Fall Start	Spring Start	Summer Start	Length of Program	Credits/Type	Health Requirements Deadline
Central Processing Technology		X		X	X	X	1 Semester	4 credits Certificate	August 30 <sup>th</sup> (for Fall), January 3 <sup>rd</sup> (for Spring), June 7 <sup>th</sup> (for Summer)
Certified Nurse Assistant	X		X	X	X	X	8 Weeks	Non-Credit Certificate	October 24 <sup>th</sup> (for Fall), March 1 <sup>st</sup> (for Spring), July 1 <sup>st</sup> (for Summer)
Emergency Medical Technician (EMT)	X	X		X	X	X	1 Semester	8 credits Certificate	August 30 <sup>th</sup> (for Fall), February 1 <sup>st</sup> (for Spring), June 1 <sup>st</sup> (for Summer)
Medical Coding		X		X			2 Semesters	27 credits Certificate	Within 30 days of registration
Medical Office Administrative Assistant		X		X			2 Semesters	23 credits Certificate	Within 30 days of registration
Associate Degree Nursing (Day)	X			X			4 Semesters	72 credits Associate Degree	August 1 <sup>st</sup>
Practical Nursing (Day)	X			X			2 Semesters Intercession 1 summer	49 credits Certificate	August 1 <sup>st</sup>
Paramedicine (Day)	X			X			2 Semesters 1 summer	37 credits Certificate	August 30 <sup>th</sup>
Paramedicine (Evening)		X			X		3 Semesters 1 summer	37 credits Certificate	March 15 <sup>th</sup>
Phlebotomy	X		X	X	X	X	1 Semester	7 credits Certificate	August 30 <sup>th</sup> (for Fall), March 1 <sup>st</sup> (for Spring), May 20 <sup>th</sup> (for Summer)
Radiologic Technology (Day)	X			X			4 Semesters and summer	78 credits Associate Degree	August 1 <sup>st</sup>
Radiologic Technology Flex (Evening)		X	X		X		9 Semesters	78 credits Associate Degree	August 1 <sup>st</sup> before Year 2
Surgical Technology (Day)	X			X			3 Semesters	37 credits Certificate	August 30 <sup>th</sup>
Surgical Technology (Evening)		X			X		3 Semesters	37 credits Certificate	February 6 <sup>th</sup>

Revised June 2016

# APPENDIX B: Division of Health Sciences Administration and Faculty

**Division of Health Sciences Administration and Faculty**

**Lynne Davis, Ed.D., R.T. (R), Dean  
508-270-4022**

<b>Support Staff</b>		
Kerry Batte, B.S. Staff Associate	kbatte@massbay.edu	508-270-4022
Rachel Greene, B.S. Administrative Assistant	rgreene@massbay.edu	508-270-4024
Stephen Hartry, B.B.A. Health Data Coordinator	shartry@massbay.edu	508-270-4293
Rebecca Wasdyke, M.A., M.A.T. Clinical Compliance and Special Projects Coordinator	rwasdyke@massbay.edu	508-270-4028
Lise Johnson-Kinahan, NRP, I/C Coordinator of Skills and Simulation Laboratories	ljohnsonkinahan@massbay.edu	508-270-4034
<b>Nursing Department Patti-Ann Collins, DNP, MSN/MBA, RN, Director of Nursing 508-270-4283      pcollins@massbay.edu</b>		
Patty Bartzak, DNP, RN, CMSRN	pbartzak@massbay.edu	508-270-4043
Joyce Brazee, M.S.N., A.P.R.N.-B.C., FNP-BC	jmancini@massbay.edu	508-270-4061
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Mary Hacker-LeCount, M.S.N., R.N.	mhackerlecount@massbay.edu	508-270-4026
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Deborah Lovewell, M.S.N., R.N.	dlovewell@massbay.edu	508-270-4272
Nancy Popeo, M.S.N., R.N.	npopeo@massbay.edu	508-270-4268

Judy Rolph, M.S.N., R.N.	jrolph@massbay.edu	508-270-4042
Gabriela Zakak, M.S.N./Ed., R.N. Chair, Practical Nursing	gzakak@massbay.edu	508-270-4260
<b>Emergency Medical Services Programs (Paramedicine &amp; EMT) Department</b>		
Kimberly Altavesta, M.Ed., N.R.P., I/C Department Chair	kaltavesta@massbay.edu	508-270-4037
<b>Radiologic Technology Department</b>		
William Cote, M.A., R.T. (R), (CT)	wcote@massbay.edu	508-270-4263
Karen Dow Hansen, M.Ed., R.T (R) Department Chair	kdow@massbay.edu	508-270-4046
Karen Steinhoff, B.S., R.T. (R) Clinical Coordinator	ksteinhoff@massbay.edu	508-270-4064
<b>Surgical Technology Department</b>		
Richard Clark, MS, CST Department Chair	rclark@massbay.edu	508-270-4256

APPENDIX C:  
Radiologic Technology Program-Specific  
Policies and Student Acknowledgement Form

## **Program Overview**

The Radiologic Technology Program's full time Day Option is a twenty-one month (five sequential semesters) course of study leading to an associate's degree. Students are admitted in the fall, with a limited number of openings each year. The part time Evening (Flex) Option starts every spring and is eight semesters long. Students complete the didactic portion of the program first and then the clinical portion in the last three semesters.

