

MEDICAL IMAGING PROGRAM

MINOR TRACK CLINICAL HANDBOOK 2018 – 2019

The Clinical Handbook is reviewed annually by members of the Advisory Committee of Emory University's Medical Imaging Program. The minor track committee members are:

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SECTION I: GLOSSARY

pressure injector reps, etc. Clinical Education, Minor.......The portion of the educational program conducted in a health care facility that provides the opportunity for students to translate theoretical and practical knowledge into cognitive, psychomotor and affective skills necessary for patient care in the advanced modality. It consists of three advanced clinical practicum courses. Clinical Experience, Minor......The means by which a candidate for an advanced registry examination demonstrates and documents successful performance of a subset of advanced clinical procedures in accordance with ARRT requirements for certification in the advanced modality. Clinical Experience Requirements....... Repetitions required to sit for the national boards in all minor tracks. Proper and truthful documentation required. Clinical Notebook, Minor...... A notebook containing clinical policies, information and forms. The clinical notebook is kept with the student at the clinical site and is used to organize certain paperwork for the semester. The notebook is turned into the Minor Track Instructor at the end of each semester as applicable. . Clinical Participation, Minor..... A series of three (3) advanced clinical education courses designed to rotate the student through a variety of settings within their advanced modality in a clinical affiliate to develop performance skills. are available on line, the honor code applies. Direct SupervisionAll clinical assignments in minor track rotations shall be carried out under the direct supervision of qualified radiographers. The parameters of direct supervision are: 1. A registered technologist reviews the request for examination in relation to the student's achievement; 2. A registered technologist evaluates the condition of the patient in relation to the student's knowledge; 3. A registered technologist is present in the room during the conduct of the exam: 4. A registered technologist reviews and approves any images. e*Value..... The programs online clinical record keeping system. www.e-value.net Final Clinical Grade..... The final grade received in clinical. The clinical grade includes an assignment and work ethic grade. It incorporates such qualities as knowledge of discipline, organizational and technical skills, dependability and reliability, industriousness and initiative, rapport with patients and co-workers, professionalism, repetitions, etc.

Grand Rounds	Morning conferences for the radiology department; covering a variety of imaging topics. Students should attend as directed on their syllabi.
Honor Code	A pledge by the student to do their own work on all clinical assignments, quizzes, etc. The student also pledges not to falsify records. Breaking the honor code has serious consequences including suspension and expulsion.
Multi-disciplinary Conferences	A conference composed of members with varied but complimentary experience, qualifications, and skills that contribute to the welfare of the patient. Students are encouraged/required to attend as outlined in the syllabus.
No Call No Show (NCNS)	Failing to contact the clinical site or the Minor Track Instructor when the student will be absent from clinical. Students must contact the appropriate personnel prior to the start of the scheduled shift to avoid grade deductions. Each NCNS results in a letter grade deduction of the clinical grade.
Performance Objectives	Objectives to be achieved each semester that focus on the actual performance of certain duties. The staff technologists, clinical instructors, and faculty will monitor the successful completion of these objectives. Checklists covering these objectives are on e*Value or distributed to the student.
Practicum	The last year of clinical and that portion of clinical education in the student's minor track. MRI, CT, IR, Women's Health, Education or Management.
Radiographic Examination	. A series of images produced with medical imaging techniques to demonstrate anatomical structures.
Recommended Additional Clinical Time	A recommendation by the faculty or clinical personnel that the student participate in additional clinical time to improve their skills.
Record Keeping	. The accurate completion and organization of clinical documentation in e*Value and the clinical notebook.
Remedial Education	The portion of the educational program where the student obtains additional instruction, practice and reevaluation.
Repeat Exams	. An image that must be repeated due to technique, positioning, centering, artifacts, etc. Any repeated image must be completed under direct supervision for all students and documented in e*Value under PxDx.
Seminars	Lectures given for continuing education to registered technologists. Seminars are used to familiarize the student with continuing education requirements of the registered technologist.

exposure. Student Clinical Evaluations.....Evaluations completed by the technologists and/or faculty with whom the student worked. The student's performance and affective behavior are evaluated. It is the student's responsibility to be sure their evaluations have been completed on e*Value by the Clinical Instructor/Supervisor. Student Evaluation of Clinical...Ongoing online evaluations of the clinical areas by students in the program. They provide students an avenue to provide input regarding their rotations so program faculty can evaluate the educational integrity of the areas. These evaluations are assessed by the Minor Track Instructor and shared with the program faculty and radiology administrators/supervisors of the clinical sites. Positive comments are often shared with the clinical sites. These are completed on e*Value. student's attendance, tardiness and compliance to dress code policies, etc. Written Clinical Assignments... Assignments that typically include study questions, case studies, and worksheets.

SECTION II: GENERAL INFORMATION

INTRODUCTION

Students enrolled in the Emory University Medical Imaging Program will be responsible for observing university rules and regulations as stated in the current and any subsequent university catalog and student handbook, in addition to those applicable to their clinical affiliation assignments. Clinical facilities are considered an integral part of the university campus for student clinical assignments.

The rules and regulations stated in this handbook represent a **contractual** agreement between Emory University and the Medical Imaging student for the duration of the program. Failure to comply with the rules and regulations in this handbook will affect student evaluations and grades and may result in dismissal from the Medical Imaging Program if the student shows no improvement or makes no attempt to correct errors after counseling. If rules and regulations change or are updated, the student will be notified in advance.

PURPOSE

The major goal of a program in Medical Imaging is to enable the student to develop skills that will allow him or her to perform the duties of a Radiologic Technologist successfully. In the case of specialty modalities, a further goal is to enable the student to develop advanced skills to perform the duties of an RT with advanced certification. The first step in this process is the acquisition of knowledge through classroom and laboratory learning experiences. It is then necessary to practice these skills until they are mastered.

Participation in the specialty clinical area is expected to be active, with the student assisting the staff technologist with advanced procedures, then actually performing the procedure under **direct supervision** by the technologist.

COURSE SYLLABI

Each semester the student will have access to the Clinical Course Syllabus. The syllabus will contain the course description, objectives, requirements, assignments, etc. The Minor Track Instructor or designee will explain the syllabus at each semester.

CLINICAL ASSIGNMENT

Students enrolled in the Emory University Medical Imaging Program and accepted into a specialty minor track will be scheduled and rotated through the various clinical assignments by the Minor Track Instructor in consultation and agreement with the clinical sites. These assignments are in accordance with the Master Plan of Clinical Education. The Master Plan is subject to change due to the addition, consolidation or deletion of clinical education settings but rotations will be as equitable as possible.

Your clinical assignment for the entire semester will be posted and you will be given a copy. The schedule is prepared so that there will be an orderly flow in the department, adequate supervision and an adequate and equal clinical education experience for the students. It is the student's responsibility to read and abide by all clinical assignment schedules. Failure to do so will affect the student's personal time or grade; demerits apply.

Students may be employed while enrolled in the Medical Imaging Program provided the work does not interfere with regular academic and clinical responsibilities. Due to the amount of time required to be successful in the program it is recommended that the students not work more than twenty hours per week.

PARKING

Students must adhere to these parking requirements:

- Clifton Campus: Parking while at the Clifton Campus sites is through the Emory parking office.
- Egleston: Students may not park at the CHOA parking deck at Egleston; the deck is very congested. Students will use their regular Emory parking facilities.
- Executive Park: Students will park in the lot at the adjacent 57 building.
- EUH-Midtown: Students will park in the Spring Street lot using a deck card.
- Emory St. Joseph: Students will sign out a deck card from Kim Cross and return it immediately upon completion of the rotation.
- Emory John's Creek Students may park in E1 or behind the blue line in E2
- Piedmont Hospital Students will park in the North or South Decks on the top level and present their student ID to booth attendants for free exit.

Any site not listed has general parking at the facility that the student may use as directed by the staff.

ROUTINE DAY SHIFT CLINICAL HOURS

Students will work these hours during a typical week: Most specialty clinical rotations will be scheduled Monday – Friday. Some evening and/or weekend shifts may occur. Hours may vary slightly.

SUMMER SEMESTER*:

**8 hours/week (96 hours) – Minor Track Practicum (Days/Times to be announced)

FALL SEMESTER*:

**12 hours/week – Minor Track Practicum (Days/Times to be announced) (192 hours)

SPRING SEMESTER*:

**16 hours/week – Minor Track Practicum (Days/Times to be announced) (256 hours)

HOLIDAYS

The Medical Imaging Program observes the following holidays:

Martin Luther King's Birthday (1 day)
Memorial Day (1 day)
July 4th (1 day)
Labor Day (1 day)
Thanksgiving (2 days)

ATTENDANCE

Medical Imaging students will attend <u>ALL</u> Clinical Assignments as scheduled by the Clinical Faculty. Students will be required to clock in and out of all clinical assignments on e*Value in order to keep an accurate record of clinical attendance and clinical hours. Clock in and out times must reflect the actual time the student arrived and was ready to work. Clocking in on time when you actually arrive late or clocking out on time when you leave early, is considered a falsification of clinical records and is a serious offense. e*Value does track IP addresses. Students must be in their clinical area when they clock in.

^{**}Practicums may be done as a block of time rather than 8 – 16 hours/week

Clinical instructors or supervisors in special modalities at the site must verify your attendance through e*Value. It is the student's responsibility to check these records weekly to see that they have been validated. The clinical faculty member assigned to the site, or your Minor Track Instructor should be notified if there are problems.

In the event that a clinical instructor/supervisor is unavailable to sign the student in or out, students will still clock in/out in e*Value but they should call the minor track instructor from a clinical site phone and leave a message. The faculty members name is used for the supervisor in e*Value. The voice mail system will record the time and location of the call. **DO NOT CALL FROM A CELL PHONE.**

When a student fails to follow the procedures for documenting clinical time; clinical time may be lost. See e*Value section on hour tracking policies.

Absences affect the quality of achievement in theory and practical applications. Excessive or unexcused absences will NOT be tolerated. Students that miss ANY specialty clinical time in a semester (with the exception of the student's final semester in which personal time is granted) will be required to make up that time as scheduled by the Minor Track Instructor. **Unless the clinical time missed is due to a documented extenuating circumstance, (see syllabi) the clinical grade will be calculated based on the initial time missed.** Failure to comply with attendance policies will result in clinical probation and possible prevention of registration for the next clinical semester.

- Absences: If you will be absent, notify the Minor Track Instructor and the Clinical Instructor or
 Site Supervisor at your assigned clinical site prior to the scheduled shift to avoid a letter grade
 reduction. If you become ill while at your clinical assignment or if you need to leave early for
 some other reason, you must notify the site supervisor and the Minor Track Instructor before you
 leave. Absences and failure to follow proper notification policies affect the final clinical grade as
 outlined in Section VI.
- **Tardiness:** If unavoidable circumstances will result in the student being more than thirty minutes late, please call the clinical faculty member <u>and</u> the supervisor or Clinical Instructor at the clinical site. The student should clock in at the actual time that they arrive. Excessive tardiness will not be tolerated. Tardiness affects the final clinical grade as outline in Section VI.
 - Students are expected to be ready to work at the start of the shift not just arriving to the area.
 - Students will be considered tardy any time they come in to clinical later than their normal scheduled time unless they have informed both the site and faculty before 3p the previous business day (M-F).
 - O Students who fail to inform the clinical site and program within a reasonable amount of time that they will be more than 30 minutes late will receive a no call late (NCL) demerit.
 - In semesters I and II:
 - 1 tardy = Time must be made up the same day as long as patient flow permits or by completion of the current rotation
 - 2-3 tardies = 1 letter grade deduction and time must be made up the same day as long as patient flow permits or by completion of the current rotation.
 - \bullet 4 5 tardies = 2 letter grade deduction and time must be made up the same day as long as patient flow permits or by completion of the current rotation.
 - 6-7=3 letter grade deduction and time must be made up the same day as long as patient flow permits or by completion of the current rotation.
 - > 7 tardies = failure of clinical course
 - o In semester III, any time missed due to tardiness will not be made up & will be deducted from the student's personal time. Grade deductions will be applied as described above.

