Department of Radiologic Sciences

Radiation Therapy Program

Academic Policies
and
Clinical Education Handbook

2015 - 2016
**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 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.

**Required Background Check**

Students who are offered admission to Jefferson are required to pass a criminal background check and child abuse clearance. Some departments within the College, as well as 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.

**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 handbook are not and may not be regarded as contractual between the College and the students or its employees.
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JEFFERSON COLLEGE OF HEALTH PROFESSION
MISSION STATEMENT
The Jefferson College 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 life long 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 College of Health Professions is committed to interdisciplinary education and technologies that draw upon the strengths of all disciplines.

MISSION OF THE DEPARTMENT AND PROGRAM
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.

DEPARTMENT GOALS
The didactic, laboratory and clinical components of the curricula within the Department of Radiologic Sciences (DRS), Jefferson College of Health Professions (JCP), Thomas Jefferson University (TJU), provide an environment for students to develop and master:
• Knowledge, insight and skills required to produce optimal diagnostic images or develop and deliver therapeutic treatment plans.
• Effective communication techniques required to interact successfully with both patients and other members of the health care team
• Self-assessment skills required to evaluate correctly the quality and quantity of their work
• Critical thinking and problem solving skills required to meet the challenges of the dynamic healthcare environment
• Values for commitment to life-long learning, public education and involvement in their professional organizations

PROGRAM GOALS AND STUDENT LEARNING OUTCOMES
The objectives of the program are to prepare Radiologic science professionals exhibit:

Goal #1: Clinical Competence
Goal #2: Effective Communication Skills
Goal #3: Critical Thinking
Goal #4: Professional Growth and Development
THE HANDBOOK

The policies and services listed below can be found in Jefferson College of Health Professions & University Policies at the following link:
www.jefferson.edu/handbook

- Policy on conduct
- Medical Leave of Absence
- University Health Services: Blood and Body Fluid Exposure Protocol
- Due Process for Student Grievances
- Student Personal Counseling Center (SPCC)
- Social Media Policy
- Emergency Policies and Procedures
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).

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.

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 College of Health Professions.

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
ACADEMIC POLICIES
POLICIES ON STUDENT PROGRESSION

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 Health Insurance Portability and Accountability Act (HIPAA) and Safety Modules prior to matriculation.

POLICIES ON UNDERGRADUATE 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. He/She 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. He/She 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. In addition to Departmental academic progression standards, students must also meet minimum required academic standards within the Jefferson College of Health Professions. For Academic Probation and Dismissal standards for the Jefferson College of Health Professions, please refer to the College of Health Professions Student Handbook.
6. A student who is dismissed from the Department of Radiologic Sciences due to unsatisfactory academic performance may, within one-year of the dismissal, apply for re-admission by submitting a written request directly to the Department Chairperson. After a one-year time period, all applications for readmission must be made through the Office of Admissions. Please refer to the Academic Regulations section of the Jefferson College of Health Professions Course Catalog for the JCHP Readmission Statement.
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 and 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 Department of Radiologic Sciences programs. It is designed to permit accurate assessment of the knowledge, skills, and abilities 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 attend a minimum number of clinical training hours (see clinical syllabus). All students must complete clinical competencies in accordance with the requirement of their certification body (e.g., ARRT), as applicable.

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.
- Use personal or public transportation to clinical sites. Commuting time and costs are not determining factors for clinical assignments. These time and cost factors are borne solely by the student.
- 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

CRIMINAL BACKGROUND, CHILD ABUSE CHECKS AND DRUG TESTING

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. Clinical rotation and fieldwork sites may require a criminal background check and/or child abuse check in order to permit participation in the clinical experience, rotation or fieldwork. Participation in clinical experiences, rotations or fieldwork is a required part of the curriculum and a requirement for graduation. Clinical rotation and fieldwork sites may deny a student's participation in the clinical experience, rotation or fieldwork because of a felony or misdemeanor conviction, failure of a required drug test, or inability to produce an
appropriate health clearance, which would result in delayed graduation or in the inability to
graduate from the program.

