

**The Ohio State University  
College of Medicine and Public Health  
School of Allied Medical Professions**

**Radiologic Sciences and Therapy  
Division**

**Policy Manual and  
Student Handbook**

# Radiologic Sciences and Therapy Division

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# Radiologic Sciences and Therapy Division

## **Section 1 – General Program Policies**

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Category: General Program Policies

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**Division Overview/Mission/Goals**

**Division Overview**

The Ohio State University's Division of Radiologic Sciences and Therapy, which has been in existence since 1971, offers a traditional undergraduate program in the radiation sciences that is fully accredited by the North Central Association of Colleges and Schools, and the Ohio Department of Health. The Division offers three primary areas of specialization: Radiography, Radiation Therapy, and Diagnostic Medical Sonography. Graduates of the program are eligible to apply to sit for the national registration examination through the American Registry of Radiologic Technologists or the American Registry of Diagnostic Medical Sonography and may be licensed to practice in Ohio. The Ohio State University Division of Radiologic Sciences and Therapy is one of the three baccalaureate programs in Ohio.

The division has an excellent national reputation. Approximately 50-75% of program graduates stay in clinical practice and many progress to other post-primary imaging areas; others continue their education at the graduate level and move into positions in administration or education; while still other continue their education at the professional level. Graduates have assumed positions as radiologists, chiropractors, radiology department directors and managers, health physicists, radiologic science educational program directors and faculty, clinical researchers, dosimetrists, and clinicians in radiography, nuclear medicine, radiation oncology and sonography.

**Mission Statement**

To prepare graduates for professional level careers in the radiologic sciences, in advanced clinical practice, in research and in life-long scholarly activity.

The mission of the Radiologic Sciences and Therapy Division is realized by the following goals:

1. Provide a comprehensive curriculum that will help develop the students' skills in effective communication, conceptual understanding, analytical judgment, critical thinking and the ability to problem solve allowing them to make responsible decisions.

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2. Provide strong clinical environments with comprehensive types of examinations including comprehensive medical centers, community hospitals, and private imaging/therapeutic centers, enabling the student to grow and develop competent clinical skills.
3. Develop clinical skills that instill appropriate behavior and professionalism when providing patient care, thus allowing the individual the opportunity to develop an ethical framework befitting that of a professional.
4. Prepare successful graduates in all aspects of their Radiologic Sciences and Therapy discipline to successfully obtain national board scores among the best in the country.
5. Develop graduates who will be sought out by employers, will become leaders in their communities, and accomplished, respected professionals.

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**Academic Standing and Adequate Academic Progress**

“The academic standards controlling warning, probation and dismissal of professional and graduate students shall be established by rule of the faculties of the college in which the professional students is registered...” (Faculty Rule 3335-9-23)

**Academic Probation, Disenrollment, and Dismissal**

1. A student whose *cumulative* point-hour ratio is below 2.50 will be placed on probation. Conditions for removing probation will be specified at the time of probation and sent in writing to the student. A student with a *quarter* point-hour ratio of below 2.50 will be warned and placed on probation if two out of three quarters are below a 2.50 point-hour ratio.
2. All major courses that are required as part of the Radiologic Sciences and Therapy curriculum must be passed with a C- grade or better. A student who receives less than the required grade in a major course shall be placed on probation and shall be required to repeat the course prior to graduation. Conditions for removing probation will be specified at the time of probation and sent in writing to the student. Students may not receive an incomplete in a clinical course for two consecutive quarters. If adequate progress is not made within one quarter, a failing grade will be issued for the sequential clinical course. A list of major courses can be found in Policies 1.03, 1.04, and 1.05 of this manual.
3. A student may be warned if he or she performs at a minimally acceptable level and shall be placed on probation if two or more causes of warning occur in two out of three quarters. Probationary status shall continue until either the requirements for removing probation have been achieved, or the student has been *disenrolled* from the School of Allied Medical Professions or *dismissed* from the University.
4. The student who is “*disenrolled*” from the Radiologic Sciences and Therapy Division program has not been dismissed from the University and is free to enroll in classes outside the division. The student who is “*dismissed*” may not enroll in any Ohio State University classes without going through a formal reinstatement process. No student shall be subject to *dismissal* from the University unless he or she is currently on probation. (Faculty Rule 3335-9-25)

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5. Generally, no student will be *disenrolled* for academic reasons unless he or she has been on academic probation at some time during enrollment in the School. However, a student who receives less than the minimum acceptable grade in two or more required courses in a single quarter may be recommended for *disenrollment* from the School whether or not he or she has been on probation previously. Similarly, students who fail to meet the conditions of their admission during their first quarter of enrollment may be recommended for *disenrollment*. The Executive Committee of the School will review all *disenrollment* recommendations and will decide the appropriate action to be taken.
6. Students who voluntarily leave the Radiologic Sciences and Therapy Division while on academic probation and who are subsequently permitted to reenroll in the program will resume their probationary status when they return.
7. A student is ineligible for reinstatement to the School of Allied Medical Professions for three consecutive quarters following *dismissal* or *disenrollment*. To apply for reinstatement, the student must petition in writing for readmission to the Radiologic Sciences and Therapy Division. The petition will be reviewed by the Executive Committee, which will decide whether or not to readmit the student taking into consideration the recommendation of the division director.

### **Professional Probation**

1. Any student whose professional behavior or interpersonal skills are judged unsatisfactory or unethical may be placed on professional probation by the Executive Committee. This probation may be lifted by demonstration of behavior specified in the conditions of probation. Professional probation must be lifted behaviorally, not cognitively, and may constitute reason for *disenrollment*, just as does the academic probation.
2. The student will first receive an official oral warning regarding the unprofessional behavior. If the behavior does not improve within 4 weeks, the student will be placed on professional probation and receive notification of this status via a written letter. If the student fails to meet the criteria established in the written notification, the Department will move to disenroll the student from the program.

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### **Appeal Process**

1. The student may appeal a specific grade or academic practice by following procedures outlined in The Ohio State University Code of Student Conduct.
2. Responsible individuals in the Radiologic Sciences and Therapy Division should be: first, the instructor; then, if necessary, the division director; and finally, Director of the School of Allied Medical Professions, in that order.
3. The student has the right to appeal professional probation to the Director of the School of Allied Medical Professions. An appeal of a decision must be submitted in writing and postmarked or hand delivered within ten (10) calendar days after the date on which written notice of the decision is sent to the student. Each student shall be limited to one appeal. The decision of the Director of the School of Allied Medical Professions is final.

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**Traditional Program – Radiography**

**Program Prerequisites**

1. Students applying for junior year admission should have completed approximately 90 quarter (60 semester) credit hours including all of the prerequisite courses or their equivalent prior to enrollment in the professional program. All program prerequisite courses must be completed with a grade of C- or better by the end of Spring Quarter prior to enrollment in the professional program. Maximum admission consideration will be given to applicants who have completed the majority of the science prerequisites prior to application.
2. Prerequisite courses include:
  - A. Allied Medicine 200, 500, 648
  - B. Anatomy 199.04 or 200
  - C. Biology 101 or 113
  - D. Chemistry 101 or 121
  - E. A Communication course
  - F. CPR Certification
  - G. CS&E 100 –for business minor in place of AM 648
  - H. EEOB 232
  - I. English 110
  - J. GEC Second Writing
  - K. Math 148 or higher
  - L. Physics 111 and 112
  - M. Rad Sci 200
  - N. Statistics 135 or 145
3. A limited number of students with a maximum of 45 quarter credit hours completed when they apply may be accepted into the program at the start of their sophomore year. Applicants for sophomore admission shall have completed the following prerequisite courses prior to early enrollment into the program:
  - A. Biology 101 or 113
  - B. Chemistry 101 or 121
  - C. English 110
  - D. Math 148 or higher
  - E. Physics 111 and 112
  - F. Statistics 135 or 145

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4. All program prerequisites listed in #2 above must be completed with a grade of C- or better by the end of Spring Quarter prior to beginning the professional program curriculum.
5. The following plan allows the student to complete prerequisite courses as well as the General Education Curriculum (GEC) requirements prior to enrollment in the Radiologic Sciences and Therapy Division. It is presumed that students following the plan will enter the University with sufficient preparation to begin Math 148 (college algebra). Courses to fulfill the GEC may be selected from the SAMP approved list.

**Suggested Scheduling Plan - Preprofessional**

<b>Year 1</b>	<b>Year 2</b>
<b>Autumn</b> <i>Allied Medicine 100 (1)</i> <i>Math 148 or higher (4-5)</i> <i>GEC (5)</i> <i>GEC (5)</i>  <i>Total (15-16)</i>	<b>Autumn</b> <i>Physics 111 (5)</i> <i>Statistics 135 or 145 (5)</i> <i>CS&amp;E 100 (3)</i> <i>GEC (5)</i>  <i>Total (18)</i>
<b>Winter</b> <i>Chemistry 101 or 121 (5)</i> <i>Allied Medicine 500 (3)</i> <i>GEC (5)</i>  <i>Total (13)</i>	<b>Winter</b> <i>Physics 112 (5)</i> <i>EEOB 232 (5)</i> <i>GEC (5)</i>  <i>Total (15)</i>
<b>Spring</b> <i>Biology 101 or 113 (5)</i> <i>English 110 (5)</i> <i>GEC (5)</i>  <i>Total (15)</i>	<b>Spring</b> <i>Anatomy 199.04 (5)</i> <i>Communication (5)</i> <i>Rad Sci 200 (2)</i> <i>GEC (5)</i>  <i>Total (17)</i>

*(Total 93-94 cr hr)*

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### **Professional Curriculum**

1. The professional program is thirteen (13) quarters in length, including the summer between the third and fourth year, with the final seven (7) quarters being completed in sequence. There is no provision for part-time or evening-only enrollment. During the final two years, students perform imaging procedures on patients during clinical education rotations. As the program progresses, students work with more difficult cases and during the final year, students choose to specialize in a post-primary clinical or non-clinical RadSci 550 practicum. Students elect to enroll in one of five areas of specialization: *professional practice, education, management, quality management, or radiology informatics*. Students will enroll in the appropriate RadSci 550 course specific to the area of specialization for 3 quarters during the senior year and students are expected to complete three directed electives pertinent to the RadSci 550 specialty prior to graduation. Students must maintain a passing grade in RadSci 540 in order to continue in the specialty practicum.
2. Directed electives specific to the area of post-primary specialization in radiography are required to assist the student's professional development. Directed electives must be approved by the faculty members coordinating the specific RadSci 550 practicum prior to student enrollment and must be completed prior to graduation.
3. Following graduation, students are eligible to apply to sit for the national primary examination in Radiography from the American Registry of Radiologic Technologists and passing the primary examination will qualify the graduate to apply for an Ohio Radiographer License. The Ohio State University Radiologic Sciences and Therapy Division Radiography track is accredited by the North Central Association of Colleges and Schools and The Ohio Department of Health.

