















concerns. The following are examples of services provided:

- < Psychological counseling, group therapy, crisis intervention
- < Substance abuse education, assessment and counseling
- < Consultation on mental health issues and diversity
- < Career testing and counseling
- < Sexual assault counseling
- < Training programs in communication, leadership, conflict resolution, and substance abuse prevention
- < Testing (aptitude, interest, personality, national testing programs)

<https://www.southalabama.edu/departments/counseling/>

5. University Writing Center - Students and others may receive help on any type of writing task at any stage of the writing process from idea generation, development, and revision, to grammar and editing strategies. Consulting sessions are held in the University Writing Center (Academic Service Center 1390). To make an appointment with a writing consultant, call the Writing Center (460-6480). USA also provides online writing tutoring services through SMARTTHINKING, an online tutoring service. SMARTTHINKING is available at <http://services.smarthinking.com>. Students may enter the site by logging on with their JAG number and using the last four digits of the social security number as the password. For log-on problems, technical questions and/or on-campus writing assistance, contact the USA Writing Center at 251-460-6480

<https://www.southalabama.edu/departments/academicssuccess/writing/>

6. Psychological Clinic  
The USA Psychological Clinic provides professional services for the USA community – including students. Appointments can be made by calling 251-460-7149 or preferably through [psychologyclinic@southalabama.edu](mailto:psychologyclinic@southalabama.edu).

#### **G. Plan for Assessing Effectiveness**

A variety of assessment methods are employed to continuously monitor the extent to which program goals have been met. The results of such assessments are used to improve both educational and support activities. Our assessment plan identifies benchmarks for measurement which exceed those required by The Joint Review Committee on Education in Radiologic Technology (JRCERT).

Data is collected and analyzed continuously by program faculty, with Advisory Committee review and feedback solicited at least annually. The assessment plan is reviewed at least annually.

JRCERT requires that we document the following program effectiveness data

- < Five-year average credentialing examination pass rate of not less than 75 percent at first attempt within six months of graduation.
- < Five-year average job placement rate of not less than 75 percent within twelve months of graduation
- < Annual program completion rate
- < Graduate satisfaction
- < Employer satisfaction



## II. RADIATION THERAPY PROGRAM OVERVIEW

### A. Radiation Therapy Curriculum for a B.S. in Radiologic Sciences

Degree seeking students must complete the 53/63 semester hour pre-professional component prior to enrolling in professional component courses.

#### FRESHMAN and SOPHMORE YEARS

Pre-Professional Component (53/63 semester hours)

FRESHMAN and SOPHMORE YEARS Pre-Professional Component	
<b>Area I. Written Composition (6)</b>	
English Composition (EH 101) .....	3
English Composition II (EH 102) .....	3
<b>Area II. Humanities and Fine Arts (12)</b>	
Public Speaking (CA 110) .....	3
Fine Arts Elective .....	3
(ARH 100, 103, 123, ARS 101, DRA 110, MUL 101)	
Literature Elective* .....	3
(EH 215, 216, 225, 226, 235, 236)	
Literature sequence* or Humanities Elective* .....	3
(AFR 101, AIS 105, ARH 100, 103, 123, ARS 101, 121, 123, 124, DRA 110, EH 215, 216, 225, 226, 235, 236, Foreign Language except 190, 290, or 390, PHL 110, 121, 131, 231, 240, or MUL 101)	
<b>Area III. Natural History &amp; Math (11)</b>	
Pre-Calculus Algebra (MA 112) .....	3
Biology Elective (BLY 101 or 121).....	4
Biology Elective (BLY 102 or 122).....	4
<b>Area IV. History, Social and Behavioral Sciences (12)</b>	
Psychology (PSY 120) .....	3
History Elective* .....	3
(HY 101, 102, 135, 136)	
History sequence* or Social Science Elective .....	3
(HY 101, 102, 135, 136, AN 100, 101, ECO 215, 216, GEO 114, 115, PSC 130, PSY 250, SY 109, 112, AIS 115, 201)	
Social Science Elective .....	
(AN 100, 101, ECO 215, 216, GEO 114, 115, PSC 130, PSY 250, SY 109, 112, AIS 115, 201)	
<b>Area V. Pre-Professional Required Courses (18-22)</b>	
Anatomy & Physiology I (BMD 114) .....	4
Anatomy & Physiology II (BMD 115).....	4
Intro to Computer App (CIS 150 or CIS 010) .....	0-3
Physics (PH 104 or 114) .....	4-5
Statistics (ST 210).....	3
Optional General Elective.....	3
<i>Pre-Professional Component Total:</i> .....	53/63
*Students must have one history elective and one literature elective to graduate. In addition, student must choose a second history or literature to complete a two part sequence (Part I and II of same subject).	

#### JUNIOR YEAR

Professional Component (41 semester hours)

The professional component (junior and senior years) consists of two years of academic and clinical study in Radiologic Sciences. The program is six semesters in length, including two summer terms. All candidates must have satisfied the pre-professional component to qualify for the degree-seeking professional component, but completion of

that component does not guarantee admission to the professional component. Enrollment in the professional component is limited by the number of clinical positions available. During the professional component, students must be prepared to travel up to 90 miles from campus in order to participate in the clinical education component of the curriculum.

All students admitted to the professional component are required to complete the following professional courses during their first year in the professional component of program:

Fall: RAD 300, RAD 304, RAD 307, RAD 310, RAD 312 (15 hrs)  
 Spring: RAD 301, RAD 308, RAD 315, RAD 318, RAD 335 (15 hrs)  
 Summer: RAD 302, RAD 309, RAD 324, RAD 320 (11 hrs)

After completing the first year of the professional component curriculum, students will have the opportunity in their senior year to: 1) continue studies in Radiography plus one advanced imaging modality, 2) study Ultrasound only, or 3) study Radiation Therapy only.

**SENIOR YEAR if Radiation Therapy track is chosen**

Professional Component (42/44 semester hours)

Track 3: Radiation Therapy Professional Curriculum (42/44 semester hours)

<b>Semester</b>	<b>Course</b>	<b>Course ID</b>	<b>Hours</b>
<b>Fall</b>	Clinical Education I	RAD 441	5
	Radiation Therapy Physics	RAD 448	3
	Cross Sectional Anatomy	RAD 320*	2
	Orientation to Radiation Oncology	RAD 446	3
	Patient Care in Radiation Oncology	RAD 450	1
	Principles & Practice of Radiation Oncology I	RAD 452	3
			<b>Fall Total Hours</b>
<b>Spring</b>	Clinical Education II	RAD 442	6
	Dosimetry and Treatment Planning I	RAD 455	3
	Principles & Practice of Radiation Oncology II	RAD 453	3
	Cancer Management in Radiation Onc.	RAD 458	3
	Rad. Sci. Research I	RAD 496	1
			<b>Spring Total Hours</b>
<b>Summer</b>	Clinical Education III	RAD 443	7
	Dosimetry and Treatment Planning II	RAD 456	2
	Quality Mgmt in Radiation Oncology	RAD 454	1
	Rad. Sci. Research II	RAD 497	1
*RAD 320 required if not previously completed			
		<b>Summer Total Hours</b>	<b>11</b>
<b>Track 3 Senior Year Total Hours</b>			<b>42-44</b>

**B. Description of the Profession**

Radiation therapists assist in localizing tumors, participate in treatment planning and

deliver high doses of ionizing radiation prescribed by a radiation oncologist. Radiation therapists are the primary liaison between patients and other members of the radiation oncology team. They also provide a link to other health care providers, such as social workers and dieticians.

Radiation therapy often involves daily treatments extending over several weeks. This treatment method uses highly sophisticated equipment and requires a great deal of initial planning as well as constant patient care and monitoring. Radiation therapists must maintain a high degree of accuracy and an awareness of safety issues. They also must remain sensitive to the physical and emotional needs of patients.

Radiation therapists must demonstrate an understanding of cancer, radiation biology, radiation therapy techniques, equipment technology, radiation safety and the psychosocial aspects of cancer. The radiation therapist uses professional judgment and critical thinking when assisting with treatment planning, recognizing and resolving equipment problems and treatment discrepancies, anticipating patient needs and concerns, and determining when treatment should be withheld until a physician can be consulted.

## **C. Accreditation, Curriculum and Certification**

### **1. Accreditation**

While the University of South Alabama is fully accredited by the Commission on Colleges of the Southern Association of Colleges and Schools, radiography and radiation therapy programs may voluntarily seek programmatic accreditation through the Joint Review Committee on Education In Radiologic Technology (JRCERT).

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

The JRCERT is the only organization recognized by the U.S. Department of Education for the accreditation of education programs for radiographers and radiation therapists in the United States. This programmatic accreditation recognizes programs of study that meet certain established qualifications and educational standards as determined through initial and subsequent periodic evaluations. Accreditation is assurance of acceptable educational quality, and benefits patients, students, and educational programs.

The process of initial accreditation of a program by the JRCERT takes approximately 18 - 24 months, and began formally for the University of South Alabama's Radiation Therapy program in Summer 2004. In Fall of 2005, the program was awarded the maximum duration that may be awarded for initial accreditation by the JRCERT, and in 2008 the program earned a reaccreditation award of 8 years. As such, this program strives to conduct a radiation therapy program which meets or exceeds JRCERT requirements as set forth in the Standards for an Accredited Educational Program in Radiation Therapy. (Standards). The JRCERT Standards can be viewed at [www.jrcert.org](http://www.jrcert.org).

All students are encouraged to read the Standards as a means of acquiring an overview of radiation therapy education as well as the responsibility this program assumes when it accepts students into the program. Furthermore, students may gain additional insight into what is expected of them as students and perhaps better understand why students must participate in various activities as they

proceed through this program.

Students who have questions about the JRCERT Standards or question the program's compliance with JRCERT Standards are encouraged to speak with the Radiation Therapy program director or Chair of the Department of Radiologic Sciences. Complaints will be investigated and a written response will be provided within 10 working days. A record of all complaints of noncompliance with the Standards will be maintained and made available to JRCERT. Students may also contact the office of the JRCERT directly.

JRCERT accreditation information can be found at [www.jrcert.org](http://www.jrcert.org).

## **2. Curriculum**

The Radiation Therapy professional curriculum as outlined by the American Society of Radiologic Technologists (ASRT) is the foundation for education in this program. The curriculum represents essential components of an entry-level radiation therapy program. Students are encouraged to review the ASRT curriculum to better appreciate curriculum plans outlined on course syllabi.

The ASRT has also set practice standards for radiation therapists. These standards describe the profession and establishes general criteria for evaluating the quality of practice and service.

ASRT curriculum information and Radiation Therapy practice standards can be found at [www.asrt.org](http://www.asrt.org).

## **3. Certification**

Eligibility for certification as a radiation therapist with The American Registry of Radiologic Technologists (ARRT) requires that a student satisfy requirements for education, ethics, and examination. Candidates for ARRT certification in radiation therapy must successfully complete a program of formal education that is accredited by a mechanism acceptable to the ARRT. Candidates must have also demonstrated competency in an ARRT-specified list of procedures. An educator's signature on each candidate's application is required to verify completion of competencies. Students are encouraged to review the ARRT requirements, and particularly competency requirements. Students will then have a better understanding of the responsibility placed on this program and the student in terms of clinical education. For more information about ARRT certification and clinical competency requirements, visit [www.rrt.org](http://www.rrt.org).