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 in violation of Clinical Practices and Policies.
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 JCHP and Department of Radiologic Sciences handbooks.
   e. Adheres to all clinical practices and policies of the clinical site and JCHP and Department of Radiologic Sciences.
   f. Adheres to departmental radiation protection and monitoring practices where appropriate* - Appendix D & E (*only applicable to modalities that use ionizing radiation).

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 in violation of Clinical Practices and Policies. (Refer to the section entitled "Responsibilities of the Student" on page 14.)
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) class days whenever possible so that resolution of grievance should require no more than three 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 JCHP 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 JCHP Student Handbook.

**CLINICAL SITE ASSIGNMENT**

The Clinical Coordinator and Program Director determine 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 radiation therapy.

Any student requesting changes in the clinical schedule must submit written justification for the change to the 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:
- Providing appropriate clinical supervision.
- Student clinical evaluation.
- Providing orientation to the clinical department.
- Providing feedback to the program director and clinical coordinator.
- Providing a scheduled rotations within the radiation therapy department.

**DIRECT SUPERVISION**

Direct supervision:
- Students are to be directly supervised at all times by the clinical supervisor or a designated registered technologist or any appropriate clinical staff member, eg. RN, CMD, MD etc.
- Students must never begin to prepare a patient for treatment or simulation without the clinical supervisor or a designated registered technologist **being present in the treatment room or the simulation room.**
• Students are not permitted to activate the radiation beam or the CT scanner without the clinical supervisor or a designated registered technologist present.
• Students are not to perform any patient assessment procedures (blood pressure, temperature, weight etc.) without the presence of a registered nurse or licensed physician or any other appropriate clinical staff.

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:
• Providing clinical education centers.
• Mentoring students.
• Supervising students.
• Advising students.
• Providing guidance to clinical instructors.
• Reviewing program policies and procedures with clinical affiliate supervisor/instructors.

RESPONSIBILITIES OF THE STUDENT
The student is responsible for:
• Displaying professional appearance in compliance with the dress code policy.
• Establishing harmonious working relationships and earning the respect of the radiologic sciences personnel through a professional and dignified posture and attitude.
• Using all equipment and materials responsibly and safely.
• Embodying the highest standards of civility, honesty, and integrity.
• Respecting and protecting the privacy, dignity, and individuality of others.
• Observing and assisting the clinical staff.
• Attending and participating in all scheduled clinical activities.
• Consulting with clinical site supervisors and/or departmental faculty for help with problems.
• Participating in the development of an individualized clinical education plan.
• Maintaining an accurate record of clinical examinations/competencies.
• Recording the number and types of evaluations required during each academic semester.
• Striving to broaden his/her knowledge and background on clinical subject matter by reading professional literature and attending conferences and seminars.
• Incurring all travel costs and expenses.
• Meeting with clinical coordinator at least once per semester.
CLINICAL POLICIES
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 during clinical hours.
- Using the hospital computer for any reason EXCEPT hospital business.
- Violation of any duly established rules or regulations.

FAMILY/FRIENDS WORKING AT 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 MEMBERS/FRIENDS CLASSROOM, LAB & 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 Science (RS) laboratories (sonography, radiography, nuclear medicine, radiation therapy and medical dosimetry)

- 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.
- Other Jefferson students or employees who are not part of Radiologic Science are not permitted in the RS laboratory unless they have signed a waiver to be used as a student volunteer.
- TJU’s liability insurance does not extend to students’ family and friends.
- The students should inform the security guard on 1st floor Edison, both when entering and leaving the laboratory, outside of the regular assigned hours.

