Notice of Equal Opportunity

Thomas Jefferson University is committed to providing equal educational and employment opportunities for all persons without regard to race, color, national or ethnic origin, marital status, religion, sex, sexual orientation, gender identity, age, disability, veteran’s status or any other protected characteristic. The consideration of factors unrelated to a person’s ability, qualifications and performance is inconsistent with this policy. Any person having inquiries or complaints concerning Thomas Jefferson University’s compliance with Title VI, Title IX, the Age Discrimination Act of 1975, the Americans with Disabilities Act, or Section 504 of the Rehabilitation Act is directed to contact their Student Affairs Dean or Human Resources – Employee Relations, who have been designated by Thomas Jefferson University to coordinate the institution’s efforts to comply with the these laws. Any person may also contact the Assistant Secretary for Civil Rights, U.S. Department of Education, Washington, D.C. 20202, or the Director, U.S. Department of Education, Office for Civil Rights, Region Three, Philadelphia, Pennsylvania, regarding the University’s compliance with the equal opportunity laws.

Thomas Jefferson University reserves the right to amend any regulations, fees, conditions and courses described herein as circumstances may require without prior notice to persons who might thereby be affected. The provisions of this catalog are not and may not be regarded as contractual between the School and the students or its employees.

Required Background Check

Students who are offered admission to Jefferson are required to pass a criminal background check and child abuse clearance. Some clinical sites may require students to be fingerprinted and/or drug tested. The Office of Admissions will provide you with the appropriate information to complete these requirements. Clinical rotation and fieldwork sites that require a criminal background check, child abuse clearance and/or fingerprinting may deny a student’s participation in the clinical experience, rotation or fieldwork because of a felony or misdemeanor conviction or a record of child abuse. Clinical sites may also deny participation in clinical experiences for other reasons, including but not limited to failure of a required drug test, or inability to produce an appropriate health clearance. As participation in clinical experiences, rotations or fieldwork is a required part of the curriculum and a requirement for graduation, denial of participation by a clinical site may result in delay of graduation or the inability to graduate from the program.

Regardless of whether or not a student graduates from Jefferson, individuals who have been convicted of a felony or misdemeanor may be denied certification or licensure as a health professional. Information regarding individual eligibility may be obtained from the appropriate credentialing bodies.

The Department of Radiologic Sciences reserves the right to make policy and procedure changes at any time. Such changes will be distributed for insertion into the appropriate section of the Handbook. All students enrolled in any courses sponsored by the Department must comply with such changes at the time specified by the Department.

Revised and Adopted August 2014
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Jefferson School of Health Professions Mission Statement
The Jefferson School of Health Professions is committed to educating health care professionals of the highest quality and ethical standards for contemporary practice in the global community. By promoting faculty excellence in teaching, research and service, we prepare caring professionals who are competent in the use of evidence based practice, critical in their thinking, committed to lifelong learning and prepared to be leaders in diverse health care settings. In keeping with the mission of the University and the future of health care delivery, the Jefferson School of Health Professions is committed to interdisciplinary education and technologies that draw upon the strengths of all disciplines.

Mission of the Department of Radiologic Sciences
The Department of Radiologic Sciences provides excellence and leadership in all aspects of radiologic sciences, by teaching, undertaking research and providing exemplary clinical practice skills in the broad field covered by this discipline.

The mission of the Department of Radiologic Sciences is to provide a comprehensive education preparing students for entry-level practice in radiologic and imaging sciences as competent, caring members of the health care team, cultivating professionalism and life-long learning. Through innovative technology and pedagogy, critical thinking and problem-solving skills are developed and interprofessional teamwork and communication are enhanced.

Mission of the Radiography Program
The Mission of the Radiography Program is to provide a comprehensive education preparing students for entry-level practice into medical imaging sciences and the radiologic and imaging sciences, as competent, caring professionals, cultivating professionalism, interprofessional practice and life-long learning. Through innovative pedagogy, critical thinking and problem-solving skills are developed and enhanced.
Radiography Program Goals & Student Learning Outcomes

Goal # 1: Clinical Performance and Clinical Competence:

Student Learning Outcomes:

1-A. Students will select appropriate technical factors.

1-B. Students will demonstrate accurate positioning skill.

1-C. Students will utilize safe radiation practice for patient, self and healthcare team.

1-D. Students will provide safe and quality patient care.

Goal # 2: Problem Solving Skills and Critical Thinking:

Student Learning Outcomes:

2-A. Students will adjust positioning and technical factors for non-routine procedures.

2-B. Students will critique images for diagnostic quality.

Goal # 3: Communication Skills:

Student Learning Outcomes:

3-A. Students will demonstrate age-appropriate oral communication skills.

3-B. Students will demonstrate effective written communication skills.

3-C. Students will demonstrate appropriate communication skills with the interprofessional health care team.

Goal # 4: Professional Development and Growth:

Student Learning Outcomes:

4-A. Students will integrate professional ethics and behavior into clinical practice.

4-B. Students will function as part of the interprofessional healthcare team.

4-C. Students will participate in professional growth development
The Handbook

This *Academic Policies and Clinical Education Handbook* serves as a guide for students enrolled in the Department of Radiologic Sciences, Jefferson School of Health Professions, Thomas Jefferson University.

A Thomas Jefferson University student is required to uphold a high standard of academic and nonacademic conduct. That standard is presented in this document and will be upheld by the Department of Radiologic Sciences. Academic and nonacademic misconduct at Thomas Jefferson University is subject to disciplinary action.

This handbook is given to matriculating students during orientation. The Department will obtain documentation of the receipt and review of the handbook.

Each student will be responsible for maintaining his/her knowledge of the information contained in the Academic Policies and Clinical Education Handbook, as well as the Jefferson School of Health Professions Catalog, and Jefferson School of Health Professions Student Handbook.


The Jefferson School of Health Profession Handbook is available online at: [http://www.jefferson.edu/university/health_professions/departments/radiologic_sciences.html](http://www.jefferson.edu/university/health_professions/departments/radiologic_sciences.html)
National Certification Examination

Graduates of the Multicompetency and Advanced Placement Programs are eligible to take the associated certification examinations of the American Registry of Radiologic Technologists (ARRT), American Registry of Diagnostic Medical Sonographers (ARDMS), Cardiovascular Credentialing International (CCI), Medical Dosimetrist Certification Board (MDCB), and Nuclear Medicine Technology Certification Board (NMTCB), as applicable. Students who pass these examinations receive national certification.

Program Accreditation

The educational programs of the Department are approved by the University administration. All programs are programmatically accredited by their respective accreditation body (e.g., JRCERT, JRCNMT, and JRCDMS). The Computed Tomography and Invasive Cardiovascular Technology programs are covered under the University’s accreditation by Middle States Commission on Accreditation.

Program Compliance

If a student feels the program is not in compliance with the accreditation standards, a complaint must be submitted in writing to the Program Director with documentation for the complaint. The Department Chair, Program Director, and Clinical Coordinator will review the complaint and documentation and respond to the student within three (3) business days of receiving the complaint. If the student is not satisfied with the response, he/she has the right to contact the accreditation body.

Joint Review Committee on Education in Radiologic Technology (JRCERT)
20 N. Wacker Drive Suite 2850
Chicago, IL 60606-3182
Phone: (312) 704-5300
Fax: (312) 704-5304
http://www.jrcert.org/

1. All multicompetency students EXCEPT for sonography are not eligible for the certification exams until they have successfully completed both years.
2. For CT & ICVT students would contact the Dean of the School of Health Professions.
ACADEMIC POLICIES
Policies

I. Course Requirements
1. Prerequisites for courses outlined in the curriculum must be met in order to follow the necessary educational sequence.
2. Students are responsible for accessing courses through Blackboard Learn (Jefferson.blackboard.com) and downloading all course syllabi, handouts and assignments for each course every semester.
3. Students are responsible for completing course evaluations for each of their courses at the end of the semester. A link will be provided to the students at the end of the semester.
4. Students are responsible for checking their Jefferson e-mail accounts daily.
5. Students must complete the Health Insurance Portability and Accountability Act (HIPAA), Safety, Ergonomics and Infection Control modules prior to matriculation.

II. Policies on Student Progression in the Radiologic Sciences Major
1. A student who earns one course grade of C- or below in the Radiologic Sciences curriculum in any academic year will be placed on departmental academic probation and will be required to meet with his/her assigned faculty advisor to monitor academic progress.
2. A student who earns two or more course grades of C- or below in the Radiologic Sciences curriculum in any academic year will be dismissed from the program in which he/she is currently enrolled. She/he will be subject to dismissal from the Department of Radiologic Sciences.
3. A student who earns a course grade of F in any Radiologic Sciences curriculum will be dismissed from the program modality in which he/she is currently enrolled. She/he will be subject to dismissal from the Department of Radiologic Sciences.
4. A multicompetency student who has been placed on departmental academic probation during his/her junior academic year, but has successfully completed his/her junior academic year, will be taken off departmental academic probation at the beginning of his/her senior academic year.
5. A student who does not maintain a minimum 2.00 cumulative grade point average will be placed on School academic probation for one semester. If the student is enrolled in courses totaling fewer than 12 credits during the subsequent semester, the probationary period will be extended to two semesters. At the end of the probationary period:
   • The student achieves the minimum cumulative grade point average and is reinstated in good standing, or
   • The student fails to achieve the minimum cumulative grade point average at the end of the probationary period and is dismissed from the School for academic underachievement, or
   • In extraordinary cases, where the student has made significant progress toward achieving the minimum grade point average, the Department Chairperson may recommend granting one additional probationary semester. If, at the conclusion of the extended probationary semester, the cumulative grade point average is still below the minimum 2.00, the student is dismissed for academic underachievement.
6. A student who is dismissed from the Department of Radiologic Sciences or the School of Health Professions due to unsatisfactory academic performance may, within two years of the dismissal, reapply for re-admission by submitting a written request directly to the Department Chairperson. All others wishing to continue their studies must reapply through the Office of Admissions.
7. A senior year multicompetency student who is dismissed from the Department of
Radiologic Sciences due to unsatisfactory academic performance in his/her senior year may be given the option of applying for enrollment in a baccalaureate degree program in the Department of Professional & Continuing Studies.