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**Scheduling Plan – Radiography Professional Track**

<b>Year 3</b>	<b>Year 4</b>
<b>Autumn</b> Rad Sci 310 (3) Rad Sci 411 (4) Rad Sci 425 (3) Rad Sci 440.01 (4) <p align="right"><i>Total (14)</i></p>	<b>Autumn</b> Rad Sci 530 (4) Rad Sci 540.03 (4) Rad Sci 550.## (2) Allied Medicine 505 (3) <p align="right"><i>Total (13)</i></p>
<b>Winter</b> Rad Sci 412 (4) Rad Sci 471 (3) Rad Sci 440.02 (4) Rad Sci 672 (3) Allied Medicine 680.01 (3) <p align="right"><i>Total (17)</i></p>	<b>Winter</b> Rad Sci 670 (3) Rad Sci 540.04 (4) Rad Sci 550.## (2) Rad Sci 615 (3) Allied Medicine 506 (3) Directed Elective (3) <p align="right"><i>Total (18)</i></p>
<b>Spring</b> Rad Sci 426 (4) Rad Sci 440.03 (4) Allied Medicine 601 (4) <p align="right"><i>Total (12)</i></p>	<b>Spring</b> Rad Sci 630.01 (1) Rad Sci 540.05 (4) Rad Sci 550.## (2) Allied Medicine 630 (3) <p align="right"><i>Total (10)</i></p>
<b>Summer</b> Rad Sci 540.01 (5) Rad Sci 540.02 (5) Rad Sci 550.42 (1) Pharmacology 600 (3) <p align="right"><i>Total (14)</i></p>	

(Total 97 cr hr)

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**Directed Elective Listing for Radiography Track**

AM 407 – Role of Integrative Medicine in Society (5)

AM 425 – Critical Phases in Life (3)

AM 592 – Interactions in Health Care (3)

AM 601 – Death, Loss, & Grief from Multiple Perspectives (4)

AM 607 – Role of Integrative Medicine in Society (5)

AMIS 310 – Foundations of Accounting & MIS (5)

Bus Fin 420 – Foundations of Finance (4)

Bus MHR 400 – Foundations of Management & Human Resources (4)

Bus Mgt 430 – Foundations of Operations Management (4)

Bus M&L 450 – Foundations of Marketing (4)

CS&E 101 – Computer Assisted Problem Solving (4)

EDU-PAES 102 – First Aid (2)

EDU-PAES 201 – Current Concepts in Community Health (3)

EDU-PAES 204 – Sexuality and Health (3)

EDU-PAES 250 – How to Avoid Dying from Cancer Now and Later (2)

EDU-PAES 314 – AIDS: What Every College Student Should Know (3)

EDU-PAES 649 – General Methods in Adult Education (3)

HIMS 650 – Health Care Information Systems (3)

HIMS 654 – Computer-Based Health Information Systems, Planning & Analysis (3)

RAD SCI H210 – Interdisciplinary Research: Osteoporosis Diagnosis, Prevention, and Treatment (3)

**Management (Business Minor) - must enroll in CS&E 100 and Econ 200 and MUST complete all of the following courses**

AMIS 310 – Foundations of Accounting & MIS (5)

Bus Mgt 430 – Found. of Operations Mgmt (4)

Bus Fin 420 – Foundations of Finance (4)

Bus M&L 450 – Found. of Marketing (4)

Bus MHR 400 – Found. of Mgmt & HR (4)

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**Traditional Program – Radiation Therapy**

**Program Prerequisites**

1. Students applying for junior year admission should have completed approximately 90 quarter (60 semester) credit hours including all of the prerequisite courses or their equivalent prior to enrollment in the professional program. All program prerequisite courses must be completed with a grade of C- or better by the end of Spring Quarter prior to enrollment in the professional program. Maximum admission consideration will be given to applicants who have completed the majority of the science prerequisites prior to application.
2. Prerequisite courses include:
  - A. Allied Medicine 200, 500, 648
  - B. Anatomy 199.04 or 200
  - C. Biology 101 or 113
  - D. Chemistry 101 or 121
  - E. A Communication course
  - F. CPR Certification
  - G. CS&E 100 –for business minor in place of AM 648
  - H. EEOB 232
  - I. English 110
  - J. GEC Second Writing
  - K. Math 150
  - L. Physics 111 and 112
  - M. Rad Sci 200
  - N. Statistics 135 or 145
3. A limited number of students with a maximum of 45 quarter credit hours completed when they apply may be accepted into the program at the start of their sophomore year. Applicants for sophomore admission should have completed the following prerequisite courses prior to early enrollment into the program:
  - A. Biology 101 or 113
  - B. Chemistry 101 or 121
  - C. English 110
  - D. Math 150
  - E. Physics 111, 112

F. Statistics 135 or 145

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4. All program prerequisites listed in #2 above must be completed with a grade of C- or better by the end of Spring Quarter prior to beginning the professional program curriculum.
  
5. The following plan allows the student to complete prerequisite courses as well as the General Education Curriculum (GEC) requirements prior to enrollment in the Radiologic Sciences and Therapy Division. It is presumed that students following the plan will enter the University with sufficient preparation to begin Math 150. Courses to fulfill the GEC may be selected from the SAMP approved list.

**Suggested Scheduling Plan – Preprofessional**

<b>Year 1</b>	<b>Year 2</b>
<p><b>Autumn</b>                      Allied Med 100 (1)                      Math 148 or higher (4-5)                      GEC (5)                      GEC (5)</p> <p style="text-align: right;"><i>Total (15-16)</i></p>	<p><b>Autumn</b>                      Physics 111 (5)                      Statistics 135 or 145 (5)                      CS&amp;E 100 (3)                      GEC (5)</p> <p style="text-align: right;"><i>Total (18)</i></p>
<p><b>Winter</b>                      Chemistry 101 or 121 (5)                      Allied Medicine 500 (3)                      GEC (5)</p> <p style="text-align: right;"><i>Total (13)</i></p>	<p><b>Winter</b>                      Physics 112 (5)                      EEOB 232 (5)                      GEC (5)</p> <p style="text-align: right;"><i>Total (15)</i></p>
<p><b>Spring</b>                      Biology 101 or 113 (5)                      English 110 (5)                      GEC (5)</p> <p style="text-align: right;"><i>Total (15)</i></p>	<p><b>Spring</b>                      Anatomy 199.04 (5)                      Communication (5)                      Rad Sci 200 (2)                      GEC (5)</p> <p style="text-align: right;"><i>Total (17)</i></p>

(Total 93-94 cr hr)

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### **Professional Curriculum**

1. The professional program is thirteen (13) quarters in length, including the summer between the third and fourth year, with the final 7 quarters being completed in sequence. There is no provision for part-time or evening-only enrollment. During the two professional years, students perform therapy procedures on patients during clinical education rotations.
2. Following graduation, students are eligible to apply to sit for the national primary examination in Radiation Therapy from the American Registry of Radiologic Technologists and passing the primary examination will qualify the graduate to apply for an Ohio Radiation Therapy License.
3. The Ohio State University Radiologic Sciences and Therapy Division, Radiation Therapy track is accredited by the Joint Committee on Education in Radiologic Technology, 20 North Wacker Dr. Suite 2850, Chicago, IL, 60606-3182; (312) 704-5300. The program follows the standards set forth by the JRCERT for accredited Radiation Therapy Programs. The Standards may be found on the Radiation Therapy faculty member's bulletin board located in the James Cancer Hospital. Students, faculty and staff have the right to contact the JRCERT to report any standard the program is not in compliance with. The Radiologic Sciences and Therapy Division will then resolve the noncompliance issue with the JRCERT immediately upon notification.

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**Scheduling Plan – Radiation Therapy Professional Track**

Year 3	Year 4
<b>Autumn</b> Rad Sci 311 (3) Rad Sci 425 (3) Rad Sci 414 (3) Rad Sci 441.01 (3)  <i>Total (12)</i>	<b>Autumn</b> Rad Sci 485 (2) Rad Sci 530 (4) Rad Sci 541.03 (4) Allied Medicine 505 (3) Allied Medicine 680.01 (3)  <i>Total (16)</i>
<b>Winter</b> Rad Sci 415 (3) Rad Sci 481 (3) Rad Sci 573 (2) Rad Sci 441.02 (4) Rad Sci 672 (3)  <i>Total (15)</i>	<b>Winter</b> Rad Sci 671 (3) Rad Sci 541.04 (4) Rad Sci 595 (2) Allied Medicine 506 (3) Allied Medicine 601 (4)  <i>Total (16)</i>
<b>Spring</b> Rad Sci 416 (1) Rad Sci 483 (5) Rad Sci 574 (5) Rad Sci 441.03 (3)  <i>Total (14)</i>	<b>Spring</b> Rad Sci 618 (3) Rad Sci 630.02 (1) Rad Sci 541.05 (5) Allied Medicine 630 (3)  <i>Total (12)</i>
<b>Summer</b> Rad Sci 482 (3) Rad Sci 541.01 (4) Rad Sci 541.02 (4) Rad Sci 550.42 (1)  <i>Total (12)</i>	

(Total 97 cr hr)

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Category: General Program Policies

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**Traditional Program – Diagnostic Medical Sonography**

**Program Prerequisites**

1. Students applying for junior year admission should have completed approximately 90 quarter (60 semester) credit hours including all of the prerequisite courses or their equivalent prior to enrollment in the professional program. All program prerequisite courses must be completed with a grade of C or better by the end of Spring Quarter prior to enrollment in the professional program. Maximum admission consideration will be given to applicants who have completed the majority of the science prerequisites prior to application.
2. Prerequisite courses include:
  - A. Allied Medicine 200, 500, 648
  - B. Anatomy 199.04 or 200
  - C. Biology 101 or 113
  - D. Chemistry 101 or 121
  - E. Communication course
  - F. CPR Certification
  - G. CS&E 100 –for business minor in place of AM 648
  - H. EEOB 232
  - I. English 110
  - J. GEC Second Writing
  - K. Math 148
  - L. Physics 111 and 112
  - M. Rad Sci 200
  - N. Statistics 135 or 145
3. A limited number of students with a maximum of 45 quarter credit hours completed when they apply may be accepted into the program at the start of their sophomore year. Applicants for sophomore admission should have completed the following prerequisite courses prior to early enrollment into the program:
  - A. Biology 101 or 113
  - B. Chemistry 101 or 121
  - C. English 110
  - D. Math 150
  - E. Physics 111 and 112
  - F. Statistics 135 or 145

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4. All program prerequisites listed in #2 above must be completed with a grade of C- or better by the end of Spring Quarter prior to beginning the professional program curriculum.
5. The following plan allows the student to complete prerequisite courses as well as the General Education Curriculum (GEC) requirements prior to enrollment in the Radiologic Sciences and Therapy Division. It is presumed that students following the plan will enter the University with sufficient preparation to begin Math 148 (college algebra). Courses to fulfill the GEC may be selected from the SAMP approved list.