Failure to comply with the policy may result in disciplinary action and even 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 TJU patch sewn on the right sleeve. These scrubs are available and may be purchased directly through the University Bookstore. A Jefferson ID badge needs to be worn at all times during clinical rotations.
- A short, white lab coat with the Jefferson patch on the right shoulder may be worn (unless prohibited by the clinical site). A cardigan sweater (button-down front) of solid navy blue or solid white may be substituted for the lab coat. A white or navy blue, mock turtleneck may also be worn under the scrub top in the fall and winter seasons. **Students enrolled in the nuclear medicine program are required to wear a long, white lab coat while in clinical.**
- Name tags must be visible to patient and staff and worn at all times.
- Solid white or black, leather footwear or solid white low-top sneakers. Clogs, sandals or open-toed shoes are not permitted. Students are responsible for keeping shoes neat, clean, and polished. Shoestrings should also be kept clean and properly tied.

**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 tied back.
- Brightly dyed hair colors are unacceptable, these include but are not limited to the colors red, orange, yellow, green, pink, blue, purple.
- 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).

- 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.
- Students are required to wear identification and radiation badges supplied by Thomas Jefferson University, and Clinical Affiliate Sites if provided, at all times.

Non-compliance
Any student not complying with the dress code policy will be removed from the clinical site. Any clinical time missed due to dress code violation will be made up by the student at a later date. The Clinical Coordinator in cooperation with the Clinical Affiliate Supervisor will determine make-up time.

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 education hours.
- Students may not wear student uniforms or Jefferson ID while working.
- 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 POLICY
Cell phones and beepers 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 or beepers with them during clinical hours. These devices must be placed in lockers. Any student in violation of this policy will be asked to leave his/her clinical site and will be marked absent for that day.

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, social networking and instant-messaging.
Any student in violation of this policy will be asked to leave his/her clinical site and will be marked absent.

VENIPUNCTURE POLICY

The ARRT clinical competency requirements include performance of venipuncture for injection of contrast agents and radiopharmaceuticals. **Not applicable for radiation therapy program.**

In order to participate in the performance of venipuncture on patients, students must:

- Have completed all immunizations as required by JCHP.
- Have current CPR certification, as required by the Department of Radiologic Sciences.
- Have health insurance, as required by JCHP.
- 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.

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 College 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.

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 or involved in an accident 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.

INFECTIONOUS 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.
ATTENDANCE REGULATIONS
DIDACTIC/LABORATORY INSTRUCTION
Each course syllabus details the attendance policy.

CLINICAL ATTENDANCE RECORDS
Time cards/Attendance Sheets provided by the Department are used for documenting clinical hours. Each student must personally sign or clock "in" and "out." 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.

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. The Clinical Affiliate Supervisor must notify the Clinical Coordinator of these changes.

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. It is not accruable nor is it transferable. A personal time request form must be submitted to the clinical coordinator.

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

ABSENCE POLICY
Attendance is required for all clinical practicum sessions. If a student will be absent from a clinical assignment, he or she must call both the Clinical Affiliate Supervisor and Clinical Coordinator prior to the start of the shift. Absences of three or more consecutive days require a doctor’s note. Extenuating circumstances will be dealt with on an individual basis.

If an emergency arises requiring an early departure from the clinical site, the student must notify both the Clinical Affiliate Supervisor and the Clinical Coordinator. 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. Three late arrivals in one semester will be counted as one day’s absence. Habitual lateness could lead to dismissal from the program.

The Clinical Coordinator and/or Program Director will advise the student of excessive lateness, and disciplinary action will be handled as specified in Violations of Clinical Practices and Policies.

MAKE-UP TIME
Arrangements must be made with the Clinical Affiliate Supervisor and approved by the Clinical Coordinator. The make-up time form is signed upon fulfillment of the time missed. The form will be submitted to the Clinical Coordinator. 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 College cannot intervene on the student's behalf should a student be summoned for jury duty.
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, College and University committees. The University and Thomas Jefferson University Hospital sponsor many volunteer and mentoring programs. Professional organizations, Jefferson Alumni Association and the College sponsor many programs that focus on career and professional development.