- Lunch: Lunch schedules will be assigned at the discretion of the clinical supervisor when students are on clinical assignments. Lunch breaks are limited to 45 minutes during full day shifts. There are no lunch breaks during part day rotations. No make-up time is allowed during lunch breaks; students may not forego their lunch in order to leave early. Students should eat breakfast prior to starting day shifts.
- Extended absences: Any extended absence greater than one week will require written confirmation from a physician of ability to return to full clinical duties. Extended absences due to severe illness, injury or family emergency will be looked at on an individual basis by the Program faculty and/or Progress and Promotions Committee, to determine if grade penalties will be incurred or if make up time will be allowed. In the event of an extended absence it may be necessary to make up missed clinical time. Insufficient clinical hours will result in receiving a grade of "Incomplete" for that semester. The "Incomplete" cannot be changed until all clinical hours are completed. If the incomplete is not removed prior to the start of the next semester the student will not be allowed to register for the next clinical course. Extraordinary circumstances will be reviewed on a case-by-case basis.
- **Full performance of duties:** Students must be able to perform all activities required to be a full functioning radiographer. Therefore, if an illness, injury, condition, etc. prevents the student from performing the required activities, including but not limited to lifting, pushing, pulling, etc., the student may not attend clinical. In order to return to clinical a full release from the student's doctor is required.
- Semester break clinical time: In order to complete required minor track clinical experiences, students may be allowed to attend extra clinical during finals week or the first week of the semester break at the discretion of the program faculty and clinical affiliate. Proper supervision must be available; all clinical policies must be adhered to. Going to a clinical site without the Minor Track Instructor's (or designee) approval is a supervision violation and will result in a reprimand and no credit for time, assignments or exams completed.
- Make up time: Occasionally, students will be allowed to make up time missed due to a documented extended illness or extenuating circumstance such as a funeral, jury duty, acute illness, etc. The student must request make up time in writing and provide documentation. Make up time is granted at the discretion of the Minor Track Instructor upon careful review of the documentation provided and the circumstances. This make up time may only be done over semester breaks and/or at the discretion of the Minor Track Instructor and clinical affiliate. All clinical policies apply. Make up time due to these extenuating circumstances will be applied towards the clinical grade. Going to a clinical site without the Minor Track Instructor's (or designee) approval is a supervision violation and will result in a reprimand and no credit for time, assignments or exams completed.
- Volunteer clinical time: Students are allowed to volunteer at clinical sites on their own time to gain more experience or to gain exposure to different modalities. Students must first get approval from the Clinical Coordinator or Minor Track Instructor, who will in turn contact the clinical site for their approval and to ensure proper supervision will be available. Volunteer clinical time will not be approved if it conflicts with other scheduled student rotations or proper supervision is not available. All clinical policies apply. Failure to attend the scheduled time without an acceptable excuse will lead to forfeiture of future opportunities. Going to a clinical site without the Minor Track Instructor's (or designee) approval is a supervision violation and will result in a reprimand

and no credit for time, assignments or exams completed. Exams performed during this volunteer clinical time during semester breaks will be applied to the semester that follows.

- Recommended Additional Clinical Time: In the event that a faculty member or a clinical instructor feels that a student would benefit from participating in more clinical time, a memo/e-mail will be sent to the program and/or student stating the reason for the additional time. The student may or may not agree with the recommendation; however, students should understand that the additional time recommendation is done for their own benefit. Choosing not to take advantage of the recommendation may be an indication of the student's desire to be successful. All clinical policies will apply.
- Religious observances: The program recognizes that some students may have special needs in the scheduling of clinical duties because of religious beliefs and practices. Therefore students who anticipate conflicts with regularly scheduled clinical rotations must notify the Minor Track Instructor in writing at least 15 calendar days in advance of the conflicting date. The student will be able to make up the clinical time during the semester break or at the discretion of the Minor Track Instructor. The student and Minor Track Instructor will work together to schedule the make up time. All policies apply.

SYMPLR

- Students will be required to use the "Symplr" credentialing system for rotations at Children's Healthcare of Atlanta (CHOA). Students will receive an e-mail from Symplr and will follow their instructions to be cleared to rotate through the CHOA sites. The student will need to upload documentation and must submit to a background check and a drug screen at their own expense. Students may not attend any CHOA rotation until they get a "green light" from Symplr.
- Failure to pass their requirements will prevent the student from attending the rotation. All attendance policies will apply.

PHONE LIST

Program Office	Phone #'s
Main: Candice McLean	404-712-1160

Ted Brzinski 404-712-1229 Kim Cross 404-712-0294 Barbara Peck: 404-712-7823 Dawn Moore: 404-727-3200 Lamiis Khalifa 404-712-1228 Sean Strickler 404-712-2167 Ajeenah Bullock 404-712-1763

Inclement Weather Line: 404-727-1234 *To Page: Dial 404-686-5500, enter PIC #, enter your number, press #.

Children's Healthcare of Atlanta at Egleston

404-785-6031 CT: MRI: 404-785-1487 Interventional: 404-785-2077 **Education Coordinator:** 404-785-1480

TO CALL A CODE 5-6161

Children's Healthcare of Atlanta at Scottish Rite

MRI: 404-785-2485 MRI Supervisor: 404-785-5356 **Education Coordinator:** 404-785-3470

TO CALL A CODE 5-6161

Children's Healthcare of Atlanta at Webb Bridge

404-785-7226 MRI:

TO CALL A CODE 9-911

The Emory Clinics A & C (Winship)

Mammography: 404-778-4896 404-778-3441 Bone Density: CT: 404-778-4714 CT Supervisor: 404-778-4810 MRI: 404-778-3176 (5622) PET 404-778-5748 Cardiac PET: Bldg. A 404-778-4748

TO CALL A CODE 8-8888

The Emory Clinic Satellites

Executive Park 59:

4th floor: 404-778-6278 Supervisor: 404-778-6298 Executive Park 12: 404-778-6064

TO CALL A CODE 9-911

Emory Johns Creek Hospital

General 678-474-8071 (7166, 7167) 678-474-5602

Mammography: MRI: 678-474-8173 CT: 678-474-8070 (7169) Interventional: 678-474-8055

TO CALL A CODE 4444

Emory McDonough Imaging Center

404-778-7270

Emory St. Joseph's Hospital

General 678-843-5529 (5530) CT678-843-7574 press 3 PIC #'s or Cells

N/A15887* 404-944-2313 14077* N/A 26612* N/A

678-843-7332 MRI 678-843-5149 Supervisor 678-843-4898 OPIC 678-843-6132 (6133)

TO CALL A CODE 3-5555

Emory University Hospital – Midtown

Control: 404-686-2326 404-686-8983 CT: Interventional: 404-686-2323 Mammography: 404-686-3821 MRI: 404-686-3360

TO CALL A CODE 6-1777

Medical Office Tower

404-868-6701 CT:

Emory University Hospital

CT Supervisor 404-712-4612 CT Main 404-712-7888

CT Tower404-712-4612

Interventional: 404-712-0532 MRI: 404-712-1390

TO CALL A CODE 2-1777

Emory University Orthopaedic & Spine Hospital

MRI: 404-251-3092 404-251-3091 CT: Technologists 404-251-3094

TO CALL A CODE 1-3777

Piedmont Hospital

Interventional Supervisor: 404-605-3751 Main Radiology 404-605-2929 TO CALL A CODE Hit the code blue button

PHONE LIST cont'd

Resurgens Orthopaedics

Lawrenceville:

Front Desk 678-985-7141 Open Magnet Tech Area 678-985-7143 Closed Magnet Tech Area 678-985-7134

Chastain:

Front Desk 678-594-6080 Tech Area 678-594-6167

St. Joseph:

Front Desk 404-531-8591 Tech Area 404-531-8594

Roswell:

Front Desk: 770-360-0478 Tech Area 770-722-5531

TO CALL A CODE 911

Off Site Clinical Affiliates -

Brain Health

59 Executive Park South Atlanta, Ga. 30329 404-778-6064

Emory Johns Creek Hospital

6325 Hospital Pkwy, Johns Creek, GA (678) 474-7000

Emory McDonough

249 Jonesboro Rd, McDonough, GA 30253 404-778-7270

Emory Orthopaedic and Spine Hospital

1455 Montreal Rd, Tucker, GA (404) 251-3000

Resurgens - Cumming

4150 Deputy Bill Cantrell Memorial Road Suite 105 Cumming, GA 30040 (678)341-6738 Resurgens - Lawrenceville

758 Old Norcross Rd., Suite 100 Lawrenceville, Ga. 30043 678-985-7135

Resurgens - Roswell

1285 Hembree Rd., Suite 200A Roswell, Ga. 30076 770-360-0406

Resurgens - St. Joe

5671 Peachtree – Dunwoody Rd., Ste 900 Atlanta, Ga. 30342 404-531-8451

The Emory Clinic at Executive Park

59 Executive Park South OR 12 Executive Park Atlanta, Ga. 30329

DRESS CODE

The personal appearance and demeanor of Medical Imaging Students at Emory University reflect both the University and Program Standards and are indicative of the student's interest and pride in the profession. The appropriate uniform, as described below, should be worn while on the clinical assignment.

Failure to comply with the dress code may result in the student being dismissed from the clinical setting until proper attire is worn. All clinical time missed due to noncompliance with the dress code will affect the attendance section of the work ethic grade. After one warning, each dress code violation will affect the work ethic grade.

It is also important to give a favorable impression to patients, physicians, and visitors while walking through the clinical sites before or after your shift or when in the department to do assignments, pick up images, etc. Therefore inappropriate attire, such as shorts, blue jeans, midriffs, tank tops, tee shirts with slogans, sandals, etc. should be avoided. Review the hospital and departmental dress code in the back of this section for further clarification.

Uniforms

Clinical Rotations:

Black scrub uniform with required embroidery (when rotating through mammography students may wear pink tops), **short** white lab coat/jacket (sport coat length) with patch, black or white shoes, white or black socks/hose. Students may wear <u>plain</u>, (no logos) white or black undershirts or turtlenecks under their uniform tops. Uniforms must be kept clean and pressed at all times. Faculty, clinical instructors and or supervisors reserve the right to deem uniforms inappropriate, send the student home and/or require different uniforms.

Scrub tops must be embroidered with the preapproved Emory Medical Imaging logos. Uniforms must be purchased through the Emory Bookstore.

Lab coats are to be worn at <u>ALL</u> times when outside of the radiology department, except at Egleston since white lab coats may intimidate the pediatric patient. Students may remove their lab coat while performing procedures in the department, however they should keep it on as much as possible. Students will be supplied with one patch and the student will sew it onto the right sleeve of their lab coat as instructed by the faculty. Students can purchase additional patches at \$5.00 each from the clinical coordinator.

Hospital-purchased surgery uniforms will be worn <u>only</u> as required by the clinical site. White lab coats or jackets should be worn over the scrubs when the student is not in the surgery suite. Surgical masks, bonnets, and booties are not to be worn outside of the required area. No student may wear or carry hospital-purchased scrub attire away from the hospital complex.

If a student is splashed with blood or body fluids, contact the department supervisor so a temporary set of scrubs can be issued. Be sure to inform the program faculty so a dress code violation is not given.

Shoes should be polished and should be flat; white or black uniform shoes or tennis shoes are acceptable. Tennis shoes should be plain; they should not be adorned with colorful stripes etc. Socks and hose are required and should be in good shape. Open toed shoes are not permitted, clogs are permitted.

Clothes must be clean and pressed. Students that do not look professional will be sent home.

**MRI students are to remove the following before entering the MRI system room:

- Purse, wallet, money clip, credit cards, cards with magnetic strips
- Electronic devices such as beepers or cell phones
- Hearing aids
- Metal jewelry, analog watches

- Pens, paper clips, keys, coins
- Hair barrettes, hairpins
- Steel toe shoes, belt buckles, safety pins
- Any article of clothing that has metallic fibers or threads, metallic zippers, buttons, snaps, hooks, or underwire

Name Badge

Students must identify themselves to patients and wear an identification name badge in **plain view** while on clinical assignment. Name Badges **cannot** be placed on a lanyard; appropriate holders include retractable badge holders or clip on holders. Students will be supplied with a class color Badge ID holder that they must wear at all clinical rotations. The Program provides name badges at the beginning of training but the student must purchase replacement badges. Absence of I.D. badges is considered a dress code violation. Students will also obtain a student badge from the education coordinator when at Egleston and return it upon completion of the rotation. *MRI students should switch out their metal badge holders with plastic badge holders provided by MRI instructor prior to the beginning of their first MRI rotation.