**Suggested Scheduling Plan – Preprofessional**

<b>Year 1</b>	<b>Year 2</b>
<b>Autumn</b> <i>Allied Medicine 100 (1)</i> <i>Math 148 or higher (4-5)</i> <i>GEC (5)</i> <i>GEC (5)</i>  <i>Total (15-16)</i>	<b>Autumn</b> <i>Physics 111 (5)</i> <i>Statistics 135 or 145 (5)</i> <i>CS&amp;E 100 (3)</i> <i>GEC (5)</i>  <i>Total (18)</i>
<b>Winter</b> <i>Chemistry 101 or 121 (5)</i> <i>Allied Medicine 500 (3)</i> <i>GEC (5)</i>  <i>Total (13)</i>	<b>Winter</b> <i>Physics 112 (5)</i> <i>EEOB 232 (5)</i> <i>GEC (5)</i>  <i>Total (15)</i>
<b>Spring</b> <i>Biology 101 or 113 (5)</i> <i>English 110 (5)</i> <i>Rad Sci 200 (2)</i> <i>GEC (5)</i>  <i>Total (17)</i>	<b>Spring</b> <i>Anatomy 199.04 (5)</i> <i>Communication (5)</i> <i>GEC (5)</i> <i>Rad Science 200 (2)</i>  <i>Total (17)</i>

*(Total 95 cr hr)*

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**Professional Curriculum**

6. The professional program is thirteen (13) quarters in length, including the summer between the third and fourth year, with the final 7 quarters being completed in sequence. There is no provision for part-time or evening-only enrollment. During the two professional years, students perform imaging procedures on patients during clinical education rotations.
7. Following graduation, students are eligible to apply to sit for the national examination in sonography from the American Registry of Radiologic Technologists and The American Registry of Diagnostic Medical Sonography. The Ohio State University Radiologic Sciences and Therapy Division Medical Sonography track is accredited by the North Central Association of Colleges and Schools.

**Scheduling Plan – Medical Sonography Professional Track**

<b>Year 3</b>	<b>Year 4</b>
<b>Autumn</b> <i>Rad Sci 310 (3)</i> <i>Rad Sci 420 (3)</i> <i>Rad Sci 425 (3)</i> <i>Rad Sci 442.01 (3)</i> <i>Allied Medicine 601 (4)</i> <i>Total (16)</i>	<b>Autumn</b> <i>Rad Sci 520 (3)</i> <i>Rad Sci 530 (4)</i> <i>Rad Sci 542.03 (3)</i> <i>Allied Medicine 505 (3)</i> <i>Total (13)</i>
<b>Winter</b> <i>Rad Sci 431 (4)</i> <i>Rad Sci 486 (3)</i> <i>Rad Sci 442.02 (3)</i> <i>Rad Sci 672 (3)</i> <i>Allied Medicine 680.01 (3)</i> <i>Total (16)</i>	<b>Winter</b> <i>Rad Sci 521 (3)</i> <i>Rad Sci 542.04 (4)</i> <i>Rad Sci 550.81 (2)</i> <i>Allied Medicine 506 (3)</i> <i>Total (12)</i>
<b>Spring</b> <i>Rad Sci 430 (4)</i> <i>Rad Sci 487 (3)</i> <i>Rad Sci 442.03 (3)</i> <i>Allied Medicine 425 (3)</i> <i>Total (13)</i>	<b>Spring</b> <i>Rad Sci 522 (3)</i> <i>Rad Sci 542.05 (4)</i> <i>Rad Sci 550.81 (2)</i> <i>Rad Sci 630.04 (1)</i> <i>Allied Medicine 630 (3)</i> <i>Total (13)</i>
<b>Summer</b> <i>Rad Sci 432 (3)</i> <i>Rad Sci 630.03 (1)</i> <i>Rad Sci 542.01 (5)</i> <i>Rad Sci 488 (3)</i> <i>Rad Sci 542.02 (5)</i> <i>Total (17)</i>	

*(Total 100 cr hr)*

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### **Baccalaureate Degree Completion Program**

#### **Program Overview**

The Radiologic Sciences & Therapy Baccalaureate Degree Completion Program is designed for students who are registered in good standing with The American Registry of Radiologic Technologists (ARRT), the American Registry of Diagnostic Medical Sonography (ARDMS), or the Nuclear Medicine Technology Certification Board (NMTCB) and allows radiologic science professionals to earn credit for their previous medical imaging/therapy and college education. Credit may be earned by either the transfer of college credit or by providing documentation verifying completion of an AMA approved educational program in a medical imaging field and examination credit.

Students who are graduates from an accredited Associate Degree Radiography, Radiation Therapy, Nuclear Medicine, or Sonography Program will be recommended to receive transfer credit for coursework specific to the stated modality. Students who are graduates from an accredited Certificate Program in Radiography, Radiation Therapy, Nuclear Medicine or Sonography may receive EM and special technical transfer credit up to a maximum of 45 quarter hours.

#### **Program Prerequisites**

1. Students may apply any quarter but will only be accepted into the program for an Autumn Quarter admission. Course work may be completed through the Office of Continuing Education or through enrollment in AMP prior to enrollment in the Division.
2. Students must enroll in OSU courses the first quarter of enrollment in the Division.
3. In order to be eligible for full acceptance into the Radiologic Sciences & Therapy Program the applicant must:
  - A. Satisfactorily demonstrate academic success at the post-secondary level as evidenced by achieving a minimum cumulative point hour ratio of not less than 2.5 on all work taken at all accredited academic institutions.

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- B. Students must have completed 50 credit hours of General Education Curriculum courses with a C- or higher by the end of Summer Quarter prior to enrollment in the professional program.

### **University General Education Curriculum Requirements**

1. Courses to fulfill the GEC requirements must be selected from the SAMP approved list. Credit must be earned by enrollment, transfer credit, or EM credit. The OSU Professional Admissions Office will evaluate for credit all non-Radiologic Sciences & Therapy courses.
2. University GEC Requirements
  - A. Writing and Related Skills (10 Hours)  
Eng. 110; second writing course (367.xx)
  - B. Quantitative and Logical Skills (9-10 Hours)  
Math 104 or higher
  - C. Natural Science (20 Hours)  
Physiology, Anatomy, 2 additional sciences
  - D. Social Science (10 Hours)
  - E. Arts and Humanities (10 Hours)
  - F. History sequence (10 Hours)
  - G. Breadth Courses (10 Hours)
  - H. Diversity Experiences (0-15 Hours) GEC requires a course in Social Diversity in the US, suggested overlap with GEC Social Science course.

### **Professional Curriculum**

1. Students must earn a total of 182 credit hours to graduate with a baccalaureate degree and a minimum of 45 credit hours must be earned at The Ohio State University to establish residency. Students should enroll in at least one course per quarter to show adequate progress toward completion; however, the Division must be notified if circumstances arise that make it necessary for a student to drop a course or to not enroll for a particular quarter. Non-enrollment of three consecutive quarters will be grounds for disenrollment from the BS Degree Completion Program and the Division.

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2. All students must complete the following core curriculum course work:
  - A. Human Resource Mgmt: AM 630 or BUS MHR 400
  - B. Research Design: AM 680.01, EDU P& L 785, Psychology 300 or Psychology 321
  - C. Area of Specialization
    - a. Computed Radiography
    - b. Magnetic Resonance Technology
    - c. Mammography
    - d. Radiology Informatics
    - e. Radiologic Sciences Instruction
    - f. Quality Management in Diagnostic Medical Imaging
3. A post-primary clinical practicum area must be completed; however it cannot be completed in a specialty area in which an individual already holds a post-primary certification.
4. Students may opt to complete a two year certificate program for radiography, radiation therapy, or sonography in place of a clinical practicum if clinical space is available; however the certificate cannot be completed in a specialty area in which the individual already holds a primary certification. Students choosing this option will be required to complete the following additional prerequisite course work prior enrolling in the certificate program:
  - A. Physics 111 & 112
  - B. Chemistry 101 or 121
  - C. Math 148 (radiography & sonography); 150 (radiation therapy)
5. Acceptance into the BS Degree Completion Program does not guarantee acceptance into a certificate program in radiography, sonography, or radiation therapy. Each certificate program has a limited number of positions available due to limited clinical rotation sites.

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**Honors Programs**

**School of Allied Medical Professions Honors Program**

The SAMP Honors Program offers undergraduate students the ability to distinguish themselves through academic achievement, research, and service. The Honors opportunities available in the School consist of three components which may be pursued separately, or combined. Details of Honors programs are provided in a separate manual, on-line at [www.amp.osu.edu](http://www.amp.osu.edu).

1. Comprehensive Honors Program
  - A. Leads to Graduation with Honors in Allied Medical Professions
  - B. Students who wish to maintain Honors status throughout their undergraduate program have the opportunity to create their own plan to combine honors courses, research, scholarship, leadership, and community service over and above the requirements of their major.
  - C. Assessed on a points scale, successful completion of the Honors Plan entitles the student to graduate with Honors in Allied Medical Professions.
2. Senior Research Thesis Project
  - A. Leads to Graduation with Distinction
  - B. Junior level students may elect to complete a Senior Research Thesis Project during their senior year and graduate “with distinction” in their field of study.
3. Latinate Honors - Latinate honors designations are based solely on cumulative GPA with a **minimum of 90 credit hours** completed at OSU. These honors are conferred at graduation, and SAMP awards these honors as follows: cum laude (3.50-3.60); magna cum laude (3.70-3.89); summa cum laude (3.90-4.00).