## **D. Faculty Roles**

1. The *Chair* of the Department of Radiologic Sciences is primarily responsible for planning, staffing, making budgetary determinations, and directing the overall operation of the department. They are a standing member of the Radiation Therapy Advisory Committee and chairperson of the Radiation Therapy Disciplinary Committee, Final Course Grade Grievance Committee, and the Academic Standards Committee. The Chairperson also serves as a student academic advisor, and is available to all students regarding programmatic concerns.
2. The *Program Director* of the Radiation Therapy program organizes, administers, reviews, develops, and assures program effectiveness. Ongoing program assessments are conducted to include curriculum evaluation and content relevancy, review of program strengths and opportunities for improvement, and fiscal planning. The program director reports to the Chairperson of the

Department of Radiologic Sciences, and acts as a liaison between the Chairperson and the clinical affiliates. The program director also serves as clinical coordinator for the program, making suggestions and recommendations to the Department Chairperson regarding the maintenance and effectiveness of clinical education. The program director serves as chairperson of the Radiation Therapy Advisory Committee and Radiation Therapy Admissions Committee.

3. *Didactic Faculty* are employed on a part-time basis to provide instruction in courses where particular expertise, certification, and/or education are desired. The didactic faculty works under the direction of the program director and Chair of the Department of Radiologic Sciences. The program director works with didactic faculty to evaluate textbook options, develop course objectives, write and update course syllabi, identify teaching schedules and classroom needs, and evaluate student outcomes. Didactic faculty are represented on the Advisory Committee.
4. *Adjunct Clinical Supervisors* are employed by the clinical affiliates, and serve as the liaison between the affiliate and the Radiation Therapy program. They serve a very important function in that they assist program faculty in supervising students, and work with program faculty to coordinate clinical education experiences at that clinical education setting. These individuals are specifically identified for each clinical site, and receive instruction through periodic inservices from program faculty concerning the assignment and completion of their duties and responsibilities. As volunteers, these individuals receive no financial remuneration for their advice and service. Duties include providing clinical instruction and supervision, evaluating students' clinical competence, evaluating students' clinical performance during a rotation assignment, and providing input to program faculty regarding outcomes and opportunities to improve. Adjunct Clinical Supervisors complete training in clinical instruction and must have a minimum of two years' experience as a certified radiation therapist. All Adjunct Clinical Supervisors are invited to serve on the Advisory Committee.
5. *Adjunct Clinical Instructors* are also employed by the clinical affiliates, and support the clinical education process of students by assisting in clinical instruction and supervision. They understand program policies and the clinical competency system, and assist in evaluating student competency and periodic evaluation of clinical performance. They receive instruction through periodic inservices from program faculty concerning supervision, instruction, and evaluation of students, as well as the clinical competency system. Adjunct Clinical Instructors complete training in clinical instruction and must have a minimum of one year of experience as a certified radiation therapist.
6. *Adjunct Clinical Staff* are employed by the clinical affiliate and may assist in providing student supervision within the clinical setting. Because they have not yet completed training in clinical instruction or do not yet have one year of experience as a certified radiation therapist, however, they may not independently evaluate student competency or performance during clinical rotation.

#### **E. Clinical Affiliates**

The University of South Alabama has affiliate agreements which allow students to participate in radiation therapy clinical activities for the purpose of clinical education. Clinical education settings are:

- < University of South Alabama, Mitchell Cancer Institute, Mobile, AL
- < The Cancer Center at Providence Hospital, Mobile, AL
- < Urology and Oncology Specialists, PC. providing services at Springhill Medical Center, Mobile, AL

- < Mobile Infirmary Medical Center, Mobile, AL
- < Singing River Health System Cancer Center, Pascagoula, MS
- < Forrest General Cancer Center, Hattiesburg, MS
- < Woodlands Medical Specialists, P.C., Pensacola, FL

Profiles of each clinical affiliate are available to help the student better understand what each clinical education setting has to offer. Students are encouraged to recognize the significant contribution made by these affiliates and respond by respecting the policies set forth by each.

## **F. Clinical Obligations**

Classes and clinical assignments are scheduled Monday – Friday throughout the three semester Radiation Therapy program (Fall, Spring and Summer). Students may be required to attend class on campus and participate in clinical laboratory exercises or clinical education experiences during the same day. Schedules limit the combined hours for clinical education and didactic instruction to not more than 40 hours per week. Students will be assigned to up to six different clinical education settings while enrolled, and should be prepared to travel to sites up to 90 miles from campus.

## **G. Departmental and College of Allied Health Professions Committees**

Several committees serve the needs of students and the Radiation Therapy program by providing a mechanism for accomplishing review and gathering feedback from our communities of interests. These committees are discussed briefly below.

### **1. Radiation Therapy Advisory Committee**

The Advisory Committee is a standing committee which functions to advise the faculty of the Department of Radiologic Sciences regarding ongoing development, assessment, and improvement to the Radiation Therapy program. While the final decision regarding committee recommendations rests with the University, it is our opinion that feedback from Radiation Therapy communities of interest is essential to program effectiveness.

The Advisory Committee will serve in an advisory capacity to

- < Provide input regarding the mission, goals, and philosophy of the program
- < Evaluate student learning and program outcomes
- < Monitor program effectiveness data
- < Monitor the program's assessment plan
- < Offer input for continued program development and improvement
- < Provide input regarding program strengths and weaknesses

The committee consists of the program director, Chair of the Department of Radiologic Sciences, and other members invited to serve to represent faculty of the Department of Radiologic Sciences, current students, program alumni, didactic instructors, adjunct clinical instructors, employers, and radiation oncologists. The program director serves as the Chairperson for the Advisory Committee. This committee meets at least once a year.

### **2. Radiation Therapy Admissions Committee**

The Admissions Committee is composed of faculty from the Department of Radiologic Sciences and members from the Advisory Committee who represent administrative and health-care professionals from local clinical education settings involved in or interested in the radiation therapy program. The primary function of this committee is to assist the program in the student selection process. The program director serves as chairperson of the Radiation Therapy Admissions

Committee. This committee meets at least once a year.

In addition to its admission activities, the Committee also provides input via the Advisory Committee in matters relative to:

- < Student reinstatement
- < Program strengths and weaknesses
- < Admission policies and procedures

**3. Radiologic Sciences Disciplinary Committee**

The purpose of the Radiologic Sciences Disciplinary Committee is to hear appeals from students concerning disciplinary decisions administered by the faculty of the Department of Radiologic Sciences. The Committee is composed of the faculty of the Department of Radiologic Sciences, one student appointed on an “ad hoc” basis by the Chair of the Department of Radiologic Sciences, and two Advisory Committee members also appointed on an “ad hoc” basis by the Chair of the Department of Radiologic Sciences. The framework under which an appeal would be heard (appeal submission timeframe, timeframe for response, steps of review, etc.) would be that outlined in the University bulletin, *The Lowdown* under “[Grievances](#)”. This committee meets as needed.

**4. Academic Standards Committee**

The function of the Academic Standards Committee is to conduct hearings requested of students in academic misconduct cases within the department. This committee does not address issues related to final grade or disciplinary action. The Committee is chaired by the Chair of the Department of Radiologic Sciences and is comprised of faculty and members from the Advisory Committee appointed on an “ad hoc” basis by the Chair. The framework under which an appeal would be heard (appeal submission timeframe, timeframe for response, steps of review, etc.) would be that outlined in the University bulletin, *The Lowdown* under “[Grievances](#)”. This committee meets as needed.

**H. Technical/Core Performance Standards**

A listing of the technical/core performance standards for admission to, progression in and completion of the program in Radiologic Sciences is as follows:

**1. General Abilities**

To provide quality health care, the student is expected to possess functional use of the senses of vision, touch, hearing, and smell. All data received by the senses must be integrated, analyzed and synthesized in a consistent and accurate manner. In addition, the individual is expected to possess the ability to perceive pain, pressure, temperature, position, equilibrium, and movement.

**2. Observational Ability**

The student is expected to participate in, and observe experiments in, the basic sciences and imaging and therapeutic sciences. The student is expected to observe the patient accurately at a distance and close at hand, and accurately assess health/illness alteration. Inherent in this observation process is the functional use of the senses and sufficient motor capability to carry out the necessary assessment activities.

**3. Communication Ability**

The student is expected to be able to effectively communicate verbally and non-verbally and to observe patients in order to elicit information, describe changes in

mood, activity, and postures and to perceive non-verbal communications. This requires the ability to see, speak, hear, read, write, and effectively utilize the English language. The student must be able to communicate effectively and sensitively with patients.

**4. Motor Ability**

The student is expected to be able to perform gross and fine motor movements required to provide Radiation Therapy procedures and operate equipment to deliver care safely. Examples of gross movements the student must be able to perform include lifting, turning, transferring, and transporting patients. The student must also possess fine motor skills to safely perform procedures such as placement of shielding blocks, marking/tattooing of treatment ports, and other invasive and non-invasive procedures. The student is expected to be able to maintain consciousness and equilibrium, and have the physical strength and stamina to perform satisfactorily in clinical experiences.

The student should have sufficient motor function to elicit information from patients by palpation, auscultation, percussion, and other diagnostic maneuvers. The student must be able to perform Radiation Therapy procedures and work with scientific and other instruments and machinery. The student should have motor skills necessary to administer emergency treatment such as CPR. Such actions require coordination of both fine and gross muscular movements, equilibrium, and functional use of the senses of touch and vision.

**5. Critical Thinking Ability**

The student is expected to have the ability to develop problem-solving skills. This includes the ability to measure, calculate, analyze, and synthesize objective as well as subjective data and make decisions that reflect consistent and thoughtful deliberation and clinical judgment. In addition, the student should be able to comprehend three-dimensional relationships and understand spatial relationships of structures.

**6. Interpersonal Abilities**

The student is expected to have the emotional stability required to exercise sound judgment, and to complete assessment and intervention activities. The student is expected to establish rapport and maintain sensitive, interpersonal relationships with individuals, families, and groups from a variety of social, emotional, cultural, and intellectual backgrounds. The student is expected to have the flexibility to function effectively under stress. Concern for others, integrity, accountability, interest, and motivation are necessary personal qualities.

**7. Behavioral and Social Attributes**

A student must possess the emotional health required for full utilization of his/her intellectual abilities, the exercise of good judgment, the prompt completion of all responsibilities attendant to the performance of procedures and patient care, and the development of mature, sensitive, and effective relationships with patients. Compassion, integrity, concern for others, interpersonal skills, interest, and motivation are all personal qualities that should be assessed during the admission and education process.

Individuals with disabilities are encouraged to apply to the program. However, it is the responsibility of the student to notify the Chair of the Department of Radiologic Sciences if there is any reason why the abilities/expectations described above cannot be met. Students who indicate that they cannot meet one or more of these and who requests a review in writing will be reviewed by Admission's Committee faculty and the Coordinator of Special Student Services to determine what, if any, reasonable accommodations might



be possible to facilitate successful completion of the degree requirements.

### III. DEPARTMENTAL POLICIES PERTAINING TO STUDENT AFFAIRS

#### A. Drug Screen Policy

The wide use of illegal drugs and the abuse of legal medications and alcohol have been well documented in recent years. For obvious health and safety concerns, students enrolled in health care educational programs must be in full control of their manual dexterity skills, mental faculties and judgment. The presence or use of drugs or alcohol, lawful or otherwise, in the clinical setting poses an unacceptable risk for patients, colleagues, the University and affiliated hospitals/clinical sites. In addition, those with a history of drug-related offenses may have an adverse effect upon this department's longstanding relationship with established hospital/clinical sites. The continued maintenance of established clinical sites is essential for the graduation of competent health-care practitioners.

It is important for students to understand that information obtained via drug testing and background checks will be treated by the Department of Radiologic Sciences as information that is received in confidence. Such information shall not be disclosed to third parties unless disclosure is required by law, the information is needed by appropriate departmental officials to perform their job functions, disclosure is needed to override public health and safety concerns, or the student has consented in writing to the release of the information. Nothing in this policy may be construed in such a way as to deny any students their rights to due process or any other constitutional or civil protection, nor should anything in this policy be construed in such a way as to conflict with statutory law.

