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CHAPTER 1: PROGRAM INFORMATION

SECTION 1: PROGRAM GUIDING PRINCIPLES

I. MISSION

In concert with the Mission and Goals of the University of Nevada, Las Vegas, the Radiography Program is dedicated to the education of students in preparation for entry level clinical practice. Program administration, faculty, and staff provide didactic and clinical education opportunities, which adhere to recognized standards, to all eligible students. The Program is committed to graduating students who are prepared to write appropriate certifying examinations and who are prepared to become practicing Radiography Professionals.

II. GOALS

The goals and outcomes of the Radiography Program comprise:

1. Students will become clinically competent.
   a. Display proper radiologic positioning skills.
   b. Demonstrate proper exposure factor selection.
   c. Practice proper radiation safety.
   d. Provide appropriate patient care.

2. Students will develop acceptable critical thinking skills.
   a. Recognize patient conditions and initiate appropriate treatments.
   b. Determine corrective measures that may be needed for suboptimal radiographs.

3. Students will develop acceptable communication skills.
   a. Communicate effectively with patients and others.
   b. Demonstrate effective written communication skills.

4. Students will demonstrate professionalism.
   a. Demonstrate professional behaviors.
   b. Demonstrate a professional work ethic.

III. ACCREDITATION

The Radiography Program is accredited by the Joint Review Committee on Education in Radiologic Technology (JRCERT). Information on the accreditation standards as well as allegations of noncompliance with JRCERT standards may be directed to the JRCERT at:

JRCERT
20 North Wacker Dr. Suite 2850
Chicago IL. 60606
(312) 704-5300
E-mail: mail@jrcert.org
Website: www.jrcert.org
IV. CODE OF ETHICS

As a member of the medical team, students are expected to conduct themselves in a professional manner. The UNLV Radiography Program and all affiliated sites have adopted the American Registry of Radiologic Technologist Code of Ethics (Appendix A).

The ARRT has specific requirements for eligibility including educational requirements and compliance with the "Rules of Ethics" contained in the "ARRT Standard of Ethics" (Appendix A).

Students, who have been convicted of a felony, or certain misdemeanor convictions, are advised to consult with the ARRT before applying to the Program to determine their eligibility to take the Radiography Examination. Completion of the UNLV Radiography Program does not guarantee eligibility for the exam.

ARRT Ethical Inquiries can be directed to:

ARRT
1255 Northland Drive
St. Paul, MN. 55120
(651) 687-0048
www.arrt.org

V. FEDERAL FAMILY EDUCATION RIGHTS OF PRIVACY (FERPA)

The Federal Family Education Rights of Privacy Act of 1974 affords persons who are currently, or who were formerly, in attendance at the University as registered students a right of access to their educational records which contain information directly related to such persons and the right to challenge the accuracy of their records. The act also restricts the persons to whom the University may disclose a student's educational records without the student's written permission. The University's policy is to comply with all provisions of the act, and a detailed statement concerning the rights afforded current and former students is available, at no cost, in the office of the Assistant General Counsel. Any person who feels the University has failed to comply with the Federal Family Education Rights and Privacy Act may file a complaint with:

The Family Education Rights and Privacy Act Office
Department of Health and Human Services
300 Independence Ave. S.W.
Washington, D.C. 20201

VI. TITLE IX

UNLV does not discriminate in its employment practices or in its educational programs or activities, including admissions, on the basis of sex/gender pursuant to Title IX, or on the basis of any other legally protected category as is set forth in NSHE Handbook Title 4, Chapter 8, Section 13. Reports of discriminatory misconduct, questions regarding Title IX, and/or concerns about noncompliance with Title IX or any other anti-discrimination laws or policies should be directed to UNLV’s Title IX Coordinator. The Title IX Coordinator can be reached through the online reporting form at https://www.unlv.edu/compliance/titleIX, by phone at (702) 895-4055, by mail at 4505 S. Maryland
VII. DEFINITION OF TERMS

Acting Clinical Preceptor: A registered radiographer and employee of a clinical affiliate who acts in the capacity of a clinical preceptor and is in the process of completing their skills in educational methods.