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Revised Date: June 22, 2007

### **Lambda Nu**

The Ohio State University is the Alpha Ohio Chapter of Lamda Nu is a National Honor Society for the radiologic and imaging sciences. The purpose of this Chapter is to foster academic scholarship; promote research and investigation in the radiologic sciences; and to recognize exemplary professionalism and ethics. Radiologic Science and Therapy students qualify for membership during their senior year or upon graduation from the program according to the following standards:

1. Professional course GPA above 3.0 on a 4.0 scale at completion of professional program.
2. Participation in independent research; completion of an honors project; submission of a scientific poster to the Denman Undergraduate Forum; submission of a scientific poster to a State, Regional, or National Professional Conference; submission of a scholarly paper to a State, Regional, or National Professional Conference, or a journal for publication.
3. Participation in a University, School, or Division Committee or Organization
4. Participation in a State, Regional, or National Professional Organization

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### **Academic Misconduct**

1. Academic integrity is essential to maintaining an environment that fosters excellence in teaching, research, and other educational and scholarly activities. Thus, The Ohio State University and the Committee on Academic Misconduct (COAM) expect that all students have read and understand the University's *Code of Student Conduct*, and that all students will complete all academic and scholarly assignments with fairness and honesty. Students must recognize that failure to follow the rules and guidelines established in the University's *Code of Student Conduct* and on program course syllabi may constitute "Academic Misconduct."
  
2. The Ohio State University's *Code of Student Conduct* (Section 3335-23-04) defines academic misconduct as: "Any activity that tends to compromise the academic integrity of the University, or subvert the educational process." Ignorance of the University's *Code of Student Conduct* is never considered an "excuse" for academic misconduct, so each student is highly encouraged to review the *Code of Student Conduct* and, specifically, the sections dealing with academic misconduct. This can be accessed via a link on the program web page or at [http://studentaffairs.osu.edu/resource\\_csc.asp](http://studentaffairs.osu.edu/resource_csc.asp).
  
4. Academic misconduct includes a wide scope of student behaviors, which include, but are not limited to:
  - A. Violation of program regulations;
  - B. Violation of course rules;
  - C. Knowingly providing or receiving information during a course exam or program assignment;
  - D. Possession and/or use of unauthorized materials during a course exam or program assignment;
  - E. Knowingly providing or using assistance in the laboratory or on a course assignment, unless such assistance has been authorized specifically by the course instructor;
  - F. Submission of work not performed in a course: This includes (but is not limited to) instances where a student fabricates and/or falsifies data or information for a laboratory experiment or other academic assignment. It also includes instances where a student submits data or information (such as a lab report or term paper) from one course to satisfy the requirements of another course, unless submission of such work is permitted by the instructor of the course for which the work is being submitted;
  - G. Submitting plagiarized work for a course/program assignment;
  - H. Serving as or asking another student to serve as a substitute while taking an exam;

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- I. Alteration of grades in an effort to change earned credit or a grade;
  - J. Alteration and/or unauthorized use of University forms or records.
4. If a faculty or staff member suspects that a student has committed academic misconduct in any course, they are obligated by University Rules to report suspicions to the Committee on Academic Misconduct (COAM) If COAM determines the student has violated the University's *Code of Student Conduct* (i.e., committed academic misconduct), the sanctions for the misconduct could include a failing grade in the course and suspension or dismissal from the University.

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### **Students with Special Needs**

1. The Office for Disability Services (ODS) provides services, auxiliary aids, and accommodations for students with documented disabilities. Their mission is to collaborate with and empower students who have disabilities in order to coordinate support services and programs that enable equal access to an education and university life. Any student who may need an accommodation based on the impact of a disability should contact the ODS at 292-3307 or visit them at 150 Pomerene Hall. Students are also requested to arrange a private meeting with their faculty advisor to discuss their specific needs.
2. There are two legal mandates that protect students from discrimination and ensure equal access to all aspects of university life. These laws include Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act (ADA) of 1990. The ODS works with faculty, staff, and students to make sure services are in compliance with the law by offering the following six main services areas:
  - A. Exam Accommodations
  - B. Alternative Media
  - C. Sign Language Interpreting/Transcribing Services
  - D. Assistive Technology and Training Center (ATTC)
  - E. Note Taking Assistance
  - F. Counseling and Auxiliary Aids Staff Support
3. Upon admittance to the Division of Radiologic Sciences and Therapy, students will receive, sign and return a Technical Standards statement prior to the commencement of the didactic program. The Technical Standards are cognitive and psychomotor skills that are expected of individuals practicing as imaging professionals. If these Technical Standards can not be met by the student, the Division will work with the student and the Office of Disability Services to determine reasonable accommodations for both classroom and clinical education needs. The student will be notified as to whether the necessary accommodations can be reasonably met by the didactic and clinical program.

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## Attendance

### Didactic Courses

1. Students are expected to attend all regularly scheduled lectures, laboratories and recitations unless illness or a legitimate excuse such as religious participation makes it inadvisable or impossible to be present. The student is required to inform the Division of any event which will prevent attendance at regularly scheduled academic assignments. Students are responsible to the instructor for each course regarding the instructor's policy concerning absences. Repeated absences in any course may lead to failure of the course and disciplinary action.
2. Didactic courses within the Division are intended to function as a work group in which every member is responsible to provide insights and questions about the course content and readings for the shared discussion. Students are expected to be prepared by carefully reading the material prior to class and to be fully engaged in the discussion. The student will be the responsible for obtaining, understanding, and completing the material covered during an absence. Specific attendance policies for each course are listed on the course syllabus.
3. In accordance with University Faculty Rule 3335-7-51, marking of non-attendance may also accompany marks for all course grading options. A numeral is given to indicate the week a student stopped attending class. For a student who does not attend class for three or more weeks, an "E", "U", or "NP" will be entered as the Fn/Alt grade.

### Clinical Courses

1. Students are scheduled for clinical rotations during each quarter of their professional program. These rotations are designed to assist the student in developing the skills, values and attitudes that are essential in all radiologic science professions, therefore students are expected to attend all regularly scheduled clinical assignments unless illness (see Policy 3.03) or a legitimate excuse such as religious participation makes it inadvisable or impossible to be present. The student is required to inform both the Division and the clinical site of any event which will prevent attendance at regularly scheduled clinical assignments as stated in the course syllabus, prior to the scheduled start of the rotation. All students not calling by phone and reporting a clinical absence prior to the scheduled time shall be subject to official warning. Future occurrences may lead to professional probation, failure of the course and disciplinary action.

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2. Students are required to follow the attendance policy stipulated on the clinical course syllabus. All make-up time must be completed by the deadline published in the quarterly course syllabus.
3. In accordance with University Faculty Rule 3335-7-51, marking of non-attendance may also accompany marks for all course grading options. A numeral is given to indicate the week a student stopped attending class. For a student who does not attend class for three or more weeks, an "E", "U", or "NP" will be entered as the Fn/Alt grade.

### **Extended Periods of Absence**

1. Students missing an extended period of time due to a legitimate excuse such as pregnancy, military duty, or an issue covered by ADA must meet with the program director and faculty members to jointly determine the acceptable period of absence. All students returning to the program after an extended leave must demonstrate continued competency in both didactic and clinical courses through examination and clinical simulations. Remedial coursework may be required to ensure adequate progression through the program. For additional information, see Policies 1.09 (Students with Special Needs) and 1.11 (Military Leave).
2. Enrollment of a pregnant student requires careful planning of both the didactic and clinical components of the Radiologic Sciences and Therapy curriculum. It is the student's choice to declare her pregnancy to the division director as soon as a pregnancy is suspected in order to protect the health of the mother and fetus. The student shall receive appropriate radiation safety counseling and shall be issued a fetal radiation dosimeter. Clinical assignments may be altered during the pregnancy.
  - A. The Radiologic Sciences and Therapy curriculum is cumulative, requiring completion of coursework in sequential order. Therefore it does not allow for program interruptions and withdrawal usually results in a student being unable to continue the program until the following year. If the pregnant student in good academic standing must withdraw from a program, she will be eligible for reinstatement at the completion of her pregnancy with health clearance from her physician. Maintaining communication with the division director throughout the pregnancy is extremely important.

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## **Military Duty**

### **Reserve Duty**

1. Students who are called to report for reserve duty for less than 4 weeks should notify the division director and program faculty as soon as the notice is served. Arrangements will be made on an individual basis regarding missed course work and clinical education time.

### **Active Duty**

1. In accordance with the University Registrar's policy regarding students called to active military duty, you are encouraged to withdraw from all OSU courses. It is anticipated that if you are recalled you may be required to serve for up to 24 months and it will be virtually impossible for you to try to continue your course work from afar and be successful.
2. Students called to active duty must present their military orders. They shall coordinate with the SAMP Student Affairs Office and their academic advisor to formally withdrawal from the university. The University will refund 100% of the instructional fees paid by student for courses they cannot complete, however refunds will only be made after the student has provided a copy of the military order directing the student to active military duty.
3. The Office of Information Technology will delete an OSU e-mail account if it is inactive and they will send warning e-mails to notify the student of the deactivation. If the student responds to the warning e-mail letting OIT know that they have been called to active duty the account will not deactivated. The e-mail warning is sent to all affected accounts 6 weeks before the actual deletions. If the student fails to respond to these warning e-mails the account will be deactivated.

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4. The Radiologic Sciences and Therapy curriculum is cumulative, requiring completion of coursework in sequential order. Therefore it does not allow for program interruptions. If the student is in good academic standing they will be eligible for reinstatement upon returning from active duty. The returning student must contact the division director. The division director will contact Student Affairs and request an update in the student database, thus giving the student a segment and a window to schedule classes the following quarter. Please consult the OSU Registrar's Public Support Web-site for more information.

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### Codes of Ethics

1. Students are required to abide by the following Codes of Ethics while enrolled in the Radiologic Sciences and Therapy Division. Ethics violations will result in professional probation and may lead to disenrollment from the Division. Students are required to uphold the standards of the:
  - A. OSU SAMP Student Codes of Ethics
  - B. The American Registry of Radiologic Technologists Code of Ethics
  - C. The American Registry of Diagnostic Medical Sonography Code of Ethics
  
2. Students are expected to follow practice standards and scopes of practice identified by radiologic science professional organizations in accordance with State and Federal agencies requirements.
  
3. In order to remain in the Radiologic Sciences and Therapy Division, students are required to meet certification eligibility requirements. Students must meet basic requirements in ethics and education to apply to sit for the certification examination. Items which require an ethics investigation into eligibility include conviction of a crime, including a felony, a gross misdemeanor, or a misdemeanor with the exception of speeding and parking violations. **All alcohol and drug related violations must be reported. If a student is in violation of the ethics requirement, they must immediately inform the division director.** If a student is deemed ineligible for certification, they will be disenrolled from the Division.

