



Northampton Community College

Radiography Program Student Handbook 2025-26

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Revisions included in this Edition from 24-25 Handbook

Dosimeter Use in the Workplace (Addendum 2025-01)

Non-Academic Grievance Policy (Addendum 2025-02)

Countering Direct and Indirect (Addendum 2025-3)

MRI Training to Include Structured Orientation (Addendum 2025-4)

Leaving Clinical Rotation (Addendum 2025-5)

Equity in "Make-up" days (Addendum 2025-6)

History of 2025-2026 Handbook Revisions

[1.2: Updated Accreditation Information \(rev.2\)](#)

"The Radiography Program at Northampton Community College is accredited and has been awarded a maximum accreditation term of 3 years, with a subsequent accreditation due in 2026."

[1.3: Clinical Education Dress Code: Addendum 2025-07 \(rev.2\)](#)

NCC Radiography has adjusted its dress code to better prepare students for clinical placements and in response to the standards set by our clinical education partners. Students may now wear sneakers in neutral colors, in addition to black, and are permitted to display tattoos, low-profile nose studs, and fashionable hair colors, provided that these expressions are exercised responsibly and with discretion, consistent with clinical site expectations.

[1.4: Clinical Assignment Policy: Addendum 2025-08 \(rev.2\)](#)

The clinical assignment policy has been revised to enhance transparency and ensure equitable distribution of clinical placements. Implementing a lottery system for primary clinical site assignments addresses potential concerns regarding perceived bias and provides a standardized, impartial method for student placement. This change directly supports adherence to JRCERT Standard 4.4, which mandates equitable learning experiences and comprehensive procedural exposure.

[1.5: Clinical Notification Policy: Addendum 2025-09 \(rev.2\)](#)

Non-Compliance revised for clinical notification policy, from continual non-compliance to continual non-compliance transitioning to involuntary withdrawal. Emphasizing the importance of accurate attendance records for liability purposes.

[1.6: Clinical Education Dress Code: Addendum 2025-10 \(rev.2\)](#)

Maintaining a professional image contributes to a positive environment for our employees, patients, and visitors. For safety and professional appearance, hoodies and scrub jackets with hoods are not permitted in patient care areas or during professional interactions.

[1.7: Responsible Accountability in Student Education \(RAISE\) Form 2025-11 \(rev.3\)](#)

Added a means of transparency with a new accountability form. RAISE is a method designed to help support your success by offering an early opportunity to address challenges and formally recommend program resources. This process does not exclude necessary disciplinary actions or suggest a preliminary sanction.

[1.8: Bereavement Policy 2025-12 \(rev.3\)](#)

Revised wording from "Up to a maximum of 3 days total between didactic and clinical" to "Up to a maximum of 3 consecutive days".

[1.9: Direct and Indirect: Transporting Patients 2025-13 \(rev.3\)](#)

Added the responsibility of transporting patients under direct supervision to maintain student equity in learning, ethical practice, and safeguarding patient well-being.

[1.10: Competency Clause 2025-14 \(rev.3\)](#)

This change only takes effect starting with the new cohort in Fall 2025. To ensure a comprehensive and effective learning experience, students are assigned a mandatory number of competencies to complete for each clinical course. Students are not permitted to complete competencies ahead of this assigned schedule. This new policy is in place to support a structured learning progression and maximize the educational value of each competency.

Introduction

The "Radiography Program Student Handbook" of Northampton Community College (NCC) provides information and references for the program's policies and procedures. However, changes in the college's policies and procedures may occur; therefore, readers are advised to visit the College website for the most up-to-date information.

As a student in the radiography program, you are required to comply with all rules outlined in both the Radiography Program Student Handbook and Northampton Community College's official website policies. It's your responsibility to read and understand these documents. If anything is unclear, please seek clarification immediately. A signed acknowledgment confirming your understanding of the Radiography Program Student Handbook will be kept in your program file.

In our dynamic academic environment, policies, procedures, and college/program information are regularly reviewed and revised. The Radiography Program Student Handbook is updated annually, but changes may occur more frequently. Should information change before a new edition is posted online or distributed, we will provide updates via a memorandum, addendum, or revised handbook. Always remember to check the NCC website for the most up-to-date college policies and procedures.

The "Radiography Program Student Handbook" has been endorsed by the Radiography Program Advisory Committee.

Accreditation

Joint Review Committee on Education in Radiologic Technology (JRCERT)

The Joint Review Committee on Education in Radiologic Technology (JRCERT) is recognized by both the United States Department of Education (USDE) and the Council for Higher Education Accreditation (CHEA). The JRCERT Standards incorporate many of the regulations required by the USDE for accrediting organizations to assure the quality of education offered by higher education programs.

Contact

The JRCERT contact information is as follows:

Joint Review Committee on Education in Radiologic Technology (JRCERT)
20 North Wacker Drive, Suite 2850
Chicago, IL 60606-3182
(312) 704-5300
email: mail@jrcert.org

Standards

The JRCERT Standards require a program to articulate its purposes, demonstrate that it has adequate human, physical, and financial resources effectively organized to accomplish its purposes, document its effectiveness in achieving these purposes, and provide assurance that it can continue to meet accreditation standards.

- 🔗 Please refer to the “2021 Radiography Standards” on the following link for further information: [2021 Standards for an Accredited Educational Program in Radiography.](#)

Accreditation

The JRCERT accreditation process ensures that the public can trust a program meets specific quality standards. The Radiography Program at Northampton Community College is accredited and has been awarded a maximum accreditation term of three (3) years, with a subsequent accreditation due in 2026.

Program Effectiveness Data

- 🔗 The Program Effectiveness Data for the Radiography Program at Northampton Community College may be found online at www.jrcert.org.

Middle States Commission on Higher Education (MSCHE)

Northampton Community College is accredited by the Middle States Commission on Higher Education (MSCHE), 3624 Market Street, Philadelphia, PA 19104, 267.284.5000. MSCHE is an institutional accrediting agency recognized by the U.S. Secretary of Education and the Commission on Recognition of Postsecondary Accreditation. It safeguards educational quality, fosters student opportunities, promotes continuous improvement, and builds reputation, making it a cornerstone of NCC's commitment to its students and the community.

State and Professional Licensure

Pennsylvania Department of Education (PDE)

Northampton Community College is authorized as an institution of higher education by the state of Pennsylvania.

American Registry of Radiologic Technologists (ARRT)

Many employers, state licensing agencies, and federal regulators require their technologists to hold ARRT certification and registration. A Radiologic Technologist (R.T.) denotes that the individual has satisfied the American Registry of Radiologic Technologists (ARRT) standards for initial certification (met the education, ethics, and examination) and the standards for continued registration.

🔗 The following information is on the [ARRT](#) website and in the current [Primary Eligibility Pathway Handbook: Education + Ethics + Examination = The ARRT Equation for Excellence](#).

Education, Ethics, and Examination Requirement

Education

You must earn an associate (or more advanced) degree to be eligible to apply for ARRT certification and registration. Your degree must be from an institution accredited by an agency recognized by ARRT. The degree does not have to be in radiologic sciences, and you can earn it before or after graduating from your radiologic sciences educational program. However, you must receive the degree before you take your ARRT examination.

You must complete an educational program in the same discipline as the credential you are pursuing, such as Radiography. As part of the program, you must demonstrate competencies in didactic coursework and clinical procedures.

Beginning January 1, 2025, however, you must earn your degree within three years after completing an educational program in your discipline, such as Radiography.

Ethics

The Standards of Ethics of The American Registry of Radiologic Technologists (ARRT) apply to persons who are either currently certified and registered by ARRT or who were formerly certified and registered by ARRT and to persons applying for certification and registration by ARRT (including persons who submit an Ethics Review Preapplication) to become Candidates (register to sit for their boards).

The ethics requirements aim to identify individuals with internalized professional values that cause one to act in patients' best interests. This internalization of professional values and the resulting behavior is one element of ARRT's definition of being qualified. Exhibiting certain behaviors, as documented in the ARRT Standards of Ethics, is evidence of a possible lack of appropriate professional values.

Upon application for certification and registration with ARRT, you must comply with everything in the ARRT Standards of Ethics, including the Rules of Ethics. You must notify the ARRT of any ethics violations

within 30 calendar days of their occurrence and disclose any violations that occurred before you applied with ARRT.

Applicants who do not follow these rules might become ineligible for certification and registration with ARRT. R.T.s who do not follow these rules might receive sanctions, including revocation of their ARRT credentials.

Several misconduct charges and convictions may violate our Rules of Ethics. They include, but are not limited to:

- ✓ Felony or misdemeanor charges or convictions (including speeding tickets and parking violations that are considered misdemeanors or felonies)
- ✓ Charges or convictions concerning traffic violations that involved drugs or alcohol
- ✓ Convictions in a military court-martial
- ✓ Violations of state or federal narcotics or controlled substance laws, even if you are not charged or convicted
- ✓ Disciplinary actions concerning a professional license, permit, registration, or certification
- ✓ Violations of an honor code at an educational institution you attended to meet ARRT certification and registration requirements

It is your responsibility to determine whether your actions constitute an ethics violation. It would be prudent to report the actions as soon as possible. This will ensure that the ARRT considers you eligible to sit for the certification examination after you have received the terminal award. If you have questions, contact the ARRT Ethics Requirements Department at 651.687.0048.

Examination

ARRT exams are computer-based. Qualified candidates have three attempts to pass the exam. The attempts are timed within three years of your first exam window opening. If you do not pass the exam within three years or three attempts, you will no longer be eligible for certification and registration unless you are requalified. To requalify, you must meet the ARRT's initial eligibility requirements, including completing an educational program as specified by the ARRT.

State Authorization Reciprocity Agreement (SARA)

Licensure requirements vary from state to state. Most states accept the American Registry of Radiologic Technologists (ARRT) Certification and Registration for licensure purposes. Some states have additional exams for specific procedures, such as fluoroscopy, as seen in California. Participating in a program outside of Pennsylvania without proper authorization from that state's professional licensing board may result in a loss of licensing eligibility.

- 🔗 Please refer to the [2025 Handbook for State Candidates](#) for further information, as documented by the ARRT or [Individual State Licensure Information](#) written by the American Society of Radiologic Technologists (ASRT).

Radiography Professional Associations

American Society of Radiologic Technologists (ASRT)

The ASRT is the national professional organization representing radiographers, radiation therapists, nuclear medicine technologists, mammographers, cardiovascular-interventional technologists, computed tomography technologists, dosimetrists, magnetic resonance technologists, educators, and managers. In addition to offering continuing education opportunities to its members, the association publishes the bimonthly journal Radiologic Technology, the monthly newsletter ASRT Scanner, and the biannual journal Radiation Therapist.

🔗 For more information, please visit the ASRT website at www.asrt.org.

Professional Practice

The ASRT Office of Professional Practice was established in 2004. Its mission is to provide members with information concerning permissible practice according to the Practice Standards for Medical Imaging and Radiation Therapy, Advisory Opinion Statements, Position Statements, and applicable statutes and administrative regulations.

🔗 Please refer to the following link to read about the profession's practice standards for radiographers: [ASRT Practice Standards, Glossary & Advisory Opinion Statements](#).

ASRT Radiography Curriculum

As stated in [JRCERT 2021 Radiography Standard 4.2](#), accredited programs must follow a JRCERT-adopted curriculum.

🔗 Please refer to the following link for more information on the framework behind the Radiography curriculum at Northampton Community College: [2022 Adopted Radiography Curriculum](#).

Pennsylvania Society of Radiologic Technologists (PSRT)

The Pennsylvania Society of Radiologic Technologists is a professional organization representing radiologic technologists nationwide. PSRT's mission is to promote advancements in radiologic technology and ensure the highest standards of patient care. With a team of dedicated and skilled members, PSRT plays a vital role in shaping the medical imaging field in Pennsylvania.

PSRT offers its members a range of services, including continuing education programs, networking opportunities, and access to the latest industry resources.

🔗 For more information, please visit the PSRT website at www.psrtonline.org.

NCC Radiography Program Committee and Clubs

Radiography Program Advisory Committee

The Radiography Program Advisory Committee reviews and evaluates the program's assessment plan and outcomes. In addition to academic matters, the committee advises the director on matters of interest related to the program, such as student and staffing issues, as well as clinical site technology changes.

The committee meets each fall semester and comprises the Program Director, Program Faculty, the Program's Medical Advisor, Radiologists, Radiology Administrators, Clinical Preceptors, the current CHARTS President (or a representative CHARTS officer), and an Alumnus of the program.

Student input to the Advisory Committee is welcomed and is directed through the student's CHARTS organization via the current CHARTS President of each class (or a representative CHARTS officer). As stated in the CHARTS bylaws, student issues should be submitted in writing to the Program Director two weeks before the meeting so that the item(s) can be placed on the agenda for distribution to the members.

College and Hospital Association of Radiologic Technology Students (CHARTS)

According to the [CHARTS bylaws](#), each Radiography Program student is automatically a member of CHARTS (College and Hospital Association of Radiologic Technology Students). The objectives and purposes of this club are to:

- Improve and enhance the radiography students' college and clinical education.
- Develop a cooperative relationship between CHARTS, NCC, and the affiliate hospitals.
- Advance the Health Professions of radiography.

CHARTS has been named and nominated more than once for club of the year. Involvement is crucial for the success of the following:

- To be used by the student as a vehicle to affect change in both the didactic and clinical components of the Radiography Program.
- To perform campus and community service activities through fundraisers or volunteer service.
- To sponsor a trip to a student/educator seminar each academic year.

Lambda Nu (ΛN) National Honor Society for the Radiologic and Imaging Sciences

Scholarships are awarded to members of Lambda Nu: [Lambda Nu Scholarship](#). Click on the following link for the Lambda Nu bylaws, which are included in this handbook: [Lambda Nu bylaws](#).

🔗 For more information, please visit the [Lambda Nu Website](#).

College Mission, Vision, and Statement of Values

College Mission

Recognizing that students are the primary reason that Northampton Community College exists, we seek to provide excellent, accessible, and comprehensive learning experiences in partnership with the dynamic, diverse communities we serve.

College Vision

As one of the leading community colleges in the nation, we will:

- Promote the highest student success in achieving academic, personal, and professional goals.
- Provide state-of-the-art education and training in every community we serve.
- Be the college of choice for innovative programming.
- Encourage every community member to have a lifelong connection to the college.

Respect and affirm the dignity of all people.

College Statement of Values

Learning thrives when there is a sense of curiosity and excitement about the world in which we live. As such, we value:

Excellence: Quality in the educational and training experiences that we provide, which is based on our dedication to teaching and learning

Innovation: Creative problem-solving, responsiveness, entrepreneurship, and our ability to adapt quickly to a changing world

Sustainability: Commitment to the long-term health of the institution, the community, the economy, and the environment

Accountability: Institutional and individual responsibility for our actions, growth, and development

Integrity: Academic and personal honesty, fairness, ethical conduct, and respect for others in our learning and working environments

Diversity, Equity, and Inclusion: An environment that fosters and values every person's contribution, celebrating the ways in which cultures, identities, and backgrounds enrich the college community and enhance our academic excellence.

Engagement: Involvement in and collaboration with the college, local, and global communities

Program Mission, Goals, and Learning Outcomes

Program Mission

Our mission is to provide student radiographers with an innovative and educationally sound program that will enable them to deliver quality patient-centered care, use radiation judiciously, and display professionalism throughout their careers.

Program Mission with Clinical Education Settings

Through mutual respect, in a learner-centered environment, we will collectively educate students to embrace the following components of the profession:

- Effective communication
- Problem-solving
- Professionalism
- Radiation safety
- Technical competency and proficiency

Program Goals (G) and Learning Outcomes (O)

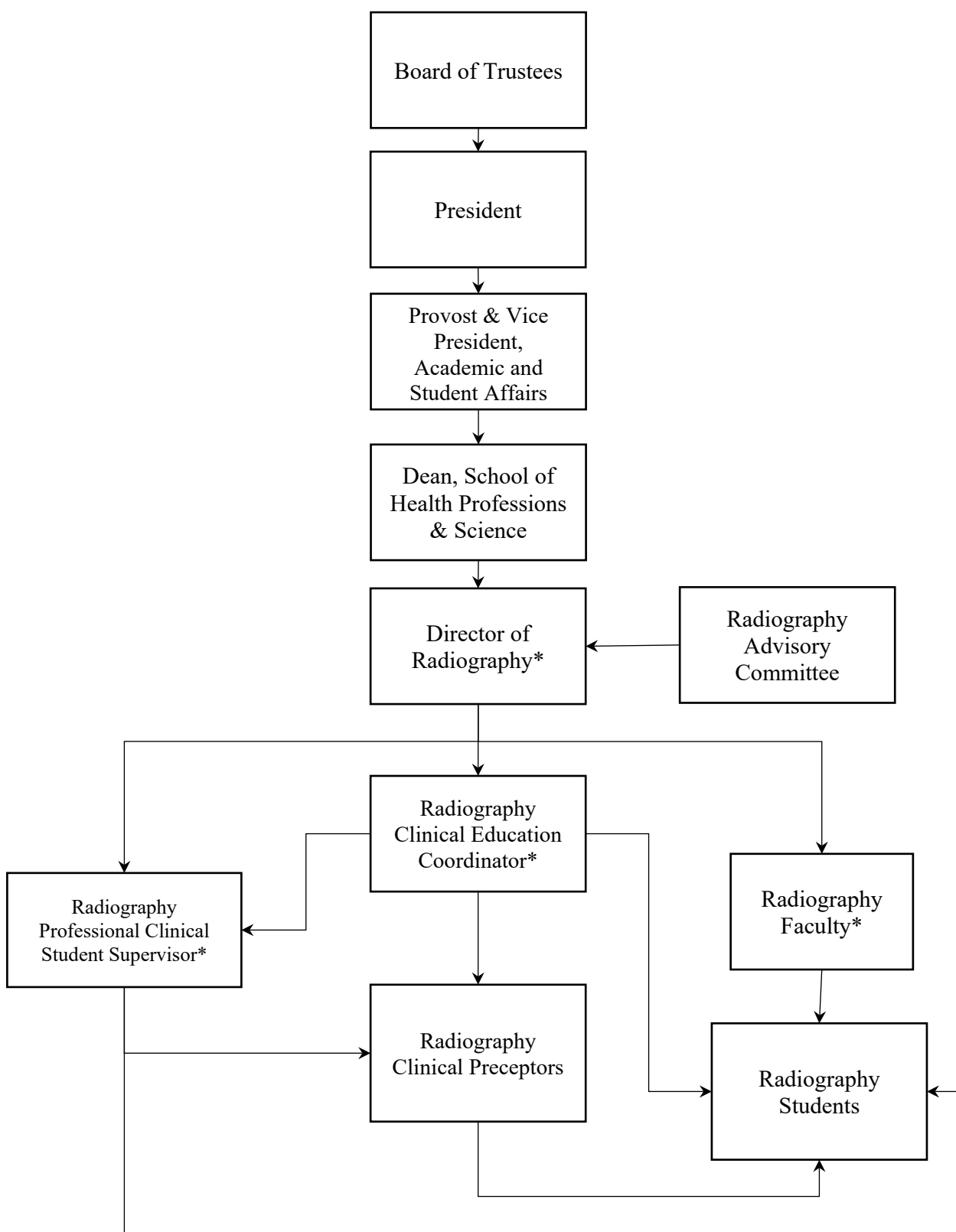
NCC Radiography program strives to graduate students who:

1. **(G) Achieve Clinical Competence:** Demonstrate the knowledge and skills necessary to perform radiographic procedures safely and effectively while prioritizing patient well-being.
 - a. **(O) Safe and Effective Image Production:** Correctly employ radiographic positioning, technical factors, and individual patient needs for various procedures, ensuring optimal image quality with minimal radiation exposure.
 - b. **(O) Patient-Centered Care:** Engage the patient (and family as appropriate) in preparation for and throughout the examination to enhance image quality and understanding.
2. **(G) Demonstrate Critical Thinking & Problem-solving:** Analyze clinical situations, solve radiographic problems, and adapt procedures to ensure high-quality images and patient care.
 - a. **(O) Image Quality and Analysis:** Demonstrate critical thinking and identify technical errors, artifacts, and potential anatomical abnormalities.
 - b. **(O) Adaptability and Problem-Solving:** Apply critical thinking and problem-solving skills to adapt radiographic procedures for non-routine cases, considering individual patient factors, equipment limitations, and safety concerns.
3. **(G) Establish Effective Communication:** Professionally and effectively communicate, via oral and written means, with patients and their families, healthcare team members, and the community to support quality patient care and the work of the healthcare team.
 - a. **(O) Patient Education and Interaction:** Demonstrate effective communication skills with patients before, during, and after the radiographic examination, display cultural competence, and ensure patient and family understanding and informed consent.

- b. **(O) Interprofessional Communication and Collaboration:** Effectively communicate with healthcare team members and actively support the team's work while serving as a patient advocate.

- 4. **(G) Institute Professionalism:** Graduates will demonstrate professional behavior and ethics that align with professional standards of practice and clinical expectations, including accountability, responsibility, and commitment to lifelong learning.
 - a. **(O) Commitment to Professionalism:** demonstrate professional behavior by adhering to ethical principles and legal standards of practice.
 - b. **(O) Professional Performance:** Recognize and adhere to workplace policies, including personal accountability and professional responsibility.

A. Organizational Chart: Radiography Program



*Constitutes the Radiography cluster

NCC Radiography Program Department Responsibilities

Program Director

- Ensure effective program operations.
- Oversee ongoing program assessment.
- Participate in budget planning.
- Maintain current knowledge of professional discipline and educational methodologies through continuing professional development.
- Assume the leadership role in the continued development of the program.
- Develop, implement, supervise, evaluate, and revise the program curriculum and community service and continuing education programs in radiology.
- Counsel faculty and staff, and make recommendations concerning the development and offering of orientation programs for new faculty, part-time faculty, and Clinical Preceptors.
- Assign faculty instructional and coordination responsibilities.
- Counsel students and utilize referral programs to ensure that students who require additional counseling are directed to appropriate College personnel.
- Assist with and encourage student activities.
- Assist with the recruitment, interviewing, and selection of students.
- Schedule proper student clinical education.
- Maintain adequate student records.
- Implement and support the Continuous Improvement Initiative Assessment Cycle.
- Prepare a list of unique assignments that align with both institutional and individual goals and ambitions, tailored to the position and the administrative team.
- Maintain cooperative working relationships with college personnel, affiliate hospitals, appropriate community, state, regional, and national groups, agencies, and professional organizations.
- Function as an active member of the administrative team.

Clinical Education Coordinator

- Correlate clinical education with didactic education.
- Coordinate clinical education and evaluate its effectiveness.
- Evaluate, supervise, and ensure clinical education effectiveness through regularly scheduled visits to clinical education settings.
- Instruct and evaluate students.
- Develop and revise the curriculum as needed.

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- Advise students.
- Give in-services.
- Support the Program Director to help ensure effective program operation.
- Participate in the assessment process.
- Cooperate with the Program Director in periodic review and revision of clinical course materials.
- Maintain current discipline knowledge through continuing professional development and pursuing scholarly activities.
- Maintain current knowledge of program policies, procedures, and student progress.

Professional Clinical Student Supervisor

- Support the Clinical Education Coordinator by correlating clinical education with didactic education.
- Support the Clinical Education Coordinator in evaluating and assuring clinical education effectiveness through regularly scheduled visits to the clinical education settings.
- Advise students.
- Support the Program Director to help ensure effective program operation.
- Attend scheduled divisional, departmental, program, advisory, and college meetings.
- Perform college service activities either on or off campus.
- Maintain a good rapport with the clinical affiliates.

Full-time Didactic Faculty

- Prepare and maintain course syllabi/outlines and objectives, instruct and evaluate students, and report progress.
- Participate in the assessment process.
- Cooperate with the Program Director in periodic review and revision of course materials.
- Support the Program Director in helping to ensure the effective operation of the program.
- Maintain appropriate expertise and competence through continuing professional development.
- Attend scheduled divisional, departmental, program, advisory, and college meetings.
- Do academic advising and counseling.
- Provide student advisement for registration.
- Participate in college service activities, either on or off campus.
- Maintain appropriate expertise and competencies through continuing professional development and pursuit of scholarly activities.
- Maintain a good rapport with the clinical affiliates.

Part-Time Didactic Faculty

- Prepare and maintain course syllabi/outlines and objectives, instruct and evaluate students, and report progress.
- Participate in the assessment process when appropriate and cooperate with the Program Director in the periodic review and revision of course materials.
- Maintain appropriate expertise and competencies through continuing professional.
- Development and pursuit of scholarly activities.

Clinical Preceptor

- Be knowledgeable of program goals.
- Understand the clinical objectives and clinical evaluation system.
- Understand the sequencing of didactic instruction and clinical education.
- Provide the student with clinical instruction and supervision.
- Evaluate students' clinical competence.
- Serve as a student advocate to the clinical staff.
- Maintain competency in professional discipline, instruction, and evaluation.
- Techniques through continuing professional development.
- Maintain current knowledge of program policies, procedures, and student progress.
- Directly inform students when they may accept or delete patient images for which the Clinical Preceptor is responsible.

Clinical Staff

- Understand the clinical competency system.
- Understand requirements for student supervision.
- Support the educational process.
- Maintain current knowledge of program policies and procedures, as well as student progress.
- Directly inform students when they may accept or delete patient images for which the Technologist is responsible.

Mentor

- A mentor is someone who guides the course of your experience. There may be more than one mentor, depending on the circumstances.
- First-year radiography students are assigned to a second-year radiography student mentor in their respective clinical education settings.

- The mentor should function as a peer to help the mentee's initial questions and make the transition into the clinical practice setting more comfortable and enjoyable.

College and Program Admission Policies

Transferring In

Northampton Community College (NCC) facilitates the transfer of prior learning. Students can transfer up to 45 credits from regionally accredited institutions (with a grade of "C" or better) or, with a bachelor's degree, bypass general education requirements.

NCC also offers Prior Learning Assessment, allowing students to earn credit for military service, AP/IB exams, professional experience, and certifications. This process helps accelerate degree completion and reduce costs. For international transcripts, a NACES-approved evaluation is required.

🔗 Further information is available from [Records and Registration](#) or on the college's [Previous Learning Assessment](#) site.

College Level Examination Program (CLEP) and Challenge Exams

Students may earn credit through CLEP or Challenge Exams. Exams can be scheduled through the NCC Library testing center. For more information about CLEP exams, [click here](#).

🔗 Please visit the NCC College website, [Prior Learning Assessment](#), for a listing of NCC credit equivalency requirements for CLEP Exams (expand the drop-down menu titled "CLEP Exams").

Radiography Coursework from Other Programs

Radiography-specific coursework (courses coded RADT) must be completed within the Northampton Community College Radiography program. This ensures that our graduates complete the necessary didactic and clinical components required for the Registry examination. Please refer to the [ARRT Education, Ethics, and Examination Requirement](#) section in this Handbook.

Program Application Requirements

The following is information taken from the [Health Sciences Admission Requirements](#) on the NCC website

- Completion of a high school diploma or equivalent
- High School Biology with a lab or NCC's BIOS115 with a grade of "C" or better. *
- High school Algebra I and II or MATH022 with grades of "C" or better, or exemption through math placement testing
- Minimum overall GPA of 2.5
- Interview for competitive applicants

*High school courses must be college preparatory level. Equivalents from other colleges may satisfy requirements.

Essential Program Admission Requirements

After acceptance into the program, students will be given a Radiography Acceptance Checklist Packet that provides a timeline for completing the essential admission requirements. Our program's affiliation agreements with participating clinical sites set these requirements. Subsequent sections provide more details for each requirement listed below.

