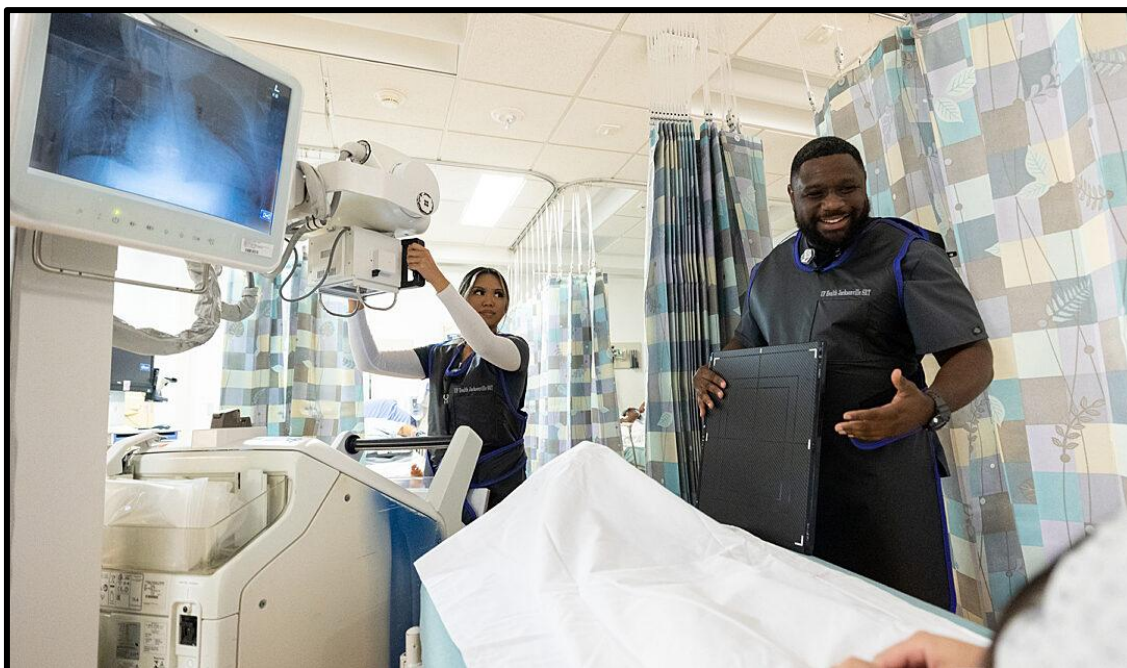




Hostos Community
College

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New York

Radiologic Technology Program 2026



Clinical Handbook

Revised: January 2026

Dear Student Radiographer,

This clinical manual was developed to assist you as you progress through the Radiologic Technology Program at Hostos Community College. It contains the information you will need regarding the clinical portion of the program. ***It is your responsibility to carefully review this information and abide by all the rules and regulations set forth in this manual.***

The regulations in this handbook may be changed by way of department notice. Should you have any questions, contact the Clinical Coordinator for clarification. We wish you success as you begin your clinical education in radiologic technology.

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CLINICAL EDUCATION MANUAL

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CLINICAL EDUCATION MANUAL

1. INTRODUCTION

Students in the Radiologic Technology Program follow the ARRT curriculum and JRCERT mandated clinical experience that mandates that all students participate in a planned system of clinical education combining activities in major medical centers/imaging centers and an on-site energized laboratory.

Students are assigned to two (2) clinical affiliates during their clinical education.

- **First year** students begin their clinical education during the second semester (spring) and attend clinical **two days a week**. During the summer semester, students will continue at the same hospital **five days** a week.
- Each student will be assigned to a second hospital as they begin their **senior year**. Clinicals will be three days a week during the fall and spring semesters and two to five days a week during the summer semester.
- All students must complete all required pre-clinical screenings prior to participating in clinical rotations. These requirements include a physical examination, clearance to perform the physical demands of the healthcare environment, updated immunization records, drug screening, and a criminal background check. Students may be denied access to their clinical rotation by the clinical education centers if any discrepancies or violations are identified. The Hostos Radiologic Technology Program has no authority over these decisions and cannot place students at an alternative clinical site.

Students are closely monitored at the clinical affiliates by the college's designated clinical supervisor for each hospital. The clinical supervisor, who is a member of the hospital staff, is responsible for the general supervision of the students. The clinical supervisor conducts the hospital orientation, monitors attendance, determines room assignments and works closely with the clinical coordinator and clinical instructor. The clinical instructor, who is a college faculty member, is assigned to visit the hospital each week. The clinical coordinator also makes regular visits to each clinical education center to monitor all student clinical objectives, student concerns, and radiology department dynamics involving student contributions with patient centered care.

2. PHILOSOPHY OF CLINICAL EDUCATION

The Radiologic Technology Program faculty believes that every student, if provided with an optimum educational experience and opportunities, will be able to perform all routine radiographic procedures. Therefore, the program provides demonstration, supervision, and evaluation in the clinical setting to enable the student to effectively:

- A. Apply knowledge of the principles of radiation protection for the patient, self and others.
- B. Apply knowledge of anatomy, positioning, and radiographic technique, displayed on a digital medium to accurately evaluate radiographic images.
- C. Determine exposure factors to achieve optimum radiographic quality with minimum radiation exposure to the patient.
- D. Examine radiographic images for the purpose of evaluating techniques, positions, and other pertinent technical and pathological details.
- E. Provide professional patient care.
- F. Establish interpersonal communication with the patient and other members of the health care team.

3. CLINICAL OBJECTIVES

The primary objective of clinical education is to correlate the students' clinical experience with the didactic portion of the program. This correlation is based upon a foundation of fundamental principles and procedures that develop into superior performance and knowledge as proficient technologists. The evaluation system is specifically designed to be congruent with didactic material and include assessment of the affective, cognitive and psychomotor domains. The Radiologic Technology Program provides a clinical environment structured to develop a competent, entry-level professional who:

- A. Integrates cognitive and psychomotor aspects of the curriculum to assure a meaningful clinical practicum and assimilation into the healthcare environment.
- B. Performs basic radiographic examinations under direct and indirect supervision of a licensed radiologic technologist.
- C. Performs examinations to demonstrate clinical competence for each radiographic procedure.
- D. Possesses professional maturity.
- E. Maintains high ethical standards.
- F. Recognizes the role of a student technologist is an important part of an effective health care team.
- G. Recalls knowledge based on the applied principles of radiologic technology.
- H. Initiates radiographic procedures with an integrated knowledge of human structure, function and radiographic positions.
- I. Indicates proper use of image receptors, markers, and digital imaging and processing.

- J. Recalls knowledge of radiographic pathology in applying the appropriate principles of radiographic exposure.
- K. Applies knowledge of radiation physics and instrumentation to the operation of radiographic equipment.
- L. Utilizes knowledge of radiation protection to minimize radiation exposure to patients, personnel and the general public.
- M. Utilizes correct patient care procedures in routine and emergency patient care.
- N. Communicates effectively with the patient in a professional and caring manner.

4. CLINICAL EDUCATION SEQUENCE

4A. Junior Year Course Sequence

Fall Semester

Students are not assigned to the hospital during the first semester. They begin their clinical education at the college, in the laboratory component of the following courses:

- XRA 111 Radiologic Science I & Lab
- XRA 110 Radiography I & Lab

Process Improvement Maps, for the Table Bucky, Wall Bucky and the Tabletop (non-grid) processes, coupled with Performance Improvement exercises. This will be accomplished using visualization and psychomotor activity and will be implemented to enhance the student's ability to acquire and execute the skills necessary for a successful entrée into the clinical experience of the student radiographer.
(Exhibits A, B, C of the Clinical Handbook)

Spring Semester (XRA 129)

Students begin their hospital experience with **two days per week** (from 8:00 a.m. to 4:00 p.m.) clinical rotation while continuing advanced laboratory practice in the following courses:

- XRA 121 Radiologic Science 2 & Lab
- XRA 120 Radiography 2 & Lab

Summer Semester (XRA 139)

During the summer semester, students will continue at the same hospital for **5 days a week from 8:00 a.m. to 4:00 p.m.** During this time, students will **ONLY** receive three (3) personal days during the summer semester. All days used by the students must be

communicated to the clinical Education center Supervisors as well as the Clinical and Program Coordinator.

4B. Senior Year Course Sequence

Fall and Spring Semesters

Students are assigned to a different hospital for their senior year. The fall and spring clinical courses are **three days a week from 8:00 a.m. to 4:00 p.m.** Students attend classes two days a week at the college.

Summer Semester

Students are assigned to work at one of the program's clinical education centers full-time **Monday through Friday from 8:00 a.m. to 4:00 p.m.** during the summer sessions. The exact dates of the summer session change each semester; however, clinical internships usually begin the first week of June and end in August.

5. CLINICAL ROTATIONS

5A. Junior Year Rotation

Spring:	Clinical I	January - May	2 days a week
Summer:	Clinical II	June - July	5 days a week

5B. Senior Year Rotation

Fall:	Clinical III	September– December	3 days a week
Spring:	Clinical IV	January – May	3 days a week
Summer	Clinical V	June-August	2-5 days a week

6. CLINICAL EDUCATION RULES AND REGULATIONS

Clinical education is provided in the Radiologic Technology curriculum to enable the student to correlate and practice various radiographic skills and to meet the legal requirements for licensure and registry eligibility. Students are expected to fulfill their clinical education under appropriate supervision of a clinical supervisor and clinical instructor. The college faculty also visit the hospitals to observe and evaluate the students' clinical performance. Each clinical education site applies their own policies and procedures that the program and students **MUST** follow.

The following is a list of the rules and regulations concerning the clinical practicum that all students enrolled in the Radiologic Technology Program are required to follow.

6A. General Clinical Practicum Policies

- 1) Students must successfully complete the following prerequisites before they advance to XRA 129 Clinical Radiography I.
 - Clinical Education Center Requirements
 - Physical exam (student's responsibility)
 - I.D. badges (dosimeters)
 - Immunization records (student's responsibility)
 - Pre-Clinical Radiation Protection requirements
 - **Background check (Castle Branch/ARRT Ethics Review *if applicable*)**
 - **Drug background (Castle Branch)**
 - The student is responsible for the cost of the background check and drug testing.
 - The program follows all clinical enrollment requirements for each affiliation. Each site has their own set of criteria, policy and procedures that all staff and students must follow – this includes background and immunization policies.
- 2) Students must complete their clinical education at the affiliation designated by the college. **New York State Law mandates continuous clinical practicum.**
- 3) Clinical practicum is an eight-hour day shift with **one hour for lunch, assigned by the clinical supervisor**. Hospital hours are 8:00 a.m. to 4:00 p.m. **NO EXCEPTIONS**. Students are **not permitted** to start or continue after their scheduled clinical hours. **It is the student's responsibility to schedule outside commitments to conform to this requirement.**
- 4) Students must always work under direct and indirect supervision at the clinical education center as determined by the students' clinical competency.
- 5) At no time will anyone be radiographed at the clinical education center without a specific request, in writing, by a physician or their designee. Students may be subjected to dismissal from the program.
- 6) **Students are subject to all the rules and regulations of the clinical education centers. The clinical affiliate has the right to request the removal of any student who demonstrates any breach of their rules or displays unethical behavior.**
- 7) Attendance records are kept by Trajecsyst and sign-in sheets at the clinical education centers. Students **must use Trajecsyst at the designated computer station** when they arrive and sign out when they leave, no exception. Students will need to also sign-in/out on an attendance sheet. This is for the clinical sites' records. **NO CELL PHONES ARE TO BE USED FOR LOGGING IN OR OUT.**
- 8) Students must be attired in proper, clean uniform always when in the clinical affiliates. Students will maintain a neat, presentable appearance and comply with the hospital's

policies concerning personal hygiene and grooming, which includes but is not limited to:

- Hostos uniform – assigned
 - Proper **white clean shoes** and socks (no clogs or colorful footwear)
 - Excessive or oversized jewelry is not permitted while on duty.
 - Hair and nails upkeep – follow infection control policies
 - Lab Coat
 - Dosimeter
- 9) In accordance with New York State law, all students are required to wear dosimeters specifying "**Student Radiologic Technologist.**"
- 10) Students must maintain, and have on their person and/or readily available, their:
- Pocket Guide to Radiography
 - Ink pen
 - Lead markers R/L
 - Dosimeter
 - Logbook (provided by the program)
- 11) Student will be issued one dosimeter to be worn only in the college laboratory and the assigned clinical education center. **Students are NOT permitted to be at the clinical education center without a dosimeter.** If the dosimeter is lost or misplaced, the student must contact the Radiation Safety Officer (RSO) of the Radiologic Technology Program at Hostos Community College immediately. Students are responsible for any costs in replacing their lost dosimeter. In addition, students are not allowed to accept a replacement dosimeter issued by the clinical education center. If available, a temporary dosimeter will be issued by the Radiologic Technology Program while a new one is ordered from the dosimeter vendor. Please handle dosimeters with care. It records your exposure to ionizing radiation and improper care may result in false positive readings. Time missed because of a lost or missing dosimeter must be made up and points will be deducted from the final grade.
- 12) Students have access to their dosimeter report electronically. **It is the student's responsibility to view their monthly radiation exposure reports** in compliance with New York State Law. If any issues are observed such as a high dose recorded, the student needs to immediately contact the RSO.
- 13) The Program Director reserves the right to change clinical education assignment rotations at any time during the program.
- 14) Students' clinical evaluation forms are completed and documented each semester.
- 15) A physical examination is required before each clinical rotation. Students are **required** to have the Hepatitis B vaccine that may be available at our clinical affiliates, or at the College (plus any other vaccines required by the clinical affiliate).

- 16) Students must adhere to the same health and safety standards as new employees of the hospital education centers. ***The physical examination will include a full drug screening.***
- 17) It is the student's responsibility to complete and submit a written statement and/or an incident report to the clinical coordinator *within 24 hours* if an accident occurs at the clinical education center.
- 18) All examinations performed on pediatric patients must adhere to the program's Pediatric Policy.
- 19) **The use of cellular phones/cameras and other electronic personal devices within patient areas within all clinical facilities are strictly restricted.** Cell phones must be always stored and kept silent while in the clinic and may be used ONLY for personal business on scheduled breaks and during meal periods. This includes sending and receiving personal text messages. Urgent calls and text messaging may only be done in non-work and non-patient care areas of the hospital. Chronic use of cell phones will result in points deducted from their final clinical evaluation under professionalism.
- 20) Reasons for student suspension or dismissal from the program in clinical or college classrooms include, but are ***not limited*** to the following:
 - Falsifying attendance records.
 - Signing in or out for another student.
 - **Provoking or reacting to provocation.**
 - Harassment or bullying in any form (*this includes digital communication*)
 - Fighting at the clinical site or on college premises
 - Leaving the clinical site property during clinic hours without permission from the clinical supervisor, clinical or program coordinator.
 - Negligence which causes injury to a patient or clinical personnel.
 - Performing examinations with inappropriate supervision.
 - As identified by the ARRT code of ethics, any illegal, unethical or immoral act or behavior.
 - Breach of confidentiality unauthorized accessing confidential information from hospital/college archives.
 - Violating hospital policies.
 - Damages to clinical education centers and property
 - **Imaging incorrect patient or body part**
 - Performing any exam without proper requisition.
 - Failure to observe and practice the radiation safety guidelines.
 - Sending images to PACS without the authorization of an assigned licensed technologist.
 - **Excessive lateness/absences**
 - **Reporting to the clinical site under the influence of alcohol, marijuana, illicit drugs or non-prescribed drugs.**
 - **Possession of alcohol marijuana, illicit drugs or non-prescribed drugs.**

- Insubordination to patients, clinical staff, clinical supervisor, clinical instructor or clinical coordinator.
- **Unsatisfactory clinical performance**

Progressive Disciplinary System

The Radiologic Technology Program implements a **progressive disciplinary system** designed to address and correct violations of policies, procedures, rules, or standards. This system involves serious consequences for the stated infractions above, following the outlined protocol:

Counseling and Disciplinary Actions Protocol

1. Faculty Counseling:

- The faculty members will discuss the infraction with the student and complete a counseling form (written warning).
- The form will specify:
 - The specific infraction.
 - The degree of seriousness of the infraction (e.g., counseling, warning, reprimand, or probation).
 - The steps required for the student to correct their behavior.
 - Both the student and the faculty member must sign the counseling form, and a copy will be placed in the student's file. A reminder of further infractions may result in suspension from the program.