The Radiologic Technologist is a member of the health care team who works directly with the patient and the physician in performing a wide variety of diagnostic imaging procedures. Radiographic Technologists are employed in hospitals, clinics, and various imaging centers.

Proficient in the knowledge of computed radiographic exposure, anatomy, and patient positioning, radiologic technologists have many career paths and opportunities for advancement into more progressive imaging modalities.

## **Mission**

The mission of the Radiologic Technology Program at MassBay Community College is to provide a quality learning environment that will produce competent and compassionate, qualified professionals for the entry level practice of Radiologic Technology.

In support of a student-centered learning environment, the Radiologic Technology Program provides a strong didactic base as well as a clinical education component, to ensure practical skill development of performance and professional standards through the use of:

- Didactic studies aligned with **ARRT** curriculum guidelines for successful achievement of national licensure;
- Clinical rotations ensuring a full scope of entry level practice and skill attainment;
- Laboratory simulations allowing for the development of critical thinking and problem solving strategies; and
- Opportunities for civic engagement and professional development.

Engaging our students in an educationally supportive environment will provide the student with the knowledge and skill set to

- Deliver entry level exam competency
- Demonstrate effective communication strategies
- Appropriately use critical thinking and problem solving skill
- Serve the needs of the changing community by engaging in professional development and growth

**Goal 1: Students will be clinically competent.**



Student Learning Outcomes:

- Students will demonstrate appropriate exam specific positioning skills and use of technical factors.
- Students will practice effective radiation protection on patients, self and others.

**Goal 2: Students will communicate effectively**

Student Learning Outcomes:

- Students will demonstrate effective written communication skills.
- Students will demonstrate ability to communicate with patients.

**Goal 3: Students will apply effective critical thinking and problem solving strategies.**

Student Learning Outcomes:

- Students will be able evaluate quality of image produced and cause for repeat.
- Students will be able to identify and correct positional errors on images.

**Goal 4: Students will demonstrate professionalism.**

Student Learning Outcomes:

- Students will demonstrate a professional and respectful attitude to patients and others.
- Students/graduates will pursue professional growth by participating in professional development opportunities.

**Program Effectiveness Data**

The performance of this program is reported through program effectiveness data as defined by the Joint Review Committee on Education in Radiologic Technology (JRCERT):

**Completion Rate:**

This is the number of students that begin the program divided by the number of students that actually complete the program. This is an annual measurement.

- 80% of the students who enter the program will complete.

**Credentialing Examination Pass Rate:**

This is the number of students that pass the American Registry of Radiologic Technologists (ARRT) certification examination on the first attempt. This data is averaged over a five-year span. Consistent with JRCERT standards:

- 75% of the students who graduate the program will successfully pass on the first attempt.

**Job Placement Rate:**

This data is collected to determine the number of students that gain employment within twelve months of graduation versus the number that graduate. This data is averaged over a five-year span. Consistent with JRCERT standards:

- 75% of the students who graduate the program and are seeking employment will be employed within 12 months of graduation

### **Licensing**

Some states require technologists to obtain state radiography licenses in order to work in that state. Massachusetts is such a state. The Massachusetts Radiation Control Program will only issue radiography licenses to those individuals who are graduates of JRCERT accredited programs. Graduation from a JRCERT accredited program assures that you are competent to perform diagnostic imaging procedures and you have the knowledge and skills necessary to provide safe, high quality patient care. Successful completion of the national certification exam offered by the ARRT qualifies graduates of JRCERT accredited programs for Radiography licensure in the Commonwealth of Massachusetts.

### **Accreditation**

[The Joint Review Committee on Education in Radiologic Technology](#)

JRCERT

20N Wacker Drive, Suite 2850

Chicago, IL 60606-2901

312.704.5300

### **Policy for Potential Non Compliance with the JRCERT Standards**

Accredited programs in Radiologic Technology must meet and maintain specific curricular and educational standards. The JRCERT is the accrediting agency for Radiologic technology. Students receive a copy of the current *Standards for an Accredited Education program in Radiological Sciences* as adopted by the JRCERT (revised 2014) as part of the core documents contained within the RT Addendum to the Division of Health Sciences Handbook. Students are instructed on the role and function of JRCERT as part of the pre-clinical activities that introduce important accrediting and regulatory bodies or agencies that influence upon radiologic technology education and practice. As part of ensuring that standards are maintained, students are advised of their rights to due process should they feel that the program is out of compliance with any JRCERT standard.

Students are requested in such a situation to report their concern to the RT faculty, Director or Coordinator or via a student representative of the RT Advisory Board. All concerns will be brought to the program Director or Department Chair.

All concern will be investigated, documented, and appropriate action will be taken to resolve any concern in an efficient and timely manner. Feedback will be provided in relation to the resolution or outcome. All documentation will be kept in a locked file cabinet in the RT Department.

Should the situation not be resolved through the departmental policy, students are advised of their ability to follow an external process by contacting JRCERT directly.

Should a member of the public have concerns with the standards or other regulatory requirements in relation to the program or conduct of a student, they are able to contact the RT Department Chair or the Dean of the Division. A similar process will be followed and documented as above. If a resolution is not achieved, the person(s) involved will be provided

with appropriate contact information to the respective regulatory or accreditation agency.