With the preceding remarks in mind, the Department of Radiologic Sciences instituted a drug screening and background check policy for all students effective Fall Semester, 2004. A copy of these policies and procedures will be published in the Student Reference Manual (SRM). The following information is provided to assist students in understanding and fulfilling these requirements.

#### Drug Screening

Students selected for admission to the certificate/B.S. program are admitted pending a negative drug test. Students will be notified of the procedure to follow for the drug test in their letter of admission. All costs associated with testing are the responsibility of the student.

#### Pre-Admission Testing:

- < Infirmery Medical Clinic (IMC) conducts drug screening services for our students. There are three locations from which students may choose:

IMC-Industrial Medical Clinic 305 North Water Street Mobile, AL 36602 (251) 433-3781 Fax (251) 433-3772	Industrial Medical Daphne 7101 Highway 90 Suite 101 Daphne, AL 36526 (251) 625-8222 Fax (251) 625-8117	Industrial Medical West 5580 Inn Road Suite B Mobile, AL 36619 (251) 660-7676 Fax (251) 660-8348
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- < Students should call one of the clinics in advance to arrange an appointment. All three clinics are open 8:00 a.m. until 3:00 p.m., Monday through Friday. Students must complete pre-admission drug screen requirements by the date

specified in the admissions letter.

- < Students must present a picture ID when reporting for drug screen.
- < The \$25 fee for drug screening must be paid on the day of testing. The clinic accepts only cash or credit cards, and does NOT accept checks.
- < Tell the staff at the drug screening clinic that you are enrolled in the Department of Radiologic Sciences at the University of South Alabama. This will alert them to report test results to us.
- < Rapid results will be obtained from the drug screen. Individuals with non-negative results may request that their specimen be forwarded for outside confirmation. An additional fee of \$45 will be charged for this service.
- < The drug screening clinic will notify the Chair of the Department of Radiologic Sciences of all test results. For test results that are non-negative, available evidence to include health history, valid prescriptions from a healthcare provider, etc., will be used to determine the presence or absence of drug abuse. Admission will be withdrawn for a student who is unable to provide valid evidence to explain non-negative pre-admission drug screen result.

#### Drug Screening After Admission

- < After the pre-admission drug test, further testing may be required of the student for cause or at random intervals and may be announced or unannounced. The need to perform follow-up testing and the timing for testing will reside within the discretion of the department. Students will be responsible for the cost of additional drug testing.
- < A student who demonstrates behavioral changes suspected to be related to the use of drugs or alcohol will be removed from clinic and subject to retesting. Faculty or supervisory personnel from the clinical education setting will present concerns to the Chair of the Department of Radiologic Sciences. The Chair may investigate through personal observation of student or by inquiring of other faculty responsible for the student in the clinical or didactic setting. Retesting will be done only as determined by the Chair based on supporting evidence.
- < Any student who voluntarily reports that they have a chemical dependency problem will be counseled by the Chair of the Department of Radiologic Sciences. Conditions, if any, for continued participation in the program will be at the discretion of the Chair. The student will submit to drug tests as requested by the Department of Radiologic Sciences and will be dismissed if a second non-negative drug test is obtained. The Chair may also issue a referral for counseling at the University of South Alabama Substance Abuse Education and Prevention Center. The length of the treatment program will be determined by the treatment program counselor/director. The chairperson will be informed of the expected completion date of the substance abuse treatment program and whether or not the student successfully completes the substance abuse treatment program. The student will be responsible for any costs associated with the counseling and treatment in the substance abuse treatment program. Referral to the substance abuse treatment program will be confidential.
- < Penalties for a confirmed non-negative drug test or refusal to be tested:
  - A. First Non-Negative Test:

A non-negative drug screen after admission will result in suspension from the clinical component of the program for a period of time determined by the Chair. Students will be required to participate in the University of South Alabama Substance Abuse Education and Prevention Center. The length of the treatment program will be determined by the treatment program counselor/director. The chairperson will be informed of the expected completion date of the substance abuse treatment program and whether or not the student successfully completes the substance abuse treatment program. The student will be responsible for any costs associated with the counseling and treatment in the substance abuse treatment program. Referral to the substance abuse treatment program will be confidential.

Progression in the certificate/B.S. program will be determined by the amount of clinical time missed, and the ability of the student to achieve the clinical objectives of the course. Student assignment in the clinical setting will be at the discretion of the Chair or their designee.

Once a student successfully completes a substance abuse treatment program, he/she will be required to submit to follow-up testing for the remainder of his/her program. The number of follow-up tests to be performed will be determined by the Chair. A refusal to participate in a substance abuse treatment program and/or follow-up drug testing will require the immediate withdrawal of the student from the certificate/B.S. program.

If student must withdraw from program and then requests reinstatement, the student will follow the same procedure and policies adopted by the department for academic reinstatement as described in the SRM. Requests for reinstatement will be considered at the same time other reinstatement requests are considered, with a May 1 application deadline.

B. Second Non-Negative Test:

A second non-negative test will result in ineligibility for admission/readmission into the certificate/B.S. program.

C. Failure to Appear for Testing:

A student who fails to appear for drug testing will be given an opportunity to explain his/her absence. If the student agrees to be tested, another collection will be scheduled. If the student fails to appear for the second time, the failure to appear will be treated as if a non-negative test result had occurred. Depending on the circumstances, incidents such as this will be treated under the *First Non-Negative Test* or *Second Non-Negative Test* policy.

D. Refusal to be Tested:

Refusal by a student to submit to testing initially or as requested after admission will result in that student's dismissal from the certificate/B.S. program of the Department of Radiologic Sciences.

#### Retesting Following Readmission to the Program

Students who have withdrawn from the program and been readmitted must submit to repeat drug screen. All costs associated with retesting are the

responsibility of the student.

#### Appeal Process

The Department of Radiologic Sciences provides a mechanism for students to appeal any decision regarding their continued enrollment, including action taken as a result of a drug screen. The appeal process will follow the disciplinary action appeal process outlined in the SRM.

#### **B. Background Check Policy and Procedure**

Students selected for admission are admitted pending a negative background check. Students will be notified of the procedure in their letter of admission. Admission will be withdrawn for students failing to authorize a background check. All costs associated with the background check are the responsibility of the student.

- < Background checks inquire about criminal records only. Information about a student's credit status, for example, will not be checked.
- < Criminal background checks are conducted to identify convictions within the past 7 years.
- < The company performing background checks will notify the Chair of the Department of Radiologic Sciences with results of the check.
- < Positive findings on the background check will be dealt with on an individual basis.
- < The fee for the background check depends on one's past number of residences, but is usually around \$35. This fee is payable to the vendor/company conducting the background check.

#### **C. Professional and Personal Liability Insurance**

Malpractice insurance is necessary in order to provide student protection in the event of error, negligence or omission in the performance of duties as a student. Even though you are a student and not yet licensed, registered, or otherwise accredited for your profession, you have a definite personal responsibility for your own actions as you interact and provide care to patients. Professional liability insurance is required as a protective measure in the event a student becomes entangled in a legal suit involving patient care activities within the clinical setting. Professional liability insurance is provided by the University at no cost to students accepted into the professional component of the program.

#### **D. Personal Medical/Health Insurance**

Proof of medical/health insurance coverage is required of all students prior to being admitted to the program. Such insurance will cover accidents or injuries. Students must carry personal medical insurance for the duration of their enrollment in the program. Proof of personal medical insurance must be turned in to the secretary of the Department of Radiologic Sciences prior to the start of the first semester.

All full-time USA undergraduate students taking at least 12 credit hours per semester on campus are eligible to purchase the student health insurance plan through USA. Plans are also available for students taking less than 12 credit hours. See more about rates and credit hour requirements at

<http://www.southalabama.edu/departments/studenthealth/insurance.html>

## **E. Grading Scale**

The Department of Radiologic Sciences maintains the following grade scale:  
Both Didactic and Clinical Courses

90 - 100 = A  
80 - 89 = B  
70 - 79 = C  
60 - 69 = D  
0 - 59 = F

## **F. Transfer Policy**

Consideration will be given on a case-by-case basis to requests for transfer into the Radiation Therapy program from another college-based program. Factors such as academic standing in the program, course completion and sequencing, clinical competency standing, and position availability will be considered. Because course sequencing and curriculum content often differs from one program to another, transfer students may be required to repeat courses already completed. Should a student be accepted by the Department of Radiologic Sciences to transfer into the Radiation Therapy program, a plan to acclimate the student to this learning environment would be necessary.

## **G. Withdrawal Policies**

Withdrawal refers to a situation in which the student decides to withdraw from the program for an indefinite period of time. Withdrawal essentially means that the student is no longer enrolled in the program.

It is important to note that the withdrawal policy stated herein must not be confused with the University withdrawal policy and in particular, the granting of the symbol "WD". It is equally important to note that the symbol WD is simply a symbol and is not a letter grade. Thus, the Department policy does not supersede the University policy regarding student withdrawal. Student withdrawal from the University as well as courses the student is currently enrolled will proceed in accordance with the following policy as stated in the University Bulletin:

^Official withdrawal from the University is not initiated in the Office of the Registrar. Clearance must be secured from the student's academic advisor, the University Library, and the Offices of Financial Aid, the Bursar, and the Registrar. The symbol WD is recorded for all courses when the student completes the withdrawal form within the time limits listed in the Official calendar. A grade "F" is recorded when a currently enrolled student leaves the University without initiating and completing the withdrawal form.

### **1. Withdrawal From Program Due to Non-Medical Reasons**

Students withdrawing from the program due to non-medical reasons must reapply for admission in order to be eligible to re-enter the program. Thus re-admission following withdrawal due to non-medical reasons requires that one follow the same admissions procedure as though he/she were applying for the first time. Students applying for re-admission will be considered at the same time other applicants are considered. In short, re-admission following withdrawal due to non-medical reasons is not automatic, and requires approval of the Department of Radiologic Sciences Admission Committee as well as the completion of other admission requirements as published in the University Bulletin and similar publications developed by the Department of Radiologic Sciences.

## 2. **Withdrawal From A Program Course**

Students enrolled in the Department of Radiologic Sciences may withdraw from professional component courses provided they do so in accordance with University regulations regarding adding or dropping courses as published in the University Bulletin. Also, in accordance with University policy, the grade of “F” will be recorded for a course abandoned without an official withdrawal. Thus, as mentioned previously, students must follow the policies as published in the University Bulletin regarding withdrawal from courses.

Students should note that professional courses are sequential to one another, offered only once each calendar year, and, therefore, withdrawal from such courses for non-medical reasons would be ill-advised. Withdrawal from any professional course would break the sequencing required in the Radiation Therapy program, and would require a student to withdraw from the program. Thus re-admission following withdrawal from a program course due to non-medical reasons requires that one follow the same admission’s procedure as though he/she were applying for the first time. Students applying for re-admission will be considered at the same time other applicants are considered. In short, re-admission following withdrawal due to non-medical reasons is not automatic, and requires approval of the Department of Radiologic Sciences Admission Committee as well as the completion of other admission requirements as published in the University Bulletin and similar publications developed by the Department of Radiologic Sciences.

## 3. **Withdrawal Due to Medical-Related Reasons (Pregnancy, Major Illness, Injury)**

Students withdrawing from the program due to medical-related reasons will be allowed to re-enter the program and subsequently complete their education providing they withdraw from the program in good academic standing. It will be the responsibility of each student to notify the appropriate instructors of their intent to withdraw.

### **Student Options Relative to Pregnancy:**

- a. Students have the option of notifying the faculty of a suspected and/or confirmed pregnancy. Notification can be achieved by **voluntarily** completing a *Pregnancy Declaration Form*, which is available at <http://www.southalabama.edu/alliedhealth/radiologicsciences/files/PregnancyDeclarationForm.pdf>
- b. Student may withdraw from the clinical education course and continue with the didactic component of the curriculum. A student selecting this option will be allowed to complete clinical education courses only during the semester in which the clinical course is offered.