2. Record-Keeping:

- The counseling form serves to notify the student that their behavior does not meet the program's standards of progression required for successful course completion. This will be part of the students' departmental records.

3. Cumulative Infractions:

- After the written warning, a student will be considered in violation of program policies, demonstrating disregard for expectations. This may result in dismissal from the program.

Disciplinary Actions

The following disciplinary actions and their consequences will apply:

1. Written Warning

- A formal behavioral agreement is created between the student, the Program Director, and the Clinical Coordinator or course instructor.
- The agreement outlines:
 - Specific behaviors, performances, or actions are deemed unacceptable.
 - Required corrective measures within a designated time frame.
- Failure to meet the corrective requirements will lead to more severe disciplinary actions.
- Copies of the agreement will be provided to the student and filed in their records.
- The student will also be referred to the Dean of Students - **Assistant Dean Johanna Gomez at jgomez@hostos.cuny.edu** – Savoy D-101 for adjudication.

2. Probation/Suspension/Dismissal

- A review of all infractions will be performed by the department's disciplinary committee, and the student will be placed on probation (academic and/or clinical).
- Probation serves as a last resort for students who persist in inappropriate behavior or commit a serious infraction. The probationary status will remain in effect for the duration of the time the student is enrolled in the program.
- A student's probation status may lead to suspension and or dismissal from the Radiologic Technology program, based on any further infractions or unethical/unprofessional behavior.
- The decision made by the Radiologic Technology Department and the Department of Student Affairs are final.
- A student that is suspended or dismissed from the program will not be eligible to reapply for entry into the program.

6B. Clinical Attendance Policies

**** Students MUST login and log out of their clinical site using Trajecsys. This program tracks all entries through a GPS and time stamp. Students are not allowed to turn off the GPS setting when logging into this system****

6B.1. Clinical Lateness

Chronic lateness will result in points being deducted when assigning a final clinical grade.

Habitual lateness will result in a reprimand (written warning) and the student will be placed on clinical probation with the possibility of suspension from their clinical track.

- **Students who report at any time after 8:00 a.m. are considered late – NO EXCEPTIOS.**
- **Three excessive lateness will be count as one clinical absence and subject to the clinical absence policy.** A student will be marked late if they login to Trajecys outside of the required departmental zone. A written warning will be placed in the student’s record.
- **Students MUST inform the clinical coordinator, clinical supervisor and clinical instructor if they arrive late at the clinical education center.** Failure to communicate with the individuals mentioned will count towards an absence. It is the student’s responsibility to ensure all parties are contacted – NO EXCEPTIONS.
- **Each additional lateness will result in an additional 5 points deduction from the final clinical grade. This is strictly enforced.**

6B.2. Clinical Absences

All absences, regardless of reason (documented or undocumented), of more than the allowable absences per semester will result in points being deducted from a student’s final clinical grade. All absences will be recorded in the student’s record.

See below for infractions of exceeding the allowable absences:

Class	Allowable Absences	Point Deductions
Spring - XRA 129 Clinical Radiography I	2 days a semester	5 points for each day over 2 days
Summer - XRA 139 Clinical Radiography II	3 days a semester	5 points for each day over 3 days
Fall - XRA 219 Clinical Radiography III	3 days a semester	5 points for each day over 3 days
Spring - XRA 229 Clinical Radiography IV	3 days a semester	5 points for each day over 3 days
Summer - XRA 239 Clinical Radiography V	1 day a semester	5 points for each day over 1 days

PLEASE NOTE:

Extended absences due to extenuating circumstances will be considered on a case-by-case basis by the Program Director.

6B.3. Required Notification

If a student is going to be absent from clinical practice, or late, it is the student's responsibility to telephone their clinical site, properly identify yourself and note the name of the person spoken with at the clinical site. **It is the student's responsibility to contact (*call, email or text*) the Clinical Supervisor, Clinical Coordinator, Clinical Instructor and/or the Program Director at least one hour before the start of their scheduled clinical day.** Failure to adhere to this policy will result in disciplinary action and/or clinical probation. Any infringements will be documented and placed on student's records.

PLEASE NOTE:

An email **MUST** be sent to the Clinical Coordinator, Program Directors and Clinical Supervisor a minimum of one hour before the start of their attendance.

6B.4 No Call / No Show

Students who fail to call their clinical site or send an email notifying the college or clinical education center of their absence will be placed on clinical probation, and penalized with a deduction in points from their final clinical grade as follows:

1st violation	10 points
2nd violation	15 points
3rd violation	20 points

**ALL ABSENCES REGARDLESS OF REASON NEED TO FOLLOW
ABSENT CALL-IN PROTOCOL**

These violations will be a part of every student's record and carried over to every semester until completion of the program. Extenuating circumstances will be reviewed on a case-by-case basis by the Program Director

6B.5 - Extended Absenteeism

Extended absences which may occur outside of the student's control will be examined on a case-by-case basis by the Program Director and Accessibility Resource Center (ARC) department regarding the extended absence. Students must submit a formal request with documentation to support their leave of absence for the program to consider the reason for the student's absence. A counseling session by all parties will be required to effectively communicate a student's outcome. The ARRT requires all students to complete a continuous clinical education. Any extended absenteeism from clinics of more

than one semester will result in a hold on to a student's clinical progression and a delay in completing the program.

6.C - Clinical Probation and Dismissal Policies

Clinical Probation is the official notification to the student of unacceptable behavior, excessive absence/lateness issues, or unsatisfactory clinical performance. Clinical probation status is conferred at the discretion of the Program Coordinator and the Clinical Coordinator for any unsafe or unprofessional behavior.

The following include but are not limited to the behaviors that may lead to clinical probation:

- Causing harm to a patient.
- Violations of hospital/radiology department policies.
- Unsafe practice in the clinical area
- Unexcused clinical absences beyond the permissible allotment
- Excessive lateness/absences
- Failure to notify faculty, supervisors of lateness or absences at their designated clinical education center.
- Failure to follow direct and indirect supervision guidelines.
- Non-adherence to HCC radiologic technology student uniform policy
- Unprofessional/unethical conduct
- Chronic lateness/absence
- Bullying or harassment in any form that violated CUNY policies.

Clinical Probation Procedure:

- A discussion begins with the Program Coordinator and Clinical Coordinator. A contract describing the terms of the probation will be given to the student and a copy placed in the permanent student file.
- Clinical probation will result in a reduction of the clinical grade or, if the circumstances warrant, the student may be removed from the clinical education center or the possibility of not progressing in their program track.

Dismissal Policy

- If a student on probation demonstrates a **consistent lack of performance** in the clinical requirements of the program and has performed below average, the student will be terminated from the program following CUNY grading policies.
- Any insubordinate, unsafe, unprofessional, or unethical behavior may result in the clinical education center requesting the removal of a student. **Hostos Radiologic Technology Program is under no obligation to place the student in another clinical education center.**

6D. Substance Abuse Policy

The City University of New York ("CUNY") is an institution committed to promoting the physical, intellectual, and social development of all individuals. As such, CUNY seeks to prevent the abuse of drugs and alcohol, which can adversely impact performance and threaten the health and safety of students, employees, their families, and the public (*this includes patients and staff in the clinical site*). CUNY complies with all federal, state, and local laws concerning the unlawful possession, use, and distribution of drugs and alcohol. This policy applies to all CUNY students, employees, and visitors when they are on CUNY property, including CUNY residence halls, **as well as when they are engaged in any CUNY-sponsored activities off campus.**

Students who arrive in their clinical site under the influence of any drugs or alcohol pose a risk to the care of patients and the safety of the clinical staff. If a student is under the influence of such, they will be suspended from the clinical site with the possibility of being dismissed from the program. The Hostos Radiologic Technology Program is under **no obligation** to place the student in another clinical education center if this occurs. The program has no authority over each clinical site's decision on relearning a student to their facility.

To be readmitted into any clinical education center, the student must:

- Meet with a college counselor to determine their course of treatment.
- Complete a prescribed drug/alcohol treatment program.
- Submit documentation confirming completion of treatment.
- Agree to random drug testing for the remainder of the program at the student's own expense.
- These actions will not guarantee entry back into the program's clinical affiliates whose policies differ from CUNY.

Continued abuse and/or resistance to rehabilitation will lead to termination from the program following CUNY policies. For more information, please check your clinical site substance abuse policy and

visit: <https://www.hostos.cuny.edu/Hostos/media/Office-of-Human-Resources/DrugandAlcoholPolicy.pdf>

6E. Communicable Disease Policy

The purpose of this policy is to ensure the health and safety of students, patients and staff. If a student contracts a communicable disease, or has reason to believe that he/she has been exposed to a communicable disease, the following steps should be taken:

1. Report it immediately to the Program Director, who will refer the student to the college health service facility where he will be seen by the college nurse.

2. The Program Director will notify the affiliate clinical supervisor and if exposure was due to a clinically related incident the supervisor will be required to submit a written report of the incident.
3. The student may be referred to the employee health service at the clinical affiliate.
4. When all reports are received by the Program Director, a faculty committee will be formed to assess the situation and determine when the student may continue his/her clinical education.

6F. Radiation Protection/ Monitoring

The radiation dosimeter is a device that records the amount of radiation received by the wearer. Although the radiation exposure of students working in the clinical setting is not likely to exceed 1/10 of the maximum limits set by the New York Bureau of Radiological Health, Department of Health, 50 mSv/year standard. It is the policy of all hospitals to issue radiation dosimeters to individuals working with or near radiation sources on a frequent basis.

- Dosimeters are for personal monitoring and shall only be worn by the person they are assigned.
- Dosimeters should be worn at the clinical site.
- Dosimeters shall not be tampered with and are sensitive to extreme heat and light.
- Monthly dosimeters reports will be posted online and signed by each student.
- Students will not be allowed to remain in clinical without their dosimeter and will be sent home incurring an absence.
- Accidental exposure or damage to the dosimeter should be reported immediately to the Clinical Instructor and Radiation Safety Officer (RSO).

In the unlikely event a student receives an unexplainable high exposure reading from the Radiation Safety Office of the institution they are assigned to will officially inform them.

Radiologic Technology Program Threshold Limit Policy

The following occupational dose limits apply to you if you work with radiation. This policy reflects federal, state, and New York City regulations.

- Dose to the whole body – 0.05 Sv (5 rem)/year
- Dose to lens of eye – 0.15 Sv (15 rem)/year
- Dose to the skin, any extremity or any single organ – 0.5 Sv (50)/year
- Dose to the fetus – 0.005 Sv (0.5 rem) for the gestation period 13

The Program will notify the student if your monitoring report records a dose that exceeds 1/40 of the annual occupational limits over three months. Although this may appear to be a small reading, any student who receives this amount or more

during any given quarter will be counseled. Additional information can be reviewed online at NRC (Nuclear Regulatory Commission) Guide 8.13.2.
www.nrc.gov

The following rules will be strictly enforced in the clinical setting:

- A. **UNDER NO CIRCUMSTANCES WILL ANY STUDENT HOLD A PATIENT FOR EXPOSURE OR EXPOSE ANOTHER STUDENT HOLDING A PATIENT.**
- B. Students should not energize an x-ray tube while any person other than the patient is in the room.
- C. Under no circumstances will any student ever radiograph another student.
- D. **EXCEPTIONS:** When assigned, fluoroscopic procedures, portables, specials and operating room procedures that mandate the presence of staff members. Personnel must be wearing lead aprons and gloves during these procedures. Students must be careful entering rooms during these procedures.
- E. All radiographic examinations must demonstrate evidence of collimation.
- F. If you lose your dosimeter or your dosimeter is left in a radiographic room, please notify the Radiation Safety Officer and Clinical Instructor. **A fee will be paid by the student to replace the lost dosimeter.**
- G. Students must use gonadal or breast shielding on patients when appropriate
DEPENDANT ON CLINICAL SITE POLICIES.

6G. International Student

Any international student may apply for admission to a matriculated program at CUNY regardless of immigration status.

However, the radiology program has five mandatory clinical semesters of hospital internships. **The hospitals require that all medical staff and employees be able to prove their legal presence and their legal eligibility to work in this country.** Legal presence means that a person is either a U.S. citizen or is legally authorized to be/work in the United States. Legal presence can be proved using a U.S. birth certificate, U.S. passport, Certificate of Citizenship or Naturalization, Resident Alien Card or a valid foreign passport with a visa, I-94 or an I-94W with a participating country. The hospitals reserve the right to deny access to students who are unable to prove their legal presence in this country.

Furthermore, the hospital internship is an essential, legal requirement as specified in the Joint Review Committee on Education in Radiologic Technology ***Standards for an Accredited Educational Program in Radiologic Sciences.***

Consequently, *the radiology program accepts students into the clinical phase of the program only if they can prove their legal presence and their legal eligibility to work in the United States.* Students are encouraged to reapply for admission into the program after they have established their legal presence in the United States.

6H. Hospital Strike/ Job Action

No student is permitted to participate in any strike or job action while on clinical duty. Any time there is a strike or job action; the student will not attend clinicals and report to the college. He or she should check with the Program Director, Clinical Coordinator, faculty member and/or a clinical instructor from another site for further direction.

AT NO TIME SHOULD A STUDENT ATTEMPT TO CROSS A PICKET LINE OR ENTER THE HOSPITAL AFFILIATE TO REPORT FOR CLINICAL DUTY IN THE EVENT OF A JOB ACTION/STRIKE. ANY VIOLATION WILL RESULT IN DISCIPLINARY ACTION

6I. College Closings/Emergency Preparedness/Disaster Plan

All students must register for the CUNY ALERT SYSTEM.