• Radiation Badges (MRI students are exempt)

The student must always wear two dosimeters while on clinical assignment. The collar dosimeter should be worn near the neck and outside of the fluoroscopy apron during fluoroscopy procedures. The body dosimeter is to be worn at the waist level along the midline of the body and under the fluoroscopy apron during fluoroscopy procedures. Dosimeters must be changed prior to the 5th working day of each month and must be turned in on time. Late submission will result in the student being assessed a \$40.00 late fee. Students will remit this fee to the program. Students will review and initial their dosimetry reports when the reports are received from the radiation safety office.

• Minor Track Clinical Notebook

The student must have access to the minor track clinical notebook during <u>ALL</u> clinical rotations to avoid a dress code violation.

• Hygiene

For the health and well-being of all students, employees and patients, students are responsible for maintaining appropriate levels of personal hygiene. Clean clothing and hair, daily bathing, and the use of deodorants/antiperspirants is strongly recommended to maintain appropriate standards of cleanliness. Body odors will be addressed with individual students quickly and confidentially. Students may be sent home by the Faculty or Clinical Instructor to address the problem. Students may return once the issue is resolved. Time missed will be deducted from the student's personal time (if applicable) unless a medical condition exists. Grade penalties apply.

Jewelry

For sanitary and safety purposes, jewelry must be kept to a minimum and must be inconspicuous. Earrings must be small and close to the ear lobes. Only two earrings/ear are allowed. Necklaces must be short and should never touch a patient. Only one ring may be worn on each hand. Body piercing that is visible to the customer such as tongue rings, eyebrow rings, nose rings, pierced fingernails etc. may not be worn while on clinical rotations. Ear gauges are not allowed.

Watches

Students are required to wear a watch with a second hand while on their clinical assignment. They may not wear "Smart Watches". Students in MRI may not wear analog watches.

Hairstyles

Hairstyles must be **simple** and kept out of the eyes. Long hair must be worn in a fashion that will never touch the patient. Hair must be neatly groomed, clean and must be a natural human color. (e.g. black, blonde, brown, red, gray, white.) Extreme hairstyles and unnatural colors are not allowed. If a hair band, hair bow or turban must be worn, it must be kept simple and must

be white. Beards and mustaches must be neatly trimmed.

• Fingernails

For sanitary purposes fingernails must be short, no longer than 1/4 inch and must be neatly trimmed and clean. Students may NOT wear any fingernail polish or false fingernails of any kind while in clinical. False fingernails are not acceptable when providing direct patient care, performing invasive procedures, or when preparing compounded or infusion solutions. There have been documented outbreaks of infections due to Pseudomonas, Serratia & Yeast due to artificial nails.

• Cosmetics and Fragrances

Cosmetics and fragrances may be used only in moderation. Fragrances are **not allowed** at Children's Healthcare of Atlanta.

Smoking

Smoking is prohibited inside all medical buildings. Smoking is NOT permitted at many of the campuses. Students that smell of smoke will be sent home by certain facilities. This will affect the student's personal time, dress code, and their work ethic grade.

Tattoos

All tattoos must be kept covered while on clinical rotations.

• Cell phones and electronic devices

Use of cell phones or ANY other mobile electronic device is **NOT** permitted during clinical hours except to clock in and out. The use of cell phones in the clinical setting is considered disruptive and is strictly prohibited. Once students clock in on E*Value, **they may not have their mobile devices on their person**; all electronic devices must be left in student lockers if available, or another secured location (The Program is not responsible for the security and storage of students' mobile devices). Students may check their device during the lunch break, if necessary. Should the need arise for family/friends etc. to contact a student while in clinical, that party should contact the Program office. A Program official will then contact the student at the clinical site.

Abuse of this policy is considered a violation of professional suitability standards and subject to the actions described on page 24 of the clinical handbook for violation of conduct standards. Students violating the policy may be asked to leave the clinical site for the day. Any lost clinical hours will be counted as an absence. Students violating the policy will also receive a written reprimand and a dress code violation. A second violation will result in suspension and a third will result in dismissal from the program.

Inputting of recorded procedures should take place during the lunch break or after clinical when the student has access to his/her device. Students are expected to adhere to HIPAA policies at all times and should limit the protected health information recorded to that required (EMPI & history). Any patient information should be shredded after the information is entered into E*Value.

• Text Messaging, e-mail or social media

Students may NOT text message, use any social media websites (ex. Twitter, Facebook, Instagram, Snapchat, etc.) or e-mail while in clinical. Including e-mailing program faculty, staff or clinical sites/personnel.

Code Cards

Must be carried with the student during all clinical rotations. (Will be provided by program.)

CPR

All students must be current in American Heart Association BLS CPR. If a student certification lapses during the program they may not go to clinical until it is updated. All attendance penalties will apply.

SECTION III: PROFESSIONAL CONDUCT

The Emory University School of Medicine takes great pride in the development and accomplishments of its students and the practitioners it graduates. It is a combination of academic success and professional development that provides the cornerstone of a fine practitioner. To that end, various safeguards are in place to monitor and access the progress, performance and promotion of students. All conduct standards in the *Medical Imaging Program Student Handbook* (http://radiology.emory.edu/education/medical-imaging/policies-evaluation.html) and the *SOM Student Handbook* (https://med.emory.edu/handbook/) apply to all clinical courses.

Professional conduct is expected from students at all times. Professionalism is an essential component of all clinical evaluations and is a primary factor of success considered by the Program Faculty. Also be aware that certain unprofessional behaviors could make the student ineligible to take the National Registry Exam. Students should review registry policies and the Standard of Ethics at www.arrt.org upon admission to the program.

EXPECTATIONS

Emory University is an institution dedicated to providing educational opportunities for its students, transmitting and advancing knowledge, and providing a wide range of services to students and to the general community. To accomplish these objectives and responsibilities requires that the University be free from violence, threats and intimidation; protective of free inquiry and dissent; respectful of the rights of others; open to change; supportive of democratic and lawful procedure; and dedicated to intellectual integrity and a rational approach to the resolution of human problems.

The tradition of the university as a sanctuary of academic freedom and center of informed discussion is an honored one, to be guarded vigilantly. The basic significance of that sanctuary lies in the protection of intellectual freedoms: the rights of professors to teach; of scholars to engage in the advancement of knowledge; of students to learn and express their views.

Health professionals are privileged to serve in important and time-honored roles as caregivers for other humans. These roles include physical and emotional dimensions that demand the highest degree of ethical behavior.

Ethical behavior includes, but is not in any way limited to honesty, maintaining confidentiality, trustworthiness, professional demeanor, respect for the rights of others, personal accountability, concern for the welfare of patients, and responsibility to duty:

- **Honesty** Being truthful in communication with all others, while in the healthcare arena or in the community at large.
- Maintenance of Patient Confidentiality Restricting discussion of patient care to those areas where conversations cannot be overheard by others outside of the care team; refraining from disclosing patient identity to those not connected to the care of the patient; maintaining appropriate security for all paper and electronic patient records, whether in the patient care or research realms.
- **Trustworthiness** Being dependable; following through on responsibilities in a timely manner.
- **Professional Communication and Demeanor** Being thoughtful and kind when interacting with patients, their families, other members of the healthcare team, and all others; maintaining civility in all relationships; striving to maintain composure under pressures of fatigue, professional stress or personal problems; maintaining a neat and clean appearance and dress in attire that is reasonable and accepted as professional to the circumstances; refraining from intoxication; abstaining from the illegal use of drugs (both prescription and illicit drugs).

- **Respect for the rights of others** Dealing with all others, whether in a professional or non-professional setting, in a considerate manner and with a spirit of cooperation; respecting the rights of patients and their families to be informed and share in patient care decisions; respecting patients' modesty and privacy.
- **Personal accountability** Participating responsibly in patient care to the best of one's ability and with appropriate supervision; undertaking clinical duties and persevering until they are complete; notifying the responsible person if one is unable to perform clinical tasks effectively; complying with University Policies and Procedures in an honest and forthright manner.
- Concern for the welfare of patients Treating patients and their families with respect and dignity both in their presence and in discussions with others; avoiding the use of foul language, offensive gestures or inappropriate remarks; discerning accurately when supervision or advice is needed and seeking these out before acting; recognizing when one's ability to function effectively is compromised and asking for relief or help; never administering care, in person or over the phone while under the influence of alcohol or other drugs (prescription or illegal); not engaging in romantic, sexual, or other nonprofessional relationships with a patient, even upon the apparent request of a patient; advocating for the best care of the patient, in context of that patient's beliefs and desires.
- Responsibility to duty— Effectively undertaking duties with alacrity [eagerness, enthusiasm and promptness are synonyms] and persevering until complete, or notifying a responsible more senior person of a problem; being punctual for class, small groups, rounds, conferences and other duties; timely notification of supervisory faculty, residents and Deans of absences or an inability to carry out assigned duties; seeing patients regularly and assuming responsibility for their care with appropriate supervision; identifying emergencies and responding appropriately; and being available to faculty or staff personnel when on duty.

EVALUATION OF PROFESSIONAL CONDUCT

The medical school faculty of Emory University has established standards for determining the ethical fitness of medical students to participate in the medical profession. The evaluation of professionalism, separate to and as part of academic performance, is considered for all medical students during each and every course and clerkship. The Standards of Professionalism are described in the Medical Imaging Program Student Handbook. Some specific examples of professional conduct include:

- i.) Concern for the welfare of patients as evidenced by thoughtful and professional attitude in obtaining history and physical examinations; avoidance of foul language, offensive gestures or inappropriate remarks with sexual overtones; treatment of patients with respect and dignity both in their presence and in discussions with peers; manifestation of concern for the total patient.
- ii.) Concern for the rights of others, as shown by dealing with professional and staff personnel and with peer members of the health care team in a considerate manner and with a spirit of cooperation; acting with an egalitarian spirit towards all persons regardless of race, color, religion, sex, sexual orientation, national origin, veteran's status, disability, or age; assuming an appropriate and equitable share of duties among peers.
- iii.) Responsibility to duty, which involves: effectively undertaking duties with alacrity [eagerness, enthusiasm and promptness are synonyms] and persevering until complete, or notifying a responsible more senior person of a problem; punctual attendance for class, small groups, rounds, conferences and other clinical duties, or offering appropriate explanation when unable to be present; notifying the Dean's Office, course directors, and/or supervising house officers of absence or inability to carry out duties; seeing patients regularly and assuming responsibility for their care with appropriate supervision; identifying emergencies and responding appropriately; and being available to faculty or staff personnel when on duty.
- iv.) Trustworthiness, exhibited by being truthful and intellectually honest in communications with others; accepting responsibility for meeting multiple demands by establishing proper priorities and by completing work necessary for the optimal care of patients; discerning accurately when supervision or advice is needed before acting; maintaining confidentiality of information concerning patients.
- v.) Professional demeanor, which means a neat and clean appearance in attire, that is reasonably acceptable as appearing professional to the patient population;
- vi.) Maintaining equilibrium under pressures of fatigue, professional stress, or personal problems;

avoiding the effects of alcohol or drugs while on duty.

Unprofessional behavior by a student should be reported to the clinical director, program director, or the Executive Associate Dean, as appropriate. Unprofessional behavior or violations of the code of conduct are addressed as described in the Medical Imaging Program Student Handbook.

MEDICAL IMAGING PROGRAM SPECIFIC STANDARDS

In addition to standards developed by the school of medicine, the program has developed specific standards for students in the Medical Imaging Program.

• Professional Ethics

All persons who work in a hospital share the responsibility of observing a code of ethics, which requires truthfulness, honesty and personal integrity in all human activities. In general, the following applies to all hospitals, clinics, and students:

- Doctors alone have the training and legal right to diagnose and treat human illnesses and injuries.
- All information concerning patient or hospital/clinic business must be held in strict confidence. Students are not to discuss outside the hospital or clinic, or even with other students or employees, any information concerning any patient. Students are expected to maintain patient confidentiality in a professional manner. When patients ask questions concerning their exams, always tell them to consult their physician.
- Students are not to burden patients or other employees with their own personal problems.