It is also important to note that this program emphasizes the relationship and/or the interdependence which exists between didactic and clinical instruction. Thus, students may be required to audit/repeat some didactic courses if one’s clinical performance upon their return to the clinical setting reveals a need to do so. The latter aspect of this policy would, or course, depend upon the length/period of withdrawal.

- c. The student may continue in both the didactic and clinical components of the curriculum providing their radiation exposure does not exceed accepted standards as published in the [University of South Alabama Radiation Safety Manual](#). The manual states that “during the entire gestation period, the

maximum permissible dose equivalent to the fetus from occupational exposure of the expectant mother should not exceed 0.5 rem." If the allowable dosage is exceeded, the student will be advised to withdraw from the clinical phase of the program for the remainder of the gestation period. Consideration will be given to task assignment and the desire to minimize potential radiation exposure. However, it must be understood that students electing to remain in clinical education courses will be expected to complete/fulfill the course requirements of clinical education courses in which they are enrolled.

- d. Students may withdraw their declaration of pregnancy by submitting written notification. This option is available on *the Pregnancy Declaration Form*.

**Policies relative to withdrawal due to major illness, injury:**

- a. The student must provide a written communiqué from his/her physician which explains the estimated time of recovery and the limits, if any, placed upon the student's activity.
- b. The appropriate faculty member (course master) must be notified and the physician's communiqué presented in a timely fashion.
- c. Students who withdraw from the program for medical-related reasons must re-enter the program at the beginning of a given semester.
- d. It is important to note that this program emphasizes the relationship and/or interdependence which exists between didactic and clinical instruction. Thus, a student may be required to follow the Reinstatement and Reacclimation Plan for reentry into the program. When developing a plan for reentry, consideration will be given to the length/period of withdrawal.
- e. For specific policies related to clinical education attendance, please refer to the attendance policies outlined within clinical education course syllabi.
- f. Attendance policies for didactic courses are found within the individual course syllabi.
- g. The final approval for a plan for withdrawal and reentry will be determined by program faculty and the Chair of the Department of Radiologic Sciences.
- h. Because it is almost impossible to anticipate the needs of students under all major illness, injury, or pregnancy scenarios, plans for reentry may be formulated on a case-by-case basis.

**H. Leave of Absence Policy**

Leave of absence refers to a situation in which a student is allowed to be absent for a period of time without having to withdraw from the program. A leave of absence generally suggests a more short-term departure than that of withdrawal.

A leave of absence may be granted in cases of illness, pregnancy, family/medical emergencies, serious personal and/or family related problems and similar situations considered serious enough by the faculty to warrant such consideration. Students must consult with faculty in order to receive permission to take a leave of absence. Following faculty discussions relative to the situation at hand, the student will be notified of the faculty's decision. Plans regarding the student's absence as well as his/her return will be handled on a case-by-case basis.

By previous definition, a leave of absence is considered to be of short-term duration which implies that the student will be capable of completing all course requirements for a given semester. Assuming the student receives official permission to take a leave of absence and is unable to complete the course requirements by the end of the semester, the student will be given an incomplete (I) or X (absence from final exam) as his/her final grade. Students receiving an I

or X must fulfill the course requirements prior to the middle of the following semester or the final grade will be converted to a failure (F). This aspect of the policy is in keeping with adopted University policies.

#### **I. Reinstatement and Reacclimation**

All students enrolled in the Department of Radiologic Sciences must obtain a minimum grade of “C” in each professional course. Students receiving less than a “C” in a professional course will not be allowed to proceed in the program. This policy applies to all courses with and without a clinical component. Students not meeting the minimal requirement may apply for reinstatement by petitioning the Academic Standards Committee. The student must petition in writing through the office of the departmental Chairperson no later than fifteen class days following the end of the semester in which the student did not meet the minimum grade requirement. If reinstatement is granted for the following academic year, the student will be placed on probation and will be required to repeat the course prior to continuing on to graduation. Additionally, all students must acquire a quality point average of 2.0 on all academic hours attempted. The implied intent of all promotion policies is to lead you to a timely graduation date. The ultimate goal is to appropriately acclimate the student so that he/she may effectively complete the clinical education goals of the next and succeeding semesters.

While students are encouraged to apply for reinstatement, students should also understand that they will be required to:

1. Have a cumulative GPA of 2.0
2. Comply with the standards and policies in the current University catalog and SRM
3. A student who is reinstated must reenter the program the following year, during the last semester in which passing grades were achieved in all professional courses (e.g. a student who passed all courses in Fall but withdrew in Spring due to failure to achieve a “C” in a course would be required to reenter the program in Fall)
4. The reacclimation plan will depend on the student’s past performance in didactic and clinical education courses and the length of time they have been absent from clinical education. The plan will be developed by program director and Chairperson on a case-by-case basis.
5. In addition to repeating the clinical course offered during the semester of reentry, student may be required to repeat didactic courses that have already been completed. Please note: Student may be required to audit/repeat courses already successfully completed so that we may evaluate competence in those areas. For clinical courses passed previously, students must register as an audit student for liability purposes. Didactic courses already completed may be attended without registering as an audit student.
6. Decisions regarding the reacclimation plan will be communicated to student in writing prior to the start of semester. Student will be required to agree to the terms of the plan prior to reentry.
7. Regardless of when a student exits the program, clinical requirements will include the completion of clinical competencies even though the student may have completed the same competencies previously.
8. Courses to be repeated for grade will require formal registration, and therefore, payment of tuition.
9. Students repeating a course will be required to complete all course assignments, tests, etc. and complete the course with the required minimum grade of “C”. Failure to do so will result in withdrawal from the program.



10. Students who withdraw from the program must reenter the program within 12 months.
11. Students are eligible for reinstatement only once. A student who fails to achieve a “C” in a professional course after reinstatement will not be allowed to reenter the program unless special circumstances exist.

**J. Summary Statement Regarding Withdrawals and Leave of Absence**

Within the policy regarding withdrawal and leave of absence, the phrase “handled on a case-by-case basis” has been utilized. This statement is necessary because it is almost impossible to formulate policies which are applicable to each and every case. In the case of leave of absence or withdrawal due to illness or pregnancy, one cannot accurately predict when one will leave or return to the program. In short, there are numerous factors and possibilities which are essentially indeterminable and, therefore, specific policies such as exact re-entry dates into the program and predicting the maintenance of clinical skills following extended absences have not been formulated. However, prior to returning to the program, students should review the section, *Reinstatement and Reacclimation*. These policies outline the requirements each student must meet to complete the program. The Reinstatement and Reacclimation Plan addresses the necessity of student reacclimation to the clinical environment following lengthy absences from the program. This policy is applicable to lengthy absences regardless of the reason(s) for the absence.

The intent and thrust of this policy is to provide a mechanism for the student to complete his/her education following a brief or extended absence due to reasons beyond the control of the student. Thus, students will not be arbitrarily dismissed or removed from the program due to illness, pregnancy or other reasons considered to be beyond the control of the student.

Finally, it is the policy of the program that students complete the program with no longer than a 28-month lapse from the initial term in the program until the date of graduation. Any student failing to apply for readmission into the program to complete it within the 28 months will be required to apply for admission into the program as if a new student, regardless of previous course work.

**K. Grievances:**

The University of South Alabama has written policies and procedures governing student complaints. The policies provide detailed information to guide students through the formal grievance process. Students are encouraged to follow these procedures, which are outlined in the University Bulletin, *The Lowdown* under “[Grievances](#)”. Categories of complaints that are covered by these policies, and which are included in the policies outlined in *The Lowdown*, include:

**General Complaints**

This category is for complaints that fall outside the other listed categories. Specific policies and procedures are outlined in the University Bulletin, *The Lowdown* under “[Grievances](#)”.

**Sexual Harassment and Sexual Violence Complaints**

Students are protected by the University of South Alabama’s Sexual Harassment and Sexual Violence Policy. Specific policies and procedures are outlined in the University Bulletin, *The Lowdown* under “[Grievances](#)”.

**Final Course Grade Appeal Policy**

The Department of Radiologic Sciences utilizes the Grade Grievance Policy published in

the University of South Alabama *Low-Down*. A final grade grievance is defined as a student complaint regarding an academic action taken by instructional personnel in assigning a final grade for a course, qualifying exam or comprehensive exam. Complaints may be filed against an individual instructor or a committee. The complaint must be based on one or more of the following:

- arithmetical or clerical error
- arbitrary or capricious evaluation on the part of the instructor
- substantial failure on the part of an instructor to follow the course syllabus or other announced grading policies
- extraordinary mitigating circumstances beyond the student's control

The complaint may not be filed until the final course grade is received and cannot relate to an academic misconduct procedure. The Final Course Grade Grievance must be filed within 20 class days into the succeeding semester. Specific policies and procedures are outlined in the University Bulletin, *The Lowdown* under "[Grievances](#)".

### **Student Academic Conduct Policy**

The University strives to maintain the highest standards of academic integrity. All members of the University community are expected to exhibit honesty and competence in academic work. The responsibility can be met only through earnest and continuing effort on the part of all students and faculty.

Any dishonesty related to academic work or records constitutes academic misconduct including but not limited to, activities such as giving or receiving unauthorized aid in tests and examinations, improperly obtaining a copy of an examination, plagiarism, misrepresentation of information, altering transcripts or university records. Academic misconduct is incompatible with the standards of the academic community. Such acts are viewed as moral and intellectual offenses and are subject to investigation and disciplinary action through appropriate University procedures. Penalties may range from the loss of credit for a particular assignment to dismissal from the University. Note that dismissal from any University of South Alabama college or school for reasons of academic misconduct will also result in permanent dismissal from the University. Faculty, students, and staff are responsible for acquainting themselves with, adhering to, and promoting policies governing academic conduct. Specific policies and procedures are outlined in the University Bulletin, *The Lowdown* under "[Grievances](#)".

### **L. Student Professional Behavior**

We encourage you to consider, beginning now, how you present yourself in all life-settings, including in and out of the classroom, particularly when you identify yourself as a student of the University of South Alabama Department of Radiologic Sciences. Students must be aware that what is posted online (e.g. LinkedIn, Facebook, Twitter, Flickr, YouTube and others) can become public domain and available to future employers and colleagues. It is important to realize that you can be personally, ethically, and legally responsible for posting opinions and comments made on social media sites, even those sites personally maintained by you. It is never appropriate to post information about a patient or patient care setting. Demonstration of professional behaviors in all venues, including social media, is an expectation of our program. By self-monitoring content you post, you can facilitate effective professional behaviors and constructive working relationships. If you see content posted by a colleague that appears unprofessional, you have a responsibility to bring that posting to the attention of the individual so the person can modify or remove the content. As a student of the program, it is important to recall you represent not only yourself, but also the program, the College and the profession. It is best to pause before you post –think of how others, especially those who may not know you well, may perceive and respond to what you wrote. Additionally, portrayal of unprofessional behavior may impair a student's/graduates ability to become certified and/or participate in positions of trust and responsibility in the community. Familiarity with the American Society of Radiologic Technologists (ASRT) Practice Standards and Code

of Ethics is recommended. [www.asrt.org](http://www.asrt.org)

The College of Allied Health Professions has a Professional Behavior Policy to ensure professional behavior of all students and applies to students enrolled in Radiologic Sciences. All deviations from the standards of professionalism, as well as exemplary behavior, may be documented by faculty using a Professional Behavior Report (PBR) form that will remain in the student's academic file in the department. Recurring infractions may lead to disciplinary action, remediation or dismissal from the program. The College policy is available on the College of Allied Health Professions website.

