

**Allen College**

**Associate of Science in Radiography (ASR)  
Program**

**Student Handbook**

**2024-2025**



**Allen College**

**UnityPoint Health**

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## **Associate of Science in Radiography (ASR) Program**

### **Student Handbook**

Welcome to the Allen College ASR Program. To facilitate your entrance into the ASR Program, the Allen College Website and the ASR Student Handbook are provided to inform and serve as references concerning regulations and outcomes. Please feel free to ask for explanations if you are concerned about anything that you may question.

### **Mission**

The mission of the Associate of Science in Radiography (ASR) program is to provide an educational program that prepares individuals for a career in the radiography profession with a commitment to lifelong learning and service in the community.

### **Educational Program Policy**

The Educational Program may at any time change procedures and policies regulating the program. These changes take effect as immediately as the program authorizes and will apply to all students.

If a student does not develop satisfactory qualities essential to personal and professional growth, the tenure in the program may be terminated at any time. Scholastic failure, continued absence, unsatisfactory performance, undesirable attitudes, and negligence of duty are specific factors that are cause for discontinuance in the program. Serious violations of Program policy may also result in temporary suspension or discharge.

### **General Information**

1. Classes will be attended regularly and on time. Attendance and promptness for all assigned rotations are imperative and will be reflected in the practicum grade.
2. Practicum rotations will be assigned at various clinical sites. Students are responsible for their own transportation.
3. When not busy in clinical areas assigned, students will study or practice clinical skills at the discretion of the clinical site.
4. Parking in unauthorized areas will result in a fine.
5. Students may have food and beverages in the classroom. If the privilege is taken advantage of and the room is littered with food wrappings, bottles, etc. all students will no longer be allowed to have food or beverages in the room.
6. Barrett Forum, Gerard Hall, and Winter Hall are areas shared by various education programs. An environment of sharing and respect is expected. All students will keep noise to a minimum. Professional behavior is expected at all times.

## Program Information

1. Upon successful completion of the ASR Program the graduate is eligible to apply to take the American Registry of Radiologic Technologists certification exam. To learn more about the ARRT education, ethics, and examination requirements visit [ARRT.org](https://www.arrt.org). Applicants will be required to report any misdemeanor or felony convictions. Applicants will also be required to respond to the following question regarding their academic integrity while in a radiography program: “Have you ever been subjected to a sanction as a result of a violation of an academic honor code, or suspended or dismissed by an educational program that you attended in order to meet ARRT certification requirements?”
2. Prior to graduation the ASR Program will provide the student with the necessary information to complete the application for the ARRT certification exam.
3. The student is responsible for the ARRT certification exam fee.
4. If the student plans on working as a radiographer in the state of Iowa, it is the student’s responsibility to make application to the State of Iowa for a permit to practice after getting the results from the ARRT certification exam. Application is made through the State of Iowa Department of Health and Human Services; visit their website for the required forms and information <https://hhs.iowa.gov>. Many other states require licensing and students should consider this when applying for employment.
5. Students may obtain Joint Review Committee on Education in Radiologic Technology (JRCERT) standards to review. The JRCERT Standards are available at [www.jrcert.org/jrcert-standards/](https://www.jrcert.org/jrcert-standards/). Students must first attempt to resolve a complaint directly with the program officials by following the Fair Treatment Policy provided by Allen College. If the individual is unable to resolve the complaint with institutional/program officials or believes that the concerns have not been properly addressed, the individual may submit allegations of noncompliance directly to the JRCERT at <https://www.jrcert.org/accreditation-forstudents/allegations/>.

**Allen College  
Associate of Science in  
Radiography Program**



**PLAN FOR PRACTICUM EDUCATION**

## **Practicum Plan - Practicum Program Operation**

### Program Director

- Role Model
- Educator
- Advisor
- Evaluator

The program director shall be full-time and will be responsible for the didactic education and the organization, administration, periodic review, continual development, and general effectiveness of the ASR Program. The program director evaluates and assures clinical education effectiveness.

### Clinical Coordinator

- Role Model
- Educator
- Advisor
- Evaluator

The clinical coordinator's responsibilities shall include clinical supervision, didactic education, clinical scheduling, and visits to clinical sites. The Clinical Coordinator coordinates effectiveness of clinical education.

### Clinical Instructors

- Role Model
- Educator
- Advisor
- Evaluator

The clinical instructor responsibilities include clinical supervision, instruction, and evaluation. The clinical instructor shall be knowledgeable of program goals, policies (direct, indirect, repeat) clinical objectives and clinical evaluation system. Completes clinical competencies, performance task analysis, evaluations, final competencies, certifications, etc.

### Clinical Preceptors/Staff (i.e.: radiographer)

- Role Model
- Educator
- Advisor
- Evaluator

The clinical preceptors/staff responsibilities include direct and indirect supervision, repeat policy, encouraging student confidence, constructive feedback and assisting the students. Supports the educational process. Completes: clinical competencies (radiographers only who have completed their probationary period), performance task analysis, evaluations, etc.

### Didactic Instructor

- Role Model
- Educator
- Advisor
- Evaluator

Prepare and maintain course outlines and objectives, instruct, and evaluate students and report progress, cooperates with program director in review and revision of course materials.

### Students

Students are expected to fulfill the practicum objectives and complete all assignments. Students are responsible for their own behaviors and are expected to conduct themselves in a professional and ethical manner at all times.

## Glossary of Terms

|                                 |   |
|---------------------------------|---|
| Category                        | A series of related radiographic examinations that exemplify an area of the human body, i.e., upper extremity.  |
| Challenge                       | It is a student's attempt to perform a clinical competency or a performance task analysis.  |
| Clinical Participation          | Theory, lab, and clinical site participation.   |
| Competency                      | The ability to function within a realm of indirect supervision and assume those duties and responsibilities as set forth in course and clinical objectives.   |
| Competency Evaluation (CCE)     | The procedure by which a student's performance and the resulting image is evaluated. The minimum acceptable level of competency is 75%.   |
| Direct Supervision              | A registered radiologic technologist is present during the radiology procedure.   |
| Performance Task Analysis (PTA) | These are the student's clinical objectives.  |
| Radiographic Examination        | A series of radiographic exposures of an anatomical part (Exams) sufficient to permit diagnostic evaluation of that part.   |
| Simulation                      | A simulation is a CCE that is performed on a live subject (not a patient) without an actual exposure being made. Simulations are reserved for exams that are not ordered in a sufficient number for all students to complete a CCE on a "real patient." The ARRT only permits simulations of specific exams. Any simulation of a CCE requires ASR Faculty approval. |
| Indirect Supervision            | A registered radiographer is immediately accessible to the student.   |
| Certifications                  | The purpose of a certification is for the student to demonstrate his/her knowledge of radiographic positioning and selection of technical factors.  |

Allen College students are required to submit a variety of individual information upon admission and/or annually. Required information upon admission for all Allen College students includes health history and physical, criminal background check, documentation of immunizations per Health Form, 10 panel drug screen, registration deposit, completion of Cornerstone requirements and proof of current Basic Life Support (BLS, American Heart Association Healthcare Provider).

Information required annually includes documentation of BLS certification, TB testing, and all vaccinations required by the CDC or Public Health Department. Enrollment Management will maintain records of all required information.

### CastleBranch

Allen College uses a third-party company, CastleBranch, to streamline document tracking for required materials, including health records, drug screening, CPR, criminal background checks, etc. CastleBranch assures confidentiality and continual document access to participants. The information is on the Allen College website. Resources have been provided from CastleBranch to guide students through the necessary steps to set up and maintain individual accounts.

### Background Checks

All students will be subject to a criminal and child and dependent adult abuse record check upon admission to the college. For detailed procedures regarding background checks, please refer to Policy 2-C-800-02 Criminal and Child and Dependent Adult Abuse Record Checks on the Allen College website.

### Student Injury or Accident Reporting

Students must report any injury received during clinical experiences to their clinical supervisor. For detailed procedures regarding injury in the clinical setting, please refer to Policy 2-I-800-04 Student Injuries or Exposures to Blood-borne Pathogens on the Allen College website.

### Clinical Code of Conduct

Students have the opportunity to work in several clinical settings and with numerous clients during their years as students at Allen College. As professionals, students are expected to keep confidential all information entrusted to them by clients and peers in all clinical settings. Patient information cannot be replicated.

During orientation, students will sign a confidentiality statement. The statement will include information specific to the legal and ethical issues related to confidentiality and will be filed in the students' academic folder at Allen College. If specific institutions request a copy of the statement, it will be duplicated and sent to the institution.

Students are expected to behave in a professional manner in all clinical settings. Students are responsible for their own behavior. Examples of unacceptable behaviors include, but are not limited to: breach of confidentiality, unsafe practices, falsification of records or documentation of hours, unexcused absences, improper/unethical clinical conduct, or sexual misconduct.



Any student giving evidence of clinical misconduct shall be subject to disciplinary action by Allen College. Disciplinary action shall include, but not be limited to, assignment of a failing grade for submitted work and/or an entire course, reprimand, probation, suspension or dismissal from the institution.