- [*State, FBI, Child Abuse Background Check, and Department of Aging*](#)
- [*Verification of Student Release of Information Form for Health Professions Clinical Sites*](#)
- [*Medical Marijuana Policy and Drug Screening*](#)
- [*Basic Life Support \(BLS\) certification for Health Care Providers: CPR*](#)
- [*Insurance: Personal Health and Liability*](#)
- [*Physical Exam and Required Immunizations and Titters*](#)
- [*Verification that the Essential Functions Technical Support Standards can be met*](#)
- [*Verification that the Health Insurance Portability and Accountability Act of 1996 is understood*](#)

Failure to Comply with Essential Program Admission Requirements

Failure to comply with the affiliation agreement with the Radiography clinical sites is a violation. The Radiography Program Director and the NCC Health Department collaborate to ensure that all required documents are updated, uploaded, and approved by the various deadlines. ***Students must comply with the published deadlines to secure their seats in the program and clinical sites.***

The following can occur if the Radiography student is non-compliant:

- Forfeiture of seat in Radiography Program
- Withdrawal of housing privileges if the occupant in the Residence Hall
- A "hold" is placed on the registration process
- Suspension from the clinical practice program
- Withdrawal from Radiography Program

Health and Wellness Center

The Health and Wellness Center, located in College Center 120, 610-861-5365, is managed by St. Luke's Hospital and offers professional healthcare services to students and staff.

- 🔗 Visit the NCC Health and Wellness website for current hours: [NCC Health and Wellness Center](#).
- 🔗 For emergencies outside of these hours, please contact [Public Safety](#) at 610-861-5588.

Medical documentation is uploaded to a secure site, myRecordTracker, for review by the Health and Wellness Center's professional health staff to ensure that the medical/immunization requirements are satisfied before clinical rotations begin. Medical information is strictly confidential.

General questions related to the health requirements may be addressed to the [NCC Health and Wellness Center](#) before contacting the Radiography Professional Clinical Student Supervisor and/or the Radiography Program Director.

Address, E-mail, and Telephone Number Changes

It is essential to update your mailing address, email address, or telephone number so that the relevant departments can contact you. These items are populated through the Workday© application. A delay in communication may result in the forfeiture of your seat in the program. Don't hesitate to contact the [Records Department](#) and the Radiography Department Secretary for any changes.

State, FBI, Child Abuse Background Check, and Department of Aging

After acceptance into the Radiography Program, each student must undergo a criminal background check (state, FBI, and child abuse), as stipulated by the College and the affiliated hospitals. The FBI Background Clearance through the PA Department of Aging is only required for those who have not lived in Pennsylvania for two (2) consecutive years at the time of acceptance. All documents must be uploaded into myRecordTracker; hard copies should be submitted to the Radiography Program Director.

Accepted students who submit a report reflecting "no record" (no conviction) can consider themselves as "**fully**" accepted into the Radiography Program.

Anyone with unresolved incidents or on probation will be removed from the program. Students must not be actively incarcerated, on work release, or on probation or parole. They will not be allowed to participate in the program, regardless of the criminal offense and whether it is on the Prohibitive Offenses, according to PA Act 14, until the sentence and legal obligations have been satisfied.

If a student has a criminal record, they will be conditionally accepted pending approval from the NCC Health Professions Review Committee and the assigned hospital clinical site.

The NCC Health Professions Review Committee will require a written explanation from the applicant, which includes the following:

- Date of Conviction
- Exact Location
- Offense(s)
- How did you plead
- What was the outcome/sentencing
- Are you still on probation
- Details surrounding the offense with your version of what happened.

Upon receipt of the statement, the Health Professions Review Committee will consider the report and recommend it to the Program Director regarding the applicant's acceptance into the program.

Conditional applicants will be notified of their status within three (3) days following the committee's review. The applicant may appeal the decision in writing to the Vice President for Academic Affairs within five (5) working days of the decision, whose decision is final.

It is essential to note that the hospital's criteria (which are the same as those for hiring an employee) may be more stringent than the College's. There are affiliation agreements between hospitals and colleges that mandate hospitals to be informed of any criminal record of incoming students.

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The clinical sites have the right to deny access to any student with a criminal record based on their institution's criteria. A hospital's decision to deny clinical access would override that of the Health Professions Review Committee.

If an applicant is denied clinical placement based on their criminal record, their acceptance into the Radiography Program will be rescinded.

Even after program and clinical access, the ARRT has the final say regarding who may or may not sit for the national ARRT certification examination. Please refer to the ARRT [Education, Ethics, and Examination Requirement](#) section in this Handbook.

If any participant or student is arrested or charged with any offense during the duration of this program, it is the participant /student's responsibility to notify the Program Director immediately, and the participant/student acknowledges that this may affect the student's ability to continue in the program.

Medical Marijuana Policy and Drug Screening

To be transparent regarding the drug screening process and the use of Medical Marijuana, Northampton Community College recognizes its responsibility to fully inform students of NCC's policy at the time of acceptance. We understand that this policy may present complexities. We aim to ensure your success and encourage you to seek support resources if needed.

🔒 You can find confidential assistance through NCC's [Counseling Services](#) or external organizations.

Medical Marijuana

The Federal government regulates drugs through the Controlled Substances Act, which does not recognize the difference between medical and recreational use of marijuana. Under Federal law, marijuana is a Schedule 1 controlled substance, meaning that it is considered to have no medical value. Medical practitioners may not prescribe marijuana for medical use under Federal law. Businesses that fail to comply with Federal law are at risk of criminal or civil charges and may also face issues with eligibility for Federal contracts and grants.

The Pennsylvania Department of Health is currently implementing the Pennsylvania Medical Marijuana Program, a component of the Medical Marijuana Act (MMA), which was signed into law on April 17, 2016. This program provides access to medical marijuana for patients with severe medical conditions, as defined by the Pennsylvania Department of Health.

Pennsylvania's Medical Marijuana statute specifically provides that an employer is not required to accommodate an individual in a safety-sensitive position if that person is under the influence of medical marijuana. Most positions involving direct patient care are considered safety-sensitive positions.

Due to the current discrepancy between State and Federal law regarding the Drug-Free Workplace Act and the MMA, students using medical marijuana will not be eligible for clinical, internship, or externship placement in any NCC Health Professions career program. NCC recognizes the challenges students using medical marijuana might face. We encourage you to explore alternative medication options not prohibited by federal regulations.

This policy must be understood and verified by completing the “*Health Professions Medical Marijuana Policy*” issued at the time of acceptance.

Routine Drug Screening

Students should understand that under the current Pennsylvania State Board law, many health professions licensing boards require drug screening at the time of licensure application. Similarly, most healthcare employees are required to undergo routine drug screening as a condition of employment, as these positions, stated previously, involve direct patient care and are considered safety-sensitive.

As partners, the program's clinical sites and NCC are entrusted with providing high-quality patient care and a safe educational and work environment. The unauthorized use or trafficking of alcohol or drugs, despite having a medical marijuana card, is a significant hazard to patients, visitors, and employees. Therefore, ***students entering any Health Professions Careers Program must have drug screenings upon admission to the clinical phase of the program and on a semester basis while participating in clinical experiences.***

Random Drug Screening

Students may also be subject to random drug screens by the clinical site's practice. If a student, while at clinical, is suspected of substance abuse or being under the influence, the student will be:

- Immediately removed from all patient/work areas by the Clinical Preceptor or immediate supervisor.
- Immediately referred to a drug screening facility or the clinical site's testing area and will need to follow up with drug and alcohol counseling in the event of a positive result.
- Arrangements for safe student transportation will be secured by the preceptor/supervisor after coordinating with the Clinical Education Coordinator.
- Refusing to submit to drug/alcohol testing is grounds for banning the student from any further activities and withdrawal from the program.
- The student is responsible for paying the drug screen fee.

Be advised that, as a matter of protocol, many clinical sites require drug and alcohol screening in the event of any accidental incident involving a patient, employee, or student. Students who are found to have drugs or alcohol on their person or in their system, despite having a medical Marijuana card, are subject to severe discipline, up to and including termination of their experience, followed by referral to appropriate counseling.

Basic Life Support (BLS) for Healthcare Providers: CPR

The Radiography Program, the American Registry of Radiologic Technologists (ARRT), and the affiliation agreement with clinical education sites require each student to maintain CPR certification throughout their training. The student should obtain a ***two-year certificate***. Training requires an in-person component to demonstrate skills using mannequins.

A copy of the student's certification (AHA: BLS Provider, ARC: BLS Healthcare Provider) must be uploaded into the myRecordTracker system for verification. CPR certification is verified before the start

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of each clinical rotation. If the certification expires while enrolled in the program, renewal is required on or before the expiration date. It is the student's responsibility to know and renew before the expiration date.

Insurance: Personal Health and Liability

Personal Health

Health insurance coverage is required throughout the program. Coverage documentation must be uploaded to myRecordTracker for review by the Health and Wellness Center by the published deadline and whenever a policy change or an updated insurance card is received. Students should always have their health insurance available in the event of illness or injury, whether on campus or in the clinical education setting.

Liability

The College shall maintain liability (malpractice) insurance purchased by the student in the following amounts: a minimum of \$1,000,000 for each claim and \$5,000,000 aggregate. The course fee for each Fall semester clinical practice course includes the annual malpractice insurance fee.

Physical Exam and Required Immunizations and Titters

The student and medical provider must complete a Physical Exam and School-Provided Health Form no sooner than six (6) months (no sooner than January for the start of the fall semester). The form lists the immunizations and titers that require supporting documentation (immunization records and lab reports) to be individually uploaded into myRecordTracker.

Required Vaccinations

To protect yourself and the patients you will serve, all Health Professions students must be immunized and/or document immunity (through blood tests or prior vaccinations) against varicella (chickenpox), hepatitis B, tetanus, diphtheria, pertussis (whooping cough), influenza (flu), measles, mumps, rubella.

COVID-19 is required for all Health Professions students. Exemptions for students may be considered on a case-by-case basis with required approval from all clinical sites, regardless of where you perform your clinical education experience.

Meningococcal Vaccination

Students living in campus housing are required to receive the meningococcal vaccination, unless their religious beliefs prohibit them from doing so. In this case, a waiver must be signed and uploaded into myRecordTracker.

Tuberculosis

Health Professions students are required to be evaluated annually for TB. Proper documentation must be uploaded into myRecordTracker for review by the Health and Wellness Center.

If any employee or student contracts active tuberculosis (not latent or inactive tuberculosis), they shall be removed from their job/classroom/dorm setting until medical documentation and laboratory results have been received at the Health and Wellness Center to confirm the diagnosis and mode of treatment.

Signed documentation from a licensed physician must state that the patient is not infectious. These forms are available at the [Health and Wellness Center](#). After that, the treating physician must submit a progressive note annually and/or complete a tuberculosis screening questionnaire at the Health and Wellness Center.

Essential Functions of a Radiographer

Radiographers play a crucial role in patient care, collaborating closely with physicians and other healthcare professionals to produce accurate diagnostic images. Strong observational, communication, motor, and cognitive skills are vital for ensuring patient safety and delivering high-quality imaging services.

Students accepted into the program are required to complete the “[Essential Functions of a Radiographer: Verification of Understanding/Student Disclosure Form](#)” before the start of the program. The form delves into four key areas:

- **Observational Skills:** This section lists the competencies to gather information from various sources, including the patient, equipment, and radiographic images. It emphasizes the importance of discerning critical details, recognizing potential emergencies, and ensuring image quality.
- **Communication Skills:** This section lists the competencies to interact verbally and in writing with patients, healthcare professionals, and the public. It also highlights the importance of empathy, professionalism, and accurate documentation.
- **Motor Skills:** This section lists the competencies to lift, carry, push, pull, and maintain proper posture while wearing lead protective gear. Dexterity and fine motor skills are crucial for handling equipment and ensuring patient safety.
- **Cognitive Skills:** This section lists the competencies to concentrate, learn the latest information, manage stress, and exercise independent judgment while adhering to safety protocols.

The inability to perform these skills competently may require [involuntary withdrawal](#) from the program to protect yourself and the patient population.

If you have concerns about your ability to perform any essential functions, discuss them with your program advisor or healthcare professional.

Health Insurance Portability and Accountability Act (HIPAA) of 1996

Confidentiality is a patient's right and the responsibility of the radiographer, student radiographer, and all radiology health care team members. Through the educational process, student radiographers will

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have access to protected health information (PHI) of patients under their care, both within and outside the radiology department, at each clinical education site.

Any information, in written, oral, or electronic form, about a patient's physical, emotional, or mental health or treatment is considered confidential and must be managed discreetly and privately, protected against theft, loss, or unauthorized disclosure. It should not be discussed with the patient, the public, your family, and/or significant others.

The student is required to adhere to the policies regarding confidentiality and HIPAA-related situations. The requirement is fulfilled by acknowledging and signing the *NCC Departmental Confidential Policy: HIPAA* form.

Failure to comply with the policy will result in strict disciplinary action, including involuntary withdrawal from the program.

Further Discussions referencing HIPAA that may lead to sanctions are found in the following sections of this Handbook:

- *Confidentiality of Patient Information: HIPAA* under Legislative Clinical Site Policy
- *Social Networking Policy* under the College and Program Code of Conduct Policies
- *Expectations of Student Presenter* under Image Critique Writing Assignment

College and Program Support for Student Success

Endowments/Scholarships/Financial Aid

As of August 2018, six endowed radiography scholarships were available. Eligibility requirements vary and may include financial need, GPA, county of residence, clinical site rotations, military service, and other criteria. Typically, awards are granted for the student's second Fall semester.

To be considered for an endowment or scholarship, the student must file for financial aid (including a FAFSA filing). Even if you are not eligible for financial assistance, you must file a FAFSA to be considered. Please contact the Financial Aid Office for information on the filing process.

🔗 Click for further information: [NCC FAFSA and Scholarship](#).

🔗 Click for details concerning scholarship opportunities: [Scholarship Opportunities](#).

NCC Culture of Caring: Spartan Cares

It can be challenging to focus on your academic progress while dealing with personal concerns. NCC can assist with transportation, financial aid, housing, food, educational support, childcare, and emotional/mental health support.

🔗 Click for further information: [Spartan Cares](#).

Counseling Services/Mental Wellness on Campus

A staff of professional counselors is available to help you with your educational and personal support. Services include mental health, substance abuse, bilingual, career, and academic counseling. They are accessible to all students and abide by strict confidentiality. The Bethlehem Campus office is in the College Center, CC 341. Call 861-5346 for more information. Additional services also include programs such as Zen Zones, THRIVE, AND NCC Collegiate Recovery Program (CRP).

🔗 For further information, please visit the NCC college website: [Counseling Services](#) and [Mental Wellness on Campus](#).

Accessibility Resource Center

The Accessibility Resource Center offers support and guidance to prospective and current students with disabilities. Services and accommodations are provided to facilitate access to college programs and facilities per all applicable laws, including the Americans with Disabilities Amendments Act (ADA) and Section 504 of the Rehabilitation Act of 1973.

Accommodation

Reasonable and appropriate accommodation is provided to students with disabilities on a case-by-case basis through an interactive preservice meeting, proper documentation, and an assessment of the

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impact of a particular disability on the academic environment. This accommodation can include, but is not limited to, assistive technology, textbooks in an alternate format, recording lecture content as note-taking assistance, test accommodations, sign language interpreters, and residence life accommodations.

🔗 Please visit the website [Accessibility Resource Center](#) for further information.

Accommodation for Training in Clinical Settings

Please refer to the [Essential Functions of a Radiographer](#) section in this Handbook. ***The inability to perform these skills competently may require withdrawal from the program to protect yourself and the patient population.*** If you have concerns about your ability to perform any essential functions, discuss them with your program advisor or healthcare professional.

NCC Housing and Residence Life

Northampton Community College is the only community college in Pennsylvania to offer on-campus housing for nearly 600 students, as well as free Wi-Fi, parking, and laundry facilities for residents.

🔗 For further information, please visit the NCC college website: [Housing & Residence Life](#).

Library Services

Located on the College Center's fourth floor, the Paul & Harriett Mack Library and ESSA Bank and Trust Foundation Library offer 24/7 digital access and a vast collection of resources. They provide a range of materials, including print and non-print publications, as well as audiovisual materials, hardware, and software. The library has internet access, computers, laptops, self-service printers, photocopiers, and scanners. Additionally, there are lounge areas, individual study compartments, and study rooms for small groups and individuals. Some study rooms are equipped with whiteboards and AV equipment to practice presentations.

The library offers research help and support through chat, email, phone, or "Book a Librarian appointment."

🔗 For further information, please visit the NCC college website: [Library](#).

NCC Learning Center

The Learning Center offers personalized academic coaching and tutoring in a variety of subjects. Regardless of where you take your classes, services are available at the Bethlehem Campus, the Pocono Campus, or online. It is essential to note that tutoring is not limited to students who are struggling in a course. Even the most successful students use the Learning Center to reinforce their understanding of course content and refine their subject-specific study strategies.

🔗 To view their appointment and walk-in schedules, refer to the list of upcoming workshops and events, or create an appointment by registering through "schedule a session" via the NCC college website: [The Learning Center at NCC](#).

Program-Specific Resources

The Radiography Program's peer tutoring program provides valuable support to students by connecting them with trained second-year Radiography students. Our tutors specialize in various areas, including radiographic anatomy, positioning, physics, and radiation safety.

Appointments are required and can be scheduled online after registering through "schedule a session" via the NCC college website: [The Learning Center at NCC](#). We encourage you to utilize this free resource to enhance your understanding of the material, improve your grades, and prepare for your exams.

Wogenrich Laboratory Practice

Students are encouraged to utilize the Wogenrich Laboratory outside of scheduled class time. Open lab times are as follows:

- Monday –Friday 5:00 pm – 10:00 pm
- Saturday & Sunday 9:00 am – 9:00 pm

Students requiring access to lab facilities during off-hours (Monday through Friday, 5:00 p.m. to 7:30 a.m.) or when the campus is closed should contact Public Safety to obtain the necessary access. [Public Safety](#) can be reached at 610-861-5588. Please have your NCC photo ID ready to ensure access.

Students must adhere strictly to the [Laboratory Safety Practices](#) section under "Radiation Safety Policies and Procedures" in this handbook. Serious infractions may warrant immediate withdrawal from the program.

Program Academic Advisors

All students are assigned an Academic Advisor upon their acceptance to NCC. Students can find their assigned advisor's name and contact information by logging into their Workday© account and clicking the "Academics" icon. Their assigned advisor will be posted in their Support Network.

Your academic advisor will help you coordinate your learning experiences and support your progress toward achieving your educational goals. As a Radiography Program major, your advisor will be either the Program Director or the Clinical Education Coordinator.

College and Program Academic Policies

Confidentiality of Educational Records: Family Educational Rights and Privacy Act of 1974 (FERPA)

Northampton Community College respects your privacy and protects your educational records in accordance with the Family Educational Rights and Privacy Act of 1974 (FERPA). This means your records are confidential and secure, and access to them is restricted. Additionally, as required by the Student Right to Know legislation, graduation and transfer rates are available through the [College Navigator: Northampton Community College](#)

🖱 For further information, please visit the NCC college website: [FERPA](#).

NCC Radiography Program Grading Scale

The radiography program utilizes the plus/minus grading system, which differs from the College's scale. To remain competitive with the registry examination's scale, the passing grade is 78% or higher, with no rounding.

Radiography Grading Scale

A	95-100
A-	92-94
B+	89-91
B	86-88
B-	83-85
C+	80-82
C	78-79
F	0-77

Academic Recognition

Dean's List

This honor is awarded to students who have completed a minimum of six credits and have achieved at least a 3.5 GPA on a 4.0 scale during the last completed semester.

Graduation with Honors

Students who complete a minimum of 30 credit hours of coursework in their graduation major at Northampton and have a graduation grade point average of 3.50 or higher in any degree, certificate, or specialized diploma will graduate with honors. The graduation grade point average includes only those courses used toward the major for graduation.

Academic Restart Policy

The Academic Restart policy is intended for students who attended NCC in the past and compiled an unsatisfactory academic record. This one-time-only option allows students to redirect their educational goals and permits them to reset their NCC Grade Point Average and Cumulative Credits earned.

For further information, please visit the NCC college website: [Academic Restart Policy](#).

Academic Standing and Progress

To remain in good academic standing, a student must maintain a minimum grade point average of 2.0 for all work attempted for graduation. NCC is committed to the educational success of every student. Students' Grade Point Average (GPA) will be monitored, and communication will be issued when a student is not in good academic standing.

🔗 For further information, please visit the NCC college website: [Academic Standing & Progress](#).

Academic Policy for Dismissal from Health Professions Programs

The Health Professions Programs office and academic advisors are available to provide support and resources to students struggling academically. Students are encouraged to seek help early and often to prevent falling behind in their studies. The following applies especially to those accepted in the following programs: Diagnostic Medical Sonography, Funeral Service, Nursing, and Radiography.

Any student who does not successfully complete* one (1) course that carries the prefix of the student's Health Sciences major will be dismissed from the program. This policy applies to courses in these programs: Diagnostic Medical Sonography (DMSG), Radiography (RADT), Nursing (NURS), and Funeral Services (FUNS).

If the student is readmitted and does not successfully complete one (1) course that carries the prefix of the student's Health Sciences program, they will be dismissed from the program and will not be eligible to reapply.

*Unsuccessful course completion is defined as a final course grade of F or W.

Incomplete Policy

Under extenuating circumstances, students may request an Incomplete (I) grade. Valid reasons include serious illness, death in the immediate family, or other unforeseen events beyond the student's control. Requests must be made before the final class meeting, and a clear plan must be included for completing the missing work.

The instructor has the final say on approving or denying the request. If approved, they'll outline specific requirements in an "Assignment of Incomplete Grade" form, which will be sent to the Records Office. Then, the student will be contacted.

The deadline to complete the coursework is typically five months (though instructors can set an earlier date) after the original semester's grade due date. Failure to complete the coursework within this timeframe will result in the Incomplete being converted to a specific letter grade, excluding "W" (Withdrawal). Additionally, an Incomplete in a prerequisite course may prevent enrollment in the subsequent course.

 For further information, please visit the NCC college website: [Incomplete Policy](#).

Course Drop and Voluntary Withdrawal

Dropping or withdrawing from a course requires official action through the [Records Office](#). Skipping this process could result in an F grade on your transcript.

Attention Radiography Students: Due to the program's structured scheduling, dropping or withdrawing only applies to the entire program. If you wish to drop one radiography course, you'll automatically be withdrawn from all classes and the program.

Re-entering the program after withdrawal requires a formal application through [Admissions](#).

Medical Withdrawal

If the withdrawal was due to medical reasons, a physician's order must be filed through the [NCC Health and Wellness Center](#) for verification. If your academic and clinical skills are unaffected, you'll be reintegrated into courses from your interrupted semester.

Historically, creating unique schedules that are not coordinated with the cohort can lead to skills that quickly deteriorate when not reinforced through continual practice. Placement in didactic and clinical practice, depending on the time-lapse and the professional judgment of the Clinical Education Coordinator and Program Director, may not coincide with the beginning of the semester in which the student departed.

If academic and clinical vigor is compromised, students must reapply through [Admissions](#).

Involuntary Withdrawal

Involuntary withdrawal is a serious consequence reserved for documented consecutive violations or more severe infractions that significantly impact the student's ability to meet program expectations or pose a potential risk to patient safety or program integrity.

Examples of Potential Grounds for Involuntary Withdrawal: *Violation of Clinical Code of Conduct Policy, Academic Honesty Violation, Violation of HIPAA, Failure to perform Essential Functions of Radiographer, Employer use of NCC-provided Dosimeter, Violation of Laboratory Safety Practices, Preceptor Request for Clinical Transfer of Student, and Violation of Student Employed in Radiology.*


The program director and the Dean of the Health Professions and Science will collaboratively review and discuss any offense that potentially warrants involuntary withdrawal.

Depending on the severity of the violation and the student's history, an appropriate action plan may be implemented, including a verbal or written warning, a corrective action plan, or a disciplinary action plan.

Please refer to the [Program Accountability Forms and Processes](#) section for implementation practices.

Financial Policies

Please note that a drop, withdrawal, or failure to attend successfully and/or complete a course does not absolve a student's financial responsibility for their educational expenses. Students are responsible for all charges assessed, regardless of expected payment from other sources, and will be billed accordingly if the College does not receive such payment. There are several policies regarding payment, refunds, tuition credit, and other bursar-related policies.

 For a detailed list of financial policies, please visit the NCC college website: [Financial Policies](#).

Exit Interview

To gain valuable insights that can help us better support future students, we invite all students withdrawing from the Radiography Program to participate in a brief exit interview with either a program representative or the admissions liaison. An email outlining the reasons for withdrawing from the program is appreciated.

Academic Honesty Violation: College and ARRT Policy

College Academic Honesty Violation

When a faculty member believes that a student has committed an act that violates the academic honesty policy, they will advise the student of the offense, and the penalty imposed. The following are possible outcomes:

- A written warning requiring the assignment to be redone within the instructor's specified time.

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- Faculty members are encouraged to report the incident and action to their division Dean and the Assistant Dean of Students (Bethlehem) or the Associate Dean of Students (Pocono) using the online "Academic Honesty Form" found on the NCC college website: [Reporting Concerns and Complaints](#).
- A failing grade for the assignment, test, or an "F" for a course.
 - Faculty members must report the incident and action to their division Dean and the Assistant Dean of Students (Bethlehem) or the Associate Dean of Students (Pocono) using the online "Academic Honesty Form" on the NCC college website: [Reporting Concerns and Complaints](#).
 - If the faculty member has given an "F" grade for the course as a penalty for a violation of academic honesty, a student may not withdraw from the course while the matter is under appeal or if it is resolved that the "F" grade stands.

The College reserves the right to revoke a previously awarded degree due to the subsequent discovery of academic dishonesty by the student, clerical error by the College, or revocation of credit from institutions of academic accreditation.

- 🔗 For further information, please visit the NCC college website: [Academic Honesty - Policy and Appeal Procedure](#).

ARRT – Violation of Academic Honor Code in Radiography Program

Mastering the theoretical and clinical aspects of the profession requires hard work, perseverance, and a willingness to learn from mistakes. Embrace challenges as opportunities to gain experience and become a competent, confident healthcare professional.

In clinical settings, responsibility and transparency are paramount. Whether you are a student or a seasoned technologist, acknowledging and owning up to errors is crucial. This enables continuous improvement in procedures and protocols, thereby ensuring the safety and well-being of patients. Covering up mistakes hinders this vital process, leading to profound consequences.

The American Registry of Radiologic Technologists (ARRT) takes academic honesty very seriously. Upon application for certification and registration with the ARRT, you must comply with the [ARRT Standards of Ethics](#), including the Rules of Ethics. The application will specifically ask:

- ✓ "Have you ever voluntarily withdrawn—or been suspended, dismissed, or expelled—from an educational program you attended to meet ARRT certification and registration requirements? "

Any instances of cheating, plagiarism, or other forms of dishonesty will jeopardize your eligibility to take the registry exam, putting your dream career on hold. Please refer to the ARRT [Education, Ethics, and Examination Requirement](#) section in this Handbook.

College and Program Code of Conduct Policies

Discrimination, Harassment, and Sexual Misconduct Policy

The official 'Discrimination, Sex-based Harassment, and Misconduct Policy' for Northampton Community College (NCC) is published on the college's website. The following links will provide comprehensive guidance on related definitions, prohibited conduct, reporting protocols, and available resources.

- 🔗 [Discrimination, Harassment, and Sexual Misconduct Policy](#)
- 🔗 [Prohibited Conduct](#)
- 🔗 [Scope/Jurisdiction/Application](#)
- 🔗 [Reporting Responsibilities](#)
- 🔗 [Complaint Resolution Process](#)
- 🔗 [Remedial Actions](#)
- 🔗 [Statement of Rights for Reporting and Responding Parties](#)
- 🔗 [Records](#)

Violation of Discrimination, Harassment, and Sexual Misconduct Policy in a Clinical Setting

Suppose the student experiences any discrimination, harassment, or sexual misconduct by a staff member at the clinical site. Reporting it promptly to the Clinical Education Coordinator or Program Director is essential. We take such incidents seriously and have a transparent process to ensure your well-being and address the issue safely and effectively.

To report an incident, please complete the "Incident with Staff Report Form," which can be found on Trajecsys. Submit the completed form to your Program Director or Clinical Education Coordinator. Within five (5) business days of becoming aware of the action(s) that gave rise to the complaint, they will initiate a thorough fact-finding process to understand the situation and determine the most appropriate course of action.

If the issue cannot be resolved internally and warrants further intervention or disciplinary action, the program will involve the Radiology Administrator for support. Throughout this process, you will be informed of the progress and have access to resources and support from the program.