• Professional Conduct

The following are some of the rules, which will govern each student's conduct during clinical hours. The purpose of these rules is not to restrict the rights of individuals, but to define and maintain the rights of all individuals.

Discipline for violation of these rules may range from a verbal warning to a written reprimand to dismissal, depending upon the type of violation and the circumstances surrounding the offense.

All Medical Imaging Students will:

- 1. Report to the clinical assignment in an alert condition and remain that way throughout the assignment.
- 2. Not be in the possession of drugs or liquor, nor engage in their use while on clinical assignment.
- 3. Not be in the possession of weapons while on clinical assignment.
- 4. Conduct themselves with respect to common decency and morality.
- 5. Be present and prompt to all clinical assignments.
- 6. Report to the clinical assignment in the proper complete uniform.
- 7. Refrain from chewing gum while on clinical assignment.
- 8. Smoke only in designated areas.
- 9. Eat only in designated areas.
- 10. Conduct themselves professionally while on clinical assignment.
- 11. Refrain from arguing with the clinical personnel or faculty. Discussion is appropriate but only away from the patients.
- 12. Use appropriate language when conversing with patients and personnel.
- 13. Refuse any type of gratuity or "tip" from a patient or patient's family.
- 14. Conduct personal conversations away from patients.
- 15. Respect all property.
- 16. Remain in the designated clinical assignment at all times.
- 17. Adhere to all supervision policies.
- 18. Use the clinical affiliation telephone only in the event of an emergency.
- 19. Accept assignments equal to your abilities and take directions from the Clinical Instructors and supervisors.

- 20. Supply and record information honestly.
- 21. Clock in and out truthfully.
- 22. Receive personal visitors only in cases of emergency.
- 23. Not loiter in the Radiology Department of the clinical affiliate at times not specified for clinical assignment.
- 24. Refrain from using cell phones or other electronic communication devices in the vicinity of any patient, workflow area, or during any procedure as per policy.
- 25. Only use PAC's to view images of patients who are in their direct care or when using images for class assignments as directed by faculty.
- 26. SMILE!

USE OF SOCIAL MEDIA

As described above, behavior of students in the academic setting and beyond must be in keeping with the ideals of the institution and the profession of medicine. The following paragraphs indicate the current standards for behavior that relate to the use of social media.

Each student is responsible for his or her postings on the Internet and in all varieties of social media. In all communications, students are expected to be courteous, respectful, and considerate of others. Inappropriate postings on the Internet or social media will be considered lapses in the standards of professionalism expected of Emory School of Medicine students. Students responsible for such postings are subject to the Conduct Code process in the same manner as for any other unprofessional behavior that occurs outside the academic setting. Students who do not follow these expectations may face disciplinary actions including dismissal from the School of Medicine.

Students within the School of Medicine are urged to consider the following before posting any comments, videos, pictures, or essays to the Internet or a social media site:

- 1. There is no such thing as an "anonymous" post. Furthermore, any posts or comments submitted for others to read should be posted with full identification of the writer. Where your connection to Emory is apparent, make it clear that you are speaking for yourself and not on behalf of Emory. A disclaimer, such as, "The views expressed on this [blog; website] are my own and do not reflect the views of my University or the School of Medicine" are required.
- 2. Internet activities may be permanently linked to the author, such that all future employment (residency, fellowship and beyond) may be hampered by inappropriate behavior on the Internet.
- 3. Making postings "private" does not preclude others copying and pasting comments on public websites. "Private" postings that become public are still subject to sanctions described in the School of Medicine Conduct Code.
- 4. Do not share information in a way that may violate any laws or regulations (i.e. HIPAA or FERPA). Disclosing information about patients without written permission of the patient and the School of Medicine, including photographs or potentially identifiable information is strictly prohibited. This rule applies to deceased patients also.
- 5. For Emory's protection as well as your own, it is critical that you show proper respect for the laws governing intellectual property, copyright and fair use of copyrighted material owned by others, including Emory's own copyrights and brands. Curricular materials developed by Emory faculty and staff or faculty/staff of other medical schools or educational institutions should not be distributed or redistributed. When in doubt, students should seek guidance regarding appropriate use of such materials.
- 6. Do not share confidential or proprietary information that may compromise Emory's research efforts, business practices or security.

In addition to these general School of Medicine policies, Medical Imaging students are expected to adhere to the following guidelines:

 Medical Imaging students should apply professional practice and ethical standards equally to live and online activities.

- Medical Imaging students must refrain from posting images or information about clinical sites or clinical staff.
- Medical Imaging students must refrain from posting images or information about clinical experiences/frustrations.
- Medical Imaging students must never post information, including images, that could potentially identify a patient.
- Medical Imaging students should avoid engaging with faculty, clinical staff or employees of any clinical setting on their private social media accounts until they have graduated from the program (i.e. "friending" on Facebook, "following" on Twitter, Snapchat, Instagram etc.)

Extreme caution is urged when mixing professional and personal on-line information and communication. Medical Imaging students have chosen a profession which expects more of its members; an obligation to behave professionally both online and off.

VIOLATION OF PROFESSIONAL SUITABLITY

An unsatisfactory suitability evaluation will result in a counseling session and written documentation of events leading to the student's unsatisfactory evaluation. A serious offense may result in suspension or dismissal while less serious events may result in a warning, probation, and/or grade reduction.

The following scale has been developed by the Medical Imaging Program to inform the students of violations of conduct standards and probationary practices.

1.	Violation Violation of Supervision Requirements	nt Number 1 2 3	Action Taken Written Reprimand Suspension ** Dismissal
2.	Unprofessional Demeanor	1 2 3 4	Counseling Written Reprimand/Probation Suspension ** Dismissal
3.	Falsification of Clinical Records (Depending on Severity)	1 2 3	Written Reprimand/Probation Probation/ Suspension** Dismissal
4.	Excessive Absences * (> 24 hours/semester)	1 2 3	Counseling/Probation/Required make up Suspension**/ Required make up Dismissal
5.	Unauthorized Absences * (NCNS – No Call No Show)	1 2 3 4	Written Reprimand Probation Suspension** Dismissal
6.	Excessive Tardiness *	>3/semester >3/semester 2x's in a row >3/semester 3x's in a row	
7.	Dress Code Violation *	1 2 3 4 5	Warning Counseling Reprimand Suspension** Dismissal

8.	Hygiene Violation	1 2 3 4	Counseling Reprimand Suspension** Dismissal
9	Cell Phone/Mobile devices/ * violation	1	Written Reprimand AND Dress Code
	Texting/Social Media	2	Suspension** AND Dress Code violation
	-	3	Dismissal
10.	Honor Code Violations	1	Written Reprimand,/Probation/Grade penalties
		2	Suspension**
		3	Dismissal
11.	Picture taking	1	Reprimand/Possible dismissal/Probation
	-	2	Dismissal
12.	PAC's violation	1	Dismissal

Any serious violation of professional ethics may result in immediate dismissal.

**Time missed due to suspensions must be made up over the semester breaks at the discretion of the clinical coordinator. A second violation of the Cell Phone/Mobile device policy will result in one full clinical day suspension. Any suspension will lead to an automatic one letter grade deduction in the clinical course it occurs.

In addition to the previous scale, clinical site supervisors or instructors may send a student home from a clinical site for violation of professional conduct. The following actions should result in an immediate call from the site to the Minor Track Instructor, Clinical Coordinator or Program Director.

- Patient safety issues
- Insubordination
- Altered Mental Status
- Under the influence

The first offense for any of the above listed reasons:

- Student's personal time is used for missed clinical time up to 2 days
 - o If the student has no personal time left grade penalties will apply.
- Clinical coordinator will place the student at an alternate site before the 3rd clinical day.
 - o It may not be possible to send the student to a similar type of clinical site.

Second or subsequent offenses for any of the above listed reasons:

- Alternate clinical site will not be provided.
- Student will miss the remainder of the clinical rotation during which the incident occurred.
- Grade penalties will apply.

Clinical sites may refuse to allow a student to attend clinical at their site if they have violated conduct standards. If this happens it may not be possible for a student to complete the required competencies to graduate.

ACADEMIC STANDING AND ACADEMIC DISMISSAL

Students earning a grade of "D" in a clinical course will be required to retake the course in which the "D" was earned. Achievement of a grade of "C" will be required when the course is repeated; however, the initial grade of "D" will remain on the student's official transcript. Repeating a course means the student will have to interrupt the program of full-time study and graduation will be delayed for one year. During

^{*} Realize also that some violations impact the work ethic grade as discussed in section VII.

the intervening year, individualized plans of study will be developed jointly by the student and the Program Director.

Achievement of two or more grades of "D" in medical imaging courses will automatically result in exclusion from the program.

Achievement of one grade of "F" or "IF" in any medical imaging course will automatically result in exclusion from the program.

Students experiencing clinical or personal difficulty may withdraw from a course. Withdrawals will only be granted prior to mid-term and a grade of W (withdrawal without penalty) or WF (withdrawal failing) will be assigned as appropriate. Withdrawing from a course means the student will have to interrupt the program of full-time study and graduation will be delayed for one year. During the intervening year, individualized plans of study will be developed jointly by the student and the Program Director.

GRADE POINT AVERAGE REQUIREMENT

A 2.0 average must be maintained in **each semester** to remain in good academic standing and to continue in the program without interruption of full-time status.

A cumulative GPA of at least 2.0 (didactic and clinical) is required for graduation.

CLINICAL PROBATION

Students may be placed on clinical probation for violation of policies, misconduct, absenteeism, or tardiness. Specific requirements for continuation will be looked at on an individual basis and included on the probation form.

HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA)

All students will be required to attend HIPAA privacy training before beginning their clinical education. Students will also be required to satisfactorily complete the University HIPAA competency check by the deadline date. Students will be required to sign confidentiality agreements and are subject to all rules, regulations and laws regarding patient privacy.

Our Compliance Pledge

As a member of the Emory Healthcare team, we each pledge to:

- Follow all laws, regulations and EMORY HEALTHCARE policies. The laws, regulations and ethical principles that govern health care are complicated.
- Ask questions if the rules are unclear. If the rules are unclear, ask your supervisor, other management or call the office of compliance programs at 404-778-2757. Keep asking until you get a satisfactory answer.
- Act when you think something is not right. When you think something is not right, discuss the issue with your supervisor. If you are not comfortable doing that, or you are not satisfied with the response, go to higher management in your area. If you still are not comfortable, call the office of compliance programs at 404-778-2757 or the EMORY HEALTHCARE Trust Line at 1-888-550-8850.
- Report potential violations. Follow this same line of communication when you know a law, regulation, health care policy or rule has been broken or if you are asked to break one of them. It is EMORY HEALTHCARE's policy that no employee is punished for raising an issue or reporting a concern in good faith. Your adherence to the EMORY HEALTHCARE compliance program will be considered in your performance evaluation.
- Be a part of the solution if a problem is found. When a problem is identified, EMORY HEALTHCARE needs you to help solve the problem. Immediate and long-term correction is critical to making sure a problem is not repeated.
- Engage in ethical conduct and expect ethical conduct from others. Participate only in those activities of which you are sure you and EMORY HEALTHCARE can be proud.

The following guidelines will help you do the right thing:

- If you know or think something is wrong, don't do it, even if someone is pressuring you.
- If you are concerned about something you are doing or are worried that it might be discovered, stop get advice, report the concern and redirect your actions so that you know you are doing the right thing.
- Students may not look up <u>any patient</u> images unless they are involved in direct patient care or they have received permission from a course instructor for an assignment.
- Students may not look up their own images.

SECTION IV: OBJECTIVES

During clinical rotations students are expected to achieve a variety of objectives. This section explains general and attitudinal objectives that relate to all clinical rotations. Students will find specific objectives for minor track rotations in the advanced clinical practicum syllabi. Prior to all clinical rotations students should review all objectives relevant to the area.