8. Incomplete grades for a Radiologic Sciences course can be assigned only in the case of extenuating circumstances. These circumstances must be reviewed by the faculty prior to the issuance of an “Incomplete” grade. In all cases, an “Incomplete” grade is assigned only when the work already done has been of a quality acceptable to the instructor.

Every student is required to meet with his or her faculty advisor at least once during each semester.
COMPETENCY-BASED CLINICAL EDUCATION
**Competency- Based Clinical Education**

Competency-based clinical education has been established for the students enrolled in the Department of Radiologic Sciences programs. It is designed to permit accurate assessment of the cognitive, affective and psychomotor learning domains of students in the clinical education component of the program. Evaluation of students’ clinical competencies is completed by registered technologists under the direction of the Clinical Affiliate Supervisor.

All students must complete clinical competencies in accordance with the requirement of their certification body, ARRT. In addition to the competency requirements, students must satisfy all requirements of the clinical courses.

**Clinical Education Eligibility**

To be assigned to a Clinical Education Affiliate site, the student must meet the following requirements or obligations:

- Be a student in good academic standing in the Department of Radiologic Sciences.
- Maintain a cumulative grade point average of 2.00 or higher.
- Provide and maintain proof of certification in adult, child and infant cardiopulmonary resuscitation (BLS/CPR/AED for Healthcare Provider).
- Provide a current health certificate from a licensed physician indicating that the student is in good health. The document should include a description of any physical disability that may require monitoring during the student's course of study. If a disability interrupts the student's course of study, it should be discussed with the Clinical Coordinator.
- Meet program specific technical standards Appendix A.
- All immunization requirements must be completed prior to commencing or resuming clinical courses. Failure to meet these health requirements will result in the delay of clinical practical or the failure of clinical courses.
- Be in compliance with the University requirements for influenza vaccination.
- Additional requirements may be needed.
- Students not in compliance are not permitted to attend classes or clinical
Clinical Practices and Policies

1. Attendance at clinical practical is mandatory.
2. A student who does not demonstrate safe clinical practice will be in violation of clinical practices and policies.
3. A student who does not demonstrate professional behavior and professional practice is subject to review by the faculty.
4. Safe clinical or professional practice is defined as:
   a. Adheres to the Patients’ Bill of Rights - Appendix B.
   b. Performs clinical duties consistent with the professional Code of Ethics - Appendix C.
   c. Receives passing grades on clinical evaluations as evaluated by qualified personnel. See course syllabus.
   d. Adheres to the code of behavior/conduct outlined in the JSHP and Department of Radiologic Sciences handbooks.
   e. Adheres to all clinical practices and policies of the clinical site and JSHP and Department of Radiologic Sciences.
   f. Adheres to departmental radiation protection and monitoring practices where appropriate - Appendix D, E & F

Violations of Clinical Practices and Policies

Violations of Clinical Practices and Policies will typically be addressed through progressive discipline, as follows:

- First violation – written warning and counseling by the Program Director and Clinical Supervisor.
- Second violation – possible suspension or dismissal.
- Third violation – dismissal from the Department.

Depending on the particular circumstances, one or more progressive disciplinary steps may be skipped in instances of particularly serious violations of policies and/or practices, and some egregious violations may result in immediate dismissal from the Department.
Policy Governing Clinical Education Scheduling

The purpose of the clinical assignment is to correlate didactic knowledge with practical skills. The total number of students assigned to any clinical site shall be determined by the Department of Radiologic Sciences and approved by program accreditation bodies. The student is subject to all rules and regulations of the clinical site. The clinical education center reserves the right to suspend or terminate from the clinical site a student who does not adhere to established policies of the program or the clinical site. A student who does not maintain appropriate behavior may be suspended or dismissed immediately. (Refer to the section entitled "Responsibilities of the Student" on page 15.)

If a student is suspended or dismissed from a clinical site, the Department Chair, Program Director and Clinical Coordinator will review the circumstances for this action. All parties are encouraged to address the issue promptly in writing (within five (5) business days whenever possible) so that resolution of grievance should require no more than three (3) weeks. If the decision to dismiss is upheld, the clinical dismissal will result in a final grade of “F”. Students who have reason to believe that the grade has been inappropriately assigned may request a review of the grade in accordance with the provisions of the Grade Appeal Protocol, which is published in the JSHP Student Handbook.

For dismissal due to Unsafe Clinical Performance, students will follow the Policy on Dismissal for Unsafe Clinical Performance, which is published in the JSHP Student Handbook.

The JSHP Student Handbook may be found at this link:
http://www.jefferson.edu/content/dam/tju/jshp/Files/JSHP_Handbook.pdf

Clinical Site Assignment

The Clinical Coordinator determines student schedules and assignments at clinical education centers. Assignments at the clinical sites are intended to provide the student with a comprehensive clinical education as deemed appropriate by the faculty, and serves to correlate didactic knowledge with practical skills. Students are not guaranteed a specific clinical site, however, student input is considered. Should a student be dismissed from his/her clinical site, the department does not guarantee replacement at an alternate site.

Student's clinical assignments will be based on:
- Student's experience and competency level.
- Clinical education needs, directed toward reaching the highest level of competency in diagnostic imaging.

Any student requesting changes in the clinical schedule must submit written justification for the change to the appropriate Clinical Coordinator. A decision will be made based on the student's educational needs and site availability.
Responsibilities of the Clinical Affiliate Supervisors/Instructors

The clinical affiliate supervisors/instructors are available to students whenever they are assigned to a clinical setting. Responsibilities include:

- Provide appropriate clinical supervision.
- Student clinical evaluations.
- Provide orientation to the clinical department.
- Provide feedback to the student.
- Provide feedback to the program director and clinical coordinator.

Responsibilities of the Department/Clinical Coordinator

The Department of Radiologic Sciences/Clinical Coordinator coordinates the daily operations of clinical education. Duties include, but are not limited to:

- Assign clinical education centers.
- Mentor students.
- Supervise students.
- Advise students.
- Review program policies and procedures with clinical affiliate supervisor/instructors/staff.
- Review program handbook with clinical affiliate supervisor/instructors/staff.
- Provide feedback on students’ clinical site evaluations with clinical affiliate supervisor/instructors/staff.
- Review program competency forms and clinical forms with clinical affiliate supervisor/instructors/staff.

Responsibilities of the Student

The responsibilities of the student include:

- Display professional appearance in compliance with the dress code policy.
- Establish harmonious working relationships and earning the respect of the radiologic sciences personnel through a professional and dignified posture and attitude.
- Use all equipment and materials responsibly and safely.
- Embody the highest standards of civility, honesty, and integrity.
- Respect and protecting the privacy, dignity, and individuality of others.
- Observe and assist the clinical staff.
- Attend and participate in all scheduled clinical activities.
- Consult with clinical site supervisors and/or departmental faculty for help with problems.
- Participate in the development of an individualized clinical education plan.
- Maintain an accurate record of clinical examinations/competencies.
- Record the number and types of evaluations required during each academic semester.
- Strive to broaden his/her knowledge and background on clinical subject matter by reading professional literature and attending conferences and seminars.
- Incur all travel costs and expenses.
- Use personal or public transportation to clinical sites.
- Meet with faculty advisor at least once per semester.
Direct and Indirect Supervision Policy

Until the student achieves and documents competency in any given procedure, that procedure must be carried out under the direct supervision of a registered technologist.

Direct Supervision

Direct supervision assures patient safety and proper educational practices. The JRCERT defines direct supervision as student supervision by a qualified radiographer who:

- reviews the procedure in relation to the student’s achievement,
- evaluates the condition of the patient in relation to the student’s knowledge,
- is physically present during the conduct of the procedure, and
- reviews and approves the procedure and/or image.

Students must be directly supervised until competency is achieved.

Indirect Supervision

Indirect supervision promotes patient safety and proper educational practices. The JRCERT defines indirect supervision as that supervision provided by a qualified radiographer immediately available to assist students regardless of the level of student achievement. “Immediately available” is interpreted as the physical presence of a qualified radiographer adjacent to the room or location where a radiographic procedure is being performed. This availability applies to all areas where ionizing radiation equipment is in use on patients.