Student Code of Conduct Policy

As a student at NCC, you're expected to behave in a way that upholds our educational mission. While we respect the jurisdiction of civil authorities, we also have the right and responsibility to ensure a safe and productive learning environment for all.

- 🔗 Misconduct for which a student is subject to disciplinary action includes those listed under "Student Misconduct (non-academic)" on the NCC website: [Student Code of Conduct](#).

Any member of the College community (administrative official, faculty member, employee, or student) may bring a charge under this code against a student by submitting the particulars of the allegation in writing to the Associate Dean of Students at the Bethlehem Campus or the Associate Dean of Student

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Services at the Monroe Campus. In addition to bringing charges under the code, all Northampton students are encouraged to bring all grievances and complaints to the Student Affairs Office (Bethlehem) or the Associate Dean of Student Services Office (Monroe).

- 📎 Please report via the "Concern Reporting Form" located on the NCC website: [Reporting Concerns & Complaints](#).

Any student found responsible for a violation under the Code of Conduct may appeal the decision. The appeal must be filed in writing with the Associate Dean of Student Life at the Bethlehem Campus or the Associate Dean of Student Services at the Monroe Campus within 5 days from the date the student received notification of the disciplinary action.

- 📎 If a student wishes to appeal any action taken under this policy, they should follow the procedures outlined on the NCC website under the "Appeals" section of the [Student Code of Conduct](#).

Clinical Code of Conduct Policy

In the NCC Radiography program, students are expected to behave professionally in clinical settings. Maintaining a professional and respectful environment is crucial for patient care, learning, and the safety of all individuals involved.

Students must treat all individuals (peers, faculty, clinical staff) courteously, respectfully, and with dignity. This includes avoiding verbal or nonverbal communication that is intimidating, harassing, or discriminatory in nature. Students should avert intimidating speech directed at a specific individual in a face-to-face confrontation, which is likely to provoke a violent reaction or require de-escalation.

Students must also uphold the college's [Discrimination, Harassment, and Sexual Misconduct Policy](#). This means the student shall avoid engaging in unwelcome harassing behavior or verbal, written, and/or online conduct that deprives another person of access to education, opportunities, rights, and/or peaceful enjoyment of that place.

Students must respect patients' safety, well-being, and privacy by maintaining the confidentiality of all patient information, including medical records, conversations, and observations. Students are expected to treat patients with compassion and to understand and avoid discriminatory or offensive behavior.

Further examples of unprofessional conduct include aggressive or disrespectful behavior, unethical or dishonest conduct, substance abuse, or threats to patient or staff safety.

Violation of the Clinical Code of Conduct Policy

The program has a zero-tolerance policy for unprofessional conduct that requires de-escalation intervention at a clinical site. Such behavior is considered a significant breach of trust and poses a risk to the safety and well-being of others, resulting in immediate and permanent removal from the program.

Unprofessional behavior, including aggressive or disrespectful behavior, discrimination, harassment, unethical conduct, substance abuse, or threats to patient or staff safety, will not be tolerated.

Depending on the severity of the violation, the consequences may range from removal from the clinical site to dismissal from the program.

If a student is *involuntarily withdrawn* from the Radiography Program, the ARRT must review and clear the student before the student can take an ARRT certification examination. Please refer to the ARRT *Education, Ethics, and Examination Requirement* section in this Handbook.

Policy for Student Employment in Radiology

While working at your clinical site can be a valuable learning experience, it is crucial to remember that you hold two distinct roles: student and employee. These roles have separate expectations and boundaries, and under no circumstances should you use your employment time to complete clinical education requirements. Doing so, such as performing competency or proficiency evaluations while on the clock, constitutes academic dishonesty and will result in severe consequences, including a failing grade, potential suspension, or withdrawal from the program.

NCC-provided dosimeters are never to be worn while working as an employee at any site. Students wearing an NCC dosimeter at a worksite will be *involuntarily withdrawn* from the program. Refer to the *NCC-provided Dosimeter* section in this handbook.

Remember, suspensions and withdrawals are reported to and evaluated by the ARRT, the governing body for Radiography professionals. This may negatively impact your future licensure exam eligibility and career prospects.

Please separate these roles to maintain academic integrity, professional image, and future career aspirations. If you have any questions or concerns regarding this policy, do not hesitate to consult your Program Director or Clinical Education Coordinator for clarification. They are here to support you and ensure you navigate this dual-role experience successfully.

Social Networking Policy

Being active online can be a great way to connect with classmates and foster a sense of community. However, it's essential to do so responsibly. Familiarize yourself with the terms and conditions of each platform you use and avoid posting anything that could compromise your safety or future career.

Your full attention is necessary during classes, labs, and clinical practice. Please refrain from using social media as it can distract you from crucial learning opportunities. Remember, *HIPAA* regulations strictly protect patient privacy. Sharing any information or images that could identify a patient is strictly prohibited and can lead to severe consequences, including program dismissal and legal action.

Treat others online with the same respect you show them in person. Avoid harassment, threats, or damaging someone's reputation. Disagreements are inevitable, but express them respectfully. Remember, online behavior is still subject to the *College and Program Code of Conduct Policies*. Violating these rules can result in disciplinary action. Questions can be directed to the Associate Dean of Student Life at 610-332-6337

Smoking /Tobacco/E-cigarettes Policy at NCC

As part of the College's commitment to the health and well-being of the College community, smoking (e.g., cigarettes, hookahs, e-cigarettes, etc.) and using tobacco products (e.g., chewing tobacco) are prohibited on campus except in designated areas and your vehicle. Violating this rule carries a \$100 fine.

This policy applies to all individuals, including students, faculty, staff, volunteers, contractors, vendors, and visitors, on all college campuses, in college vehicles, in college buildings, in contracted clinical buildings and facilities, and parking lots.

For purposes of this policy:

- Tobacco and smoking-related products are defined as any tobacco or smoking-related products intended to mimic tobacco products or the smoking or vaping of any other substance. This includes, but is not limited to, cigarettes, cigars, cigarillos, smokeless tobacco, electronic cigarettes, pipes, vaping pens, bidis, hookahs, chewing tobacco, and snuff.
- Cannabis and other controlled substances are also prohibited on campus and in any clinical facility.

All college community members are encouraged, if comfortable, to politely remind students, faculty, staff, volunteers, contractors, vendors, and visitors of the prohibition on tobacco and smoking-related products at Northampton Community College, as necessary.

Faculty and staff violating this policy may be reported to their supervisor. Students violating this policy may be reported to the Office of Student Affairs, which may result in dismissal from the Health Professions and Science programs.

Smoking/Tobacco/E-cigarettes Policy at Clinical Sites

Our program prioritizes patient safety and professional conduct in all clinical settings. Smoking (e.g., cigarettes, hookahs, e-cigarettes, etc.) and using tobacco products (e.g., chewing tobacco) are strictly prohibited on the grounds of all clinical sites where we partner for student rotations. This includes all buildings, patient care areas, outdoor spaces, and parking lots.

Non-Compliance: Smoking/Tobacco/E-cigarettes Policy at Clinical Site

The following consequences apply if the student is found to be smoking (e.g., cigarettes, hookahs, e-cigarettes, etc.) and/or using tobacco products (e.g., chewing tobacco) during clinical practice. Non-compliance is reported by the Clinical Preceptor and/or NCC Radiography Staff:

First occurrence

- ✓ *Corrective Action Plan (CAP)*
 - Five (5) points will be deducted from the current clinical course grade.

Second occurrence

- ✓ *Disciplinary Action Plan (DAP)*
 - Ten (10) points will be deducted from the current clinical course grade.

Third occurrence

✓ *Involuntary Withdrawal*

- Withdrawal from Clinical Practice based on continually disregarding the "Smoking/Tobacco/E-cigarettes Policy at Clinical Sites."

Requesting Clinical Transfer

Suppose a transfer request arises from circumstances beyond your control (e.g., staffing cutbacks). In such cases, the Program Director and Clinical Education Coordinator will review the situation and determine the appropriate course of action. This could include extending clinical education (subject to program approval) to make up for missed days.

Requests for transfer during incidents investigated under unprofessional conduct will be denied. Additionally, you may face further disciplinary action or be withdrawn from the program. For more details, please see the Violation of [*Clinical Code of Conduct Policy*](#) section in this handbook. Otherwise, we encourage open communication to address any challenges that may arise during your clinical rotation.

Student Request for Clinical Transfer

Initiate Internal Resolution

Before submitting a formal request, it is highly recommended to discuss any issues directly with your Clinical Preceptor and the Clinical Education Coordinator. Using a respectful and professional tone, clear communication, and collaboration can often resolve concerns without the need for a transfer. Keep a record of these discussions, including dates and outcomes.

Submit Written Request

If an internal resolution isn't possible or suitable (for example, in cases of harassment or safety concerns), you may submit a written Clinical Site Transfer Request to the Program Director and/or Clinical Education Coordinator.

Your request must include:

- Your name, student ID, and current clinical rotation/course and site.
- A clear, factual, and detailed explanation of the reason(s) for your transfer request.
- Specific dates and circumstances related to your concerns.
- Documentation of any attempts at resolution with your Clinical Preceptor or on-site personnel (e.g., dates of conversations, emails exchanged).
- Any supporting documentation relevant to your request (e.g., medical notes, incident reports).

Investigation and Mediation

Within seven (7) working days of receiving your written request, the Program Director and Clinical Education Coordinator will act as mediators, meeting with all parties involved to find a solution. This may include modifications at the current site that address your concerns.

Transfer and Potential Consequences

If a transfer is necessary and approved, the Program Director and Clinical Education Coordinator will actively help you identify and secure a new clinical placement that meets the program's requirements and learning objectives.

While every effort will be made to assist you, it is important to understand that program assistance does not guarantee immediate placement at another location. Transfers depend on the availability of suitable clinical sites and the program's capacity to accommodate such changes.

Reassigning to another site for reasons unrelated to performance is a one-time option. A second transfer request will lead to *involuntary withdrawal*.

Preceptor Request for Clinical Transfer of Student

Clinical education rotation schedules are planned to help students achieve their learning goals and should only be modified when needed. We aim to provide fair and effective clinical experience for each student.

While we anticipate few changes, there are rare cases when a clinical preceptor might need to request a student transfer. These requests are taken seriously, especially if they involve a student's unprofessional behavior, as detailed in the *Clinical Code of Conduct Policy* section of this Handbook.

Documentation and Communication

If a student displays unprofessional conduct, the preceptor should first document specific instances and try to address the behavior directly with the student. Clear and prompt communication can often resolve problems.

If unprofessional behavior continues despite direct intervention, the preceptor should notify the Clinical Education Coordinator in writing. This notification must include:

- The specific concerns about the student's conduct.
- Dates and times of incidents.
- Any corrective actions attempted by the preceptor.

Investigation and Mediation

Within seven (7) working days of receiving your written request, the Program Director and Clinical Education Coordinator will investigate the situation. This may involve interviewing the student, preceptor, and any relevant witnesses. We will attempt to mediate a solution, which may include counseling, additional training, or other interventions designed to address the students' conduct and support their success.

Transfer and Potential Consequences

If mediation fails and the student's behavior warrants a transfer, the Program Director and Clinical Education Coordinator will work together to find an alternative suitable placement. It's important to understand that while we will assist, securing another placement is not guaranteed. Transfers depend on the availability of appropriate sites.

If an alternative placement cannot be secured because of the student's conduct or if the student's unprofessional behavior persists, the student may face involuntary withdrawal or suspension from the program.

Miscellaneous Program Policies

“Already Did That”

While the sentiment behind "I already did that" might be an efficient way to move forward, uttering it as a radiography student is perceived as offensive. It reflects dismissiveness towards valuable repetition, neglecting the opportunity to refine your skills and build confidence. Students, like radiographers, cannot refuse to do examinations. There is something to be learned from every patient interaction.

Noncompliance: “Already Did That”

The following steps will be taken in response to any statement resembling “Already Did That” reported by the Clinical Preceptor and/or NCC Radiography Staff:

First occurrence

- ✓ *Written Verbal Warning (WVW)*

Subsequent occurrences

- ✓ *Continual Non-Compliance (CNC)*
 - Two (2) points are deducted from the current clinical course grade for each incident.

Cell Phones/Smartwatches/Earbuds: Didactic and Clinical

All cell phones, smartwatches, and earbuds must be kept away during didactic assessments (exams, quizzes, etc.) to promote fairness and uphold academic integrity. Using these devices during evaluations is considered academic dishonesty and can result in serious consequences, including dismissal from the program and ineligibility for the ARRT registry exam.

To ensure complete focus on learning and patient safety, Clinical Preceptors may ask students to store away smartwatches, cell phones, and earbuds during competency exams and situations where they might distract from learning or patient care. Excessive use or failure to follow this requirement, as communicated by the Preceptor, will be reported and could impact your clinical evaluation.

Noncompliance: Cell Phones/Smart Watches/Earbuds at Clinical

The following steps will be taken in response to inappropriate cell phone and smart watch usage reported by the Clinical Preceptor and/or NCC Radiography Staff.

First occurrence

- ✓ *Written Verbal Warning (WVW)*

Subsequent occurrences

- ✓ *Continual Non-Compliance (CNC)*
 - Two (2) points are deducted from the current clinical course grade for each incident.

Personal Laptops

Personal laptops can be beneficial learning tools when used properly. They allow you to take notes, access learning materials, and engage in classroom activities. However, be aware of how your laptop use might affect the learning environment for yourself and others. Loud typing, distracting websites, or inappropriate content can interfere with the learning process for everyone. Instructors may ask you to close your laptop or sit elsewhere if your laptop use becomes disruptive.

Personal laptops are not allowed in a clinical setting. Students must concentrate on patient care, hands-on learning, and observing clinical practices. If the Clinical Preceptor indicates laptop use, failure to comply will be reported.

Noncompliance: Personal Laptops at Clinical

The following steps will be taken regarding personal laptop usage reported by the Clinical Preceptor and/or NCC Radiography Staff.

First occurrence

- ✓ *Written Verbal Warning (WVW)*

Subsequent occurrences

- ✓ *Continual Non-Compliance (CNC)*
 - Three (3) points are deducted from the current clinical course grade for each incident.

Missing in Action — Student cannot be located during Clinical Practice

Maintaining open communication and immediate accessibility during clinical rotations is an essential requirement. Repeated unreachability during clinical may result in disciplinary action, potentially impacting your progress and course standing.

Non-Compliance: Missing in Action at Clinical

The following consequences apply if the student cannot be located during clinical practice, as reported by the Clinical Preceptor and/or NCC Radiography Staff:

First occurrence

- ✓ *Corrective Action Plan (CAP)*
 - Five (5) points will be deducted from the current clinical course grade.

Second occurrence

- ✓ *Disciplinary Action Plan (DAP)*
 - Five (5) points will be deducted from the current clinical course grade.
 - Forfeiture of one (1) day of clinical must be made up.
 - Further consequences apply if the student has already exceeded two or more days of clinical absence. Refer to *Clinical Time Off (CTO)*

Third occurrence

✓ *Involuntary Withdrawal*

- Withdrawal from Clinical Practice based on continually disregarding the "Missing in Action" Policy.

Leaving Clinical Practice Without Permission

Clinical practice demands your full commitment and attendance during scheduled sessions. Leaving early without permission interrupts patient care and affects your learning experience.

If unforeseen circumstances require an early departure, immediately inform your preceptor to discuss alternative arrangements for achieving your learning objectives.

Remember, unexcused absences can significantly impact your progress, potentially causing delays or jeopardizing your ability to complete the program.

Non-Compliance: Leaving Clinical Practice Without Permission

The following consequences will occur if the student leaves clinical without permission, as reported by the Clinical Preceptor and/or NCC Radiography Staff:

First occurrence

✓ *Corrective Action Plan (CAP)*

- Five (5) points will be deducted from the current clinical course grade.

Second occurrence

✓ *Disciplinary Action Plan (DAP)*

- Five (5) points will be deducted from the current clinical course grade.
- Forfeiture of one (1) day of clinical must be made up.
 - Further consequences apply if the student has already exceeded two or more days of clinical absence. Refer to *Clinical Time Off (CTO)*

Third occurrence

✓ *Involuntary Withdrawal*

- Withdrawal from Clinical Practice based on continually disregarding the "Leaving Clinical Practice without Permission" Policy.

Leaving Clinical Rotation Without Permission

Clinical rotations are scheduled in advance to ensure fair access to learning opportunities. Leaving a rotation or missing it without prior permission is strictly forbidden. Such unauthorized absences disrupt patient care and undermine the educational experience.

If unforeseen circumstances require you to leave your assigned rotation, promptly contact your preceptor to discuss alternative ways to meet your learning objectives.

Non-Compliance: Leaving Clinical Rotation Without Permission

The following consequences will be enforced if the student leaves clinical without permission, as reported by the Clinical Preceptor and/or NCC Radiography Staff:

First occurrence

- ✓ *Corrective Action Plan (CAP)*
 - Five (5) points will be deducted from the current clinical course grade.

Second occurrence

- ✓ *Disciplinary Action Plan (DAP)*
 - Five (5) points will be deducted from the current clinical course grade.
 - Forfeiture of one (1) day of clinical must be made up.
 - Further consequences apply if the student has already exceeded two or more days of clinical absence. Refer to *Clinical Time Off (CTO)*

Third occurrence

- ✓ *Involuntary Withdrawal*
 - Withdrawal from Clinical Practice based on continually disregarding the "Leaving Clinical Rotation without Permission" policy.

Legislative Clinical Policy

Confidentiality of Patient Information: HIPAA

Students must comply with HIPAA at their clinical sites. This requirement is fulfilled by acknowledging and signing the NCC Departmental Confidential Policy: HIPAA form upon acceptance into the program. For further information, please refer to the 1996 Health Insurance Portability and Accountability Act (HIPAA) section in this Handbook.

Any protected health information (PHI) documentation, such as forms or image critiques, must remain securely stored in the designated area within the clinical site. This information should **never** be taken home or shared outside authorized channels. When requests for confidential information about the clinical center or patients are received, please direct them to the supervising radiographer, preceptor, radiologist, or attending physician. This applies to written and verbal communication at the clinical site or elsewhere.

Taking HIPAA regulations lightly is not an option. Failing to comply with these policies will result in significant disciplinary action, including potential withdrawal from the program.

Patient's Bill of Rights

There is not one single Patient's Bill of Rights. A typical example is provided below to acquaint you with the rights and expectations of patients and the clinical site where you will be assigned.

A hospital serves many purposes. Hospitals work to improve people's health, treat individuals with injuries and diseases, educate healthcare professionals, patients, and community members, and enhance understanding of health and disease. In conducting these activities, this institution works to respect your values and dignity. While you are a patient in the hospital, your rights include the following:

- You have the right to be provided with considerate and respectful care.
- You have the right to be well-informed about your illness, treatments, and outcomes and to discuss this information with your doctor. You have the right to know the names and roles of people treating you.
- You have the right to consent to or refuse treatment, as permitted by law, throughout your hospital stay. You will receive other needed and available care if you reject the recommended treatment.
- You have the right to have an advanced directive, such as a living will or health care proxy. These documents express your choices about your future care or name someone to make decisions on your behalf if you are unable to speak for yourself. If you have written an advanced directive, you should provide a copy to the hospital, your family, and your doctor.
- You have the right to privacy. The hospital, your doctor, and other healthcare providers 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 been permitted to release information or reporting is required or allowed 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 your medical records and to have the information explained, except when restricted by law.

- You have the right to expect the hospital to give you necessary health services to the best of its ability. Treatment, referral, or transfer may be recommended. You will be informed of risks, benefits, and alternatives if transfer is recommended or requested. 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 your treatment and care. These relationships may be with educational institutions, healthcare providers, or insurers.
- You have the right to consent, decline, or participate in research affecting your care. If you choose not to participate, you will receive the hospital's most effective care.
- You can be told of realistic care alternatives when hospital care is no longer appropriate.
- You have the right to know about hospital rules affecting you and your treatment, charges, and payment methods. You have the right to know about hospital resources, such as patient representatives or ethics committees, who 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 any past illnesses, hospital stays, and medications you are currently using. You are responsible for asking questions when you do not understand information or instructions. If you believe you cannot follow through with your treatment, it is essential to inform your doctor.

The hospital works to provide care efficiently and fairly to all patients and the community. Your health depends not just on your hospital care but, in the long term, on the decisions you make in your daily life.

Program Accountability Forms and Process

This section outlines the proper procedures for addressing various program concerns, ranging from minor issues to serious violations. Addressing learning opportunities early helps prevent them from escalating. If a situation appears serious or involves significant ethical or safety concerns, prompt action may be necessary. Your cooperation is essential for a quick and thorough investigation of these cases.

While the usual process involves verbal and written notifications, extreme misconduct cases may justify skipping these steps. In such situations, immediate suspension or removal from the radiography program may be required.

*Program Team Members: Faculty, Clinical Preceptor, Clinical Education Coordinator, Professional Clinical Student Supervisor, or Program Director.

Summary of Forms

Responsible Accountability in Student Education (RAISE) Form

A **Program Team Member* provides the Responsible Accountability in Student Education (RAISE) Form to support your success proactively through open communication. RAISE is a method designed to help support your success by offering an early opportunity to address challenges and formally recommend program resources. This process does not exclude necessary disciplinary actions or suggest a preliminary sanction.

If you receive a RAISE, be ready to discuss, in person only and with the author, the identified concerns openly and honestly. Work together to create a clear, personalized action plan to improve your performance and get back on track. Meet again, in person only, and with the author, to follow up on what worked and what did not.

Non-participation in the RAISE process is at your discretion and will be documented in your files, accompanied by a signature verifying the author's attempt to assist in your success. RAISE Forms will be stored in your student file for recordkeeping.

It is prudent to understand that the RAISE does not indicate the **Program Team Member's* responsibility to provide tutoring; they will formally advise tutoring if needed. If your academic performance in radiography-related courses is a concern, you are responsible for proactively scheduling tutoring sessions through *program-specific resources*.

Written Verbal Warning (WVW)

A Written Verbal Warning (WVW) is an initial, informal communication between a student and any **Program Team Member*. This conversation aims to address minor concerns early on, allowing open feedback and course correction before further action is necessary. Documentation is verified between the student and the involved **Program Team Member*.

A WVW typically precedes a "Continual Non-Compliance (CNC)" or "Written Warning (WW)" unless bypassed to higher levels, depending on the seriousness of the situation.

A WVV is completed for minor issues that include, but are not limited to, the following:

- *Late Policy (5th Offense: 2-point deduction)*
- *Trajecsys Clock in/out (1st Offense)*
- *Notification Policy (1st Offense)*
- *Clinical Education Dress Code (1st Offense: 1-day forfeit)*
- *Cell Phones/Smart Watches/Earbuds at Clinical (1st Offense)*
- *Personal Laptops (1st Offense)*
- *"Already Did That" (1st Offense)*
- *Competency Refusal (1st Offense: 2-point deduction)*
- *Clinical Attendance Policy Excluding Winter Clinical (3rd Day Offense: 2-point deduction with make-up of day missed)*
- *Winter Clinical Attendance Policy (1st Day Offense: 2-point deduction with make-up of day missed)*

Continual Non-Compliance (CNC)

Each student has running documentation in their file of repeated occurrences categorized as 'Continuous Non-Compliance (CNC).' An incident that has already resulted in a Written Verbal Warning (WVV) may result in a point deduction or forfeiture of days from the current clinical rotation. Documentation is verified between the student and the involved **Program Team Member*.

It is essential to note that repeated CNC item occurrences are documented and not renewed on a semester-by-semester basis. For example, point deductions are enforced after the fifth late arrival. Any late submissions after that will result in point deductions or forfeiture of days from the clinical rotation for the remainder of the program.

Please select each link or refer to the *Non-Compliance Flow Chart* under Appendix F, which summarizes the following list of CNCs and their resulting outcomes:

- *Late Policy (6 or more Offenses: 2-point deduction)*
- *Trajecsys Clock in/out (2 or more Offenses: 2-point deduction)*
- *Notification Policy (2nd & 3rd Offenses: 2-point deduction)*
- *Clinical Education Dress Code (2 or more Offenses: 2-point deduction and 1-day forfeit)*
- *Program Meeting (Any offense: 1-day forfeit)*
- *Cell Phones/Smart Watches/Earbuds (2 or more Offenses: 2-point deduction)*
- *Personal Laptops at Clinical (2 or more Offenses: 3-point deduction)*
- *"Already Did That" (2 or more Offenses: 2-point deduction)*
- *Competency Refusal (2 or more Offenses: 3-point deduction)*

Written Warning (WW)

A Written Warning (WW) is utilized if a Written Verbal Warning (WVV) contradicts the same issue or if the problem warrants an escalated action plan. Documentation is verified between the student and the involved *Program Team Member*.

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A WW typically precedes a "Corrective Action Plan" unless bypassed to higher levels, depending on the seriousness of the situation.

A WW is generally completed for significant violations that include, but are not limited to, the following:

- *Notification Policy (4th Offense: 2-point deduction)*
- *Clinical Attendance Policy Excluding Winter Clinical (4th Day Offense: 2-point deduction with make-up of day missed)*
- *Winter Clinical Attendance Policy (2nd Day Offense: 2-point deduction with make-up of day missed)*

Corrective Action Plan (CAP)

A Corrective Action Plan (CAP) is completed for consecutive violations (prior Written Warning (WW) for the same offense) or more critical violations that may warrant point deductions and/or forfeiture of days from the current clinical rotation. Documentation is verified between the student and the involved **Program Team Member*.

A CAP typically precedes the "Disciplinary Action Plan" unless it is bypassed to higher levels, depending on the seriousness of the situation.

A CAP is generally completed for significant violations that include but are not limited to the following:

- *Notification Policy (5th Offense: 5-point deduction)*
- *Smoking/Tobacco/E-cigarettes Policy at Clinical Site (1st Offense: 5-point deduction)*
- *Direct and Indirect Supervision (1st Offense)*
- *Missing in Action at Clinical (1st Offense: 5-point deduction)*
- *Leaving Clinical Practice without Permission (1st Offense: 5-point deduction)*
- *Leaving Clinical Rotation without Permission (1st Offense: 5-point deduction)*
- *Clinical Attendance Policy Excluding Winter Clinical (5th Day Offense: 2-point deduction with make-up of day missed)*
- *Winter Clinical Attendance Policy (3rd Day Offense: 2-point deduction with make-up of day missed)*

Disciplinary Action Plan (DAP)

A Disciplinary Action Plan (DAP) is completed for consecutive violations (prior Corrective Action Plan (CAP) for the same offense) or more critical violations that may warrant point deductions and/or forfeiture of days from the current clinical rotation. Documentation is verified between the student and the involved **Program Team Member*.

A DAP typically precedes "Suspension" or "Involuntary Withdrawal" unless bypassed to higher levels, depending on the seriousness of the situation.

A DAP is completed for consecutive significant violations or more critical violations that include but are not limited to the following:

- Consecutive offenses carried over from the Corrective Action Plan (CAP)

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- *Notification Policy (6th Offense: 5-point deduction)*
- *Smoking /Tobacco /E-cigarettes Policy at Clinical Site (2nd Offense: 10-point deduction)*
- *Direct and Indirect Supervision (2nd Offense)*
- *Missing in Action at Clinical (2nd offense: 5-point deduction and 1-day forfeit)*
- *Leaving Clinical Practice without Permission (2nd offense: 5-point deduction and 1-day forfeit)*
- *Leaving Clinical Rotation without Permission (2nd offense: 5-point deduction and 1-day forfeit)*
- *Clinical Attendance Policy Excluding Winter Clinical (6th Day Offense: 2-point deduction with make-up of day missed)*
- *Winter Clinical Attendance Policy (4th Day Offense: 2-point deduction with make-up of day missed)*

The Program Director and the Dean of Health Professions & Science communicate any offense that warrants a DAP, and the offense may earn a change in status to either involuntary withdrawal or suspension.

Involuntary Withdrawal

Involuntary Withdrawal is completed for consecutive violations (prior Disciplinary Action Plan (DAP) for the same offense) or more severe violations. Documentation is verified between the student and the involved **Program Team Member* with further communication between the student, the Program Director, and the Dean of Health Professions & Science.