**M. Courses Repeated for Credit**

A student may repeat a non-professional elective course which has been failed. Required general-studies courses must be repeated if failed. Total grade points are computed on the basis of all attempts. A student who has a grade of "D" in a course may repeat the course one time with the approval of the Dean of the involved college. A repeated course may be counted only once toward graduation, but both grades are recorded on the student's transcript and both are counted in determining quality points. The preceding statement is a general University policy.

A student may repeat a professional course which has been failed only after following the Reinstatement and Reacclimation Plan. A student who fails to achieve a "C" in a professional course after reinstatement will not be allowed to reenter the program.

**N. Student Record Policy and the Family Educational Rights and Privacy Act (FERPA)**

To remain in compliance with FERPA (also known as the Buckley Amendment) and specific Standards as set forth by the Joint Review Committee on Education in Radiologic Technology, student information, related materials, grades, records and files are considered privileged and confidential. Student reports, tests, examinations and clinical evaluations along with student personal files are stored in a locked room when not in use. Access to these documents is limited to faculty and appropriate administration. No information contained within a student record will be given, either verbally or in writing without written authorization of the student. Written authorization for release of records is maintained in the student's personal file. Student tests, reports, case studies, competency records, and clinical evaluations are typically destroyed after one year. Permanent records of student grades are maintained in the University's Registrar's Office in the form of an official transcript. The University Registrar's office adheres to all FERPA regulations.

Other than you, the student and those previously listed, who can access your educational records?

- University officials with a legitimate educational interest
- Federal or state agencies or organizations performing audits or official studies
- Financial Aid officers
- Accrediting agencies
- Officials of other institutions in which you seek to enroll
- Parents or legal guardians, if you are listed as their dependent according to the IRS tax code
- Appropriate authorities in an emergency situation
- Parties to legal actions through subpoenas and/or court orders.

An important exception to the Buckley Amendment is the policy which allows educational records to be made available to accrediting organizations in order to carry out their accrediting function. The Department of Radiologic Sciences has a policy of allowing

access to records by the accrediting agency knowing that the accrediting agency requires staff and site visitors to maintain the highest level of confidentiality as they perform their accreditation function. Students should also refer to *The Lowdown* for further University policy pertaining to student records.

Student records are maintained under lock-and-key to provide privacy and security. Student records created at clinical sites are maintained by students until submitted to program director. The University registrar provides each student with an official grade report at the end of each semester. Test grades are communicated by instructors during class period, during meetings scheduled during instructor office hours, or via the University learning management system. Grades are not posted.

**O. Vacations and Holidays**

Students are granted all holidays and between-semester breaks observed by the University. All students will receive a copy of the Department of Radiologic Sciences' annual calendar which will indicate the dates of all holidays. The calendar is published annually.

**P. Student Placement Service**

A major mission of this department with respect to its relationship to the clinical education centers is one of continued improvement in clinical education, and the maintenance of rapport as a necessary element in the continued success of this program. This relationship provides information relative to the job market for program graduates. In addition to clinical education setting, this department communicates with other Radiation Therapy departments within the State and in adjacent States as a means of monitoring the job market for program graduates. Other methods utilized in assisting program graduates involve the availability of professional-related journals containing classified advertising sections as well as the availability of the University Placement and Career Services Center.

It is important to note, however, that the University nor the Department of Radiologic Sciences in any way guarantees students employment upon completion of the Radiologic Sciences program.

**Q. Student Advising**

Students are assigned to a radiation therapy faculty member who serves as faculty advisor throughout the entire length of a student's stay in the program. The program director is available to meet with students and encourages students to discuss program curriculum-related matters.

In addition to academic advising, students should expect to receive student counseling through critique and general comments regarding their progress whenever instructors are working with them in the clinical setting. It is feasible to expect such input will occur on a daily basis. In a more formal manner, instructors will also provide students with input regarding their progress when Tri-Semester Clinical Evaluations (discussed elsewhere) are completed. Furthermore, students should feel free to contact faculty members during faculty office hours providing students make appointments to discuss didactic and clinical matters with faculty. As requested by the student, advising may be performed by the Chair of the Department of Radiologic Sciences.

Simply stated, students are encouraged to seek faculty counseling in a timely manner and students should never wait until the end of the semester to discuss matters which may affect their final grades. Therefore, consistent and timely faculty/student conferences should occur throughout the academic semester and as often as the need arises.

Further academic advising is available through the Academic Counselor for the College of Allied Health Professions. Students should go to the [Allied Health Academic Advising](#) website to schedule an appointment with an Academic Counselor.

**R. Parking Facilities**

Students are required to park in designated areas while on University property, and must display a student decal/hang tag on vehicle. Students should also adhere to parking regulations which may be designated by clinical affiliates.

**S. Student Employment**

Although it is permissible for students to be employed while in this program, students should understand that such employment will have no relationship to requirements for program completion. Experience gained through employment, even if in a Radiation Therapy environment, will not substitute for other programmatic requirements. Furthermore, while this program limits the combined number of clinical and didactic hours to not more than 40 hours per week, the time commitment is nonetheless significant. Students are encouraged to carefully consider these time constraints when seeking part-time employment.

**T. Health-Related Policies**

Students accepted into the Department of Radiologic Sciences are required to provide the following health-related information:

- < Completed Health Record form (which is provided to students upon notification that they have been accepted into the program).
- < A complete blood test (CBC).
- < Tuberculosis test (TB skin test). Annual proof of TB test has to be turned in to the Department of Radiologic Sciences' secretary no later than October 1<sup>st</sup> of each year.
- < Completed Immunization Record form (which is provided to students upon notification that they have been accepted into the program. This form must be completed by a physician). Students are required to show evidence prior to enrolling in their first clinical education course of one rubella and two measles vaccinations. Rubella and measles vaccinations are available through one's personal physician or from a local Board of Health.
- < Hepatitis B vaccination (series of 3 vaccinations). Hepatitis B vaccinations are available through one's personal physician or from a local Board of Health.
- < Evidence of current flu vaccination

**U. Cellular Phones in Class/Clinic/Lab**

Cell phone usage is not permitted in the classroom or in the clinical setting. Therefore, students will turn their cell phones off upon entering the classroom. During exams, instructor may require students to place their cell phone in a designated area within the classroom.

**V. Social Media Postings**

Postings in social media, such as *Facebook* must not include references to patients. Postings must not refer **negatively** to radiographers, therapists, radiologists or physicians associated with this program. To do so is considered unprofessional behavior and will be addressed through the Pat Capps Covey College of Allied Health Professions PROFESSIONAL BEHAVIOR POLICY

**W. Sexual Harassment**

The Department's policy is simple and straightforward. Simply stated, sexual harassment in the classroom, laboratory setting and/or the clinical setting is forbidden. This policy applies to staff, faculty, students, physicians, and others in the clinical setting who may

help the Department of Radiologic Sciences in carrying out its mission. Students are encouraged to report any acts of sexual harassment to the Chairperson of the Department, or the Dean of the College of Allied Health Professions. University grievance policies provide additional information to guide in the reporting of sexual harassment. <http://www.southalabama.edu/departments/studentaffairs/grievances.html>

#### **W. Student Conduct**

Students are expected to demonstrate conduct which is professional and conducive to the provision of quality patient care. Regulations concerning student conduct have been established by the University as outlined in the student handbook, *The Lowdown*. The same regulations apply to the radiation therapy student, although additional regulations also exist and are outlined in this Student Reference Manual.

Expectations for student conduct, briefly stated are:

- < Make compassionate, quality patient care your top priority in the clinical setting.
- < Conduct yourself in a mature, professional manner at all times.
- < Develop and maintain an enthusiasm for learning.
- < Do your very best.
- < Work hard and study hard.
- < Pay attention to details.
- < Consider all aspects of an issue before making a decision - consider the consequences before you act.
- < Respect the ideas, opinions, strengths, and weakness of others.
- < Treat others as you want to be treated.
- < Communicate concerns or difficulties.
- < Take responsibility for your actions.
- < Accept coaching and feedback as an opportunity to learn.

### **IV. CLINICAL EDUCATION OVERVIEW**

#### **A. Objective**

The objective of the clinical education component of the curriculum is to provide students with the necessary practical experience needed as an entry-level radiation therapist. Clinical education represents a major portion of the overall radiation therapy program. Students are expected to correlate the didactic (classroom) portion of the curriculum to the clinical portion of the curriculum. Because of its relative importance in a student's education, elements of the clinical education component are outlined in detail in this section of the Student Reference Manual.

#### **B. Competency-Based Program**

The clinical education phase of the curriculum is structured around a competency-based program. Briefly stated, a competency-based program ensures that each student attain a prescribed level of competence in performing radiation therapy procedures in order to successfully complete the graduation requirements of the program. This program was designed to give attention to the correlation of clinical experience and didactic instruction.

The first stage of a student's clinical education involves classroom lectures followed by laboratory sessions in which simulation is used as a learning device. Next, students are required to observe and assist radiation therapists as they perform their daily duties. Under the constant supervision of a radiation therapist, students begin to perform basic radiation therapy procedures. As experience is gained, the student practices the procedure under the direct supervision of a radiation therapist. Students are then required to perform a competency exam in the clinical setting. The competency exam involves performing the essential procedures necessary to accurately complete the radiation therapy procedure. After successful completion of a competency, each student

is allowed to progress by performing more difficult radiation therapy procedures. Several competency examinations may be required of students per evaluation period. Ultimately, failure to complete prescribed competencies will result in a delay in completing the program requirements for graduation. The clinical competency testing process is shown on the flow chart that will be provided to each student during orientation.

Candidates for radiation therapy certification must demonstrate competency in an ARRT-specified list of clinical procedures. Students are required by the ARRT to satisfactorily perform a minimum number of clinical competencies, but this program requires additional competencies, above and beyond the ARRT requirement. Competencies represent a measure of one's achievement of a specific clinical skill necessary to satisfactorily perform a specific radiation therapy procedure.

Basic guidelines regarding clinical competencies are as follows:

1. Each clinical course has its own individual course syllabi, and these syllabi provides guidelines regarding the minimum number of comps required per semester. Students may request permission to practice and perform a competency only if that student has received formal instruction regarding the procedure to be performed.
2. Clinical supervisors/instructors supervise the student during the performance of clinical competencies, although the program director may also observe the procedure.
3. While the ARRT has determined that a limited number of competencies may be performed under simulated circumstances, *all* competencies must be performed for successful completion of the program.
4. Students may be allowed to perform only two competencies during the last week of each rotation, so students are encouraged to use clinical opportunities wisely.
5. Grades are maintained on all competencies attempted.

#### **C. Clinical Course Syllabi**

Clinical education focuses on the development of technical skills, professional values, and critical thinking and problem solving skills. For that reason, emphasis is placed on the assessment of affective, cognitive, and psychomotor objectives as outlined in clinical course syllabi.

Psychomotor - concerned with motor skills

Cognitive - concerned with thinking skills, knowledge, and understanding

Affective - concerned with values and behaviors

Students are encouraged to reference the clinical course syllabus during the semester as it provides valuable information as to what is expected of students.

#### **D. Clinical Education Supervision**

Program faculty will provide frequent, scheduled and unscheduled monitoring of students while in the clinical setting. Students will be monitored as they interact with clinical instructors and patients during radiation therapy procedures and competency examinations. Students should also be prepared to perform competency examinations under the supervision of program faculty.

Clinical instructors/supervisors employed by the clinical affiliate will provide direct day-to-day supervision and monitoring of students, and will provide program faculty with feedback regarding student performance. Clinical instructors/supervisors will regularly observe and instruct students in the performance of radiation therapy procedures and in the performance of competency examinations. Tri-Semester Evaluations (discussed in detail elsewhere) will be completed by clinical instructors/supervisors at the end of each rotation session. Students are encouraged to optimize learning by using every available opportunity to gain from the clinical instructor's experience and expertise.