Advisory Committee-Radiography: A committee composed of the clinical preceptors, a radiography student representative, chief technologists, affiliate managers, and UNLV faculty (ex-officio members) who are responsible for the evaluation and implementation of the Radiography Program.

Clinical Preceptor: A registered radiographer appointed as the main contact for students at an affiliated site. Is responsible for the supervision, instruction, and evaluation of radiography student training. A clinical preceptor may be defined as a Clinical Instructor.

Clinical Affiliate (Clinical Education Setting): A hospital, clinic or other medically related facility which has a written contract with UNLV to provide clinical experiences for student radiographers. These affiliates must be approved by the Joint Review Committee on Education in Radiologic Technology (JRCERT).

Clinical Coordinator: A UNLV faculty member and a registered radiographer who is responsible for coordinating clinical education with didactic education.

Competency: The minimal acceptable performance necessary to obtain a diagnostic image while maintaining maximum radiation protection, patient care, and safety.

Competency Evaluation: The procedure by which a student’s performance and the resulting image is evaluated.

Direct Supervision: A registered technologist is present in the room or control booth area while the student performs the examination.

Faculty Member: A full or part-time UNLV professional employee who works in a professional capacity as defined by the state of Nevada. Most professional employees are Faculty Members.

Indirect Supervision: A registered technologist is in the vicinity of the imaging area and available to the student for immediate assistance.

Preceptor: See Clinical preceptor

Program Director: Full-time UNLV faculty member and a registered radiographer responsible for organization, administration, and general effectiveness of the Radiography Program.

Radiographer: A registered or licensed individual who produces diagnostic radiographs.
SECTION 2: CURRICULUM

I. BACHELOR OF SCIENCE IN COMPREHENSIVE MEDICAL IMAGING

General Education Requirements (36-39)

- **1st and 2nd Year Seminars (4-6)
  - HSC 100 First Year Experience (2)
  - English 231, 232, or PBH 205 (3)
- **English 101 (3)
- **English 102 (3)
- **US and NV Constitution (4-6)
  - PSC 101 or HIST 100 (4)
  - **Math 126 & 127 or higher (6)
- Social Sciences (9)
- Humanities (6)
- Fine Arts (3)
- Multicultural (3) can be filled with Multicultural cross reference list
- International (3) can be filled with International cross reference list

Science Requirements (26)

- **Biology 189/189L (4)
- **Kinesiology 223/223L (4)

**Kinesiology 224/224L (4)

- **Computer Science 115 or IS 101 (3)
- Physics 151/151L (4)
- Chemistry 108 (4) or higher
- Health Physics 420 (3)

Radiography Professional Coursework (55)

- CMI 360 (3) • RAD 317 (3) • RAD 371 (1) • RAD 333 (3)
- CMI 376 (3) • RAD 350 (3) • RAD 372 (3) • RAD 334 (5)
- **RAD 100 (3) • RAD 351 (1) • RAD 373 (1) • RAD 474 (3)
- **RAD 117 (3) • RAD 354 (3) • RAD 331 (5) • RAD 486 (3)
- RAD 102 (3) • RAD 370 (3) • RAD 332 (3)

Additional Course for In Depth Study

- RAD 490 (3)* May be repeated up to 6cr

**courses must be completed prior to application for admittance to the Radiography Program.

All other Bolded prerequisite courses must be completed or enrolled in prior to application.

If (***) courses are not completed and/or other highlighted courses are not in progress, application may be deemed ineligible.
II. TERMINAL AWARD

The terminal award for the Radiography Program is the Bachelor of Science in Comprehensive Medical Imaging.

III. PROFESSIONAL COURSEWORK

Junior Year (Total Hours: 30cr)

Fall I
- RAD 350 Physics of X-ray Production: 3cr
- RAD 351 Physics of X-ray Production Laboratory: 1cr
- RAD 370 Radiographic Procedures I: 3cr
- RAD 371 Radiographic Procedures Skills Laboratory: 1cr
- RAD 102 Radiation Science: 3cr

Spring I
- RAD 317 Advanced Patient Care for the Radiologic Sciences: 3cr
- RAD 354 Digital Radiographic Technique and Practices: 3cr
- RAD 372 Radiographic Procedures II: 3cr
- RAD 373 Radiographic Procedures Skills Laboratory II: 1cr
- PHYS 151 General Physics I: 4cr