Repeat of an unsatisfactory image

The presence of a qualified radiographer during the repeat of an unsatisfactory image assures patient safety and proper educational practices. A qualified radiographer must be physically present during the conduct of a repeat image and must approve the student’s procedure prior to re-exposure. A repeat form MUST be submitted for a repeat of an unsatisfactory image.
ADDITIONAL POLICIES
JSHP Policy on Conduct

All students enrolled at Thomas Jefferson University are expected to follow a code of behavior consistent with the high standards of the health professions and to uphold the reputation of the University. In addition, students must comply with the rules and regulations duly established within the School of Health Professions. Deviation constitutes misconduct. This includes, but is not limited to:

- Dishonesty, such as cheating, plagiarism or knowingly furnishing false information to the University.
- Forgery, alteration, or misuse of University documents, such as records, time sheets, evaluation forms or identification.
- Violation of public law.
- Disruption of class or clinical session such as by use of abusive or obscene language or behavior.
- Insubordination (defined as "unwilling to submit to authority; disobedient; rebellious").
- Inappropriate behavior at the clinic affiliate or on University premises.
- Being intoxicated or under the influence of illegal drugs while on clinical assignment or on University premises.
- Vandalism or stealing.
- Disrespectful and negative postings on any social media (for example – Facebook, Twitter, etc.) concerning Jefferson’s Programs, faculty, associated clinical personnel and/or fellow students will be viewed as unprofessional conduct. (Please see APPENDIX G – University Policies and Procedures: Social Media)

Department Policy on Conduct

Students must comply with the rules and regulations of the Department of Radiologic Sciences. Deviation constitutes misconduct. This includes, but is not limited to:

- Sleeping during a clinical assignment.
- Failure to actively participate in clinical education.
- Leaving a clinical assignment or room/area assignment without qualified staff’s permission.
- Failure to notify Clinical Education Affiliate and the Clinical Coordinator of absence or lateness.
- Using a cell phone or other device during clinical hours.
- Using the hospital computer for any reason EXCEPT hospital business.
- Violation of any duly established rules or regulations.

See page 13 for violations of clinical practices and policies.
Family/Friends Working at the Clinical Site Policy

It may be deemed a conflict of interest for a student to be supervised or evaluated by family members or friends employed at his/her clinical site. If this situation arises, the student should inform his/her Program Director/Clinical Coordinator, so that alternative arrangements can be considered.

Family/Friends Classroom, Lab and Clinical Policy

At the Clinical Affiliate
- Family and friends should be discouraged from visiting the clinical site. In particular, unsupervised children are not permitted.
- Family and friends must wait in a public area, and are not permitted in scanning or treatment rooms.
- It is not acceptable for students to entertain their family and friends and neglect their professional duties.
- Students may not ask clinical affiliate staff to baby-sit for them.
- TJU’s liability insurance does not extend to students’ family and friends.

In the RS Department
- Students should discourage their family and friends from visiting the RS department while they (the students) are in class.
- Family and friends are not permitted to attend lectures or laboratory sessions
- Unaccompanied children are not permitted in the RS department.
- Students may not ask faculty or administrative staff to baby-sit for them.
- TJU’s liability insurance does not extend to students’ family and friends.

In the Radiologic laboratories
- Only Radiologic Science students with proper Jefferson ID are permitted in the laboratory.
- The students are not permitted to bring family members or friends in the laboratory at any time.
- Scanning or performing any procedures on family members or friends is not permitted.
- TJU’s liability insurance does not extend to students’ family and friends
- Students are not permitted in the radiography lab without faculty supervision

Failure to comply with the policy may result in disciplinary action up to and including dismissal from the program.
Dress Code Policy

Uniforms
- The dress code for students enrolled in Radiologic Sciences programs consists of navy blue hospital scrubs (tops and bottoms) with the TJU patch sewn on the right sleeve. These scrubs must be purchased through the Jefferson Medical & Health Science Bookstore. A Jefferson ID badge and name tag must be worn properly at all times during clinical rotations.
- A specific navy blue long sleeve jacket may be purchased at the Jefferson Medical & Health Science Bookstore. The purchase of the specific navy blue long sleeve jacket is optional, but only this specific navy blue long sleeve jacket may be worn during the clinical rotation.
- A Thomas Jefferson University (TJU) patch must be sewn on the right shoulder of the jacket. If you do not wear your jacket, you must sew a TJU patch on the right sleeve of your scrub top.
- Uniforms must be neat and free of wrinkles.
- Uniform pant bottoms that are too long must be hemmed so as to not drag on the ground. Dirty or torn pant leg cuffs are unacceptable.
- Name tags and ID badges must be visible to patient and staff and worn at all times.
- Solid white or black, leather footwear, low-top sneakers. Clogs, sandals or open-toed shoes are not permitted. Footwear (including shoestrings) is to be kept clean at all times. Shoestrings should be properly tied.
- Only a plain white or black crew neck t-shirt with short sleeves (sleeve may not extend beyond scrub shirt sleeve) may be worn under the scrub shirt.

Appearance
- Students are required to practice good personal hygiene and present a professional appearance at all times.
- Appropriate and clean attire is required during ALL clinical and didactic sessions.
- Unacceptable apparel includes: short skirts/pants, torn/ripped garments, low-cut tops, lewd and/or suggestive slogans on any clothing
- Keep hair, mustaches and beards neatly trimmed.
- Long hair must be neatly pulled back away from face, neck, and shoulders.
- Fingernails:
  - No artificial nails.
  - No nail polish.
  - Nail length must be less than ¼ inches.
- Keep jewelry to a minimum.
  - Earrings should be of the small post type (no hoops).
  - Only one (1) post earring per ear.
  - Necklaces, bracelets, and rings are not recommended.
- Any body piercing besides the ears should not be evident at clinical site.
- Tongue rings are unacceptable and are not allowed to be worn.
- Wear makeup conservatively.
  - No perfumes, colognes, lotions or powders are to be worn at clinical sites.
- Any visible tattoos must be appropriately covered.
- Chewing gum is not permitted.
- Identification and radiation badges supplied by Thomas Jefferson University and Clinical Affiliate Sites, if provided, must be worn at all times.
Violations of the Dress Code Policy
Violations will typically be addressed through progressive discipline, as follows:
- First violation – written warning and counseling by the Program Director and Clinical Supervisor.
- Second violation – possible suspension
- Third violation – dismissal from the Department.
Depending on the particular circumstances, one or more progressive disciplinary steps may be skipped in instances of particularly serious violations of policies and/or practices, and some egregious violations may result in immediate dismissal from the Department.

Student Work Policy
If a student is employed at any clinical site, he/she must abide by the following policies:
- Students must notify Program officials that they are working at the clinical site
- Students are not permitted to work during scheduled clinical hours.
- Students may not wear student uniforms or Jefferson ID.
- Students may not accrue competencies during non-clinical hours.
- Students may not apply work time to make-up time.
- Students are not covered by Jefferson liability insurance during non-clinical hours.

Cell Phone/Beeper/Electronic Device Policy
Cell phones, beepers, and/or electronic devices must be placed on vibrate during lectures and laboratory sessions. Instructors will not tolerate interruptions from these devices and may ask the student to leave the classroom.

Students may not carry cell phones, beepers, and/or electronic devices with them during clinical hours. These devices must be placed in lockers. In limited circumstances demanding immediate personal phone use, students should seek approval from their supervisor for any incoming communication, whether via call or text message, to ensure they are sanctioned.

Computer Policy
Students may not use computers for personal business during clinical hours. Personal business includes (but is not limited to) internet surfing, shopping, emailing and instant-messaging.

Violations of the Cell Phone/Beeper/Electronic Device Policy and Computer Policy
Violations will typically be addressed through progressive discipline, as follows:
- First violation – written warning and counseling by the Program Director and Clinical Supervisor.
- Second violation – possible suspension
- Third violation – dismissal from the Department.
Depending on the particular circumstances, one or more progressive disciplinary steps may be skipped in instances of particularly serious violations of policies and/or practices, and some egregious violations may result in immediate dismissal from the Department.
Venipuncture Policy

The ARRT clinical competency requirements include performance of venipuncture for injection of contrast agents and radiopharmaceuticals. In order to participate in the performance of venipuncture on patients, students must:

- Have completed all immunizations as required by JSHP.
- Have current CPR certification, as required by the Department of Radiologic Sciences.
- Have health insurance, as required by JSHP.
- Have completed a venipuncture certification course, as required by the Department of Radiologic Sciences.
- Attend and complete institutional venipuncture training, as required by clinical sites.

Health Information Confidentiality Policy: Health Insurance Portability and Accountability Act (HIPAA)

Students must maintain strict confidentiality of all health information of patients at clinical affiliate sites during and after the course of their clinical rotations. Students may neither use nor disclose health information of patients to which they have access, other than as expressly authorized by the clinical affiliate. Students may not record any patient-identifiable information on their personal documents (e.g. clinical logs). Students must be familiar with and adhere to their clinical site HIPAA policy.

Incident Reports at the Clinical Education Center

If a student is injured or involved in an incident during a clinical rotation, he/she must:
1. Report immediately to his/her supervisor and follow departmental protocol.
2. Report immediately to the Clinical Coordinator
3. Present a note to the Clinical Coordinator from the Emergency Room Physician, Student Health Physician, or family physician stating the date the student may resume normal duties.
4. Student must report to Student Health Services as soon as possible (215-955-6835).

If a patient is injured while in the student's care, the student must:
1. Make sure that the patient is safe.
2. Report the incident immediately to the supervisor and follow departmental protocol.
3. Report the incident immediately to the Clinical Coordinator.

Infectious Diseases

Should a student be diagnosed as having an infectious disease, he/she must report such diagnosis to the Clinical Coordinator and the Clinical Affiliate Supervisor. The student may be asked to leave clinical until cleared by his/her physician. The student must present a physician’s note to the Clinical Coordinator stating that the student may resume normal duties.
Medical Leave of Absence

For medical leave of absence, student must proceed through the University Health Services (UHS), which will notify the office of the Dean of its recommendation regarding a medical leave. No medical leaves will be reviewed or received without the endorsement of the Director of UHS.