GENERAL

The clinical courses and laboratory experiences are designed to familiarize you with the many aspects of Medical Imaging. Specifically, we desire that students:

- 1. Acquire expertise and proficiency in a wide variety of radiographic procedures by applying classroom theory to the actual practice of technical skills.
- 2. Develop and practice professional work habits and appropriate interpersonal relationships with patients and other members of the health care team.
- 3. Acquire a broad knowledge of anatomy and physiology.
- 4. Learn the principles and proper operation of many types of imaging equipment and accessories.
- 5. Learn to properly evaluate the requisition, identify the patient, and demonstrate proper patient care in preparing the patient for his the exam.
- 6. Follow proper procedures to maintain the room in a clean, tidy and well-supplied manner.
- 7. Learn the correct method of positioning.
- 8. Learn safety in the use of machine-made radiation and/or MRI imaging.
- 9. Learn nursing procedures and sterile techniques pertinent to radiology.
- 10. Acquire a basic background in computer operations, office procedures and department administration.
- 11. Participate in continuing education activities.
- 12. Become proficient in digital imaging techniques including PACS.
- 13. Learn the appropriate response to emergencies by familiarizing themselves with emergency techniques, the location of the crash carts, notification systems and phone numbers.
- 14. Practice universal precautions.
- 15. Evaluate images.
- 16. Appreciate the role of the radiologist and physician extenders in medical imaging.
- 17. Provide proper clinical documentation for all work.

Example Script: Patient Involvement and Site Marking

- Hello Mr. or Mrs. _____ my name is_____.
 - o I am an Emory Student technologist and I will be performing your exam today under the direct supervision of a registered radiologic technologist (mammographer) (They have a right to refuse you, if so contact the technologist so they can take over the exam.)
- I will be performing a MRI/CT/Mammogram/IR procedure of/on _____(indicate body part and side, RT/LT/Both).
- Ask "Can you tell me a little about your medical history and why you are here today?"
 - Include this information in RADNET
 - o Radiologists like to get the patients history.
- At start and completion of the exam, ask the patient if they have any questions or concerns.

- Position the patient appropriately and if applicable while placing the marker say: "I am placing a (Rt or Lt) marker near your (name the body part, e.g. foot) to indicate the correct side that I am x-raying."
- For each position and/or side use the same language as above.
- When the exam has been completed, thank the patient by name for their cooperation.
- *Tell them what they may expect to happen next:*
 - You will make the images available by computer within a few minutes.
 - o The radiologist, orthopedist, ED physician (whichever is appropriate for the site you are at) will interpret the exam.
 - The results will be provided to you by your doctor.
- Refer to the patient by name and include the family members as well.
- Ask the patient if there is anything else that you can do for them today.

ATTITUDINAL

These objectives reflect desired behavior patterns, attitudes, beliefs, values and tendencies to act in a prescribed manner. They are relative to any and all assignments.

- 1. The student will conduct him/herself in a professional manner at all times.
- 2. The student will be properly groomed, adhering strictly to the dress code as outlined in the student handbook.
- 3. The student will practice good communication skills in their interactions with patients and department, clinical, and hospital personnel.
- 4. The student will act and respond to patients and staff in a responsible manner.
- 5. The students' attitude will be one of concern, cooperation and interest in their relationship with the patient and the staff with which they are working.
- 6. The student will organize their work so that the exam is expedited efficiently with maximum patient care and minimum patient discomfort.
- 7. The student will be punctual and will notify the appropriate personnel when there is a possibility of being late.
- 8. It is very important in the field of imaging to be able to anticipate situations that may arise in the department and be able to cope in a professional and responsible manner.
- 9. The student will accept personal responsibility.
- 10. The student will follow the proper procedures to register a grievance. Problems in clinic will be addressed to the clinical faculty. Problems related to the school will be submitted to the educational coordinator. The faculty is always available and open to communication with the students.

SECTION V: CLINICAL EDUCATION MASTER PLAN

Students will rotate through areas of their chosen field of expertise

CT – Computed Tomography

IR – Interventional Radiology

MRI – Magnetic Resonance Imaging

Women's Health – Mammography and Bone Density

TOTAL MINOR TRACK PRACTICUM CLINICAL HOURS:

Approximately 544 hours

The student will be assigned to a clinical site or several clinical sites for a period of time each semester. The student will receive a specific rotation schedule each semester with specific dates.

Students may not rotate through the exact clinical sites or for the exact amount of time as other students; however, all students will rotate through areas where they will receive comparable clinical experiences.

SECTION VI: MINOR TRACK CLINICAL GRADING SYSTEM

Each semester the specialty clinical grade is comprised of a work ethic grade and the satisfactory completion of assignments. Each student begins with a grade of A.

Work Ethic and Attendance grading scale

Any time missed during your minor track clinical assignment during the first two semesters must be made up. During the final semester students may take up to 10 hours of personal time. (Subject to change.) The scheduling of make-up time is typically during finals week and is made at the discretion of the Minor Track Instructor. Missed clinical time will be excused, at the discretion of the Minor Track Instructor, if supporting documentation is provided, i.e., doctor's note for extended illness, legal notice, or if sent home by a Clinical Instructor due to illness. This documentation must be presented to the Minor track instructor within 1 week following the absence. No grade penalty will be incurred for excused clinical absences. Missed clinical time will be unexcused if supporting documentation is not provided or is not acceptable; this is at the discretion of the Minor Track Instructor.

A grade penalty will be incurred for unexcused clinical absences. In the 3rd semester this is above the 10 hours of personal time.

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Up to 8 hours = 1 letter grade deduction
8.1 - 12 \text{ hours} = 2 \text{ letter grade deduction}
12.1 - 16 hours = 3 letter grade deduction
> 16 hours = failure of clinical course
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Grade penalties will be issued for tardiness. You are considered tardy if between 1 and 60 minutes late for your clinical assignment. All tardies are rounded up to the nearest ¼ hr. If more than 60 minutes late without an acceptable excuse, the time will count toward unexcused clinical absence (see requirements above). Tardies greater than 60 minutes due to extenuating circumstances may be excused and made up at the discretion of the Minor Track Instructor. Tardies not made up will count toward absences and during Spring semester will be deducted from personal time.

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1 tardy = Time must be made up the same day as long as patient flow permits without a grade penalty.
2-3 tardies = 1 letter grade deduction and time must be made up the same day as long as patient flow
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4-5 tardies = 2 letter grade deduction and time must be made up the same day as long as patient flow permits.

6-7=3 letter grade deduction and time must be made up the same day as long as patient flow permits. > 7 tardies = failure of clinical course

Dress code violation, No call late, Failure to follow the schedule

0 - 1 = no penalty

2-3=1 letter grade deduction

4-5=2 letter grade deduction

6-7=3 letter grade deduction

Greater than 7 = F

Leaving the clinical site without permission or No Call No Show

1 letter grade deduction/occurrence

- **Assignments:** Clinical assignments are explained on the semester syllabus.
 - **Assignment grading scale**
 - o 88 or better = No letter grade deduction
 - \circ 78 87 = 1 letter grade deduction
 - \circ 73 77 = Two letter grade deduction
 - \circ < 73 = Three letter grade deduction

SECTION VII: PROTECTION POLICIES

ACCIDENTS

All accidents that occur while on Clinical Assignment resulting in patient, hospital personnel, or personal injury and/or damage to equipment must be reported immediately to the Clinical Supervisor <u>and</u> Program Director. An accident (INCIDENT) report must be filed at the site if the incident so warrants.

Students should report to Student Health for minor injuries but should report to an Emergency Room if the injury is serious. The student will be responsible for all fees. For after hours care, call Student Health at 404-727-7551 and follow the instructions given.

- 1. For serious injuries call applicable emergency number or go straight to the emergency room.
- 2. For minor injuries call Student Health immediately 404-727-7551 and follow their instructions.
- 3. For exposure to infectious diseases follow the procedure outlined below.
- 4. Some sites may have the student seen by employee health.
- 5. Students will fill out an incident report/STARS report as instructed by supervisor. Students are generally considered visitors, not employees.
- 6. All injuries, accidents, needle sticks etc., must be reported to the Program Director and Clinical Coordinator as soon as possible.

INFECTION CONTROL POLICY

Students will not be permitted to participate in the care of **any** patient infected with Ebola or similar diseases.

Any needle sticks, contact with blood/body fluids, exposure to TB or other infectious diseases must be reported to the supervisor at the clinical site, the Program Director and Student Health (404-727-7551). The following protocol applies:

Infection Control Protocols

Needle sticks and Other Blood/Body Fluid Exposures

- 1. Learn and always observe Standard Precautions (Universal Precautions).
- 2. If you have an exposure to blood or other body fluids (e.g., needle stick, cut), immediately clean the wound with soap and water.
- 3. Exposed oral and nasal mucosa should be decontaminated by vigorously flushing with water. Exposed eyes should be irrigated with clean water or sterile saline. Eyewash facilities can be accessed quickly in the emergency department for each hospital.
- 4. Follow the protocol of the hospital in which the incident occurred to the fullest including all follow-up (through the hospital's Employee Health Service). It is especially important that you report your exposure to the hospital's Employee Health Service as soon as possible so that a timely evaluation can be performed. Additionally, your exposure may guide future preventive efforts (e.g., education, training, selection of devices). If prophylactic medications are indicated, it is recommended they be initiated as soon as possible after the exposure, ideally within two hours.
- 5. If you are uncertain of the procedures for reporting and obtaining care at the facility where your exposure occurred, call the Woodruff Health Sciences (WHSC) Needle stick Hotline for assistance at 404-727-4736.
- 6. Acute serology should be drawn to establish one's baseline antibody titers to hepatitis B virus (if you have not previously been determined to be HBsAb positive [immune to Hepatitis B]) and, if

- indicated, to HIV and/or Hepatitis C Virus [HCV] (if the source patient is HIV-positive or HCV-positive).
- 7. Depending on the results of one's serology and the baseline serology of the patient (from which the incident occurred), you may need follow-up serologies as per the hospital protocol where the injury occurred.
- 8. If the source patient is HIV-infected, the administration of post-exposure prophylaxis (PEP or "prophylactic" antiretroviral medications) to decrease the risk of patient-to-healthcare worker transmission should be strongly considered. Medications may be initiated pending results of HIV serology on the source patient. If used, these medications should be taken as soon as possible after the needle stick injury. Each hospital has a protocol and will counsel you and give advice as needed. PEP regimens are complicated; therefore, be sure that the individual who manages your exposure consults with the Hospital Epidemiologist (see list below).
- 9. Again, call the WHSC Needle stick Hotline 404-727-4736 if you have any questions about management of the needle stick or other occupational exposure.
- 10. The following list of specific areas and/or individuals should be contacted at the facility in which the exposure occurs:

Contacts for Infection Control Protocol

Emory University Hospital - Midtown

- Daytime hours, Monday thru Friday (7 am to 4 pm):
- Employee Health Service 404-686-2352

After hours, and on weekends:

- Healthcare worker calls Exposure Pager (PIC 11917) or calls the WHSC Needle stick Hotline (404-727-4PEM).
- If WHSC Needle stick Hotline called, the on-call OIM nurse practitioner will be paged (PIC 50464). The Occupational Injury Management (OIM) nurse practitioner will facilitate immediate post-exposure care. Healthcare worker should go to OIM during the next business day to have baseline labs drawn.

Other contacts at Midtown:

- Jesse Jacob, MD cell: 404-402-5110
- If you are unable to reach any of the above individuals, call the WHSC Needle stick Hotline 404-727-4736.

Emory University Hospital

- Daytime hours, Monday thru Friday (7 am to 4 pm)
- Employee Health/Occupational Injury Management Office
- 1364 Clifton Road, Room D219
- Occupational Injury Management (Worker's Compensation) 404-686-8587 Employee Health Services 404-686-8589

After hours and on weekends:

Healthcare worker calls **Exposure Pager (PIC 13084)** or calls the WHSC **Needle stick Hotline (404-727-4PEM).** If WHSC Needle stick Hotline called, the on-call OIM nurse practitioner will be paged (PIC 50464). The OIM nurse practitioner will facilitate immediate post-exposure care. Healthcare worker should go to OIM during the next business day to have baseline labs drawn.