<https://www.cuny.edu/about/university-resources/emergency-preparedness/>

Students will be alerted to conditions of severe weather, natural disasters or other emergencies. The program will follow all CUNY and Hostos mandates during such an event such as college closings or switching to online format. **During severe weather or emergencies, students will not attend clinicals. Students are advised to subscribe to the CUNY Alert app to ensure they are updated with any adverse conditions that affect the college environment.** You may obtain further information by calling the College's general number 718-518-4444 for a recorded message or go to the Programs Community Site. Information will also be broadcast on the following radio stations:

WADO	1280 AM	
WBLS	107.5 FM	
WCBS	880 AM	101.1 FM
WFAS	1230 AM	104 FM
WINS	1010 AM	92.3 FM
WLIB	1190 AM	

7. ORGANIZATIONS

Students may wish to contact the following organizations for additional information and materials:

- Accreditation:** Joint Review Committee on Education in Radiologic Technology
20 North Wacker Drive, Suite 900
Chicago, IL 60606-2901
(312) 704-5300
www.jrcert.org
- Curriculum:** American Society of Radiologic Technologists
15000 Central Avenue, N.E.
Albuquerque, NM 87123-3917
(505) 298-4500
www.asrt.org
- Certification:** American Registry of Radiologic Technologists
1255 Northland Drive
St. Paul, MN 55120-1155
(651) 687-0048
www.arrt.org

A copy of the JRCERT standards of practice is available at www.jrcert.org and a reserved copy is kept in the program director's office.

8. FACULTY

Charles I. Drago D.Ed., R.T. (R)(CT)
Professor, Lecturer

Manuel Livingston, M.S. Ed, R.T. (R)(CT)
Assistant Professor, Lecturer, Program Director

Frances Dietz, M.P.H., R.T. (R)(M) (CT)(QA)(CRA)
Adjunct Asst. Professor/Interim Clinical Coordinator

Jarek Stelmark, MBA, R.T.(R)(CV)(CT) (MR)(QM)(BD)(VI)
Professor, Lecturer

Rayola Chelladurai, MA, R.T. (R) (BD)
Assistant Professor, Lecturer & Radiation Safety Officer

Sanjay Arya, MS, R.T.(R)(MR)(MRSO)
Associate Professor, Lecturer

Marcus Wilborn, MSHS, RT (R)(CV) (CT)
Assistant Professor, Lecturer

Iris Cortes, M.A., R.T. (R)(CT)
Adjunct Lecturer, Clinical Instructor

Randy Rampersaud M.S. (R)(CT)(MR)
Adjunct, Clinical Instructor

Eric Gallo BS, R.T. (R)(CT)(MR)
Adjunct, Clinical Instructor

Sesar Alicea, B.S., R.T. (R)
Adjunct, Clinical Instructor

Stephanie Ronca, B.S., R.T. (R)
Adjunct, Clinical Instructor

Beatrice Reilly, B.S., R.T (R)
Adjunct, Clinical Instructor

Yafa Khaimova, B.S., R.T. (R)
Adjunct, Clinical Instructor

Tasmin Sharif, B.S., R.T (R)
Adjunct, Clinical Instructor

Nasima Rahman, B.S., R.T (R)
Adjunct, Clinical Instructor

Elizabeth Vargas/Administrative Assistant

9. CLINICAL AFFILIATIONS

The Radiologic Technology Program at Hostos Community College is affiliated with some of the finest Medical Centers in the New York metropolitan area. The program is presently affiliated with the following institutions:

9A. Montefiore Medical Center, Weiler Division, Hutchinson Campus

Einstein Weiler Division

1825 Eastchester Road 3rd Floor

Bronx, New York 10461

Telephone:

(718) 904-2768 or 2550

Radiology Administrator:

James Simmons, M.S.,R.T. (R)(CT)

Clinical Supervisor:

Brenda Fuentes, R.T.

Hutchison Campus

1250 Waters Pl, Bronx, NY 10461

Clinical Supervisor: Komi Semeglo R.T.

Telephone: 929-263-3271

Travel Directions:

#4 subway to Fordham Road

#5 subway to 180th St.

Transfer to #21 bus

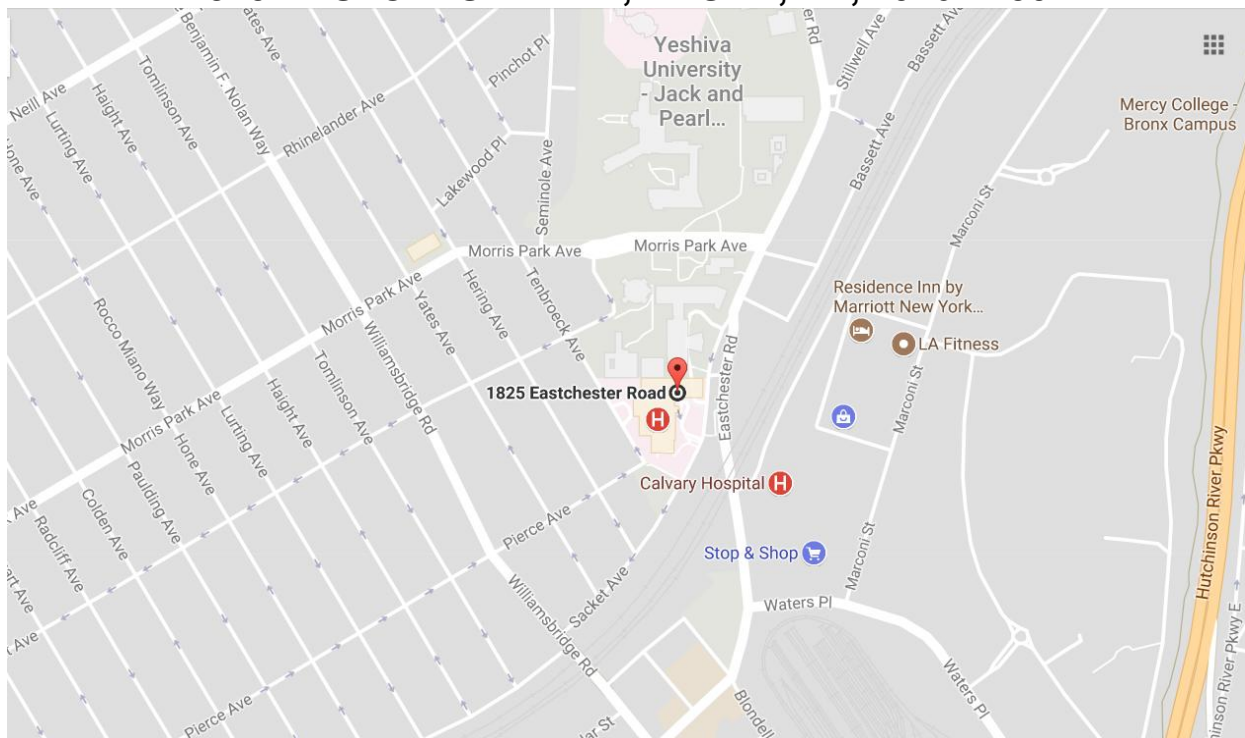
Transfer to #12 bus to Eastchester Road

Transfer to #31 bus to hospital

#6 subway to Westchester Sq.

Transfer to #31 bus to hospital

1825 EASTCHESTER RD, BRONX, NY, 10461-2301



9B. Saint Barnabas Hospital

4422 Third Avenue (183rd Street)
4th floor, main building
Bronx, New York 10457

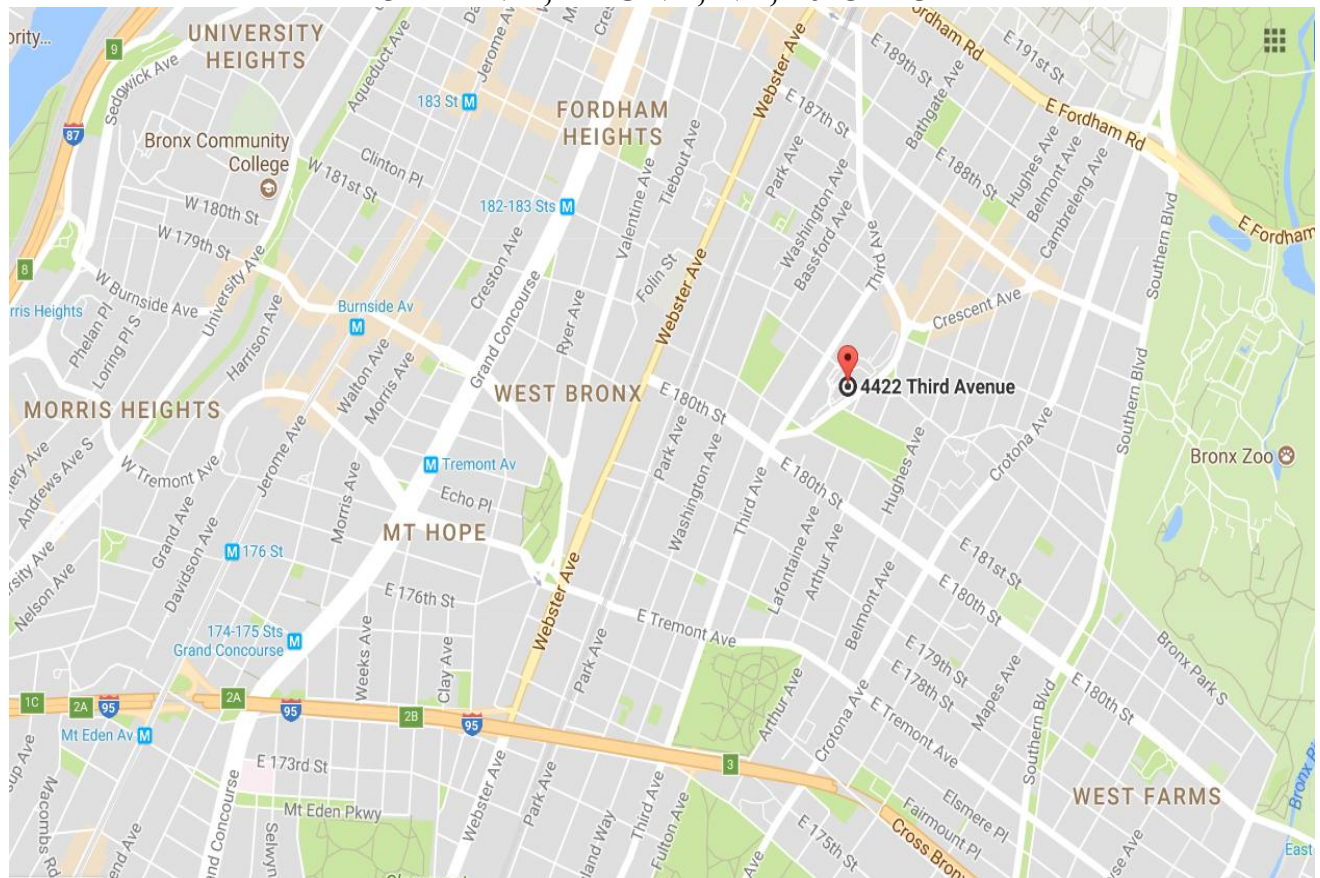
Telephone: (718) 960-9000 x-6162 or x-4203
Clinical Supervisor: Xiomara Nunez, R.T.
Radiology Administrator: Dr. Ernesto Cerdena, R.T.

Travel Directions: #2 or #5 subway to 149th St. and 3rd Ave.
Transfer to #15 or #55 bus

#4 subway to 180th Street
Transfer to #36 bus

#36 bus to 180th Street
Transfer to #15 or 55 bus to 183rd St.

4422 3RD AVE, BRONX, NY, 10457-2527



9C. Bronx Care Health System

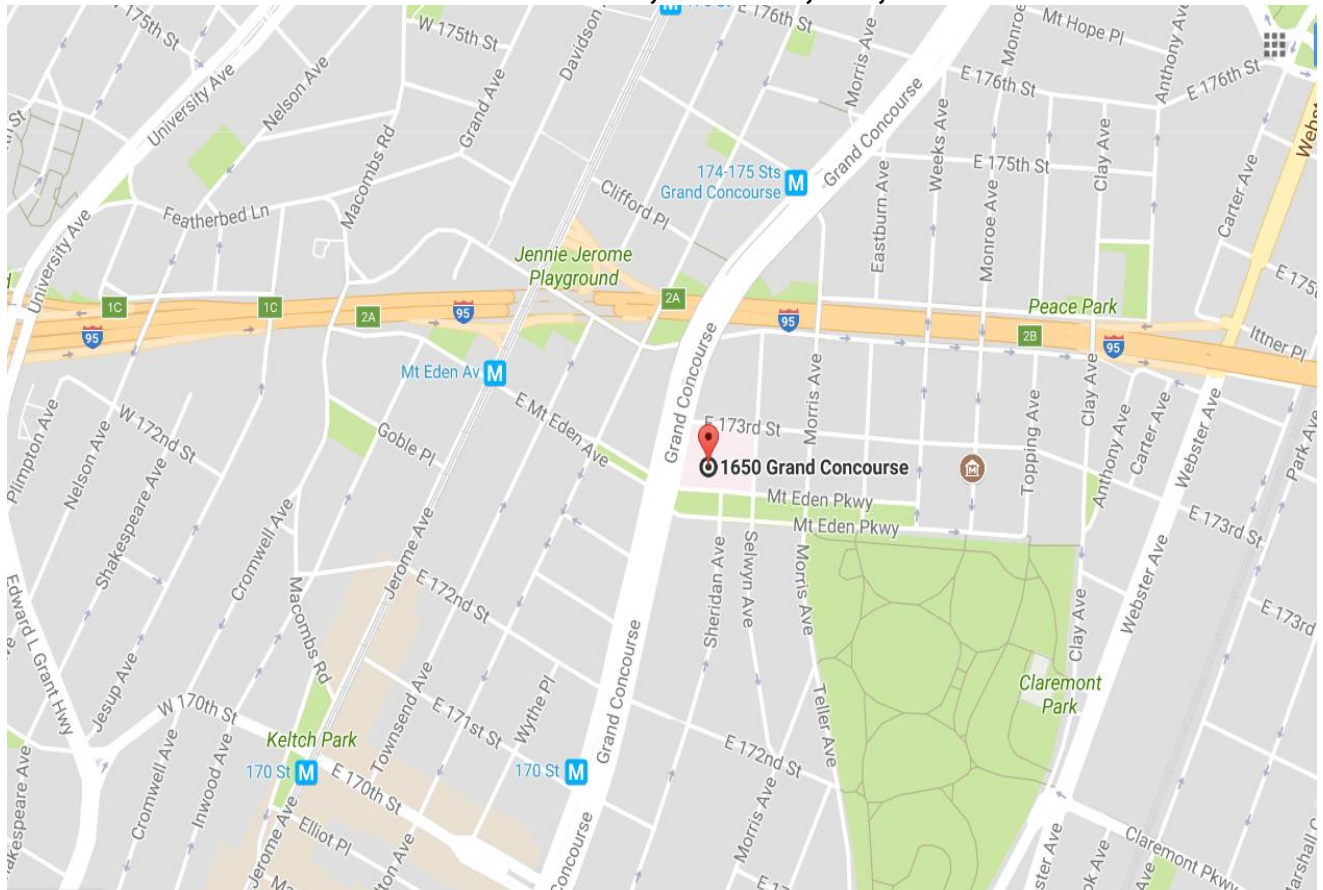
1650 Grand Concourse
Main floor
Bronx, New York 10457

Telephone: (718) 518-2726 or 5574
Clinical Supervisor: Ms. A. Giles, R.T.
Radiology Administrator: Ms. S. Acevedo, R.T.