Medical leaves will be for a period of up to one year. A leave of more than one year’s duration will be granted only under the most extraordinary circumstances and only after review by the office of the Dean. Prior to reentry, which may be applied for prior to the one-year anniversary, appropriate medical screening will be arranged by the Director of University Health Services with consultation, if necessary, to provide assurance of the student’s fitness to return to class.

Pregnancy Policy

If a student becomes pregnant during a component of the program, she may voluntarily inform the Program Director, in writing, of her pregnancy.

Option 1 The student may continue in the program if she chooses, without modifications to any component of the program.

Option 2 The student may take a leave of absence from clinical education, but continue her didactic studies. Clinical assignments will be completed when the student returns.

Option 3 The student may withdraw from the program and reapply in accordance with School policies.

Option 4 The student, in writing, may withdraw her declaration of pregnancy at any time and/or for any reason.

Due to the need for special radiation protection education, counseling by the radiation safety officer (RSO) is available.
University Health Services
Blood and Body Fluid Exposure Protocol
JMC/JSHP Students

During clinical clerkships, students may be exposed to blood and body fluids from the patients they examine and care for. Examples include needle sticks, splashes of body fluids into the eyes, mouth or on to broken skin. These incidents are serious and should be reported.

If a student sustains one of the above injuries while doing a rotation at Jefferson, an accident report should be completed and the student should call or report the accident to University Health Services (UHS) as soon as possible. The source patient’s name, medical record number and attending physician’s name will be required. If the exposure occurs during off hours (after 4:00 PM on weekdays or during the weekends), the student should report to the Emergency Department at Jefferson.

If the exposure is determined to be significant and is reported within 72 hours of occurrence, UHS will test the patient for hepatitis B and C. If the student consents to a baseline HIV test, UHS, according to PA law, has the right to test the source patient even if the patient refuses to consent.

The student will be enrolled in the UHS exposure protocol which includes testing for HIV, hepatitis B surface antibody and hepatitis C antibody at the time of the exposure, and then 3 and 6 months after the incident. HIV testing is only done if the student consents. Testing is done anonymously through a coding system. Results are kept in the student’s chart and not released for any reason unless the student gives specific consent. All expenses of the protocol are covered by UHS except for medications given for the post exposure protocol.

If the student sustains an exposure while doing a rotation at an affiliate, the student should still call or report to UHS for enrollment in our exposure protocol as soon as possible after the exposure. It is not always possible to obtain the proper source patient testing in this circumstance. UHS will coordinate all efforts with the affiliate where possible. In the past, some of the students who have reported an exposure to the affiliate’s Emergency Department as directed by their supervisors have received bills for service. All follow up done in UHS after an exposure is free of charge.
ATTENDANCE REGULATIONS
Didactic/Laboratory Instruction
Each course syllabus details the attendance policy.

Clinical Attendance Records
Time cards provided by the Department are used for documenting clinical hours. Each student must personally sign or clock "in" and "out." Students who have to sign in (i.e. no time clock punch) must write down the time and have the designated staff initial next to the signed time. Time not documented must be made up. Under no circumstances is it permissible to sign-in or out or clock-in or out for another student. Any student found guilty of such an offense is subject to dismissal.

Time Cards
1. Students must use and hand in the time card that is given to them. No other card will be accepted. Students who do not have the original time card will need to make up time that should have been recorded on the original time card.

2. Students are to indicate lateness on the time card by the letter “L”.
   • Time out of clinical up to one hour must be made up the same day in the amount of time missed (up to 60 minutes). For example:
     o If 5 minutes late, make up 5 minutes
     o If 45 minutes late, make up 45 minutes
   • Time out of clinical between 61 minutes and 4 hours will be made up in a half day (full 4 hours) on a different day. This half day will not be added onto an already scheduled clinical day.
   • Time out of clinical over 4 hours will be made up in a full day (full 8 hours).

3. Students are to make note on the time cards for any reason not in clinical. For example, out sick, personal day, holidays, IPE, etc.

4. Students who forget to punch in will be assumed that they were late. Students will need to make up at least 4 hours; unless the clinical supervisor can verify the time the students arrived at their clinical site.

5. Students who forget to punch out will be assumed that they left early. Students will need to make up 4 hours unless the clinical supervisor can verify the time that the students left clinical.
Clinical Education Hours

Total clinical assignments will not exceed 40 hours per week. Assignments on any one day will not exceed 8 hours, unless otherwise requested by the student and approved by the Clinical Coordinator in conjunction with the Clinical Affiliate Supervisor, or if patient care responsibilities dictate otherwise. No student will be permitted to leave a patient during the course of an examination, even if such completion requires remaining on duty beyond the end of the shift.

Students will be assigned a lunch period each day, which they are required to take. The lunch break will be commensurate with the practice of the department and area/rotation assignment. **The lunch break may not be used to make-up or accrue time.** Clinical Affiliate Supervisors may re-schedule students (within an assigned eight hours) to provide complete exposure to the unique learning opportunities in radiologic sciences.

Students will participate in designated procedures during their clinical assignments under the guidance of a supervising technologist in the areas to which they are assigned.

Personal Days

Students are allocated one personal day each semester. This time cannot be taken in half-days. Time off must be taken in full days (8) hours. It is not accruable nor is it transferable. A personal time request form must be submitted to the clinical instructor. The Clinical supervisor and Clinical coordinator/clinical instructor MUST be emailed when a student is out of clinical.

Students **may not** accrue additional personal time during the year.

Absence Policy

Attendance is required for all clinical sessions. If a student will be absent from a clinical assignment, he or she must contact both the Clinical Affiliate Supervisor and Clinical Instructor **prior to** the start of the shift. Three or more consecutive absences require a doctor’s note. Extenuating circumstances will be dealt with on an individual basis. All missed time from assigned clinical rotations MUST be made up by the end of the Program.

If an emergency arises requiring an early departure from the clinical site, the student must notify both the Clinical Affiliate Supervisor and the Clinical Instructor. It is the responsibility of the student to make these calls. Absences must be made up at the discretion of the faculty.
**Punctuality**

Any student who is not in his/her clinical area at the assigned time will be considered late. If a student is to start at 8:00 am, this means that the student is to be in the assigned area (e.g. ED or GEN) at 8:00 am not punching in at 8:00 am. Signing in or clocking in at 8:00 am or after will be considered late. A student who is late three times in one semester will be counted as one day’s absence. Habitual lateness could lead to dismissal from the program.

It is the policy of the Department of Radiologic Sciences that any student who is going to be late must notify both the Clinical Affiliate Supervisor and the Clinical Instructor prior to the start of his/her assigned time. All lost time due to lateness from the clinical area must be made up by the student. Failure to abide by these policies could lead to dismissal from the program.

A student will be advised in writing concerning his/her habitual lateness or violation of the Department of Radiologic Sciences lateness policies by the Clinical Coordinator and/or Program Director.

Disciplinary actions including suspensions from the clinical site or dismissal from the program may be taken against students who persist in habitual lateness or violations of the Departmental of Radiologic Sciences lateness/ attendance policies, after previously having been counseled in writing by the Clinical Coordinator and/or Program Director at an Advisement Conference.

**Make-Up Time**

Arrangements must be made with the Clinical Affiliate Supervisor and approved by the Clinical Coordinator.

The make-up time form must be signed by the clinical supervisor upon fulfillment of the time missed. The form will be submitted to the Clinical Instructor.

All clinical absences must be made up at the Clinical Affiliate where the time was missed, consistent with the room assignments in effect when the absence occurred. **The lunch break may not be used to make-up or accrue time.**
Policy Concerning Death in the Family
Upon notification to the Program Director, students will be allowed a minimum of three (3) days of leave of absence for death in the immediate family. Immediate family members include parents, grandparents, spouse, brother, sister or child. Leaves of absence requested because of the death of someone other than an immediate family member may be granted by special permission.

Hospital Job Actions or Strikes
Whenever a strike or job action occurs at an assigned clinical site, the student must leave the assignment immediately and report to the Clinical Coordinator for further directions. At no time should a student attempt to cross a picket line to enter a Clinical Education Center.

Jury Duty
Being selected for jury duty is a civic responsibility in which the Department encourages students to participate. Please be advised that the School cannot intervene on the student's behalf should a student be summoned for jury duty.
GRIEVANCE POLICIES
Due Process for Student Grievances

For student grievances other than grades or dismissal due to unsafe clinical performance, students are encouraged to address the problem at the point closest to the issue. In schools and/or academic departments, the student is encouraged to attempt to resolve the dispute directly with the faculty or staff member. If dissatisfied with the outcome, the student may meet with the Program Director, then the Department Chair or School Dean, as appropriate, and then with the Assistant Vice President for Student Life, who will attempt to mediate the situation. If the student is still dissatisfied with the outcome, he/she may meet with the Senior Vice President for Academic Affairs or his or her designee. The Senior Vice President is the final authority in hearing student grievances. All parties are encouraged to address the issue promptly in writing (within three [3] class days whenever possible) so that resolution of the grievance should require no more than three weeks.

Records of the grievance are kept by the respective faculty and administrative personnel and do not become part of the student’s permanent record.

The grievances policies can be found in the student handbook and course catalog at: http://www.jefferson.edu/university/health_professions.html
STUDENT ACTIVITIES
Student Activities
Students are encouraged to participate in campus activities, e.g., orientation programs, recruitment functions, social and cultural events, interprofessional activities and Class Night. They have the opportunity to represent the students’ viewpoints on Department, School and University committees. The University and Thomas Jefferson University Hospital sponsor many volunteer and mentoring programs. Professional organizations, Jefferson Alumni Association and the School sponsor many programs that focus on career and professional development.