Summer I
- RAD 331 Radiography Clinical Education II: 5cr

Total Semester Hours: 11cr

Total Semester Hours: 14cr

Senior Year (Total Hours: 30cr)

Fall II
- CMI 376 Sectional Anatomy in Medical Imaging: 3cr
- RAD 332 Radiography Clinical Education III: 3cr
- CMI 360 Principles of Computed Tomography: 3cr
- RAD 486 Ethics and Medical Law in Radiology (Distant Education): 3cr

Spring II
- RAD 333 Radiography Clinical Education IV: 3cr
- RAD 474 Radiography and Special Imaging Pathology: 3cr
- HPS 420 Radiation Biology: 3cr
- CHEM 108 Introduction to Chemistry: 4cr

Total Semester Hours: 12cr

Total Semester Hours: 13cr

Summer II
- RAD 334 Radiography Clinical Education V: 5cr

Total Semester Hours: 5cr

Note: Professional classes may include additional costs such as a distant education or course fees. Course specific information can be found on MyUNLV.

All courses must be taken in the order listed except PHYS 151, CHEM 108, RAD 102, HPS 420, and CMI 376 which may be taken during any semester offered. While it is strongly recommended CMI 360 be taken as written, it may also be taken during any semester offered.
IV. CLINICAL AFFILIATES

The UNLV Radiography Program affiliates with hospital and out-patient facilities to provide a wide range of radiographic clinical experiences. Current affiliates include:

- Henderson Hospital – 1050 W. Galleria Dr. Henderson, NV. 89011
- Mountain View Hospital – 3100 N. Tenaya Way. Las Vegas, NV. 89128
- North Vista Hospital – 1409 E. Lake Mead. North Las Vegas, NV. 89030
- Spring Valley Hospital – 5400 S. Rainbow Blvd. Las Vegas, NV. 89118
- St. Rose San Martin – 8280 W. Warm Springs Rd. Las Vegas, NV. 89113
- St. Rose Siena – 3001 St. Rose Pkwy. Henderson, NV. 89052
- Summerlin Hospital – 657 Town Center Dr. Las Vegas, NV. 89144
- Sunrise Hospital and Medical Center – 3186 Maryland Pkwy. Las Vegas, NV. 89109
- University Medical Center – 1800 W. Charleston Blvd. Las Vegas, NV. 89102
- Valley Hospital and Medical Center – 620 Shadow Lane. Las Vegas, NV. 89106
- Desert Radiology:
  - 7200 Cathedral Rock Suite 230. Las Vegas, NV. 89128
  - 6675 S. Cimarron Rd Suite 105. Las Vegas, NV. 89113
  - 3920 S. Eastern Suite 100. Las Vegas, NV. 89119
  - 2020 Palomino Lane Suite 100. Las Vegas, NV. 89106
  - 2811 Horizon Ridge Pkwy. Henderson, NV. 89052
  - 3025 S. Rainbow Blvd. Las Vegas, NV. 89106
  - 480 S. Wynn Rd. Las Vegas, NV. 89103
  - 2611 W. Horizon Ridge Parkway, Henderson, NV. 89052
- Pueblo Medical Imaging – 100 N. Green Valley Pkwy #130. Henderson, NV. 89074
- Steinberg Diagnostic Medical Imaging
  - 800 Shadow Lane. Las Vegas, NV. 89106
  - 31 N. Nellis Blvd. Las Vegas, NV. 89110

V. TRANSFER STUDENTS

UNLV Radiography Program courses are only offered at UNLV. The Radiography Program does not accept transfer credit of previous Radiography courses taken at other institutions. The Radiography Program does not accept advanced standing students.

Students entering UNLV’s Radiography Program may transfer some general education course work from other institutions. Prior to enrolling in a course, the student should verify that a course is still transferable with the UNLV Admissions Office. It is recommended that all students meet with their Health Science academic advisor.
VI. ARRT ELIGIBILITY

Students who successfully complete the Radiography Program and receive a Bachelor’s in Comprehensive Medical Imaging are qualified to sit for the ARRT Exam in Radiography.