**Certification**

After successful completion of all didactic and clinical components of the Radiology Technology Program graduates will be eligible:

- To apply for the certification examination prepared by the **American Registry of Radiologic Technologists (ARRT)**.
- To obtain **Massachusetts Department of Public Health's (MDPH) Radiation Control Program licensing**.

**Department of Radiologic Technology**

Program Director	Karen Dow Hansen M.Ed., R.T.(R) Professor	Office 120F 508.270.4046 kdow@massbay.edu
Clinical Coordinator	Karen Steinhoff B.S., R.T.(R) Assistant Professor	Office 120Q 508.270.4064 ksteinhoff@massbay.edu
Laboratory Coordinator	William Cote M.S., R.T.(R) Associate Professor	Office 120 A 508.270.4263 wcote@massbay.edu

**Program Options**

There are currently 2 options for the Radiologic Technology Program; a full time day option and a part time evening/flex option.

	<b>Full Time Day Option</b>	<b>Part Time Evening Option</b>
<b>Enroll</b>	September	January
<b>Graduate</b>	May	August
<b>Total Time</b>	5 semesters	8 semesters
<b>Didactic Hours</b>	1 <sup>st</sup> year MWF 2 <sup>nd</sup> year TR	1 <sup>st</sup> year Spring: T / Summer: T / Fall: TW 2 <sup>nd</sup> year: TW 3 <sup>rd</sup> year: Summer R

<b>Clinical Hours</b>	1 <sup>st</sup> year: TR 8-4 Summer: MTWR 8-4 2 <sup>nd</sup> year: MWF 8-4	1 <sup>st</sup> year: no clinical 2 <sup>nd</sup> year: no clinical 3 <sup>rd</sup> year: MTWRF 8-4 (fall and spring semesters) Summer: MTWF 8-4
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### Radiation Protection Policies

The Radiologic Technology Program and its clinical affiliates operate under the ALARA (as low as reasonable achievable) radiation protection concept and guidelines. The ALARA principle protects patients, radiation workers, and others from excessive or unnecessary exposure to ionizing radiation.

#### **Overview**

The National Council on Radiation Protection (N.C.R.P.) has published, as its guideline and, state and federal agencies have promulgated regulations for a recommended annual exposure dose limit for individuals employed as radiation workers. These level are 5 rem (5,000 millirem) per annum, with a cumulative level not to exceed a level calculated by the formula “1 rem times the age of the worker”. The N.C.R.P. has also published as a recommended annual exposure dose limit for those who may “occasionally” be exposed to radiation in the workplace, a level of 0.5 rem (500 millirem) per annum. The Commonwealth of Massachusetts Department of Public Health, Radiation Control Program has adopted and enforces these guidelines within its regulations.

The Radiologic Technology Program Administration and Faculty have established as the annual exposure dose limit for students enrolled in its program, the level of 0.5 rem (500 millirem) per annum. Upon consultation with Certified Radiation Health Physicists, and in the experience of the Program administration and faculty, this level (which is 1/10th that recommended for the radiation worker), is “As Low As is Reasonably Achievable” (A.L.A.R.A.) for medical radiography students.

#### **Student Radiation Monitoring**

To help insure that all student radiologic technologists are learning in a safe working environment, the amount of radiation received is monitored. **Students are not allowed to hold patients during radiation exposures.** Two radiation dosimeter badges will be issued for each student. One badge is for the clinical environment and the other for the laboratory. Students are responsible for the safety and security of their badges. Each student must exercise care to prevent loss of or damage to radiation badges. Lost / destroyed badges must be reported to the Clinical Coordinator immediately.

It is the responsibility of each student to wear the assigned badge whenever he/she is in the clinical or lab area. Failure to wear the dosimeter badge will result in five (5) points off the Clinical Requirement portion of the overall grade. The badge is to be worn on the collar. **If wearing a lead apron, the student should wear the badge outside of the apron on the collar.** The badge holder must face forward to obtain an accurate radiation measurement. Dosimeter badges must be left at the clinical site at the end of each day.

When the student rotates to another clinical site, it is the student's responsibility to take his/her current badge. If the student fails to take the badge when rotating to another clinical assignment, five (5) points will be deducted from the Clinical Requirement portion of the overall clinical grade.

Used badges are to be brought to the college for quarterly exchange of badges. It is the responsibility of the student to obtain a new quarterly dosimeter badge and submit the current badge to the radiation control designee. A Non-Compliance Report will be filed for repeated infractions. It is the student's responsibility to bring the dosimeter badge to the College. **DO NOT submit to Program Director.** Five points will be deducted from the Clinical Requirement portion of the clinical grade if the dosimeter badge is not left in the drop box by the time badges are sent for interpretation. This policy is to avoid delays in sending dosimeter badges to Landauer for timely reading.

Confidential disclosure of pregnancy is strongly encouraged during the first trimester, however not required. If the student chooses to disclose her pregnancy, she must do so **in writing** to the Program Director. The pregnant student will be counseled by the Program Director and/or Radiation Safety Officer regarding methods to reduce exposure from ionizing radiation. If the student chooses to continue RT course work during her pregnancy, immediate efforts shall be instituted to keep the student's radiation exposure during the gestation period well below .05 rem. A second (fetal) radiation badge shall be obtained and worn on the abdomen. Students employed as a radiation worker in any hospital/medical center/clinic are required to obtain a separate dosimeter badge from the employer. It is critical that student radiation dose records are kept separate from employment records.