### Curriculum

The program requires a course of study with a minimum of 80 semester credit hours and the curriculum is delivered in summer, fall and spring semesters. Introductory and orientation courses are presented initially. Courses related to professionalism, ethics and law, radiation protection, terminology, patient care, radiographic procedures and imaging are followed by more interactive clinical instruction. The courses are delivered in a fashion appropriate to maintaining a competency-based program. The more specific modality instruction and rotations follow the basic core courses.

Affective, cognitive, and psychomotor domain objectives are evaluated throughout the didactic and clinical aspects of the program.

### Basic Liability Insurance

Allen College provides liability coverage for students who are in a clinical setting. The limits of such coverage are \$1 million per occurrence and \$3 million aggregate for all occurrences on an annual basis. Students may purchase their own liability coverage at their own expense. Liability coverage provided by Allen covers liability only and not student illness or injury.

### Venipuncture Class

All students will complete a venipuncture class in the first summer semester of the program.

### Evening/Weekend Rotations

Professional Development Practicum Courses RA:145, RA:255, RA:265 and RA:275 may require evening and weekend rotations. Evening hour rotations are defined as any hours before 5 a.m. or after 7 p.m. Monday-Friday. Weekend hours are defined as any hours on Saturday or Sunday.

### Clinical Areas

Clinical site travel is required for all Professional Development Practicum Courses: RA:135, RA:145, RA:255, RA:265 and RA:275. The student may be required to travel up to 65 miles from Allen College for a clinical education setting assignment.

Appropriate student clinical supervision is ensured by adhering to faculty-student ratios indicated in the standards and by clinical staff supervision. The clinical staff sign preceptor agreements and promote an educational atmosphere.

Radiology Departments are conducive to learning and the clinical instructors and preceptors provide a positive influence. Several preceptors are also didactic instructors of a variety of modalities: this aids in their personal interest in the development of the students' educational process. For example, when students rotate through the MercyOne Northeast Iowa Family Medicine & Residency, this brief rotation provides

excellent learning opportunities such as, (EKG's, audiometry, tympanograms, venipuncture) that will add to the student's skills and knowledge in the professional field of radiography.

1. The length of time a student is scheduled at a clinical site is designed to offer the student an adequate amount of time in all areas.
2. The students are supervised, evaluated, and provided instruction in the clinical setting which may include the Program Director, Clinical Coordinator, Clinical Instructors, and preceptors.
3. Once the student has successfully completed the unit lab test, they are encouraged to perform clinical competency evaluations.
4. The program has an appropriate student ratio to the number of procedures/preceptors at the clinical sites.
5. The program collaborates with a variety of clinical sites.
6. Students will be scheduled to specific clinical site(s) and assigned rotations per each practicum course syllabus.
7. If a student is asked to not return to a clinical site, they may be dismissed from the program.

### Student Clinical Assignments

The student assigned to the room must be the one involved in the procedure. According to JRCERT there must be a one-to-one ratio when supervising students, one student to one technologist. The only time that more than one student may be in the room is when the procedure is an unusual circumstance/procedure. Clinical Instructors must always ensure that if another student is assisting in the room, for example helping with patient care if needed for patient safety, that it never takes away from the learning of the student who is assigned to the room.

If a student deems completing an assignment necessary, then the student may attend the clinical site during nonscheduled time, if approved, in advance (a minimum of 72 hours prior) by ASR faculty and that site's clinical instructor. The student must e-mail the Clinical Coordinator and wait for a reply before they may attend the clinical site during nonscheduled time. This time will not count towards their scheduled clinical time. If any other students are at the clinical site and scheduled in that area, the student must receive permission from the scheduled student to complete the procedure.

### Mammography Observation Opportunity

Mammography observation rotations will be available to all students at the United Medical Park (UMP) upon request. If a student wishes to complete a mammography observation during scheduled clinical hours at the UMP, they must submit a request in writing to the Clinical Coordinator before the start of their clinical rotation at the UMP. If a student wishes to complete a mammography observation outside of scheduled clinical hours, they may submit a request in writing to the Clinical Coordinator at any time throughout the program. Only one 1–2-hour observation will be allowed per student during scheduled clinical hours. Mammography observation rotations at other clinical locations may be considered if approved by the Clinical Coordinator and the clinical site. Under no circumstance will a student be allowed to observe in mammography without prior approval. Clinical procedures and assignments will take precedence.

### Academic Advising

It is the responsibility of the program faculty to guide and direct students individually or in group orientation. Academic advising is facilitated by program faculty and personal counseling may be available through the Employee Assistance Program at Allen Memorial Hospital. Written documentation of all conferences shall be kept in the student's file. The student will be automatically registered for all Allen College RA courses. Registration for general education courses is the student's responsibility. The student is responsible for requesting official transcripts from other institutions for coursework completed while enrolled in the ASR Program.

### Professional Conduct

Professional behavior is expected of the student at all times. Smoking, chewing gum, whistling, clowning, and horseplay are prohibited during clinical hours. The student must introduce themselves to the patient, address all patients by their proper names, display empathy, and practice radiation protection.

### Cell Phones and Electronic Devices

Hospital computers and other electronic devices may only be used for relevant clinical documentation. Personal use is prohibited. Regardless of the practice of employees at a clinical site, the use of electronic devices in the clinical setting is prohibited.

Students may not bring personal cell phones, tablets, laptops, or other electronic devices to the clinical area. Active use (texting or verbal) of a cell phone or other electronic device in clinical will result in disciplinary action. If a student needs to communicate with someone outside of clinic and it is urgent, or may be an emergency, please inform the program faculty and clinical instructor so that accommodations to this policy can be made.

If you need to be contacted in case of an emergency, make sure that you share your clinical schedule and clinical site information with anyone that may need to reach you in an emergency.

Violations of the electronic devices policy are for the entirety of the program and will not reset after each semester.

First offense - Verbal warning.

Second offense – Written warning and meeting with the student's advisor.

All subsequent offenses- the student will be immediately dismissed from the clinical site and suspended the next clinical day. This time will be deducted from the students' allotted time.

### Ethics and Confidentiality

The students will not divulge information relevant to the patient's medical affairs or privileged communication relative to the department or hospital affairs. The student shall make every effort to protect all patients from unnecessary radiation. The student shall judiciously protect the patient's right to privacy. The student shall not diagnose but, shall provide the radiologist with all information relative to the radiologic diagnosis or patient management. The student will need to sign a patient confidentiality statement before

clinical rotations begin. Students should not discuss exams/procedures in public areas. Students are not allowed to print any portion of a patient's medical record as this is a violation of HIPAA.

### Social Media

Radiography students are reminded that posts to any social networking or social media (i.e. Facebook, Twitter, blogs, Snapchat) must reflect the same behavioral standards of honesty, respect, consideration, and professionalism that are expected in academic and clinical environments.

In any social media posts or communications, students must adhere to restrictions related to privacy for fellow students, faculty, and patients in accordance with the Federal Health Insurance Portability and Accountability Act (HIPAA).

Information related to clinical experiences must NOT be posted on any social media outlet. Inappropriate use of social media by students is subject to disciplinary action up to and including dismissal from the program.

### Clinical Academics

Evaluation of professional development practicums may include the following aspects: clinical evaluations of clinical instructor/preceptors, scientific poster/essay evaluations, clinical competency evaluations, certifications, PTAs. (For specific aspects refer to each professional development practicum syllabus.)

### Direct and Indirect Supervision

Until a student achieves and documents competency in any given procedure, all clinical assignments shall be carried out under the direct supervision of qualified radiographers. It is the student's responsibility to communicate with the preceptors to arrange for direct supervision.

Students must be directly supervised during surgical and all mobile, including mobile fluoroscopy, procedures regardless of the level of competency.

All Level 1 students require direct supervision for all pediatric exams (age 6 or younger) and may not attempt a competency involving a pediatric patient (age 6 or younger) until the summer Level 2 RA255 course.

*The parameters of Direct supervision are:*

1. A qualified radiographer reviews the procedure in relation to the student's achievement.
2. A qualified radiographer evaluates the condition of the patient in relation to the student's knowledge.
3. A qualified radiographer is present during the conduct of the procedure.
4. A qualified radiographer reviews and approves the procedure.

*The parameters of Indirect supervision are:*

1. A qualified radiographer is immediately accessible to the students.

### Repeat Radiographs

If a student must repeat a radiograph, a qualified radiographer will be present regardless of the student's level of competency.

1. When a student is made aware of the necessity of a repeat, they must inform the radiographer in their area.
2. The radiographer will then supervise the repeat procedure.

I.V. insertions and contrast injections must always be performed under the direct supervision of an I.V. certified Radiographer.

Students must have all radiographs approved by a preceptor radiographer before releasing the patient from the Radiology Department.

*\*\*\* Violation of the direct, indirect, or repeat supervision policies is a serious violation. Failure to adhere to these policies may result in suspension and/or dismissal from the program*

### Clinical Competency Evaluation (CCE)

Didactic courses include demonstration of radiographic procedures and viewing of radiographs in each category. A practical lab is held to enable the student to position a given number of exams from each category. The student must not attempt to complete a CCE until they have successfully completed the lab test for that unit.