Other contacts at EUH:

• Jay Varkey, MD – PICC 12084

• If you are unable to reach any of the above individuals, call the WHSC Needle stick Hotline 404-727-4736.

Children's Healthcare of Atlanta (CHOA) (Egleston or Scottish Rite)

- Any needle stick or bloodborne pathogen exposure is referred to the **24/7 hotline 404-785-7777.** This is staffed by an employee health nurse who will provide guidance to students.
- Employee Health Digital Pager 1-800-682-4549 or Needle stick Hotline (ext. 4444 at Egleston and ext. 824444 at Scottish Rite)
- Other contacts at CHOA: (if students cannot reach employee health nurse via hotline or pager)
- Andi Shane, MD cell: 404-354-7692 or office 404-727-9880
- Infectious Disease Service Team on Call pager: 404-785-7778
- If you are unable to contact any of the above individuals, call the WHSC Needle stick Hotline 404-727-4736.

Financial considerations of accidental needlesticks

The cost of the follow-up and necessary medications may be borne by Emory University Affiliated Hospitals or may need to be submitted through the student's health insurance. Any uncovered costs will be covered through the Office of Medical Education & Student Affairs if the procedures outlined above are followed.

For medical students and students in the health professions, initial evaluation of the exposure should be as explained above. Following this initial evaluation, all incidents and follow-up for exposures occurring at a hospital should be reported by the student within 4 days to the Registrar, Ms. Mary Kaye Garcia 404-712-9921.

Conversions

PPD tuberculin skin tests will be performed every year (at a minimum) or at the time of exposure for medical students. Those with PPD conversions will be referred to an appropriate physician in the University Health Services for follow-up. Expense of drugs, x-rays, and laboratory testing will be covered as long as protocol is followed.

Students Infected with HIV, Hepatitis B, Hepatitis C

Emory University School of Medicine requires any student who is infected with Human Immune Deficiency Virus (HIV), Hepatitis B virus "e" antigen positive, or Hepatitis C virus to notify the Executive Associate Dean for Medical Education and Student Affairs of his/her positive status so that the School may help to define any limitations necessary on clinical rotations and make such accommodations as may be reasonable to permit the student's continued matriculation.

The Executive Associate Dean for Medical Education and Student Affairs, or his/her designee, will make recommendations for students continued education on a case-by-case basis, utilizing the best currently available scientific knowledge and any established recommendations from the U.S. Centers for Disease Control and Prevention and other applicable governmental guidelines regarding what, if any, limitations need to be applied to clinical activity for persons with the given condition. In conducting this evaluation and making such recommendations, the Executive Associate Dean will consult with the student, the student's personal physician, student affairs deans and others, including faculty of the School of Medicine, as determined appropriate to assist in this individualized judgment. Within the parameters of existing law, the student's confidentiality will be maintained during this process.

Reasonable efforts to assist the student in completing the requirements for an M.D. degree will be made by the School of Medicine. In addition, the student will be offered counseling concerning the options for the future selection of a career pathway in the profession of medicine.

More Specific Guidelines on Students Infected with Blood-Borne Pathogens

Students should be allowed to complete the M.D. degree if at all possible with an effort by all to maintain confidentiality to the degree that it is possible.

In such instances, the clinical department chairs need not be notified of the name of an individual student involved or the type of blood-borne pathogen involved. However, the Clerkship Director for the Departments of Surgery, Obstetrics/Gynecology, Emergency Medicine and any other Clerkship Directors (if indicated) will be informed of the name of the individual student so that any special assignments can be made if indicated. If the student is Hepatitis B "e"-antigen positive, the Clerkship Director will be given that data.

Students will be carefully counseled concerning their potential risk to patients and their risk to themselves. They will be instructed to be punctilious in the use of universal precautions and up-to- date hospital infection control techniques. They will be referred to appropriate physician caregivers for optimal follow-up and therapy. The student will also be counseled carefully about future career plans based on current medical and legal data.

Invasive procedures considered as potential risks for health care workers-to-patient transmission by the Centers for Disease Control and Prevention will be strictly avoided by students who are Hepatitis B "e"-antigen positive. Students with other known blood-borne pathogens will be advised on a case-by-case basis. In general, because of their lack of experience, students with HIV or HCV infections will be advised like HBV-infected students. Recommended practices include double gloving and not performing any procedures that have been previously identified as associated with a risk of provider-to-patient HBV transmission.

The student will be allowed to withdraw without penalty from any clinical setting that the student feels might present a risk for infectivity.

HIV-positive students should undergo screening for Tuberculosis every six to twelve months and receive pneumococcal vaccine, annual influenza vaccine, and other appropriate preventive immunizations.

The student's condition will be re-evaluated at least annually by the Executive Associate Dean for Medical Education and Student Affairs to determine if any additional limitations are indicated. The student's viral load, CD4 count and clinical status as well as the regimen of anti-retroviral therapy that is being employed can be useful in assisting in any decision making by the medical school if the student will allow the Executive Associate Dean to discuss the results with his/her healthcare provider.

Students who fail to show a response to Hepatitis B vaccination by serologic means will be counseled to see a physician to determine their Hepatitis B antigen status and to see if they are Hepatitis B "e"-antigen positive. If they are "e"-antigen positive, they will be encouraged to report this finding to the Office of the Executive Associate Dean, Medical Education & Student Affairs and then to be followed as per protocol.

Last modified: 8/2/2017

LABORATORY SAFETY POLICY

Students will be required to participate in laboratory procedures throughout the course of study. To insure the safety of all students, the following laboratory rules must be followed. Failure to comply may result in disciplinary action.

- 1. Laboratory use is restricted to only those students enrolled in the Medical Imaging Program who have completed a laboratory orientation session.
- 2. Laboratory use is restricted to educational assignments only.
- 3. The laboratory will be open during regular program business hours. A faculty member must be present in the program office, lab or classroom while the students are in the laboratory.
- 4. Students will not allow non-medical imaging program individuals in the lab.

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5. General safety rules (use of electrical equipment, hazardous materials precautions, etc.) must be followed when utilizing the laboratory.

- 6. The door entering the laboratory must be closed during a radiographic exposure.
- 7. Warm-up procedures must be completed before any experiment or practice exposures are made.
 - a. Three exposures of 80 kVp, 200 mA, 1 second, large focal spot.
- 8. All persons must go into the control area during a radiographic exposure.
- 9. All students must wear radiation-monitoring devices during all labs requiring an exposure.
- 10. Only phantoms or non-living objects may be used as subjects when actually performing an experiment or practice examination. X-raying live subjects in the lab or for lab experiments will result in expulsion from the program.
- 11. Care must be taken in the handling of phantoms. They are heavy and very expensive Students must report any damage to the program faculty. Failure to do so may result in immediate dismissal.
- 12. Phantoms may only be used in the laboratory, they may not be checked out for use in other areas except during Imaging Equipment class. The students must check out the equipment from the course instructor and return them the same day.
- 13. Care must be taken in the handling of all other equipment and supplies.
- 14. All items must be returned to their designated place in the laboratory after use.
- 15. The laboratory must be kept neat and clean. Students are responsible for maintaining the laboratory when performing experiments or practice procedures.
 - a. Trash shall be discarded in an appropriate trash container.
 - b. Lights shall be turned off or unplugged when leaving the lab.
 - c. After use, the table and upright bucky will be cleaned with antiseptic solution.
- 16. Any non-functioning equipment must be reported to a faculty member as soon as possible.

PREGNANCY POLICY

Disclosure of pregnancy is voluntary. Students are not required to declare pregnancy.

The National Council on Radiation Protection (NCRP) recommends a total dose equivalent limit (excluding medical exposure) of 0.5 rem (5 mSv) for the embryo-fetus. Once a pregnancy becomes known, exposure of the embryo-fetus shall be no greater than 0.05 rem (0.5 mSv) in any month (excluding medical exposure).

For purposes of radiation protection, it is **recommended** by the National Council on Radiation Protection (NCRP) that persons involved in the use of ionizing radiation notify program officials immediately if pregnancy is suspected. It is possible to limit occupational exposure to less than 0.5 rem per entire gestation period and prevent exceeding embryo-fetal dose equivalent limits through personnel monitoring, proper radiation safety instruction, and adherence to all radiation safety policies. In accordance with the NRC recommendations, the Medical Imaging Program at Emory University requests any student who suspects a pregnancy to notify the program faculty immediately.

As soon as a student confirms that she is pregnant, it is **recommended** that she notify the program faculty. Should the student choose to declare her pregnancy, she must do so, in writing, to the Radiation Safety Officer and submit documentation from her physician verifying her pregnancy and the expected delivery date. The Radiation Safety Officer will review the student's past exposure history, determine if radiation restrictions should be applied and counsel the student. A copy of the document "Guide for Instruction Concerning Prenatal Radiation Exposure" will be given to the individual as required by the State of Georgia, NRC, and OSHA. The student will sign documentation that this information has been received.

^{*}These rules apply to all radiographic rooms that are used for any lab assignments.

Following a declaration of pregnancy and counseling by the Radiation Safety Officer, the student must notify the program faculty, in writing, within ten working days of her decision on one of the following options:

- 1. Termination of enrollment in the program.
- 2. Withdrawal from the program for a period of one year after completion of the current semester with **routine assignments** in fluoroscopy, portables, surgery, and special procedures. The Radiation Safety Officer will issue a monthly fetal monitor for the individual to wear in addition to her regular dosimeters.*
- 3. Withdrawal from the program for a period of one year after completion of the current semester with **limited assignments** in fluoroscopy, portables, surgery, and special procedures. The Radiation Safety Officer will issue a monthly fetal monitor for the individual to wear in addition to her regular dosimeters.*
- 4. Withdrawal from the program for a period of one year without completion of the current semester.*
- 5. Deceleration to part-time status with withdrawal from clinical course work.*
- 6. Continuation of full-time status with reassignment of rotations** (as requested by the student) coordinated with the clinical coordinator. The Radiation Safety Officer will issue a monthly fetal monitor for the individual to wear in addition to her regular dosimeters.***
- 7. Continuation of full-time status without reassignment of rotations. All clinical and didactic duties and assignments must be performed as usual. The Radiation Safety Officer will issue a monthly fetal monitor for the individual to wear in addition to her regular dosimeters.

If a student chooses to withdraw from the program for one year, she must notify the program director of her intention to return to the program. Readmission will be based on space availability and the student's previous academic standing. It is understood that, upon her return, all clinical competencies and clinical rotations missed must be completed.

Withdrawal from the program for greater than one year will require the student to reapply in accordance with standard admissions procedures.

The student may revoke the Declaration of Pregnancy at any time if she believes that it is in her best interest to do so, and the lower dose limit for the embryo/fetus would no longer apply.

This policy is printed in the Clinical Handbook, discussed with all applicants prior to acceptance into the program, and reviewed with the entire class upon enrollment in the program. All prospective students are required to sign a form indicating their knowledge and understanding of this policy. This form is kept on file with the students' applications.

- * Options 2-5 automatically extend the program of study by one full year.
- ** The program will make every effort to reassign the student as requested; however, the student must realize that reassignment may not be possible.
- *** Option 6 may extend the program of study.

RADIATION MONITORING

In order to insure proper precautions against radiation accidents, all staff members and students are provided with dosimeters for radiation monitoring. It is recommended that the body badge be worn at the waist level along the midline of the body. The collar badge should be worn near the neck and outside of the fluoroscopy apron during fluoroscopy procedures.

Students must always wear dosimeters while on clinical assignment and when making an exposure in the

lab. Dosimeters are changed around the 8th working day of each month and should be brought to the program office for exchange.

To further insure radiation safety practices, all radiography students will go through an annual radiation safety update.

RADIATION PROTECTION POLICY

The goal of radiation protection is to limit the probability of radiation induced diseases in persons exposed to radiation and in their descendants to a degree that is acceptable in relation to the benefits from the activities that involve such exposure. Each student is required to exercise sound radiation practices at all times to insure safe working conditions for physicians, staff, faculty, other students and patients. Failure to comply with the Radiation Safety Standards may be grounds for disciplinary action or dismissal from the Program.