Additional information about the ARRT can be directed to:

ARRT
1255 Northland Drive
St. Paul, MN. 55120
(651) 687-0048
www.arrt.org

SECTION 3: RADIOGRAPHY PROGRAM COMMITTEES AND ORGANIZATIONS

I. ADVISORY COMMITTEE

The Radiography Advisory Committee consists of members associated with the Radiography Program that include but not limited to program faculty, chief clinical preceptors, and affiliate managers/directors. The committee recommends policies and procedures, reviews the Program Mission and Goals and Methods of program evaluation; assesses the outcomes of evaluations; and recommends a plan for the coming year based on the assessment of outcomes. One Radiography Student Representative is elected by their respective classmates to serve on the Advisory Committee in Radiography.

II. ADMISSIONS COMMITTEE

The Admissions Committee consists of Radiography faculty and clinical preceptors. The committee reviews student applications for admissions to the Program on a yearly basis.

III. STUDENT TECHNOLOGIST ASSOCIATION IN RADIOLOGIC SCIENCES (STARS)

STARS is an organization made up of Pre-Radiography and current Radiography Students. The organization is involved in many events including social and charitable activities. STARS officials meet regularly with program faculty to discuss suggestions for program improvement.

SECTION 4: PROGRAM COMPLETION

I. MINIMUM GRADE POINT AVERAGE

Admittance to the Program requires a minimum of a 2.50 GPA. Once in the Program, students must maintain a minimum overall GPA of 2.50.
II. GRADEN REQUIREMENTS

1. Carry no more than 8 credits below a ‘C’ that is not an ‘F’ in any required coursework other than RAD/HPS/CMI.

2. Obtain a grade of ‘C’ or higher in RAD, HPS, and CMI coursework.
   a. May repeat any RAD, HPS, or CMI course up to (2) times for grades below a ‘C’.
   b. An ‘F’ in any RAD coursework results in expulsion.

III. TIMEFRAME FOR COMPLETION

Upon acceptance of admission to the UNLV Radiography Program, the student must complete all required Didactic and Clinical coursework within 4 academic years. A student failing to complete all required Didactic and Clinical coursework within the time frame, will not receive a terminal award from the UNLV Radiography Program and will not receive the status of being ARRT board eligible.

IV. STUDENT ADVISEMENT

Students are assigned a Faculty Advisor as they enter the Program. Students must meet with their advisor at least once a semester for approval of a class schedule, and registration for the following semester/session; however, students are encouraged to meet with their advisor as often as needed. Students are also encouraged to meet with a Health Science Advisor at least once per year.

SECTION 5: DISCIPLINARY POLICIES

I. RADIOGRAPHY PROGRAM PROBATION

A. Academic Probation
   1. Radiography students receiving a grade lower than a “C” that is not an “F” in any RAD, HPS, or CMI coursework are placed on probation.
   2. Radiography students receiving 4-8 credits of "C-" or lower in all academic courses required by the Radiography Program are placed on Program Probation. The terms of removal from Probation are determined by an evaluation of the student’s performance to date and will be stated in a letter to the student.

Students on Program Probation because of a grade deficiency must receive a grade of "C" or higher in all remaining Program-required academic courses. Failure to do so will result in Program dismissal.

B. Clinical Probation
   Poor clinical performance is determined by the Professional Growth Assessment (PGA). During any term, the average of the PGA must not be below 75%. The 1st PGA received below a 75% will result in clinical probation. The student must meet with the Clinical Coordinator to set up a plan to improve.
II. PROGRAM DISMISSAL

A student may be dismissed from the Radiography Program for the following reasons:

A. Students with negative grade points for UNLV and/or transfer course work
B. Students receiving more than 8 credits of C- or lower in program required academic courses whether the courses were taken in sequence or out of sequence per the published Radiography Curriculum.
C. Students receiving a failing grade in a Program Required Course whether the course was taken in sequence or out of sequence per the published radiography curriculum.
D. Poor Clinical Performance.
E. Unethical or immoral behavior.
F. Cheating/Plagiarism.
G. Site requested removal from clinics due to unprofessional, unethical, or immoral behavior
H. Violation of any University or affiliate policy.
I. Excessive unexcused absences and/or habitual tardiness.
J. Failure to adhere to Radiography Program policies
K. Actions that compromise patient safety.