There are two fall semesters, one summer, and two spring semesters that clinical competency evaluations (CCE) must be completed. The required procedures are on the ARRT CCE checklist located at the end of this ASR Student Handbook) and are identified as mandatory or elective. The ARRT checklists also have additional requirements listed at the bottom. Refer to the practicum syllabus for the specific number of CCEs due in each semester. CCEs may be performed at all clinical sites and can be supervised by any preceptor radiographer. The original graded CCE form must not be in the student's possession. The preceptor must forward the original graded CCE form to the clinical instructor to be entered in Trajecsys and stored in a secure location.

### Procedure for Comping

When a student informs a Preceptor Radiographer that they “want to comp” or complete a CCE:

1. The student must present their CCE Form to the supervising preceptor before starting the exam. The information at the top of the form must be filled in by the student.
2. The preceptor must directly supervise the student during the completion of a comp (in the room during the exam).
3. The comp form (CCE) should be completed DURING the exam while the preceptor is evaluating the student’s performance.
4. The student must inform the preceptor when they think they are ready to make the exposure.
5. The preceptor must check the student’s positioning, technique, etc. and make corrections, as needed, BEFORE the student is allowed to make the exposure!
6. Once the student starts a comp, they cannot change their mind. The student is expected to complete the exam with supervision and assistance to the best of their abilities and the CCE should be graded accordingly. (The student is allowed and required to repeat unsuccessfully completed CCEs. If a preceptor radiographer must take over the exam due to a decline in the patient’s condition, equipment failure, or a physician’s request, etc. the preceptor does not need to fill out a comp form.)
7. A preceptor should not tell the student they do not think they are ready to comp.
8. If a preceptor must assist or correct the student during a comp, then the points for that area should reflect that assistance/correction.
9. If the student does not successfully complete the CCE, they are allowed to repeat it at a later time.
10. The preceptor should discuss the results of the CCE with the student in private.

Both the student and preceptor should sign the CCE form. The preceptor must date and initial the comp checklist in the student’s binder for each successfully completed CCE. The preceptor will forward the paper CCE form to the Clinical Instructor. The Clinical Instructor will enter the CCE grade in Trajecsys and file the graded form in a secure location.

The student may view their CCE grades at any time by logging in to Trajecsys, then click on reports-skill summary. The instructions for viewing and filtering graded forms is posted in the documents section of Trajecsys. The student is responsible for logging into Trajecsys at least twice per week and verifying that all CCE grades have been

correctly entered by their clinical instructor before their last scheduled clinical day at that site. The student will notify their clinical instructor of any error or discrepancy with their CCEs on or before their last scheduled clinical day at that site. Errors or discrepancies not reported by the last day of the course may require the student to repeat the CCE in a future practicum course or may require the student submit a written request for an in-progress grade contract.

It is the **student's responsibility** to be **involved in procedures** to gain the confidence and knowledge to comp on a particular exam.

The starred items on the CCE form require a score of 3 or greater for the student to successfully complete the competency and progress to indirect supervision. The CCE must be repeated if any starred item receives less than a score of 3. For the second attempt repeated CCE the maximum score will be 85%. For 3 or more attempts the repeated CCE will receive a maximum score of 75%.

After successfully completing a CCE with 75% mastery the student is expected to perform that procedure independently with indirect supervision in a variety of settings with a variety of patients.

If a student is unable to perform a procedure that they have completed a competency on, the ASR Faculty may pull the competency. The student will be required to repeat the competency with a maximum score of 75%. A total of 4 pulled competencies during any practicum course will result in automatic failure of the course.

When the required number of CCEs are not completed by the given specified time, **the student will need to petition in writing to the program director and request an in-progress grade for the practicum course**. When the late CCE is completed, it will be added to the semester grade in which it was due. 75% is the maximum score for any late CCE. For each CCE that is late there will be a 2% reduction in the final overall CCE grade. The student will not be permitted to progress to the next practicum or receive their diploma until all course work is completed. The **student is encouraged to work ahead on their CCEs throughout the program**.

### Simulation of a CCE

The student must submit a written request to their advisor if they would like to request a simulation for a CCE no later than April 15 of the final practicum course. This request must explain why they feel the simulation should be approved. Any CCE that is approved by all ASR faculty for simulation will result in a maximum score of 85%. Not all requests will be approved.

### Final CCEs/Comps

During the spring semester of Level II RA275 course, the clinical instructor will select two different patient's exam(s) and evaluate the student performing the exam(s) for final comps. The evaluation of these procedures will be used to assess the mastery of final competency levels. These two final competencies will use the CCE form as the evaluation tool. The final CCE exam(s) will be selected and evaluated by only a Clinical Instructor. The Clinical Instructor will enter the final comp under the final comp dropdown in Trajecsyst and enter the names of the exam(s) performed in the comments.

### Performance Task Analysis (PTAs)

The PTA forms and the PTA due date grid are posted in Trajecsys. The student must print the due date grid and any forms not yet completed during the first week of each practicum course. The student must review the instructions for each PTA form carefully and place the form in their clinical binder. To successfully complete the practicum course, each objective listed on the PTA form must be completed and the completed form must be submitted no later than the end of the assigned semester that is listed on the PTA due date grid. The student is encouraged to complete and submit the PTA form as early as possible. If the assignment can be completed prior to the semester listed on the PTA due date grid, the student is encouraged to complete it. If the assigned PTAs are not completed and submitted according to the BlackBoard course drop box assignment instructions by the due date, **the student will need to petition in writing to the program director and request an in-progress grade for the practicum course.** (See Allen College Student Handbook). For each PTA form completed/ submitted late a 2% reduction will occur in the overall total clinical instructor/preceptor evaluation grade.

### Certification Testing

The purpose of certification testing is for the student to demonstrate his/her knowledge of radiographic positioning, equipment, and selection of technical factors. The certification form will be used to evaluate the student's comprehension of a particular examination. Certifications will be performed using fellow radiography students as patients, whenever possible. Certification testing is only completed in the RA145, RA255, and RA265 courses.

The student will be evaluated as though they are performing the exam on a "real" patient. **Certification testing is designed to promote continual practice and review of procedures and equipment. The student is expected to practice procedures with a variety of equipment whenever the clinical area is "slow."**

### **Objectives**

1. The student will be evaluated on their interaction with the patient; this includes providing comfort measures for the patient and all aspects of professionalism.
2. The student will be evaluated on their knowledge of the exam.
3. The student will be evaluated on their ability to operate the radiography equipment.

### **Evaluation Methods**

The **Clinical Instructor** will choose the procedure and exam room.

Procedures chosen for certification testing will be those for which lab testing has been completed. Any procedure listed on the mandatory or elective ARRT list may be selected. (The RA:265 course has additional guidelines).

If the procedure that is chosen is one that the student has already successfully passed



a competency (CCE) on, then the student will NOT be allowed to use any resources to help them through the procedure. (Technique notes are allowed)

If the procedure is one that the student has not successfully passed a competency (CCE) on, the student may use other resources to help them through the exam – this includes textbooks, asking the instructor, etc.

The student will be held responsible for continual review of the equipment and procedures; therefore, **excessive** use of resources will be reflected on the certification evaluation form.

The student is responsible for verifying their certification grades are entered in Trajecsyst. The student will notify their clinical instructor if there is any error or discrepancy on or before their last scheduled clinical day at that clinical site. Any certification submitted late will result in a 10-point grade reduction on the certification grade.

### Incompletes

If a student petitions in writing to the program director for an incomplete in a practicum course and the petition is granted, it is the student's responsibility to complete the requirements prior to the start of the next practicum course. The student will not be scheduled for practicum hours or receive their diploma until all incomplete course requirements are completed.

If a student deems completing an assignment necessary, then the student may request to attend the clinical site during nonscheduled time, if approved, in advance (a minimum of 72 hours prior) by ASR faculty and that site's clinical instructor. The student must e-mail all ASR Faculty and wait for a reply before they may attend the clinical site during nonscheduled time. This time will not count towards scheduled clinical time. If any other students are at the clinical site and scheduled in that area, the student must request permission from the scheduled student to complete the procedure.

### Evaluations

Students must complete a self-evaluation at the end of the Fall Level 1 and Fall Level 2 semesters. A 3% reduction of the total CI Evaluation grade will result if the Self Evaluation form is not completed. Late evaluation forms will result in a .5% grade reduction per day late, up to a maximum 3% reduction of the total CI Evaluation grade. The self-evaluation form is located on Trajecsyst.

Student clinical progress is evaluated during each semester by staff preceptors and clinical instructors. Student evaluations will be completed on Trajecsyst.

Each semester students will have one formative (non-graded) evaluation completed by a clinical instructor(s) (CI). Once the evaluation is completed and submitted by the CI on Trajecsyst, the student can view the completed evaluation. The formative evaluation is designed to provide feedback to the student prior to the summative graded evaluation.

The clinical instructor(s) will complete summative graded evaluations on the student periodically each semester after the formative evaluation has been conducted. Once the evaluation is completed and submitted by the CI on Trajecsyst, the student can view the completed evaluation. Utilizing Trajecsyst provides immediate feedback to the student.