Travel Directions: #4 subway to Mount Eden Ave.
Walk three blocks east to Grand Concourse

D subway to 174/175 St.
Walk three blocks south

1650 GRAND CONCOURSE, BRONX, NY, 10457-7606



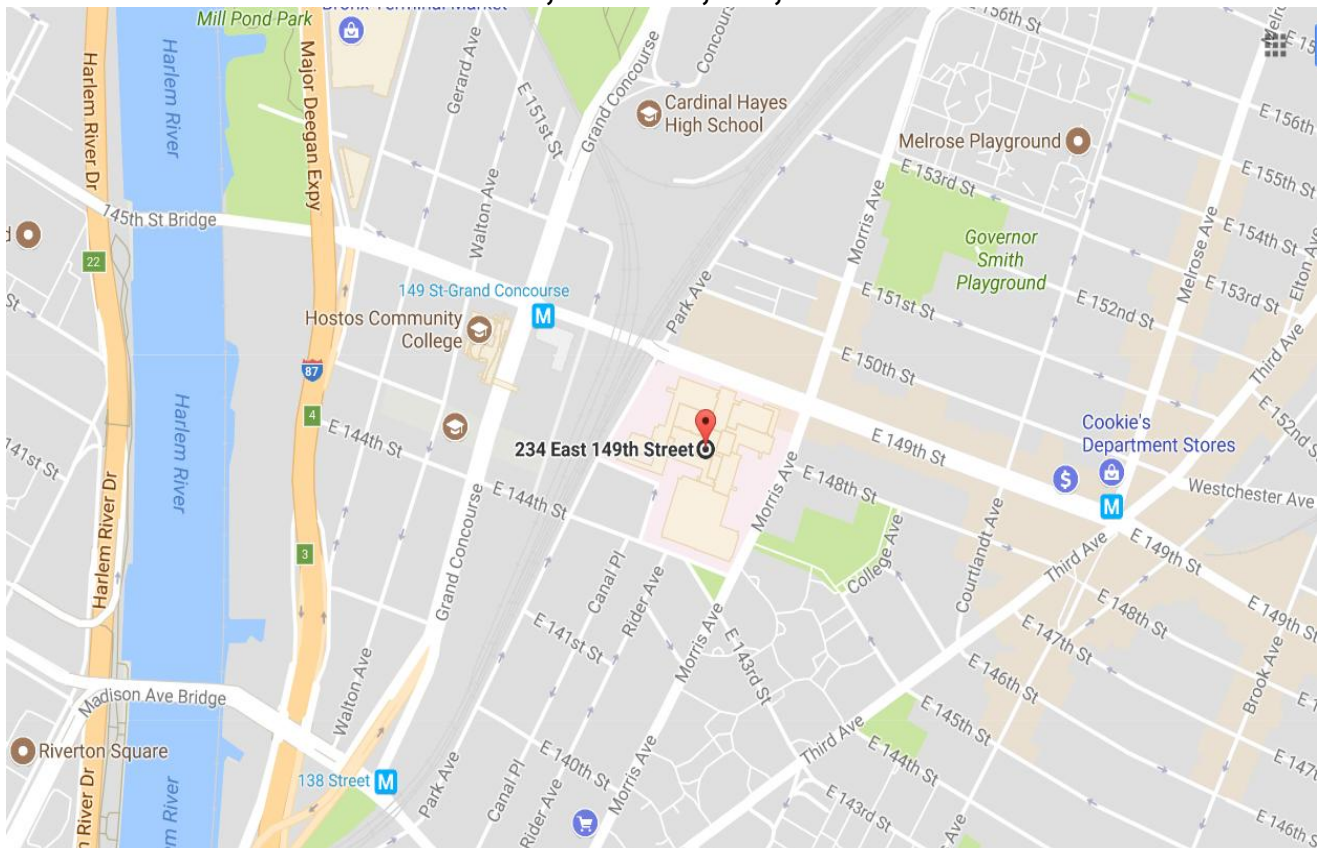
9D. Lincoln Medical and Mental Health Center

234 East 149th Street
2nd floor
Bronx, New York 10451

Telephone: (718) 579-5744
Clinical Supervisor: Maxine Sosa, R.T.
Radiographer Administrator: Cynthia Amadike, R.T.

Travel Directions: #2, 4 or 5 subway to 149th St. & Grand Concourse
walk two blocks east.

234 E 149TH ST, BRONX, NY, 10451-5504



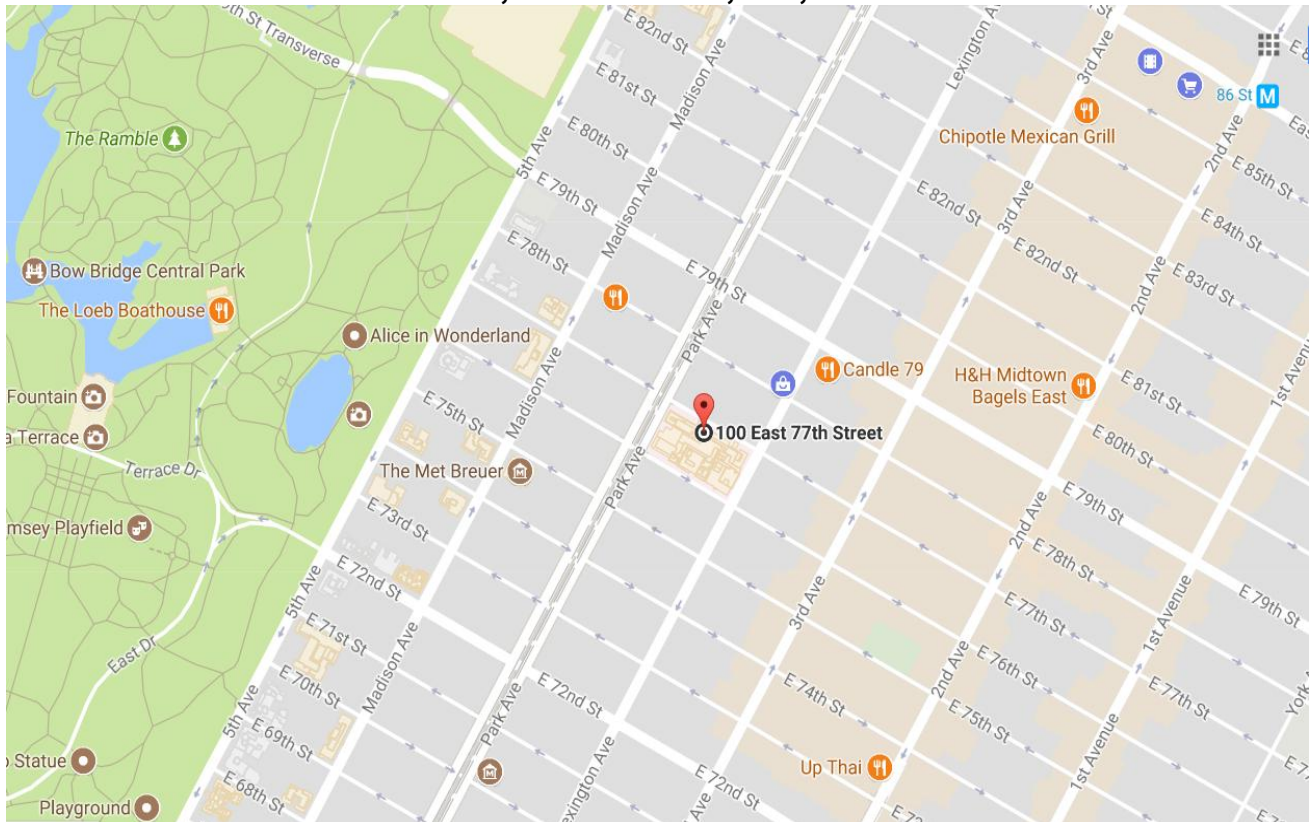
9E. Lenox Hill Hospital - Northwell Health

100 E. 77th Street
3rd Floor
New York, New York 10021

Telephone: (212) 434-2952
Clinical Supervisor: Mr. Bryan Ammirati, B.S., (R)(CT)(MR)
Radiology Administrator: Francisco Grippo, R.T.

Travel directions: #6 subway to 77th Street

100 E 77TH ST, NEW YORK, NY, 10021-1882



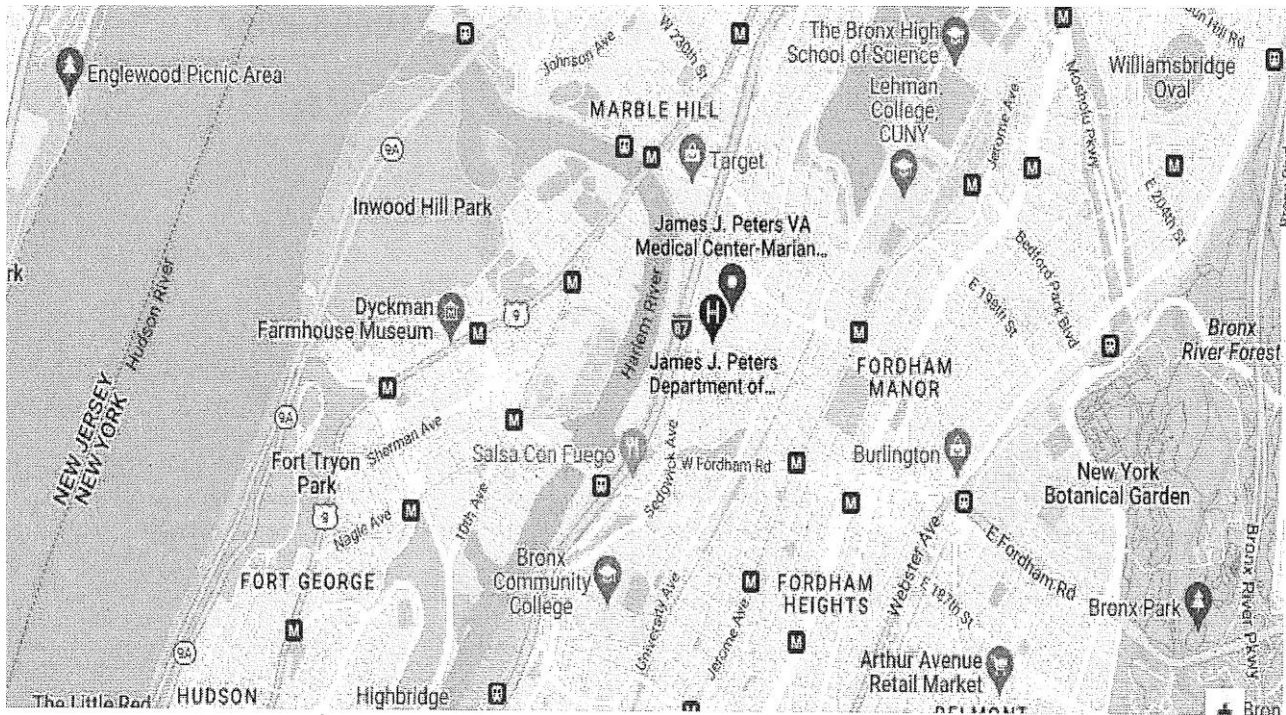
9F. James J. Peters VA Medical Center

130 W Kingsbridge Rd.
Bronx, New York 10468

Telephone: (718) 584-9000 Ext. 65
Clinical Supervisor: Carla Ashman, R.T.
Radiology Administrator: David Kim, R.T.

Travel Directions #BX32, BX9 and BXM3 buses
Hudson train
Subway 1, 4 or B

130 W Kingsbridge Rd, The Bronx, NY 10468



9G. Radnet – Lenox Hill Radiology Imaging Centers

Clinical Administrator/Director of Clinical Operations:

Catarina Buffalino B.S, RDMS, RVT, RDCS

- **East Fordham Road Imaging**

Clinical Supervisor: Yawusa Awudu, RT (R)(ARRT)
350 E Fordham Rd, Bronx, NY 10458
(718) 220-2500

- **Washington Heights Imaging**

Clinical Supervisor: Marcus M Vanderhorst, RT (R)(ARRT)
4120 Broadway, New York, NY 10033
[\(212\) 543-1800](tel:2125431800)

- **East 77th Street Imaging**

Clinical Supervisor: Michelle Mendez, RT (R)(ARRT)
61 E 77th St, New York, NY 10075
[\(212\) 772-3111](tel:2127723111)

- **Columbus Circle Imaging**

Clinical Supervisor: Careena Davi Seenarain, RT (R)(ARRT)
1790 Broadway, New York, NY 10019
[\(212\) 977-4100](tel:2129774100)

10. CLINICAL RADIOGRAPHY COURSES

First Year:

Spring	XRA 129	Clinical Radiography I	2.0 credits	16 hours/week
Summer	XRA 139	Clinical Radiography II	3.0 credits	40 hours/week

Second Year:

Fall	XRA 219	Clinical Radiography III	2.5 credits	24 hours/week
Spring	XRA 229	Clinical Radiography IV	2.5 credits	24 hours/week
Summer	XRA 239	Clinical Radiography V	2.5 credits	16-40 hours/week

11. CLINICAL SUPERVISION

Students are required to complete the five (5) clinical courses listed above. As the student begins the sequence with Clinical Radiography I, the student will observe radiographers performing a wide variety of procedures. Students will be required to complete:

- An equipment manipulation module
- A basic medical technique module within their first 3 clinical weeks.

After 3 weeks of observing departmental radiographic procedures, the student will begin to assist the radiographers with these examinations.

As the student gains more confidence and experience, the student will advance to a mode of direct supervision. The assigned clinical instructor will perform equipment manipulation evaluation, followed by performance of assigned competencies with appointed staff members.

All radiographic exams observed and performed MUST be logged by the student into Trajecsyst for documentation of their observations, indirect and direct cases, and completion of their competencies.

A total of three observed cases MUST be entered by the student into Trajecsyst before any competencies could be performed.

After testing competent, the student will advance to a mode of indirect supervision, where the supervision is provided by a qualified radiographer who is “immediately available” to assist. Immediately available means the physical presence of a licensed radiographer adjacent to the room or location where a radiographic procedure is being performed.

Direct supervision of junior students is always required in the following situations:

1. Critical care patients
2. Patients accompanied by an attendant or nurse
3. Acute care patients, i.e.
 - Multiple lines
 - Oxygen

- Drainage tubing
- 4. Special situations, i.e.
 - Pediatrics
 - Pregnant patients
 - Operating room examinations
 - Mobile and bedside examinations
 - Patients with communicable disease

The following terms are defined to clarify student capabilities for each clinical course:

11A. Restricted Areas

These are radiographic areas and/or examinations that the student has not covered in his or her didactic courses. Students cannot be assigned to these areas until they have completed the appropriate didactic training. This includes MRI, CT, Interventional, and Cardiac Cath.

11B. Observation

- The student may not act as a radiographic assistant.
- A student will document all radiographic exams observed
- They cannot perform the examination or make any radiographic exposures without the supervision of a licensed radiologic technologist.

11C. Direct Supervision (Level 1)

Direct supervision is defined as student supervision by a qualified staff radiographer who:

- reviews the procedure in relation to the student's level of competency
- evaluates the condition of the patient in relation to the student's knowledge
- determines the capability of the student to assist in performing the examination
- is physically present during the conduct of the procedure
- reviews and approves the procedure and/or image, and
- submits all digital examinations into PACS

***** All repeat images must be performed according to the Repeat Image Policy. (Must be done by the technologist). *****

Students must be directly supervised until documented competency is achieved.