III. GRIEVANCE POLICY

A grievance is an alleged violation, questionable interpretation, or administration of existing Program/University System regulations. (NOTE: A grievance is NOT a complaint against, or a request to amend, eliminate, or add to, the regulations and procedures that govern the Program/University System). The grievant should initially attempt to resolve the grievance with the party alleged to have committed the violation before proceeding outside the program in the formal process. The following procedural steps and timelines should be followed in any grievance where the initial attempt failed. All notifications must be done in writing.

Note: If further investigation is needed at any step, response times may be extended and will be communicated to the student.

A. Internal Process
   a. Clinical: Affiliate
      1. Clinical preceptor. Within 10 days of occurrence provide notification to the Site Chief Clinical preceptor. Response to student will be within 10 days. If no resolution is found or unsatisfied proceed to step 2.
2. Clinical Coordinator. Within 10 days of response from step 1 notify the UNLV Radiography Clinical Coordinator. Response to student will be within 10 days. If no resolution is found or unsatisfied proceed to step 3.

3. Program Director. Within 10 days of response from step 2 notify the UNLV Radiography Program Director. Response to student will be within 10 days. If no resolution is found or unsatisfied proceed to step 4.

4. Department Chair. Within 10 days of response from step 3 notify the Department of Health Physics and Diagnostic Sciences Chair**. Response to student will be within 14 days. If no resolution is found or unsatisfied proceed to step 5.

5. School Dean. Within 10 days from receipt of response in step 4 notify the Dean of the School of Integrated Health Sciences**. Response to the student will be within 14 days.

**School Academic Standards Committee (SASC). The Chair or Dean may refer grievances to the School Academic Standards Committee. Meetings are held at the discretion of the Committee Chair and Ad hoc committees may be formed to hear specific clinical issues. Response to student within one week of committee meeting.

b. Didactic: UNLV Radiography Course

1. Course Instructor. Within 10 days of incident provide notification to the course instructor. Response to student will be within 10 days.

2. Program Director. Within 10 days of response from step 1 notify the UNLV Radiography Program Director. Response to student will be within 10 days. If no resolution is found or unsatisfied proceed to step 3.

3. Department Chair. Within 10 days of response from step 2 notify the Department of Health Physics and Diagnostic Sciences Chair**. Response to student of notification within 14 days. If no resolution is found or unsatisfied proceed to step 4.

4. School Dean. Within 10 days from receipt of response in step 3**. Response to the students of notification within 14 days. If the results of the informal process are unsatisfactory, the student may proceed to the external process.

**School Academic Standards Committee (SASC). The Chair or Dean may refer grievances to the School Academic Standards Committee. Meetings are held at the discretion of the Committee Chair and Ad hoc committees may be formed to hear specific clinical issues. Response to student within one week of committee meeting.
B. **External Process:**

Faculty Senate Grievance Petition. Procedures and timelines for student petitions can be found here: https://www.unlv.edu/facultysenate/student-resources. Will be referred to an appropriate committee.

**IV. PROGRAM RE-ENTRY**

A student wishing to re-enter the Radiography Program must re-apply to the Program. Re-entry application will be under the same deadlines as new applicants and would be considered by the Admissions Committee. The student may be considered for re-entry into the program if:

A. The student’s University grade point balance is zero or above.

B. RAD courses or academic courses required by the Program in which the student received a failing grade is repeated with grades of C or better, OR all RAD courses or academic courses totaling 9 credits or more in which the student received a C- or less are repeated with grades of C or better.

C. Students previously dismissed due to clinical policy violations not related to an ethical violation must write a letter explaining the changes that will be made if allowed reentry and must accompany the application.

No students are re-admitted to the Program when dismissed for the following reason(s):

1. Unethical or immoral behavior in the clinical or didactic settings.

2. Cheating or Plagiarism

3. Violation of any University or Affiliate Policy.

4. Students removed from a clinical site due to a behavior issue may not be eligible for re-admittance. Program faculty will decide this situation on a case-by-case basis.