### **Pregnancy Policy**

This policy is designed to inform female applicants/students of the RT program guidelines for radiation protection of an unborn child.

The sponsorship of the program adheres to the United States Nuclear Regulatory Commission (U.S. NRC) Regulatory Guide 8.13 provided by the U.S. Nuclear Regulatory Commission. A copy of this policy is provided to all female applicants prior to their admittance to the program.

In order for a pregnant student to fully ensure compliance with the lower radiation exposure limit and dose monitoring requirements, the student must declare her pregnancy to the Program. If at any time during the program the student decides to voluntarily declare a pregnancy she must provide written notification to the Program Director or Clinical Coordinator.

The student will be informed of her options with regard to this policy prior to enrolling and again during program orientation.

**Option I:**

The student has the right to make voluntary disclosure that she is pregnant and she has the right to modify training.

**Option II:**

Once the pregnancy is declared, the student may elect not to have any modification made to her training.

**Option III:**

The student may elect to take a leave of absence from the RT program and return within 1 year after re-admission and not lose her status in the program. The student must inform the program of her scheduled return so that the program can secure a seat for her.

**Option IV:**

The student may elect to continue in the RT program, fulfilling all program requirements as contained within the curriculum, and adhere to all radiation protection guidelines and recommendations as follows:

- a) The student will be provided an additional film monitoring device to monitor exposure to the fetus.
- b) The student will be required to adhere to the provisions of ALARA
- c) No more than 5 mSv (0.5 Rem or 500 mrem) of exposure is to be received by the student during the pregnancy.
- d) The equivalent dose to the embryo-fetus in a month cannot exceed 0.5 mSv (.05 Rem or 50 mrem).

**Option V:**

The student may withdraw the declaration of pregnancy at any time. This withdrawal of declaration **MUST** be in writing. Refraction of the pregnancy declaration requires the student to abide by the general guidelines for radiation workers. Therefore, after pregnancy declaration refraction, the student will be monitored according to general guidelines for radiation workers as described by the Nuclear Regulatory Commission and State Laws

**Option VI:**

The student may choose not to declare the pregnancy to the program.

\*The program will not be responsible for any injuries to the embryo/fetus should the

student decide to remain in the program during the entire gestational period.

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

- The Program Director will review with the student NCR Regulatory Guide #8.13, "Instruction Concerning Prenatal Radiation Exposure." The student will sign a declaration indicating receipt of this regulation.
- The student will receive counseling regarding minimizing radiation exposure to the embryo/fetus.
- In an effort to closely monitor the radiation dose to the fetus, a fetal dosimeter will be ordered for the student, to be worn at the student's waist, under the lead apron, if applicable.
- The student will be given the option of taking a leave of absence from the program, but may continue with proper precautions. If a leave is chosen, the Program will work with the student for planned re-entry at the next appropriate semester.
- If the student continues in the program, and the student feels physical restrictions are applicable, she must obtain documentation from her physician attesting to that fact. The Program will attempt to reasonably accommodate this request.

**Student Radiation Exposure Reports**

Whole body radiation exposure reports are posted quarterly and made available for student review. Radiation exposure reports are reviewed by the Program faculty and unusual exposure levels or developing trends will be investigated. Dosimetry reports reflecting radiation levels for each student are kept on file in the Program Director's office. The Radiologic Technology Program provides each student with their accumulated radiation dose at the time of graduation. Subsequent requests for accumulated exposure levels are to be made by the graduate's employer and must be submitted in writing to the Program Director.

**Student Dose Limit Protocol**

Radiation exposure reports are reviewed by the Program faculty and unusual exposure levels or developing trends are referred to a licensed physicist. If a student's quarterly level exceeds 100 mrem as documented on the radiation monitoring report, the student is immediately informed of the increased exposure level and a meeting is held between the Program Director and the student to determine the cause. Carelessness in radiation protection practices will not be tolerated and repeated offenses subject the student to sanctions up to and including dismissal from the Program.

### **Student Safety Practices**

At a minimum, state regulations regarding safe operation of radiation-generating equipment will be followed in all education settings including during laboratory sessions. All laboratory sessions are conducted under the guidance of a qualified practitioner.

Students enrolled in the MassBay Community College RT Program will adhere to proper radiation safety practices consistent with clinical site policies and the scope of practice in Radiology to include the following:

- Students are to stand behind the lead-lined control area of a radiographic room when making an exposure.
- All doors leading into a radiographic room from a public corridor are to be closed prior to making an exposure.

When assisting with fluoroscopic procedures, students are to wear a lead apron and remain at least two (2) feet away from the radiographic table when fluoroscopic exposures are being made.

- When performing portable or bedside radiographic examinations, students are to stand at least six (6) feet from the source of the ionizing radiation and wear a lead apron when the exposure is being made.
- Students are to refrain from holding patients during an exposure
- Students are to wear College-issued radiation dosimeter badges whenever fulfilling clinical assignments.

### **Patient Safety Practices/Clinical**

Students enrolled in the RT Program will adhere to proper radiation safety practices that protect the patient from excessive or unnecessary exposure to ionizing radiation to include the following:

- Students are to review the physician's order or requisition for the examination or procedure prior to performing the study.