11D. Indirect Supervision (Level 2)

Indirect supervision is defined as student supervision by a licensed staff radiographer who:

- ensures the correct patient, correct exam and correct side are radiographed.
- reviews the procedure in relation to the student's level of competency

- evaluates the condition of the patient in relation to the student’s knowledge
- determines the capability of the student to perform the examination with reasonable success
- is immediately available to assist students regardless of the level of student achievement
- reviews and approves the procedure and/or image.
- submits all digital examinations into PACS

“Immediately available” is interpreted as the physical presence of a licensed staff radiographer in the exam room, adjacent to the room or immediate vicinity where a radiographic procedure is being performed.

All repeat images must be performed according to the Repeat Image Policy. (Must be done by the technologist).

Students MUST be indirectly supervised, even after any documented competency is achieved.

Clinical Competency Format

During the second semester students begin their hospital experience. This experience takes the form of five (5) separate clinical courses. Each of these courses has specific course outlines and objectives. Clinical experience at the hospital is accomplished in three progressive modes:

1. OBSERVATION
2. DIRECT SUPERVISION
2. INDIRECT SUPERVISION

Logging of Observed Cases

Students must provide proof of a minimum of three direct /indirect observations of the examination they seek competency within. ***These cases are to be documented in Trajecsys.***

A student will not be allowed to perform any competency until proof of logged cases are placed in Trajecsys.

11E. Repeat Image Policy

The presence of a qualified radiographer during the repeat of an unsatisfactory image ensures the patient’s safety and proper educational practices. A qualified staff

radiographer must be physically present during the conduct of a repeat image and must approve the students' procedure prior to re-exposure.

When the student is working with indirect or indirect supervision, all repeat images must be performed by a licensed staff radiographer.

11F. Pediatric Policy

All radiographic examinations for children under the age of 6 must be done under the direct supervision of a qualified staff radiographer regardless of the student's competency level.

11G. PACS Submission Policy

The verification and submission of all digital examinations into PACS is the legal responsibility of a qualified staff radiographer regardless of the student's level of achievement. **A student is NEVER to verify or finalize an exam case into the clinical RIS or PACS system.**

11H. Release of Patients Policy

Upon completion of their exam(s), all patients will be allowed to leave the department **ONLY** by a licensed staff radiographer irrespective of the supervision level of the student(s). **Students are NOT allowed to have any autonomy in releasing a patient after an exam has been completed.**

12. CLINICAL SUPERVISION REQUIREMENTS BY SEMESTER

The following synopsis should be used to determine the students' capabilities for each clinical course.

Clinical Radiography I – SPRING

The **first three weeks** of this clinical course are primarily *observation only*. **After** this initial period the following apply:

Restricted Areas -

Operating Room, C-Arm,
Special Procedures, CT, MRI,
Bone Density, Mammography

Observation -

category E – Contrast Media Studies
category F – Skull, Mobile Radiography

Direct Supervision -

category A – Upper Extremities
category B – Lower Extremities
category C – Spine/Pelvis

category D – Routine Abdomen, Routine Chest
or AP Chest non-bucky
(wheelchair/stretchers)

category G – Pediatric (Age 6 or younger)
Geriatric (Age 65, or cognitively
impaired)

Indirect Supervision -

After Passing Evaluation Competencies:

category D – Routine Abdomen, Routine Chest
or AP Chest non-bucky
(wheelchair/stretchers)

Clinical Radiography II – SUMMER

Restricted Areas -

O.R., C-Arm, Special Procedures, CT., MRI,
Bone Density, Mammography

Observation -

category E – Contrast Media Studies
category F – Skull, Mobile Radiography

Direct Supervision -

category A – Upper Extremities
category B – Lower Extremities
category C – Spine/Pelvis
category D – Chest/ Abdomen
category E – Contrast Media Studies
category F – Mobile Radiography
category G – Pediatric (Age 6 or younger)
Geriatric (Age 65, or cognitively
impaired)

Indirect Supervision -

After Testing Competent:

category A – Upper Extremities
category B – Lower Extremities
category C – Spine/Pelvis
category D – Routine Abdomen, Routine Chest
or AP Chest non-bucky
(wheelchair/stretchers)

Clinical Radiography III – FALL

<i>Restricted Areas -</i>	Special Procedures, CT, MRI, Bone Density, Mammography
<i>Observation -</i>	O.R., C-Arm
<i>Direct Supervision -</i>	category E – Contrast Media Studies, C-Arm, O.R. category F – Skull, Mobile Radiography category G – Pediatric (Age 6 or younger) Geriatric (Age 65, or cognitively impair)
<i>Indirect Supervision -</i>	After Testing Competent: category A – Upper Extremities category B – Lower Extremities category C – Spine/Pelvis category D – Routine Abdomen, Routine Chest or AP Chest non-bucky (wheelchair/stretchers)

Clinical Radiography IV – SPRING

<i>Restricted Areas -</i>	None
<i>Observation only-</i>	Special Procedures, CT., MRI, Bone Density, and mammography
<i>Direct Supervision -</i>	category E – Contrast Media Studies, C-Arm, O.R. category F – Skull, Mobile Radiography category G – Pediatric (Age 6 or younger) Geriatric (Age 65, or cognitively impair)
<i>Indirect Supervision -</i>	After Testing Competent: category A – Upper Extremities category B – Lower Extremities category C – Spine/Pelvis category D – Routine Abdomen, Routine Chest or AP Chest non-bucky (wheelchair/stretchers) Skull (after completing lab competency)

Clinical Radiography V – SUMMER

<i>Restricted Areas -</i>	None
<i>Observation only</i>	<i>Special</i> Procedures, CT, MRI, Bone Density, and mammography

Direct Supervision -

category E – Contrast Media Studies, C-Arm, O.R.
category F – Skull, Mobile Radiography
category G – Pediatric (Age 6 or younger)
Geriatric (Age 65, or cognitively
impaired)

Indirect Supervision -

After Testing Competent:
category A – Upper Extremities
category B – Lower Extremities
category C – Spine/Pelvis
category D – Routine Abdomen, Routine Chest
or AP Chest non-bucky
(wheelchair/stretchers)
Skull (after completing lab competency)

13. CLINICAL COURSE OUTLINES

It is the students' responsibility to read the objectives for each course and the categories for direct and indirect supervision. These categories indicate the examinations you may perform each semester, and the level of supervision required. It is your responsibility to know, and adhere to, this information.

If you are asked to perform an examination that has not been covered in class, you are to indicate this to the technologist. You are not permitted to perform any examination until the content material has been taught at the college. If a problem arises, speak to your clinical supervisor or clinical instructor immediately.

14. CLINICAL GRADES

The first week of each semester, the Clinical Coordinator will review the course syllabi with the class.

Carefully review the grading criteria for each clinical course. The clinical grades will be based on departmental grading policies. **A course grade of 75 or higher is needed to progress with the departmental coursework for completion of the program.**

At the end of each semester, the clinical grades are computed by the Clinical Coordinator using the appropriate student evaluation forms. (See: Clinical Evaluation Forms, Appendix C). Grades are determined by evaluating the following categories:

1. Professionalism
3. Following Instructions
3. Communication Skills
4. Positioning Skills
5. Computing Technique
6. Radiation Protection
7. Knowledge of Equipment
8. Patient Care
9. Image Analysis and Clinical Assignment
10. **Punctuality**
11. **Attendance**
12. Completion of Clinical Competencies
13. **Clinical Supervisor Overall Impression**
14. **Clinical Instructor Overall Impression**
15. Clinical Coordinator Overall Impression
16. Following all professional practices which include safety, ethics, participation and behavior.

Each semester, a **mid-semester evaluation** will be performed and documented to provide students with the status of their clinical progression and is a **non-graded** advisement process.

A **final clinical evaluation** will include all aspects of a student's clinical performance per semester and **applied to their final clinical grade**.

The clinical supervisor and clinical instructor at each affiliate complete a final clinical evaluation form for each student. The clinical coordinator will complete his/her own evaluation form and will combine the information from these evaluation forms with the attendance records and performance in image analysis class to assign a clinical grade. A clinical grade is given for each semester. Clinical grading criteria are contained within each of the clinical course outlines. Students will be given the opportunity to review their evaluations. **Failure to complete the assigned clinical competencies for the semester may result in a percentage grade reduction which will be determined based on the number of competencies required for the semester.**

15. CLINICAL COMPETENCY PROGRAM

The Clinical Competency Program is designed to allow students to apply theoretical principles of radiography in practical settings. These clinical experiences take the form of five (5) separate clinical courses. Each of these courses has specific course outlines and objectives. (See: Clinical Competency, Appendix D)

During the second semester (XRA 129) students begin their hospital experience.

Clinical experience at the hospital is accomplished in three progressive modes:

1. OBSERVATION
2. DIRECT SUPERVISION
4. INDIRECT SUPERVISION

Logging of Observed Cases

Students must provide proof of a minimum of three direct /indirect observations of the examination they seek competency within. ***These cases are to be documented in Trajecys***

These practical experiences take place with varying degrees of supervision. The degree of supervision is determined by an ongoing system of clinical assessments. The goal of the Clinical Competency Program is to assist student radiographers in attaining competency -- a state whereby students combine and apply knowledge and clinical skills without error and without direct supervision.

The Clinical Competency Program is based on a progression of clinical evaluations designed and dictated by **ARRT** to assure that graduates meet the clinical education objectives of the program.

15A. Competency Examinations & Categories

There are mandatory hospital-based competencies that must be completed during the five clinical courses. The Program's certifying agency, The American Registry of Radiologic Technologists (ARRT) mandates these competencies must be completed before a student can sit for the national certification examination.

Students are not permitted to do any of the mandated clinical competency examinations until they complete the *pre-requisites*:

- Equipment Manipulation Competency.
- Basic Medical Techniques

Competency Categories

Category A	Category B	Category C
Upper Extremities	Lower Extremities	Spine/Pelvis
1. Finger/Thumb	1. Foot	1. Cervical Spine (non-trauma)
2. Hand	2. Ankle	2. Thoracic Spine
3. Wrist	3. Knee	3. Lumbar Spine
4. Forearm	4. Tibia/Fibula	4. Pelvis
5. Elbow	5. Femur	5. Hip
6. Humerus	6. Lower Extremity (trauma)	
7. Shoulder (non-trauma)		
8. Shoulder (trauma)		
9. Upper Extremity (trauma-non shoulder)		

The student will move from direct to indirect supervision when he/she completes each examination.

Category D	Category E
Chest/Abdomen	
1. Routine Chest	1. U.G.I. Series or BE (Fluoroscopy)
2. AP chest non-bucky (wheelchair/stretchers)	2. C-Arm (OR settings)
3. Routine Advanced Chest	
4. Routine Supine Abdomen	
5. Abdomen (erect)	

For category D, the student will move from direct to indirect supervision when he/she completes each examination.

Direct Supervision Only

Category F
Portable
1. Chest
2. Abdomen
3. Extremity

The student must always work with direct supervision for category F, (Portables), G and E.

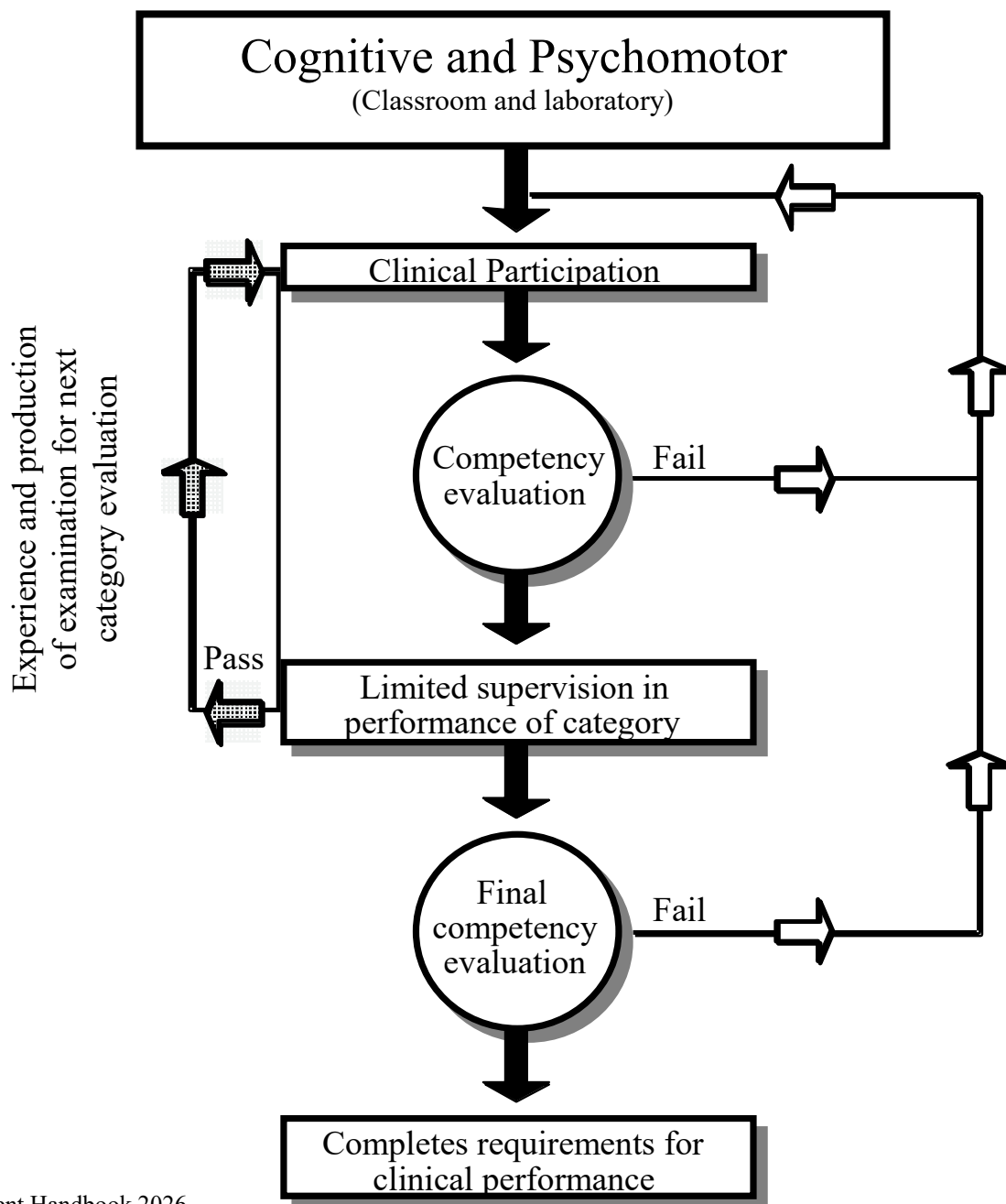
Category G
1. Peds (Age 6 or under)
2. Geriatric (Age 65 or cognitive impair)

15B. Unsatisfactory Competency Procedure

If a student fails a competency evaluation, he/she will be required to complete the Student Self-Assessment – Unsatisfactory Clinical Competency Evaluation Form and practice this exam once more before attempting to redo exam.

(See Appendix D)

15C. Competency-Based Clinical Education Flow Chart



15D. Clinical Participation

Clinical participation has both laboratory and hospital components. To assure meaningful clinical participation, the students will have mastered cognitive competencies necessary to ensure a meaningful clinical participation phase.

During the first semester of the program students participate in simulated clinical activities in the college laboratory. These activities include:

1. **DEMONSTRATION** - the student is shown the radiographic positions in both lecture and laboratory.
2. **PRACTICE** - combining knowledge and clinical skills, the students engage in clinically related activities in the laboratory. These activities include laboratory assignments within the formal positioning course as well as other assignments that are completed in open labs.
(OPEN LABS - Students work under the direct supervision of the college laboratory technologist or faculty, who is a registered radiologic technologist.)