RADIATION SAFETY STANDARDS

1. Dosimetry

Students in the Medical Imaging Program shall be issued dosimetry in accordance with Emory's "Occupational Exposure and Personnel Monitoring Program." (http://www.ehso.emory.edu/content-guidelines/OccupationalExposure PersonnelMonitoring.pdf) Accordingly, students will be assigned collar and body dosimeters for administrative purposes, unless screening review shows an ALARA level has been received. The body dosimeter shall be worn on the inside of the lead apron and the collar dosimeter shall be worn on the outside of the lead apron near the head.

Dosimeters are obtained from the Program faculty at the beginning of each month. Dosimeters must be returned to the Radiation Safety Officer by the tenth day of each month and it is the student's responsibility to exchange the dosimeters in the Program office by the 8th of the month. Failure to turn in both dosimeters by the required date may result in disciplinary action and the assessment of a late fee.

Dosimeters will be processed on a scheduled monthly basis. The handling and processing of dosimeters is the responsibility of the Radiation Safety Officer. In the event that an overexposure is suspected, it is the responsibility of the student to notify Program faculty and the Radiation Safety Officer.

Permanent records of dosimeter readings will be maintained by the Radiation Safety Officer. The Program will keep exposure records for each student during their tenure in the program. All students will be required to initial dosimeter reports on a monthly basis. Students may request access to their records at any time. Should any student receive more than 50 millirem in any month, the student will be immediately counseled by a Program faculty member regarding radiation protection practices. An annual report of exposure will also be provided to each student by the Radiation Safety Officer. Lost or damaged dosimeters must be reported immediately to the Program faculty. A replacement dosimeter will be obtained from the Radiation Safety Officer as soon as possible. Students who repeatedly lose or damage their dosimeters will be assessed a fee for each dosimeter damaged or lost.

2. Use of Radiation-Producing Equipment

Students shall follow the guidance in the Emory Healthcare "Radiation Safety Policy for Use of X-rays, Computed Radiography (CR), Digital Radiography (DR) and Fluoroscopy on Patients and Human Subjects." Accordingly, protective (lead) aprons shall be worn by students within the room during mobile radiography, radiography, and fluoroscopic procedures, both within the laboratory and within the clinical environment.

- The operator must keep exposures as low as reasonably achievable and must use minimum exposure
 factors necessary for the exam being performed. Fluoroscopic work shall be performed in the
 minimum time possible using the lowest dose rate and the smallest aperture consistent with clinical
 requirements.
- The operator must never expose himself to the direct beam, and must not stand within one meter of the tube or irradiation target while the unit is in operation unless adequately shielded. The operator must make full use of protective barriers, lead aprons, gloves and lead glasses whenever practical.
- The student must not hold image receptors during an exposure.
- The student should not hold patients when an immobilization method is appropriate.
- The hand of the operator should never be placed in the useful beam unless the beam is attenuated by the patient and a protective leaded glove is worn.
- During the operation of mobile and dental units, the operator should stand as far as possible from the tube and patient during exposure, and should wear a protective apron, or step behind an adequate shield.
- Rotation of operators or the use of portable shields is recommended for heavy workloads.
- Shutter mechanisms and interlocking devices should not be tampered with and shall be inspected at frequent intervals to insure proper operation.
- The operator should insist that all nonessential personnel leave the exposure area before operating the unit and that all essential personnel be adequately shielded.
- The operator must observe any restrictions in the use of the x ray machine recommended by the Radiation Safety staff.
- The operator must notify their supervisor and the Radiation Safety Officer immediately of any accidental exposure to radiation to staff.
- The useful x-ray beam shall be limited to what is necessary for the examination being performed and shall in no instance exceed the dimensions of the image receptor. Evidence of proper collimation and/or shielding should appear on all radiographs.
- The cumulative radiation timer is to be reset at the beginning of each fluoroscopic procedure. Thereafter, it will be reset only after it has completely run out of time and the audible signal has sounded.
- Students shall not take exposures on another student in the lab or clinical site.
- Students must perform all procedures under direct supervision until competency has been achieved.
- Students must perform all repeat images under the direct supervision of a registered radiographer.
- A minimum of indirect supervision is required on all procedures for which the student has proven competency.

3. Pregnancy

A. Patients: Emory Healthcare Imaging Services Policy: All females of child-bearing age will be questioned regards pregnancy prior to appropriate radiologic exams or procedures. In Interventional Radiology these data will be charted in the Plan of Care document. All other areas will document these data in the RIS and / or the pregnancy questionnaire. Students will notify the supervising technologist and physician of pertinent information and will follow the protocol of the clinical site in documenting the information.

B. Students: Students will operate in accordance with the Medical Imaging Program Pregnancy Policy.

REPEAT POLICY

Any repeated projection must be performed under the direct supervision of a registered technologist. To minimize radiation exposure to the patient, the technologist must observe the student to insure that the exam or projection being repeated is performed correctly.

Students must document in e*Value under Case Log any projection that they are responsible for that requires a repeat. The technologist must verify that they watched and assisted the student with the repeated image. Repeat numbers will be checked periodically by the faculty.

Repeat documentation shall include the date, the patient's identification number, the projection(s) repeated, the reason for the repeat, and the technologist's verification. A minimum number will be required each semester and will be outlined on the clinical syllabus. Failure to adequately keep track of repeats will affect the clinical notebook/organization grade. Students make mistakes.

Failure to comply with the repeat policy is a violation of supervision requirements. The first offense will result in a written reprimand; additional incidents will result in suspension and dismissal from the program of study.

CLINICAL ORIENTATION

All students will orient themselves to the department the first day of their clinical rotation. Students will do this by completing the Clinical Orientation checklist on e*Value. Students must familiarize themselves with the clinical setting safety policies and procedures including location of all safety equipment, evacuation routes, and the emergency phone numbers.

TRANSPORTATION POLICY

Transporting patients is an important task expected of all allied health professionals including radiographers. It requires acquired knowledge and skills. As such, it is a task in which students can and should be expected to participate in. Students may be expected to transport patients by all the various means such as wheelchair and stretcher. However, patient transportation should not dominate students' daily clinical activities. Students are expected to employ proper body mechanics and standard precautions. Students must be familiar with the emergency procedures and phone numbers of the facility in the event an emergency situation arises during transport.

Until a student demonstrates the proper techniques and skills required to safely transport patients by the various modes of transportation (wheelchair, stretcher, etc.) and general knowledge of the facility, all patient transportation shall be carried out under the direct supervision of qualified registered radiographer (R.T.ARRT), registered nurse (RN), or other qualified healthcare professional. In addition students **MUST** be directly supervised and assisted in transporting all ICU patients and patients on a respirator.

Once a student has demonstrated the skills and knowledge necessary, they may transport patients without direct supervision provided a technologist, nurse, or other qualified healthcare professional has reviewed the patient's status and mode of transportation with the student and determined such transport is within the student's abilities. Under no circumstances is a student to transport an ICU patient or an intubated patient without supervision and assistance. Students may transport patients on oxygen and with infusion pumps. However, should an infusion pump alarm during transport the student should be able to contact a nurse or other responsible individual for immediate assistance.

VENIPUNCTURE AND CONTRAST ADMINISTRATION

The ASRT considers contrast administration and venipuncture within the radiologic technologist's scope of practice "with appropriate clinical and didactic education where state statutes and/or institutional policy permit." During the course of their minor clinical track rotations, CT and MRI students will be expected to develop these skills under the **direct supervision** of an RT, RN or MA for venipuncture and an RT for contrast administration, in accordance with institution policies. The student will, under **direct supervision**:

1. Independently complete routine peripheral IV insertion.

- 2. Demonstrate the ability to select the appropriate contrast medium per clinical site protocol.
- 3. Demonstrate the ability to draw up the dosage necessary per clinical site protocol.
- 4. Properly prepare and operate the power injector for intravenous contrast administration.

Students are required to complete the following:

- A. Venipuncture Packet
- B. Power Injector Check List

SAFETY POLICIES – MISCELLANEOUS

Students are required to adhere to all safety policies of the clinical education settings and the program facility. Safety training is discussed and evaluated in didactic classes and during orientation.

In addition, students will be required to know emergency codes, phone numbers, crash cart locations, fire extinguisher locations, fire alarm locations, and evacuation routes. Students will carry code cards on their person in clinical at all times. These will be initially provided by the program. Students must be prepared for emergencies.

Students will also hold current certification in Healthcare Provider CPR during the duration of the program. Students must provide a copy of their card before they will be allowed to begin clinical. All students will be responsible for re-certifying before their expiration date. Students whose certification expires may not attend clinical.

Students will be evaluated on safety policies throughout the program of study.

Risk Reduction Tips:

Stay alert, trust your instincts, and be aware of your surroundings.

If something or someone makes you uneasy, move toward a place where there are other people.

Walk in a group, or at least with one other person, whenever possible.

Use well-lit and well-traveled areas.

Use the safety escort services.

Do not leave valuables (cell phones, laptops, etc.) unattended or exposed to public view.

Program emergency numbers in your cell phone.

Report suspicious behavior to the police immediately.

Call the appropriate number below if you ever feel that your safety or that of others is compromised, to report information about a crime under investigation, or to access resources available for survivors of sexual assault.

	Emergency and Safety Escort Telephone Numbers	
	Emory University SafeRide Program	404-727-7555
	Oxford College of Emory University	770-784-8377
	Emory University Hospital Midtown	404-686-2597
Safety Escort Services	Emory University Orthopedics and Spine Hospital	404-831-4207
•	Emory John's Creek Hospital	678-474-8132
	Emory St. Joseph's Hospital	678-843-7568
	Emory Grady Area Campus	404-557-8106
	The Carter Center	404-420-5106
	Emory Police Department	404-727-6111
	Emory Police Department at Midtown	404-686-4357
Emergency Contacts	Emory Police Department at Oxford	770-784-8377
	All Other Police Agencies	9-1-1
	To Report Information Related to a Crime Under Investigation	,
Emory Police Department	All Locations	404-727-6111
	Atlanta Police Department	404-577-8477
	DeKalb County Police Department	770-724-7850
	Gwinnett County Police	770-513-5390
Other Agencies	Johns Creek Police Department	678-474-1600
	Newton County Sheriff's Department	678-625-1400
	Oxford (City) Police Department	770-788-1390
	Sandy Springs Police Department	678-551-6900
	Resources for Survivors of Sexual Assault	
	Counseling and Psychological Services (CAPS)–Atlanta Campus	404-727-7450
	Title IX Coordinator for Students	404-727-7195
	Respect Program, Office of Health Promotion	404-727-1514
	Student Health Services – Atlanta Campus	404-727-7551
Emany	Oxford College Campus Life	770-784-8391
Emory	Student Health and Counseling Services-Oxford Campus	770-784-8394
	Institutional Equity and Inclusion	404-727-2611
	Faculty Staff Assistance Program	404-727-4328
	Help Line (confidential, staffed by students)	404-727-HELP
	http://sexualmisconductresources.emory.edu/	
DeKalb County	Day League (formerly DeKalb Rape Crisis Center)	404-377-1428

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SECTION VIII: e*VALUE

Students are required to keep track of some of their clinical records on e*Value. www.e-value.net

- Hour Tracking
- Student Clinical Evaluations
- Evaluations of the Clinical Sites
- Checklists
- Repeats
- Others may be added

Note that not all of the above requirements are applicable to minor track rotations.

The faculty members will provide training prior to the first rotations. Students also have access to training screen shots on Canvas.

TIME RECORDS

Time Tracking –e*Value: Students will keep track of their clinical time by signing in and out using "Time Tracking" when in clinical. When using your smart device always go to your browser to check the calendar under Time Tracking Clock in/out to be sure you are clocked in and out. Do this every time!