- Students are to follow the necessary steps to obtain an informed consent from the patient prior to the start of the examination or procedure i.e. verify patient identity; explain the procedure or examination; obtain a patient history; and inquire about possible pregnancy.
- Students are to limit the radiation field to a size only large enough to include the anatomic area of interest. Field size is never to exceed image receptor size.
- Students are to shield patients when appropriate.
- Students are to select exposure factors that produce the minimum amount of radiation exposure needed to obtain a diagnostic image.
- Students are to perform portable radiography procedures under the direct supervision of a qualified radiographer regardless of the level of student achievement.
  
- **All clinical assignments are carried out under the direct supervision of a qualified radiographer until the student has achieved competency.**
- **All clinical assignments are carried out under the indirect supervision of a qualified radiographer after the student has achieved competency.**
- **All unsatisfactory radiographic images repeated by the student are performed under the direct supervision of a qualified radiographer.**

### **MRI Clinical Rotations**

All students participating in an MRI Observation rotation must be aware of magnetic wave or radiofrequency hazards and appropriately screened. This required form is reviewed by the Clinical Coordinator and/or Program Director to identify any potential contraindications to a high magnetic field environment. Any questions regarding their personal medical history and MR safety should be directed to the Clinical Coordinator and/or Program Director. The student will comply with each clinical site's policies and procedures pertaining to metallic objects in the MRI scanning area. Please review the following information regarding MRI Safety and the: [ACR Guidance Document on MR Safe Practices: 2013](#)

The magnetic field in the MRI area is constant. It is essential that all metallic objects be excluded from the MRI area. Bringing ferromagnetic articles in the MRI scanning area is strictly prohibited. These objects can become projectiles within the scanning room causing serious injury or death and/or equipment failure.

Items that need to be removed before entering the MRI department include but are not limited to:

- Wallet, purse, credit cards, cards with magnetic strips
- All electronic devices to include: cell phones, tablets, mp3 players
- Hearing aids
- jewelry, watches

- Pens, paper clips, keys, coins, pocket knives, nail trimmers
- Hair accessories
- Clothing that includes metallic fasteners
- Belt buckles, safety pins

Foreign materials in the human body have the potential risk for foreign metals to become dislodged in the MRI environment causing injury or death. It is necessary that surgically implanted devices be deemed safe by the Clinical Coordinator / Program Director prior to students entering the MRI clinical rotation.

Examples of items that may create a hazard in the MRI department include:

- Pacemakers
- Cardioverter Defibrillator Implants
- Aneurysm clip
- Implanted drug infusion device
- Foreign metal objects
- Bullets or shrapnel
- Permanent cosmetics or tattoos
- Implants that involve magnets
- Medication patches containing metal foil
- Dentures/teeth with magnetic components

### **Student Safety Practices/ Lab**

**The MassBay radiography lab is in compliance with all federal and state regulations, with the appropriate documentation posted in the lab and records maintained in the department office.**

**The following guidelines specific to activities in the radiography labs must be followed:**

- Eating, drinking, smoking and other forms of tobacco use are prohibited.
- All radiographic exposures must be part of a specific laboratory exercise and under the supervision of a faculty member.
- No student shall work in any of the labs without wearing a radiation dosimeter.
- Holding of radiographic phantoms during exposure is not permitted and no one should be in the imaging lab while exposures are being made.
- Doors to all lab areas must be closed during radiographic exposures and the
- Outer door must be locked when lab is not in use

- Students are not permitted to utilize lab equipment to make radiographs of any human or animal subject.
  - **Failure to comply with this rule will result in immediate dismissal from the program.**
- All accidents occurring in any of the labs must be reported to the supervising faculty member immediately and use of equipment discontinued until the problem is corrected.

**U.S. Nuclear Regulatory Commission**  
**REGULATORY GUIDE**  
**Office Of Nuclear Regulatory Research**

**REGULATORY GUIDE 8.13**  
(Draft was issued as DG-8014)

**INSTRUCTION CONCERNING PRENATAL RADIATION EXPOSURE**

**A. INTRODUCTION**

The Code of Federal Regulations in 10 CFR Part 19, "Notices, Instructions and Reports to Workers: Inspection and Investigations," in Section 19.12, "Instructions to Workers," requires instruction in "the health protection problems associated with exposure to radiation and/or radioactive material, in precautions or procedures to minimize exposure, and in the purposes and functions of protective devices employed." The instructions must be "commensurate with potential radiological health protection problems present in the work place."

The Nuclear Regulatory Commission's (NRC's) regulations on radiation protection are specified in 10 CFR Part 20, "Standards for Protection Against Radiation"; and 10 CFR 20.1208, "Dose to an Embryo/Fetus," requires licensees to "ensure that the dose to an embryo/fetus during the entire pregnancy, due to occupational exposure of a declared pregnant woman, does not exceed 0.5 rem (5 mSv)." Section 20.1208 also requires licensees to "make efforts to avoid substantial variation above a uniform monthly exposure rate to a declared pregnant woman." A declared pregnant woman is defined in 10 CFR 20.1003 as a woman who has voluntarily informed her employer, in writing, of her pregnancy and the estimated date of conception.

This regulatory guide is intended to provide information to pregnant women, and other personnel, to help them make decisions regarding radiation exposure during pregnancy. This Regulatory Guide 8.13 supplements Regulatory Guide 8.29, "Instruction Concerning Risks from Occupational Radiation Exposure" (Ref. 1), which contains a broad discussion of the risks from exposure to ionizing radiation.