During the second semester students begin their hospital experience. This experience takes the form of five (5) separate clinical courses. Each of these courses has specific course outlines and objectives. Clinical experience at the hospital is accomplished in three progressive modes:

1. OBSERVATION
2. DIRECT SUPERVISION
5. INDIRECT SUPERVISION

Logging of Observed Cases

Students must provide proof of a minimum of three direct /indirect observations of the examination they seek competency within. ***These cases are to be documented in Trajecsys and their personal logbook.*** To follow HIPAA regulations, logging of observed cases MUST only occur on the premises of the assigned health facility and follow hospital privacy protocol. A violation of this requirement will lead to disciplinary action.

15E. Clinical Assessment Procedures

The demonstration mode is completed when the instructor teaches and illustrates the positions for each examination.

The lab practice mode takes place within the positioning laboratory and with assignments that are completed in the lab only.

The pre-clinical assessment is a practical examination that students must complete prior to beginning their hospital practicum.

The clinical practice mode takes place at affiliate hospitals. Students perform this practice mode with either direct or indirect supervision.

15F. Equipment Manipulation Competency

Assessment Objectives

Before Clinical Competency may be performed, the student must demonstrate appropriate knowledge of how to use general radiographic equipment. The student must pass all items listed on the “Equipment Manipulation Competency Evaluation”.

The student will:

1. Locate the main power on/off switch.
2. Turn the control console power on/off.
3. Identify the location and turn on/off the following electro-mechanical locks:
 - a. Vertical Lock
 - b. Horizontal Lock
 - c. Transverse Lock
 - d. Angulation Lock
 - e. Rotation Lock
 - f. Centering Lock
4. Center the overhead tube to the table bucky grid tray using the appropriate SID.
5. Center the overhead tube to the wall bucky grid tray using the appropriate SID.
6. Position the overhead tube for a routine PA hand examination.

See Appendix D for the Equipment Competency form.

15G. Clinical Competency Objectives

The purpose of the clinical competency evaluation is to assess the students' ability to meet the following objectives:

1. Equipment Manipulation
2. Basic Medical Procedures
3. Technical Factors
4. Positioning Skills
5. Radiation Protection
6. Image Evaluation
7. Student Patient Interaction/communication
8. Patient Transfer
9. Patient Care

Clinical competency evaluations assess the students' ability to meet clinical education objectives. Evaluations are graded on a pass/fail basis. Clinical competency requirements designated in each clinical course are the minimum criteria for successfully completing the clinical course.

15H. Clinical Competency Assessment

Students are required to meet competency requirements for each semester. **Students who do not complete the minimum number of competencies will have points deducted from their clinical grade.**

15I. Hospital Tested Competencies - by Semester

The ARRT requires that all students perform **fifty-one competency examinations (36 mandatory and 15 electives - 10 may be simulated)** at their clinical education center. The competencies required each semester are the **minimum** number necessary to receive **full** credit towards their clinical grade. Successfully completed competencies will be submitted by your clinical supervisor, instructor, coordinator or any other designated person on Trajecsys and will be available for you to evaluate your progress. Completed evaluation documents will also be placed in a student's file.

FIRST YEAR:

➤ ***Clinical Radiography 1- XRA 129 (Spring Semester – Junior Year)***

No competencies can be performed until the student successfully completes the equipment manipulation competency. Before attempting any competency, students must provide a record of three minimum observed cases logged. A minimum of four exams indicated below must be completed under the direct supervision of the Clinical Instructor or Clinical Coordinator.

The clinical grade is only based upon completing the required minimum of **4 exams (not to exceed 8)**.

1. Equipment Manipulation
2. Basic Medical Technique (to be completed within the first two months of clinical, assessed by clinical instructor)
3. Routine chest
4. Upper or lower extremity

Additional exams:

- AP chest stretcher/wheelchair
- Routine Abdomen or Extremities

****The student *may* perform additional exams during all sessions (with approval of clinical supervisor or clinical coordinator).**

➤ ***Clinical Radiography 2 - XRA 139 (Summer Semester – Junior Year)***

Students must perform a maximum of **12 exams**. The student may perform additional exams; however, the grade is based upon completing the 12 required exams only.

SECOND YEAR:

Spot comps will be done by clinical coordinator or clinical instructor.

➤ ***Clinical Radiography 3 – XRA 219 (Fall Semester – Senior Year)***

Students will **perform a minimum of 12 additional exams**. The student may perform additional exams; however, the grade is based upon completing the 12 required exams.

➤ ***Clinical Radiography 4- XRA 229 (Spring Semester – Senior Year)***

Students will perform a **minimum of 12 additional exams**. The student may perform additional exams; however, the grade is based upon completing the 12 required exams.

➤ ***Clinical Radiography 5 - XRA 239(Summer Semester – Senior Year)***

Students will perform additional exams for the ARRT required total of 51 competencies (36 mandatory and 15 electives - *with the option of simulating 10 of them in the clinical setting*).

PLEASE NOTE:

At any point during the clinical component of the program, a student may be retested by the clinical coordinator on any exam they have been deemed competent.

15J. Laboratory Competencies

In addition to the hospital-based competencies, the following **mandated competencies** will be simulated in the college laboratory. The laboratory modules will take place in the college lab over the course of XRA 219 and XRA 229 clinicals.

- | | |
|-----------------------------|--|
| 1. Routine Skull | 19. Calcaneus |
| 2. Temporomandibular Joints | 20. Patella |
| 3. Mandible | 21. Femur |
| 4. Orbits | 22. Tibia/Fibula |
| 5. Facial Bones | 23. Toes |
| 6. Nasal Bones | 24. Thoracic spine |
| 7. Paranasal Sinuses | 25. Cross table spine |
| 8. Sacrum/Coccyx | 26. Cross table hip |
| 9. Scapula | 27. Scoliosis |
| 10. Sternum | 28. S.I. Joints |
| 11. Clavicle | 29. Abdomen Upright |
| 12. Chest Lateral Decubitus | 30. Abdomen Decubitus |
| 13. Soft Tissue neck | 31. C- Arm Manipulation |
| 14. Sternoclavicular Joints | 32. C-Arm Sterile field |
| 15. Ribs | 33. Pediatric Chest. |
| 16. A.C Joints | 34. Pediatric Upper or Lower extremity |
| 17. Thumb or finger | 35. Pediatric Abdomen |
| 18. Humerus | 36. Pediatric Mobile study |

16. CLINICAL OBJECTIVES FOR ELECTIVE ROTATIONS

The appropriate role for the student technologist during elective rotations is to observe and/or assist during these rotations. **All students MUST complete all lectures, testing and training modules before starting any of their elective rotations.** The following is a list of clinical objectives for the elective rotations of Special Procedures, Computerized Tomography (CT), Magnetic Resonance Imaging (MRI) and Mammography.

16A. Interventional Procedures

The Student Will:

1. Demonstrate the ability to assist in the appropriate transport and transfer of patients.
2. Observe and/or assist in the positioning of the patient and preparation of auxiliary imaging equipment.
3. Observe and/or assist in the preparation of the power injector (if needed).
4. Observe and/or assist with aseptic techniques.
5. Identify the various catheters, guidewires, dilators and drainage tubing used in I.R. exams.
6. Assist in providing adequate radiation protection for patient personnel.

16B. Computerized Tomography (CT)

The Student Will:

1. Demonstrate the ability to assist in the proper transport and transfer of the patient.
2. Observe and/or assist in the positioning for various CT examinations.
3. Observe, identify, and/or assist in the selection of proper technical factors and programming requirements for the examination.
4. Observe and/or assist in the preparation of the power injector (if needed).
5. Assist in providing adequate radiation protection for the patient and personnel.
6. Identify cross-sectional anatomical structures.

16C. Magnetic Resonance Imaging (MRI)

Students must complete the MRI Screening Form before beginning their rotation. **All students must also complete MR safety screening before rotating through MRI.**

The Student Will:

1. Assist in providing adequate screening for patients and personnel.
2. Demonstrate the ability to assist in the proper transport and transfer of the patient.
3. Observe and/or assist in the positioning for various MRI studies.

4. Observe and/or assist in identifying and placing RF coils on the patient.
5. Observe and/or assist in the preparation of the power injector (if needed).
6. Identify cross-sectional anatomical structures.

16D. Bone Density/Mammography

The Student Will:

1. Demonstrate the ability to assist in the proper transport and transfer of the patient.
2. Observe and/or assist in the positioning of the patient.
3. Observe and/or assist in the selection of proper technical factors and programming requirements for the examination.
4. Assist in providing adequate screening for the patient and personnel.
5. Identify anatomical structures.
6. Observe and or assist in Quality Control testing.

APPENDIX A

Laboratory-Tested Competency Forms

LABORATORY COMPETENCY

WORKBOOK

- Assignment 1:** Category 2: Upper & Lower Extremities
- Assignment 2:** Category 3: Thorax & Vertebral Column
- Assignment 3:** Category 4: Skull

LABORATORY COMPETENCY EVALUATION CRITERIA

1. EQUIPMENT MANIPULATION:

- a. Adequately manipulate locks and/or bucky grid
- b. Position tube properly
- c. Proper use of psychomotor & visualization skills
- d. Identify image with appropriate markers

2. TECHNICAL FACTORS:

- a. Measure patient correctly
- b. Select appropriate exposure factors (kVp, mAs & FFD)
- c. Select correct technical factors (image receptor & grid)

3. POSITIONING SKILLS:

- a. Position patient correctly & select appropriate image receptor size
- b. Center anatomical area of interest to image receptor
- c. Align central ray to image receptor
- d. Use immobilizing devices correctly
- e. Instruct patient properly

4. RADIATION PROTECTION:

- a. Collimate beam properly
- b. Shield patient correctly

5. IMAGE ANALYSIS:

- a. Evaluate radiograph for visibility and sharpness
- b. Evaluate radiograph for proper positioning

Students must meet all evaluation criteria to successfully complete the Competency Evaluation.

Lab Competency Worksheet 1

Category 2 Examinations

Name:

Upper Extremities

Anatomy	Projection	Pass	Fail	Projection	Pass	Fail	Projection	Pass	Fail
Thumb	PA	<input type="checkbox"/>	<input type="checkbox"/>	Lateral	<input type="checkbox"/>	<input type="checkbox"/>			
Hand	PA	<input type="checkbox"/>	<input type="checkbox"/>	Lateral	<input type="checkbox"/>	<input type="checkbox"/>	PA oblique	<input type="checkbox"/>	<input type="checkbox"/>
Wrist	PA	<input type="checkbox"/>	<input type="checkbox"/>	Lateral	<input type="checkbox"/>	<input type="checkbox"/>	PA oblique	<input type="checkbox"/>	<input type="checkbox"/>
Forearm	AP	<input type="checkbox"/>	<input type="checkbox"/>	Lateral	<input type="checkbox"/>	<input type="checkbox"/>			
Elbow	AP	<input type="checkbox"/>	<input type="checkbox"/>	Lateral	<input type="checkbox"/>	<input type="checkbox"/>			
Humerus	AP	<input type="checkbox"/>	<input type="checkbox"/>	Lateral	<input type="checkbox"/>	<input type="checkbox"/>			

Lower Extremities

Anatomy	Projection	Pass	Fail	Projection	Pass	Fail	Projection	Pass	Fail
Foot	AP axial	<input type="checkbox"/>	<input type="checkbox"/>	Lateral	<input type="checkbox"/>	<input type="checkbox"/>	AP oblique	<input type="checkbox"/>	<input type="checkbox"/>
Ankle	AP	<input type="checkbox"/>	<input type="checkbox"/>	Lateral	<input type="checkbox"/>	<input type="checkbox"/>	AP oblique	<input type="checkbox"/>	<input type="checkbox"/>
	AP oblique	(Mortise projection)			<input type="checkbox"/>	<input type="checkbox"/>			
Calcaneus	Axial	<input type="checkbox"/>	<input type="checkbox"/>						
Leg	AP	<input type="checkbox"/>	<input type="checkbox"/>	Lateral	<input type="checkbox"/>	<input type="checkbox"/>			
Knee	AP	<input type="checkbox"/>	<input type="checkbox"/>	Lateral	<input type="checkbox"/>	<input type="checkbox"/>			
Patella	Tangential	(Settegast method)			<input type="checkbox"/>	<input type="checkbox"/>			
Hip	AP	<input type="checkbox"/>	<input type="checkbox"/>	Axiolateral	(Danelius-Miller method)		<input type="checkbox"/>	<input type="checkbox"/>	

All projections successfully completed

All failed projections must be repeated

Evaluator: Date

Comments:

.....

Hostos Community College – Radiologic Technology Program
Lab Competency Worksheet 2
Category 3 Examinations

Name:

Bony Thorax

Anatomy	Projection	Pass	Fail	Projection	Pass	Fail
Shoulder	AP, internal rotation	<input type="checkbox"/>	<input type="checkbox"/>	AP, external rotation	<input type="checkbox"/>	<input type="checkbox"/>
Scapula	AP	<input type="checkbox"/>	<input type="checkbox"/>	Lateral, erect	<input type="checkbox"/>	<input type="checkbox"/>
Clavicle	AP	<input type="checkbox"/>	<input type="checkbox"/>	AP axial	<input type="checkbox"/>	<input type="checkbox"/>
Ribs	AP	<input type="checkbox"/>	<input type="checkbox"/>	AP oblique (RPO or LPO)	<input type="checkbox"/>	<input type="checkbox"/>
Sternum	PA oblique (RAO)	<input type="checkbox"/>	<input type="checkbox"/>	Lateral, erect	<input type="checkbox"/>	<input type="checkbox"/>

Simulated Exams

Anatomy	Projection	Pass	Fail	Projection	Pass	Fail
Pediatric Chest	PA	<input type="checkbox"/>	<input type="checkbox"/>	Lateral, erect	<input type="checkbox"/>	<input type="checkbox"/>
Esophagus	PA oblique (RAO)	<input type="checkbox"/>	<input type="checkbox"/>	PA oblique (LAO)	<input type="checkbox"/>	<input type="checkbox"/>

Vertebral Column

Anatomy	Projection	Pass	Fail	Projection	Pass	Fail
Cervical Spine	AP axial	<input type="checkbox"/>	<input type="checkbox"/>	Lateral, erect	<input type="checkbox"/>	<input type="checkbox"/>
	PA axial oblique (RAO or LAO)	<input type="checkbox"/>	<input type="checkbox"/>	Lateral, horizontal beam	<input type="checkbox"/>	<input type="checkbox"/>
Thoracic Spine	AP	<input type="checkbox"/>	<input type="checkbox"/>	Lateral	<input type="checkbox"/>	<input type="checkbox"/>
Lumbar Spine	AP	<input type="checkbox"/>	<input type="checkbox"/>	Lateral	<input type="checkbox"/>	<input type="checkbox"/>
	AP oblique (RPO or LPO)	<input type="checkbox"/>	<input type="checkbox"/>	Lateral L5/S1	<input type="checkbox"/>	<input type="checkbox"/>
Sacrum	AP	<input type="checkbox"/>	<input type="checkbox"/>	Lateral	<input type="checkbox"/>	<input type="checkbox"/>
Coccyx	AP	<input type="checkbox"/>	<input type="checkbox"/>			
Pelvis	AP	<input type="checkbox"/>	<input type="checkbox"/>			
S.I. Joints	AP obliques (LPO and RPO)	<input type="checkbox"/>	<input type="checkbox"/>			