## **Information Technology System Security**

### **Clinical Information and Data Systems**

- A. It is the policy of The Radiologic Sciences and Therapy Division that patient-identifiable information and management information is confidential and shall be protected. The security and confidentiality of the clinical site Hospital, Radiation Therapy Information Systems, and Radiology Information Systems are maintained through controlled access and distribution of reports, and authorized release of confidential information. Any individual obtaining information through the Hospital, Radiation Therapy Information Systems, and Radiology Information Systems must adhere to the Division and the specific clinical site guidelines regarding confidentiality.
- B. Access to information shall be limited to situations in which a legitimate need and purpose can be demonstrated. Access to computer files shall be controlled through security codes known only to authorized users. Passwords are intended for individual use only, are confidential and should not be posted, shared, or distributed, and should be changed every six months.
- C. In order to obtain an authorized password for clinical use, the student must complete the appropriate Security Authorization Request Forms and sign the Confidentiality Statement.
- D. All students involved in the creation, use, maintenance, transport and/or destruction of patient data shall be aware of the obligation to preserve the confidentiality of the data and shall complete four confidentiality computer-based training modules. Your hospital student ID badge number is required to access the system.
  - 1. The CBL's address issues related to protecting patient information, thus meeting HIPAA training requirements relating to specific knowledge and behaviors to protect patients' rights, and to implement certain provisions. The modules cover both hospital and offices issues and are intended to help in everyday practice.
  - 2. Contents include: a general overview of HIPAA; specific patient rights; administrative requirements and office practice issues; special situations, disclosures by law, marketing, and fundraising. Tests at the end of each module are designed assess mastery of the information presented, and are recorded on your transcript. Please print a copy of

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this page and return it to your advisor at the completion of the modules.

### **SAMP Student Computers**

- A. Students will need an account to access the computer labs in Atwell Hall. The on-line request form is available at:<http://amp.osu.edu/InfoSys/sampacct.htm>
- B. Students are prohibited under **any** circumstances to install any software on the computers.
- C. Students are responsible for saving their work on Memory Drive/Sticks which they must supply. Students may save data on their personal "User (U:)" network drive which only they have access. Students can also save data to the Shared Student (S:) drive, but this is a public domain and files can be copied, edited, deleted at anytime by anyone.
- D. Food and drink are not permitted in the computer labs at any time. All computer lab areas are to be left clean and free of debris (paper, old disks, etc.).
- E. Violations of the rules of use will result in suspension of the student's use of the computer lab facilities.
- F. Please report any problems to Bruce Noskowiak: phone 688-5487; pager 731-3817, or via the website: <http://amp.osu.edu/InfoSys/ban/>.

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Category: Admission Policies

Effective Date: June 22, 2007

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**Release of Student Information**

1. The Ohio State University policies and procedures regarding FERPA can be found on line at: [http://www.ureg.ohiostate.edu/ourweb/more/ferpa\\_pg1.html](http://www.ureg.ohiostate.edu/ourweb/more/ferpa_pg1.html). FERPA creates certain problems for seniors and for all students who may be subjects of news stories. The School of Allied Medical Professions cannot release names and addresses or certain other data without prior student permission. Faculty and staff are also prohibited from releasing student/graduate credentials to prospective employers without a written request or permission.
2. Students who want to authorize release of information by faculty/staff members (for letters of recommendation, news releases, job references, etc.) should complete a "Consent for Release of Education Records" authorization form available on the School's website on the "Current Students" page. The form may be completed at any time, but the graduate who expects to have prospective employers or graduate schools request information should have this form on file on or before she/she files an application to graduate.
3. If you have questions about FERPA or completing release forms, consult the Student Affairs Office at (164) 292-1706.

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**Radiation Safety**

1. **General Standards:** Students are required to become familiar with each clinical site's safe operating procedures. In addition, the Radiologic Science and Therapy Division has developed general standards itemized in this policy that is presented to students prior to working with radiation at clinical sites. Failure to follow established radiation safety techniques may lead to warning, probation or disenrollment.
  - a. All students are required to become familiar with the Ohio Department of Health standards for Radiation Protection. These documents are available electronically on the SAMP shared drive (R:\Ohio Radiation Protection Regulations).
  - b. Prior to the brachytherapy rotation, radiation therapy students are responsible to read the Nuclear Regulatory Commission's, Notice to Employees, which is posted in the James Cancer Hospital Radiation Therapy Department's hot lab and at the Gamma Knife. The James Cancer Hospital Radiation Therapy Department Radiation Safety manual is located in the Physics conference room and is available for review at any time.
  - c. In accordance with Ohio regulations regarding the instruction of personnel and training for radiation workers, general radiation safety guidelines are presented to each student in the Radiologic Sciences 425 class prior to the student initiating clinical rotations.
  - d. Prior to working in the energized lab, the students are instructed in the radiation safety and safe operating procedures of the laboratory area.
2. **Personnel Monitoring:** In accordance with Ohio State University Radiation Safety Standards (I)(B)(2)(ix) (April 1999), the Radiation Safety Section of Environmental Health & Safety is responsible for "Maintaining a program to monitor the exposure of personnel engaged in the use of radioactive materials or radiation producing equipment to insure that permissible levels of exposure are as low as possible." The Radiologic Science and Therapy Division will conform by these rules by issuing all students a personnel dosimeter (OSL) while enrolled in the program. The cost of OSL dosimeter service is approximately \$25.00 per year.

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- a. Reports: The exposure accumulated on the personnel monitor is recorded and kept on file with the Division and the OSU Office of Radiation Safety. Radiation dosimetry reports are available in the Division. In accordance with Rule 3701:1-38-10, each individual monitored for radiation will be notified in writing of their annual dose using an appropriate form. If individuals are monitored at other places of employment, it is the responsibility of that individual to provide a copy of the exposure record to the IRRP / RSO at least quarterly.
- b. Proper Use of Personnel Monitoring Devices: Students are required to follow these guidelines in the use of personnel monitoring devices:
  - i. A personnel dosimeter should be worn at all times in the laboratory and while on clinical assignment.
  - ii. The personnel dosimeter should be worn on the trunk of the body at collar level and during fluoroscopic procedures, it should be worn outside the protective lead apron.
  - iii. The student shall report to the Division immediately if the personnel dosimeter is lost, damaged or inadvertently exposed to radiation while not being worn.
  - iv. The student is responsible for storing the personnel dosimeter in a secured area, free from radiation sources when not in use.
  - v. Do not lend your personnel dosimeter to anyone. Do not wear it when you are having medical or dental x-rays of yourself.
  - vi. Personnel monitoring devices issued by the Radiologic Sciences and Therapy Division are not to be worn at any other place of employment.
  - vii. The personnel dosimeter is exchanged once a quarter and the University **must account for every monitoring device**. Lost/damaged OSLs require completion of an OSU Office of Radiation Safety form and payment a \$10.00 fee.
  - viii. Monitored personnel are required to immediately inform the RSO or IRRP in the event that a dosimeter is known or suspected to have been deceptively exposed. An example of this would be leaving a dosimeter in a radiation area when not being worn. The

RSO or IRRP will investigate circumstances of known or suspected deceptive exposures.

- c. Personnel Exposure Limits: The occupational exposure limits to ionizing radiation as established by the Ohio Department of Health (3701-38-12) are as follows:

Total Effective Dose Equivalent (Annual Whole Body Dose)	5 REM
Lens of Eye Dose	15 REM
Skin or Extremity Dose	50 REM

- d. Notification: The director of the Ohio Department of Health will be notified in writing within 30 days of the discovery of any of the following events:
- i. Any individual receiving in excess of 5 REM whole body, 15 REM to the lens of the eye or 50 REM to any extremity.
  - ii. Declared pregnant women who receive in excess of 500 mrem during their gestation period

The report to the State must include the individual's dose, the level of radiation and concentration of the radioactive material involved (as applicable), the cause of the elevated exposure and the corrective steps taken to prevent an recurrence, including the schedule for achieving conformance with applicable limits and ALARA constraints. The name, social security number and date of birth of the overexposed individual must be included in a format that is separate and detachable from the report. An overexposed embryo or fetus will be identified using the mother's data.

The Radiation Safety Officer (IRRP) will also notify the individual and perform an investigation.

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e. ALARA Limits: In an effort to maintain occupational doses “As Low As Reasonably Achievable,” various levels of personnel exposure have been established that correspond to a particular dose reduction action. These levels are a quarterly dose limit and will be evaluated during reviews conducted by the IRRP / RSO.

i. ALARA LEVEL I: 125 mrem whole body dose; 1875 mrem extremity dose

If the personnel exposure exceeds ALARA Level 1 limits, the IRRP or RSO may inquire as to potential reasons for this exposure as well as report to the radiation expert.

ii. ALARA LEVEL II: 375 mrem whole body dose; 5625 mrem extremity dose

If the personnel exposure exceeds ALARA Level 2 limits, an investigation will be conducted by the IRRP / RSO as to the cause of the exposure. A report will be submitted to the radiation expert either verbally or in written form. The radiation expert may or may not recommend corrective action based on a review of past personnel exposure.

f. Student Pregnancy: When a student thinks she may be pregnant or becomes pregnant, it is her choice to voluntarily declare her pregnancy by informing the Division Director and writing to the OSU Radiation Safety Office utilizing Form RS-13, “Declaration of Pregnancy.” Upon notification by an employee that she is pregnant, the prenatal radiation dose will be restricted to less than 0.5 rems during the gestation period. This pregnancy declaration must be kept on file for the life of the registration or license. The following policies are in effect for occupationally exposed, pregnant employees:

i. Although it is unlikely that the student will exceed the exposure limits for a pregnant radiation worker during their clinical rotations, a student who has chosen to declare her pregnancy during the program year shall be reviewed by the Program Director and Radiation Safety Officer to determine the extent to which the student may perform their clinical rotations. Literature and guidelines concerning pregnant radiation personnel will be provided to the student by The Office of Radiation Safety.