#### **E. Clinical Education Rotation Schedule**

Significant planning goes into the development of the clinical rotation schedule. Consideration must be given to integration of classroom experiences, sequencing of the assignments, and coordination so that students have comparable learning opportunities. Fall and Spring semesters are divided into three sessions in terms of clinical education, each about 5 weeks in length. Summer semester is divided into two 4-week sessions. Students are assigned to clinical education settings and assignments within the clinical education setting as shown on the *Tentative Clinical Rotation*. Once a student begins a clinical assignment, they will remain in that area of assignment until the next "session" begins.

Note that although a tentative clinical rotation schedule may be outlined for the entire length of the program, clinical assignments may be changed at the discretion of program faculty to enhance student learning opportunities. The *Tentative Clinical Rotation Assignment* may be modified, for example, to meet the needs of a student who is experiencing difficulty, when there is a significant drop in patient volume for that area, or when equipment is taken out of service for repair.

### **V. POLICIES PERTAINING TO CLINICAL EDUCATION**

#### **A. Direct Supervision During Radiation Therapy Procedures**

All radiation therapy clinical procedures (treatment, simulation, dosimetry calculation, treatment plan design, etc.) must be carried out under the direct supervision of qualified personnel throughout the program. Students should always be directly supervised during all patient procedures. **The ratio of staff to students should always be, at a minimum, 1:1.** (i.e. There must be at least one ARRT-certified radiation therapist supervising student during treatment delivery.) The direct supervision policy will be monitored and strictly enforced by clinical staff, clinical supervisors, and program director. The student is obligated to report to program director any situation that jeopardizes strict adherence to this policy.

The JRCERT defines direct supervision as follows:

*Direct supervision is interpreted as having a qualified practitioner physically present during the conduct of the procedure to review and approve the procedure and/or image. Supervision of students over closed-circuit monitor is not acceptable.*

Following are the parameters of "direct supervision of qualified personnel":

1. The ARRT-certified radiation therapist verifies accuracy of all aspects of the treatment procedure prior to "beam-on" and is present during the conduct of the procedure. Documentation by student is reviewed and approved by a qualified radiation therapist.



2. The dosimetrist or ARRT-certified radiation therapist verifies accuracy of all aspects of treatment planning and dose calculations prior to “beam-on”. Related documentation by student is reviewed and approved by a qualified dosimetrist or radiation therapist.
3. The nursing personnel deemed “qualified” by the facility verifies accuracy of data collection such as history, vital signs, etc. prior to presentation to a physician. Related documentation by student is reviewed and approved by qualified nursing personnel.
4. The block fabrication staff deemed “qualified” by the facility verifies accuracy of beam modification devices prior to use in treatment delivery. Related documentation by student is reviewed and approved by a qualified dosimetrist or radiation therapist.

**B. Expectations Regarding Communication**

This program has several expectations regarding student communication as noted below:

1. Maintain confidentiality of information obtained about a patient.
2. Students are to address faculty and other professional staff as Ms., Mr., Doctor, etc. Clinical instructors and supervisors may be addressed by first name. Patients should be addressed as Mr., Ms., Mrs., etc.
3. Students are encouraged to address patients by name (Mr. Smith, Mrs. Robinson, etc.) Endearing terms such as “honey”, “sugar”, “sweetie”, etc. are prohibited.
4. Student should introduce self to new patient (if not introduced by the clinical instructor).
5. Be aware of cultural differences in verbal and nonverbal communication so as to not offend or be misunderstood.
6. Refrain from sharing information about one affiliate with another affiliate. Information learned at one clinical education setting must remain at that clinical education setting. Information regarding policies, practices, patient volumes, equipment purchases, personnel issues, etc. is not for dissemination by students or faculty.
7. Students are to exhibit caution and professionalism when speaking within the patient’s hearing range. “Side” conversations with staff, voicing questions about clinical decisions, unnecessary “chatter” and other similar conversations that otherwise ignore the patient are unprofessionally and to be avoided.
8. We are invited guests at the affiliate site, and must at all times strive to demonstrate our appreciation for their hospitality.

**C. Description of Clinical Education Evaluation Tools**

Tools used to evaluate components of clinical education include:

**1. Tri-Semester Evaluation:**

Tri-Semester Evaluations are conducted three times during Spring and Fall semester, at the end of each five-week session. During the Summer semester, there will be two Tri-Semester Evaluations, at the end of each four-week session. These evaluations monitor a variety of technical skills and behavioral traits felt to be important for an entry-level radiation therapist. Tri-Semester Evaluations are completed by clinical instructors/supervisors, and account for 50% of one's final grade. Clinical supervisors/instructors complete the evaluation, present the evaluation to student and discuss ratings and comments with students. Both student and evaluator sign and date document. If the program director is not present during the discussion, the program director will meet with student at a later time to again review outcomes.

**2. Clinical Competency Evaluation:**

Students are required to satisfactorily perform a minimum of 85 clinical competency exams covering a range of treatment, simulation, dosimetry, block fabrication, general patient care, introduction to treatment unit and simulation equipment. Additionally, students are required to complete an orientation at each clinical site, QC checklist, and satisfactorily participate in participatory procedures.

Clinical competencies are completed by program faculty and clinical instructors/supervisors following didactic and clinical instruction. Students should have documentation of two practice experiences in the *Record of Clinical Experiences* prior to attempting a competency exam. Grades are maintained on all competencies attempted, whether passed or failed, and combined to account for 20% of one's final clinical grade. Objectives for each competency are outlined in clinical course syllabi, and students are strongly encouraged to be prepared to meet the objectives during competency examinations. Most competencies indicate with an asterisk (\*) objectives/performance indicators that must be met in order to pass the competency. Should one essential objective/performance indicator not be met during the exam, the student will earn a "A0" on the exam and be required to repeat the competency after additional practice. Should evaluator deem an essential objective not applicable, student will not be penalized. A sample Clinical Competency Evaluation will be provided during orientation.

Students are expected to complete a minimum number of competencies each semester. A 10-point reduction in overall grade will be made for students who do not complete the minimum number of competencies during a semester.

Requirements by semester:

Fall:	Minimum of 16 competencies required
Spring:	Minimum of 24 competencies required
Summer:	All remaining competencies required

**3. Practical Clinical Exam:**

During the last two weeks of each rotation, a Practical Clinical Exam will be administered by Program Director. This test is given with the intent of evaluating the student's integration of information learned in the classroom to information gained in the clinic. The tests promote and evaluate critical thinking skills and are appropriately matched to the student's academic level/standing in the program.

They account for 20% of one's final clinical grade.

**4. Clinical Case Study:**

Three case studies are required of students Fall and Spring, with two cases required during Summer. Students are required to do a final comprehensive case study during their last semester. These reports are typically no longer than four pages long, but must include specific information to summarize a clinical case with which the student has had a clinical responsibility. Detailed guidelines outlining required components are provided to students during orientation. Case studies account for 10% of one's final clinical grade.

**D. Determination of Clinical Grades**

Final grades in clinical education are determined by four components:

- Tri-Semester Evaluation average x 50%
- Clinical Competency average x 20%
- Practical Clinical Exam score x 20%
- Case Study average x 10%

Example of a student's grade in RAD 442 - Clinical Education II. Note that this hypothetical student completed eight (8) Clinical Competency Evaluations during this particular semester, although the minimum requirement was completion of sixteen (16). One competency (#5) was failed because an essential performance indicator was not met, with the competency repeated and passed after additional practice (#6).

Evaluation Tool	Grade Earned			
Tri Semester Evaluation #1	80	Avg = 83.3	x 50%	41.7
Tri Semester Evaluation #2	82			
Tri Semester Evaluation #3	88			
Clinical Competency #1	96	Avg = 78.6	x 20%	19.7
Clinical Competency #2	94			
Clinical Competency #3	88			
Clinical Competency #4	90			
Clinical Competency #5	0			
Clinical Competency #6	84			
Clinical Competency #7	80			
Clinical Competency #8	97			
Practical Clinical Exam #1	84	Avg = 80.6	x 20%	16.1
Practical Clinical Exam #2	78			
Practical Clinical Exam #3	80			
Clinical Case Study #1	90	Avg = 85	x 10%	8.5
Clinical Case Study #2	80			
Clinical Case Study #3	85			
Subtotal Grade				86
Less 10 points				-10 pts

because minimum # of competencies not accomplished	
Final Grade	76
Letter Grade: 90-100 = A 80-89 = B 70-79 = C 60-69 = D 59 -below = F	C

**E. Record of Clinical Experience**

Throughout the program, students will participate in clinical experiences that enhance understanding of the practice of radiation therapy. All students are required to maintain a Record of Clinical Experiences form, and to submit that record for review as requested by program faculty. The *Record of Clinical Experiences* will be provided to students and reviewed during orientation.

Program Director will also maintain a record of competency examinations submitted to file. A copy of this summary report will be provided to students at the end of each semester. Students are encouraged to verify that *Record of Clinical Experience* and summary report maintained by program director match.

Students should document their participation in clinical activities and submit the *Record of Clinical Experiences* for faculty review as requested. Faculty will assure that student has documented participation in a sufficient number and variety of radiation therapy procedures, and deduct five points from the average score for the three Tri-Semester Evaluations for that semester if the record is not turned in as requested or if an insufficient number or variety of procedures has been recorded. It is the student's responsibility to safeguard the *Record of Clinical Experiences* against loss or damage.

Radiation Therapy is a unique area of patient care in that the student will often see the same patient (with same treatment setup and treatment delivery) multiple days when assigned to the same clinical setting. For that reason, students are not required to document every individual procedure encountered while in the program. Students are expected, however, to seek out learning opportunities that provide a wide variety of clinical experiences, and to document those experiences. Ideally, students will document competence or having assisted or observed all procedures listed on the *Record of Clinical Experience*. It is expected that most procedures will have a minimum of two patient encounters for practice, even though that procedure may not require competency testing. Students are encouraged to progress through the competency testing process on as many procedures as possible. Out of necessity, however, it is anticipated that some experience will be under simulated conditions due to lack of clinical cases. Guidelines are provided that delineate those competencies that cannot be simulated.

Students will document date of encounter and document initials of supervising professional. The *Record of Clinical Experiences* also provides a place for students to document score earned on the clinical competency exam. All competency examinations, whether failed or passed, must be documented.

## **F. Clinical Education Attendance**

### **1. Attendance & Absences**

Prompt and regular attendance is the responsibility of each student. Absences limit educational opportunities obtained through didactic and clinical activities, and should be avoided. Your attendance is also a reflection of your work ethic and one indicator of your potential for successful employment as a radiation therapist. Provisions of the attendance policy are as follows:

#### **Definition of terms in attendance policy**

##### **A. Excused Absence**

Documentation must be submitted for all excused absences. The following are the approved excused absences:

- Illness with physician documentation
- Immediate family illness with physician documentation
- Documented death in immediate family
- Military duty
- Job Orientation
- Emergency situation documented and approved by faculty

##### **B. Unexcused Absence**

All absences not considered excused, including, but not limited to:

- Illness without physician documentation
- Wedding
- Vacation

##### **C. Tardy**

Student is considered tardy if they arrive later than their assigned time to report to their clinical affiliate. A student will be considered absent if they arrive one hour or more after their assigned time.

##### **D. Early Departure**

A student is considered to have taken an early departure if they leave prior to their scheduled time of departure. A student will be considered absent if they leave one hour or more prior to their scheduled time of departure.

#### **Advanced Modality Attendance Policy**

All absences and tardies must be made up, whether excused or unexcused. Students are allowed two absences each semester, excused or unexcused, before their grade is affected. The following actions will be taken for each additional absence:

##### **Excused Absence**

Student will receive no point deduction

##### **Unexcused Absence**

Student will receive a 10-point reduction on their final clinical course average per occurrence, following the allotted two absences.