All projections successfully completed

All failed projections must be repeated

Evaluator: Date

Comments:

Hostos Community College – Radiologic Technology Program
Lab Competency Worksheet 3
Category 4 Examinations

Name:

Routine Skull

Projection	Pass	Fail	Projection	Pass	Fail
PA (Perpendicular method)	<input type="checkbox"/>	<input type="checkbox"/>	Lateral (Right or Left)	<input type="checkbox"/>	<input type="checkbox"/>
AP axial (Towne method)	<input type="checkbox"/>	<input type="checkbox"/>	Submentovertical (Schüller method)	<input type="checkbox"/>	<input type="checkbox"/>

Routine Paranasal Sinuses

Projection	Pass	Fail	Projection	Pass	Fail
PA axial (Caldwell 15° method)	<input type="checkbox"/>	<input type="checkbox"/>	Lateral (Right or Left)	<input type="checkbox"/>	<input type="checkbox"/>
Parietoacanthial (Waters method)	<input type="checkbox"/>	<input type="checkbox"/>	Submentovertical (SMV)	<input type="checkbox"/>	<input type="checkbox"/>

Facial Bones

Anatomy	Projection	Pass	Fail	Projection	Pass	Fail
Facial bones	Modified parietoacanthial	(Modified Waters method)			<input type="checkbox"/>	<input type="checkbox"/>
Nasal bones	Right lateral	<input type="checkbox"/>	<input type="checkbox"/>	Left lateral	<input type="checkbox"/>	<input type="checkbox"/>
Mandible	PA	<input type="checkbox"/>	<input type="checkbox"/>	Axiolateral oblique	<input type="checkbox"/>	<input type="checkbox"/>
T.M.J.	AP axial	(Modified Towne method)			<input type="checkbox"/>	<input type="checkbox"/>
	Axiolateral oblique	(Modified Law method)			<input type="checkbox"/>	<input type="checkbox"/>
Zygomatic	Submentovertical (SMV)	<input type="checkbox"/>	<input type="checkbox"/>	Oblique inferosuperior (Tangential)	<input type="checkbox"/>	<input type="checkbox"/>
Orbits	Parietoorbital oblique	(Rhese method)			<input type="checkbox"/>	<input type="checkbox"/>

All projections successfully completed

All failed projections must be repeated

Evaluator: Date

Comments:

Hostos Community College – Radiologic Technology Program
Lab Competency Worksheet 4
Repeated Projections

Name:

	Anatomy	Projection	Method	Pass	Fail
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

All projections successfully completed

All failed projections must be repeated

Evaluator: Date

Comments:

.....

.....

.....

APPENDIX B

Clinical Record Keeping

Instructions

Student Menu and Instructions

The Trajecsyst Student Menu was designed to be as user friendly as possible. This "cheat sheet" highlights the primary functions that most students will utilize on a daily basis.

Student Home Page

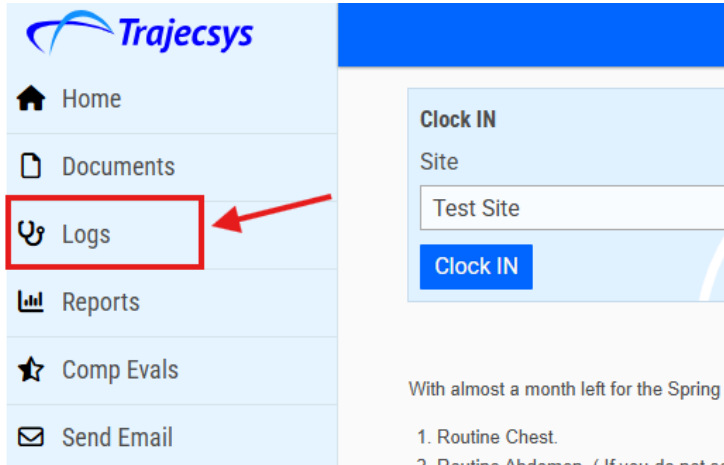
Clock In/Out - Students will clock in each day at their clinical site and clock out at the end of their shift, at their assigned clinical site. This will only be done when the student is physically at their assigned clinical site. Clocking in/out from another computer or through the student's phone will only be allowed if the assigned clinical site computer is not functioning; It must be done near the location of the assigned clinical computer. If this is in effect, the GPS will be recorded.

Reports - Students may access these items on the Reports menu page:

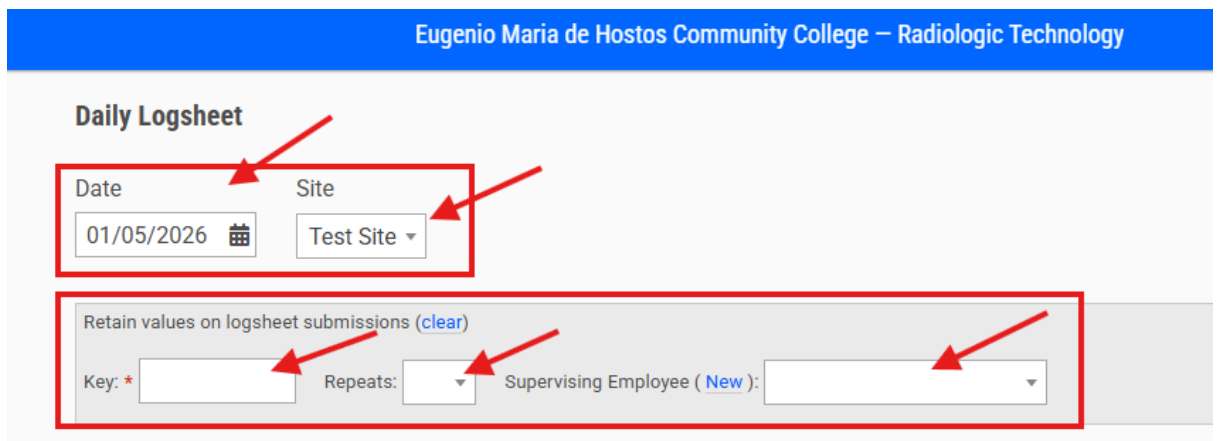
- Time summary
- Skill summary (compilation of log sheet entries and linked comp exam results; click comp date hyperlink to view item-by-item results)
- Evaluation results other than comps (use either the Evaluation Summaries or Completed Evals/Forms for evaluation results - same info in different formats)

Daily Log Sheets - Students will complete the items on the Logs menu page.

- Select the “Logs” tab after logging in.



- Enter the date and site where you observed or participated in exam.
 - The **key** field is a replacement for a patient identifier and is limited to 5 digits. The program may dictate what information is to be entered here (for example: the last 5 digits of the ascension number or a combination of sex/age "F73)
 - Enter the number of **repeats**, if necessary
 - Choose the **Supervising Employee** that oversaw you participating in the exam.
 - If the person's name is not listed in the dropdown, click on the **New** link to the left and enter the information. Please ensure that all information is complete and spelled correctly



- Now click "Add Log sheet"

7. Select the **Major Study** (anatomical area)

and mark as Simulation, if needed.

Major Study✕

Simulation

C-Arm Studies

Abdomen

Chest and Thorax

Fluoroscopy Studies (*MUST COMPLETE 2)

General Patient Care

Geriatric Patient

Mobile Studies

Pediatric Patient

Head (*MUST COMPLETE 1)

Lower Extremity

Spine and Pelvis

Upper Extremity

2. Select the appropriate exam

Skill✕

← Back

🔍 Quick Search

Abdomen Decubitus (E)

Abdomen Supine

Abdomen Upright

Intravenous Urography (E)

3. Select the appropriate participation level:

Participation Level✕

← Back

Observed

Performed with assistance

Performed without assistance

4. Select/Enter the time that was spent participating in that exam and then click **Next**

Hours				Minutes			
00	01	02	03	00	05	10	15
04	05	06	07	20	25	30	35
08	09	10	11	40	45	50	55

00 : 00

5. Enter any necessary comments and click **Next**
6. The **Case Log Record** form may open.
 - a. You will select the site from the dropdown
 - b. Complete all sections/items. You can enter comments using the comment bubbles
 - c. Click Submit when finished.

Case Log Record

Site:

Case Log Record

Patient Care: Oxygen IV Tubing Collection Devices N/A

Transfer Mode: Ambulatory Wheel Chair Stretcher Neonatal Cart N/A

Submit

The log has now been entered.

Payments - Students who pay us directly can go to our website: www.trajecsys.com and click Payments in the upper right corner. The direct link to the payments page is: <https://www.trajecsys.com/Payments.aspx>

Clinical Handbook EDUCATION AGREEMENT

I, _____ hereby acknowledge:
PRINT STUDENT'S NAME

1. I have received a copy of the Radiologic Technology Program's Clinical Handbook; and, I have carefully read and understand the policies and procedures of the program.
2. I have carefully read and understand the "clinical objectives" contained in the Radiologic Technology Program's Clinical Handbook.
3. I have carefully read and understand the "clinical education rules and regulations", 6 and 6A, numbers one (1) through twenty two (21).
4. I have carefully read and understand the "clinical attendance policy" numbers 6B, "clinical probation and dismissal policies" number 6C, and "substance abuse policy" number 6D.
5. I have carefully read and understand the "levels of clinical supervision" number 12 through 12D and will strictly adhere to this policy.

.....
I, _____ hereby grant:
PRINT STUDENT'S NAME

1. Hostos Community College's Radiologic Technology faculty permission to send for, or share, any information they consider necessary and appropriate to verify my personal, academic, medical and/or legal records.
2. Permission for my file to be examined as part of the routine accreditation review proceedings.

I hereby affirm all of the above statements.

Student's Signature: _____ Date: _____

Sworn to before me this _____ day of _____ 20 ____

Notary's Signature: _____

Excess Clinical Lateness Notice

TO: _____

FROM: _____
(Clinical Coordinator)

DATE: _____

RE: Lateness

According to the attendance records at: _____

_____ you were late on the

following three days:

This is the equivalent of one (1) absence; therefore, one additional day will be added to your accrued absences for this semester. As of today, you now have _____ day(s), which must be made up due to excessive absences.

Comments: _____

I have reviewed the above information and understand that this notification will be placed in my permanent student file.

Student's Signature

Clinical Coordinator's Signature

EXCESS CLINICAL ABSENCE NOTICE

Date:

Student name:

According to the attendance records at:

You were absent on the following days:

You have exceeded the number of absences permitted for this semester by ___ day(s).
Therefore, you must submit documentation for all future excess absences.

According to the Clinical Handbook: If a student exceeds the number of allowable absences for a clinical course, a five point grade deduction will occur for each day beyond the allowable absences. The student will also be placed on clinical probation.

(See: Radiologic Technology Program Clinical Handbook for additional details.)

Please Note: Excess absences may result in disciplinary action.

Comments: _____

Clinical Coordinator's Signature

I have reviewed the above information and understand that this notification will be placed in my permanent student file.

Student's Signature

APPENDIX C

Clinical Evaluation

Forms

Hostos Community College – Radiologic Technology Program
Mid-Semester Clinical Evaluation
Advisement

Student: _____ Date: _____

Hospital: _____ Clinical Radiography: **I II III IV V**

Evaluator: _____

PLEASE NOTE

Categories 4, 5, and 7 are not applicable for Clinical Radiography 1 only.

Please indicate your rating of the above student for each category listed below:

	Good	Satisfactory	Needs Improvement	Does Not Apply
1. <u>Overall Impression</u> Clinical evaluator's impression of the student's progress throughout the semester	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. <u>Professionalism</u> Student's conduct in dealing with supervisors, technologists and patients	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. <u>Following Instructions</u> Student's ability to take and follow direction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. <u>Communication Skills</u> Student's ability to verbally communicate with supervisors, technologists and patients	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. <u>Positioning Skills</u> Student's ability to position patients correctly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. <u>Computing Technique</u> A. Student's ability to compute appropriate exposure factors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
B. Adapt factors for various patient conditions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. <u>Radiation Protection</u> Student's adherence to radiation protection procedures and protocol.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. <u>Knowledge of Equipment</u> Student's knowledge of equipment and their proper utilization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

9. Patient Care Student's ability to assess the patient's needs to complete the exam	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Image Analysis / Clinical Assignments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Please indicate your rating of this student for each category listed below:

	Satisfactory	Needs Improvement
A. Clinical Competency Policy Student's adherence to the college's direct and indirect supervision levels	<input type="checkbox"/>	<input type="checkbox"/>
B. Appearance Student's adherence to the program's professional dress code	<input type="checkbox"/>	<input type="checkbox"/>
C. Dependability Student's willingness to perform tasks within his or her abilities	<input type="checkbox"/>	<input type="checkbox"/>

Please explain any improvement items below:

Have there been any incidents of clinical misconduct? No Yes, please explain below

Have there been any incidents where the student did NOT follow the correct patient identification procedures? No Yes, please explain below

Have there been any incidents where the student did NOT correctly perform and/or label an examination? No Yes, please explain below

Describe the student's clinical strengths:

What could the student have done to improve his or her clinical performance?

Additional Comments:

NO COMMENTS

Clinical Evaluator's Signature

Student's Comments:

NO COMMENTS

Student's Signature

Hostos Community College – Radiologic Technology Program
Final Clinical Evaluation
 Clinical Coordinator

Student: _____ Date: _____

Hospital: _____ Clinical Radiography: **I II III IV V**

GRADING CRITERIA

- Excellent = Student has successfully satisfied the category within 90-100% accuracy
- Good = Student has successfully satisfied the category within 80-89% accuracy
- Satisfactory = Student has successfully satisfied the category within 70-79% accuracy
- Needs Improvement = Student has failed to complete the objectives for this semester

Please indicate your rating of the above student for each category listed below:

	Excellent 4	Good 3	Satisfactory 2	Needs Improvement 1	Fail 0
1. Overall Impression Clinical evaluator's impression of the student's progress throughout the semester	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Professionalism Student's conduct in dealing with supervisors, technologists and patients	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Following Instructions Student's ability to take and follow direction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Communication Skills Student's ability to verbally communicate with supervisors, technologists and patients	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Positioning Skills Student's ability to position patients correctly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Computing Technique A. Student's ability to compute appropriate exposure factors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Adapt factors for various patient conditions					
7. Radiation Protection Student's adherence to radiation protection procedures and protocol	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Knowledge of Equipment Student's knowledge of equipment and their proper utilization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Patient Care Student's ability to assess the patient's needs in order to complete the exam	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Image Analysis and Clinical Assignments Student's performance in image analysis classes and other clinical assignments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Deductions to the Clinical Grade:

- | | 1 | 2 | 3 | 4 | |
|----------------------------|---|----------|----------|----------|-------------|
| <input type="checkbox"/> A | Exceeded the allowable number of absences by: _____ | | | | _____ |
| <input type="checkbox"/> B | Insufficient number of competencies completed: _____ % | | | | _____ |
| <input type="checkbox"/> C | Failed to sign the monthly dosimetry report within the appropriate time | | | | (-1) _____ |
| <input type="checkbox"/> D | Failed to return the dosimeter by the 15th of the month | | | | (-2) _____ |
| <input type="checkbox"/> E | Lost the dosimeter due to negligence or not wearing dosimeter | | | | (-5) _____ |
| <input type="checkbox"/> F | Clinical misconduct; violated a stated clinical policy or procedure; received a suspension from the hospital for _____ days | | | | _____ |
| <input type="checkbox"/> G | Failed to follow the correct patient identification procedure; but, brought the right patient into the exam room; no exposures made | | | | (-1) _____ |
| <input type="checkbox"/> H | Failed to follow the correct patient identification procedure; brought the wrong patient into the exam room; no exposures made | | | | (-5) _____ |
| <input type="checkbox"/> I | No markers visible on the radiograph/image receptor | | | | (-1) _____ |
| <input type="checkbox"/> J | Incorrect placement of L/R markers on the radiograph/image receptor | | | | (-3) _____ |
| <input type="checkbox"/> K | Performed the wrong view or routine on the patient | | | | (-5) _____ |
| <input type="checkbox"/> L | Performed the wrong exam on the patient | | | | (-10) _____ |
| <input type="checkbox"/> M | Digitally linked the wrong patient data with the exam | | | | (-25) _____ |
| <input type="checkbox"/> | _____ | | | | _____ |

Please explain any checked items below:

.....