Time Tracking Clock in/out: See clinical handbook/syllabus for specific instructions

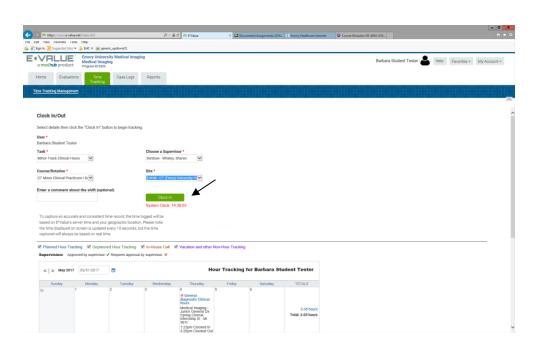
- You may use your iPods/Smart phone to access e*Value at sites with WIFI or you may use the site computers where applicable.
- You must be in the department when you do this to avoid falsification of records violations. e*Value will record IP addresses.
- Time Tracking Clock
 - Information is to be inputted **daily** at the **beginning** and **end** of your shift.
 - Always select the same supervisor that checked you in that morning as the supervisor at clock out
 - If a different person signed you out, put that in the comment section.
 - If you do not use clock in/clock out the day may not count
- Students must check on validation weekly, anything outstanding after 2 weeks may not count.
- In the event that a CI or faculty member is not available at the site or you cannot get a connection, students should
 - Still clock in on **e*Value** (if no CI is available)
 - Call the minor track instructor from the clinical site phone; students may leave a message.
 - Put the minor track instructors name down as the supervisor. The voice mail system will document the time and the location of the call.
 - The faculty member will put the time in for you (understand it may not be that day; but follow up with them if it's not in within **1 week.**) On your voice mail indicate what CI is checking you in and which is checking you out, if there is no CI there tell us that also. Please make the phone call brief and <u>intelligible</u>; example:
 - This is Jane Doe
 - Clocking in at Piedmont IR
 - *Clinical instructor for clock in is Gary Wilson or no CI is here at the moment.*
 - Thank you and have a nice day.
 - Repeat at the end of the day.
 - DO NOT CALL FROM YOUR CELL PHONE as proper documentation will not exist.

- If you called a minor track instructor in the morning you MUST call them to sign out in the afternoon.
- If you called a minor track instructor in the P.M. put that in the comment section Do not change the morning supervisor setting.
- Students who arrive late or leave clinical early must sign in or out at those times. Falsification of records is a serious offense and can result in dismissal from the program.
- Students **should not leave** any clinical site early without letting the minor track instructor know in advance. You must inform the minor track instructor if you are leaving early. Leaving without permission equals ½ demerit/occurrence.

Students MUST check e*Value weekly to insure their records are being validated by the Clinical Instructors. If you are having difficulty contact the minor track instructor assigned to your site.

Time Tracking





Clinical Orientation Checklists

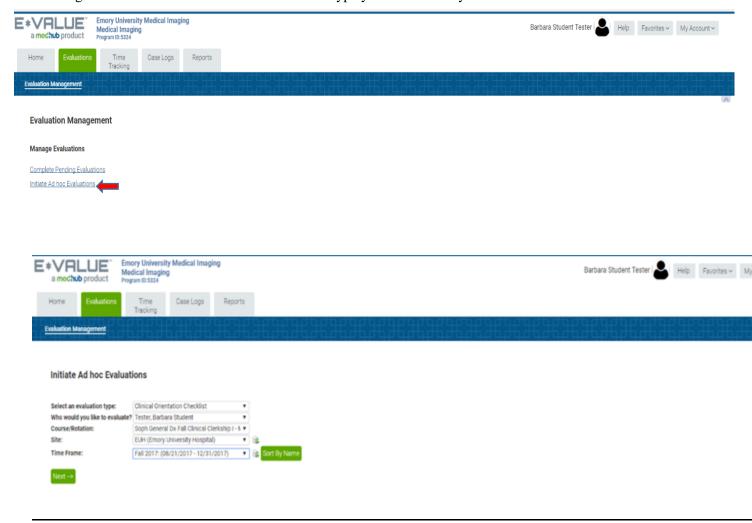
To Initiate Orientation Checklists

- Go to <u>www.e-value.net</u>
- Click on Evaluations
- Click on Initiate Ad hoc Evaluations

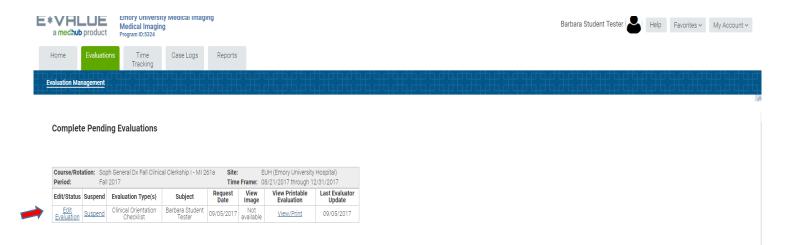
Select the Clinical Orientation Checklist

- The "Who would you like to evaluate?" section will be defaulted to your name so you don't have to select anything there.
- Select course/rotation
- Select Site
- Select time frame

Clicking next will initiate the checklist/ evaluation type you selected for you to fill out.



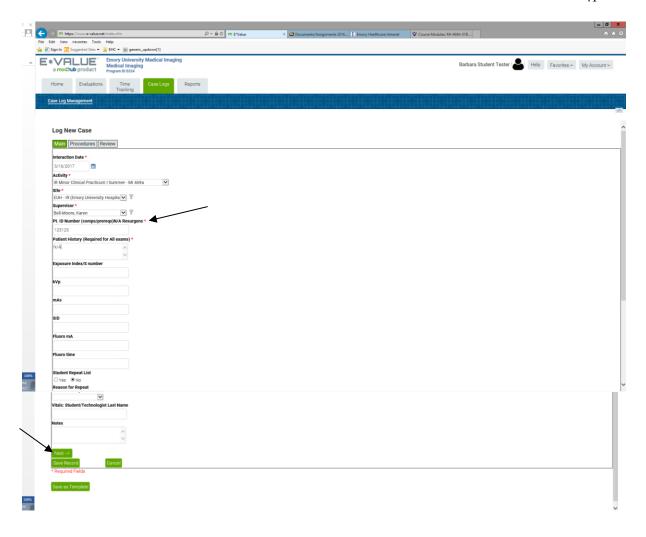
- You may complete the form and submit at that time or save for later. You will find the pending evaluations under Evaluations.
- Click edit Evaluation to re-open it to complete evaluation and to submit it.

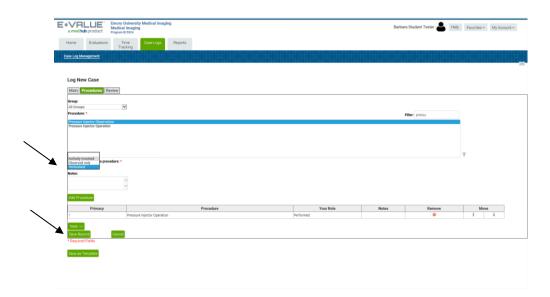


Assignments

Students must complete various assignments while in their minor track clinical rotations (three semesters). These may include such things as sterile procedures, pressure injector operation, peripheral pulse checks, use of ultrasound equipment, evaluation of pertinent patient lab values, care of tubes, catheters, and drains, repeats, etc.

- 1. Go to Case Log Log New Case (Exhibit A)
 - a. Fill in all areas with asterisks (if the clinical site doesn't show up, click on the icon next to the drop down)
 - b. Ensure the correct Activity, Site, and Supervisor are selected
 - c. Hit Next
- 2. Select All Groups (Exhibit B)
 - a. Select the appropriate procedure under Procedure (you can filter for it, type a word in filter box)
 - b. Select Role Performed (Observed for Pressure Injector Observations)
 - c. Hit Add Procedure
 - d. Save Record
 - e. You may need to put N/A in boxes with an asterisk if they do not apply to your procedure.
- 3. Records logged incorrectly will not count.





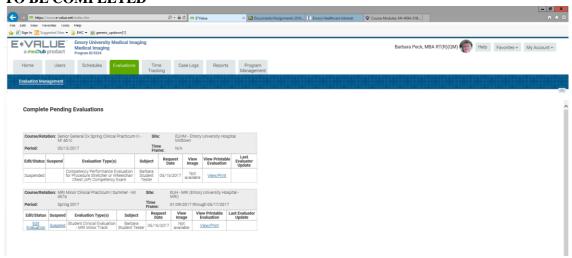
Evaluations

Clinical Instructors (CI) will complete an evaluation on each minor track student.

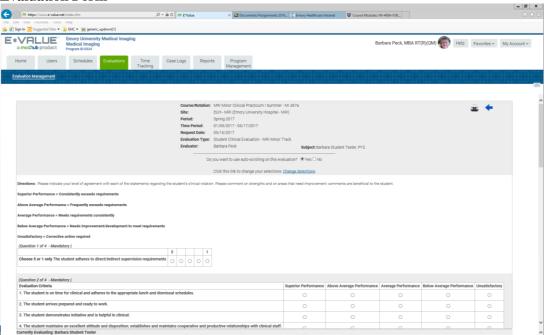
Approximately one week prior to the completion of the student's rotation in the minor track, the Minor Track Instructor will assign a student evaluation to a clinical instructor working with that student.

- a. The CI will go into e*Value with their password.
- b. Evaluations Complete Pending Evaluations (Exhibit C)
- c. Choose Edit Evaluation
- d. They will fill out the form and hit Submit. (Exhibit D)
 - i. Students must view the evaluation by going to Evaluations Reports (Exhibits E G)

TO BE COMPLETED

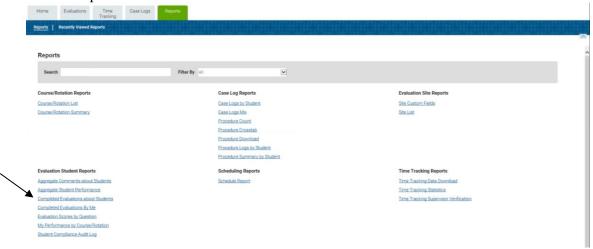


Evaluation Form

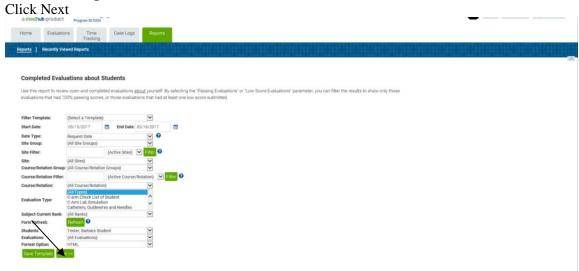


Evaluation Reports

Click Completed Evaluations about Students



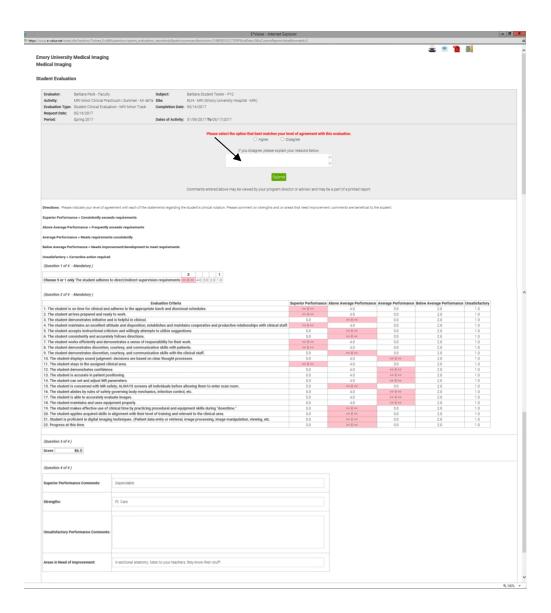
Evaluation Reports continued



Evaluation Reports continued

- Click on View Evaluation; the completed evaluation form will display.
- Students must Agree/Disagree at the top and comment as appropriate.





SECTION IX: OTHER

Women's Health students must obtain a signed letter from the Program Coordinator verifying their hours and education. Students should keep several copies of this letter as it is currently required by all facilities where the graduate will be performing Mammography.

		successfully completed Emory University's Women's Health Min	or
Track i	n Mammography and I	one Density on During her rotation in the Wome	en's
Health	Track from	,received the following	owing
training	g and experience specif	c to mammography:	
1.	Approximately	hours of clinical mammography rotations.	
2.		of training in mammography, including the instruction in	
	positioning, image cri	ique, quality control, radiation safety and review of the mammograpl	hy
	unit.		
3.	At least	hours of training in full field digital mammography.	
4.	At least	_ hours of training in tomosynthesis.	