Other sections of the NRC's regulations also specify requirements for monitoring external and internal occupational dose to a declared pregnant woman. In 10 CFR 20.1502, "Conditions Requiring Individual Monitoring of External and Internal Occupational Dose," licensees are required to monitor the occupational dose to a declared pregnant woman, using an individual monitoring device, if it is likely that the declared pregnant woman will receive, from external sources, a deep dose equivalent in excess of 0.1 rem (1 mSv). According to Paragraph (e) of 10

CFR 20.2106, “Records of Individual Monitoring Results,” the licensee must maintain records of dose to an embryo/fetus if monitoring was required, and the records of dose to the embryo/fetus must be kept with the records of dose to the declared pregnant woman. The declaration of pregnancy must be kept on file, but may be maintained separately from the dose records. The licensee must retain the required form or record until the Commission terminates each pertinent license requiring the record.

The information collections in this regulatory guide are covered by the requirements of 10 CFR Parts 19 or 20, which were approved by the Office of Management and Budget, approval numbers 3150-0044 and 3150-0014, respectively. The NRC may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

## **B. DISCUSSION**

As discussed in Regulatory Guide 8.29 (Ref. 1), exposure to any level of radiation is assumed to carry with it a certain amount of risk. In the absence of scientific certainty regarding the relationship between low dose exposure and health effects, and as a conservative assumption for radiation protection purposes, the scientific community generally assumes that any exposure to ionizing radiation may cause undesirable biological effects and that the likelihood of these effects increases as the dose increases. At the occupational dose limit for the whole body of 5 rem (50 mSv) per year, the risk is believed to be very low.

The magnitude of risk of childhood cancer following in utero exposure is uncertain in that both negative and positive studies have been reported. The data from these studies “are consistent with a lifetime cancer risk resulting from exposure during gestation which is two to three times that for the adult” (NCRP Report No. 116, Ref. 2). The NRC has reviewed the available scientific literature and has concluded that the 0.5 rem (5 mSv) limit specified in 10 CFR 20.1208 provides an adequate margin of protection for the embryo/fetus. This dose limit reflects the desire to limit the total lifetime risk of leukemia and other cancers associated with radiation exposure during pregnancy.

In order for a pregnant worker to take advantage of the lower exposure limit and dose monitoring provisions specified in 10 CFR Part 20, the woman must declare her pregnancy in writing to the licensee. A form letter for declaring pregnancy is provided in this guide or the licensee may use its own form letter for declaring pregnancy. A separate written declaration should be submitted for each pregnancy.

## **C. REGULATORY POSITION**

### **1. Who Should Receive Instruction**

Female workers who require training under 10 CFR 19.12 should be provided with the information contained in this guide. In addition to the information contained in regulatory Guide 8.29 (Ref. 1), this information may be included as part of the training required under 10 CFR

19.12.

## **2. Providing Instruction**

The occupational worker may be given a copy of this guide with its Appendix, an explanation of the contents of the guide, and an opportunity to ask questions and request additional information. The information in this guide and Appendix should also be provided to any worker or supervisor who may be affected by a declaration of pregnancy or who may have to take some action in response to such a declaration.

Classroom instruction may supplement the written information. If the licensee provides classroom instruction, the instructor should have some knowledge of the biological effects of radiation to be able to answer questions that may go beyond the information provided in this guide. Videotaped presentations may be used for classroom instruction. Regardless of whether the licensee provides classroom training, the licensee should give workers the opportunity to ask questions about information contained in this Regulatory Guide 8.13. The licensee may take credit for instruction that the worker has received within the past year at other licensed facilities or in other courses or training.

## **3. Licensee's Policy on Declared Pregnant Women**

The instruction provided should describe the licensee's specific policy on declared pregnant women, including how those policies may affect a woman's work situation. In particular, the instruction should include a description of the licensee's policies, if any, that may affect the declared pregnant woman's work situation after she has filed a written declaration of pregnancy consistent with 10 CFR 20.1208.

The instruction should also identify who to contact for additional information as well as identify who should receive the written declaration of pregnancy. The recipient of the woman's declaration may be identified by name (e.g., John Smith), position (e.g., immediate supervisor, the radiation safety officer), or department (e.g., the personnel department).

## **4. Duration of Lower Dose Limits for the Embryo/Fetus**

The lower dose limit for the embryo/fetus should remain in effect until the woman withdraws the declaration in writing or the woman is no longer pregnant. If a declaration of pregnancy is withdrawn, the dose limit for the embryo/fetus would apply only to the time from the estimated date of conception until the time the declaration is withdrawn. If the declaration is not withdrawn, the written declaration may be considered expired one year after submission.

## **5. Substantial Variations Above a Uniform Monthly Dose Rate**

According to 10 CFR 20.1208(b), "The licensee shall make efforts to avoid substantial variation above a uniform monthly exposure rate to a declared pregnant woman so as to satisfy the limit in paragraph (a) of this section," that is, 0.5 rem (5 mSv) to the embryo/fetus. The National Council

on Radiation Protection and Measurements (NCRP) recommends a monthly equivalent dose limit of 0.05 rem (0.5 mSv) to the embryo/fetus once the pregnancy is known (Ref. 2). In view of the NCRP recommendation, any monthly dose of less than 0.1 rem (1 mSv) may be considered as not a substantial variation above a uniform monthly dose rate and as such will not require licensee justification. However, a monthly dose greater than 0.1 rem (1 mSv) should be justified by the licensee.