##### **Tardiness Policy**

Students are allowed two instances of late arrivals per semester. Students will remain in clinic after their assigned departure time to make up the time missed for their late arrival on the day of the occurrence. For each additional instance of late arrival, students will receive a 2-point reduction on their final course average per occurrence.

**2. Notification of Attendance (reporting tardy or absence):**

Students are required to notify their clinical instructor/supervisor by phone AND the program director by text or email to report an absence or potential tardiness within 30 minutes of their scheduled arrival time. Student will receive a 5-point reduction on their clinical evaluation for failing to notify within the allotted time. Student will also receive a 5-point reduction on their clinical evaluation if no notification is received.

To report absenteeism, students should call:

Radiation Therapy Program Director: Call (251) 445-9355, text (904) 327-4670 or email him at jamanning@southalabama.edu. Either method of notification of Program Director is fine.

AND the clinical affiliate to which they are assigned:

Providence Hospital: (251) 266-1870 or (251) 266-1890

Clinical Supervisor: Matthew Knorr

Infirmary Cancer Care: (251) 435-5064 or (251) 435-2273

Clinical Supervisor: Michael Rowell

Mitchell Cancer Institute: (251) 445-9605 or (251) 445-9628

Clinical Supervisor: Heather Curry

Urology & Oncology Specialists (Springhill): (251) 414-5-1193 or (251) 414-5665

Clinical Supervisor: Andrew Preston

Singing River Health Systems: (228) 809-5216 or (228) 809-5251

Clinical Supervisor: Lindsay McDuffie

Forrest General Cancer Center (601) 288-1717 or (601) 288-1711

Clinical Supervisor: Lauren Cole

Woodlands Medical Specialists, PA (850) 696-4640 or (850) 696-4684

Clinical Supervisor: Cindy Edmonds

**3. Absences and Competency Expectations**

Regardless of the number of absences a student may incur during a semester, the student must complete competency expectations for that semester.

**4. Clocking Attendance in Trajecsys**

All students must provide documentary proof of clinical attendance by utilizing Trajecsys prior to performing any duties.

Students failing to document their attendance in the clinical setting will be considered absent. In the event a student fails to record their attendance, the error may be corrected by utilizing the following procedure:

Students must also record any absence in the electronic data input system by the

end of the following day.

Students will receive a 5-point reduction on their clinical evaluation for any of the following:

Failure to record time exceptions by the end of the day following an absence.

Neglecting to clock in or out for clinical rotation.

Time exceptions are only to be utilized for absences.

#### **5. Lunch**

Students should follow a lunch schedule that coincides with the lunch schedule followed by adjunct clinical instructors at that clinical education setting. For some sites, that will result in a 45-minute lunch, while others may take one hour. If adjunct clinical instructors take a 30-minute lunch between 12:00 P.M. and 12:30 P.M., for example, student should do likewise. If adjunct clinical instructors flex lunch assignments, student should accept the lunch assignment made by the adjunct clinical instructor for that rotation area. Note that this will often prevent students from going to lunch at the same time even though assigned to the same clinical education setting. In all situations, it is important for students to understand when they are expected to return from lunch, and indeed follow through by returning by that time.

#### **G. Standards of Professional Demeanor**

Faculty and adjunct clinical instructors may send students home for poor professional demeanor. Adjunct clinical instructors who find it necessary to send a student home may do so without prior approval of program faculty. The student will be sent home immediately and program faculty will be notified of the situation after student has exited the clinic. Program faculty will complete a *Student/Instructor Conference Form* on the student's return to clinic, and student will be given the opportunity to defend his/her actions. Based on the violation, further disciplinary action may be taken in accordance with the College of Allied Health's *Professional Behavior Policy*. As with other disciplinary actions, the student will have the right to appeal the decision to be sent home by following the appeals process outlined elsewhere. Student will have the option of making the day up at a time determined by program faculty or taking a 10-point reduction on the final grade of the Tri-Semester Evaluation.

Examples of professional demeanor violations include:

- < Insubordination
- < Argumentative behavior
- < Inappropriate behavior
- < Failure to show proper respect to instructors and/or physicians
- < Inappropriate patient interaction

#### **H. Lifelong Learning**

As a future member of the radiation therapy profession, continued lifelong learning must be embraced by you. It is hoped that you will do so because of your commitment as a professional. That said, in order to renew your certification via the American Registry of Radiologic Technologists (ARRT), you must acquire a minimum of 24 hours of continuing education (CEUs) over a period of 24 months for as long as you remain in the profession. The continuing education clock begins running the day you successfully complete the

ARRT Registry, and is thereafter based on your birth month. For example, if one earns initial ARRT certification in 2016, they begin their first biennium (24 months) on the first day of their next birth month, and will be required to report CEUs with their certification renewal two years later.

The usual way of earning CEUs is through attendance at radiologic science seminars, State or National meetings, and directed readings offered via the ASRT's journals, *Radiologic Technology* and *Radiation Therapist*. You may also receive CEU credit via enrollment in courses leading to advance degrees. The bottom line is that there are a number of benefits to ongoing personal and professional development that will enhance your continued personal and professional growth.

#### **I. Dress Code for Clinical Education**

A student's personal appearance is regarded as an important aspect of the clinical evaluation. Students are expected to be neat, clean, and well-groomed at all times. Uniforms must be clean, unwrinkled and odor free. Uniforms must be laundered after each use due to harboring of germs. In addition, students are expected to use shampoo, deodorants, and other items of personal hygiene on a daily basis. In short, students are expected to dress and conduct themselves as professionals at all times. Note that uniforms will be necessary for the Fall and each subsequent semester.

Students presenting in the clinic inappropriately dressed will be sent home. The student will be given the option of making the day up or being counted as "absent" for the day. Whether observed early or late in the day, the student will be asked to leave at that time and the penalty will be the same as if observed at the beginning of the day.

The dress code policy applies to all situations in which a student is in the clinical setting. A number of didactic courses, for example, will require students to participate in clinical laboratory activities. Clinical labs may be conducted during the Physics course to measure output of a linac, vital sign assessment skills may be demonstrated in the clinic for the Patient Care course, Orientation to Radiation Therapy course may require students to identify treatment accessories within a treatment room, and Principles and Practice classes may have sessions where students construct immobilization devices or simulate various beam/patient set-ups. In all situations where students have been notified that there will be lab activity in the clinical setting during a didactic class, the dress code policy for the clinical setting should be followed. The dress code policy for clinic will be provided to students during orientation.

### **VI. HEALTH AND SAFETY GUIDELINES**

Students must be educated as to the hazards within their work environment and should follow established practices and procedures. The University of South Alabama Department of Safety and Environmental Compliance is a valuable resource regarding safety issues. Detailed information is available at: [www.southalabama.edu/environmental/policies.html](http://www.southalabama.edu/environmental/policies.html).

#### **A General Guidelines**

During the orientation process, adjunct clinical supervisors/instructors will educate students as to specific safety measures which have been implemented at that clinical education setting. Following these guidelines will enhance the safety of student, patients, employees, and visitors. In all situations, students should take a safe course of action when confronted with situations in which there is a potential for harm. All reasonable precautions should be taken to protect patients, employees, visitors, and students. When



a safety question arises, prompt consultation with supervisor/instructor, program director, and/or Safety Officer for that facility is appropriate. Important general guidelines include:

- < Promptly report all accidents or incidents.
- < Correct or report any safety hazards you see.
- < Know where protective gear and safety supplies are stored, and use them when appropriate.
- < Know the plan for responding to emergency, fire, and/or spill.
- < Know the location of Material Safety Data Sheets.
- < Promptly report all actual and suspected equipment malfunctions.

#### **B. Patient Identification Prior to Radiation Therapy Procedure**

Each clinical affiliate will have specific procedures for identifying patient prior to commencement of a course of Radiation Therapy. Typically, a facial photo will be placed in the patient's chart, and can be a valuable reference. However, students who are involved in simulation and/or treatment of a patient should verify patient identity by at least two (2) methods prior to proceeding with procedure. Examples of methods used to verify patient identification include:

- < Asking the patient their full name and comparing to information in the chart.
- < Comparing the photo in the patient's record to the patient.
- < Verifying identity by checking the identification band of in-house patients.
- < Asking the patient their birth date and comparing to information in the chart.
- < Asking the patient their street address and comparing to information in the chart.
- < Through confirmation by a relative or a friend accompanying patient, if the patient cannot speak for himself/herself.
- < Checking a unique ID card provided to patient by the facility.

#### **C. Patient Observation During Treatment**

Safety regulations require that Radiation Therapy treatment rooms provide a means of maintaining audible and visual contact with patients during treatment. In all situations, a student who initiates treatment (beam-on) is responsible for maintaining visual and audible contact with patient throughout treatment. Students will be evaluated on their adherence to this policy on every clinical competency evaluation and Tri-Semester Evaluation.

#### **D. Systems of "Double-Checks" in Radiation Therapy**

Regardless of the clinical education setting, the student will be keenly aware of multiple systems of "double checks" that are in place within each clinical affiliate. Students should adhere to and consistently participate in the system(s) used by the clinical affiliate to which they are assigned. The double checks are in place to enhance accuracy and safety, and are similar to systems used by radiation therapists throughout the country. Examples of double-check methods include:

- < System for confirming key treatment parameters prior to "beam-on" - typically involves a system in which one therapist announces treatment parameters and a second therapist performs an independent chart check and vocalizes the same treatment parameters.
- < System for weekly chart check - often involves a system where a therapist who is not treating the patient performs a series of double-checks on chart documentation to assure accuracy of treatment delivery and documentation.
- < Calculation second-checks - standard in Radiation Therapy, treatment dose calculations must be double-checked by an independent method and/or another individual prior to treatment. Many facilities specify the person(s) who may

perform calculation second-checks.

## **E. Radiation Safety**

Radiation-producing equipment and radioactive materials provide significant diagnostic and therapeutic benefits to the patient. However, if used improperly or when accidents occur during use, they can present a risk to both patient and user. It is imperative that good radiation safety practices are used at all times.

It has long been established that exposure to ionizing radiation such as x-ray, gamma rays, beta and alpha particles, have the potential of producing harmful effects in humans. Potential harmful effects include life-shortening carcinogenic promotion, birth defects, cataracts, and skin lesions. The dosage necessary to produce any of these and other effects may vary from one person to the next (threshold dose, i.e., amount of ionizing radiation necessary to yield/produce a biologic change). The absolute need to reduce exposure rates/dosage has led to the development of the following policies, which are intended to reduce the chances of producing harmful effects in patients, and in those who work with and/or administer ionizing radiation:

Radiation monitoring guidelines for the clinic

1. Maintain radiation exposures as low as reasonably achievable (ALARA).
2. All faculty and students are required to wear a radiation monitoring device at all times while in the clinical education setting.
3. Radiation monitoring devices are to be attached to the collar.
4. In cases of declared pregnancy, two radiation monitoring devices must be worn: one attached to the collar area and the other attached at the waistline. (Pregnant students should consult the Student Reference Manual for options regarding reporting pregnancy)

Guidelines for students employed by a radiology/radiation therapy department:

1. Students employed in hospitals and clinics and who are otherwise susceptible to radiation exposure beyond that received in their clinical education courses should notify the University of South Alabama Radiation Safety Office (460-7063) of their employment status.
2. Students will wear the radiation monitoring device supplied by the Department of Radiologic Sciences during scheduled clinical days, but are NOT to wear the same badge while working as an employee. Instead, these students must wear their employer-issued radiation monitoring device while working that institution.
3. Students employed as a radiographer while in the program will exchange their radiation monitoring device supplied by the Department of Radiologic Sciences every month.

Guidelines for students NOT employed by a radiology/radiation therapy department:

1. Students not employed in a position that would make them susceptible to radiation exposure beyond that received in their clinical education courses will exchange their radiation monitoring devices on a quarterly basis.