Honors and Awards
Students are eligible for:
- JRCERT awards for clinical excellence.
- Department award/s
Awards are presented during class night.

Professional Societies
Students are strongly encouraged to participate in professional activities and to seek memberships in national, state and local societies. These organizations sponsor competitions for students and several offer scholarships and educational grants.

Professional Organizations
- American Society of Radiologic Technologists (ASRT)
- Philadelphia Society for Radiologic Technologists (PhilaSRT)

Honor Societies
- Alpha Eta Society
  - Honor society for health professionals
  - [http://www.alphaeta.net](http://www.alphaeta.net)
- Lambda Nu Society
  - Honor society for radiologic and imaging science professionals
  - [http://www.lambdaedu.org](http://www.lambdaedu.org)
STUDENT COUNSELING
Student Personal Counseling Center (SPCC)

The SPCC offers crisis consultation, individual counseling, couples counseling, group therapy, and psychiatric consultation for students.

Common Concerns
There are many concerns that may lead a student to seek counseling:
- Stress or anxiety
- Depressed mood
- Relationship problems
- Difficulties adjusting to school or loneliness
- Personal or family crises
- Difficulties making a career decision or choice
- Academic concerns
- Eating or body image concerns
- Alcohol or drug problems
- Identity issues
- Self-esteem issues
- Dealing with physical illness or disability

Confidentiality
All information shared during counseling is confidential. No one outside the SPCC may have access to the specifics of counseling sessions without the prior written permission of the student, except in situations where there is a threat or danger to life.

What to Expect
All Thomas Jefferson University students are eligible for three visits without charge at the SPCC. Students interested in making an appointment should call 215-503-2817 and leave a confidential voicemail with their name and contact number. A SPCC counselor will conduct a brief and confidential telephone screen to gather some basic information that will allow for a timely matching of services, based upon a student’s individual needs.

The SPCC staff encourages students to come in and talk, even if they are not sure that counseling is what they need. During the initial meeting, students will develop a course of action with their counselor, which may include continuing therapy on campus or receiving a referral to an off-campus provider. Some students may resolve their concerns during the initial 3 free sessions and decide that no further sessions are required. Some students decide to see a SPCC counselor on an ongoing basis.

For students who desire or need ongoing support, SPCC counselors are in network with a limited number of insurance providers. Students may call the SPCC to receive further details and information.

Making an Appointment
Students can schedule an appointment to see a counselor by calling the SPCC at 215-503-2817. Students should leave their name and contact information on the confidential voicemail and a SPCC counselor will return their call.

Location and Hours
The SPCC is located at 833 Chestnut Street, Suite 210. Hours are Monday –Friday, 9:00 a.m.—5:00 p.m. Early morning and evening appointments are sometimes available.
Urgent Situations
SPCC counselors and psychiatrists are available for in-person crisis intervention between 9:00 a.m. and 5:00 p.m. After hours, all students experiencing an emergency should call 911 or go to the nearest emergency room. On-campus students should go to the Thomas Jefferson University Hospital Emergency Room, located in the Main Hospital Building at 10th and Sansom (215-955-6060) and ask to speak to the Psychiatry Resident On-Call. Dr. Nobleza is also available after hours for urgent phone consultation for students by calling the SPCC phone number at 215-503-2817 and then dialing ‘1’ and then ‘0.’

FAQ’s about the Student Personal Counseling Center at Thomas Jefferson University

What is the Student Personal Counseling Center?
The Student Personal Counseling Center (SPCC) offers psychological & psychiatric services to the greater student population of Thomas Jefferson University.

Where is the Counseling Center located?
The SPCC is located at 833 Chestnut Street, Suite 210.

How do I know if I can use the Counseling Center?
All Thomas Jefferson University students are eligible for services at the SPCC, and the first three visits are without charge.

Why would I use the Counseling Center?
Students can come to the SPCC for any number of reasons, including relationship difficulties, the stress of academic problems, depression, anxiety, and so on. If you aren’t sure what you need, just call us and we’ll do our best to help address your concerns.

How do I make an appointment?
Call the SPCC at 215-503-2817. If we don’t pick up and it’s not an emergency, leave your name, school/program and contact information on the confidential voicemail. An SPCC counselor will return your call, typically within a day.

What should I do in an emergency?
Between the hours of 9:00 a.m. and 5:00 p.m., SPCC counselors and psychiatrists are available on-site for in-person crisis intervention. After 5:00 p.m., students in crisis should call 911 or go to the nearest emergency room. For students who are on campus, the nearest emergency room is: Thomas Jefferson University Hospital Emergency Room, Main Hospital Building, 10th & Sansom.

What about confidentiality?
All information shared during counseling sessions is strictly confidential. No one outside the Counseling Center may have access to the information shared in counseling sessions without written permission from the student except in cases of a medical emergency when a student is at imminent risk to him/herself or others.
Appendix A

Department of Radiologic Sciences
Jefferson School of Health Professions
Thomas Jefferson University

Technical Standards for Programs in the Department of Radiologic Sciences

Physical Demands
Clinical and laboratory assignments for the Radiography program require certain physical demands that are the minimum technical standards for admission. Listed below are the technical standards that all students must meet in order to enter and complete the Radiography program.

The prospective student must be able to routinely:
- Bend, stoop, reach and stretch the arms and body, often utilizing awkward and non-ergonomically correct positions
- Assist patient on/off x-ray tables
- Lift, transfer and/or move patients from wheelchair/stretcher to x-ray tables
- Work standing or walking 80% of the time
- Radiographers must be able to manipulate heavy radiography equipment, such as for portable examinations, move patient beds, and must be able to assist patients that are unable to assist themselves.
- Have sufficient auditory perception to receive verbal communication from patients and members of the healthcare team.
- Sufficient visual acuity to view grayscale on a computer monitor and read written reports, chart orders, etc.
- Interact compassionately with the sick or injured
- Perform proper steps in a procedure in an organized manner and in a specific sequence
- Communicate effectively with patients and other health care providers. This includes verbal, reading and writing skills.
- Physical and mental abilities to handle moderate and frequent exposure to infectious agents (blood, urine) and moderate and limited exposure to ionizing radiation.
- Carry 12-30 pounds (lead apron) while working
Appendix B

Patients’ Bill of Rights

We consider you a partner in your hospital care. When you are well informed, participate in treatment decisions, and communicate openly with your doctor and other health professionals, you help make your care as effective as possible. This hospital encourages respect for the personal preferences and values of each individual.

While you are a patient in the hospital, your rights include the following:

• You have the right to considerate and respectful care.
• You have the right to be well informed about your illness, possible treatments, and likely outcome and to discuss this information with you doctor. You have the right to know the names and roles of people treating you.
• You have the right to consent to or refuse a treatment, as permitted by law, throughout your hospital. If you refuse a recommended treatment, you will receive other needed and available care.
• You have the right to have an advance directive, such as a living will or health care proxy. These documents express your choices about you future care or name someone to decide if you cannot speak for yourself. If you have a written advance directive, you should provide a copy to your family, and your doctor.
• You have the right to privacy. The hospital, you doctor, and others caring for you will protect your privacy as much as possible.
• You have the right to expect that treatment records are confidential unless you have given permission to release information or reporting is required or permitted by law. When the hospital releases records to others, such as insurers, it emphasizes that the records are confidential.
• You have the right to review you medical records and to have the information explained except when restricted by law.
• You have the right to expect that the hospital will give you necessary health hospital services to the best of its ability. Treatment, referral, or transfer may be recommended. If transfer is recommended or requested, you will be informed of risks, benefits, and alternatives. You will not be transferred until the other institution agrees to accept you.
• You have the right to know if this hospital has relationships with outside parties that may influence you treatment and care. These relationships may be with educational institutions, other health care providers, or insurers.
• You have the right to consent or decline to take part in research affecting your care. If you choose not to take part, you will receive the most effective care the hospital otherwise provides.
• You have the right to be told of realistic care alternatives when hospital care is no longer appropriate.
• You have the right to know about hospital rules that affect you and your treatment and about charges and payment methods. You have the right to know about hospital resources, such as patient representatives or ethic committees that can help you resolve problems and questions about your hospital stay and care.

• You have responsibilities as a patient. You are responsible for providing information about your health, including past illnesses, hospital stays, and use of medicine. You are responsible for asking questions when you do not understand information or instructions. If you believe you can't follow through with your treatment, you are responsible for telling your doctor.

• This hospital works to provide care efficiently and fairly to all patients and the community. You and your visitors are responsible for being considerate of the needs of other patients, staff, and the hospital. You are responsible for providing information for insurance and for working with the hospital to arrange payment, when needed.

• Your health depends not just on your hospital care but, in the long term, on the decisions you make in your daily life. You are responsible for recognizing the effect of life-style on your personal health.

• A hospital serves many purposes. Hospitals work to improve people's health; treat people with injury and disease; educate doctors, health professionals, patients, and community members; and improve understanding of health and disease. In carrying out these activities, this institution works to respect your values and dignity.
Appendix C

ASRT Code of Ethics

1. The radiologic technologist conducts himself/herself in a professional manner, responds to patient needs and supports colleagues and associates in providing quality patient care.

2. The radiologic technologist acts to advance the principal objective of the profession to provide services to humanity with full respect for the dignity of mankind.

3. The radiologic technologist delivers patient care and service unrestricted by concerns of personal attributes or the nature of the disease or illness, and without discrimination, on the basis of sex, race, creed, religion or socioeconomic status.