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Effective Date: January 1, 2007

Revised Date: July 19, 2007

- ii. Following the recommendation set forth by Radiation Safety the student will meet with the Division Director to determine the course of action the student wants to pursue in regard to completing the academic program. Following counsel with the Division Director, the student must inform the Division in writing regarding her plans to continue in the program or to withdraw.
- iii. For students enrolled in radiation therapy, the pregnant student shall not be involved with interstitial and intracavitary applications using radioactive sources.
  - 1. If the student's anticipated due date is after graduation and she has completed the Brachytherapy rotation, she will continue the program as scheduled unless unforeseen problems with the pregnancy occur. A plan to continue the program will then be determined on an individual basis.
  - 2. If the student's anticipated due date is after graduation and she has not completed the Brachytherapy rotation, graduation will be extended. The student will continue her didactic education and complete her clinical rotations after delivery.
- iv. The dose to the fetus will be estimated from the date of conception to the date of notification by performing a review of personnel monitoring device reports for that period.
- v. If not already in place, a second dosimeter will be requested for monitoring at the waist level. The dose received by this monitor may be assumed to be the fetal exposure.
- vi. The fetal dose records will be reviewed by the IRRP / RSO.
- vii. In the course of periodic review of the prenatal exposure the exposure exceeds 50 mrem in one month, reassignment of duties may be necessary.

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Category: General Program Policies

Effective Date: January 1, 2007

Revised Date: July 19, 2007

### 3. Safe Operating Procedures

- a. **Students are not permitted to hold patients for radiographic examinations or to intentionally expose other students or staff members to ionizing radiation.** Students violating this policy shall be subject to immediate dismissal from the clinical assignment.
- b. No one may be exposed to the useful beam for the purposes of training, demonstration, or other non-medical diagnostic purposes.
- c. Any room utilizing X-ray equipment is considered a restricted area. If the entrances to these areas are secured, use caution when entering by knocking first and awaiting a response.
- d. Any questions, concerns or complaints issued by the patients should be immediately addressed with IRRP or RSO.
- e. Students must be accompanied by a licensed radiographer or radiation therapist at all times during examinations or treatments or during any part of the examination or treatment (e.g., patient or machine setup).
- f. All individuals present in fluoroscopic examination rooms will wear protective lead aprons. Protective lead gloves shall be required and used by individuals who are required to have their hands in or near the useful beam.
- g. All students are required to become familiar with the safe operating procedures of each clinical site in their rotations.
- h. All students are required to report to the Division Director any condition of equipment or action by personnel that may be deemed unsafe to patients, other personnel or other students.

# Radiologic Sciences and Therapy Division

## **Section 2 – Admission Policies**

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Policy #: 2.01

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Category: Admission Policies

Effective Date: January 1, 2007

Revised Date: July 22, 2009

**Admissions Process – Traditional Students**

1. The admissions process for undergraduate students is based on academics that have been completed at the time of the application deadline. Students are also required to complete a limited number of volunteer hours to insure that this is an appropriate career choice.
2. In order to complete an application for the Division of Radiologic Sciences and Therapy, the student must:
  - A. Have achieved a cumulative GPA greater than a 2.5/4.0.
  - B. Completed the prescribed number of observation hours in imaging care of patients.
  - C. Provide a writing sample per the “Personal Statement” portion of the program application.
3. Once the application has been electronically filed with OSU Professional Admissions, the application will be built and sent to Student Affairs office in SAMP. Applications will not be accepted after 1/31. There will be no exceptions.
4. Upon receipt of the applicant’s file, the Division of Radiologic Sciences and Therapy enters the student’s information in a data base that is divided into the following quantitative scoring categories:
  - A. Overall GPA- this can include transfer credit from other universities.
  - B. Science GPA- this is composed of the grades achieved in Physics, Chemistry, Math, Anatomy, and EEOB.
  - C. Students shall complete a minimum of 10 hours of observation in each of the three disciplines (radiography, sonography, & radiation therapy) and an additional 20 hours of observation in an area of radiation science & imaging of the student’s choice.
  - D. Faculty grade blinded copies of essay submissions and the average score is entered into the database. The maximum score is 20 points.

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5. The individual quantitative scores are summed for all applicants and the top candidates are invited for a personal interview by faculty. A standard set of questions are utilized and scored. Following the interview, these points are entered into the applicant data base.
6. The final quantitative scores are provided to a committee of faculty who make the selections and seat the prospective students based on the total quantitative scoring. The number of students offered positions in the Division for specific studies is based on the openings that exist after sophomore honors students are placed and the number of clinical sites available for each student.
7. Letters of offer are sent to the top candidates and these are contingent on the following conditions:
  - A. Completion of any outstanding GEC or required coursework by Spring Quarter with no less than a C-.
  - B. Completion of a criminal background check.
  - C. Completion of SAMP immunizations as described the SAMP Student handbook
  - D. Completion of American Heart Association BLS for Healthcare Providers during the summer preceding autumn commencement of the professional program.
8. Letters of offer are specific to the areas of study (Radiography, Radiation Therapy, and Diagnostic Medical Sonography) and these offers are made based on availability and the desire of the students to study in these specific areas of medical imaging/therapy. Once all student availability has been offered, a small number of alternates are selected to insure that a complete class of students can begin in the fall quarter.
9. Alternate students are provided with letters that inform them of their status and the need to honor the above mentioned conditions as well as the need to remain available for an unexpected vacancy in the program of study that is designated. Alternate students are encouraged to work with their advisors to make sure they have a back-up plan in the event that an opening does not occur in the course of study designated.

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Policy #: 2.02

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Category: Admission Policies

Effective Date: January 1, 2007

Revised Date: July 9, 2009

**Admissions Process – Degree Completion Students**

1. The Baccalaureate Degree Completion Program is designed for imaging professionals who are registered in good standing with The American Registry of Radiologic Technologists (ARRT) or the American Registry of Diagnostic Medical Sonography (ARDMS). The program allows professionals to earn credit for previous medical imaging/therapy and college education by either the transfer of college credit or by providing documentation verifying completion of an AMA approved educational program in a medical imaging field and completion of a written, comprehensive examination.
2. Students apply Sept 1 through June 1 for an Autumn Quarter admission and must enroll in courses the first quarter of enrollment. A limit of 10 students may be enrolled in the program at any time.
3. In order to complete an application for the Division of Radiologic Sciences and Therapy BS Completion Program, the student must:
  - A. Satisfactorily demonstrate academic success at the post-secondary level as evidenced by achieving a minimum cumulative point hour ratio of not less than 2.5 on all work taken at all accredited academic institutions.
  - B. Complete the following OSU courses or their equivalent with a C+ or better:
    1. English 110;
    2. Anatomy (minimum of 1 quarter); and
    3. Physiology (minimum 1 quarter)
  - C. Provide an active American Heart Association BLS Cardiopulmonary Resuscitation certificate;
  - D. Provide a writing sample per the “Personal Statement” portion of the program application specifying your specialty interest for the BS completion program.
  - E. Submit three letters of reference (1 academic, 1 clinical, 1 personal)
4. Once enrolled in the program, students must be enrolled at least 2 sequential quarters per year show adequate progression toward degree completion and remain in good standing.
5. Annual program planning meetings with Division faculty is required.

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Policy #: 2.03

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Category: Admission Policies

Effective Date: January 1, 2007

Revised Date: June 24, 2008

**Liability Insurance**

1. All students having contact with patients are required to be covered by a professional liability insurance policy. The student coverage is provided to by the University; however the policy is only in effect during scheduled, clinical education hours. The insurance does NOT cover an individual working outside of the assigned, formal education rotations.

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Policy #: 2.04

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Category: Admission Policies

Effective Date: January 1, 2007

Revised Date: July 22, 2009

**Student Orientation**

1. A series of mandatory orientation meetings will be held for students (traditional and degree completion) who have returned their letters of acceptance. The purpose of the orientation meetings is assist newly accepted students to acclimate to the Division and their respective course of study.
2. During spring quarter, a brief orientation meeting will be provided by the Division to welcome students and entertain questions about the preparation activities required during the summer break. The spring orientation is focused on the completion of:
  - A. Hospital ID/Criminal background check procedures
  - B. Hospital computer access and sign-on codes
  - C. Optically stimulated luminance dosimeter (OSLD) application
  - D. Uniform requirements
  - E. AHA BLS requirements
3. A fall orientation meeting is planned each year to review many of the items listed above as well as a review of the RST Division Handbook, Technical Standards document, the Code of Ethics, and any additional discipline specific information deemed necessary.
4. Clinical rotations are also addressed at the fall meeting to assure incoming students that assignments will be made following the completion of the patient care module.

## Radiologic Sciences and Therapy Division

### **Section 3 – Clinical Education Policies**

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Policy #: 3.01

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Category: Clinical Education Policies

Effective Date: June 26, 2007

Revised Date: July 9, 2007

**Access to Medical Records/Confidentiality**

1. All students working with patient identifiable information are required to maintain and respect the patient's right to confidentiality. All information made known in the course of providing treatment or generated in connection with patient care activities is confidential and is not to be released without the patient's consent except as provided by law.
2. Information generated through contact between patients and health care providers is confidential and the expectation of confidentiality extends to all forms of information regardless of how the information is maintained and stored (electronic, paper, etc.).
3. Students with access to patient information may only obtain information that is necessary to conduct the imaging procedure. It is the student's responsibility to limit their access to patient information and accessing any patient information other than what is required to perform an imaging procedure or class assignment is not allowed.
4. Patient-identifiable diagnostic and therapeutic information may not be displayed where it is visible from any public area. Reports, documents, and other media which are discarded must be disposed of by shredding or other effective means of destruction. Patient-identifiable information may only be discussed with other staff or students if they are participating in the care of the patient. Discussions should be held in areas where the public will not overhear the discussions.
5. Inappropriate disclosure of confidential information, intentional or unintentional, shall result in disciplinary action and professional probation.
6. Students are required to participate in a confidentiality/ HIPPA training module prior to beginning clinical rotations and may be required to complete additional training at specific clinical sites.

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Policy #: 3.02

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Category: Clinical Education Policies

Effective Date: June 26, 2007

Revised Date: July 22, 2009

**Professional Appearance**

1. Students are expected to maintain a professional personal appearance and demeanor in both the academic classroom and clinical education sites. Suitable dress is expected appropriate to the professional setting of the academic or clinical education area. Clothing that is soiled, unkempt, in disrepair, or offensive to the academic or clinical faculty is unacceptable and students will be denied access to classrooms, laboratories or clinical facilities. Body cleanliness is important in all academic and clinical settings. Improper personal hygiene may result in a lowered course grade and dismissal of the student from classroom or clinical facilities.
2. Smoking is prohibited on the Medical Campus area and all clinical sites. Evidence of abuse of alcohol or other chemical agents are grounds for professional probation and may result in immediate disenrollment. Eating is prohibited in the laboratories and clinical care areas within the health care institutions.
3. Student uniforms are to be worn **only** during educational clinical rotations. The student dress code is as follows:
  - a. White scrub-top
  - b. Ceil scrub pants
  - c. White leather shoes with closed toes and heels; white leather athletic shoes are acceptable; and white socks are required
  - d. A white lab coat or a solid ceil blue or white scrub jacket may be worn for warmth.
  - e. A plain, all white turtleneck or tee shirt may be worn under the scrub top for warmth. Tee shirts with designs and/or colors are unacceptable attire.
4. Hair must be clean, neat, professional in appearance and worn off the shoulders. Hats, caps, head wraps or scarves are not permitted unless they are worn for religious or health-related reasons. Earphones are not to be worn in the clinical setting.
5. Excessive cosmetics, cologne, perfume or after-shave are not permitted.