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**SECTION 6: RADIATION SAFETY**

**I. PREGNANCY POLICY**

Disclosure of pregnancy is voluntary. If disclosed, the UNLV Risk Management and Safety Department of Radiological Safety allows limited radiation dose to Pregnant personnel. During the Gestation period, the declared pregnant student receives additional monitoring (dosimetry), and the maximum permissible dose equivalent to the fetus from the occupational exposure of the expectant mother shall not exceed 0.5 rem (5 mSv). A declared pregnant student has the option to request scheduling modifications but is not required. Requests for modifications should be made in writing. When the radiation exposure readings of a voluntarily declared pregnant student approach a total of 0.5 rem (5 mSv), transfer out of the radiation area or leave is mandatory. A written withdrawal of the declaration can be given at any time (Pregnancy Declaration Form Appendix B).
II. DOSIMETRY

The University provides Dosimeters for all Radiography Students. Dosimeters must be worn while in the on-campus laboratories and in clinics. Failure to do so will result in disciplinary actions and removal from the affiliate/ laboratory until a proper radiation monitoring device is obtained. Dosimeters will be kept at the respective institutions at all times unless directed otherwise. Failure to do so may result in a failing grade for clinical or lab.

If a dosimeter is lost, the student must submit a lost dosimeter form immediately and a temporary dosimeter will be issued. Students may not participate in ionizing labs or clinics until a temporary dosimeter has been issued.

Information on Dosimetry reports is the responsibility of the University of Nevada, Las Vegas, Radiation Safety Office (RSO).

Students will be sent their dose reports within 30 days of the time they were received by the Program Director; however, students may obtain their dose report at any time by contacting the RSO at 702-895-4419.

III. DOSE CONTROL LIMITS

A. It is UNLV's policy to maintain human radiation exposure levels "As Low As Reasonably Achievable" (ALARA). Annual limits for occupational radiation exposure are listed in NAC 459.325. The dose in any area accessible to the general public shall not exceed 0.002 rem (0.02 mSv) in any 1 hour or 0.1 rem (1.0 mSv) per year in accordance with NAC 459.335. UNLV administrative control limits are 10% of the annual limits excluding the general public and shall not exceed 500 mrem (5 mSv). The administrative limits for the general public and declared pregnant worker are the same as the annual limits. Dosimeters are measured every 3 months. Exposure will be limited to 125 mrem (1.25 mSv) every 3 months.

B. When UNLV Administrative Dose Control Limits are exceeded, the following procedures will be followed:

1. Within 5 working days from the notification that the administrative limits were exceeded, the Authorized User (Program Director) must file a report with the Radiation Safety Officer (RSO) describing any conditions or activities that may have led to the exposure.

2. Upon receipt of the investigation report, the Radiation Safety Staff:
   a. May change the dosimetry monitoring status to a more frequent interval if it is determined that the administrative limit was actually exceeded.
   b. Review the individual's radiation work procedures and determine the likelihood of the cause of exposure.
   c. Ensures that any unsafe practices are discontinued.
The RSO or their designee must be notified IMMEDIATELY if any person is known to have or suspected to have received a dose in excess of the Regulatory Limits. Such persons must receive proper and appropriate care in accordance with standard Health Physics and medical practices. The exact circumstances of such an event cannot be fully predicted, but as soon as possible, an investigation shall be undertaken to determine the circumstances of the incident and in order to determine the actual dose to the body and/or critical organ(s). Reports will be provided to regulator authorities as required by regulations.

IV. ON-CAMPUS LABORATORIES

A. Usage

1. The energized radiography laboratories for the UNLV Radiography Program are not licensed for exposures on live humans. Any student making an exposure on a live human will be expelled from the program.

2. No student will be allowed in the laboratories without a qualified faculty member available.

3. No exposure of any kind is permissible without being under the direct supervision of a qualified faculty member.

4. All students must wear their own dosimeter while in the laboratories.

Failure to adhere to the laboratory policies will result in disciplinary actions that may include dismissal.

B. Supervision

Labs will only be used under the "Direct Supervision" of UNLV faculty whenever any radiographic exposure is made. Students may utilize the labs for non-exposure purposes outside of scheduled lab times (e.g. positioning practice) under "Indirect Supervision" of a UNLV Faculty Member. If a student makes an exposure while under indirect supervision, they will be subject to disciplinary actions which may include dismissal.