4. The radiologic technologist practices technology founded upon theoretical knowledge and concepts, uses equipment and accessories consistent with the purpose for which they have been designed, and employs procedures and techniques appropriately.

5. The radiologic technologist exercises care, discretion and judgment, assumes responsibility for professional decisions; and acts in the best interest of the patient.

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

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

8. The radiologic technologist practices ethical conduct appropriate to the profession and protects the patient’s right to quality radiologic technology care.

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

10. The radiologic technologist continually strives to improve knowledge and skills by participating in educational and professional activities, sharing knowledge with colleagues and investigating new and innovative aspects of professional practice.

Appendix D

Radiation Protection Practices

1. A student is required to exercise sound radiation protection practices at all times. At no time may a student participate in a procedure utilizing unsafe protection practices.

2. A student should not hold patients while exposures are occurring.

3. A student will always wear radiation monitors in the Clinical Affiliate Centers and in all laboratory classes.

4. A student will leave the radiographic rooms while a radiographic exposure is being made unless the proper radiation protection attire is being worn or student is behind appropriate shield.

5. The radiation dosimeter should be worn outside on a lead apron at the collar level. The radiation dosimeter should be worn at torso level, if not in fluoroscopy.

6. A student will always remove personal radiation monitors while having diagnostic medical or dental radiographs taken.

7. A student will always wear lead aprons when doing portable radiography/fluoro.

8. Radiation protection of the patient and others within the examination room is the student's responsibility when he/she is performing the study.

9. The student must be aware of and enforce the policies and procedures of patient shielding, in keeping with national and international radiation protection standards.

10. A student may not have his/her self x-rayed by a staff radiographer without an x-ray prescription for the exam by a physician. The student will be dismissed from the program for this violation.*

11. A student may not x-ray staff at their request without a prescription for the exam by a physician. The student will be dismissed from the program for this violation.*

12. Students who deliberately expose their radiation dosimetry badge will be suspended and/or dismissed from the program.

*(PA Code, Title 25. Environmental Protection. Department of Environmental Protection, Chapter 211.11.)
Appendix E

Personal Radiation Monitoring

1. Each student is responsible for wearing properly dated radiation dosimeter at the Clinical Sites and in laboratory classes. No student will be allowed in clinical or the laboratory class without properly dated radiation dosimeter appropriately worn.

2. Any student who does not have the properly dated radiation dosimeter will be suspended from his or her clinical area until he/she has the properly dated radiation monitor. Time lost from the clinical area must be made up.

3. Each student is responsible for exchanging the radiation dosimeter on the designated day of each semester. Badges are exchanged by the Clinical Instructor, Radiography Program.

4. Dosimeter loss or accident must be reported immediately to the Clinical Instructor.

5. Student is responsible for submitting their dosimeter, TLD monitoring badge, on time.
   - A $20.00 cash fee will be collected for all unreturned or late TLDs

6. The Clinical Instructor receives radiation dose reports from the RSO, and informs each student of his/her exposures.

7. Radiation exposures for students must not exceed the maximum permissible dosage to occupationally exposed persons as established by state and federal agencies for radiologic health.

   The Office of Radiation Safety maintains a history of each individual’s exposure and anyone may examine his/her own radiation exposure record, or obtain a copy by sending a signed, written request to the Radiation Safety Office.

8. “High” Radiation Dosimeter Readings
   High or unusual radiation dosimeter readings are investigated by Thomas Jefferson University’s Radiation Safety Officer. Readings above designated “Investigation Levels” are evaluated with regard to workload and type of duties performed by the dosimeter wearer; adherence to proper work practices; proper care and use of the dosimeter; and possible exposure of the dosimeter to “non-occupational” radiation sources. In cases where it appears that the high readings may be due to inadequate safe work practices or improper use or storage of the dosimeter(s), the wearer is counseled by Radiation Safety Officer and/or the wearer’s supervisor(s).

9. On completion of the clinical rotation students must return the radiation dosimeters to the Clinical Instructor.
Appendix F
Dosimetry Policy

TJUH DEPARTMENT POLICIES & PROCEDURES
Policy No: RSO-053
Effective Date: 11/02/2000
Revision Date: 08/07/2014
DEPARTMENT NAME: Radiation Safety

Category: Operations - Programmatic
Title: Radiation Dosimeter Use
Policy Owner: John C. Keklak
Contributors/Contributing Departments:

PURPOSE
To assess employee occupational radiation dose from ionizing radiation sources external to the body.

POLICY
Radiation dosimeters ("individual monitoring devices" as defined in 10 CFR 20.1203) are to be issued for the purpose of assessing occupational radiation dose as follows:

1. Radiation dosimeters are to be issued to anyone (employee/student/volunteer) whose assigned duties involve potential exposure to ionizing radiation and whom the Radiation Safety Officer has determined meets the requirements for individual monitoring devices as described in applicable federal or state regulations.

2. Radiation dosimeters may also be required for individuals in specific work areas or performing designated tasks, even if not required by state or federal regulations.

3. Radiation dosimeters may be offered as an option to individuals in areas where use of individual monitoring devices is not required by regulations, but where employees may have concerns about their level of radiation exposure. Optional use must be approved by the appropriate Department and/or Division Head and the RSO.

4. Radiation dosimeter readings are routinely reviewed by Radiation Safety Staff and appropriate follow-up action taken as may be indicated by the results.

Definitions:
For the purposes of this Policy and related procedures, the following terms are defined.

“ALARA Investigation Levels” are pre-set dosimeter reading values that trigger formal reviews by Radiation Safety Staff. [ALARA stands for “as low as reasonably achievable” and is a radiation protection philosophy whereby the objective is to keep radiation doses to individuals and populations as far below (maximum) regulatory limits “as is reasonably achievable”.


“ALARA Investigation Level 1” means total radiation doses in any single calendar quarter (e.g., January 1 to March 31) above the following:
- Effective Dose Equivalent (EDE) [“whole body”] above 125 mrem
- Lens Dose Equivalent (LDE) above 375 mrem
- Shallow (“Skin”) Dose Equivalent (SDE) above 1250 mrem
- Extremity Dose reading above 1250 mrem

“ALARA Investigation Level 2” means total radiation doses in any single calendar quarter (e.g., January 1 to March 31) above the following:
- Effective Dose Equivalent (EDE) [“whole body”] above 375 mrem
- Lens Dose Equivalent (LDE) above 1125 mrem
- Shallow (“Skin”) Dose Equivalent (SDE) above 3750 mrem
- Extremity Dose reading above 3750 mrem

“Dose Equivalent” means the absorbed radiation dose to a human being, modified by appropriate radiation weighting factors, depending on the type of ionizing radiation source, or tissue/organ weighting factors (as may be necessary).

“Effective Dose Equivalent” (for the purposes of this policy) means the deep dose equivalent (tissue dose from external radiation sources at 1 cm below the surface of the skin) as measured by a radiation dosimeter, adjusted where appropriate by mathematical formulas to take into account the wearing of protective lead garments in the presence of diagnostic energy x-ray radiation.

“Extremity Dose” means the dose equivalent (tissue dose from external radiation sources) to the hands or forearms (below the elbows), or to the feet or lower legs (below the knees) determined for a tissue depth of 0.007 cm, as measured by a radiation dosimeter.

“Lens Dose Equivalent” means the dose equivalent (tissue dose from external radiation sources) determined for a tissue depth of 0.3 cm, as measured by a radiation dosimeter.

“Millirem (mrem)” is a unit of measure for any “dose equivalent” terms.

“Radiation dosimeters (individual monitoring devices”) means devices designed to be worn by a single individual for the assessment of dose equivalent such as film badges, thermoluminescence dosimeters (TLDs), pocket ionization chambers, etc.

“Shallow (“Skin”) Dose Equivalent” means the dose equivalent (tissue dose from external radiation sources) determined for a tissue depth of 0.007 cm, as measured by a radiation dosimeter.

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Department Name: Radiation Safety

Procedures:

[The following procedures and/or requirements have been approved by the Jefferson Radiation Safety Committee and instituted by the Radiation Safety Officer under his authority as established by federal and state regulations and institutional policy.]

Dosimeter Wearer Responsibilities

1. Regardless of whether the dosimeters are issued as required or optional, any employee who is issued any dosimeter is responsible for:

   a. Wearing the dosimeter while on duty in those areas where there is a potential for radiation exposure.

   b. Exchanging worn dosimeters for new ones on the first workday of each wear period (e.g., first day of month or calendar quarter, depending on assigned wear period), unless the new replacement dosimeters' arrival has been delayed, in which case the exchange may be made as soon as possible after the arrival of the new dosimeters).

   c. Taking proper care of dosimeters, as described by Office of Radiation Safety instructions, to avoid damaging or contaminating the dosimeters.

   d. Not storing dosimeters near radiation sources when not being worn.

   e. Not wearing dosimeters when being exposed to radiation sources for personal medical purposes (Notify Radiation Safety if this inadvertently occurs or you are administered a radiopharmaceutical).

   f. Notifying Radiation Safety immediately whenever dosimeters are lost, accidentally damaged, name change is required, place of work has changed, or any reason why accidental exposure may have occurred (i.e., dosimeter accidentally left near source when not worn).

   g. Returning all dosimeters and holders upon termination of duties with/near radiation sources.

   h. Notifying Radiation Safety/dosimeter distributor of pending employment termination.

   i. Otherwise wearing assigned dosimeters in accordance with any other Office of Radiation Safety instructions.

2. Failure to comply with guidelines and responsibilities listed above may result in forfeiture of (optional) dosimeters and/or disciplinary action.