## Radiation Exposure Reports

1. With the signed permission of the student, radiation exposure reports are posted according to the device number listed on the reverse side. No one has access to this number except the student, radiation safety officer and faculty. Hence, confidentiality is maintained in reporting exposure results
2. Radiation exposure reports are posted on the student bulletin board. Students are encouraged to review each new report. Badges exchanged on a quarterly basis are reported quarterly while badges exchanged monthly are reported monthly.
3. When student picks up their new badge from the imaging lab, they can readily review the radiation exposure report posted in the same area.
4. Permanent radiation exposure reports are maintained in the office of the University Radiation Safety Officer.
5. The University Radiation Safety Officer is responsible for monitoring and maintaining appropriate radiation safety practices and standards in accordance with acceptable State and Federal regulatory agencies, e.g., Alabama Department of Health, Division of Radiologic Health, and the Nuclear Regulatory Commission.
6. Should an individual receive an overexposure on a monthly/quarterly report, the individual in question and the Department of Radiologic Sciences will be notified by the office of the University Radiation Safety Officer. Determinations regarding the cause(s) of the overexposure will be jointly made by the aforementioned parties. The department follows the guidelines below as recommended by the USA Radiation Safety Officer relative to monitoring radiation safety practices for students and employees:
  - The ALARA Level I trigger limit is 125 mrem per quarter. While this reading calls our attention to a given student/employee, we watch the individual's dose like everyone else. Other than an informal discussion with the student/employee by faculty, no formal action is taken.
  - The ALARA Level II trigger is 375 mrem per quarter. This reading requires a formal investigation and a written report (including a statement from the participant). Among other procedures, a major part of the formal investigation addresses the cause, individual radiation protection practices, and continued close monitoring. The application of appropriate radiation practices is expected from all students and employees.
7. To transfer records of radiation exposure to another institution, one should contact the office of the University Radiation Safety Officer.
8. Concerns regarding radiation safety and associated health practices should be directed to the University Radiation Safety Officer (460-7063) or to program faculty.

## **F. Guidelines for Equipment/Accessory Utilization in Radiation Therapy**

Proper utilization of equipment and accessory equipment fulfills two important objectives. First, it promotes longevity of expensive equipment while reducing maintenance costs

and, second, it plays an important role in safety for patient and staff. Students should observe and practice specific guidelines set forth by clinical affiliates. General guidelines include:

1. Assure that necessary equipment warm-up has been conducted.
2. Secure accessories, using locking devices when available.
3. Use particular caution with shielding devices not affixed to a tray (hand blocks, pb shields, etc.)
4. Report actual and suspected equipment malfunctions, holding treatment until instructed to proceed.
5. Verify that the correct accessories are in place before “beam on” (verify that correct block is in place, prescribed wedge, correct thickness of bolus, etc.)
6. Check for obstacles prior to gantry or table rotation.

#### **G. Communicable Diseases**

During the first week of the program, students will be oriented to OSHA recommendations for preventing the spread of HIV, HAV, HBV, Tuberculosis and other pathogen transmissions in the health-care setting. Each student will view the OSHA Standards video pertaining to “Communicable Diseases” and the Tuberculosis video, completing a pre- and post-test/examination. Key points of the information presented in the video presentation are summarized below:

Human Immunodeficiency Virus, (HIV), the virus that causes Acquired Immunodeficiency Syndrome (AIDS), is transmitted through sexual contact and exposure to infected blood or blood components and perinatally from mother to neonate. HIV has been isolated from blood, semen, vaginal secretions, saliva, tears, breast milk, cerebrospinal fluid, amniotic fluid, and urine and is likely to be isolated from other body fluids, secretions, and excretions.

Thus, this section emphasizes the need for health-care workers to consider all patients as potentially infected with HIV and/or other blood-borne pathogens and to adhere to infection control precautions for minimizing the risk of exposure to blood and body fluids of all patients.

This approach, referred to as Universal Blood and Body-Fluid Precautions or Universal Precautions, should be used in the care of all patients, especially including those in emergency-care settings in which the risk of blood exposure is increased and the infection status of the patient is usually unknown.

1. All health-care workers should routinely use appropriate precautions to prevent skin and mucous-membrane exposure when contact with blood or body fluids of any patient is anticipated.

Gloves should be worn for touching blood and body fluid, mucous membranes, or non-intact skin of all patients; for handling items or surfaces soiled with blood or body fluids, and for performing venipuncture and other vascular access procedures. Gloves should be changed after contact with each patient. Masks and protective eyewear or face shields should be worn during procedures that are likely to generate droplets of blood or other body fluids to prevent exposure of

mucous membranes of the mouth, nose, and eyes. Gowns or aprons should be worn during procedures that are likely to generate splashes of blood or body fluids.

2. Hands and other skin surfaces should be washed immediately if contaminated with blood or body fluids. Hands should be washed immediately after removal of gloves.
3. Health-care workers should take precautions to prevent injuries caused by needles, scalpels, and other sharp instruments or devices during procedures; when cleaning used instruments; during disposal of used needles; and when handling sharp instruments after procedures. To prevent needle stick injuries, needles should not be 1) recapped, 2) purposely bent or broken by hand, 3) removed from disposable syringes, or 4) otherwise manipulated by hand.
4. Health-care workers who have exudative or weeping dermatitis should refrain from all direct patient care and from handling patient-care equipment until the condition resolves.

Implementation of universal blood and body fluid precautions for all patients eliminates the need for the use of the isolation category of "Blood and Body Fluid Precautions" for patients known or suspected to be infected with blood-borne pathogens.

#### Housekeeping

Environmental surfaces such as walls, floors, and ceilings are typically not associated with transmission of infections to patients or health-care workers. Therefore, extra-ordinary attempts to disinfect or sterilize these environmental surfaces are not necessary. However, cleaning and removal of soil should be done routinely.

#### Cleaning and Decontaminating Spills of Blood or Other Body Fluids

Chemical germicides that are approved for use as hospital disinfectants and are tuberculocidal when used at recommended dilutions can be used to decontaminate spills of blood and other body fluids.

#### Laundry

Although soiled linen has been identified as a source of large numbers of certain pathogenic microorganisms, the risk of actual disease transmission is negligible. Soiled linen should be handled as little as possible and with minimum agitation to prevent gross microbial contamination of the air and of persons handling the linen. All soiled linen should be bagged at the location where it was used; it should not be sorted or rinsed in patient-care areas. Linen soiled with blood or body fluids should be placed and transported in bags that prevent leakage.

## **H. Fall Hazards**

Students should regularly monitor the environment for potential fall hazards. Items that increase fall risk should be promptly removed or cleared. Spills of non-hazardous materials should be promptly cleaned. Spills of hazardous materials should be promptly cleaned according to established guidelines.

**I. Hazardous Materials**

Follow guidelines set forth by the clinical affiliate to minimize hazards posed by chemicals, wastes, and other materials. Material safety data sheets (MSDS) will be available for all chemicals in the work environment which pose a hazard. The MSDS provides information to include chemical product and company identification, hazard identification, physical and chemical characteristics, and health hazards, first aid measures, firefighting measures, handling and storage, transportation information, and regulatory information.

**J. Magnetic Resonance Imaging (MRI) Safety**

You may never develop an interest in MRI, but during your clinical rotations it is possible that you may be required to visit the MRI area for any number of reasons. Thus it is important that you understand some of the basic principles underlying MRI safety.

Magnetic resonance imaging uses radiofrequencies within a magnetic field to produce images of bones, organs, and soft tissue. Although MRI does not employ ionizing radiation, it nonetheless has the potential to cause harm to students, staff, and visitors who accompany patients. A MRI screening form is completed during orientation to help identify any potential dangers to you or others such as the presence of metallic objects in your body that could be affected by a magnetic field. If such objects are present, you will be prohibited from entering/observing in the MRI department of any of the program's clinical settings for any reasons. Items that pose a risk include items such as insulin pump, cardiac pacemaker, aneurysm clip, and any type of prosthesis, just to name a few. Therefore, one should understand safety concerns and minimize risks before proceeding into an MRI area.

**K. College of Allied Health Professions Biosafety Website as Resource**

The most current policies and procedures for the CAHP are posted online at [http://www.southalabama.edu/alliedhealth/biomedical/Ravine/CAHP\\_Biosafety.htm](http://www.southalabama.edu/alliedhealth/biomedical/Ravine/CAHP_Biosafety.htm) Students are given a safety card at the beginning of the program which contains this and other safety-related information, including contact information needed in the event of an exposure to hazardous substance such as blood or body fluid. It is the student's responsibility to maintain this card while in clinic and refer to the card and website to obtain the most accurate information about steps to follow in the event of a potential or actual exposure. The website includes

- Exposure Control Plan
- Immunization Forms
- Influenza (Flue) Vaccination Policy
- Tuberculosis (TB) Surveillance & Training Program
- Report of Accident/Incident Form
- Online training: Bloodborne Pathogens (BBP) and TB
- Web links to various resources from CDC
- Web links to various resources from OSHA

**L. Emergency Preparedness Plan**

1. Information to guide students in the event of an on-campus or weather emergency can be accessed from the [USA homepage](#). Select "Emergency Hotline" from the links at bottom of page to learn more about emergency and weather alerts that are made available to the University community. Included are topics such as inclement weather communication, power failures, and campus violence or criminal threat. Emergency phone numbers are also provided. USA encourages students to follow the guidelines outlined and to take advantage of

the resources provided.

## 2. Department of Radiologic Sciences

### Emergency/Communication/Evacuation Plan

**Purpose:** To secure the safety of all students, faculty, patients and visitors to the Department of Radiologic Sciences through adherence to departmental procedures in the event an evacuation from the Health Sciences Building (HAHN) becomes necessary.

#### Responsible individuals:

Radiologic Sciences Office 445-9346 Room 3015

Mr. Chucri Jalkh	445-9352 Room 3023
Ms. Donna Cleveland	445-9357 Room 3024
Ms. Missy Curtis	445-9346 Room 3018
Ms. Misty Davis	445-9357 Room 3020
Ms. Cathy Cooper	445-9353 Room 3025
Mr. Jacob Manning	445-9355 Room 3026
X-Ray Lab	445-9358 Entrance across from R 3095 & R 3102

#### Procedure:

The individuals listed above will be responsible for notifying students, faculty, patients and visitors of the existing problem. Should the problem arise in this department, one of the individuals listed above will be responsible for notifying the appropriate campus authorities.

#### Specific and General Duties:

Faculty and Staff will check the corridor within the department, all offices, classrooms and the x-ray lab. Patients will be evacuated from the x-ray lab to the designated place of safety. All x-ray units will be turned off and doors will be closed.

If classes **are** in session, the instructor is responsible for evacuating students to the designated place of safety. All electrical equipment will be turned off and doors will be closed.

Students, faculty and staff will be responsible to know the location of all safe exits, fire extinguishers, hose cabinets and evacuation routes. Stairwells are considered to be safe exits, while elevators are not. **DO NOT USE THE ELEVATORS.**

**Designated place of assembly:** To insure all persons in the department have evacuated the building, faculty, staff, students and others under the care or supervision of staff or faculty will assemble in front of a point mid-way between Alpha Hall East and the College of Medicine building. A roll check will be conducted at the place of assembly.

**Re-Entrance to the HAHN:** Until the building (HAHN) is declared safe, no one will be permitted to re-enter the building (HAHN) until notified by the Building Safety Officer, Building Coordinator, Campus Police or the Fire Department.

**Contact Numbers:**

**Campus Police - - - - - 460-6312**  
**Maintenance - - - - - 460-7111**  
**Maintenance Emergencies (after 3:00 p.m. weekdays & holidays)- - - - -460-7047**