HONORS AND AWARDS
Students are eligible for:
- JRCERT award for clinical excellence.
- Department award for academic and clinical excellence.

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)
- Pennsylvania Society of Radiologic Technologist (PSRT)
- Philadelphia Society of Radiologic Technologists (PhilaSRT)

HONOR SOCIETIES
- Alpha Eta Society
  - Honor society for health professionals
  - http://www.alphaeta.net
- Lambda Nu Society
  - Honor society for radiologic and imaging science professionals
  - http://www.lambdaeta.org
Appendix A

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

Technical Standards for Radiation Therapy

Physical Demands
A Radiation Therapist is typically employed in a hospital or clinic. Clinical and laboratory assignments for the Radiation Therapy program require certain physical demands that are the technical standards of admission. These standards are based upon the minimum tasks performed by graduates of the program as recommended by the American Society of Radiologic Technologists. Listed below are the technical standards which all applicants must meet in order to participate and complete the Radiation Therapy program.

1. Sufficient visual acuity to read radiation therapy prescriptions & charts, observe conditions of the patient & evaluate x-ray images, identify faint skin markings & optical distance indicator projections.
2. Sufficient auditory perception to receive verbal communication from patients and members of the healthcare team and to assess the health needs of people through the use of monitoring devices such as intercom systems, cardiac monitors, respiratory monitors, fire alarms, etc.
3. Sufficient gross and fine motor coordination to respond promptly and to implement skills related to the performance of radiation therapy procedures, such as positioning and transporting patients. Radiation therapists must be able to manipulate equipment such as the linear accelerator, table and control panel.
4. Sufficient communication skills (verbal, reading, writing) to interact with individuals and to communicate their needs promptly and effectively, as may be necessary in the patient's/client's interest. Students must have access to email and be able to communicate via email.
5. Sufficient intellectual and emotional function to plan and implement patient care.

Examples of specific technical standards the radiation therapy student must be able to meet are:

- Lift, transfer and/or move patients from wheelchair/stretcher to x-ray table. Lift, move, reach or push equipment
- Manual dexterity and ability to bend/stretch
- Students must possess strong hand/eye coordination in order to operate equipment while observing patients.
- Be able to stand or walk for 75% of clinical time
- Distinguish color and shades of gray
- Demonstrate effective interpersonal skills, including patient instruction
- Read and extract information from the medical chart or patient prescriptions
- Explain clinical procedures verbally and/or in writing
• Physical, mental and emotional abilities to handle moderate and frequent exposure to infectious agents (blood, urine etc.) and possible moderate exposure to ionizing radiation
• Carry 12-30 pounds (lead aprons) while working
• Students are expected to quickly learn how to operate new equipment
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 you 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

CODE OF ETHICS

ARRT 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 situations, 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.

Revised and adopted by The American Society of Radiologic Technologists and The American Registry of Radiologic Technologist, February 2003
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 treatment or simulation rooms while exposure is occurring.

5. The radiation film badge should be worn outside the students’ uniform. The radiation film badge should be worn at torso level.

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

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

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

9. 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.*

10. 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 radiation monitors at the Clinical Affiliate Sites and in laboratory classes. No student will be allowed in a Clinical Affiliate Site or laboratory class without properly dated radiation monitors appropriately worn.

2. Any student who does not have the properly dated radiation monitor will be suspended from his/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 radiation monitors on the first day of each that they are on campus for each month. Badges are exchanged with the Program Director or clinical coordinator.

4. An accident with, or loss of, monitor(s) must be reported immediately to Maria Hayes Education Coordinator, Room 1013.

5. The Program Director receives and reviews with each student the radiation dose report from the Radiation Safety Office. The report will be posted on the notice board.

6. Monthly 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.

7. On completion of the clinical rotation students must return their radiation badges to the Education Coordinator. Students will be billed for unreturned badges.

8. “High” Radiation Dosimeter Readings
High or unusual radiation dosimeter readings are investigated by Jefferson 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).

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.