The student will complete course/instructor and clinical facility evaluations at the end of the semester. These evaluations include all clinical sites and clinical instructors. The evaluations are reviewed by the Dean, School of Health Sciences, to address any concerns or needs identified by the students. The summary evaluations are then given to the clinical instructors for review and discussion.

### **Radiation Protection and Energized Imaging Laboratory Usage**

The student is expected to practice proper radiation protection at all times when in the clinical environment and in the energized imaging laboratory. Proper radiation protection practices are explained within course RA:112 Methods of Patient Care & Assessment I and reinforced throughout the program. Certain clinical sites may have varying radiation protection policies implemented that the student will be expected to follow. These policies will be posted in Trajecsyst to allow the students to have 24-hour access to the policies.

Students are not allowed to hold patients or image receptors during an exposure. Radiation dosimetry reports are posted within 30 days of receipt of data for review. Students cannot make exposures if person's immobilizing patients are not shielded.

Students must wear their dosimeter while utilizing the imaging lab. The energized imaging laboratory equipment will be locked at the power boxes when ASR faculty are not accessible. Exposures cannot be made unless an instructor is readily available. Students are encouraged to practice positioning utilizing the imaging laboratory classroom. Students must schedule the classroom with any administrative assistant.

### **MRI Safety**

To ensure the safety of student radiographers in the MRI department the following process will be followed prior to students beginning clinical:

The MRI student screening and safety form is discussed with Level 1 students in the summer semester. The form is located on Trajecsyst and is completed by each student prior to their first scheduled clinical day. The ASR Clinical Coordinator reviews each student's MRI student screening and safety form before beginning their first scheduled clinical rotation. All ASR Clinical Instructors have access to the student's completed MRI student screening and safety forms on Trajecsyst.

### **Attendance**

Students are scheduled in clinical to develop the necessary skills for completion of the program. Attendance is monitored to evaluate the student's skills, knowledge, and professionalism.

The attendance website address for students is [www.trajecsyst.com](http://www.trajecsyst.com). Each student must

clock themselves in and out. They must not share their usernames and passwords with anyone or allow anyone else to access or use their account. Any attempt to falsify time keeping records will result in disciplinary action. Students must use the computer at the clinical site to log-in or out for attendance. No personal electronic devices can be used for log-in or clocking out for clinical. If a student's personal device is used for log-in or clocking out, the clinical time will not count. Each student must allow adequate time to arrive at the clinical site and gain access to the computer, to log on to the attendance website. Students need to select the appropriate clinical site when clocking in and out.

If there is failure of the computer system at the clinical site, the student must file a time exception on Trajecsyst. There will be no penalty against the student for equipment/site malfunction or failure.

Students **may not clock in early** to clinical **for any reason** (ex: to leave early). Students must attend the practicum course at the assigned/scheduled time. Students cannot take their break at the beginning or end of the day so they can arrive late or leave clinical early. If a student clocks out 5 or more minutes early the time will be taken out of their allotted hours in increments of .25 minutes missed.

Students will not be scheduled for more than 40 hours per week or 10 hours per day.

Any student requesting to attend clinical during non-scheduled time (for additional learning opportunities/experience) must obtain prior approval from ASR faculty and that site's clinical instructor. The student will email all ASR faculty and wait for permission to attend. Please allow a minimum of 72 hours for approval excluding holidays and weekends.

Students cannot change/switch their scheduled hours or rotation/site. Students cannot change/switch weekends. Students cannot switch their hours with another student. Students cannot make-up time missed due to tardy or absence. If a student needs a specific day off, they are to use their allotted hours. If a situation arises that prevents a student from attending their assigned Professional Development Practicum Course clinical site, the student must immediately email the Practicum Course Instructors for further instructions.

It is each student's responsibility to keep track of their tardies, early departures and absences from clinical. If the student has a question about the time they have missed in clinical, it is each student's responsibility to email Don Bishop. Please allow a minimum of 72-hour response time.

Students will receive a 15-minute break for every 4 hours they are scheduled in the clinical setting. Students may combine their breaks into one 30-minute break. Lunch/Dinner times are not included on the clinical schedule. Students who wish to take a 30 minute lunch/dinner may do so, however, they need to attend clinical another 30 minutes after the scheduled time. Students will not clock out for their breaks.

Students will not leave the clinical area without notifying an immediate supervisor. Students must clock out and e-mail [Don.Bishop@allencollege.edu](mailto:Don.Bishop@allencollege.edu) immediately **before**

they leave clinical for any reason. Failure to notify Don Bishop by email will result in a 1% grade reduction per incident on the total practicum grade. Early departure-clocking out earlier than 5 minutes before the students scheduled time to leave will be deducted in .25-time increments.

Students must only communicate for themselves, not other students.

If a staff preceptor, clinical instructor, or ASR faculty requests the student leave clinical due to illness, or inappropriate behavior, the student must comply. The time missed will be deducted from the allotted hours for the semester.

### **Tardy**

- Being tardy affects the students' chances for gaining valuable clinical knowledge and demonstrating professional behaviors.
- A tardy is a late arrival without prior notification. For the late arrival to not be counted as a tardy the student must submit a notification of absence or email to [Don.Bishop@allencollege.edu](mailto:Don.Bishop@allencollege.edu) **before midnight of the preceding day** or you will be considered tardy.
- Please notify the clinical site by phone immediately if you will be late.
- If you are 15 or more minutes late the student must **email** Don Bishop at Don.Bishop@allencollege.edu within 4 hours of the students scheduled time.
- **Failure to notify the clinical site and email Don Bishop will result in a 1% grade reduction per incident on the total practicum grade.**
- Five minutes is a late arrival for your practicum.  
***Example:** If you are scheduled to be in clinical at 7 a.m. and clock in at 7:05 a.m., you are considered late, and .25 hours will be deducted from your allotted hours.*
- All clinical time missed will be added to your absentee time in increments of .25 hours.
- Failure to clock in is considered one tardy.
- Failure to clock out is considered one tardy.

**Tardy (or failure to clock in or out) will affect the student's practicum grade as listed below:**

1. On your **third tardy** your total professional development evaluation (clinical eval.) grade will be lowered **2%**.
2. On your **fifth tardy** your total professional development evaluation (clinical eval.) grade will be lowered **5%**.
3. On your **seventh tardy** your total professional development evaluation (clinical eval.) grade will be lowered **10%**.
4. **For eight or more tardies your Total Professional Development Practicum Grade will be lowered 1% for each occurrence.**

## **Absence**

Being absent affects the student's chances for gaining valuable clinical knowledge and demonstrating professional behaviors. To demonstrate professionalism, the student must submit a notification of absence form to Don Bishop prior to a planned absence.

A radiation dosimeter must be worn by the student during all clinical rotations and during their procedure's lab in the imaging lab classroom. If a student does not have their dosimeter, they will be dismissed from clinical or lab and will need to contact an ASR Faculty member for further instructions. The time missed from clinical will be deducted from the student's allotted hours.

If you are ill or cannot attend clinical, it is the student's responsibility to notify the clinical site by phone and Don Bishop at [Don.Bishop@allencollege.edu](mailto:Don.Bishop@allencollege.edu). If the clinical site and Don are not notified within the first two hours of your scheduled time, this will be counted as a no call/no show. **Failure to contact the clinical site by phone and email Don Bishop , will result in a No Call/No Show Penalty of a 1% grade reduction per incident on the total practicum grade.**

**In the event that a student has requested time off and the time off hours need to be changed, the student must contact Don Bishop by email within 2 hours of the start time or it will count as a No Call/No Show.**

Any medical event or exposure that may impair a student's ability to attend and/or perform in the practicum course will require a physician's release submitted to, and approved by, the ASR Faculty before returning to clinical. The physician's release must be specific, ex: surgery.