#### **D. IMPLEMENTATION**

The purpose of this section is to provide information to licensees and applicants regarding the NRC staff's plans for using this regulatory guide.

Unless a licensee or an applicant proposes an acceptable alternative method for complying with the specified portions of the NRC's regulations, the methods described in this guide will be used by the NRC staff in the evaluation of instructions to workers on the radiation exposure of pregnant women.

#### **REFERENCES**

1. USNRC, "Instruction Concerning Risks from Occupational Radiation Exposure," Regulatory Guide 8.29, Revision 1, February 1996.
2. National Council on Radiation Protection and Measurements, *Limitation of Exposure to Ionizing Radiation*, NCRP Report No. 116, Bethesda, MD, 1993.

## **Clinical Education Policies**

### **Attendance Policy**

The Radiologic Technology Program at MassBay Community College evaluates the student's performance on their professional behaviors. A detailed description of the professional behaviors can be found on pages 14-17 of the Division of Health Sciences Student Handbook and Policy Manual.

Affective domain standards: dependability, accountability, and effective communication reflect the professional behaviors associated with attendance. Students are evaluated during their clinical course for these affective domain standards by the Clinical Instructor's submission of the Clinical Performance Evaluation.

The clinical student must follow the attendance requirements as described below:

#### **1. Attendance is mandatory.**

- Students are expected to be in attendance during all assigned clinical days with exceptions as posted holidays, final exam periods and clinical tutorial days, which will be posted through the clinical calendar

#### **2. Students must attend clinical between 8 am – 4 pm.**

- Students must arrive to the clinical area prepared to engage in clinical activities at 8 am.
- Students must remain at the clinical area until 4 pm.

#### **3. Tardiness or absence must be communicated to the Clinical Instructor and Clinical Coordinator prior to 8 am.**

- Students must notify the Clinical Instructor via a phone call of absence or tardiness.
- Students must notify Clinical Coordinator via email of absence or tardiness.
- Make up times for absence and/or tardiness are at the discretion of the Clinical Instructor and Clinical Coordinator.

#### **4. Any clinical skill acquisition or experience missed due to absence, tardiness or early departure must be made up at the discretion of the Clinical Instructor and approved by the Clinical Coordinator.**

- Purposed make up times must be submitted to the Clinical Coordinator via email for approval.



- The determination as to which alternative assignments and locations may be required to make up missed days/hours and/or substitute for missed clinical skill acquisition of experiences will be made at the discretion of the clinical affiliate, Clinical Coordinator and Clinical Instructor.
- Make up time schedule beyond the semester can only be permitted if the clinical student has been issued an (I) Incomplete grade for the clinical course.
- Make up time are only permitted at times/day when the college is open.
- Potential make up times in the regular semester, winter intercession and spring break.
- Holidays in which the college is closed cannot be used for make-up times.

**5. Absences of 2 or more consecutive days require the student to provide the Clinical Coordinator with a letter from a physician verifying the student's is capable to resume all activities (without limitations) associated with clinical prior to the return to the clinical site.**

**6. Absences and tardiness result in a deduction on the clinical grade.**

- Each absence, without a physician's note will reduce the grade 5 points
- Each tardiness or early departure will reduce the grade 2 points

**7. Affective domain warnings are issued by the Clinical Coordinator for the following infractions:**

- Failure to notify Clinical Instructor and/or Clinical Coordinator of absence, tardiness, or early departure prior to 8 am
- Excessive (>2) absences, without a physician's note
- Excessive (>2) tardiness or early departure

**8. An (I) incomplete may be issued as clinical grade when skill acquisition is incomplete due to absenteeism or tardiness a student provides a written request for such consideration to the Clinical Coordinator two weeks prior to the end of the semester.**

- Refer to page 9 of the Division of Health Sciences Student Handbook and Policy Manual for details of the Incomplete Grades Policy

- Incomplete grades will be converted to (S) satisfactory upon completion of skill acquisition through approved make up times prior to the start of the following semester.
- Incomplete grade will be converted to (U) unsatisfactory if make up times are not completed and/or skill acquisition is incomplete at the start of the following semester.

### **HIPAA Compliance**

It is the moral, ethical and legal responsibility of health professionals, and DHS students to insure that any and all medically related information is held in confidence. Patient information should only be shared the appropriate clinical personnel within the context of that personnel's need to know for delivery of quality care. Students are required to adhere to any and all such policies while in the clinical environment. All students receive HIPAA training during RT preclinical orientation on the MassBay campus and are fully informed on this law.

Care must be taken when bringing clinical experiences back to campus for discussion.

Information shared should never include protected patient information as defined by HIPAA.

For information on the current HIPAA law please refer to the following website.

<http://www.hhs.gov/ocr/privacy/>

Violation of the HIPAA policy will result in the disciplinary action of written warning. Repeated violations will result in a student's removal from the RT program.

### **Radiation Protection in the Clinical Environment**

Students are required to wear a MassBay issued Radiation Monitoring Badge while participating in clinical activities. Failure to follow policies outlined in the Division of Health Sciences Student Handbook and Policy Manual RT Addendum will result in disciplinary action and/or a grade deduction. The reports of exposure are made available to students.