Involuntary Withdrawal is completed for consecutive significant or critical violations or more severe violations that include but are not limited to the following:

- Consecutive offenses carried over from the Corrective Action Plan (CAP)
- Consecutive offenses listed under the Disciplinary Action Plan (DAP)
- *Notification Policy (7th Offense)*
- *Smoking/Tobacco/E-cigarettes Policy at Clinical Site (3rd Offense)*
- *Direct and Indirect Supervision (3rd Offense)*
- *Missing in Action at Clinical (3rd Offense)*
- *Leaving Clinical Practice without Permission (3rd Offense)*
- *Leaving Clinical Rotation without Permission (3rd Offense)*
- *Clinical Attendance Policy Excluding Winter Clinical (7th Day Offense)*
- *Winter Clinical Attendance Policy (5th Day Offense)*
- *Employer Use of NCC-Provided Dosimeter*
- *Essential Functions of a Radiographer*
- *Failure of the RADT course*
- *Academic Honesty Violation*
- *Laboratory Safety Practices*
- *HIPAA Violation*
- *Clinical Code of Conduct Policy*
- *Student Request for Clinical Transfer (2nd Request)*
- *Preceptor Request for Clinical Transfer of Student*
- *Student Employment in Radiology*

The student will be withdrawn from the program if involuntary withdrawal is maintained. However, if the decision is rescinded, the student will be given, if reasonable, the opportunity to make up the missed clinical practice time before the *six (6) week extension*. Otherwise, time must be made up during the *six (6) week extension*.

Suspension

Depending on the violation, a student may be suspended instead of being involuntarily withdrawn (i.e., for non-compliance with the class attendance policy). Documentation is verified between the student and the involved **Program Team Member*, with further communication between the student, the Program Director, and the Dean of Health Professions & Science.

If suspension is maintained, the student will be withdrawn from clinical practice, and the days missed will be made up during the *six (6) week extension* of the last clinical education course. However, if the decision is rescinded, the student will be given, if reasonable, the opportunity to make up the missed clinical practice time before the *six (6) week extension*.

Student Acknowledgement of Forms and Processes

It's important to remember that signing an accountability form, while necessary for documentation and acknowledgment, doesn't determine the validity of the concerns raised. Even without a signature, documented inappropriate or concerning behavior remains relevant and requires attention.

We prioritize fair and transparent communication. Accountability forms serve as official records of issues and potential consequences, enabling open dialogue and upholding due process for students and program personnel. While a missing signature might signal disagreement or apprehension, it doesn't eliminate the need for constructive discussions.

In such situations, we remain committed to open communication to understand your perspective and work collaboratively toward resolving the matter. Our program is dedicated to supporting you through challenges and helping you achieve your goals and success.

General Process

The Clinical Preceptor(s) will have copies of the forms at each clinical site and will be found on Trajecsys. Forms are also available via the JotForm program. The parties involved are the students and the appropriate **Program Team Member*. The following are general guidelines for initiating an action plan:

- The witness documents the issue or concern.
- Depending on involvement, the **Program Team Member* will discuss the issue/concern with the student.
- During the conference, the student will be given an opportunity for rebuttal.
- The **Program Team Member* will initiate the form, and the student will verify and complete it.
 - *Written Verbal Warning (WVW)*
 - Includes but is not limited to:

- *Late Policy (5th Offense: 2-point deduction)*
- *Trajecsys Clock in/out (1st Offense)*
- *Notification Policy (1st Offense)*
- *Clinical Education Dress Code (1st Offense: 1-day forfeit)*
- *Cell Phones/Smart Watches/Earbuds at Clinical (1st Offense)*
- *Personal Laptops at Clinical (1st Offense)*
- *"Already Did That" (1st Offense)*
- *Competency Refusal (1st Offense: 2-point deduction)*
- *Clinical Attendance Policy Excluding Winter Clinical (3rd Day Offense: 2-point deduction with make-up of day missed)*
- *Winter Clinical Attendance Policy (1st Day Offense: 2-point deduction with make-up of day missed)*
- **Continual Non-Compliance (CNC)**
 - Includes but is not limited to:
 - *Late Policy (6 or more Offenses: 2-point deduction)*
 - *Trajecsys Clock in/out (2 or more Offenses: 2-point deduction)*
 - *Notification Policy (2nd & 3rd Offense: 2-point deduction)*
 - *Clinical Education Dress Code (2 or more Offenses: 2-point deduction and 1-day forfeit)*
 - *Program Meeting (Any offense: 1-day forfeit)*
 - *Cell Phones/Smart Watches/Earbuds at Clinical (2 or more Offenses: 2-point deduction)*
 - *Personal Laptops at Clinical (2 or more Offenses: 3-point deduction)*
 - *"Already Did That" (2 or more Offenses: 2-point deduction)*
 - *Competency Refusal (2 or more offenses: 3-point deduction)*
- **Written Warning (WW)**
 - Includes but is not limited to:
 - *Notification Policy (4th Offense: 2-point deduction)*
 - *Clinical Attendance Policy Excluding Winter Clinical (4th Day Offense: 2-point deduction with make-up of day missed)*
 - *Winter Clinical Attendance Policy (2nd Day Offense: 2-point deduction with make-up of day missed)*
- **Corrective Action Plan (CAP)**
 - Includes but is not limited to:
 - *Notification Policy (5th Offense: 5-point deduction)*
 - *Smoking /Tobacco/Tobacco/E-cigarettes Policy at Clinical Site (1st Offense: 5-point deduction)*
 - *Direct and Indirect Supervision (1st Offense)*
 - *Missing in Action at Clinical (1st Offense: 5-point deduction)*
 - *Leaving Clinical Practice without Permission (1st Offense: 5-point deduction)*
 - *Leaving Clinical Rotation without Permission (1st Offense: 5-point deduction)*
 - *Clinical Attendance Policy Excluding Winter Clinical (5th Day Offense: 2-point deduction with make-up of day missed)*
 - *Winter Clinical Attendance Policy (3rd Day Offense: 2-point deduction with make-up of day missed)*

- ***Disciplinary Action Plan (DAP)***
 - Includes but is not limited to:
 - *Notification Policy (6th Offense: 5-point deduction)*
 - *Smoking /Tobacco/Tobacco/E-cigarettes Policy at Clinical Site (2nd Offense: 10-point deduction)*
 - *Direct and Indirect Supervision (2nd Offense)*
 - *Missing in Action at Clinical (2nd offense: 5-point deduction and 1-day forfeit)*
 - *Leaving Clinical Practice without Permission (2nd offense: 5-point deduction and 1-day forfeit)*
 - *Leaving Clinical Rotation without Permission (2nd offense: 5-point deduction and 1-day forfeit)*
 - *Clinical Attendance Policy Excluding Winter Clinical (6th Day Offense: 2-point deduction with make-up of day missed)*
 - *Winter Clinical Attendance Policy (4th Day Offense: 2-point deduction with make-up of day missed)*
- ***Involuntary Withdrawal***
 - Includes but is not limited to:
 - *Notification Policy (7th Offense)*
 - *Smoking/Tobacco/E-cigarettes Policy at Clinical Site (3rd Offense)*
 - *Direct and Indirect Supervision (3rd Offense)*
 - *Missing in Action at Clinical (3rd Offense)*
 - *Leaving Clinical Practice without Permission (3rd Offense)*
 - *Leaving Clinical Rotation without Permission (3rd Offense)*
 - *Clinical Attendance Policy Excluding Winter Clinical (7th Day Offense)*
 - *Winter Clinical Attendance Policy (5th Day Offense)*
 - *Employer Use of NCC-Provided Dosimeter*
 - *Essential Functions of a Radiographer*
 - *Failure of the RADT course*
 - *Academic Honesty Violation*
 - *Laboratory Safety Practices*
 - *HIPAA Violation*
 - *Clinical Code of Conduct Policy*
 - *Student Request of Clinical Transfer (2nd Request)*
 - *Preceptor Request for Clinical Transfer of Student*
 - *Student Employment in Radiology*
- The form must be faxed (610-861-4581) or emailed to the Clinical Education Coordinator, Professional Clinical Student Supervisor, and/or Program Director. Completed forms are sent to the Program Director for placement in the student's program file.

College and Program Grievance Policies

Academic Appeals Policy

Appeals of grades, penalties for academic dishonesty, and appeals of actions related to the Professional Conduct policy will begin informally through discussion between the student and the faculty member involved. They will proceed, if continued, through a series of formal steps culminating in a hearing before an Academic Appeals Committee, which will present its findings and recommendations to the Vice President for Academic Affairs for a decision.

A quorum is required for a final recommendation. The decision of the Vice President for Academic Affairs is final unless it differs from that of the committee; in such cases, the student may appeal to the President, whose decision is final.

The appeals procedure is student-motivated; the student is primarily responsible for keeping the action in progress.

 This policy can be reviewed by clicking the following link: [Academic Appeals](#).

Steps for Assertions Not Covered Under Academic Appeals

Suppose the student has a concern or complaint unrelated to an academic appeal. In that case, they are encouraged to discuss the issue directly with the person or people involved to resolve it informally. If an informal discussion is unsuccessful, the following steps apply:

Note: A business day is defined as any day when a full schedule of classes is in session (this excludes Saturdays and Sundays).

1. The student:
 - must submit a written complaint to the Radiography Program Director.
2. The Director:
 - will acknowledge receipt of the complaint within three (3) business days.
 - will investigate the complaint, gather relevant information, and attempt to facilitate a resolution.
 - will submit a written response to the student within five (5) business days of acknowledging receipt of the complaint.
3. If the student is unsatisfied with the Director's response, they may appeal the decision, in writing, to the Dean of the School of Health Professions and Science within five (5) business days of receiving it.
 - Include the following in writing an appeal:
 - 1) Brief outline of steps taken towards resolving the issue
 - 2) Decision given by the Director handling the complaint
 - 3) Reason for the appeal
 - 4) Possible solution(s) to the complaint that would satisfy the student
 - 5) Student contact information (phone, email, etc.)
4. The Dean of the School of Health Professions and Science:
 - will acknowledge receipt of the appeal within three (3) business days.

- will review the complaint, the Director's response, and any additional information provided by the student.
 - will provide a written recommendation to the student within five (5) days of acknowledging the appeal.
5. If the student is unsatisfied with the Dean's response, they may appeal the decision, in writing, to the Vice President of Academic Affairs within five (5) business days of receiving it.
- Include the following in writing an appeal:
 - 1) Brief outline of steps taken towards resolving the issue
 - 2) Decision given by the Director handling the complaint
 - 3) Decision given by the Dean of the School of Health Professions and Science
 - 4) Reason for the appeal
 - 5) Possible solution(s) to the complaint that would satisfy the student
 - 6) Student contact information (phone, email, etc.)
6. The Vice President of Academic Affairs:
- will acknowledge receipt of the appeal within five (5) business days.
 - will review the complaint, the Director's and Dean's response, and any additional information provided by the student.
 - will provide the student with a written recommendation/decision within five (5) days of acknowledging the appeal.
7. The recommendation/decision by the Vice President of Academic Affairs is final.

Steps for Assertions of Non-Compliance with the JRCERT Standards

The Joint Review Committee on Education in Radiologic Technology (JRCERT) establishes and upholds standards for quality radiography education programs. These standards ensure that graduates are competent and prepared for safe and effective practice.

According to JRCERT Standard 1.5, students may raise concerns if they believe the program does not adhere to the JRCERT standards. However, it is required to attempt resolution within the program first. Please refer to the following resolution steps:

Attempt at an Internal Resolution:

- Discuss your concerns directly with the Program Director or other relevant faculty members. They may be able to address the issues promptly.
- If the matter cannot be resolved informally, the student may report a grievance by following the guidelines in this handbook's [Assertions Not Covered Under Academic Appeals](#) section.

Contacting JRCERT:

- If you have exhausted internal avenues and still believe the program is non-compliant, you may contact JRCERT directly.
- To submit a formal complaint to JRCERT, complete the Allegations Reporting Form on their website. Provide detailed information and supporting evidence for your allegations.

College and Program Safety Policies

Campus Public Safety Policy







NCC is concerned about the safety and welfare of all individuals who visit, study, or work at the College. We believe every student, employee, and visitor has the right to be part of a safe environment that does not tolerate misconduct.

Urgent concerns should be reported to Campus [Public Safety](#) at 610-861-5588 (the Bethlehem Campus radio-linked number) or by 9-1-1.

Non-urgent concerns may be reported via the Online Reporting Forms available on the Reporting Concerns and Complaints website.

Public Safety Resources and Emergency Info Links

The Department of Public Safety equips our campus community with a variety of informational resources.

-  [The NCC Department of Public Safety](#)
-  [Public Safety Resources](#)
-  [Evacuation Procedures](#)
-  [Bethlehem Quick Reference Guide](#)
-  [All Campus Emergency Guidelines](#)
-  [Panic Buttons](#)

Infectious Disease Precautions

To safeguard your health and ensure the well-being of others, remember your double duty: protect yourself and your patients. This starts with staying up-to-date on vital immunizations against common airborne illnesses, such as chickenpox, diphtheria, flu, measles, mumps, rubella, TB, whooping cough, and COVID-19.

Personal protective equipment (PPE) becomes your shield when protecting yourself on the frontlines. The type of PPE you wear will vary depending on your specific rotation, environment, and patient care requirements. Always adhere to the established protocols at your clinical site.

Non-compliance with PPE guidelines is taken seriously. Should you be found in violation, you will be removed from the clinical site for the day and expected to make up for the missed hours. Repeated disregard for these essential precautions will lead to escalating consequences, potentially culminating in program withdrawal.

By diligently maintaining your immunizations and following PPE protocols, you contribute to a safe and healthy environment for yourself, your patients, and the entire healthcare community.

Exposure to Infectious Disease

Tuberculosis:

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Health Professions students will need to be evaluated annually for TB. If any employee or student contracts active tuberculosis (not latent or inactive tuberculosis), they shall be removed from their job/classroom/dorm setting until medical documentation and laboratory results have been received at the Health and Wellness Center to confirm diagnosis and mode of treatment.

Signed documentation from a licensed physician must state that the student is not in an infectious state. These forms are available at the [Health and Wellness](#) Center. After that, the treating physician must submit a progressive note annually and/or a tuberculosis screening questionnaire at the Health and Wellness Center.

Blood-borne pathogens:

Suppose any employee/student has an exposure incident (as defined by OSHA, it is described as a specific eye, mouth, other mucus membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials that result from performing a duty). In that case, the following procedure should be observed.

The individual should immediately inform their instructor or immediate supervisor, wash the exposed area thoroughly with water, and report to NCC's Health and Wellness Center. For off-campus or clinical sites, staff/students should inform their supervisor/instructor of the exposure. Hospital protocol should be followed and communicated to the [Health and Wellness](#) Center for clinical exposure.

An Incident or Exposure form must be completed. The staff/student will be counseled at the Health and Wellness Center and, if appropriate, will undergo baseline testing for HBV and HIV. All confidential documentation will be held at the [Health and Wellness](#) Center. The staff/student is to be followed by the Health and Wellness Center for re-evaluation and assessment during treatment.

Other exposures or possible exposures:

Since the pandemic, the Health and Wellness Center has been communicating rigorous guidance for exceptional cases of infectious disease. Guidance is continually under review and subject to change. Follow the College's Health and Wellness website guidelines for [Health Issues](#) in a public health emergency. In any event, the student should also consult with their healthcare provider.

Accidents on Campus or During Clinical Education

All student-related accidents on campus or at clinical that result in patient injury, personal injury, personnel injury, or equipment damage must be immediately reported. Documenting the incident and stating the facts as soon as possible is essential.

If a serious injury or illness occurs on campus, call [Public Safety](#) at ext. 5588 or 610-861-5588. Provide the Dispatcher with as much information as possible about the injured person and your location. Do not move an injured person and keep them as comfortable as possible until help arrives. Public Safety will contact 911 as needed.

The Health Agency prioritizes your safety and well-being by providing emergency medical care for any injury or illness you encounter during clinical education. The hospital's emergency room will treat the student for injuries or potentially infectious exposures that may have occurred at the clinical site. Hence,

students should always have their health insurance information available. A copy of the incident report must be forwarded to the Clinical Education Coordinator and the NCC [Health and Wellness](#) Center.

Please note: While the Health Agency will facilitate emergency care and insurance coordination, you remain responsible for any associated medical expenses. We encourage you to understand your health insurance plan and its limitations to ensure adequate coverage for potential medical needs during your clinical rotations.

Magnetic Resonance Imaging (MRI) Safety

Magnetic Resonance Imaging (MRI)

As a student, you will have the opportunity to shadow or train in Magnetic Resonance Imaging (MRI). According to JRCERT Standard 5.3, students must complete MRI orientation and screening, which reflects the current American College of Radiology (ACR) MR safety guidelines, prior to the clinical experience. The presence of ferromagnetic non-removable devices, such as implants, does not prevent a student from completing the radiography program.

Pre-clinical orientation and documentation ensure that:

1. The student knows the hazards associated with the MRI environment.
2. The student may safely enter the MRI environment.
3. The clinical staff does not unintentionally place the student in an unsafe environment.

Before starting clinical, students must complete the following during their pre-clinical session in RADT107-Clinical Practice I.

- JRCERT MRI module training course with a requirement of attaining a grade of 100%
- Complete the *MRI Safe Practices Information, Screening, and Acknowledgement Form*

Training is reinforced in the student's third and fifth semesters, prior to an MRI rotation. According to the hospital protocol, the clinical staff will review the students' suitability for safely rotating in the area. If the screening flags an area of concern, additional screening may be necessary, for example, pre-MRI orbit radiographs, which may require a physician's order.

Safety Guidelines

The following was adapted from the [2024 ACR Manual on MR Safety](#):

The American College of Radiology has defined four safety zones within MRI facilities. The following diagram depicts the scanner environment's four areas (I-IV) with increasing magnetic field exposure.

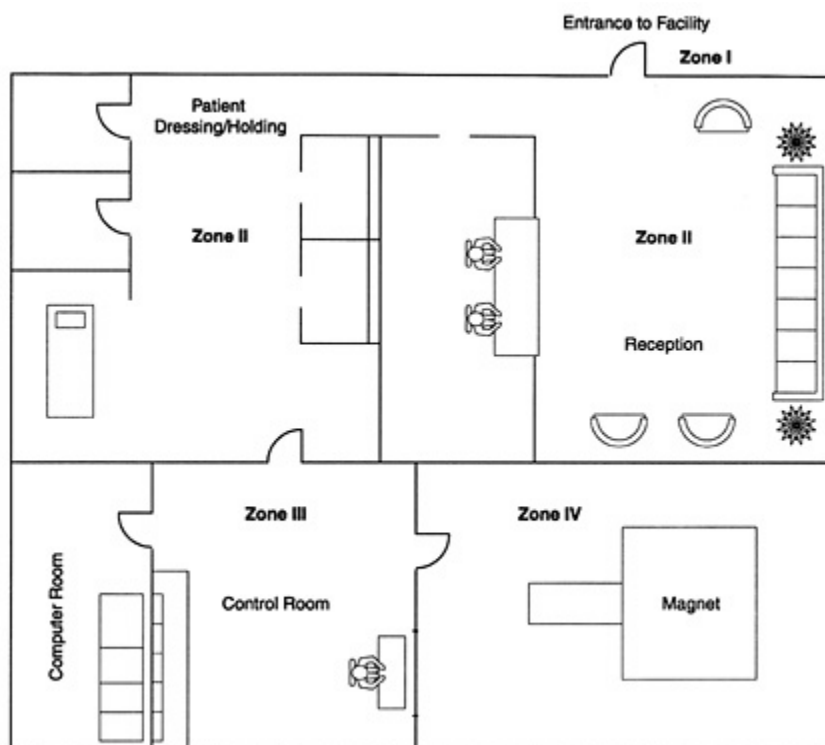


Image retrieved from <https://mriquestions.com/acr-safety-zones.html>

- **Zone I** is an area typically outside the MR environment that is freely accessible to the general public without supervision.
- **Zone II** is still a public area that allows for MRI screening, medical history, and patient gowning under the guidance of MR Personnel.
- **Zone III** is physically restricted from access by key locks, passkeys, locking systems, or any other reliable, physically restricting method that can differentiate between MR and non-MR personnel.
- **Zone IV** is the scanner room itself.

All students (non-MR personnel) needing to enter **Zone III** must pass an MR safety screening process. Before students (non-MR personnel) enter **Zone III**, final authorization must originate from Level 2 MR Personnel. Level 2 MR Personnel have received extensive training in the broader aspects of MR safety issues, including but not limited to the matters related to the potential for RF-related thermal loading or burns and direct neuromuscular excitation from rapidly changing gradients.

Students (Non-MR Personnel) must be accompanied by, or under the immediate supervision of and in visual contact with, an individual from Level 2 MR Personnel throughout their stay in **Zones III or IV**, except in the changing room and/or bathroom, where verbal communication is sufficient.

No Level 2 MR Personnel shall relinquish their responsibility to supervise a student (non-MR personnel) in **Zones III and/or IV** until such supervision has been formally transferred to other Level 2 MR Personnel.

Remember, the magnet is always on. Ferromagnetic objects (like scalpels, oxygen tanks, and wheelchairs) are attracted to the powerful magnet, posing a serious risk. Understand the restricted areas around the scanner to avoid accidental projectile hazards. Wear non-metallic clothing and remove all jewelry, piercings, and electronic devices before entering the scan room. Do not hesitate to clarify doubts about patient safety protocols or equipment operation. Never compromise patient or staff safety.

Radiation Safety Policy and Procedures

In the first three weeks of pre-clinical in RADT 107 Clinical Practice I, orientation sessions prepare the students to use ionizing radiation safely. The application of radiation safety is assessed through a practical evaluation and reinforced in clinical application.

NCC-provided Dosimeter

The College offers a comprehensive radiation monitoring service using digital dosimeters, the cost of which is included in the fall clinical education course fee.

It is imperative to note that NCC-provided dosimeters are strictly intended for use during laboratory and clinical training activities only. Students must not wear these devices while fulfilling their duties as employees at any clinical site. Any student found to violate this policy by wearing an NCC dosimeter at a worksite will face *involuntary withdrawal* from the program.

Students with inquiries or concerns regarding the College's dosimetry service are encouraged to consult the Program Director.

Dosimeter Care

Dosimeters should be stored in a low-radiation background area to prevent inaccurate measurements. They should also be guarded from direct sunlight and extreme heat and take necessary precautions to prevent them from getting wet.

According to the manufacturer, the dosimeter is suitable for use at an ambient temperature of -10°C to +40°C and a relative humidity of 10% to 90%. It should not be exposed to direct sunlight above 1000 W/m². (The 1000 watts/m² typically only occurs at solar noon for a few minutes on a clear, bright day; the rest of the time, it is less and even far less. The exception is a cloud event or reflected light.)

If necessary, the blister packaging can be cleaned with a damp cloth. Only the aluminum oxide detector is not affected by heat or moisture, meaning that other components in the blister packet may be and can cause fading or alteration of your measurements.

Quarterly NCC-provided Dosimeter Exchange

Dosimeters must be exchanged quarterly, and the Department Secretary, Clinical Education Coordinator, or Program Director will notify the students accordingly. The dosimeter must be promptly returned to the Department Secretary in exchange for a new one. Dosimeters not processed during the designated period may be impaired by degradation, affecting their results. Additional costs incurred for delays in return will be at the student's expense.

Loss or Damaged Dosimeter

Immediately report the lost or damaged dosimeter to the Clinical Preceptor, Clinical Education Coordinator, Department Secretary, **and** Program Director. A lost dosimeter must be replaced before

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clinical rotations can resume. Any clinical days missed must be made up. Replacement typically takes five to seven business days. Additional costs incurred for replacement are at the student's expense.

Radiation Dosimeter Report (RDR)

In the pre-clinical sessions of RADT 107-Clinical Practice I and RADT 102 Fundamentals of Radiologic Sciences, students are shown where the Radiation Dosimetry Report (RDR) is posted and instructed on how to read it.

After being reviewed by the Program Director within 30 days, a summary and copy of the RDR (excluding individual Social Security numbers and dates of birth) will be provided electronically to the assigned clinical site's Radiation Safety Officer and/or Clinical Preceptors. This allows them to monitor overall student radiation exposure and identify potential concerns.

Each student will also receive an electronic copy of the RDR. This allows them to review their exposure and be informed about relevant information.

Per the U.S. Nuclear Regulatory Guidelines, workers (students) under eighteen (18) are limited to 1/10 of the (yearly) adult effective dose limit of 5000 mrem. It is anticipated that the dose limits for NCC students who may be under the age of eighteen (18) will comply.

The guideline set forth for Radiography students above 18 is a limit of **125 mrem (1.25 mSv) per quarter**. The embryo and fetal exposure limit is 50 mrem (0.5 mSv) monthly, with an entire gestation limit of 500 mrem (5 mSv).

An exposure below the limits defined above in each category (shallow, deep, eye) will be considered reasonable. The limit is 10% of the NRC annual total effective dose equivalent (TEDE) for the whole body (5,000 mrem/50 mSv).

If exposures exceed the guidelines, the Program Director and the clinical site's Radiation Safety Officer (RSO) will notify and counsel the student appropriately. The student will provide the Program Director with a copy of any documentation provided to them by the RSO. The Program Director will discuss the RDR with the student, clinical instructor, and/or RSO to investigate the possible contributing factors to the increased exposure to ionizing radiation. After the inquiry, ways to improve radiation safety will be discussed with the students.

Annual NRC Form 5 Equivalent Occupational Exposure Record

All students will receive an electronic copy of NRC Form 5 Equivalent Occupational Exposure Record for a Monitoring Period under the Provisions of NRC 10CFR 19 and Title 25 of the Pennsylvania Code annually and after completing or withdrawing from the program.

Summary of Dosimeter Practice

- Only the person who is assigned a dosimeter shall wear it.
 - ✓ Do not loan a dosimeter or use it for monitoring an area.
- The dosimeter should always be worn whenever exposure to ionizing radiation is possible during clinical or lab training.

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- ✓ The radiation dosimeter shall not be worn when receiving medical radiation exposure.
- ✓ NCC-provided dosimeters are never to be worn when working as an employee of the site
 - Failure to comply will result in *involuntary withdrawal* from the program.
- The dosimeter should be worn to optimize monitoring (usually on the collar) when working with ionizing radiation.
 - ✓ Detectors should always be turned to face the source of radiation.
 - ✓ When wearing a lead apron, the dosimeter should be placed on the collar outside the apron.
- A student who voluntarily declares pregnancy in writing will be provided with a (fetal) NCC-provided dosimeter that is always worn at waist level, under the apron, for fetal monitoring. Please refer to "*Pregnancy Notification and Policy Procedure*."
- The NCC-provided dosimeter should be stored in a safe, radiation-free location when not in use.
 - ✓ Keep dosimeters away from direct sunlight and extreme heat
 - ✓ Take necessary precautions to prevent it from getting wet
- If the NCC-provided dosimeter is damaged, return it for a replacement.
- The NCC-provided dosimeter must be promptly returned for processing.
 - ✓ Dosimeters not processed during the proper period may impair their results by degradation.
 - ✓ Additional costs incurred for delays in return will be at the student's expense.
- On an annual basis, and following the completion of, or withdrawal from, the Program, all students will receive a copy of NRC Form 5 Equivalent Occupational Exposure Record for a Monitoring Period under the Provisions of NRC 10CFR 19 and Title 25 of the Pennsylvania Code.

Non-Compliance: Dosimeter Practice

Not only is the dosimeter a vital component of your dress code, but it is also essential in representing radiation safety habits. The dosimeter is part of your uniform and provides integral information about your radiation safety. Refer to *Non-compliance: Clinical Education Dress Code* in this handbook.

Radiation Producing Equipment- Gary Wogenrich Laboratory

The Commonwealth of Pennsylvania Department of Environmental Protection is the governing body that awards the certificate of registration for the radiation-producing machines in the Gary Wogenrich Laboratory. The certificate is displayed in the communal area of the radiographic laboratories outside the Shimadzu Room entrance.

Laboratory Safety Practices

Energized radiographic equipment can be dangerous when misused. Careless use of the equipment and inappropriate behavior endangering the welfare of your fellow peers will result in an *involuntary withdrawal* from the Radiography Program. Students must comply with the following rules and regulations:

NCC-provided dosimeters must be worn during clinical rotations and laboratory sessions. No student can remain in an energized laboratory without one.