The allotted hours are recommended to be used for illness and personal/emergency situations. Level 1 students are allotted 18 hours each semester. Level 2 students are allotted 24 hours each semester. **Any time missed will NOT be rescheduled and the practicum grade will be affected as follows:**

**LEVEL I**

|  |            |
|--|------------|
| Over <b><u>18 hours</u></b> will lower the student's total practicum grade | <b>1%</b>  |
| Over <b><u>20 hours</u></b> will lower the student's total practicum grade | <b>2%</b>  |
| Over <b><u>24 hours</u></b> will lower the student's total practicum grade | <b>3%</b>  |
| Over <b><u>28 hours</u></b> will lower the student's total practicum grade | <b>4%</b>  |
| Over <b><u>32 hours</u></b> will lower the student's total practicum grade | <b>5%</b>  |
| Over <b><u>36 hours</u></b> will lower the student's total practicum grade | <b>6%</b>  |
| Over <b><u>40 hours</u></b> will lower the student's total practicum grade | <b>7%</b>  |
| Over <b><u>44 hours</u></b> will lower the student's total practicum grade | <b>8%</b>  |
| Over <b><u>46 hours</u></b> will lower the student's total practicum grade | <b>9%</b>  |
| Over <b><u>48 hours</u></b> will lower the student's total practicum grade | <b>10%</b> |
| Over <b><u>52 hours</u></b> will lower the student's total practicum grade | <b>12%</b> |
| Over <b><u>54 hours</u></b> will lower the student's total practicum grade | <b>14%</b> |
| Over <b><u>56 hours</u></b> will lower the student's total practicum grade | <b>15%</b> |
| Over <b><u>58 hours</u></b> will lower the student's total practicum grade | <b>17%</b> |
| Over <b><u>60 hours</u></b> will lower the student's total practicum grade | <b>25%</b> |
| Over <b><u>62 hours</u></b> will lower the student's total practicum grade | <b>28%</b> |
| Over <b><u>64 hours</u></b> will lower the student's total practicum grade | <b>30%</b> |
| <b>65 hours and over will lower the student's total practicum grade</b>    | <b>35%</b> |

**LEVEL II**

|  |            |
|--|------------|
| Over <b><u>24 hours</u></b> will lower the student's total practicum grade | <b>3%</b>  |
| Over <b><u>28 hours</u></b> will lower the student's total practicum grade | <b>4%</b>  |
| Over <b><u>32 hours</u></b> will lower the student's total practicum grade | <b>5%</b>  |
| Over <b><u>36 hours</u></b> will lower the student's total practicum grade | <b>6%</b>  |
| Over <b><u>40 hours</u></b> will lower the student's total practicum grade | <b>7%</b>  |
| Over <b><u>44 hours</u></b> will lower the student's total practicum grade | <b>8%</b>  |
| Over <b><u>46 hours</u></b> will lower the student's total practicum grade | <b>9%</b>  |
| Over <b><u>48 hours</u></b> will lower the student's total practicum grade | <b>10%</b> |
| Over <b><u>52 hours</u></b> will lower the student's total practicum grade | <b>12%</b> |
| Over <b><u>54 hours</u></b> will lower the student's total practicum grade | <b>14%</b> |
| Over <b><u>56 hours</u></b> will lower the student's total practicum grade | <b>15%</b> |
| Over <b><u>58 hours</u></b> will lower the student's total practicum grade | <b>17%</b> |
| Over <b><u>60 hours</u></b> will lower the student's total practicum grade | <b>20%</b> |
| Over <b><u>62 hours</u></b> will lower the student's total practicum grade | <b>23%</b> |
| Over <b><u>64 hours</u></b> will lower the student's total practicum grade | <b>25%</b> |
| <b>65 hours and over will lower the student's total practicum grade</b>    | <b>30%</b> |

Unusual circumstances may be individually evaluated, by the Professional Development Practicum course instructors; upon the student's written/electronic request. If the absence, due to the unusual circumstance and the rescheduled make-up time is approved, the student must attend, or the time missed will be added to the absent time for the semester.

### **Approved absences from clinical**

Time will not be deducted from the students' time if documentation is provided within one week (such as a signed letter on formal letterhead) for the following situations:

1. Military obligations - requires documentation of orders, extended absences will need to be reviewed by the Health Sciences Admission Progression and Graduation Committee.
2. An attorney, judge, or police official in the case of a legal emergency.
3. One day is allowed for jury duty/court appearances.

The **bereavement** policy is as follows:

- Five days are allowed for bereavement of your spouse/domestic partner, mother, father, or child.
- Three days are allowed for bereavement of your brother, sister, stepbrother, stepsister, stepparent, stepchild, grandparents, great-grandparents, grandchildren, mother- or father-in-law, brother- or sister-in-law, son- or daughter-in-law, foster children, or any relative who resides with you at the time of death.
- One day is allowed for bereavement of your nephew, niece, uncle or aunt, step-parent-in-law grandparent-in-law, or step-grandparent.
- The student must notify Don Bishop by email at [Don.Bishop@allencollege.edu](mailto:Don.Bishop@allencollege.edu) and phone the clinical site of the bereavement absence before being absent from clinical.

### **Weather Attendance Policy**

Late starts, cancellations, and early dismissals for the Allen College ASR Program will be posted on the Allen College Website [www.allencollege.edu](http://www.allencollege.edu). It is the student's responsibility to check the weather announcement icon on the Allen College Webpage for late starts, cancellations, and early dismissals any time there is inclement weather, anywhere in Iowa.

Once the delay, dismissal, or cancellation has been posted on the Allen College Website, the student is responsible for accessing this notification. If the student is unaware, clocks in early, or stays later than the closure, the student will not earn time. Weather delays, dismissals, and closings by the ASR Program Faculty are designed for the student's safety in mind and those students who leave or do not come will not have to make-up the time. If clinical is delayed, dismissed early, or cancelled the student needs prior permission from the ASR faculty to attend clinical.

**When Allen College does not cancel class, but travel conditions prevent the student from traveling to their assigned clinical site, students should abide by the following procedure. We expect you to use your best judgment when it comes to**

**bad weather. It is the student's decision if they need to arrive late or leave early from the clinical site due to weather.**

1. If the student will be late due to weather, the student must call the clinical site and email Don Bishop at [Don.Bishop@allencollege.edu](mailto:Don.Bishop@allencollege.edu). Failure to notify the clinical site and Don Bishop within the first two hours will be considered a no call/no show, and the practicum grade will be adjusted according to the no call/no show policy previously mentioned.
2. The student is required to communicate via email that same day, to Don Bishop at [Don.Bishop@allencollege.edu](mailto:Don.Bishop@allencollege.edu) if they were late, left early, or did not attend due to travel conditions.
3. The student needs to request, by email, to Don Bishop at [Don.Bishop@allencollege.edu](mailto:Don.Bishop@allencollege.edu) if they would like to make up the time missed at their assigned clinical site. The email request must be submitted **within 3 business days of the absence**, or the time missed will be added to the absent time for the semester. Please allow 72 normal business hours for approval.
4. All approved weather absences will be rescheduled by Don Bishop after the last scheduled day of the semester. (In some instances, time may be rescheduled during the semester if requested by email and **approved in advance** by ASR Faculty.)
5. If the time missed is not made-up, it will be added to the absent time for the semester.
6. For late arrivals due to weather, time may be made up the same day if approved with that site's clinical instructor. You must email Don Bishop at [Don.Bishop@allencollege.edu](mailto:Don.Bishop@allencollege.edu) of this change in your schedule the same day.
7. If the student is absent for the approved weather make-up time, it will be added to the absent time for the semester.



# Located on Trajecsys

## Preceptor/Clinical Instructor Evaluation of Student Professional Development

Graded

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

Preceptor/Clinical Instructor Name: \_\_\_\_\_ Semester: \_\_\_\_\_

Please rate the student using the following rating scale by placing an "x" in the appropriate box for each objective. When rating the student, you may utilize .5 increments between 0-4 rating scale.

**\*When rating the student at a 2 or below in any area please provide comments in the box adjacent to that performance criteria**

Rating Scale:

**0 – Fails to meet:** Performance failed to meet any normal expectations for the current level in the program

**1 – Minimally meets:** Performance minimally meets any normal expectations for the current level in the program.

**2 – Meets most:** Performance meets some normal expectations for the current level in the program.

**3 – Meets all:** Performance consistently meets all normal expectations for the current level in the program.

**4 – Exceeds normal expectations:** Performance consistently exceeds normal expectations. Results achieved are exceptional and student continually strives to improve his/her ability.

| Performance Criteria  | 0 | 1 | 2 | 3 | 4 | Comments:    |
|---|---|---|---|---|---|--------------|
| <b>1. Organization of assignments:</b> <ul style="list-style-type: none"> <li>• Always demonstrate appropriate attendance.</li> <li>• Complete assignments by the specified time.</li> <li>• Assess the patient and record patient histories.</li> </ul>  |   |   |   |   |   | Example Only |
| <b>2. Application of Knowledge</b> <ul style="list-style-type: none"> <li>• Display problem solving ability in the practicum setting.</li> <li>• Employ reflective (critical) thinking in the analysis of their practicum assignments.</li> <li>• Apply the appropriate medical asepsis and sterile technique.</li> <li>• Critique images for appropriate clinical information, image quality and patient documentation.</li> </ul> |   |   |   |   |   |              |
| <b>3. Patient Care</b> <ul style="list-style-type: none"> <li>• Demonstrate compassion.</li> <li>• <u>Always</u> remember that the patient is a person, and their care is of extreme importance to you.</li> <li>• Integrate the use of appropriate and effective written, oral, and nonverbal communication with patients in the clinical setting.</li> </ul>  |   |   |   |   |   |              |