C. Dress Code

Unless otherwise instructed, all students must wear Program approved scrubs while in labs.
CHAPTER 2: CLINICAL REQUIREMENTS AND RELATED POLICIES

SECTION 1: ADDITIONAL COSTS

I. INTRODUCTION

The Radiography Program is designed as an integrated curriculum in which the student obtains experience in a clinical environment while attending formal classes at the University. To ensure that the student receives a cohesive and complete educational experience, the university courses are closely coordinated with the student's experience.

The Radiography Program has Clinical Affiliates where students are provided a large variety of experiences.

Although students must adhere to affiliate policies and procedures, students are not considered to be employees of the facility, nor are students to be utilized as Staff Radiographers or Ancillary personnel while they are fulfilling the Program’s educational requirements.

After the student has been accepted, students must complete a series of pre-clinical requirements (Appendix C) in order to be assigned to a clinical affiliate. These pre-clinical requirements may have costs that the student is responsible for. These costs are not included within the course tuition. A clinical checklist, which include the estimated costs, is made available at Program orientation prior to the start of the program (Appendix D).

II. CLINICAL REQUIREMENTS

The following is a list of clinical requirements that are part of being assigned to a clinical site as outlined in the Educational Affiliation Agreement between the clinical site and the UNLV Radiography Program. The clinical requirements are subject to change. If a change is made, the students will be notified.

A. Immunizations: MMR, TDAP, Hepatitis A/B, Flu, Varicella (or titer), COVID-19
B. 2-step Tuberculosis (TB) check
C. Background Check
D. Drug Screening
E. Physical
F. Medical Insurance
G. CPR certification
H. Scrubs (See dress code)
I. Lead markers

Additional clinical costs include:

A. Trajeys subscription
B. Onboarding subscription(s) (i.e., Complio, Precheck, myClinical Exchange, Pronto Wellness)
III. DRESS CODE

The student is expected to exhibit appropriate personal cleanliness and mode of attire. Students are expected to wear approved scrubs while in clinical. The type of name badge is to be in accordance with each affiliate’s regulations. Any student reporting to an affiliate in improper uniform or attire may receive a written warning and be sent home. Habitual untidiness may result in suspension or dismissal from the affiliate.

Students must comply with the site dress code policy. At a minimum each student must meet the following standards:

1. Scrubs - Students must wear approved UNLV Radiography program-colored scrubs. Scrubs must be washed and pressed. Surgical scrubs are available at the clinical sites and must be worn if assigned to the surgical suite.
2. Shoes - Students must wear shoes appropriate for the hospital which include a closed toe.
3. Hair - Hair must be clean and tidy. If hair is shoulder length or longer it must be pulled back.
   a. Excessive ornaments, headbands or scarves are prohibited.
   b. Hair color must be tasteful and professional.
4. Nails - Nails must be well-manicured.
   a. Nail length may not exceed 1/4" beyond the tip of the finger.
   b. Acrylic nails are prohibited
5. Jewelry - Excessive jewelry is prohibited
   a. Earrings will be limited to two per ear. Earrings should not dangle.
   b. Rings or studs in non-conventional places (eyebrow, lips, tongue) will not be allowed.

SECTION 2: CLINICAL ASSIGNMENTS

I. AFFILIATE ASSIGNMENTS

Students will complete a Request for Hospital Assignment Form (Appendix E) and submit it to the Clinical Coordinator. While student choices are taken into consideration it is the sole discretion of the Program faculty to place students. Students may be placed at affiliates not on their preference list. After the assignments are complete, the Radiography Program faculty notifies the students of their assignment prior to the beginning of the clinical education class.

It is the student’s responsibility to procure transportation to and from their clinical site when assigned. All affiliates are located in Las Vegas, Henderson, or North Las Vegas.

All clinical assignments are at the sole discretion of the UNLV Radiography Program faculty. The affiliate reserves the right to refuse admittance to any student. If a student is denied admission to an affiliate, the clinical coordinator will review the reason for denial and determine if reassignment is warranted. If warranted, the Clinical Coordinator will reassign the student to another affiliate. The following is the criteria used for hospital assignment:
1. The affiliate acceptance of the student

2. Capacity of the hospital. Capacity is determined by the JRCERT; however, that number may be less and dependent on the number of students the affiliate is willing to accept. The number of students requested by the affiliate cannot exceed a 1:1 technologist to student ratio.