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6. In adherence with the dress code policies at various clinical education sites:
  - a. Jewelry must be worn with discretion and facial piercing or wearing of jewelry or studs anywhere on the face or tongue are prohibited.
  - b. Visible tattoos are prohibited in the clinical areas.
  - c. Artificial fingernails are prohibited due to infection control. Natural nail must be clean and well groomed. Nail length, color, and style must be professional.
  
7. Student identification badges must be worn above the waist with the name and picture visible. Stickers, position markers, etc. should NOT cover the student name or picture.
  
8. Noncompliance with these policies will result in professional probation, a decrease in the course grade, and may lead to disenrollment.

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Category: Clinical Education Policies

Effective Date: June 26, 2007

Revised Date: July 9, 2009

**Clinical Competence and Professional Conduct**

1. Terminal clinical objectives of the Radiologic Sciences and Therapy Division include the following:  
Upon graduation, the student will be able to:
  - a. Demonstrate a base of knowledge and attitudes upon which to build personal growth in professional practice and leadership.
  - b. Perform diagnostic and/or therapeutic imaging procedures in accordance with the code of ethics and standards of practice which underlie the imaging professions for the purpose of diagnosis and treatment of disease.
  
2. Clinical Performance
  - a. All Radiologic Sciences & Therapy students participating in the RadSci 440, 441, 442, 540, 541, & 542 courses will receive letter grades each quarter in which they are enrolled. Each course will be evaluated on a combination of factors listed on the specific course syllabus. Course requirements vary by quarter and increase in difficulty and complexity as the student progresses through the program. Students **must receive a C- or higher** in each course and may not receive an “incomplete” for two consecutive quarters.
  - b. Radiography students must maintain a minimum of a C- in the 540 courses in order to enroll in and complete the 550 practicum courses during the senior year.
  - c. The American Registry of Radiologic Technologist (ARRT) has designated certain procedures in which the Radiography and Radiation Therapy student must demonstrate competency prior to eligibility to apply to sit for the national certification examination; and the American Registry for Diagnostic Medical Sonography (ARDMS) has designated certain procedures in which the Sonography student must demonstrate competency prior to eligibility to sit for the national certification examination. Each quarter, a specified number of competency evaluations must be satisfactorily completed as indicated on the course syllabus. All competencies must be performed in the presence of and signed off by a designated registered technologist/therapist.

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- d. Throughout each quarter, registered radiographers, sonographers, or therapists assigned to the clinical areas are requested to complete an affective evaluation form for each student rotating in their specific area. The affective evaluations assess the students' observed behavior in terms of knowledge, attitudes, patient care skills, and professional demeanor. A quarterly affective evaluation will be conducted at the conclusion of each quarter by the clinical coordinator. Consistent professional conduct is mandatory and therefore, certain skill sets must be achieved and maintained in order to remain in the clinical environment. Students falling below this minimum standard may be dismissed from the clinical education sites and required to disenroll from the Radiologic Sciences and Therapy Division.
3. Students are expected to conform to the ASRT and/or SDMS Standards of Practice specific to their discipline while enrolled in each clinical course within the program. The Practice Standards are available at [www.asrt.org](http://www.asrt.org) and [www.sdms.org](http://www.sdms.org).
4. Although attendance in assigned clinical rotations is expected, students should not report for clinical assignment in the case of illness. Examples of excused illness include:
  - a. Fever
  - b. Hand dermatitis
  - c. Open wounds if the wound is located on the hands or face and is draining or not healed over or if the wound is located under clothing but dressings are saturated by the end of the assigned clinical shift.
  - d. Generalized rash with an unknown cause or a rash accompanied by a fever.
  - e. Active Herpes simplex lesions (cold sores) on the hands or face.
  - f. Burns located on the face or hands or burns that are weeping or blistered.
  - g. Pediculosis (lice)
  - h. Impetigo
  - i. Conjunctivitis with excessive tearing with discharge, sensitivity to light, itching, redness, or swelling. Clinical rotations may be resumed upon completion of 24 hours of medication.
  - j. Cough accompanied by a fever or lasting >2 week duration and accompanied by night sweats, fever, weight loss, hemoptysis or a positive PPD (tuberculosis test). Severe or persistent coughing spells.

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- k. Sore throat accompanied by a fever, white spots on tonsils, swollen glands or skin rash. In the case of a positive strep throat culture, clinical rotations may be resumed upon completion of 24 hours of medication.
  - l. Nasal congestion accompanied by a fever, sinus pain and colored discharge.
  - m. Diphtheria – Do not report for clinical rotations until antimicrobial therapy completed and two cultures at least 24 hours apart are negative.
  - n. Influenza
  - o. Upper Respiratory Infection. In the case of Pertussis (Whooping Cough) students may return to clinical assignments with medical permission following 24-48 hours of medication.
  - p. Nausea, vomiting, and/or diarrhea. In the case of Convalescent Salmonella students may return to clinical assignments following documentation of 2 consecutive negative stool cultures, 24 hours apart.
  - q. Any medical condition requiring narcotic prescription drugs, due to the potential side effects and altered mental status.
5. For the purposes of communication between the student, clinical instructor/preceptor and patient, all conversations shall be in English or mediated by a trained interpreter. This is to assure consistent and correct instruction as well as facilitate seamless patient care treatment. If a student becomes aware that a patient is unable to speak English or has difficulty understanding the English language, thus inhibiting the patient care process, the student shall seek permission from the preceptor to solicit information from the patient to assist in obtaining a trained interpreter. At no time shall the student be used as an interpreter.
6. If a patient requests to converse with the student in a language other than English, the student may respond solely to inform the patient that during the treatment of the patient, and for the patient's safety, the conversation must either be in English or through the assistance of a trained interpreter.
7. The use of personal cellular phones, PDAs, Blackberrys, and other electronic communication devices are prohibited in the clinical education sites. In some sites these devices may interfere with medical equipment and must be turned off while in the medical facility.

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### Clinical Supervision

1. All students must be **directly supervised** when performing procedures. This applies to radiation therapy students throughout the entire clinical education period, however, sonography and radiography students may move to indirect supervision once they have demonstrated and documented competence. **Direct Supervision** means that all students must have a registered radiographer, sonographer, or therapist working with them when conducting all procedures. All images must be checked and approved by the supervising radiographer or sonographer and all clinical work in the radiation therapy area must be check by a registered therapist.
2. All radiography and sonography students who have **demonstrated competence** in a particular procedure may perform that procedure under the **indirect supervision** of a registered radiographer/sonographer on the premises or in the near vicinity of the imaging area and available for immediate assistance. All images must be checked and approved by the supervising radiographer or sonographer.
3. All clinical studies completed by a student must be approved and signed-off by a registered radiographer, radiation therapist, or sonographer. All repeat radiographs must be conducted with a registered radiographer directly supervising the repeated examination.

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## **Infection Control**

All students are required to follow the infection control practices established by The Ohio State University Medical Center Infection Control Committee and the policies in effect at the specific clinical site.

### **A. Bloodborne Pathogens**

1. Bloodborne pathogens are pathogenic microorganisms that can cause disease in humans and include, but are not limited to, human immunodeficiency virus (HIV), hepatitis B virus, and hepatitis C virus. Bloodborne pathogens may be transmitted through percutaneous or mucosal exposures, or exposure of nonintact skin, to blood and other potentially infectious materials (OPIM). Also considered potentially infectious material is: any body fluid that is visibly contaminated with blood, all body fluids in situations where it is difficult or impossible to differentiate between body fluids, and any unfixed tissue or organ (other than intact skin). The Ohio State University Health System (OSUHS) Bloodborne Pathogens Exposure Control Plan provides for a coordinated risk reduction program which includes provisions for staff education, observance of Standard Precautions, implementation of engineering and work practice controls, use of personal protective equipment, vaccination, and postexposure follow-up to minimize or eliminate workplace exposure, transmission, and infection with bloodborne pathogens.

### **B. Prevention of Exposure to Blood and Body Fluids (Methods of Compliance)**

1. Standard Precautions - Standard precautions are a major tenet of the infection control system designed to prevent transmission of infectious agents through direct or indirect contact with the blood and body fluids/substances of patients. Blood and other potentially infectious material (OPIM) from all patients are considered potentially infectious for **bloodborne** pathogens. Unless they contain visible blood, the risk of transmission of bloodborne pathogens from feces, nasal secretions, sputum, sweat, tears, urine and vomitus is extremely low or non-existent. However, these substances may be a source of other infectious agents, and the Health System's standard precautions also apply to these fluids and materials. Standard precautions must be utilized by all healthcare workers to prevent contact with blood or OPIM by providing barriers between the individual and infectious materials.

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**C. Work practice controls in effect at the OSUHS include, but are not necessarily limited to, the following:**

**1. Handling of Contaminated Needles and Sharps**

Sharp objects shall be handled in such a manner to prevent accidental cuts or punctures during procedures, when cleaning used instruments, and during disposal. Contaminated needles and other sharps shall not be bent, recapped or removed unless there is no feasible alternative or such action is required by a specific medical procedure. Such recapping or needle removal must be accomplished through the use of a mechanical device or a one-handed procedure.

- a. Disposable Sharps - Disposable sharps must be discarded intact immediately after use into an upright, impervious needle disposal box that is readily accessible. The needle box shall be replaced when  $\frac{3}{4}$  full, and not allowed to overfill. Contaminated needles and sharps shall not be bent, broken, reinserted into their original sheath. Broken glassware which may be contaminated shall not be picked up directly with the hands. It shall be cleaned up using mechanical means, such as a brush and dustpan, tongs, or forceps, and must be discarded in an impervious biohazard container.
- b. Reusable Sharps - Immediately or as soon as possible after use, contaminated reusable sharps shall be placed in appropriate containers until properly reprocessed. These containers shall be puncture resistant, red or labeled with a biohazard symbol, closable and leakproof on the sides and bottom. All reusable trays must be secured in a clear biohazard bag at the point of use. Sharps, instruments and containers that are contaminated with blood or other potentially infectious material shall be handled in a manner that will minimize the risk of percutaneous injury to the employees.