|   |          |          |          |          |          |                  |
|---|----------|----------|----------|----------|----------|------------------|
| <ul style="list-style-type: none"> <li>Choose patient and family education strategies appropriate to the comprehension level of patient/family.</li> <li>Evaluate the patient's status and condition before, during and following the radiologic procedure to demonstrate competence in assessment skills.</li> </ul>   |          |          |          |          |          |                  |
| <b>Performance Criteria</b>   | <b>0</b> | <b>1</b> | <b>2</b> | <b>3</b> | <b>4</b> | <b>Comments:</b> |
| <ul style="list-style-type: none"> <li>Demonstrate skills in assessment and evaluation of psychological and physical changes in the patient's condition and carry out appropriate actions.</li> <li>Assess the patient and record patient histories.</li> <li>Respond appropriately to patient emergencies.</li> </ul>  |          |          |          |          |          | Example Only     |
| <b>4. Ability to follow directions</b> <ul style="list-style-type: none"> <li>Exhibit flexibility by adjusting schedule to accommodate unforeseen condition or circumstances.</li> </ul>  |          |          |          |          |          |                  |
| <b>5. Initiative</b> <ul style="list-style-type: none"> <li>Demonstrate initiative by volunteering, seeking procedures to observe or to participate in, and ask questions pertinent to practicum assignments.</li> </ul>  |          |          |          |          |          |                  |
| <b>6. Interpersonal relationships</b> <ul style="list-style-type: none"> <li>Be able to work with fellow students, technologists, and radiologists.</li> <li>Maintain a proper rapport with other personnel, being tactful and considerate of others.</li> <li>Integrate the use of appropriate and effective written, oral, and nonverbal communication with patients, the public, and members of the health care team (peers, physicians, nurses, administration, etc.) in the clinical setting.</li> </ul> |          |          |          |          |          |                  |
| <b>7. Self-Image for Level in the ASR Program</b> <ul style="list-style-type: none"> <li>Perform imaging procedures under the appropriate level of supervision.</li> <li>Examine procedure orders for accuracy and follow-up to make corrective changes when applicable.</li> <li>Performance reflects professional competence in determining corrective measures to improve inadequate images.</li> </ul>  |          |          |          |          |          |                  |
| <b>8. Composure and Adaptability</b> <ul style="list-style-type: none"> <li>Perform and function effectively during stressful situations.</li> <li>Be able to adapt to procedural exam changes as necessary.</li> <li>Adapt to changes and varying clinical situations.</li> </ul>  |          |          |          |          |          |                  |
| <b>9. Appearance</b> <ul style="list-style-type: none"> <li>Always adhere to the student dress code while at the clinical sites.</li> </ul>   |          |          |          |          |          |                  |
| <b>10. Multicultural Diversity</b> <ul style="list-style-type: none"> <li>Support patient-centered clinically effective service for all patients regardless of age, gender, disability, special needs, ethnicity, or culture.</li> </ul>  |          |          |          |          |          |                  |

|  |          |          |          |          |          |                  |
|--|----------|----------|----------|----------|----------|------------------|
| <b>11. Age-Appropriate Care</b> <ul style="list-style-type: none"> <li>Support patient-centered clinically effective service for all patients regardless of age.</li> </ul>  |          |          |          |          |          |                  |
| <b>12. Policies and Procedures</b> <ul style="list-style-type: none"> <li>Always adhere to the student dress code while at the clinical sites.</li> <li>Perform imaging procedures under the appropriate level of supervision.</li> <li>Act consistently to maintain patient confidentiality standards.</li> <li>Comply with departmental and institution procedures for response to emergencies, disasters, and accidents.</li> </ul> |          |          |          |          |          |                  |
| <b>Performance Criteria</b>  | <b>0</b> | <b>1</b> | <b>2</b> | <b>3</b> | <b>4</b> | <b>Comments:</b> |
| <b>13. Ethical and Professional Behaviors</b> <ul style="list-style-type: none"> <li>Demonstrate professional conduct.</li> <li>Demonstrate competency in the principles of radiation protection standards to include time, distance, shielding and radiation monitoring. Support safe, ethical, and legal practices.</li> </ul>   |          |          |          |          |          | Example Only     |

**Total points** \_\_\_\_\_

Preceptor/Clinical Instructor Signature and Date \_\_\_\_\_

Student Signature and Date \_\_\_\_\_

Additional comments:

**Grading Scale CI/Preceptor Evaluations**

|               |               |
|---------------|---------------|
| 52 = 100%     | 33-33.5 = 81% |
| 51-51.5 = 99% | 32-32.5 = 80% |
| 50-50.5 = 98% | 31-31.5 = 79% |
| 49-49.5 = 97% | 30-30.5 = 78% |
| 48-48.5 = 96% | 29-29.5 = 77% |
| 47-47.5 = 95% | 28-28.5 = 76% |
| 46-46.5 = 94% | 26-27.5 = 75% |
| 45-45.5 = 93% | 25-25.5 = 74% |
| 44-44.5 = 92% | 24-24.5 = 73% |
| 43-43.5 = 91% | 23-23.5 = 72% |
| 42-42.5 = 90% | 22-22.5 = 71% |
| 41-41.5 = 89% | 21-21.5 = 70% |
| 40-40.5 = 88% | 20-20.5 = 69% |
| 39-39.5 = 87% | 19-19.5 = 68% |
| 38-38.5 = 86% | 17-18.5 = 67% |
| 37-37.5 = 85% | 15-16.5 = 66% |
| 36-36.5 = 84% | 13-14.5 = 65% |
| 35-35.5 = 83% | 12-12.5 = 64% |
| 34-34.5 = 82% |               |

## **Professional Development Practicum Objectives**

These objectives are designed to help the student radiographer receive the clinical experience necessary to complete the program and to prepare them for the professional work force. These objectives refer to Professional Development Practicum I, II, III, IV, and V.

### **The Student Should:**

- Always demonstrate prompt attendance.
- Have completed CCEs and PTAs by the specified time.
- Always demonstrate compassion and professional conduct.
- Be able to work with fellow students, technologists, and radiologists.
- Always adhere to the student dress code while at the clinical sites.
- Perform and function effectively during stressful situations.
- Know when and when not to interrupt radiologists, physicians, staff technologists and fellow classmates.
- Always remember that the patient is a person, and their care is of extreme importance to you.
- Demonstrate a positive, energetic outlook about practicum assignments.
- Maintain a proper rapport with other personnel, being tactful and considerate of others.
- Demonstrate initiative by volunteering, seeking procedures to observe or to participate in, and ask questions pertinent to practicum assignments.
- Exhibit flexibility by adjusting schedules to accommodate unforeseen conditions or circumstances.
- Be able to accept procedural changes as required.
- Display problem solving ability in the practicum setting.
- Employ reflective (critical) thinking in the analysis of their practicum assignments.

### **Student Health Services**

Health care policies for students are discussed during orientation. These policies include infection control, radiation protection, pregnancy, and other health care concerns. Emergency medical care is facilitated at the clinical site if appropriate to the type of emergency. If a clinical site does not have an emergency room and/or appropriate equipment the student will be taken to Allen Hospital Emergency Room. Students should be directed to the Allen Hospital Occupational Health Center for all non-life-threatening injuries. Tuberculin tests are given to all radiography students.

Any medical event or exposure that may impair a student's ability to attend and/or perform in the practicum course will require a physician's release submitted to and approved by the ASR Faculty before returning to clinical.

### **Student Status**

The student will not substitute for paid personnel to conduct the functions of any clinical staff; however, the student may have an opportunity to be hired as an employee in a radiology department. Iowa licensure states that a permit to practice is required to make an exposure with ionizing radiation thus, a student may not be employed as a general radiographer. The student may only complete ASR Program assignments and competencies when clocked into a clinical site as a student.

## Allen College ASR Student Uniform and Dress Code

The student will adhere to the Allen College ASR Uniform and Dress Code Policy at **all clinical sites, at all times.**

1. All students shall exhibit dress that is appropriate and professional by adhering to the uniform and dress code set by Allen College ASR Program and affiliating agencies. If at any time, the affiliating institution policy and the Allen College ASR policy seem in conflict, the student shall adhere to the clinical site's policy. Students who do not meet the criteria for proper dress code will be dismissed from the facility until compliance with the dress code is established.
2. The students' I.D. Badge must always be worn when in the hospital/clinical area and be clearly visible. It must be replaced immediately if it is lost or there is a name change. Students must have an Allen College patch always sewn on the left sleeve of a white lab coat or royal blue top and visible. A radiation dosimeter must be worn by the student during all clinical rotations and during their procedure's lab in the imaging lab classroom. If a student does not have their dosimeter, they will be dismissed from clinical or lab and will need to contact an ASR Faculty member for further instructions. The time missed from clinical will be deducted from the students' allotted hours.
3. Student uniforms consisting of white or matching royal blue pants and royal blue tops will be worn by students while in the clinical setting, jogger style scrubs are allowed, unless otherwise specified by department. It is permissible to wear a short or long-sleeved solid white, black, or gray shirt under the royal blue top.
  - a. A white fingertip length laboratory coat with the Allen College emblem attached to the upper left sleeve may be worn over uniform while in the clinical area only. The laboratory coat is the only article of clothing that can be worn over the uniform in the clinical setting.
  - b. Shoes and socks must be kept clean and in good repair. Croc's footwear is permitted if shoes are without holes and are Crocs Work Shoe brand or another brand with comparable safety features. Canvas shoes are not allowed. It is recommended purchasing comfortable tennis shoes.
  - c. Undergarments must be worn. Undergarments should never be visible or identifiable by outline or color.
  - d. Department scrub clothing shall not be worn out of the hospital except with special permission.
  - e. The uniform must always be in good repair and be replaced before evidence of wear detracts from the overall general appearance of the student.
  - f. The length and style of the uniform must be appropriate in pant length and physical build of the individual. Jeans, white denim pants, sweatshirts, shorts, skorts, split skirts, skirts, leggings, and t-shirts are not permitted. Colored trim or accessories on a white uniform must not be visible when worn as part of the student uniform.
4. Acceptable jewelry for all students includes:
  - a. Watch
  - b. Piercings:

- i. Facial piercings are allowed if they don't pose a risk to patient or student safety.
    - ii. As a safety measure, no hoop earrings are permitted; small button-style earrings only. Industrial or ear bar piercing is not allowed.
  - c. Rings: Must not interfere with patient or student safety. Rings must be removed and secured inconspicuously to the uniform in areas where policy prohibits the wearing of rings.
  - d. Necklace: Must not interfere with patient safety
  - e. A medical alert bracelet/necklace may be worn.
  - f. Maternity clothes: Exceptions to a uniform can be made with prior approval.
  - g. Visible tattoos containing inappropriate or discriminatory content must be covered.
  - h. Individual clinic site policies supersede the policy written in the handbook and will be followed.
5. Personal Hygiene and Grooming
  - a. Hair: Hair must be neat and clean. Hairstyles shall be professional appearing and in moderation. Hair shall be secured from the face and off the uniform collar in a simple style. If the length of the hair is beyond the shoulder, hair shall be worn up and securely controlled so that it does not interfere with patient care or create a safety hazard. Barrettes must be simple in design and blend with the hair color. Extreme hair colors and styles are not permitted.
  - b. Facial Hair: mustaches, sideburns, and beards must be short and neatly trimmed.
  - c. Fingernails are to be kept neatly trimmed, clean, and in good repair. Nails must not exceed a length of ½ inch. Artificial nails are prohibited. If nail polish is worn, it must cover the entire fingernail and be free from chips.
  - d. Cosmetics shall be worn in a professional manner. Strong perfumes/colognes/lotions shall be avoided when caring for patients.
  - e. Odor: Excellent personal hygiene is an expectation of all students. To avoid offensive body odors and accumulation of bacteria, frequent bathing/showering and use of effective deodorant is essential. Body odor is unacceptable. Clothing, uniforms, scrubs, and hair should not smell of smoke, chemicals, or strong perfume.
6. Gum chewing is prohibited for students when in uniform or when having contact with either patients or the public.

### **Lead Markers**

The student must attend their assigned clinical site with their own personal set of lead markers. The first set of lead markers will be provided by the ASR Program in fall level 1. It is recommended that the student orders a back-up set of lead markers in case the originals are lost. All lead markers must be three (3) initial lead markers like the original ones that were supplied by the ASR Program.

**A.R.R.T. Mandatory (35) Clinical Competency Evaluations (CCEs)****Allen College ASR Program**

| <b>STUDENT:</b>  | <b>Fall<br/>Level 1</b> | <b>Spring<br/>Level 1</b> | <b>Summer<br/>Level 2</b> | <b>Fall<br/>Level 2</b> | <b>Spring<br/>Level 2</b> |
|--|-------------------------|---------------------------|---------------------------|-------------------------|---------------------------|
| ABDOMEN Supine & Upright                                       |                         |                           |                           |                         |                           |
| ANKLE  |                         |                           |                           |                         |                           |
| C-ARM requires manipulation to obtain more than one projection |                         |                           |                           |                         |                           |
| CERVICAL SPINE   |                         |                           |                           |                         |                           |
| CLAVICLE   |                         |                           |                           |                         |                           |
| CROSS-TABLE HORIZONTAL BEAM LATERAL SPINE (pt. recumbent)      |                         |                           |                           |                         |                           |
| CXR (Routine Adult PA/LAT)                                     |                         |                           |                           |                         |                           |
| CXR (Adult AP Cart or W/C)                                     |                         |                           |                           |                         |                           |
| ELBOW  |                         |                           |                           |                         |                           |
| FEMUR  |                         |                           |                           |                         |                           |
| FINGER OR THUMB  |                         |                           |                           |                         |                           |
| FOREARM  |                         |                           |                           |                         |                           |
| FOOT   |                         |                           |                           |                         |                           |
| **GERIATRIC ROUTINE CXR  |                         |                           |                           |                         |                           |
| **GERIATRIC UPPER or LOWER EXTREMITY (not hip)                 |                         |                           |                           |                         |                           |
| HAND   |                         |                           |                           |                         |                           |
| HIP  |                         |                           |                           |                         |                           |
| HIP X-TABLE LATERAL (horizontal beam/patient recumbent)        |                         |                           |                           |                         |                           |
| HUMERUS  |                         |                           |                           |                         |                           |
| KNEE   |                         |                           |                           |                         |                           |
| LUMBAR SPINE   |                         |                           |                           |                         |                           |
| PEDS CHEST (age 6 or younger) AP/PA & LAT (must be Level 2)    |                         |                           |                           |                         |                           |
| PELVIS   |                         |                           |                           |                         |                           |
| PORT ABDOMEN   |                         |                           |                           |                         |                           |
| PORT ADULT CHEST   |                         |                           |                           |                         |                           |
| PORT upper or lower extremity                                  |                         |                           |                           |                         |                           |
| RIBS   |                         |                           |                           |                         |                           |
| SHOULDER   |                         |                           |                           |                         |                           |
| SURGICAL C-ARM (requires manipulation around a sterile field)  |                         |                           |                           |                         |                           |
| TIB/FIB  |                         |                           |                           |                         |                           |



| <b>STUDENT:</b>   | <b>Fall<br/>Level 1</b> | <b>Spring<br/>Level 1</b> | <b>Summer<br/>Level 2</b> | <b>Fall<br/>Level 2</b> | <b>Spring<br/>Level 2</b> |
|---|-------------------------|---------------------------|---------------------------|-------------------------|---------------------------|
| *TRAUMA LOWER EXTREMITY   |                         |                           |                           |                         |                           |
| *TRAUMA SHOULDER or<br>HUMERUS<br>(axial, scapular y, or transthoracic) |                         |                           |                           |                         |                           |
| *TRAUMA UPPER EXTREMITY<br>(not shoulder) (not finger)                  |                         |                           |                           |                         |                           |
| THORACIC SPINE  |                         |                           |                           |                         |                           |
| WRIST   |                         |                           |                           |                         |                           |

### A.R.R.T. Electives (35) Clinical Competency Evaluations (CCEs)

Allen College ASR Program

| STUDENT:  | Fall Level 1 | Spring Level 1 | Summer Level 2 | Fall Level 2 | Spring Level 2 |
|---|--------------|----------------|----------------|--------------|----------------|
| AC JOINTS   |              |                |                |              |                |
| ARTHROGRAM  |              |                |                |              |                |
| CALCANEUS   |              |                |                |              |                |
| CONTRAST ENEMA  |              |                |                |              |                |
| CYSTOGRAPHY/VCUG  |              |                |                |              |                |
| DECUB ABDOMEN   |              |                |                |              |                |
| DECUB CHEST   |              |                |                |              |                |
| ERCP  |              |                |                |              |                |
| ESOPHAGRAM (not video swallow)  |              |                |                |              |                |
| FACIAL BONES (minimum 2 projections)                                  |              |                |                |              |                |
| Geriatric Hip or Spine  |              |                |                |              |                |
| HYSTEROSALPINGOGRAPHY   |              |                |                |              |                |
| INTRAVENOUS UROGRAPHY   |              |                |                |              |                |
| MANDIBLE (minimum 2 projections)                                      |              |                |                |              |                |
| MYELOGRAM   |              |                |                |              |                |
| NASAL BONES (minimum 2 projections)                                   |              |                |                |              |                |
| ORBITS (minimum 2 projections)  |              |                |                |              |                |
| PATELLA   |              |                |                |              |                |
| PEDS. ABDOMEN<br>(Age 6 or younger) (must be Level 2)                 |              |                |                |              |                |
| PEDS. PORTABLE STUDY<br>(Age 6 or younger) (must be Level 2)          |              |                |                |              |                |
| PEDS.UPPER or LOWER EXTREMITY<br>(Age 6 or younger) (must be Level 2) |              |                |                |              |                |
| SACRUM/COCCYX   |              |                |                |              |                |
| SCAPULA   |              |                |                |              |                |
| SCOLIOSIS   |              |                |                |              |                |
| SI JOINTS   |              |                |                |              |                |
| SINUSES (minimum 2 projections)                                       |              |                |                |              |                |
| SKULL (minimum 2 projections)   |              |                |                |              |                |

| STUDENT:   | Fall Level 1 | Spring Level 1 | Summer Level 2 | Fall Level 2 | Spring Level 2 |
|--|--------------|----------------|----------------|--------------|----------------|
| SMALL BOWEL SERIES                               |              |                |                |              |                |
| SOFT TISSUE NECK (upper airway)                  |              |                |                |              |                |
| Sternoclavicular Joints                          |              |                |                |              |                |
| STERNUM  |              |                |                |              |                |
| TEMPOROMANDIBULAR JOINTS (Minimum 2 projections) |              |                |                |              |                |
| TOE  |              |                |                |              |                |
| UGI SERIES                                       |              |                |                |              |                |

The student must place this checklist in their clinical binder and take to all clinical rotations. Preceptors must date and initial when a CCE is successfully completed.