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3. Any inquiries related to dosimeter use should be directed to the individual’s supervisor, dosimeter distributor, or Radiation Safety.

**Dosimeter Issuance:**
Dosimeters are issued and distributed in accordance with internal Radiation Safety Department Procedure RSO-041: “Badging and Distribution”

**Review of Dosimetry Readings**

1) Dosimetry reports from Jefferson’s dosimetry provider (currently Mirion Technologies) are to be reviewed by Radiation Safety staff within 5 business days of receipt.

2) The purposes of such reviews are to:
   a) Determine if the reading is valid (accurately represents occupational radiation dose)
   b) Identify possible opportunities for intervention to reduce future dose

3) The reviewer is to examine readings for the following:
   a) Individual readings substantially above others doing similar work
   b) Individual readings substantially above the wearer’s past recorded readings
   c) Evidence of misuse or damage to the dosimeter
   d) Evidence of radioactive contamination to the dosimeter
      e) Calendar quarter total dose readings above “ALARA Investigation Levels” (see definitions)
      f) Evidence that the wrong analysis algorithms were applied by the vendor in generating the reported reading
      g) Evidence that the dosimeter had not been properly designated (e.g., “whole body” instead of “collar w/ EDE”)
      h) Any other contributing factor as may be identified in the vendor’s report notes.

4) The reviewer is to look for possible causes for high or unusual readings including:
   a) Badges not being properly worn (wrong location, wrong orientation, worn outside of holder, etc.)
   b) Sub-optimal work practices by the wearer
      c) Dose to the dosimeter while not being worn (dosimeter left in room during procedures, dose stored near a radiation source or otherwise in a high background area, etc.)
   d) Dose due to the wearer undergoing a medical procedure involving radiation (e.g., wearer administered a Nuclear Medicine radiopharmaceutical as a patient)
   e) Dosimeter exposed to unusual environmental conditions (e.g., excessive heat)
   f) Any other potential cause

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5) Regarding the review/investigation process:
   a) Reviews/investigations may require personal contact with the wearer and/or wearer’s supervisor in order to perform an evaluation as per the preceding item 4.
   b) All total readings above “ALARA Investigation Levels” are to be performed and documented. “Level 2” investigations should include direct contact with the wearer and evaluation of work practices where feasible, unless the readings are consistent with an historical pattern previously determined to be reasonable for the workload and practices employed.
   c) All ALARA Level Investigations are to be documented.
   d) Summary reports of readings above ALARA Investigation Levels are reported to the Radiation Safety Committee at its regular quarterly meetings.

6) Readings for dosimeters issued to specifically assess radiation dose to embryo/fetus of a pregnant individual are to be closely scrutinized with regard to cumulative dose being acquired through the gestation period, in case intervention (e.g., job reassignment) is necessary to assure that applicable dose limits are not exceeded.

Dose History Adjustments:

1) Readings determined to be due to non-occupational radiation sources, or to be inaccurate due to some identifiable cause may be adjusted.
2) Adjustments to the wearer’s occupational dose history are made after review by the Radiation Safety Officer by notifying the dosimetry vendor in writing, in accordance with the vendor’s procedures.

Reports to Wearers:

1. Dosimeter wearers will be notified of radiation doses as obtained as per the criteria specified in regulations contained in 10 CFR 19 or any other applicable state or federal regulation.

2. Individuals may be notified if their cumulative readings in any calendar quarter exceed pre-established ‘investigation levels’, or if any unusual or apparently ‘high’ dosimeter reading(s) are identified by Radiation Safety personnel.

3. Regular dose reports [excised of personal information other than dosimeter wearer id number] are provided to the dosimeter distribution group distributor for availability to wearers.

4. Individuals may also obtain their dosimeter results by making proper request to the Radiation Safety Department. Such requests generally are required to be

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Confidentiality:

1. Individual radiation dose readings are considered as protected information and access to this information is limited to Radiation Safety personnel, supervisors, program directors, management personnel, members of the Radiation Safety Committee, regulatory inspectors, or others (with RSO approval) with a legitimate need-to-know.

2. Release of individual dose information in any circumstances is limited to the minimum necessary.

3. Any other personal information obtained by the Radiation Safety Department in the administration of the dosimeter program is treated as confidential.

Attachment(s): na

References and Citations:

Internal Radiation Safety Department Procedure RSO-041 “Badging and Distribution”

[Copies of the above references may be obtained by contacting the Office of Radiation Safety, 215-955-7813.]

Original Issue Date: 11/01/2000
Revision Date(s): 07/31/2012; 08/07/2014
Review Date(s): 11/08/06, 05/16/2011, 07/31/2012, 7/01/14; 08/07/2014
Responsibility for maintenance of policy: John C. Keklak

[Signature on File]

Departmental Policy Template/January 2010
Approved by:

_John C.Keklak

Department Director

Thomas Jefferson University Hospitals, Inc.
Appendix G

University Policies and Procedures: Social Media

Policy No: 102.43
Effective Date: 3/25/2011

UNIVERSITY POLICIES AND PROCEDURES

<table>
<thead>
<tr>
<th>Category:</th>
<th>Administration</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title:</td>
<td>SOCIAL MEDIA</td>
</tr>
<tr>
<td>Applicability</td>
<td>Thomas Jefferson University, Jefferson University Physicians</td>
</tr>
</tbody>
</table>

PURPOSE and POLICY

Thomas Jefferson University and its affiliated entities (“Jefferson”) respects the rights of its students, faculty, staff, employees, contractors, consultants, temporary employees, guests, volunteers and other members of the Jefferson community (“Jefferson Users”) to use social networking sites (e.g., Face Book, My Space, and You Tube), personal Web sites, Weblogs, and Wikis such as Wikipedia and any other site where text can be posted (“Social Media”).

Use of Jefferson owned or provided computer hardware, software and other equipment which support and facilitate voice mail, electronic mail and access to the Internet (“Electronic Communications”) are the property of Jefferson. Accordingly, Jefferson Users must adhere to the Electronic Communications and Information Policy, Number 102.27, when using Electronic Communications to post text on social networking sites.

If a Jefferson User chooses to identify himself or herself as an employee/student/faculty/guest/volunteer/temporary employee/or other member of the Jefferson community when using Social Media for personal use, others may view the Jefferson User as a representative or spokesperson of Jefferson. In light of this possibility, Jefferson recommends that Jefferson Users not refer to Jefferson.

If the use of Social Media by a Jefferson User relates to the business/mission of Jefferson, this Policy requires the Jefferson User to observe the following guidelines.

- To create Social Media related to the business/mission of Jefferson, please obtain prior written approval from your Dean, JUP Executive Director, Hospital Senior Vice President, or Kimmel Cancer Center Director. Please be aware that this type of Social Media is not an open forum and postings must be related to Jefferson’s mission. Assign one or more administrator(s) who are the only person(s) in charge of reviewing and approving content to be posted to the Social Media. To obtain approval for use of the
Jefferson name or logo on Social Media, follow the Trademark Policy and include the name(s) of the administrator(s) for the Social Media on the Trademark Request Form.

• Jefferson Users should be respectful in all communications related to or referencing Jefferson and its community. Be clear in any references to Jefferson that you are speaking for yourself and not on behalf of Jefferson, unless it is Jefferson created Social Media.

• If not otherwise publicly available, obtain the prior written approval of others of whom you wish to cite reference and/or post a picture.

• Jefferson Users should discuss internal matters directly with a manager, Human Resources, or through other appropriate, internal channels, such as the University Omnibudsman, or Office of Student Affairs.

• Remember that all Jefferson Policies apply to the use of Social Media. Jefferson Users should review the appropriate Code of Conduct, Student Handbook, Operating Policy, Hospital Procedure and/or School/College Bylaw to ensure the use of Social Media is compliant.

• Remember that all applicable federal, state or local laws, such as (but not limited to) patient privacy laws or copyright laws, apply to the use of Social Media.

• Jefferson Users may not post or disclose confidential or other proprietary information of Jefferson.

• Jefferson Users who are contacted by a Social Media page/channel/site for comments or authorization to use Jefferson owned or controlled material must: (i) contact Public Relations at 5-6300, (ii) follow Public Relations’ policies and (iii) secure the necessary approvals for comments and/or authorization to use Jefferson owned or controlled material.

ENFORCEMENT

Any Jefferson User found to have violated this Policy may be subject to appropriate disciplinary action, up to and including dismissal.

MODIFICATION OF POLICY

Jefferson reserves the right to revise this Policy at any time.

INTERPRETATION AND ADMINISTRATION

The Office of University Counsel shall be responsible for the interpretation of this Policy and the Office of the University President and the Office of the Director of Communications shall be responsible for the administration of this Policy.