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- ✓ If you do not have your dosimeter for clinical, you will be sent home and charged with forfeiture of a clinical day that must be made up. Hence, the dosimeter is a vital component of your dress code.
- ✓ If you are pregnant, you may voluntarily disclose your pregnancy. Disclosure must be in writing, and you may also rescind your disclosure at any time, which also must be in writing.
 - Please refer to the "[*Pregnancy Notification Policy and Procedure*](#)" section in the Handbook.

You are not to make radiographic exposures unless an instructor is present.

- ✓ Note: The exposure buttons on radiographic units are disabled when the instructors are not in the lab area. You can practice with the units, but they will be disabled when no instructor is present.

Exposures are never to be made when the door to the radiographic room is open.

- ✓ The radiographic room door is to be locked before making an exposure.
- ✓ If the door to the radiographic room is closed, always knock before attempting to enter.

If the equipment is not working properly, report your findings to a faculty member immediately.

- ✓ Malfunctioning equipment is never to be used.
- ✓ As a student, you must never attempt to repair the equipment.

Students are encouraged to utilize the Wogenrich Laboratory outside of class time with caution.

- ✓ Friends, relatives, colleagues, or pets are never to be exposed to the lab's ionizing radiation.

The lab area must be cleaned and organized before leaving for the day. Failure to clean up will affect the course grade and/or practice privileges.

- ✓ Students are responsible for returning any equipment and all accessories (phantoms, cassettes, etc.) to their proper place.
- ✓ All equipment and the appropriate circuit breakers will be turned off before leaving the laboratory. For more information, refer to the posted startup/shutdown informational pages.

Clinical Safety: Holding Patients/Image Receptors

According to [JRCERT Standard 5.3](#), students must adhere to proper radiation safety practices, including, but not limited to, maintaining time, distance, and shielding. Students must not hold image receptors during any radiographic procedure, and students should not hold patients during any radiographic procedure when an immobilization method is the appropriate standard of care.

Pregnancy Notification Policy and Procedure

A student cannot be considered pregnant without a voluntary, written disclosure. A pregnant student can continue in the program without modification or interruption.

Per [U.S. Nuclear Regulatory Commission \(NRC\) Regulatory Guide 8.13](#), and stated in [JRECERT Standard 5.1](#), the following pertains to a pregnant student:

Declaration of Pregnancy

A student cannot be considered pregnant without the Program Director or Clinical Education Coordinator receiving a signed, voluntary, written disclosure of the month or year the student became pregnant. The disclosure can be in the format of a provided "Pregnancy Declaration Form" (available on Trajecs) or in a personal format.

Fetal Dosimeter and Exposure Limit

Once the declaration has been received, the student will receive a "fetal" dosimeter in addition to their regular NCC-provided dosimeter, at the student's expense. The "fetal" dosimeter is to be exchanged monthly, with the old dosimeter promptly returned to the Department Secretary in exchange for a new one.

In clinical and lab practice, the (fetal) dosimeter is worn at waist level, under the lead apron, for fetal monitoring.

As per the guidance of the NCRP Report No. 116, the Embryo and Fetal Exposure Limits are as follows:

- ✓ Monthly Equivalent Dose Limit: 50 mrem (0.5 mSv or 0.05 rem)
- ✓ Equivalent Dose Limit for Entire Gestation: 500 mrem (5 mSv or 0.5 rem)

Suppose the student's total effective dose to the embryo/fetus exceeds 400 mrem before the gestation period ends. In that case, the student will be restricted from any further clinical practice involving occupational radiation exposure for the remainder of the pregnancy. The student will be allowed to resume clinical practice once they are no longer pregnant.

Modification Options

After the declaration of pregnancy, the student will have the option to continue their educational program **without modification** or interruption, or do one of the following:

1. Make modifications to their clinical assignments.
2. Take a leave of absence from their clinical assignments.
3. Take a leave of absence from the program.
4. Develop their plan with reasonable accommodation developed in collaboration with their physician and radiation physicist/radiation safety officer in the clinical education setting,

with verification by the clinical preceptor, clinical education coordinator, and program director.

Reasonable Accommodations

To initiate the accommodation process, a declared pregnant student should promptly submit a completed "Pregnancy Information Sheet" (available on Trajecsyst) to the Program Director. This form, designed with patient privacy in mind, gathers essential information:

1. How many months pregnant are you?
2. The name of your physician.
3. Whether your physician advises you to continue in the program's academic and clinical portions. What reasonable accommodations will be needed if periodic evaluations are recommended beyond what is considered normal for the "average" pregnancy? What reasonable accommodations do you and your physician recommend for your pregnancy?
4. What is your anticipated date of return to the program following the delivery of your baby? (Remember to submit your physician's release to the NCC Health Center to return to classes and/or clinical practice.)
5. Consult with your physicist (radiation safety officer) in your clinical education setting. Wear a fetal monitor (also known as a baby badge) and your regular dosimeter.
6. Submit your individualized plan to meet the program requirements and help us protect you and your baby.

In collaboration with the students, the Program Director, Clinical Education Coordinator, and Clinical Preceptor will review the information and develop a reasonable, personalized plan that meets the student's needs and program requirements while adhering to radiation safety standards. Upon planned approval, the program will promptly implement the agreed-upon accommodations to ensure the student has efficient and supportive learning experience.

Withdraw Declaration of Pregnancy

The student may withdraw a written declaration of pregnancy at any time. If the declaration is withdrawn, the dose limit for the embryo/fetus will apply only to the time from the estimated date of conception until the withdrawal. If the declaration is not withdrawn, it may be considered expired one year after it is submitted.

After Pregnancy

After the baby's birth, the student's written medical release from her physician must be submitted to the NCC Health Center to resume participation in the program's didactic and clinical education components. If a student takes a leave of absence, they will be expected to contact the Clinical Education Coordinator to revise their schedule and make up any missed rotations and evaluations.

- If possible, the program will make every attempt for the student to graduate and participate in the pinning ceremony with their class.

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- If necessary, the student will be placed in the six (6)-week extension at the end of Clinical Practice V. Depending on the circumstance(s), the student may be required to do the entire six (6)-week extension.
- No more than forty (40) hours of clinical and didactic classes should be scheduled in one week. According to [JRCERT Standard 4.4](#), a student cannot be scheduled for more than ten (10) hours in one day. In addition, students may not be scheduled when the College is closed for a Holiday or due to weather.

Inclement Weather Policy

Decision for Day/Evening Classes

The NCC campus typically broadcasts its closure for day classes by 6:00 a.m. on the day of the closure. Cancellation of day classes does not imply cancellation of evening classes, which are typically broadcast by 3:00 p.m. on the day of.

Method of Communication

NCC will be alerted by radio, television, or websites. They also offer an NCC Text Alert system. One can sign up on the NCC Weather Information website. When selecting notification preferences, ensure that you choose all college campuses.

The weather closing information hotline is available 24 hours a day. The numbers are as follows:

- Lehigh Valley and surrounding areas 610-861-4595 (Main Campus)
- Monroe County residents 570-369-1800 ex.8 (Pocono Campus)

When inclement winter weather impacts normal college operations, the college will announce one of the following: a delayed opening (Delayed Opening), early closing, closure (Closed), or remote work (Remote).

📞 Please refer to the NCC website for general definitions regarding [Inclement Weather Procedures](#).

The following are program-specific expectations.

Delayed Opening

Didactic-Delayed Opening

Because all our didactic courses are offered specifically at the Bethlehem Campus, our program only adheres to the Bethlehem Inclement Weather Notification, not the Pocono Campus.

Delays, early closures, remote learning, or closures resulting in missed classes do not preclude students from accessing any material they missed. Students are instructed to check their LMS for details from their instructors.

A delay in lab instruction will require flexibility in participating in other lab sections or an agreed-upon alternate meeting time to maintain the curriculum sequence.

Common Scenarios:

- If the Pocono Campus issues a delayed opening until 10:00 AM and the Bethlehem Campus issues no delayed opening:
 - Students are expected to convene the regular course schedule for the day on the Bethlehem Campus.

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- If the Bethlehem Campus issues a delayed opening until 10:00 AM and the Pocono Campus issues no delayed opening:
 - Students are not expected to meet in person on the Bethlehem Campus for their regularly scheduled 8:00 AM or 9:00 AM classes. Still, they are expected to meet in person for any courses scheduled from 10:00 AM and later.
- If the Pocono Campus issues a closure and the Bethlehem Campus issues a delayed opening of 10:00 AM:
 - Students are not expected to meet in person on the Bethlehem Campus for their 8:00 AM or 9:00 AM regularly scheduled classes. Still, they are expected to meet in person for any courses scheduled from 10:00 AM and later.
- If the Bethlehem Campus issues a closure and the Pocono Campus issues a delayed opening of 10:00 AM:
 - Students are not expected to meet in person on the Bethlehem Campus for any or all classes.

Clinical-Delayed Opening

Clinical Instruction follows the highest denominator between Bethlehem and Pocono Campus inclement weather notifications. Students are not permitted to attend clinicals in case of any school delay or closure. The time at clinical cannot be banked if either campus is closed.

Regardless of the circumstances, students are expected to contact their clinical site to report any delays, early closures, remote closures, or closures.

Common Scenarios:

- If the Pocono Campus issues a delayed opening until 10:00 AM and the Bethlehem Campus issues no delayed opening:
 - Students are expected to start clinical instruction at 10:00 AM and leave at their scheduled time.
- If the Bethlehem Campus issues a delayed opening until 10:00 AM and the Pocono Campus issues no delayed opening:
 - Students are expected to start clinical instruction at 10:00 AM and leave at their scheduled time.
- If the Pocono Campus issues a closure and the Bethlehem Campus issues a delayed opening of 10:00 AM:
 - Students are excused from clinical.
- If the Bethlehem Campus issues a closure and the Pocono Campus issues a delayed opening of 10:00 AM:
 - Students are excused from clinical.

Early Closure During Instruction

Didactic-Early Closure

All our didactic instruction is in-person and takes place on the Bethlehem Campus. We follow the Bethlehem Campus inclement weather notification, not the Pocono Campus.

Delays, early closures, remote, or closures resulting in missed classes do not preclude students from accessing any material they missed. Students are instructed to check Blackboard for details from their instructors.

An early closure disrupting lab instruction will require flexibility in participating in other lab sections or an agreed-upon meeting time to maintain the curriculum sequence.

Common Scenarios:

- The common scenarios follow the same principles stated under [Didactic-Delayed Opening](#), except that the student will be on campus before notification.

Clinical-Early Closure

Clinical Instruction follows the highest denominator between Bethlehem and Pocono Campus in inclement weather notification. Under no circumstances are students permitted to attend clinical sessions in the event of any school delay or closure. ***You must clock out immediately if you're already clocked in at the clinical site when the closure is announced.***

Your safety is our priority. If you feel you are unsafe travelling due to weather conditions, you can choose to stay at the clinical site at your discretion. However, the time spent at the clinical site cannot be banked if either campus is closed.

Regardless of the circumstances, students are expected to contact their clinical site to report any delays, early closures, remote closures, or closures.

Common Scenarios:

- The common scenarios follow the same principles under [Clinical-Delayed Opening](#), except the student will be at clinical before notification.

If the student is clocked in at the clinical site before the closure announcement, they must clock out at the time of the closure announcement. Staying at the clinical site is permissible if waiting for conditions to improve before traveling is safer.

Closure or Remote

Didactic-Closure or Remote

All our didactic instruction is in-person and takes place on the Bethlehem Campus. We follow the Bethlehem Campus inclement weather notification, not the Pocono Campus.

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Delays, early closures, remote, or closures resulting in missed classes do not preclude students from accessing any material they missed. Students are instructed to check Blackboard for details from their instructors.

A closure-disrupting lab instruction will require flexibility in participating in other lab sections or an agreed-upon alternate meeting time to maintain the curriculum sequence.

Common Scenarios:

- If the Pocono Campus issues a Remote or Closure and the Bethlehem Campus does not:
 - Students are expected to convene the regular course schedule for the day on the Bethlehem Campus.
- If the Bethlehem Campus issues a Remote or Closure and the Pocono Campus does not:
 - Students are not expected to meet in person on the Bethlehem Campus for their scheduled classes

Clinical-Closure or Remote

Clinical Instruction follows the highest denominator between Bethlehem and Pocono Campus in inclement weather notification. Under no circumstances are students permitted to attend clinical sessions in the event of any school delay or closure. The time at clinical cannot be banked if either campus is closed.

Regardless of the circumstances, students are expected to contact their clinical site to report any delays, early closures, remote closures, or closures.

Common Scenarios:

- If the Pocono Campus issues a Remote or Closure and the Bethlehem Campus does not:
 - Students are excused from clinical
- If the Bethlehem Campus issues a Remote or Closure and the Pocono Campus does not:
 - Students are excused from clinical

Localized Inclement Weather Situations

If the student experiences dangerous local weather conditions that prevent them from safely getting to their clinical site (and the College has not suspended classes), follow the [Clinical Notification Policy](#). Make-up time will be required.

Clinical Make-up Time Due to Campus-Imposed Inclement Weather

For each semester, make-up time is required after three (3) days (24 hours) of Clinical Practice have been missed due to closure. Weather-related make-up for second-year students may be assigned on an alternative day in the final semester of the program, provided there are no clinical capacity issues at their site.

Program (Opening) Meetings

Mandatory program opening meetings are scheduled at the beginning of each semester and the summer session. These sessions are an integral component of the program. They are in place to distribute and communicate the clinical practice course syllabus, rotation schedules, changes in assessment techniques, updated clinical information, changes or updates in policies/procedures, and any other relevant issues that need to be discussed.

Opening meetings are also an opportunity to meet with your mentor or answer questions for your mentee. Preceptors from each clinical site attend these meetings to orient their students and provide site-specific information, and to collaborate with administrative members of the Radiography Program.

Non-Compliance: Program Meeting

Student attendance is mandatory. The following consequence applies if the student is late or absent without prior permission from the Program Director and/or Clinical Education Coordinator. The following steps will be taken in response to noncompliance with either being late or absent for a scheduled program meeting reported by the Clinical Education Coordinator and/or Program Director:

Any occurrence

✓ *Continual Non-Compliance (CNC)*

- One (1) day forfeiture of absence requiring clinical make-up.
- Further consequences apply if the student has already exceeded two or more days of clinical absence. Refer to *Clinical Time Off (CTO)*

Clinical Assignment, Orientation, Schedule

Clinical Assignment

Students are assigned to primary clinical sites at our major affiliate hospitals through a lottery system, ensuring impartiality. Following [JRCERT Standard 4.4](#), these assignments provide equitable learning experience and a comprehensive range of competency-acquiring procedures, including mobile, surgical, fluoroscopy, and trauma examinations.

To meet this standard, students rotate between two primary clinical sites throughout the program and to secondary clinical sites, further enriching their exposure to varying patient volumes, trauma levels, and diverse clinical environments. This combination of primary and secondary site rotations enhances clinical understanding, expands professional networks, and increases visibility to potential employers.

Primary Clinical Sites

The sites listed below serve as your primary clinical education locations. One of these will be designated as your "home site," where you'll spend most of your time until the conclusion of your first summer, at which point you'll transition to a different primary site.

- Lehigh Valley Hospital-Cedar Crest, 1200 South Cedar Crest Blvd, Allentown, PA 18103-6202
- Lehigh Valley Hospital-Muhlenberg, 2545 Schoenersville Rd., Bethlehem, PA 18017
- Lehigh Valley Hospital-Pocono, 206 E Brown Street, East Stroudsburg, PA 18301-3006
- Lehigh Valley Hospital-Hecktown Oaks, 3780 Hecktown Rd, Easton, PA 18045
- Lehigh Valley Hospital-Carbon, 2128 Blakeslee Blvd Dr E, Lehighton, PA 18235
- St. Luke's University Hospital-Bethlehem, 801 Ostrum St, Bethlehem, PA 18015
- St. Luke's University Hospital-Anderson, 1872 St Luke's Blvd, Easton, PA 18045
- St. Luke's University Hospital-Grand View Hospital, 700 Lawn Ave, Sellersville, PA 18960
- St. Luke's University Hospital-Monroe, 100 St. Luke's Lane, Stroudsburg, PA 18360
- St. Luke's University Hospital-Upper Bucks, 3000 St Luke's Dr, Quakertown, PA 18951
- St. Luke's University Hospital-Allentown, 1736 Hamilton St, Allentown, PA 18104
- St. Luke's University Hospital-Easton, 250 South 21st Street, Easton, PA 18042
- St. Luke's University Hospital-Sacred Heart, 421 W Chew St, Allentown, PA 18102

While based at your primary site, you'll also be assigned to train at a secondary site during a specific rotation. These secondary sites are detailed in the following section.

Secondary Clinical Sites

The sites listed below are secondary clinical sites. These ancillary sites provide an equitable experience in addition to your primary clinical site.

- Lehigh Valley Health Network-Tilghman, 4815 Tilghman Street, Allentown, PA 18104
- LVH-Pocono Radiology Services-447 Office Plaza-400 Bldg Suite C, E. Stroudsburg, PA 18301
- Imaging Services, 1230 S. Cedar Crest Blvd., Allentown, PA 18103
- Lehigh Valley Hospital-17th Street, 1627 Chew St, Allentown, PA 18102
- LVPG Orthopedics and Sports Medicine, 1250 S Cedar Crest Blvd Suite 110, Allentown, PA 18103-6224

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- LVPG Orthopedics and Sports Medicine, 505 Independence Rd, East Stroudsburg, PA 18301
- LVPG Orthopedics and Sports Medicine, 3794 Hecktown Road, Easton, PA 18045
- LVPG Orthopedics and Sports Medicine-2775 Muhlenberg, 2775 Schoenersville Road Bethlehem, PA 18017-7307
- Sellersville Outpatient Center, 915 Lawn Avenue, Sellersville, PA 18960
- St. Luke's West End Medical Center, 501 Cetronia Rd, Allentown, PA 18104
- St. Luke's North Medical Center, 153 Brodhead Road, Bethlehem, PA 18017
- St. Luke's Spine & Pain Associates, 830 Ostrum Street, Bethlehem, PA 18015
- St. Luke's Bone & Joint Institute, 1534 Park Avenue, Quakertown, PA, 18951

Clinical Site Orientation

Site orientation will be provided on the first day of clinical practice and is not limited to the following topics:

- Hazards (fire, electrical, chemical)
- Emergency preparedness
- Medical emergencies
- HIPAA
- Standard precautions
- Epic Healthcare Program Training

JRCERT Standard of Schedule

According to [JRCERT Standard 4.4](#), clinical education is not permitted to be scheduled, and students may not volunteer to participate in clinical rotations when the college campus is closed. Examples of campus closures include Labor Day, Thanksgiving, Winter break, Martin Luther King Day, Memorial Day, Juneteenth, and the Fourth of July. For further information, please visit the NCC College website and refer to the [Academic Calendar](#) for semester closure dates.

Additionally, students are limited to ten (10) clinical hours per day and should not be scheduled for more than 40 hours of clinical and didactic instruction weekly. To optimize educational efficiency, students should not be scheduled for less than four (4) hours in one day.

Clinical Schedule

The Clinical Education Coordinator prepares a typical rotation schedule before the beginning of each semester/ session in collaboration with the Clinical Preceptors to ensure all students spend an equivalent amount of time in each diagnostic area. The schedule consists of daily "blocks" for the specific number of days in each rotation. The schedules are distributed to the Clinical Preceptors, who assign dates for the rotations based on staffing and patient volume availability at their site.

Copies of the schedule are distributed to the student and the Clinical Preceptor to ensure the schedule is followed in areas with more than one room. The Clinical Preceptor will then determine the optimal placement for the students to ensure their educational experience. Each student will receive the same rotations, just in a different sequence. Clinical shifts are typically 8 ½ hours, including a 45-minute lunch.

NCC Radiography Program's Student Handbook

During the winter (Clinical Practice 1B) and summer session (Clinical Practice III), shifts are scheduled four (4) days per week for 10 hours a day, including lunch/breaks, except when the College is closed for the Holidays.

The students are responsible for their initiative regarding when cases have been ordered, scheduled, announced, or called for in that exam room or rotation (including portables and OR). It is not the staff radiographer's responsibility to find you in your assigned rotation or ask if you want to perform a procedure.

Any day missed within the scheduled rotational area must be made up in the same rotation. For example, if you are absent during an OR rotation, you must make up that day in the OR. The makeup day procedure is in the [Make-Up Days](#) section of this Handbook.

Change Initiated by the Clinical Preceptor

Clinical education rotation schedule changes initiated by the Clinical Preceptor must be kept to a minimum. They should be considered only in the best interests of achieving clinical education objectives, rather than radiology department objectives. According to [JRCERT Standard 4.4](#), rotation schedules must provide students with equitable clinical experiences.

Change Requested by Student

Clinical education rotation schedule changes requested by the student must be kept to a minimum and approved in advance by the Clinical Preceptor. Adequate supervisory personnel must be available, and the change must maintain an equitable clinical experience for each student. Students cannot adjust their clinical schedules without approval.

Clinical Education Dress Code

The "Clinical Education Dress Code" includes identification badges, radiographic markers, NCC-provided dosimeters, uniforms, and miscellaneous personal hygiene items attributed to overall appearance. Requirements are reviewed and distributed to students at the initial program orientation meeting.

Identification Badges

The Identification badge is part of the student's uniform. Some clinical sites provide an ID, while others require the students to wear their NCC student ID. The badge must always be worn at the clinical site. *Failure to comply falls under the category of non-compliance with the [Clinical Education Dress Code](#).*

Markers



Failure to properly mark and/or identify a radiograph is a potential medical/legal problem and can result in a negligence case. Students must use radiographic markers to mark each radiographic procedure they perform accurately.

Students must purchase markers before the start of clinical. For identification purposes, markers should include three initials. The left marker must be blue, and the right marker must be red. *Failure to comply falls under the category of non-compliance with the [Clinical Education Dress Code](#).*

NCC-provided Dosimeters



[Dosimeters](#) must always be worn while at the clinical education site. Failure to wear your dosimeter during clinical training, in practice, and the lab violates the [Clinical Education Dress Code](#).

Dosimeters are prohibited from being worn outside of the lab and clinical training. ***Any student wearing an NCC-provided dosimeter while personally working at any facility requiring radiation monitoring will result in an involuntary withdrawal from the program.***

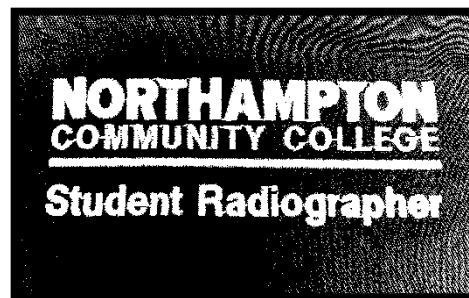
Uniform

Students must adhere to the general requirements of the dress code. In addition to the general requirements, some networks or sites may have additional dress code regulations that will also fall under the uniform requirements for the program. The general requirements are outlined below. Failure to comply with the general and site-specific requirements for uniforms falls under the category of non-compliance with the [Clinical Education Dress Code](#).

Black Scrubs

All students are to wear black scrubs with identifying embroidery above the left chest pocket, which includes the college logo, "Northampton Community College," and "STUDENT RADIOGRAPHER."

- Students are allowed to purchase any style or brand.
- NO stretch pants or leggings
- NO T-shirts (including Spirit Wear)



Cover-Ups

- Must be plain Black, no patterns
- NO hoods or pullovers
- Do not need to be embroidered

Neutral Colored shoes/sneakers

- Must be closed-toe, closed heel, non-porous, clean, and remain clean.
- NO sandals, Crocs

Jewelry, Piercings, and Tattoos

- A limit of two (2) smooth rings is allowed.
- One watch/Fitbit is acceptable.
- Plugs (gauges) must be solid and match skin color if worn.
- Tongue piercings must be tongue colored if worn.
- Tattoos:
 - ✓ Tattoos may be visible if they are not offensive. The Program Director and Clinical Education Coordinator will determine this.
 - ✓ Facial tattoos are not permitted and must be covered.
- NO necklaces or bracelets
 - ✓ Jewelry may harbor bacteria, tear gloves, or pose a scratch risk to patients.
- NO hoops or dangling earrings
 - ✓ Patients may grab and pull.
- NO exposed piercings (e.g., eyebrow, lip, nose rings)
 - ✓ Low-profile nose studs are permissible (flush to the skin and no larger than 2mm)
 - ✓ No nose rings
 - ✓ Presents a risk of infection if grabbed by a patient.

Personal Hygiene

The following items will provide students, patients, and personnel with a safe and welcoming environment. *Failure to comply with the following constitutes non-compliance with the [Clinical Education Dress Code](#).*

Hair

- Hair color must not be extreme, worn in good taste, out of the face, and tied back to prevent it from contacting the patient.
- Facial hair must not impede a secure fit of the face mask used for patients on airborne precautions.

Nails

- Only clear fingernail polish may be used for the clinical education setting.
- Fingernail length should not exceed 1/4" due to hygiene and patient safety considerations.
- NO artificial fingernails.

Scents and Odors

- Deodorant should be worn.
- Use a breath freshener after eating onions, garlic, etc.
 - ✓ No chewing gum.
- No eating/drinking around patients
- NO perfume, cologne, aftershave, or scented lotions
 - ✓ These scents can be offensive and cause allergic reactions in patients and personnel.
- No odor of smoke is permitted.
 - ✓ All clinical sites are smoke-free campuses.

Non-Compliance: Clinical Education Dress Code

While adhering to the "Clinical Education Dress Code," the students represent themselves, the Radiography Program, the Clinical Education Facility, and the College. Students are responsible for adhering to the general and site-specific requirements. Failure to comply with the "Clinical Education Dress Code" will result in the following being reported by the Clinical Preceptor and/or NCC Radiography Staff:

First occurrence

- ✓ *Written Verbal Warning (WVW)*
 - One (1) day forfeiture of absence requiring clinical make-up.
 - Further consequences apply if the student has already exceeded two or more days of clinical absence. Refer to *Clinical Time Off (CTO)*

Subsequent occurrences

- ✓ *Continual Non-Compliance (CNC)*
 - Two (2) points are deducted from the current clinical course grade for each incident.
 - One (1) day forfeiture of absence requiring clinical make-up for each incident.
 - Further consequences apply if the student has already exceeded two or more days of clinical absence. Refer to *Clinical Time Off (CTO)*

Program Attendance and Leave Policies

Attendance Policy

Class attendance is crucial during the learning process for student success. Northampton Community College students are expected to attend all class sessions and actively participate in the courses for which they are enrolled. They are responsible for all material presented in class sessions or online activities for these courses.

Attendance verification involves instructors confirming that students have begun participating in NCC courses. Instructors are required to verify attendance by the course's final drop deadline. Refer to the [Academic Calendar](#) for specific dates based on the course start date and length.

Attendance at NCC is defined as:

- Attending a synchronous class, lecture, recitation, or field or laboratory activity, physically or online, where there is an opportunity for interaction between the instructor and students.
- Submitting an academic assignment.
- Taking an assessment or an exam.
- Participating in an interactive tutorial, online seminar, or other interactive computer-assisted instruction.
- Participating in a study group, group project, or an online discussion that the institution assigns or
- Interacting with an instructor about academic matters.
- Logging into an online class or tutorial without further participation does not count for attendance.

After verifying attendance, students are still expected to attend and participate in courses in which they are enrolled. If a student misses 15% of an on-campus class or does not participate in 15% of academic activities, as defined above, in a virtual course, the instructor may withdraw them.

Clinical attendance falls under a separate policy. Please refer to the section titled [Clinical Attendance Policy](#).

Absent for more than two (2) Consecutive Days

For each absence from didactic or clinical education due to illness for more than two (2) consecutive days, the student needs to present a physician's note to the Clinical Education Coordinator or the Program Director stating the following:

1. Diagnosis
2. Dates of treatment
3. Release date to return with or without restrictions.

- For a return without restrictions, the note must state the following to return to clinical: ***'Permitted to Return to Patient Care Activities.'*** This serves the rationale to protect the welfare of the patient, hospital personnel, and your classmates.

If one cannot see a physician, they can schedule an appointment to be evaluated by the college nurse by calling 610-861-5365.