**The clinical site's routine projections will satisfy the CCE requirement unless otherwise specified above.**

A total of **3** CCEs from the **mandatory list** must be completed by the end of Fall Level I RA:135.

A total of **10** CCEs from the **mandatory list** must be completed by the end of Spring Level I RA:145

A total of **18** CCEs from the **mandatory list** and a total of **5** CCEs from the **elective list** must be completed by the end of Summer Level II RA:255

A total of **25** CCEs from the **mandatory list** and a total of **10** CCEs from the **elective list** must be completed by the end of Fall Level II RA:265

All CCEs on the **mandatory list** and a total of **15** CCEs from the **elective list** must be completed by the end of Spring Level II RA:275. Each successfully completed elective CCE that exceeds the minimum 15 total required (without simulation) will receive 1% extra credit applied to the total CCE grade in the RA:275 Professional Development Practicum course if all other course requirements are submitted on time.

**Elective list additional requirements no later than the end of RA275:**

- Two fluoroscopy comps on the elective list must be completed.
- One comp must be from the head (skull, sinus, facial bones, nasal bones, orbits, zygomatic arches, TMJ, or mandible).

**Please refer to the current Practicum course Syllabus for further information.**

Mini c-arm procedures cannot be used as a CCE.

**\*Per the ARRT: Trauma** is considered a serious injury or shock to the body. Modifications may include variations in positioning, minimal movement of the body part, etc.

**\*\*Per the ARRT the geriatric patient** is defined as at least 65 years old and physically or cognitively impaired because of aging.

Per the ARRT: "One patient may be used to document more than one competency. However, each individual procedure may be used for only one competency" (ARRT, 2022).

## Allen College ASR Program

## Clinical Competency Evaluation

Student: For Example Only DATE: \_\_\_\_\_

Evaluator: \_\_\_\_\_

Radiographic Procedure: \_\_\_\_\_

Clinical Site \_\_\_\_\_ Medical Record # \_\_\_\_\_

**Standard:** The evaluator will rate the student's competencies according to the numbered rating scale: 4 = Above Average, 3 = Average, 2 = Below Average, 1 = Poor, 0 = Unacceptable

- A student will not receive a score of 3 if they must be reminded or corrected.
- The CCE must be repeated if any starred item receives a score of less than a 3.

**PART I: Performance Objective:** Given a patient and the necessary requisition and radiographic room, the student should have:

|    |   |              |
|----|---|--------------|
| 1. | Identified the procedure(s) to be performed and verified with Doctor's order.   |              |
| 2. | Identified the patient's location and mode of transportation.                   |              |
| 3. | Acknowledged any pathological conditions and made any necessary adjustments.    |              |
| 4. | Acquired and documented on the requisition the appropriate clinical history.    |              |
| 5. | Provided a clean and orderly work area, set-up room and supplies per procedure. |              |
| 6. | Selected the correct patient by using two identifiers                           |              |
|    |   | <b>SCORE</b> |

**PART II: Performance Objective:** Given a patient and the necessary radiographic equipment, the student should have:

|     |   |  |
|-----|---|--|
| 1.  | Selected and correctly placed the appropriate cassette size and type.         |  |
| 2.  | Positioned the patient for the radiographic projection.                       |  |
| 3.  | Directed the central ray to the anatomic part.                                |  |
| 4.  | Selected the proper source to image (SID) distance.                           |  |
| 5.  | Applied proper collimation.   |  |
| 6.  | Marked the image appropriately.   |  |
| 7.  | Applied proper radiation protection devices for the patient, self and others. |  |
| 8.  | Instructed the patient in breathing technique.                                |  |
| 9.  | Made the exposure while observing the patient.                                |  |
| 10. | Removed artifacts from area of interest.                                      |  |
| 11. | Included all anatomical parts of interest on the film.                        |  |
| 12. | Labeled the image with the correct patient identification.                    |  |

|     |  |              |
|-----|--|--------------|
| 13. | Produced an image without motion.  |              |
| 14. | Demonstrated accurate angle of the tube.   |              |
| 15. | Selected the correct technique factors: kV, mA, time   |              |
| 16. | Selected the proper focal spot size  |              |
| 17. | Selected the correct AEC cells and density control   |              |
| 18. | Demonstrated the ability to critique the radiographs for diagnostic image quality and positioning. |              |
|     |  | <b>SCORE</b> |

**PART III: Performance Objective:** Given a patient and the necessary radiographic equipment, the student should have:

|    |  |  |
|----|--|--|
| 1. | Demonstrated respect for the patient's modesty.            |  |
| 2. | Applied patient comfort procedures.                        |  |
| 3. | Demonstrated proper patient communication.                 |  |
| 4. | Accepted constructive criticism.                           |  |
| 5. | Demonstrated the ability to adapt to new situations.       |  |
| 6. | Instilled confidence in the patient.                       |  |
| 7. | Explained the exam to the patient.                         |  |
| 8. | Exhibited the self-confidence to perform this examination. |  |
|    |  | <b>SCORE:</b>                          |
|    |  | <b>TOTAL POINTS<br/>(128 possible)</b> |

Example Only

N/A = 4 points

This CCE was completed under direct supervision (in the room while the procedure was being performed) by:

\_\_\_\_\_  
Registered Technologist Signature

This CCE was discussed with the student:

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

## Grading Rubric for the Clinical Competency Evaluation Form Performance Objectives:

| 4 Above average  | 3 Average  | 2 Below Average  | 1 Poor   | 0 Unacceptable  |
|--|--|--|--|---|
| The student performed the objective with the skill of an entry-level radiographer. | <p>The student performed the objective but may have taken more time to plan or organize their thoughts. The pace and organization may need improvement.</p> <p>A student will not receive a 3 on an objective if they must be reminded or corrected.</p> | The student had to be reminded or corrected on the objective. The student understands the error and can explain how to correct it. | <p>The student had to be reminded or corrected on the objective. The error would have resulted in a repeat exposure if not under direct supervision.</p> <p>The student understands the error and can explain how to correct it.</p> | <p>The student had to be reminded or corrected on the objective.</p> <p>The student does not understand the error and cannot explain how to correct it.</p> |

(The CCE must be repeated if any starred performance objective receives a score of less than a 3.)

**Clinical Competency Evaluation Form Grading Scale:**

|   |  |
|---|--|
| A<br>135 = 99%<br>134= 99<br>133=98<br>132=97                   | C<br>106=78%<br>105=77<br>104=76<br>103=76<br>102=75 |
| A-<br>131=96%<br>130=96<br>129=95<br>128=94                     | C-<br>101= 74%<br>100=74<br>99=73<br>98=72           |
| B+<br>127=93%<br>126=93<br>125=92<br>124=91<br>123=90<br>122=90 | D+<br>97=71%<br>96=71<br>95=70                       |
| B<br>121=89%<br>120=88<br>119=88<br>118=87<br>117=86            | D<br>94=69%<br>93=68<br>92=68<br>91=67               |
| B-<br>116=85%<br>115=85<br>114=84<br>113=83                     | D-<br>90=66%<br>89=65<br>88=65                       |
| C+<br>112=82%<br>111=82<br>110=81<br>109=80<br>108=79<br>107=79 | F<br>87=64%  |

**Allen College ASR Program****Performance Task Analysis – PTA Evaluation**Clinical Competency Requirements: Pass/Fail

Clinical Rotation:

**Example Only**Allen Hospital Patient Transport DepartmentDue by the end of the semester in which assigned on the PTA Grid, you will only be assigned one day.**STUDENT:** \_\_\_\_\_

|     | <b>Task</b>   | <b>Staff Initials</b> | <b>Date Completed</b> |
|-----|---|-----------------------|-----------------------|
| 1.  | Introduce yourself.   |                       |                       |
| 2.  | Identify the patient verbally and check the patient ID band.  |                       |                       |
| 3.  | Evaluate the mode of transport for exam and patient safety.   |                       |                       |
| 4.  | Demonstrate use of elevators.                                 |                       |                       |
| 5.  | Demonstrate use of beds, carts, and wheelchairs.              |                       |                       |
| 6.  | Identify nurse call light for questions/assistance.           |                       |                       |
| 7.  | Sign out the patient from the unit/floor.                     |                       |                       |
| 8.  | Demonstrate use of O <sub>2</sub> (on, off, proper settings). |                       |                       |
| 9.  | Demonstrate handling of IVs, IV poles/IV pumps.               |                       |                       |
| 10. | Identify/discuss handling of urine bags.                      |                       |                       |
| 11. | Identify/discuss handling of feeding tubes.                   |                       |                       |
| 12. | Identify/discuss handling of chest tubes.                     |                       |                       |
| 13. | Identify/discuss the procedure for cardiac monitors.          |                       |                       |