.....

.....

Additional Comments:

.....

.....

.....

NO COMMENTS

Clinical Coordinator's Signature

Student's Comments:

.....

.....

.....

NO COMMENTS

Student's Signature

APPENDIX D

Clinical Forms

STUDENT EVALUATION EQUIPMENT MANIPULATION COMPETENCY

Name _____

Evaluator _____

Hospital _____

Date _____

Room/Equipment _____

	<u>Pass</u>	<u>Fail</u>	<u>N/A</u>
1. Locate the main power on/off switch.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Turn the control console power on/off.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Identify the location and turn on/off the following basic locks:			
a. Vertical Lock			
b. Horizontal Lock			
c. Transverse Lock			
d. Angulation Lock			
e. Rotation Lock			
f. Centering Lock			
4. Identify the location and engage (on) and disengage (off) any of the locks not listed above.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Position the overhead tube for a routine PA hand examination.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Center the overhead tube to the table bucky grid tray for a routine abdominal study.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Center the overhead tube to the wall bucky grid tray for an upright abdominal study.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

STUDENTS MUST PASS ALL ITEMS

Student Signature _____

Evaluator's Signature _____

Hostos Community College – Radiologic Technology Program
BASIC MEDICAL TECHNIQUES

PATIENT CARE COMPETENCY EVALUATION

STUDENT: _____ DATE: ____/____/____

Evaluator: _____

**I. STANDARD PRECAUTIONS
(ASEPTIC TECHNIQUE)**

THE STUDENT WILL DEMONSTRATE THE USE OF STANDARD PRECAUTIONS FOR INFECTION CONTROL.

1. Utilizes gloves for touching blood/body fluids.
2. Identifies that gloves are changed and hands washed after patient contact.
3. Identifies the correct use of face masks.
4. Demonstrates the correct use of gowns.
5. Demonstrates the correct way to dispose of hypodermic needles.

PASS	FAIL

Competency Completed

II. STRICT ISOLATION

THE STUDENT WILL DEMONSTRATE THE CORRECT METHOD OF ENTERING AND LEAVING AN ISOLATION ROOM USING STRICT ISOLATION TECHNIQUES.

1. Identifies the need to remove all jewelry/and wears a cap if hair touches collar.
2. Demonstrates the proper way to wear mask.
3. Demonstrates hand washing technique
4. Demonstrates how to put on gown.
5. Demonstrates the proper way to wear gloves.
6. Places extra clean gloves on the portable machine.
7. Properly places covered cassette for exposure
8. Identifies the need to remove contaminated gloves before making an exposure.
9. Demonstrates the removal of the covered cassette to the assistant.
10. Remove contaminated gloves and gown properly.
11. Rewashes hand for 2 minutes without touching handles with bare hands.
12. Demonstrates cleaning the portable machine.
13. Identifies the need to wash hands again.

III. MEDICAL EMERGENCIES

THE STUDENT WILL IDENTIFY THE CORRECT ACTION TO TAKE IN AN EMERGENCY INVOLVING A PATIENT FAINING OR HAVING A CONVULSIVE SEIZURE.

PASS	FAIL
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1. Fainting (Syncope) - demonstrates the correct action when handling a fainting spell.
2. Convulsive Seizures - demonstrates the correct action when handling a convulsive seizure.
3. Identifies the location of the Emergency Cart.
4. Identifies the proper protocol for medical emergencies.

Competency Completed

Comments:

Instructor's Signature

Student's Signature



Clinical Evaluation and Assessment**PRINT PLEASE:****GRADE:*****Clinical Affiliation Site***

BronxCare ____ Northwell LHH ____ Montefiore Einstein ____ Montefiore/ Hutchinson ____

Montefiore MMP ____ Lincoln Medical Ctr. ____ LHGV ____ MSKCC ____ St. Barnabas ____

VA Hospital ____ Rad Net _____

Student: _____

Date: _____

Examination as listed in Trajecsys: _____How did patient transport: Ambulatory Wheelchair Stretcher Trauma Study? Yes NoReason for Exam: _____ **Circle that apply:** Port / Geriatric / Pediatric /Trauma

List views taken: 1) 2) 3) 4) 5) Category: A B C D E F G

Instructor or Tech: _____ **Passing Grade: 75 ≥****I. Patient Care (20 points- 2 points each)**

1.	Reads requisition and correctly interprets clinical information relevant to the radiographic exam.	
2.	Properly prepares the patient for exam requested – gowns/ removes objects that may cause a repeat exposure.	
3.	Makes room ready: clean and organized; items relevant to the exam (<i>sheets, pillows, positioning aids, tape, markers</i>) prepared and/or available.	
4.	Verifies patient's complete name and date of birth using a minimum of 2 identifiers.	A.F.
5.	For female patients, determines pregnancy status.	A.F.
6.	Demonstrates effective communication skills (speaking, listening, non-verbal) to facilitate exam.	
7.	Apply critical-thinking to monitor patient's comfort due to age, mental status, physical condition.	
8.	Performs correct examination on patient.	A.F.
9.	Use of gonadal and/or breast shield when applicable.	A.F.
10.	Practices medical asepsis and uses criteria for infection control (isolation - contact, airborne...) when appropriate for the exam.	

II. Positioning (20 points- 4 points each)

1.	Identifies and applies the facility's protocol.	
2.	Selects and uses positioning aids when applicable.	
3.	Correctly positions body part for each projection required (includes the element of time).	
4.	Accurately places central ray to the body part in question.	
5.	Identifies a minimum of 5 anatomical structures and functions in the radiographic image(s).	

III. Equipment/ Portable Machine manipulation (20 points- 5 points each)

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1.	Radiographic table manipulation/ grid selection.	
2.	Operates all locks correctly.	
3.	Radiographic tube centering/ angling/ alignment.	
4.	Operates the equipment in a safe and appropriate manner (portable and table-top exams).	

IV. Exposure Factors and Radiation Protection- ALARA (20 points- 4 points each)

1.	Demonstrates cognition of appropriate exposure and adjustments (D.I. E.I.) that will render an optimal radiograph on ALL projections required for the exam.	
2.	Employs correct collimation to the body part in question for each projection.	
3.	Wears lead apron when necessary (mobile, fluoroscopic procedures).	A.F.
4.	Clears area of visitors and staff during mobile and/or fluoroscopic procedures.	A.F.
5.	Provides protective lead aprons to personnel/ patients in proximity to exam.	

V. Image Evaluation & Analysis (20 points- 5 points each)

1.	Student will evaluate and critique images for positioning and /or centering.	
2.	Student will explain methods of improving image quality by integrating at least 2 of the following: <ul style="list-style-type: none"> • Exposure parameters (kVp, mAs, SID, EI, grid ratio, CR and DR factors) • Patient body habitus • 15% rule • Pathology (<i>based on student's level of knowledge</i>) • Environmental factors (mobile radiography) • Artifacts (pre/ post processing) 	
3.	Proper markers used and visible in the exposed field for each projection.	
4.	Repeated images _____*	A.F.

A.F.: Automatic Failure

Remarks:

Students Signature: _____

Date: _____

Clinical Instructor's Signature: _____

Date: _____

CATEGORIES:

A. Upper Extremities

D. Abdomen

F. Fluoroscopy

B. Lower Extremities

E. C-Arm & Head

G. Mobile, Pediatrics & Geriatrics

C. Spine & Hip

Exhibit: A

Radiographing A Patient - Table Bucky

A MEET & GREET

- Call Patient
- Student Introduction
- Identify Patient – 2 Identifiers
- Questions Patient About a reason for Exam
- Get Patient Changed

B EQUIPMENT

- Set Console to TABLE Bucky**
- Set Technique on Console
- Place Image Receptor (IR) in Table Bucky Tray, Push In & Lock Tray
- Detent Tube to Table & Move Tube Toward Feet
- Place Patient on Table & Shield Patient
- Center Bucky to Table & Center Tube to Bucky IR

C COMPLETE

- Position Patient
- Give Breathing/Movement Instructions
- Make Exposure & RE-Breath Patient**
- Review Image & Position Patient for Next Image & Repeat to Complete Exam
- Move Tube Away From Patient, Remove Patient From Table
- Give Discharge Instructions to Patient & Send Images to PACS
- Give Discharge Instructions to Patient & Send Images to PACS

Exhibit: B

Radiographing A Patient - Wall Bucky

A MEET & GREET

- Call Patient
- Student Introduction
- Identify Patient – 2 Identifiers
- Questions Patient About a reason for Exam
- Get Patient Changed

B EQUIPMENT

- Set Console to WALL Bucky**
- Set Technique on Console
- Place Image Receptor (IR) in Wall Bucky Tray, Push In & Lock Tray
- Detent Tube to Wall
Set Correct Tube Distance
- Place Patient in Front of Wall Bucky and Shield Patient

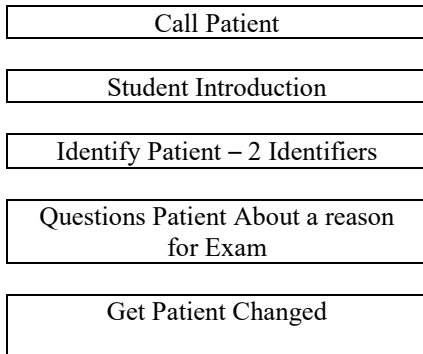
C COMPLETE

- Position Patient
- Give Breathing/Movement Instructions
- Make Exposure & RE-Breath Patient**
- Review Image & Position Patient for Next Image & Repeat to Complete Exam
- Move Tube Away From Patient, Remove Patient From Wall Bucky

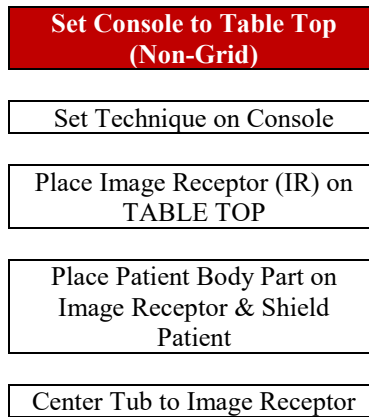
Exhibit: C

Radiographing A Patient - *Table Top (Non-Grid)*

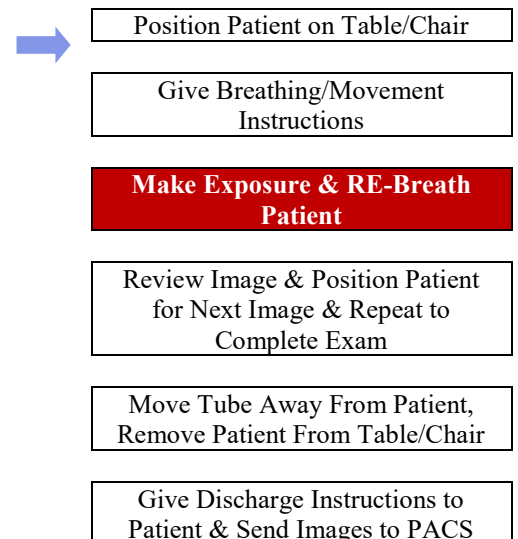
A MEET & GREET



B EQUIPMENT



C COMPLETE



Pregnancy Policy

Refer to the Student Handbook to review the Pregnancy Policy regarding declaring or undeclaring pregnancy.

Pregnancy and Clinical

Work Assignment – Radiation Safety Policy for Pregnant Students

Pregnant students must follow the basic radiation safety rules of time, distance, and shielding. Whenever possible, pregnant students will be assigned to those tasks that involve the lowest possible radiation exposure. The program will offer clinical component options such as clinical reassignments from areas such as fluoroscopy and mobile procedures. An additional dosimeter will be provided for fetal dose measurement once pregnancy is declared.

Monitoring of Radiation During Pregnancy

Pregnant students shall obtain a second dosimeter and wear it at the abdomen level. If an apron is worn, it must be under the apron. The monthly and total dose for nine months can be obtained from the dosimeter records that **MUST** be confirmed by the student.

Instructions to the Students

Pregnant students will be instructed as to the risks of prenatal radiation exposure, the recommended NCRP guidelines and are encouraged to inform the Radiation Safety Officer (RSO) if they are pregnant. Students **MUST** also contact the Hostos ARC department for any accommodations per CUNY policies.

Students will be encouraged to review the pregnancy policy and should discuss their safety with their doctor and family before deciding how they wish to proceed. The student will need to be able to perform the duties of their fellow students without restrictions, to participate in the clinical course.

Option to the student who has declared pregnancy.

Option #1 Continue both the didactic and clinical education phases

Option #2 Continue only the didactic educational phase

All clinical as well as didactic objectives must be fulfilled prior to graduation. Clinical phase will continue post pregnancy.

Option #3 Leave of absence from the Radiography Program

Students will be granted a leave of absence **for up to 1 year ONLY**.

The student will resume their remaining courses upon returning to the program, keeping in mind that courses proceed in a specific sequence.

The student will be required to sign a statement acknowledging explanation of options and stating option choice Undeclared Policy: a declared pregnant student may undeclared (withdraw the declaration) in writing of their pregnancy at any time. This is strictly voluntary.

DECLARATION OF PREGNANCY

To: Radiation Safety Officer

In accordance with the NRC's regulations 10 CFR 20. 1208, "Dose to an Embryo/Fetus," I am declaring that I am pregnant. I believe I became pregnant in _____
(only the month and year need be provided).

I understand the radiation dose to my embryo/fetus during my entire pregnancy will not be allowed to exceed 0.5 rem (5 millisievert) (unless that dose has already been exceeded between the time of conception and submitting this letter). I also understand that by declaring my pregnancy, my clinical duties and responsibilities are *not* likely to change while at the clinical education site, and will need to follow all guidelines set by the institution for pregnant personnel.

(Your signature)

(Your name printed)

(Date)

OPTION TO UNDECLARE PREGNANCY

To: Radiation Safety Officer

In accordance with the options available to me, I choose not to declare my pregnancy.

I have received and reviewed the pregnancy policy published in the “Student Handbook.”

I understand that the radiation protection policies that apply to all students are sufficient for me and my Embryo/Fetus and that a fetal monitoring dosimeter will no longer be provided for me.

(Your signature)

(Your name printed)

(Date)