📎 The hours of the Health and Wellness Center (located in College Center 120) are posted on the following website: [NCC Health & Wellness Center](#).

- If your class and/or clinical education begins before the Clinical Education Coordinator or Program Director is in their office, you may enclose your physician's release documentation in a sealed envelope and slide it under the office door.
 - **Keep a copy of your files!**
- After dropping off the note, proceed to class or clinical.

Medical Restrictions-Light Duty

Any injury or medical condition that restricts a student to "light duty" may increase the risk of harm to the student and/or the patient in the clinical setting. Suppose a student cannot perform any of the functions stipulated in the [Essential Functions of Radiographer: Verification of Understanding/Student Disclosure Form](#), or if the clinical site requests that the student not provide patient care. In that case, the student shall follow the [Medical Leave of Absence guidelines](#).

Medical Leave of Absence

If a student needs to take a medical leave of absence, the following guidelines will be followed:

- Rotations missed must be made up.
- The remainder of the program would need to be completed.
- The Clinical Preceptor and Clinical Education Coordinator will work out a schedule for the missed rotation(s).

Bereavement

Bereavement applies to both didactic (classroom) and clinical education as follows:

- Up to a maximum of 3 consecutive days
- For a death in the student's immediate family (i.e., parent, spouse, brothers, sisters, children, grandparents, mother or father-in-law).
- A copy of the obituary may be requested.

Clinical Attendance Policy

To meet the educational outcomes for the Radiography Program, students must complete the clinical rotations at their designated clinical sites as scheduled by the Clinical Education Coordinator and the Clinical Preceptor.

Clinical attendance at all clinical education assignments is the student's responsibility. Students are expected to arrive on time at the clinical site and remain in the facility for the entire clinical experience. A good "rule-of-thumb" is to arrive at your assigned rotational area ten (10) minutes before your shift begins so that you are prepared, clocked in, and ready to start on time.

Late to Clinical

Professional behavior dictates punctuality, especially in a clinical setting that requires shift relief. If you expect to be hired by any of the facilities where you are training, you must demonstrate that you are dependable and can be on time.

You are allowed a maximum of four (4) late incidents **during the program** before penalties commence.

Late indicates one minute past your clinical start time. If you are late by 15 minutes or more, make-up time is rounded up to the next hour. For example:

- One (1) hour and five (5) minutes late = Two (2) hours make-up time
- Your standard start time is 7:00 AM. You are late and clock in at 7:15 AM. You need to make it up for one (1) hour.

Lates requires students to complete the [Makeup/Bank Time form](#) and follow the [Notification Policy](#) and [Late Time Exception Protocol](#), or further penalties will ensue.

Non-Compliance: Late Policy

Students are held to the same standard as Radiographers for being present as scheduled to perform examinations. The following addresses the outcomes for exceeding four (4) lates for the duration of the program, reported by the Clinical Preceptor and/or NCC Radiography Staff:

Consequence for the fifth (5th) late

- ✓ [Written Verbal Warning \(WVW\)](#)
 - Two (2) points will be deducted from the current clinical course grade.

Subsequent occurrences

- ✓ [Continual Non-Compliance \(CNC\)](#)
 - Two (2) points are deducted from the current clinical course grade for each incident.
 - Forfeiture of one (1) day of clinical must be made up.
 - Further consequences apply if the student has already exceeded two or more days of clinical absence. Refer to [Clinical Time Off \(CTO\)](#)

Clinical Time Off (CTO)

Excluding winter clinical, students are allowed two (2) days off per semester without a point penalty. Therefore, it is prudent to use the allowance wisely in unforeseen circumstances that may push your allowance into grounds for point deductions or withdrawal. The missed days should be in half or full-day increments.

The two allotted days are non-transferable between semesters and require makeup if not taken, unless one of those days was taken as a *Free Day*.

Winter Clinical is a condensed clinical training course that requires stringent attendance standards. Missing one day is equivalent to missing two days of clinical in a regular 14-week schedule. Therefore, any missed days, excluding days when the campus closes due to inclement weather, will require makeup.

CTO requires students to complete the [Makeup/Bank Time form](#) and follow the [Notification Policy](#) and [CTO Time Exception Protocol](#); otherwise, additional penalties will be incurred.

Non-Compliance: Clinical Attendance Policy (Excluding Winter Clinical)

Students are held to the same standard as Radiographers for being present as scheduled to perform examinations. The following addresses the outcomes for exceeding two (2) days of absence per clinical course, regardless of the days made up and if one day was a 'Free Day,' reported by the Clinical Preceptor and/or NCC Radiography Staff:

NOTE: Each instance from days three (3) to six (6) is a deduction of two (2) points from the clinical course grade in addition to the requirement to make up the missed day within the affected semester. The 7th occurrence results in involuntary withdrawal.

Consequences for days three (3) through seven (7):

- ✓ (Day 3) [Written Verbal Warning \(WVW\)](#)
- ✓ (Day 4) [Written Warning \(WW\)](#)
- ✓ (Day 5) [Corrective Action Plan \(CAP\)](#)
- ✓ (Day 6) [Disciplinary Action Plan \(DAP\)](#)
- ✓ (Day 7) [Involuntary Withdrawal](#)

Consequences for not making up absences by the end of the affected clinical practice

- Clinical V will be incomplete until days are made up during the [six-week extension](#) offered after the program's end.
 - Graduation in May will not be an option. Graduation will be pushed to either August or January, depending on the outstanding days. It is not until the student graduates that they will be eligible to sit for their boards.

Non-Compliance: Clinical Attendance Policy (Winter Clinical)

As stated, Winter Clinical is a condensed clinical training course requiring stringent attendance standards. Missing one day is equivalent to missing two days of clinical in a regular 14-week schedule.

A two (2) point penalty begins on the first day missed in addition to the requirement to make up the missed day within the affected semester. The 5th occurrence results in involuntary withdrawal.

Consequence for day one (1) up to a maximum of five (5) days

- ✓ (Day 1) *Written Verbal Warning (WVW)*
- ✓ (Day 2) *Written Warning (WW)*
- ✓ (Day 3) *Corrective Action Plan (CAP)*
- ✓ (Day 4) *Disciplinary Action Plan (DAP)*
- ✓ (Day 5) *Involuntary Withdrawal*

Consequences for not making up absences by the end of the affected clinical practice

- Clinical 1B will be incomplete until the days are made up before Clinical II starts.

Free Day

Starting in Clinical Practice II (RADT117), students can request CTO without a make-up per semester. This allowance is part of your two-day allowance before incurring a point penalty. Refer to the section: [Clinical Time Off \(CTO\)](#).

This allowance can be pre-planned or taken on the day of, and it is prudent to use it wisely in unforeseen circumstances that may push your allowance into grounds for point deductions or withdrawal. Applicable policies must be followed for notification; failure to do so will result in the allowance being retracted and the day required to be made up.

This allowance cannot be used for rotations through an outpatient facility, specialty rotations (Clinical III), or student choice rotations (Clinical V). This allowance does not transfer and counts as a strict 8-hour increment during Clinical Practice II, IV, and V and a strict 10-hour increment during Clinical Practice III.

If you should not utilize this allowance, it will count as two (points) toward your current Clinical Practice grade.

The allowance is not to be used in place of forfeiture of days issued due to continual non-conformance, a corrective action plan, a disciplinary action plan, or suspension.

Free Day requires students to follow the [Notification Policy](#) and [Free Day Time Exception Protocol](#), or privileges are forfeited.

Bank Time

Bank time can be accrued for volunteering, participating in club events (e.g., pinning), receiving merit awards, or attending clinicals on non-scheduled days that do not conflict with JRCERT standards. Bank time is non-transferable between semesters and is not permitted for the following:

- CTO during Winter Clinical
- To offset any attendance issues/absences/make-up time in the current semester

For each semester, a student can acquire up to eight (8) hours of bank time (10 hours in Clinical Practice III) that can be used for either pre-planned absences or decided on the day of absence. When bank time is used, it **may not be replenished within the same semester** and should be used in half- or full-day increments.

Bank Time requires students to complete the [Makeup/Bank Time form](#) and, if applicable, follow the [Bank Time Exception Protocol](#), or privileges are forfeited.

Merit Award: Way to Go (WTG)

The “Way to Go” award is given at the discretion of the Clinical Preceptor, with the validation of the Clinical Education Coordinator, for outstanding student performance. The reward is one (1) hour of release from clinical practice. Any time earned from a Way to Go must be used in the semester it was earned.

Those who have earned the merit award will be recognized at the next Opening Program/Clinical Education Meeting. The Faculty and Program Director can use the merit award as a resource material for writing references.

Documentation should be emailed to the Clinical Education Coordinator or Program Director for student files. It can also be faxed to 610-861-4581.

<i>WTG requires students to follow the WTG Time Exception Protocol.</i>

Clinical Notification Policy

Clinical Time Management System: Trajecsyst

Every day of attendance must be documented, with arrival and departure entries recorded in an online clinical management system, Trajecsyst, assigned to a computer at each clinical site. You are advised to arrive at the clinical site with enough time to clock in Trajecsyst before the scheduled clinical shift begins.

Although there is the capability, students cannot clock in or out on any platform other than the one assigned (e.g., personal phone, laptop, etc.). Clocking in and out on an unapproved platform is deemed non-compliant and will result in penalties.

Be aware that falsifying attendance records and asking another student to clock in is considered an [Academic Honesty Violation](#) and may result in an automatic dismissal from the program for both parties involved. Please note that such a violation must be reported to the ARRT, and you may be denied the privilege of taking your certification exam. See [ARRT-Violation of Academic Honor Code in Radiography Program](#).

Non-Compliance: Trajecsyst Clock-in/out Policy

Students are held to the same standard as Radiographers for being present as scheduled to perform examinations. The following addresses the outcomes for either not clocking in or out on Trajecsyst or clocking in or out on any platform other than the assigned computer at each clinical site.

Incidents will be reported for the duration of the program by the Clinical Preceptor and/or NCC Radiography Staff:

Consequence for the first (1st) occurrence

- ✓ [Written Verbal Warning \(WVW\)](#)

Subsequent occurrences

- ✓ [Continual Non-Compliance \(CNC\)](#)
 - Two (2) points are deducted from the current clinical course grade for each incident.

Notification Policy + Time Exception in Trajecsyst

The following pertains to any deviation from routine clinical hours. Examples of deviation may include all or some of the following: either requested in advance or occurring on the day of arrival, departure, or requesting CTO.

Notification Policy

No matter the circumstance, the student must notify the following personnel at least ten (10) minutes before the expected clinical arrival/departure time:

- **Clinical Preceptor (CP)**

- Phone call only, at least 10 minutes before the expected clinical arrival or departure time.
 - If CP is not available, contact the Manager or Charge Technologist
- *Students must notify the CP of school closure, delay, or early dismissal.*
- **Clinical Education Coordinator (CEC) AND Professional Clinical Student Supervisor (PCSS)**
 - Text, teams, OR email CEC AND PCSS at least ten (10) minutes before the expected clinical arrival/departure time.
 - *Students are not required to notify CEC or PCSS of school closures, delays, or early dismissals.*
 - For Absence or Free Day only:
 - Email the CEC and PCSS later in the day in the following format:
 - Type "Absent" or "Free Day" in the subject section of the email
 - Type your name and date of absence/free day in the body of the email

The Clinical Preceptor is not responsible for relaying the student's message to the Clinical Education Coordinator, nor is the Clinical Education Coordinator accountable for relaying the student's message to the Clinical Preceptor.

Non-Compliance: Notification Policy

The following applies for failure to notify the CP, CEC, **AND** PCSS for instances of arriving late, leaving early, or absence:

First occurrence

- ✓ *Written Verbal Warning (WW)*
 - One (1) point will be deducted from the current clinical course grade.

2nd and 3rd Occurrence

- ✓ *Continual Non-Compliance (CNC)*
 - Two (2) points are deducted from the current clinical course grade for each incident.

Consequences for occurrences four (4) through seven (7):

- ✓ (4th Occurrence) *Written Warning (WW)*
 - Two (2) points will be deducted from the current clinical course grade
- ✓ (5th Occurrence) *Corrective Action Plan (CAP)*
 - Five (5) points will be deducted from the current clinical course grade
- ✓ (6th Occurrence) *Disciplinary Action Plan (DAP)*
 - Five (5) points will be deducted from the current clinical course grade
- ✓ (7th Occurrence) *Involuntary Withdrawal*
 - Withdrawal from the Program based on continually disregarding the "Notification Policy"

Time-Exception

In addition to the Notification Policy, a Time Exception must be filed through Trajecsys. A time exception provides a method of communication and documentation for any time missed during the student's clinical experience.

The time exception must be completed with a comment. Failure to do so will result in an incomplete exception, causing further delay and potentially leading to unforeseen point deductions and/or repeating clinical days. Common Time Exception protocols are as follows:

Clinical Time Off (CTO) Time Exception

- Make sure you follow the [Notification Policy](#), or you incur penalties
- Click "time exception."
- Click "absent"
- Fill in the "comment section."
 - Type the reason for absence and which Clinical Preceptor or manager you notified
- Follow through with the ["Makeup/Bank Time" form](#)

Free Day Time Exception

- Make sure you followed the [Notification Policy](#), or you forfeit the privilege
- Click "time exception."
- Click "absent"
- Fill in the "comment section":
 - Type 'Free Day' and the Clinical Preceptor or manager you notified

Late Time Exception

- Make sure you follow the [Notification Policy](#), or you incur penalties
- Clock in:
 - Click "time exception."
 - Fill in the "comment section"
 - Type the reason why you are late and which Clinical Preceptor or manager you notified
- Follow through with the ["Makeup/Bank Time" form](#)

Leaving Early Time Exception

- Make sure you follow the [Notification Policy](#), or you incur penalties
- Clock out:
 - Click "time exception."
 - Fill in the "comment section"
 - Type the reason why you are leaving early and which Clinical Preceptor or manager you notified
- Follow through with the ["Makeup/Bank Time" form](#)

NCC Inclement Weather Closure Time Exception

- Make sure you follow the [Notification Policy](#), or you incur penalties
- Click "time exception."
- Click "absent"

- Fill in the "comment section."
 - Type 'Snow Day' and the Clinical Preceptor or manager you notified

NCC Inclement Weather Delayed or Early Dismissal Time Exception

- Make sure you follow the [Notification Policy](#), or you incur penalties
- Clock in/out
 - Click "time exception."
 - Fill in the "comment section":
 - Type 'Delayed opening until (write opening time)' and the Clinical Preceptor or manager you notified
 - Type 'Early dismissal at (write dismissal time)' and the Clinical Preceptor or manager you notified

Bank Time Exception

- Follow through with the ["Makeup/Bank Time" form](#)
- Cannot use "Bank Time" if you have pending make-up time
- Clock in:
 - Click "time exception."
 - Fill in the "comment section"
 - Type 'Bank Time'
 - Click "I am still at the site."
- Clock out:
 - Click "time exception."
 - It will have a "clock-out" time for you
 - Click "accept"

Way to Go (WTG) Time Exception

- Follow through with the ["Makeup/Bank Time" form](#)
- Clock in/out:
 - Click "time exception."
 - Fill in the "comment section":
 - Type 'WTG' and how many hours used

Make-Up Days

Negotiations between you and the Clinical Preceptor must be completed via the [Makeup/Bank Time form](#) (located in Trajecsyst) within three (3) days of returning to clinical. **Failure to schedule a make-up day within 3 days of returning to clinical will result in having to make up an additional day.**

The days that were decided to be made up do not need to be made up in those three days. The clinical preceptor will retain a copy for reference, and the student will email the completed form to the CEC and PCSS by the end of the third day of returning to clinical. **Failure to follow through with the scheduled make-up time will result in making up two days (the original day plus the missed make-up day).**

All students are given the same opportunities for make-up time. The determination is based on several factors, e.g., staff availability to supervise students adequately. Students may request to schedule

themselves during NCC breaks (Fall, Spring, and between semesters), weekends, or afternoons when classes are finished (half days), provided those days do not coincide with college closures.

Remember, make-up time is relevant to the rotation you have missed. For example, if you are absent during an OR rotation, you must make up that day in the OR. Refer to the [Clinical Schedule](#) section in this handbook.

Scheduled make-up time will follow the same policies as regularly scheduled clinical days. To optimize educational efficiency, students should be scheduled for at least half or full-day increments with no more than ten (10) hours in one day. All make-up time should be completed before the start of the following semester. If this is not possible, the Clinical Preceptor and Clinical Education Coordinator will coordinate the make-up time. Any outstanding make-up time at the end of Clinical Practice V will result in the use of a [6-week extension](#).

Make-up/Bank Time Form

The Make-up/Bank Time form, located in Trajecsyst, is used for any hours that deviate from the original clinical schedule and require negotiations between the student and the Clinical Preceptor.

Standard negotiations are when:

- The student will make up days
- The student plans to be at clinical to bank days
- The student plans to use bank time

The basic steps are as follows:

- 1) Retrieve the "Makeup/Bank Time" form from Trajecsyst
- 2) If applicable, schedule your make-up time within three days of returning to clinical.
 - The following applies when negotiating:
 - Make-up time is required in the same rotation that was missed.
 - To optimize educational efficiency, make-up time should be at least half or full-day increments with no more than ten (10) hours in one day.
 - Make-up time is coordinated and agreed upon with the clinical preceptor, followed by the student.
 - Failure to follow through with scheduled make-up time will result in making up a 2nd day (the original day + the missed make-up day).
- 3) If applicable, schedule when you will be at clinical to earn bank time
 - Bank time can only be earned in half or full-day increments.
- 4) Email the completed form to the CEC and PCSS.
- 5) No last-minute scheduling is permitted.
- 6) The Clinical Preceptor must be given 24 hours' notice to use approved make-up/bank time.

Competency and Proficiency Requirement

Students will participate in various clinical sites and can complete the competency and proficiency requirements set forth by the ARRT.

- 🔗 For current ARRT requirements, refer to the following link: [Radiography Didactic and Clinical Competency Requirements.](#)

The following is a summary of *competency* and *proficiency evaluations* for program completions.

- Prerequisite knowledge *competency evaluations*– 3 (first semester)
- Room competency evaluation at the second clinical site
- General patient care activities – 10 mandatories
- Mandatory *competency evaluations* – 36
 - ✓ No more than three (3) mandatory competency evaluations may be simulated.
- Elective *competency evaluations* – 15
 - ✓ Stipulations for elective competency evaluations:
 - One (1) elective must be from the head section.
 - Two (2) electives must be from the fluoroscopy studies section.
- Mandatory *proficiency evaluations* – 6 in the second year

Direct and Indirect Supervision Policy

As per [JRCERT Standard 5.4](#): "The program assures that medical imaging procedures are performed under the appropriate supervision of a qualified radiographer." Before performing any competency or proficiency test, it is essential to understand the Direct and Indirect Supervision Policy in a clinical education setting. The following verification forms address these stipulations:

Student Direct and Indirect Verification of Understanding Form

- Completed by students for each clinical semester with preceptor acknowledgment

Staff Technologist Verification of Direct and Indirect Supervision of Students

- Completed biannually by staff technologists at each participating clinical site

Direct Supervision

Until a student achieves competency in any given procedure, all clinical assignments shall be conducted under the direct supervision of a qualified (ARRT-certified and registered) radiographer.

The parameters of **direct supervision** are as follows:

A qualified (**ARRT-certified and registered**) radiographer:

1. Is physically present during the performance of the procedure.
2. Reviews the procedure for the student's achievement.
3. Evaluates the patient's condition in relation to the student's knowledge.
4. Reviews and approves the procedure and images.

After demonstrating competency through a competency evaluation on a procedure, the student may perform that procedure under indirect supervision, except for the following scenarios, which are listed in detail below: transporting patients, simulated exams, repeated views/exams, surgical procedures, mobile radiographic (portable) procedures, mobile fluoroscopic (C-arm) procedures, and transmission of images.

Transporting Patients

Adherence to [JRCERT Standard 4.4](#) requires a comprehensive clinical education plan. This plan ensures an equitable learning experience for students and prohibits their use as substitutes for staff. Consequently, students are not permitted to transport patients without direct supervision. This level of supervision is vital for optimal student learning, accurate procedure execution, ethical practice, and, most critically, the unwavering safeguarding of patient well-being.

Simulated Exams

Simulated exams require direct supervision. If a patient presents later, the exam can be completed to evaluate images and verify indirect supervision.

Repeated Views/Exams

All repeats, even if the student passes competency, must be performed under the direct supervision of a qualified radiographer (ARRT-certified and registered) who is physically present during the procedure. The certified radiographer must follow the parameters listed under Direct Supervision.

Surgical, Mobile Radiographic (Portable), and Mobile Fluoroscopic (C-arm) Procedures

All surgical and mobile radiographic exams (portable) and mobile fluoroscopic procedures (C-arm) must be performed under direct supervision, even if the student has demonstrated competency, by a qualified radiographer (ARRT-certified and registered) who is physically present during the procedure. The certified radiographer must follow the parameters listed under Direct Supervision.

Transmission of Images

Whether directly or indirectly supervised, the Radiographer must inform students when they may accept or delete patient images for which the Technologist is responsible. Students may not send (or delete) images without approval.

Indirect Supervision

Indirect supervision may be enacted once competency is achieved for a particular study. It is defined as provided by a qualified (ARRT-certified and registered) radiographer who is immediately available to assist students regardless of their level of achievement.

Immediately Available – Defined

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 applies to all areas where ionizing radiation equipment is used on patients.

Training at a Site with Unregistered Technologists

Technologists who have not yet passed their boards (unregistered through the ARRT) do not have the qualifications to supervise you in any capacity - only a Registered RT can provide direct or indirect supervision. Students may only work with an unregistered technologist if a Registered RT is present to provide direct or indirect supervision for the exam.

As a student, you may be in the presence of an unregistered technologist recently hired and given grace, usually six (6) months to one (1) year, to register. In your best interest, recognize when such a situation occurs and refrain from violating the [JRCERT Standard 5.4](#).

Student Responsibility for Appropriate Supervision

The student knows what competencies they have completed and must remain aware of their supervising technologist's presence when performing/practicing exams they have not yet comped.

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It is the student's responsibility to ensure proper supervision. It is just as appropriate to remind a tech that you have passed a comp on a procedure and like to work independently as it is to say that you have not comped a procedure and need them to observe.

Non-compliance: Direct and Indirect Supervision Policy

The Indirect and Direct Supervision Policy is enforced through the [JRCERT Standard 5.4](#) to assure patient safety and proper educational practices. The following steps will be taken in response to noncompliance with the Direct and Indirect Supervision Policy reported by the Clinical Preceptor and/or NCC Radiography Staff:

First occurrence

- ✓ [Corrective Action Plan \(CAP\)](#)
 - Five (5) points deducted from current clinical course grade.

Second occurrence

- ✓ [Disciplinary Action Plan \(CAP\)](#)
 - Five (5) points deducted from current clinical course grade.
 - Forfeiture of one (1) day of clinical must be made up.
 - Further consequences apply if the student has already exceeded two or more days of clinical absence. Refer to [Clinical Time Off \(CTO\)](#)

Third occurrence

- ✓ [Involuntary Withdrawal](#)
 - Withdrawal from Clinical Practice based on continually disregarding patient safety encompassed within the "Direct and Indirect Supervision Policy."

What to Do as a Student: JRCERT Supervision Concerns

If a situation poses immediate danger to a patient, act to protect the patient first and then address the policy violation. Remain respectful and professional throughout the process, even when expressing concerns or disagreements.

The following steps are suggestions to uphold patient safety and maintain the integrity of your radiologic technology education:

1. Immediately stop the procedure:
 - Do not continue the procedure if you feel it violates JRCERT standards.
 - Patient safety and your education are paramount.
2. Speak with the Supervising Technologist:
 - Explain your concerns calmly and professionally. It could be a misunderstanding, or there might be factors you're unaware of. Some examples of direct and respectful statements:
 - "I understand you're busy, but I'm still learning and need direct supervision for this procedure according to JRCERT guidelines. Could you please stay with me?"

- "I'm uncomfortable performing this exam without direct supervision. JRCERT regulations require it, and I want to ensure we follow proper procedures."
 - "I'm eager to learn, but I need your guidance to perform this exam correctly and safely. Can we please follow the JRCERT guidelines?"
3. Notify the Clinical Preceptor or Site Manager if the technologist dismisses your concerns
 - Email the Program Director or Clinical Education Coordinator documenting the date, time, location, and individuals involved with a factual detail of the situation
 - This documentation is imperative if further action is needed
 4. Consult with the Radiography Program Director if an internal resolution is insufficient.

Competency Evaluations

Eligibility to Perform Competency Evaluation

The practical evaluations in the NCC lab bridge the gap between classroom knowledge and real-world clinical practice. These assessments, designed to prepare you for success in clinical competency evaluations, provide opportunities to practice under controlled conditions and receive expert feedback.

You'll be eligible to perform the corresponding competency evaluation at your clinical site after successfully completing a lab practical. However, passing the lab practical is mandatory. Failure to do so will result in a clinical experience suspension until you demonstrate mastery through a repeat evaluation.

Remember, clinical days are critical for your development. Any days missed due to outstanding practical evaluations will be forfeited and require make-up; additional consequences will apply for exceeding two or more days of absence. For details, refer to the [Clinical Time Off \(CTO\)](#) section.

Generally, your clinical rotations involve observation, assistance, and independent performance of competency exams. By the progress report deadline, you're expected to complete approximately one-third (1/3) of the required evaluations for the semester. Please refer to the syllabus for specific due dates.

Competency exams may only be performed during student clinical rotations, not while working as an employee. Engaging in such practices will result in severe consequences, including a failing grade, potential suspension, or withdrawal from the program. See the section [Policy for Student Employment in Radiology](#).

Eligible Evaluators for Competency Evaluations

Any of the following certified radiographers may do the competency evaluations:

- Radiographer designated by the Clinical Preceptor
- Clinical Preceptor
- Clinical Education Coordinator
- Professional Clinical Student Supervisor
- Program Director

Competency Clause: Maintaining Your Learning Experience

This change only takes effect starting with the new cohort in Fall 2025.

To ensure comprehensive and effective learning experience, students are assigned a mandatory number of competencies to complete for each clinical course. Students are not permitted to complete competencies ahead of this assigned schedule. This policy is in place to support a structured learning progression and maximize the educational value of each competency.

Competency Terms

Incomplete Competency Form = Fail

Completing your clinical rotations requires demonstrating competency in the assigned skills and procedures. To ensure a thorough assessment, we utilize standardized competency evaluation forms. **Incomplete competency forms will result in an automatic failure for the evaluated skill.** This is because incomplete documentation hinders our ability to assess your proficiency and ensure patient safety accurately. Be proactive by reviewing evaluations beforehand and seeking clarification before submitting them.

Number of Competency Exams Permitted on a Single Patient

There should be one competency exam per patient. Every patient presents differently and affords a distinct learning experience. Multiple competencies on a single patient would duplicate graded evaluation items, such as history taking and room readiness.

Single View Competency Exams Listed as One View on the ARRT Competency Requirements Sheet

Students must be able to perform the entire exam protocol, which may include additional views. The additional views will be included/graded on the comp sheet, and the single view being comped must be done correctly. When one of the additional views needs to be repeated, a zero is entered in the appropriate row; however, the component will be marked as approved in Trajecsys, as the required view was satisfactory. For example, a Chest AP (Performed on a Wheelchair or Stretcher) completes the entire study but is not graded as a failure if the lateral view needs to be repeated.

Volunteering to do Competency Evaluation

The student must adhere to the following guidelines when performing competency evaluations:

Before Beginning

- **Declare your intent to be graded:** Inform the evaluator immediately that you wish the procedure to be graded for program credit.
- **Complete the competency form accurately:** Ensure the "Category" and "Procedure/Exam" fields are accurately filled out on the provided form. This information is crucial for record-keeping and tracking your progress.

Failure to follow these guidelines will result in the examination not being counted towards your program completion. Pre-screening or evaluating the patient before declaring your intention for a graded evaluation is strictly prohibited. Violation of this rule may lead to disciplinary action.

Random Selection

If you are ready to do a competency evaluation but do not volunteer to perform the exam, you may be selected to perform the competency evaluation.

Patient Observed as in "Poor Condition" by the Radiographer.