**2. Hand hygiene**

- a. The most important means of controlling the transmission of microorganisms is by effective hand hygiene. Hands must be cleaned prior to and upon completion of patient contact, immediately, or as soon as feasible, after removal of gloves or other personal protective equipment. Employees are also required to clean their hands and any other contaminated skin surfaces with soap and water, and/or flush eyes or mucous membranes with water immediately, or as soon as possible, following contact of such body areas with blood or OPIM.

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Effective Date: June 27, 2007

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3. Specific Restrictions for Imaging Work Areas

- a. Eating, drinking, smoking, applying cosmetics or lip balm, and handling contact lenses are prohibited in work areas where there is a reasonable likelihood of occupational exposure.
- b. Food and drink shall not be kept in refrigerators, freezers, shelves, cabinets, or on countertops or bench tops where blood or OPIM are present.

**D. Personal Protective Equipment**

1. Personal Protective Equipment (PPE) shall be provided by OSUHS where there is a potential for exposure. Equipment includes, but is not limited to, gloves (vinyl, latex, nitrile, or heavy-duty rubber), gowns (fluid resistant or fluid proof), masks, goggles, protective eyewear with side-shields, face shields, and resuscitation bags or other ventilation devices.

2. The PPE is to be worn by all personnel when having contact with or at risk of exposure to the blood or body fluids from **all** patients.

3. The PPE will be considered appropriate only if it does not permit blood or OPIM to pass through or reach the employee's clothes, skin, eyes, mouth, or other mucous membranes under normal conditions of use and for the duration of time which the protective equipment will be used. **Scrub uniforms do not prevent the passage of blood or OPIM and are not considered personal protective equipment.**

4. The PPE shall be available in the appropriate sizes and readily accessible at the work site or issued to employees. The hospital shall clean, launder, and dispose of required reusable personal protective equipment at no cost to the employee. The hospital shall repair or replace personal protective equipment as needed to maintain its effectiveness, at no cost to the employee.

5. All PPE shall be removed prior to leaving the work area. When personal protective equipment is removed it shall be placed in an appropriately designated area or container for storage, washing, decontamination or disposal.

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## 6. Gloves

a. Gloves shall be worn when the potential exists for contact with blood and body fluids, mucous membranes, or non-intact skin of all patients. They must also be worn when handling items or surfaces soiled with blood or body fluids, and for performing venipuncture and other vascular access procedures. While gloves reduce the incidence of contamination of hands, they cannot prevent penetrating injuries caused by sharp instruments.

b. Latex-free gloves are available throughout the OSUHS for routine use. Hypoallergenic gloves, glove liners, powderless gloves, or other similar alternatives shall be readily accessible to those employees who are allergic to the gloves normally provided.

**c. Gloves must be changed after contact with each patient. Gloves must be changed if moving from a contaminated-body site to a clean-body site during patient care.** Used gloves shall be discarded into an appropriate trash receptacle. Gloves shall be changed after contact with a patient's excretions or secretions, and clean gloves reapplied if patient care has not been completed. Environmental surfaces are not to be touched with contaminated gloves.

d. Gloves shall be worn when cleaning or disinfecting environmental surfaces contaminated with blood or body fluids.

## 7. Protective Gowns

a. Gowns and similar protective attire are indicated if clothes are likely to be contaminated with blood or body fluids.

b. If blood or OPIM penetrate the garment(s), the garment(s) shall be removed immediately or as soon as feasible.

c. Gowns shall be worn only once and discarded into an appropriate container.

## 8. Masks and Protective Eyewear

a. Masks in combination with eye protection devices, such as goggles or glasses with solid side shields, or chin length face shields, shall be worn whenever splashes, spray, spatter, or droplets of blood or OPIM may be generated and eye, nose, or mouth contamination can be reasonably anticipated.

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b. Nondisposable protective eyewear contaminated with blood or body fluids shall be cleaned with an appropriate disinfectant. Disposable protective eyewear shall be discarded into an appropriate receptacle.

c. Masks shall be removed before leaving the work area.

#### 9. Donning and Removing Personal Protective Equipment

The Centers for Disease Control and Prevention have recommended the sequence or both donning and removing personal protective equipment (PPE). The sequence for both is shown in a diagram at the CDC link <http://www.cdc.gov/ncidod/sars/ic.htm>.

#### 10. Resuscitation Devices

Individual resuscitation devices must be readily available in all patient care areas for use by staff in performing resuscitation procedures. Protective devices shall be used to avoid direct contact with the patient's mouth or tracheostomy stoma, as blood or other potentially infectious materials may be expelled during resuscitation.

**E. Housekeeping** - The work site shall be **maintained in a clean and sanitary condition**. All potentially contaminated reusable hospital and patient care equipment shall be decontaminated on a regularly scheduled basis and immediately or as soon as feasible upon visible contamination.

1. Disinfectants - All disinfectant products must be approved by the Environmental Protection Agency (EPA) as "hospital grade disinfectants" and must be bactericidal, fungicidal, tuberculocidal, and viricidal, including effectiveness against HIV and hepatitis B virus.

2. Contaminated Work Surfaces - Work surfaces contaminated with blood or body fluids shall be cleaned up promptly with an appropriate disinfectant solution or a freshly prepared 1:10 to 1:100 dilution of bleach. Gloves must be worn when cleaning up all contaminated work areas.

3. Reusable Patient Care Equipment - After use, items contaminated with blood or body fluids should be disinfected prior to removal from the patient care area or placed in an appropriately labeled plastic bag for transport to the cleaning areas.

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Effective Date: June 27, 2007

Revised Date: July 9, 2007

4. Linen - Soiled linen should be handled as little as possible, with minimum agitation, to prevent microbial contamination of the environment. All soiled linen is to be placed in blue plastic linen bags at the location where it was used. When the bag is approximately 2/3 full, it is to be closed securely and placed in the designated area for pick-up.

#### **F. Significant Work Exposure**

A significant exposure is defined as direct contact with mucous membranes (eyes, nose, mouth) or broken skin or percutaneous contamination with a patient's blood, semen, vaginal secretions, spinal fluid, synovial, pleural, peritoneal, pericardial or amniotic fluid.

#### **G. Post Exposure Management**

1. Remove contaminating material immediately, or as soon as feasible.
2. Wash contaminated area with soap and water, or flush exposed mucous membranes with water.
3. Exposed students must complete the Non-Employee Accident Report form pertinent to the area of clinical education and report as soon as possible to Employee Health Services or the Emergency Department and follow all post exposure follow-up policies.

Policy #: 3.06

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Category: Clinical Education Policies

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Revised Date:

### **Cardiopulmonary Resuscitation Requirements**

1. All students enrolled in the Division must hold and maintain a current certification in the American Heart Association Basic Life Support (BLS) for the Healthcare Provider. It is the student's responsibility to recertify, if necessary, to ensure the certification remains current for the entire time the student is assigned to a clinical educational area.
2. Current copies of BLS CPR certification cards must be submitted to the student's academic adviser and placed in the student's permanent academic file.
3. Failure to maintain current certification may result in removal from the clinical educational experience and may result in a failing grade for the specific clinical course.

Policy #: 3.07

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Category: Clinical Education Policies

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### Venipuncture and Contrast Media Administration

- A. Upon satisfactory completion of didactic and laboratory venipuncture and pharmacology education students shall be competent to perform IV contrast injections in the clinical education environment. However, students must abide by the particular institutional policy while on clinical assignment.
- B. Under no circumstances shall an injection of contrast media be made without direct supervision by a technologist/therapist and a physician being in the immediate area at the time of the injection or during the infusion.
- C. If the student should experience difficulty performing the venipuncture, he/she shall request a technologist/therapist or nurse complete the injection.
- D. The student shall stay with the patient receiving the contrast media injection until the examination is completed. The location of emergency equipment shall be known by all students and department personnel and the equipment/supplies shall be readily available prior to beginning the injection.
- E. All injections are performed following Standard Blood and Body Fluid Precautions.
- F. If a patient has a subcutaneous accessory port, such as a Mediport, the student **shall not** access the catheter.
- G. Students shall properly document the right dose, medication, route, and time in the RIS and patient record, if applicable.

Policy #: 3.08

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Category: Clinical Education Policies

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### **Documentation of Identifying Information on Images**

1. Identification - All images will be permanently identified with the Patient name, Patient Medical Record number, Date and time of exam, Procedure, Procedure ID number. Failure to comply with this policy will result in failure of student competency evaluations and possible disenrollment from the program.
  
2. Marking Images
  - A. All images, with the exception of portable infant radiographs, will be permanently marked with a letter (R or L) identifying the correct side of the patient.
  
  - B. Patient ID and side markings must be a permanent part of the image, therefore, handwritten identification is NOT acceptable. It is the responsibility of the student to own and use proper side markers with initials.
  
  - C. Images that are mismarked, not marked properly, or have markers "burned out" must be marked properly and documentation of the correction must be included in the RIS at the time the correction is made.

Policy #: 3.09  
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Category: Clinical Education Policies  
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### **RA Preceptor Standards and Responsibilities**

1. The clinical preceptor must be a physician actively and directly engaged in the clinical practice of medicine or surgery as a board-certified radiologist.
2. The clinical preceptor must sign and agree to perform the duties listed in the “Multi-party Clinical Education Affiliation Agreement”.
  - A. Each clinical site shall designate a radiologist to serve as a chief preceptor who is responsible for overseeing the student educational activities, assessing clinical competence, and completing all necessary documentation of student clinical performance.
3. A radiologist assistant student shall practice under the on-site supervision of a radiologist preceptor. Under this supervision, the RA may perform all clinical procedures outlined in the program curriculum.
  - A. On-site supervision must be provided at the level appropriate, personal, direct, or general, for each particular procedure performed by the RA student.
  - B. The clinical preceptor is responsible for monitoring student progress in terms of the quality and the number of cases performed, and in conducting RA student competence assessments for mandatory and elective procedures.
  - C. The chief preceptor shall be responsible for completing the student summative evaluation to include assessment of student cognitive, psychomotor, and affective skills at the completion of the clinical portion of the educational program.
4. The chief preceptor, in conjunction with the medical advisor and program director, shall assist in the evaluation of written and oral student case reports, case journals, and student clinical portfolios.
5. Clinical preceptors shall meet with the medical advisor and program director on a quarterly basis to assess the strengths and weaknesses of the clinical component of the RA graduate program. Chief preceptors shall serve as members of the RA advisory committee.