9. The cost for replacement of lost badges is the responsibility of the student. Payment is due at the time the student receives the new badge. (Pricing may change with no notice)
- Radiation Monitors not returned - $5.00
- Replacement Holder - $5.00
- Replacement Film - $2.00
- Replacement Monitor Ring - $5.00
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 (e.g., ring 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.
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.
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
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 made in writing to protect the individual’s personal information from
   release to unauthorized personnel.

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]

Approved by:

__________
John C.Keklak

Department Director

Thomas Jefferson University Hospitals, Inc.

Departmental Policy Template/January 2010
APPENDIX G
Accreditation Standards

JRCERT STANDARDS

Joint Review Committee on Education in Radiologic Technology
20 N. Wacker Drive, Suite 2850 Chicago, IL 60606-3182
312.704.5300 ● (Fax) 312.704.5304
www.jrcert.org

Joint Review Committee on Education in Radiologic Technology
Process for Reporting Allegations

Important Notes
1. The JRCERT cannot advocate on behalf of any student(s). An investigation into allegations of non-compliance addresses only the program’s compliance with accreditation standards and will not affect the status of any individual student.
2. The investigation process may take several months.
3. The JRCERT will not divulge the identity of any complainant(s) unless required to do so through legal process.

Process
1. Before submitting allegations, the individual must first attempt to resolve the complaint directly with program/institution officials by following the due process or grievance procedures provided by the program/institution. Each program/institution is required to publish its internal complaint procedure in an informational document such as a catalog or student handbook. (Standard Two, Objective 2.4)
2. If the individual is unable to resolve the complaint with program/institution officials or believes that the concerns have not been properly addressed, he or she may submit allegations of non-compliance to the JRCERT:

   Chief Executive Officer
   Joint Review Committee on Education in Radiologic Technology
   20 North Wacker Drive, Suite 2850
   Chicago, IL 60606-3182
   Ph: (312) 704-5300 Fax: (312) 704-5304
   -mail: mail@jrcert.org

3. The Allegations Reporting Form must be completed and sent to the above address with required supporting materials. All submitted documentation must be legible.
4. Forms submitted without a signature or the required supporting material will not be considered.
5. If a complainant fails to submit appropriate materials as requested, the complaint will be closed.

The Federal Higher Education Act of 1965, as amended, provides that a student, graduate, faculty or any other individual who believes he or she has been aggrieved by an educational program or institution has the right to submit documented allegation(s) to the agency accrediting the institution or program.

The JRCERT, recognized by the United States Department of Education for the accreditation of radiography, radiation therapy, magnetic resonance, and medical dosimetry educational programs investigates allegation(s) submitted, in writing, signed by any individual with reason to believe that an accredited program has acted contrary to the relevant accreditation standards or that conditions at the program appear to jeopardize the quality of instruction or the general welfare of its students. 03/09
Joint Review Committee on Education in Radiologic Technology (JRCERT)

Allegations Reporting Form

Please print or type all information.

Name of Complainant: _________________________________

Address: _________________________________________

City: ________________ State: ___________ Zip Code ______

Signature: ___________________________ Date: ________________

Institution sponsoring the program:

Name: ____________________________________________

City: __________________________ State: ________________

Type of Program: (Check One)
__ Radiography  __ Radiation Therapy  __ Magnetic Resonance
__ Medical Dosimetry

The following materials must be submitted:

1. Attach a copy of the program’s publication that includes the due process or grievance procedure.
2. Provide a narrative that identifies what you did at each step of the due process or grievance procedure and copies of materials that you submitted as part of your appeal and copies of correspondence you received in repose to your appeal.
3. List the specific objective(s) from the accreditation standards (available at www.jrcert.org/acc_standards.html) and indicate what the program is alleged to have done that is not in compliance with the cited objective(s).

Example

Objective 8.4
Direct supervision pre-competency

Allegation
Students often do patient exams without supervision before they have completed a competency check-off

03/09