Suppose the radiographer feels the patient is in such poor condition that it would be unsafe for a student to attempt a competency evaluation. In that case, they have the right to prohibit the attempt for the patient's and student's welfare. The student should then team up with the radiographer to gain valuable experience and safely manage the imaging of the patient.

Failure of a Competency Evaluation

The Clinical Preceptor will ensure that the failed competency is entered into Trajecsyst. The evaluation screen needs to be completed as much as possible so that the comments indicate the deficiencies that need to be addressed for improvement. The Clinical Preceptor should mark the comp "Not Approved" so that it is flagged for the Clinical Education Coordinator to review and assign a permanent grade.

Remediating Failed Competency Evaluation

All failed competencies require remediation and must be successfully performed before the end of the program. In the event of a failed competency evaluation, the following is required:

- Remediation (do another competency evaluation on the procedure)
- The CP will record the remediated procedure in Trajecsyst ("other evaluations" tab) as either a pass or a fail.
- After the pass or fail has been entered by the CP and approved by the Clinical Education Coordinator, the student can do a repeat competency evaluation for a "letter" grade.

To simplify record-keeping, all failed competencies must be remediated successfully before students transfer to their second rotational site. This way, CPs know that incomplete comps can be performed without needing to investigate whether remediation was completed. Simulation is allowed for this purpose.

Fourth Repeat of Same Competency Evaluation

The student will be withdrawn from the program if they reach a maximum of four repeats on the same competency, including failed remediations.

Competency Refusal

Competency evaluations are performed randomly. Just as a radiographer cannot pick or choose an examination, the student cannot determine or select patients.

Refusal involves any of the following scenarios:

- A student refused to do a competency when they stated they were ready.
- The Clinical Preceptor felt the student was sufficiently trained to perform the competency, and the student refused to perform it.

For instances of refusal, the Clinical Preceptor is to record the following in Trajecsyst:

- Grade of zero (0)
- Date & name of the study refused.
- Write that the ***student refused to do the examination.***

Non-Compliance: Competency Refusal

Students are held to the same standard as radiographers for their inability to choose patients. The following steps will be taken in response to non-compliance with "Competency Evaluations" reported by the Clinical Preceptor and/or NCC Radiography Staff:

First occurrence

- ✓ *Written Verbal Warning (WVW)*
 - Two (2) points will be deducted from the current clinical course grade.

Subsequent occurrences

- ✓ *Continual Non-Compliance (CNC)*
 - Three (3) points are deducted from the current clinical course grade for each incident.

NOTE: Based on the act of refusal, the student will not be permitted to simulate that examination if the procedure becomes available again on a "live" patient.

- ✓ If a "live" patient comes in before the start of Clinical Practice V, the student is expected to perform the competency on that patient.
- ✓ If a "live" patient does not come in before the end of Clinical Practice V, the student must continue into the *six (6)-week extension* until the competency has been completed without simulation.

Proficiency Evaluations

The Radiography Program expects its students and graduates to be competent and proficient in performing procedures. In other words, you are expected to maintain your proficiency through constant repetition once a competency procedure has been passed.

Proficiency Evaluations Required

During the second year, the student will have completed proficiency evaluations in each of the following areas:

Category 1: Chest and Thorax

Category 2: Upper Extremity

Category 3: Lower Extremity

Category 4: Head

Category 5: Spine and Pelvis

Category 6: Fluoroscopy Studies

Three (3) proficiency evaluations are to be completed in the second fall semester and three (3) in the second spring semester.

Proficiency Terms

Proficiencies will be performed under the guidance of the Clinical Preceptor and/or Clinical Education Coordinator. Procedures are randomly chosen and given so that the evaluator may tell the student that the next “study” that comes through the door is theirs to do as a proficiency.

Failure of a Proficiency Evaluation

The Clinical Preceptor will ensure that the failed proficiency is entered into Trajecsyst. The evaluation screen needs to be completed as much as possible so that the comments indicate the deficiencies that need to be addressed for improvement. The Clinical Preceptor should mark the proficiency “Not Approved” so that it is flagged for the Clinical Education Coordinator to review and assign a permanent grade.

Remediating a Failed Proficiency Evaluation

Failed proficiencies require remediation and must be successfully performed before the end of the program. In the event of a failed proficiency evaluation, the following is required:

- Remediation (do another proficiency evaluation on the procedure)
- The CP will record the remediated procedure in Trajecsyst (“other evaluations” tab) as either a pass or a fail.
- After remediation of a proficiency evaluation, if it is difficult to repeat the same procedure due to the infrequency of that procedure, the Clinical Preceptor may have the student simulate the procedure or request that the student do any other procedure within that same category.

Fourth Repeat of Same Proficiency

The student will be withdrawn from the program if they reach a maximum of four repeats on the same proficiency, including failed remediations.

Simulation

At the discretion of the Clinical Preceptor and Clinical Education Coordinator, the simulation may begin at the start of the last clinical practice course, provided there is no deviation from competency and proficiency requirements.

As a student, placement in varying clinical sites affords an equitable experience to complete competency and proficiency obligations. The students are responsible for ensuring the experience is taken advantage of before approaching the start of the last clinical practice.

Simulations are used for extenuating circumstances that are agreed upon by the majority. Simulations will not be granted due to avoidance/procrastination on your part and will result in utilizing the entire *six-week extension* to complete.

Simulation: Direct

Simulated exams remain a procedure that requires **Direct Supervision**. If a patient presents later, the exam can be comped at that time so that images can be evaluated, and Indirect Supervision verified.

Guidelines

- Procedure must be rarely done as determined by the Clinical Preceptor and Clinical Education Coordinator.
- **No more than three (3) mandatory** competency evaluations can be simulated.
- Simulations must be performed on a human being without exposure.
- Obtain images of the procedure and utilize these images for the *"Image Analysis"* section of the Student Competency/Proficiency Evaluation Form.
- Use the competency or proficiency evaluation sheet in Trajecsys.

Image Critiques and Written Assignments

Image critiques are a cornerstone of the student's clinical education, providing a dynamic platform to hone their critical thinking, problem-solving, and information synthesis skills. Students will learn to effectively analyze and present medical images through prepared and surprise critiques, demonstrating their ability to translate theoretical knowledge into real-world application.

Image critiques are presented at the student's respective clinical sites. The clinical preceptor provides a major and minor critique, as well as a surprise critique/activity. Additionally, there are clinical experiences and a transfer site comparison/contrast paper in the first and last semesters, respectively.

Critique and Paper Schedule

Clinical Practice I—fall semester, first year.

- Clinical Experience paper

Clinical Practice II—spring semester, first-year

- (1) Major, (1) Minor, (1) Surprise

Clinical Practice III—summer session, first year

- (1) Major, (1) Minor, (1) Surprise

Clinical Practice IV—fall semester, second year.

- (1) Major, (1) Minor, (1) Surprise

Clinical Practice V—spring semester, second year

- (1) Transfer site comparison/contrast paper

Major Image Critique Criteria

The major image critique is an **extensive** report on a particular procedure/study and must include all the items on the "Image Critique/Image Evaluation" sheet. Examples include but are not limited to Head work/Facial bones, GI series, or hip pinning.

Minor Image Critique Criteria

A minor image critique is usually shorter than a major image critique. Consult your Clinical Preceptor to ensure all expectations are met. Examples include but are not limited to the following:

- specific position
- Specific radiographic view
- A positioning or technique problem
- Artifacts
- Positions or techniques related to pathology or trauma,
- Quality control testing methods, etc.
- A problem that has stimulated the interest of the student.

Surprise Image Critique Criteria

The Clinical Preceptor will present the topic to the student for an immediate response/solution as appropriate. As a rule of thumb, the surprise image critique usually **does not or may not** cover all twelve (12) image critique items. This surprise critique may focus on a student's area of weakness. Examples include but are not limited to:

- Artifacts
 - ✓ identify, discuss.
- Critical thinking exercise
 - ✓ Synthesize all the information.
 - ✓ form a solution or demonstrate how something should be done.
- Problem-solving exercise.
- Room set-up

Picking/Approval of Topics

When choosing a topic for a major, minor, or surprise image critique, the student and/or Clinical Preceptor should consider the student's experience level in didactic/clinical education. The student has the option to pick their topic, or the Clinical Preceptor has the option to assign the topic(s) to the student. If the student picks their topic, it must be approved by the Clinical Preceptor before posting to the Image Critique Schedule.

Image Critique Writing Assignment

In addition to orally presenting image critiques, students must submit a written paper covering their major and minor image critiques. This paper should organize the students' thoughts and oral presentation techniques and further prepare them for their critiques.

Guidelines

1. The text of the paper will consist of these main parts:
 - a. Covering descriptors 1-10 from the "Image Critique/Image Evaluation" Grading Sheet for the Major and Minor Critique.
 - b. Format/Neatness/Grammar/Parenthetical citations/Works cited will be assessed.
 - c. Double-spaced.
 - d. All borders should be one (1) inch.
 - e. Include page numbers.
2. The paper's Overall organization and flow will also be graded.
3. Students must submit their research paper electronically to the Clinical Education Coordinator as described in the course syllabus.

Posted Image Critique Schedule

The image critique schedules are posted in the radiology department. A copy of the form is forwarded to the Clinical Education Coordinator at NCC. The schedule includes the following:

- Date of the image critiques
 - ✓ Typically, in the last half of each semester or summer session
- Starting time
- Student names
- Topics of the significant and minor critiques

Audience

The audience may consist of classmates, staff radiographers, Clinical Preceptors, radiologists, and, if possible, the Clinical Education Coordinator and/or the Program Director.

Expectations of Student Presenter

- Collect the images.
 - ✓ Do not use the ones in the NCC teaching files on campus.
 - ✓ Students are encouraged to learn how to retrieve the images at the clinical site.
- Utilize other imaging modalities, such as CT, MRI, and Interventional studies when possible.
- Make copies of images only if the clinical site allows it.
- Do not breach HIPAA guidelines for patient privacy.
 - ✓ Anonymize the images (remove patient identifiers)
- Check with your clinical preceptor about using your clinical site's medical records department, library, and teaching file for research purposes and adhere to HIPAA guidelines.
- Thoroughly research the information on the topic that has been chosen.
- It is good to have normal and abnormal images when a disease process is being presented.
- Use diagrams when and if you feel that it is appropriate.
- Be as creative and interesting as possible.

Grading

Refer to the applicable clinical course syllabus to determine the assignment's point value. The grading of the image critiques is done using the following twelve (12) descriptors from the grade sheet:

- ✓ Patient history: Able to describe from admission to discharge.
- ✓ Patient's description: Age, sex, body habitus, etc.,
- ✓ Positioning: Able to describe the patient's set-up for the procedure
- ✓ Exposure factors/indices and equipment used: Able to discuss.

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- ✓ Radiation protection: Able to discuss principles and applications.
- ✓ Anatomical structures: Able to identify - know if visualized.
- ✓ Pathology or disease process: researched and able to explain.
- ✓ Density and contrast: able to apply principles for image improvement.
- ✓ Artifacts on the image: identifies and describes how to prevent.
- ✓ Evaluation of image: able to suggest methods for improvement.
- ✓ Communication/presentation skills, including medical terms.
- ✓ Question and answer session: entire group (peers and preceptors)

Follow the checklist on the "Image Critique Evaluation." Check with your Clinical Preceptor to determine if they prefer you to follow the checklist in any specific order. All twelve (12) areas on the checklist must be covered, but the information presented is up to the Clinical Preceptor(s) at that clinical site.

The writing assignment is graded separately using a rubric. Be sure to correlate your paper with the grading sheet.

The Clinical Preceptor enters the major, minor, and surprise evaluation grades into the Trajecsyst system, while the Clinical Education Coordinator enters the written assignment grade into Trajecsyst.

Missed image critique:

Notification is required on the day of absence as described in the [Clinical Time Off \(CTO\)](#) section. A grade of "0" will be assigned if proper notification is not received. If the proper notification is received, the missed critique will be made up on the first day back at clinical practice or at the discretion of the clinical preceptor. Ten percent (10%) will be deducted from the total score.

Didactic and Clinical Evaluations

Evaluations of Faculty by Students

Faculty evaluations are administered toward the end of each semester in the didactic and clinical education settings. This is the student's opportunity to suggest changes in how an instructor facilitates a course.

Evaluations of Students by Clinical Education Staff

The staff uses the "Technologist's Evaluation of Student Performance and Professionalism" to assess the student's performance in the affective domain. A minimum of five (5) evaluations is required for each clinical education course and is used by the Clinical Preceptors to help determine the clinical education grade for that course. A modified "Technologist's Evaluation of Student Performance and Professionalism" is utilized for the first Clinical Practice, and a minimum of five (5) is required.

Evaluations of Students by the Clinical Preceptors

The "Clinical Preceptor's (CP) Evaluation of Student Performance and Professionalism" is used by Clinical Preceptors to assess students' performance in the affective domain.

Clinical Preceptor's Evaluation by the Students

With continuous improvement in mind, the students evaluate the clinical preceptors at the end of each semester. The Clinical Education Coordinator and/or Program Director review and discuss the evaluation with the Clinical Preceptors.

Self-Evaluation by Students during Clinical Education

The student self-evaluation is completed on Trajecsyst approximately one (1) week before the end of each clinical practice course (see course syllabus). The evaluation is the student's reflection on their performance (cognitive, affective, and psychomotor). The focus is on areas of strength and those needing improvement.

Progress Reports Didactic/Clinical

Either a satisfactory (S) or an unsatisfactory (U) grade will be issued approximately six (6) weeks into the fall or spring semester (summer sessions are not applicable). A letter grade is given at the end of the semester.

Conferencing occurs between the course instructor and every student earning a U. The goal is to help that student achieve success in the course. Progress reports are not part of the final course grade; they are used as a tool to address potential issues early.

Although the Records office does not generate progress reports during the summer, clinical preceptors are required to report concerns to the Program Director and/or the Clinical Education Coordinator by the first week of July.

General Patient Care Simulations Requirement

Before graduation from the program, each student is required to complete a patient care simulation in the following: CPR, Vital signs assessment (Blood Pressure, Pulse, Respiration, Temperature, Pulse Oximetry), Sterile and medical aseptic technique, Venipuncture, patient transfer, and Care of patient medical equipment (e.g., oxygen tank, IV tubing).

These skills will be taught, evaluated, and/or validated at the Clinical Site or the College by NCC Faculty, a Clinical Preceptor, a Radiology Nurse, or a qualified healthcare professional. The outcomes for principles/concepts in each patient care area will be reinforced in all the radiography didactic courses. Successful completion of the simulations will be documented in Trajecs.

Cardiopulmonary Resuscitation (CPR)

When this area of instruction/demonstration is completed, the student will be able to:

- Recognize when CPR should be initiated on infants, children, and adults.
- Perform CPR on infants, children, and adults.
- Recognize when the Heimlich maneuver should be initiated on infants, children, and adults.
- Perform the Heimlich maneuver on infants, children, and adults.
- Perform both CPR and the Heimlich maneuver without causing unnecessary bodily harm. Know the theory behind both CPR and the Heimlich maneuver.

Vital Signs (BP, Pulse, Respiration, Temperature, Pulse Oximetry)

When this area of instruction/demonstration is completed, the student will be able to:

- Take vital signs accurately.
- List the pulse, respiration, and blood pressure rates within normal limits for a child and an adult.
- Record the readings according to departmental protocol.
- Discriminate between normal and abnormal findings.
- Understand how reading relates to the functioning of the body.
- Explain the implications of abnormal vital signs.

Sterile and Aseptic Technique

When this area of instruction/demonstration is completed, the student will be able to:

- Differentiate between medical asepsis and surgical asepsis.
- Explain the radiographer's responsibility for maintaining surgical aseptic technique when applicable.
- Demonstrate the medical aseptic hand washing technique.
- List the steps in a surgical scrub.
- Differentiate between disinfection and sterilization.

- Demonstrate the correct method of opening a sterile pack and placing a sterile object on a sterile field.
- Demonstrate the correct method of putting on a sterile gown and sterile gloves.
- Demonstrate skin preparation for a sterile procedure.
- Demonstrate the correct method of removing and reapplying sterile dressing.
- Demonstrate removal and disposal of gowns, gloves, and masks without breaking isolation principles.
- Demonstrate the correct method of linen disposal using medical asepsis principles.
- Name the agent and state the dilution used for disinfecting radiographic equipment, as recommended by the Centers for Disease Control (CDC).
- Demonstrate the proper disposal of contaminated equipment in the clinical area.
- Use isolation techniques for infectious and immunocompromised patients.

Venipuncture

When this area of instruction/demonstration is completed, the student will be able to:

- Perform venipuncture using universal precautions.
- Maintain asepsis of the area.
- Identify infiltration of the vessel.
- Know what to do for an infiltrated vessel.
- Know the departmental protocol for the procedure.
- Maintain IV patency according to established guidelines.

Transfer of the Patient

When this area of instruction/demonstration is completed, the student will be able to:

- Describe the cause, signs, symptoms, and treatment of orthostatic hypotension.
- Demonstrate the correct method of moving and positioning a patient to prevent injury to you or the patient.
- List the safety measures for transferring a patient from a hospital room to the radiographic imaging department.
- Demonstrate good body mechanics for lifting and transfer techniques.
- Assist the patient in sitting from a recumbent position.
- Assist patient in and out of wheelchair.
- Perform two-person transfer of patient from bed to stretcher and stretcher to bed.

Care of Patient Medical Equipment (e.g., Oxygen Tank, IV Tubing)

When this area of instruction/demonstration is completed, the student will be able to:

- Identify the most common types of oxygen administration equipment and explain their potential hazards.
- Identify high-flow and low-flow oxygen delivery devices.
- List the precautions that must be taken when oxygen is being administered.
- Administer oxygen to the patient according to the doctor's orders.

- List the symptoms that indicate infiltration into the surrounding tissues by an intravenous infusion.
- Move the patient without disrupting the flow of solution within the IV tubing.
- Know how to use an existing IV setup to inject contrast while maintaining medical asepsis.
- Maintain the predetermined flow/drip rate for the IV setup.
- Provide care to a patient with a tracheostomy.
- Provide care to a patient with chest tubes.
- Provide care to a patient with a urinary catheter.
- Provide care to a patient with intravenous and intra-arterial lines.
- Demonstrate how to drain and measure the output from a urinary collection bag.

Sequence Clinical Education Experience

The following sequences of the student's clinical education experience detail expectations, curricular prerequisites, and a timeline for required competencies and proficiencies.

First-year, Fall Semester: Clinical Practice I

CP I: Schedule

Two (2) days per week (Tuesday and Thursday) of clinical education.

CP I: Pre-Clinical Lab: First Three (3) Weeks

During the first three weeks of the first fall semester, the first-year students remain on the NCC (Bethlehem) campus to perform the pre-clinical orientation program involving the following topics:

- Radiation protection
- Emergencies and responses
- Ethical behavior
- Interacting with patients
- Isolation procedures
- Use of universal precautions
- Lifting and moving techniques
- Hazards (fire, electrical, chemical)
- Emergency preparedness
- Medical emergencies
- HIPAA
- Standard precautions
- MRI Safety

Pre-clinical orientation labs are a critical component of Clinical Practice I. Before progressing to the hospital assignments, students must complete the practical examinations associated with the pre-clinical labs. These examinations include assessing lifting and moving procedures, equipment operation, patient handling, and radiation protection.

Failure of the pre-clinical portion of Clinical Practice I will result in failure of the course and require re-admission.

Because the end of the pre-clinical component of the course corresponds with the end of the Add/Drop period, the student must drop all radiography courses immediately to avoid "W" grades. Reapplication to the program is required and is made through the Admissions *office*.

CP I: Required Competency Evaluation (6)

Refer to [competency evaluations](#) for protocol. The following six (6) competency evaluations are required:

Three (4) *mandatory* prerequisite knowledge evaluations:

- ✓ Equipment Operation
- ✓ Patient Care and Handling
- ✓ Radiation Protection
- ✓ MRI Safety

Three (3) competency evaluations:

- ✓ Routine chest
- ✓ 2 extremities (either upper or lower)

CP I: Required Proficiency Evaluation (0)

No proficiencies are required this semester.

CP I: Required Writing Assignment: Clinical Experience

Refer to the Image [Critiques and Written Assignments](#) section.

First-Year, Winter Session: Clinical Practice IB

CP IB: Schedule

When the session begins, around December 13th, the students continue clinical rotations for 14 days (112 hours) before the session ends around January 8th.

Rotations are limited to a scheduled maximum of forty (40) hours per week and no more than ten (10) hours in any one day.

CP IB: Required Competency Evaluation (2)

Refer to [competency evaluations](#) for protocol. Two (2) competency evaluations (either mandatory or elective) are required during the winter session.

CP IB: Required Proficiency Evaluation (0)

No proficiencies are required this semester.

First-year, Spring Semester: Clinical Practice II

CP II: Schedule

Two (2) days per week (Tuesday and Thursday) of clinical education.

CP II: Required Competency Evaluation (10)

Refer to [competency evaluations](#) for protocol. The following ten (10) competency evaluations are required:

- ✓ Abdomen (KUB)
- ✓ Nine (9) competency evaluations on anything

CP II: Required Proficiency Evaluation (0)

No proficiencies are required this semester.

CP II: Required Major, Minor, Surprise Image Critique

Refer to the [Critiques and Written Assignments](#) section.

First-Year, Summer Sessions: Clinical Practice III

The course begins with the start of Summer Session I and concludes with the end of Summer Session II. No clinical practice is permitted on Memorial Day, Juneteenth, or the July 4th Holiday. No pre-planned vacation time will be granted for program-scheduled clinical time, with no exceptions.

During the Summer Semester, students will rotate between sites to gain a deeper understanding of various clinical environments and cultures. Students will be responsible for acting as mentors for incoming peers, preparing them to become mentors for incoming first-year students in Clinical IV.

When the student has reached 336 hours of clinical time, which usually occurs sometime after the first week of August, they may utilize the remaining time until the official end of the Summer II Session for any needed make-up time.

CP III: Schedule

Except for the first two days, which encompass 14 hours of didactic instruction, clinical is Monday through Thursday, ten (10) hours per day for a maximum of 40 hours in any one week. Each day consists of not more than 9.5 hours of clinical with a 45-minute lunch break. If the standard break time at a site is longer, the clinical practice time must be reduced to maintain the 10-hour per day limit. One (1) week consists of a middle shift (approx. 2:00 p.m. – 12:00 a.m.) rotation.

CP III: Required Competency Evaluation (16)

Refer to [competency evaluations](#) for protocol. Sixteen (16) competency evaluations (either mandatory or elective) are required during the summer session.

CP III: Required Proficiency Evaluation (0)

No proficiencies are required this semester.

CP III: Specialty: CT/MRI/IR/Choice)

Students will shadow one (1/2) day in each of the following:

- One (1/2) day in Computed Tomography
- One (1/2) day in Magnetic Resonance Imaging
- One (1/2) day in Interventional Radiology
- One (1/2) day in Choice Modality

CP III: Required Major, Minor, Surprise Image Critique

Refer to the [Critiques and Written Assignments](#) section.

Second year, Fall Semester: Clinical Practice IV

CP IV: Schedule

The student is in the clinical education setting on Mondays, Wednesdays, and Fridays. When the first-year students have begun reporting to their clinical site, second-year students will, on a rotational basis, exchange their assigned Friday for half-day Tuesdays and Thursdays afternoons. This enables second-year students to have easier access to exams required for competencies and provides mentoring to first-year students.

This is only implemented at clinical sites with adequate staff-to-student ratios and clinical capacity. This mentoring schedule is only for this clinical course, corresponding to the first year's initial clinical assignment. Please note that mentoring scheduling is subject to change.

CP IV: Required Competency Evaluation (12) and Room Competency Evaluation

Refer to [competency evaluations](#) for protocol. Twelve (12) competency evaluations (either mandatory or elective) are required during the second fall semester. In addition, a room competency evaluation is required.

CP IV: Required Proficiency Evaluation (3)

Refer to [proficiency evaluations](#) for protocol. Three (3) mandatory proficiencies are required during the second fall semester, including a mandatory proficiency in the chest and thorax category.

CP IV: Required Major, Minor, Surprise Image Critique

Refer to the [Critiques and Written Assignments](#) section.

Second-year, Spring Semester: Clinical Practice V

After Clinical Practice V, if all program requirements have been met, the student is eligible for May graduation.

CP V: Schedule

Students continue rotations at their second clinical site for three (3) days per week (Monday, Wednesday, and Friday) of clinical education.

CP V: Required Competency Evaluation (8) and Room Competency Evaluation

Refer to [competency evaluations](#) for protocol. Eight (8) competency evaluations (either mandatory or elective) are required during the second spring semester.

CP V: Required Proficiency Evaluation (3)

Refer to [proficiency evaluations](#) for protocol. Three (3) mandatory proficiencies are required during the second fall semester.

CP V: Required Writing Assignment: Clinical Site Comparison

Refer to the [Critiques and Written Assignments](#) section.

CP V: Student Choice

Three (3) days of student choice allow the students to enter any specialty area of interest. The intent is to determine if the student has an interest in pursuing further education in one of the following specialty areas: Sonography, Nuclear Medicine (N), Interventional Radiography (IR), Magnetic Resonance Imaging (MRI), Mammography (M), and Radiation Therapy (RT).

The student can also select a diagnostic rotation that requires more time to reinforce skills. These rotations should be scheduled early in the semester so students can make an informed decision about participating in the advanced skills internship.

Missed specialty rotations may not be rescheduled due to staffing or patient volume factors.

*The Program will try to place students in a breast imaging clinical rotation/procedure if requested and available. However, the program will not attempt to supersede clinical site policies that restrict breast imaging rotations/procedures for students. Students are advised that placement in a breast imaging rotation is not guaranteed. Male students may be unable to rotate through mammography based on the policy at their clinical site. Students should be aware that various employment opportunities and potential barriers may impact their ability to work in a clinical staff position.

Six-Week Extension

The six-week extension is offered as a continuation of Clinical Practice V. Graduation in May will not be an option for students taking all or part of the six-week extension. Depending on how many days are outstanding due to suspension or non-compliance, graduation will be pushed to either August or January. It is not until the student graduates that they will be eligible to sit for their boards.

The six-week extension for Clinical Practice V is used in one of the following ways:

- For those students who could not complete all the program requirements, the time can be used to complete competencies, proficiencies, or rotations to meet all program requirements.
- For students who must make up missed defensible days/rotations from any clinical education course.
- To be completed by students with documented corrective action due to attendance concerns.

Timing of Graduation

Suppose you complete all your competency evaluations, proficiency evaluations, and all program requirements by the published deadline for the last day of classes for the spring semester. In that case, you will not need to complete the *six (6) week extension*. You will be eligible for graduation during the spring (May) commencement.

Students remaining for and completing the *six (6) week extension* are eligible for graduation during the winter (January) commencement.

To enter the Advanced Skills Internship (ASI), you must complete all program requirements by the published deadline for the last day of classes for the spring semester.

Advanced Skills Internship (ASI)

When students have completed all their program requirements, they have the option to voluntarily complete six (6) weeks of an Advanced Skills Internship in one of the following specialties: Bone Densitometry (BD), Computed Tomography (CT), Interventional Radiography (IR), Magnetic Resonance Imaging (MRI), Mammography (M), or Surgery (OR).

The Advanced Skills Internship (ASI) is offered through the College's Center for Business & Industry as a non-credit course. It is available only to current May graduates of the current year on a space-available basis.

The ASI intends to provide the graduate with a more comprehensive experience in a particular modality. This is an excellent opportunity for graduates to evaluate their suitability for employment in a modality they are considering. It is not meant to satisfy the competency requirements for registry eligibility.

Evaluation of competencies during the internship will be at the discretion of the mentor. The mentor will decide whether to accept, approve, and verify the competency, allowing it to be entered into the ARRT registry application process. The clinical site will determine whether to continue clinical hours for cross-training and document competencies after the internship. There is no guarantee of employment following completion of the internship.

Interested students should complete an application provided by the Clinical Education Coordinator in the last semester of their studies.

Selective internship

Due to the limited number of clinical openings, selection is determined based on the following criteria, which were demonstrated throughout the Radiography Program:

- Eligibility for May graduation.
- Minimum program GPA of 3.0
- Excellent clinical performance as determined by the selection committee.
- Attitude
- Professional behavior
- Dependability/reliability
- Initiative
- Communication skills
- Attendance

Length of the program

The internship runs for six (6) weeks, starting the day after Memorial Day. Upon completing the ASI requirements, the student will receive a certificate.