### **Clinical Supervision**

The Supervision Policy is designed to ensure the protection of both patient and student during the application of ionizing radiation. Each clinical semester students are required to read the Supervision Policy. Students must give a signed copy of understanding to the Clinical Coordinator at the start of each Clinical semester. This policy is found in the next section of this syllabus and the Division of Health Sciences Handbook and Policy Manual: Radiologic

Technology Addendum.

Violation of the Supervision policy must be reported to the clinical instructor and MassBay Community College Clinical Coordinator or Program Director. Reports of a breach in the Supervision policy will be investigated and may result in the removal of clinical student from the clinical course and the grade of (UC) Unsafe Clinical to be given for the course.

### **Supervision Policy**

Students must be directly supervised while performing examinations/procedures until they successfully pass the appropriate competency evaluation.

#### **Direct Supervision Guidelines**

- An ARRT qualified radiographer reviews the request for exam in relation to the student's achievement.
- An ARRT qualified radiographer evaluates the condition of the patient in relation to the student's knowledge
- An ARRT qualified radiographer is present during the exam.
- An ARRT qualified radiographer reviews and approves the radiographs.
- 

When clinical competency of an exam is documented the student's practice of those exams fall under the Indirect Supervision Guidelines

#### **Indirect Supervision Guidelines**

- An ARRT qualified radiographer who is immediately available to assist the student regardless of the level of achievement provides supervision.
- The ARRT qualified radiographer is present in an adjacent room or location.
- This availability applies to all areas where ionizing radiation equipment is in use.

### **Repeat Radiographs**

All repeat radiographs, regardless of student competency, must be performed under direct supervision.

**Violation**

Violation of the supervision policies must be reported to the Clinical Instructor and MassBay Community College Clinical Coordinator or Program Director. Reports of a breach in Supervision policy will be investigated and may result in the removal of clinical student from MassBay's RT program and the grade of (UC) Unsafe Clinical to be issued.



Date: \_\_\_\_\_

Name: \_\_\_\_\_

I have read and understand the MassBay Community College Clinical Syllabus. I agree to comply with all MassBay Radiologic Technology Clinical Policies contained in the Clinical syllabus and the Division of Health Sciences Student Handbook Policy Manual: Radiologic Technology Program Addendum. I understand that failure to follow Radiologic Technology Clinical Policies may result in grade reduction, Affective Domain or Performance Warnings, (U) Unsatisfactory grade, and/or (UC) Unsafe Clinical grade.

<b>Initials</b>	<b>Policy</b>
	HIPAA Policy
	Supervision Policy
	Radiation Protection Policy
	Attendance Policy

Signature: \_\_\_\_\_

Witness (print name) \_\_\_\_\_

Witness Signature \_\_\_\_\_

**DIVISION OF HEALTH SCIENCES STUDENT ACKNOWLEDGEMENT FORM**  
**DO NOT SUBMIT UNTIL YOU HAVE READ THE ENTIRE HANDBOOK**

I, the undersigned student, having read and reviewed the entirety of the MassBay Community College Division of Health Sciences Handbook and the appendix specific to my program, do agree to adhere to and abide by all College and Health Sciences and Program policies and/or their addenda, during my matriculation at MassBay Community College. Furthermore, I agree to adhere to the conduct codes and performance policies of the Clinical Education sites to which I may be assigned. I clearly understand that the failure to adhere to and abide by these policies and regulations of the College, Division, Program, Hospital and/or Clinical Site may result in my removal and subsequent withdrawal from the clinical site/classroom and/or program.

I also understand that in addition to faculty employed at the College, there may be employees of the Hospital / Clinical Agency or Practicum site which are designated by the College as a Supervisor/Preceptors / Clinical Instructors. As such, these individuals will be functioning as members of the team of instructors within one or more of the Program's clinical or practicum courses. Therefore, I understand that assessment / evaluation information about my academic and/or clinical or practicum performance may be shared with the designated / appropriate Supervisor or Clinical Site staff member(s) for the sole purpose of providing them with information needed by them for patient / client assignment or College required clinical performance evaluation / assessment. Furthermore, my academic and/or clinical records may be reviewed by duly authorized representatives of Professional, State, or National accreditation agencies.

I further understand that the Hospital or Clinical agencies or Practicum site to which I may be assigned may require that I receive clearance from the Commonwealth of Massachusetts that I do not have a criminal record of an offence which would compromise the safety or well-being of the clients or patients of that site. Therefore I understand that my name will be submitted to the state for a CORI (criminal offender record information) and SORI (sexual offender registry information) check. A CORI/SORI check report of such an offence may preclude my eligibility for clinical or practicum assignment and thereby may negate my matriculation in the program.

Lastly, I understand that I am required to satisfy the Division of Health Sciences' Medical History/Immunization Records requirement and CPR requirement. Failure to do so will preclude my eligibility to participate in the clinical or practicum phase and may result in my inability to complete the program.

**Please sign and date this form and submit it to your Castle Branch account unless instructed otherwise by a faculty member.**

Student's Name (Printed) \_\_\_\_\_ Student's signature \_\_\_\_\_  
Program: \_\_\_\_\_ Received on (Date): \_\_\_\_\_

**NOTE: Submission of this form is required prior to clinical rotations.**