Original Issue Date: 3/24/2011
Appendix H

Accreditation Standards

Can be accessed at the following address:

**JRCERT**
20 N. Wacker Drive, Suite 2850
Chicago, IL 60606-3182
Phone: (312) 704-5300
Fax: (312) 704-5304
http://www.jrcert.org/

**JRCNMT**
2000 W. Danforth Rd. STE 130, #203
Edmond, OK 73003
Phone: (405) 285-0546
Fax: (405) 285-0579
http://www.jrcnmt.org/

**JRCDMS**
6021 University Boulevard, Suite 500
Ellicott City, MD 21043
Phone: (443) 973-3251
Fax: (866)738-3444
http://www.jrcdms.org/
## Appendix I

### Radiography Program Calendar

#### 2014-2015

<table>
<thead>
<tr>
<th>Fall 2014</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>September 2\textsuperscript{nd}</strong></td>
</tr>
<tr>
<td><strong>September 3\textsuperscript{rd}</strong></td>
</tr>
<tr>
<td><strong>September 17\textsuperscript{th}</strong></td>
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<tr>
<td><strong>September 23\textsuperscript{rd}</strong></td>
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<tr>
<td><strong>October 8\textsuperscript{th}</strong></td>
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<tr>
<td><strong>October 22\textsuperscript{nd}</strong></td>
</tr>
<tr>
<td><strong>November 7\textsuperscript{th}</strong></td>
</tr>
<tr>
<td><strong>November 10\textsuperscript{th} – January 5\textsuperscript{th}</strong></td>
</tr>
<tr>
<td><strong>November 26\textsuperscript{th}</strong></td>
</tr>
<tr>
<td><strong>November 29\textsuperscript{th}</strong></td>
</tr>
<tr>
<td><strong>December 1\textsuperscript{st}</strong></td>
</tr>
<tr>
<td><strong>December 12\textsuperscript{th}</strong></td>
</tr>
<tr>
<td><strong>December 13\textsuperscript{th} - 18\textsuperscript{th}</strong></td>
</tr>
</tbody>
</table>

Please note: Christmas vacation DOES NOT follow the academic calendar.

Christmas vacation begins December 19\textsuperscript{th}, 2014 and ends January 2\textsuperscript{nd}, 2015.

Clinical rotations begin Monday January 5\textsuperscript{th}, 2015.
### Spring 2015

<table>
<thead>
<tr>
<th>Date</th>
<th>Day</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>January 5th</td>
<td>Monday</td>
<td>Radiography clinical rotations resume</td>
</tr>
<tr>
<td>January 12th</td>
<td>Monday</td>
<td>Spring classes begin</td>
</tr>
<tr>
<td>January 26th</td>
<td>Monday</td>
<td>Drop/Add Period ends</td>
</tr>
<tr>
<td>January 30th</td>
<td>Friday</td>
<td>Last date to remove an “I” grade from previous term</td>
</tr>
<tr>
<td>February 27th</td>
<td>Friday</td>
<td>Last date to withdraw with a grade of “W”</td>
</tr>
<tr>
<td>March 2nd</td>
<td>Friday</td>
<td>Spring recess begins</td>
</tr>
<tr>
<td>March 9th</td>
<td>Friday</td>
<td>Spring recess ends/ classes resume</td>
</tr>
<tr>
<td>March 23rd - May 12th</td>
<td>Monday</td>
<td>On-line Registration for Summer/Fall Semester begins (anticipated)</td>
</tr>
<tr>
<td>May 1st</td>
<td>Friday</td>
<td>Classes end</td>
</tr>
<tr>
<td>May 4th - 9th</td>
<td>Monday-Saturday</td>
<td>Final exams</td>
</tr>
</tbody>
</table>

Please note:
Spring clinical rotations begin Monday January 5th, 2015.
Summer clinical rotations begin May 11th, 2015.
This does not follow the academic calendar.
<table>
<thead>
<tr>
<th>Date</th>
<th>Day</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>May 11th</td>
<td>Monday</td>
<td>Radiography clinical rotations resume</td>
</tr>
<tr>
<td>May 18th</td>
<td>Monday</td>
<td>Summer classes begin</td>
</tr>
<tr>
<td>May 25th</td>
<td>Monday</td>
<td>Memorial Day/no classes</td>
</tr>
<tr>
<td>May 26th</td>
<td>Monday</td>
<td>Drop/Add Period ends</td>
</tr>
<tr>
<td>June 2nd</td>
<td>Tuesday</td>
<td>Last date to withdraw with a grade of “W”</td>
</tr>
<tr>
<td>June 15th</td>
<td>Monday</td>
<td>Last date to remove an “I” grade from previous term</td>
</tr>
<tr>
<td>July 4th</td>
<td>Saturday</td>
<td>Independence Day</td>
</tr>
<tr>
<td>August 21st</td>
<td>Friday</td>
<td>Classes end</td>
</tr>
<tr>
<td>August 24th-25th</td>
<td>Monday-Tuesday</td>
<td>Final exams</td>
</tr>
<tr>
<td><strong>August 26th</strong></td>
<td>Wednesday</td>
<td>Radiography clinical rotations resume**</td>
</tr>
<tr>
<td>August 28th</td>
<td>Friday</td>
<td>Radiography program officially ends</td>
</tr>
</tbody>
</table>

Please note:
Summer clinical rotations begin May 11th, 2015.
This does not follow the academic calendar.
**Students who successfully complete ALL clinical and didactic education assignments may complete the program on Wednesday August 26th, 2015**
Emergency Procedures

NUMBERS TO KNOW!

Emergency (from any campus phone).............. 811
Emergency (non campus phone) .... 215-955-8888
Personal Counseling Center... 215-503-2817
Security Confidential .............. 215-955-5678
Non-Emergency Services .... 215-955-8888
Security Investigations........... 215-955-8175
Security Administration........ 215-955-6182
Security Escort Service ...... 215-955-8888

EMERGENCY LOCATIONS

Building Area Of Refuge
A location in a building designed to hold occupants in the event of a fire or other emergency in the building when evacuation is not possible.

Recommended Relocation Site
Designated building away from the effected area.

Rally Point
The initial gathering point upon exiting a building.

This Building’s Shelter Area
Area within the building where occupants can go in order to escape from exterior hazards or other outside emergency.

WHAT TO DO...

Fire
- R – Rescue or remove anyone who may be in immediate danger.
- A – Alarm: activate the nearest fire alarm pull station, dial 811, report Code Red, and give the location of the fire.
- C – Confine or contain the fire and close doors.
- E – Evacuate: know the location of all fire exits should an evacuation become necessary.
- Extinguish: Use the proper fire extinguisher to extinguish or control a fire.
- Do not enter the building until authorized to do so by emergency personnel.

Building Evacuation Procedures
- When the fire alarm is activated, evacuation is mandatory.
- DO NOT use elevators.
- Take personal belongings (ID, keys, purses, wallets, etc.) and dress appropriately for the weather.
- Upon exiting, proceed to your building’s rally point to begin the accountability process.

Shelter-in-Place
- Purpose: To shelter occupants inside the building in the event of a hazardous/biological material or other emergency incident outside the building.
- When notified, go inside the nearest building.
- Close all windows and doors.
- Report to the building’s shelter area.

Suspicious Packages
Any package found or received that arouses concern.
- Do not touch or disturb the object or package.
- Isolate the package and evacuate the immediate area.
- Call the emergency phone number.
- Notify your Building Administrator.

Suspicious Behavior
- Do not physically confront the person exhibiting the behavior.
- Do not let anyone into a locked room/building.
- Do not block a person’s access to an exit.
- Call the emergency phone number above immediately.

Bomb Threat
- Remain calm.
- Get as much information as possible from the threatening caller.
- Call the emergency phone number above.
- Follow the instructions of emergency personnel.

Active Shooter/
Lock Down
- If possible, exit the building immediately and call the emergency phone number above.
- If you cannot exit, clear the hallway immediately and/or remain behind closed doors in a locked or barricaded room, if possible, and stay away from all windows. Remain calm and quietly call the emergency phone number above.
- Evacuate the room only when authorities have arrived and instructed you to do so.
- DO NOT leave or unlock the door to “see what is happening.”
- DO NOT attempt to confront or apprehend the shooter, except as a last resort.
- Upon exiting, proceed to your building primary relocation site and begin your accountability process.

Register to Receive Emergency Alerts or update your information
visit http://jefferson.edu/jeffalert
EMERGENCY LOCATIONS

Jefferson University Hospital—10th and Sansom
(215) 955-6000
Pennsylvania Hospital—9th and Spruce (215) 829-3000
Hall Mercer Crisis Response Center—8th and Spruce
(215) 829-5433
Department of Behavioral Health Emergency Mobile
Team—(215) 685-6440

UNIVERSITY SERVICES

Housing & Residence Life—(215) 955-8913
Financial Aid—(215) 955-2867
Career Development Center—(215) 503-5805
Office of International Affairs—(215) 503-4335

Campus Security: 811 or (215) 955-8888  Anonymous TIP LINE: (215) 955-5678
Philadelphia Police Non-Emergency Number: 311

Women Organized Against Rape (WOAR) 24/7 Hotline—(215) 985-3333

GRADUATE SCHOOL OF BIOMEDICAL SCIENCES

Academic Support: Eleanor Gorman (215-503-5799)
Student Affairs: Gerald Grunwald, PhD (215-503-8982) Primary
Lisa Kozlowski, PhD (215-503-5750) Secondary

SCHOOL OF NURSING

Academic Support: Jen Fogarty (215-503-2787)
Student Affairs: Maureen Revaitis MSN, RNC-NIC (215-503-4214)

SCHOOL OF HEALTH PROFESSIONS

Academic Support: Jen Fogarty (215-503-2787)
Student Affairs: Debbie Zelnick MS, OTR/L (215-503-8012)

SCHOOL OF PHARMACY

Academic Support: Jen Fogarty (215-503-2787)
Student Affairs: Mary Hess, PharmD, FASHP, FCC (215-503-6448)

MEDICAL COLLEGE

Academic Support: Karen Glaser, PhD (215-955-0704)
Student Affairs: Charlie Pohl, MD (215-503-6988)

SCHOOL OF POPULATION HEALTH

Academic Support: Jennifer Ravelli, MPH (215-955-8069)
Student Affairs: Caroline Golab, PhD (215-503-8468)