Fees

The ASI is offered at the exact cost of two (2) credit hours (Northampton County resident rate) plus a \$50 fee. Current credit hour rates are published on the College website: [Tuition and Fees Breakdown](#)

Refund Policy: Students who wish to withdraw must formally request a withdrawal and will be eligible for a refund as described by the College's Center for Business & Industry policy:

- 100% Refund - Withdraw five (5) business days before the first day of class.
- 50% Refund - Withdraw 3-4 business days before the first day of class.
- 0% Refund - Withdraw in less than three (3) business days before the first day of class.

Internship sites

Each year, clinical sites are polled to compile the list of offerings. The availability of internships varies from year to year due to normal staffing fluctuations, the availability of mentors, and changes in physical resources at the clinical facilities. The intern is typically placed with a clinical education site (network) where they receive training. This avoids the processing delays and additional intern expenses involved in going to a new site/network. Timeliness in completing entrance requirements and submitting application paperwork is especially crucial in the placement process.

Policies/procedures:

Unless expressly stated, the student will follow the policies and procedures of the "Radiography Program Student Handbook."

Assessment

Assessment will be done through satisfactory completion of the following:

- Competency Evaluations
- One (1) image critique session
- Minimum of three (3) "Technologist Evaluation of Student Performance and Professionalism"
- Clinical Preceptor's (C.P.) Evaluation of Student Performance and Professionalism"
- "Summary Sheet--Professional Evaluation of Student Performance" completed by the mentor.

Grading

Grading is on a Pass/Fail basis. The internship grade is not considered in determining any Radiography Program grade. The ASI is not considered part of the ARRT Registry examination requirements. Taking the Registry exam is not contingent upon completion of the ASI. A pattern (2 to 3) of unsatisfactory assessments will result in the intern's withdrawal from the experience.

Call

Since a call is often integral in specific specialty areas, the student may anticipate call rotations depending on the modality and the facility. If applicable, the mentor and the student will work out the call schedule. **Note:** Students are limited to 40 hours of clinical practice per week.

Personal day

One (1) personal day is available and requires makeup if no advance notification is communicated to the mentor at least 1 hour in advance. If two (2) absences occur during the internship, the program reserves the option to withdraw the student from the internship. If not withdrawn, make-up time is required. When a student has three (3) absences during the internship, they will be withdrawn from the internship. Note: A personal day cannot be used for call time.

Staying late for a case

If a rare or interesting case is present when you are scheduled to leave the clinical setting, you would like to take advantage of the educational opportunity it provides. Please ask the Clinical Preceptor or the supervising technologist if you can stay. When you clock out, file a time exception with a comment. There is no comp time adjustment, and the time cannot be used for make-up time.

Mentor

Your mentor is your immediate supervisor/preceptor in the specialty area. Depending on the circumstances, there may be more than one mentor.

Involuntary Withdrawal

If a conference or disciplinary session occurs during the internship, the student will be withdrawn from the internship.

Continuing Education

The clinical education setting enables the program's students and College staff to observe and/or participate in selected conferences and educational programs designed for staff continuing education purposes.

Continuing Education (Hospital In-services and Students)

The clinical education setting enables the program's students and College staff to observe and/or participate in selected conferences and educational programs designed for staff continuing education purposes.

Application for Registry

Misdemeanor/Felony (ARRT Pre-Application Review)

As stated in the [Education, Ethics, and Examination Requirements](#) section of this handbook, the ARRT investigates all potential violations to determine eligibility for registry examinations. Such investigations can delay the processing of exam applications.

It is your responsibility to determine whether your actions constitute an ethics violation. It would be prudent to report the actions as soon as possible. This will ensure that the ARRT considers you eligible to sit for the certification examination after you have received the terminal award. If you have questions, contact the ARRT Ethics Requirements Department at 651.687.0048.

🔗 Further information can be found on the ARRT website under "[Ethics Requirements](#)."

The ARRT will rule on the impact of the violation on eligibility for ARRT registration. Once eligibility is established, candidates can fulfill program requirements, knowing they are eligible to take the exam. Please provide a copy of the ARRT's response letter to the Program Director for the registry application sign-off process.

Registration Eligibility

You are responsible for ensuring you have met all your graduation requirements. Throughout the Radiography Program, you will meet with your program academic advisor, who will help you plan your coursework and provide you with the necessary information to complete your registration.

Registry Application

In the latter part of the spring semester, the Program Director will meet with each second-year student to complete and sign off the "Application for Certification and Registration" for the ARRT Radiography registry exam to be administered that year.

Passport photos are a requirement for the application, along with the validation of the following by the Program Director:

- ✓ Competency evaluations
- ✓ General patient care simulations
- ✓ Course requirements for the AAS degree

Suppose all the program requirements for graduation are completed or can be completed by the date that grades are due for graduation eligibility. In that case, the Program Director can proceed to validate the student's Registry application.

Registry (ARRT) Review Testing for Certification Examination

The Senior Review course is devoted to Registry review and testing. Other options include online practice exercises, quizzes, simulated registry examinations, and review books.

Graduation and Career (Placement) Services

Employer Survey

To assess and continually improve the Radiography Program's effectiveness, your employer will be contacted as a graduate radiographer and asked to complete a questionnaire concerning your professional and technical skills.

Graduate Survey

To assess and continually improve the Radiography Program's effectiveness, the graduates, six (6) months after graduation, will receive a questionnaire for evaluating career preparedness. A high response rate is needed to ensure validity. Please respond to the survey request to advance the program.

Career Placement

The Career Services Office, located in the College Center, serves as an employment resource for Radiography Program graduates and is also accessible to students. Employers contact the Career Services Office to post job openings. Call 610-861-5346 for details. Although the Career Services Office cannot guarantee placement, it will inform you of employment opportunities and assist you in resume writing and perfecting your interviewing skills.

The Radiography Program Staff are often notified directly about job openings. Please report any change of address (or phone) to the Program Director and the Records Office so you can be informed promptly about these opportunities.

Continuing Education Requirements & Continuing Qualifications Requirements for Registered Radiographers (Life-long Learning)

See the *ARRT Certification Handbook and Application Materials for Exams Administered* in your testing year. This booklet is available from the ARRT.org website: [Primary Eligibility Pathway Handbook](#).

References and Letters of Recommendation

For a program faculty member to provide a reference, a written release must be submitted for your file. As a department, we have agreed that we have the right not to give a reference. Therefore, you must obtain permission from the faculty member to use them as a reference before submitting their name to the employer/educational institution.

Never give out anyone's name as a reference without their permission. The individual providing a reference needs to be informed beforehand that they may be contacted regarding a reference for you. Students should check with their Clinical Preceptors individually for references, as they must adhere to the policy/procedure for their clinical site.

References are essential and can be time-consuming to compile, so plan to provide an updated copy of your resume, including information on your employment history and relevant skills. Also, take the time to stay in touch and keep your references updated on your employment status.

Transferring to a Four-Year Degree Program

The Career Services/Transfer Advising offices have current information on further education and vocational choices. If you are interested in transfer programs, call the office at 610-861-5346 for detailed information. Program Faculty are also a valuable resource for career advice.

🔗 Reference the NCC website for more details: [NCC Transfer Options](#).

COLLEGE AND HOSPITAL ASSOCIATION OF RADIOLOGIC TECHNOLOGY STUDENTS (CHARTS) CONSTITUTION AND BY-LAWS

ARTICLE I: Name

The name of this organization shall be the "College and Hospital Association of Radiologic Technology Students," also referred to as "CHARTS."

ARTICLE II: Objectives and Purposes of Organization

- a. To improve and enhance Radiography Students' College and Clinical Education.
- b. To develop a cooperative relationship between CHARTS, NCC, and Affiliate Hospitals.
- c. To advance the Health Professions of Radiologic Technology; and
- d. To provide philanthropic assistance and community services.

ARTICLE III: Requirements for Membership

- a. CHARTS membership is open to all students currently enrolled in the Radiography Program.
- b. Each active member shall be entitled to voting privileges.
- c. Radiography Program graduates shall be associate members and shall not be entitled to voting privileges.
- d. Both active and associate members shall be encouraged to attend all meetings and organizational functions.

ARTICLE IV: Officers

- a. Section 1 – List of Officers First and Second Year Students
 - President
 - Vice President
 - Secretary
 - Treasurer
- b. Section 2 – Requirements of Officers

Only active members in good academic standing are eligible to hold office. A cumulative GPA of 3.0 or better is considered good academic standing for the purpose of holding office.

- c. Section 3 – Time and Procedure of Election Officers

First year officers shall be elected in November of each Fall Semester. The Second Year President shall open the floor for nominations, which shall be limited to three per office. Prior to placing the nominee's name on the ballot, the nomination must be accepted, either written or verbally. Voting by only active members to be affected by the elections, not outgoing members, shall be on paper ballots, and tabulated immediately by the current officers. Additional ballots shall be used to determine the outcome of ties.

- d. Section 4 – Tenure of Officers

Officers shall serve for the duration of their academic standing or upon completion of the Radiography Program.

- e. Section 5 – Removal of Officers

Officers may be removed from the office by a two-thirds (2/3) majority vote of the members present during a regular or emergency meeting. The officer and all the membership shall be notified of such an intended action three (3) days prior to the meeting. Reasons for removal include but are not limited to 1) mishandling of organizational funds, 2) misrepresentation of the organization, and 3) dissatisfaction with any officer's action by the membership.

f. Section 6 – Filling of Vacancies

Officer vacancies shall be filled during a regularly scheduled or emergency meeting. The highest remaining officer shall conduct the procedure as outlined in Article IV, Section 3.

g. Section 7 – Commitment of Officers:

Officers shall not hold official titles and not be required to perform duties in any other organizations or committees within the Radiography Program while holding the title of Officer. Officers can elect to vacate their position in C.H.A.R.T.S. and run for office in another organization if they so desire.

ARTICLE V: Faculty Advisor

The Radiography Program Director/Faculty shall serve as CHARTS Advisor.

ARTICLE VI: Duties and Election of Officers

1. The President shall:

- a. composes an agenda and presides over all meetings.
- b. establishes committees subject to approval of the membership.
- c. calls additional meetings as prescribed.
- d. be responsible for presenting complete and balanced information concerning any business to the membership.
- e. delegate according to the needs of the organization.
- f. delivers a short speech during their class's pinning ceremony.

2. The Vice-President shall:

- a. presides over meetings in the absence of the President and assume all appropriate responsibilities.
- b. secure information concerning committee actions for presentation to the membership.
- c. aid in meeting preparation and business.
- d. assumes all other duties as delegated by the President or a vote of the membership.
- e. has the responsibility of social activities (i.e., class, picnic, pinning ceremony, etc.) but has the option of delegating responsibility to another student when necessary.

3. The Secretary shall:

- a. takes minutes of all official meetings.
- b. be responsible for the reproduction and distribution of all pertinent information.

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- c. preserves and maintain all current and past CHARTS records.
 - d. be responsible for appropriate correspondence.
4. The Treasurer shall:
- a. keeps a record of all expenditures.
 - b. aid in the development of a yearly budget, in conjunction with other officers and membership.
 - c. presents a detailed income and expenditure report at each meeting.
5. Elections:

The officers shall be elected in November of their first Fall Semester. This will enable the first-year officers to work closely with the 2nd year officers to learn the details of their respective offices.

The CHARTS Advisor and Treasurer shall have joint responsibility for all organization funds. Signatures of both shall be required for any transaction involving the expenditure of organizational funds.

ARTICLE VII: Committees

Committees shall be instituted as the need arises and are open to active or associate members of the organization. The President, Vice-President, Secretary, and Treasurer shall work together in the appointment of committees. The committee may be dissolved if its purpose has been fulfilled. A chairperson shall be appointed by mutual agreement of the members of a particular committee and will be responsible for reporting relevant information to the general membership at regularly scheduled meetings.

ARTICLE VIII

Membership attendance at CHARTS funded, or partially funded educational activities, will be based upon:

- 1. Academic standing,
- 2. CHARTS participation, and
- 3. Participation in student competition.

ARTICLE IX: Amendments to the Constitution

Amendments may be initiated by a two-thirds (2/3) vote of the membership present at that scheduled meeting. Any amendments to the constitution, passed by the organization, are subject to approval of the Office of Student Activities, and must be presented immediately after acceptance by the membership.

ARTICLE X: Ratification

This constitution shall go into effect after ratification by a two-thirds (2/3) majority vote of the quorum of eighty (80) percent of the students currently enrolled in the Northampton Community College Radiography Program and after approval of the Office of Student Activities and Student Senate.

ARTICLE XI: INDIVIDUAL MEMBERSHIP ACCOUNTS

Monies accrued in individual accounts from fundraising activities can only be redeemed for CHARTS activities, Pinning Ceremony, and Lambda Nu regalia. No monies can be used to fund outside needs. Any money left in the individual accounts upon graduation from their program shall be forfeited and returned to the general account.

BY-LAWS OF THE PENNSYLVANIA DELTA CHAPTER OF LAMBDA NU

Article I: Name, Location, and Color Identity

The name of this organization is the **Pennsylvania Delta Chapter of Lambda Nu**, the national honor society for the radiologic and imaging sciences. This chapter was established at **Northampton Community College, Bethlehem, Pennsylvania**.

$\lambda\nu$ - Lambda Nu's name is derived from the lower-case Greek characters in the formula $\lambda\nu$, which represents the physics of the inverse relationship between wavelength (λ) and frequency (ν), an essential parameter across the diversity of modalities comprising the professions.

ΛN -In a similar manner, Lambda Nu uses the upper-case Greek characters Λ and N to represent the inverse relationship and delicate balance required between the art and the science inherent in the radiologic and imaging sciences professions of radiography, radiation therapy, nuclear medicine, diagnostic medical sonography, cardiovascular-interventional technology, mammography, computed tomography, magnetic resonance imaging, quality management, and bone densitometry.

Lambda Nu's colors are maroon for the radiologic sciences, forest green for the health professions, and gold, the ancient color of honor.

Article II: Purpose

The purpose of this Chapter is to:

- Foster academic scholarship at the highest academic levels.
- promote research and investigation in the radiologic and imaging sciences.
- recognize exemplary scholarship.

Article III: Membership

Radiologic and imaging sciences students, alums, and faculty qualify for membership according to the following standards:

Section A. Professional course GPA 3.0 or higher on a 4.0 scale after one full-time semester (or equivalent – summer clinical practice is not a stand-alone semester) of the professional program.

There can be no grades of “F” in a professional course(s) to become a member or to maintain a membership. This will become effective with the Radiography and Sonography students entering their professional courses during the fall semester of 2010.

Section B. Enrollment in a radiologic or imaging sciences program as a full-time student for at least one term.

Section C. Evidence of professional commitment beyond the minimum requirements of the program, including, but not limited to:

- GPA higher than Chapter minimum
- actively pursuing an independent research project
- active membership in a professional organization, as evidenced by:
- holding office or committee appointments

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- preparing for the presentation of a professional paper or poster
- preparing for competition in a Quiz-Bowl
- clinical-based employment in a radiologic or imaging sciences field

Section D. An invitational letter will be sent to eligible students.

Section E. Faculty members are eligible for membership upon meeting the following criteria:

actively teaching at the institution of the above chapter (full time, part time, adjunct, or guest faculty)

Section F. All members must register and pay national dues as well as meet all Chapter obligations.

Section G. Exemplary honors may be achieved upon evidence of advanced professional recognition (i.e., academic paper or poster presentation, publication, etc.)

Section H. After induction into the honors society, the member is required to maintain his or her 3.5 GPA per semester.

Section I. If a member's GPA for a semester drops below 3.0, he or she will be sent a letter and have one semester probationary term to build up his or her GPA up to 3.0 or higher.

Section J. During the probationary semester, he or she will retain membership benefits.

Article IV: Officers

Section A. Each Radiologic Science Program will have its own officers.

Section B. Only members in good standing may hold an office.

Section C. The President of this organization may not be President of another campus organization.

Section D. The duties of the President, are:

1. represent the Chapter, behave, and speak only in its best interest
2. conduct purposes of the organization
3. act to ensure the welfare of the organization
4. preside at business meetings
5. service as ex-officio member of all committees

Section E. The primary duty of the Vice-President is to assume the duties of the President in the event of absence, incapacity, or resignation.

Section F. The duties of the Secretary are to record and preserve the proceedings and records of the organization.

Section G. The duties of the Treasurer are to keep accurate financial records, provide for the safekeeping of funds, and ensure expenditures are according to the by-laws and the will of the Board and membership.

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Section H. Officers assume their duties at the beginning of the second fall semester.

Section I. In the event of a vacancy in any office, the President will appoint an active member to fill the vacancy.

Article V: Executive Board

Section A. The members of the Executive Board include all officers of the Chapter and the chairpersons of all standing committees.

Section B. A university faculty sponsor shall be appointed by the Department Chair and shall serve as an ex-officio member of the Executive Board. Ex-Officio members do not have voting rights but have the right to attend all meetings and consultations of the Executive Board and must be notified of all such meetings and consultations.

Section C. The duties of the Executive Board are to conduct the work of the Chapter between meetings of the membership.

Article VI: Meetings

Section A. The membership shall meet at least once per academic year (August – May).

Section B. The following business will be conducted at least once per year:

1. induction of new members
2. election and installation of new officers
3. conduct the business of the organization
4. planning or participation in one campus or community charitable event without profit to the organization
5. planning or participation in one social event

Section C. A quorum for conducting business will consist of those members present at a meeting announced by the Executive Board through posting a notice and making announcements in class.

Article VII: Elections

Section A. The election of officers shall occur once per academic year (August – May).

Section B. A call for nominations for office shall be made to the membership at least 7 days prior to the election. Nominations may be verbal or written but require seconding by another member and acceptance of the nomination by the candidate.

Section C. Elections shall be by secret ballot of all members currently registered for classes at the time of the election.

Section D. Elections shall occur by a method announced at least 7 days in advance by the Executive Board (i.e., in person during a meeting, in-class ballot distribution, via email, or other means)

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Article VIII: Dues and Finances

Section A. The fees for students shall be a one-time fee of \$50.

1. \$30 shall be forwarded with the proper application form to the national Lambda Nu Chapter for registration and issuance of an individual membership certificate. The national office requires this one-time fee.
2. \$20 shall be deposited in the Chapter account

Section B. All Chapter fund expenditures must have the approval of the president of the Chapter and the faculty sponsor.

Article IX: Standing Committees

Section A. A Program Committee will plan and conduct induction of new members and officers as well as academic, charitable, and social events.

Section B. A Scholarship Committee will plan and conduct all scholarship activities, including, but not limited to monetary awards, exemplary recognition of members, and a forum for presentation of academic and research projects.

Section C. Ad-hoc committees may be established as necessary by the President upon ratification by a majority vote of the Executive Board.

Section D. Committee Chairs are appointed by the President upon ratification by a majority vote of the Executive Board. Committee Chairs serve at the pleasure of the President but can be replaced only upon ratification by a majority vote of the Executive Board.

Article X: Parliamentary Authority

Business of the Chapter shall occur according to parliamentary procedure practices as described in *Sturgis' Standard Code of Parliamentary Procedure*. This includes the transaction of business in meetings of the membership and the Executive Board.

Article XI: Amendments to the By-Laws

Section A. Proposed by-law amendments must be distributed to all members currently registered for classes by a method approved by the Executive Board at least 7 days prior to the meeting at which the proposal is to be presented for vote.

Section B. A 2/3 majority is required of those voting for a by-law to become effective.

Article XII: Validity of By-Laws

These by-laws are valid only when they have been accepted by the national Lambda Nu office.

APPENDIX FORMS LIST

Appendix A

“Essential Functions” of a Radiographer: Verification of Understanding/Student Disclosure Form

Appendix B

Non-Conformance Flowchart

“Essential Functions” of a Radiographer

Verification of Understanding/Student Disclosure Form

The following is a list of the everyday functions that a radiographer needs to be able to perform At the hospital or an outpatient facility. The inability to perform these skills at a competent level may Require withdrawal from the program to protect the patient population.

Observational skills:

- Assess the patient's needs.
- Able to discern the information that is needed for the procedure at hand.
- Recognize the need for prompt medical attention in various settings and locations.
- Discern a radiographic image's details, density, and contrast to determine if it is optimal for the radiologist's interpretation.
- Distinguish between the chromatic colors.
- Be able to use peripheral vision.
- Judge the distance of objects and the spatial relationship of objects at different distances.
- Detect changes in equipment operation (i.e., overheating, incorrect meter readings).
- Secure the correct chemical container and/or medication.

Initial: _____ I acknowledge that I have read the above “observational skills” of a Radiographer

Communication skills:

- Communicate with other healthcare providers.
- Perceive the patient’s oral communication with the ear.
- Be able to hear high-pitched sounds (e.g., patient monitoring equipment).
- Be able to hear low-pitched sounds (e.g., patients' breathing patterns).
- Perceive the patient’s nonverbal communication.
- Secure information (i.e., questioning of the patient).
- Communicate promptly and effectively in English both verbally and in writing.
- Communicate with the patient and the public at a level they can comprehend.
- Communicate effectively, using medical terminology, with the physician and other health personnel.
- Respond to directives from others related to patient care and emergencies.
- Display compassion, empathy, integrity, concern for others, interest, and motivation.
- Obtain pertinent information from the patient's chart.
- Obtain information that the physician requests to make a diagnosis.
- Document in writing, through knowledge of the medical terms, good grammar, and spelling, the information needed on the patient's requisition for an optimum diagnosis by the radiologist.
- Document the vital sign findings for the use of other health care personnel.
- Interact with others respectfully and professionally, especially in stressful situations.

Initial: _____ I acknowledge that I have read the above “communication skills” of a Radiographer

“Essential Functions” of a Radiographer cont.

Motor skills:

- Tolerant of physically taxing workloads.
- Safely lift from a lower to a higher position at least 50 pounds and occasionally as much as 75 pounds.
- Be able to carry an object weighing as much as 25 pounds to transport it from one place to another.
- Be able to draw, drag, haul, or tug an object(s) weighing more than 100 pounds or the patient’s weight.
- Be able to push an object(s) with steady force to thrust forward, downward, or outward, weighing more than 100 pounds or the patient’s weight.
- Be able to stoop/bend, squat, crouch, kneel, crawl, climb, and reach above shoulder level.
- Sufficient gross and fine motor coordination to respond promptly, manipulate equipment, and ensure patient safety.
- Perceiving the attributes of an object(s), such as size, shape, temperature, or texture, by touching the skin, particularly that of the fingertips.
- Elicit information from a patient by diagnostic maneuvers (i.e., palpation).
- Safely manipulate and use controls (i.e., the x-ray tube up to six feet from the radiographic/fluoroscopic room floor).
- Be able to use the fingers/hands in repetitive actions such as picking, pinching, writing, firm grasping, and twisting/turning.
- Skillfully use precision instruments.
- Maintain an upright, erect position with the entire body supported by the feet for as long as 7 hours during the workday.
- Function efficiently while wearing lead-protective apparel.
- Safely perform procedures.
- Utilize the equipment needed to obtain temperature, pulse, respiration, and blood pressure.
- Enter data into the computer.

Initial: _____ I acknowledge that I have read the above “motor skills” of a Radiographer

Cognitive functions:

- Ability to adapt to a crisis, flexible schedules, and/or change in environment.
- Function effectively under stressful conditions.
- Concentrate on the task at hand.
- Visually concentrate and/or focus on thoughts or efforts for prolonged periods.
- Exercise independent judgment and discretion in the safe technical performance of medical imaging procedures.

Initial: _____ I acknowledge that I have read the above “cognitive skills” of a Radiographer



"Essential Functions" of a Radiographer

Verification of Understanding/Student Disclosure Form

I acknowledge that I have read the "Essential Functions" of a Radiographer and answered the following statement to the best of my ability.

Statement: I can satisfactorily perform all the identified "essential functions."

Please initial one answer: YES _____ *NO _____

*If not, do you need reasonable accommodation?

Please initial one answer: **YES _____ NO _____

** If yes, please contact the Disability Services Coordinator at (610) 861-5342. Accommodation will be made with the understanding that the safety and well-being of patient care will not be compromised. Documentation may be needed from a physician or other professional indicating that you need reasonable accommodation.

Student's Name (Please Print)

Signature of Student

Date

Written Verbal Warning (WVW)	<p>(5th offense) Late Policy (2-point deduction) (1st offense) Trajecsyst Clock-in/out Policy (1st offense) Notification Policy (1st offense) Clinical Education Dress Code (1-day forfeit) (1st offense) Cell Phone/Smart Watches/Earbuds (1st offense) Personal Laptops (1st offense) "Already Did That" (1st offense) Competency Refusal (2-point deduction) *(3rd offense) Clinical Attendance Policy Excluding Winter (2-point deduction with make-up of day missed) (1st Offense) Winter Clinical Policy (2-point deduction with make-up of day missed)</p>
Continual Non-Compliance (CNC) **Consecutive occurrence accrues for the entire length of the program	<p>(Any offense) Program Meeting (1-day forfeit) **(6 or more offenses) Late Policy (2-point deduction and 1-day forfeit) **(2 or more offenses) Trajecsyst Clock-in/out Policy (2-point deduction) **(2nd and 3rd offense) Notification Policy (2-point deduction) **(2 or more offenses) Clinical Education Dress Code (2-point deduction and 1-day forfeit) **(2 or more offenses) Cell Phone/Smart Watches/Earbuds (2-point deduction) **(2 or more offenses) Personal Laptops (3-point deduction) **(2 or more offenses) "Already Did That" (2-point deduction) **(2 or more offenses) Competency Refusal (3-point deduction)</p>
Written Warning (WW)	<p>**(4th offense) Notification Policy (5-point deduction) *(4th offense) Clinical Attendance Policy Excluding Winter (2-point deduction with make-up of day missed) (2nd Offense) Winter Clinical Policy (2-point deduction with make-up of day missed)</p>
Corrective Action Plan (CAP)	<p>**(5th offense) Notification Policy (5-point deduction) *(5th offense) Clinical Attendance Policy Excluding Winter (2-point deduction with make-up of day missed) (3rd Offense) Winter Clinical Policy (2-point deduction with make-up of day missed) (1st Offense) Smoking/Tobacco/E-cigarettes Policy at Clinical Site (5-point deduction) (1st offense) Direct and Indirect Supervision (5-point deduction) (1st offense) Missing in Action (5-point deduction) (1st offense) Leaving Clinical Practice/Rotation without permission (5-point deduction)</p>
Disciplinary Action Plan (DAP)	<p>**(6th offense) Notification Policy (5-point deduction) *(6th offense) Clinical Attendance Policy Excluding Winter (2-point deduction with make-up of day missed) (4th Offense) Winter Clinical Policy (2-point deduction with make-up of day missed) (2nd Offense) Smoking/Tobacco/E-cigarettes Policy at Clinical Site (10-point deduction) (2nd offense) Direct and Indirect Supervision Policy (5-point deduction) (2nd offense) Missing in Action (5-point deduction and 1-day forfeit) (2nd offense) Leaving Clinical Practice/Rotation without permission (5-point deduction and 1-day forfeit)</p>
Involuntary Withdrawal	<p>**(6th offense) Notification Policy (5-point deduction) (7th offense) Clinical Attendance Policy Excluding Winter (5th Offense) Winter Clinical Policy (3rd Offense) Smoking/Tobacco/E-cigarettes Policy at Clinical Site (10-point deduction) (3rd offense) Direct and Indirect Supervision (3rd offense) Missing in Action (3rd offense) Leaving Clinical Practice/Rotation without permission Failure of RADT Course Employer use of NCC-provided Dosimeter Violation of Laboratory Safety Practices Didactic Attendance Policy Essential Functions of a Radiographer Violation of HIPAA Academic Dishonesty Code of Conduct Violation of Student Employment in Radiology</p>

* Renews every semester/**Accrues throughout the length of the program/ Point deduction applies to the current clinical practice grade;/Day forfeit requires make-up in the current clinical practice when the incident occurs.

✓ Any penalties accruing on days are counted in the Clinical Attendance Policy. Therefore, further consequences may apply.