Attempts will be made to not assign students who are currently employed in Radiology Departments to that respective affiliate unless the student can provide written justification. Approval of the justification is at the sole discretion of Radiography Faculty.

II. CLINICAL AFFILIATES

Students will only be placed at sites affiliated with the UNLV Radiography Program. Affiliated sites are recognized by the JRCERT.

Current affiliated sites of the UNLV Radiography Program include:

- Henderson Hospital – 1050 W. Galleria Dr. Henderson, NV. 89011
- Mountain View Hospital – 3100 N. Tenaya Way. Las Vegas, NV. 89128
- North Vista Hospital – 1409 E. Lake Mead. North Las Vegas, NV. 89030
- Spring Valley Hospital – 5400 S. Rainbow Blvd. Las Vegas, NV. 89118
- St. Rose San Martin – 8280 W. Warm Springs Rd. Las Vegas, NV. 89113
- St. Rose Siena – 3001 St. Rose Pkwy. Henderson, NV. 89052
- Summerlin Hospital – 657 Town Center Dr. Las Vegas, NV. 89144
- Sunrise Hospital and Medical Center – 3186 Maryland Pkwy. Las Vegas, NV. 89109
- University Medical Center – 1800 W. Charleston Blvd. Las Vegas, NV. 89102
- Valley Hospital and Medical Center – 620 Shadow Lane. Las Vegas, NV. 89106
- Desert Radiology:
  - 7200 Cathedral Rock Suite 230. Las Vegas, NV. 89128
  - 6675 S. Cimarron Rd Suite 105. Las Vegas, NV. 89113
  - 3920 S. Eastern Suite 100. Las Vegas, NV. 89119
  - 2020 Palomino Lane Suite 100. Las Vegas, NV. 89106
  - 2811 Horizon Ridge Pkwy. Henderson, NV. 89052
  - 3025 S. Rainbow Blvd, Las Vegas, NV. 89146
  - 480 S. Wynn Rd. Las Vegas, NV. 89103
  - 2611 W. Horizon Ridge Parkway, Henderson, NV. 89052
- Pueblo Medical Imaging – 100 N. Green Valley Pkwy #130. Henderson, NV. 89074
- Steinberg Diagnostic Imaging:
  - 800 Shadow Lane. Las Vegas, NV 89106
  - 31 N. Nellis Blvd. Las Vegas, NV. 89110
III. ROTATION SCHEDULES

All students will be assigned to hospital and outpatient rotations. The clinical rotations will be made known to the student in the semester prior to the start of clinics. Clinical courses are taken in consecutive semesters beginning with Summer I. Clinical courses are 331, 332, 333, and 334. All efforts will be made to ensure students complete clinics as scheduled; however, in the event there is a disruption in clinics due to unforeseen circumstances, clinical courses may be modified. Modification may include but is not limited to schedules, location, start/end dates.

A. Credit to Contact Hours. Consistent with UNLV Policy, credit hours are based on weekly contact hours. The UNLV Radiography Program utilizes a 1:8 credit to contact hours per week for clinical assignments. RAD 331 (5cr) = 40 hours per week, RAD 332 (3cr) = 24 hours per week, RAD 333 (3cr) = 24 hours per week, RAD 334 (5cr) = 40 hours per week.

B. The student shall not be scheduled for more than 40 hours per week (classroom and practicum). No variances will be approved which require students to exceed the 40 hour per week limitation.

C. All students will complete a total of 80 hours of swing shift as part of their clinical experience. A swing shift is defined as a shift ending no earlier than 7:00pm but no later than 9:30pm. Students may complete these hours at any time during the program with an approved variance submitted prior to the beginning of the clinical term.

D. Scheduling of the outpatient rotations will be completed by the clinical coordinator and given to the student. Student schedules may need to be modified to comply with outpatient facilities operating hours.

SECTION 3: CLINICAL ATTENDANCE

I. ATTENDANCE PARAMETERS

A. Clinical shifts may be scheduled Monday through Sunday. If a weekend shift is approved it may be Saturday or Sunday, a student may not be scheduled for both. Weekend assignments must have proper supervision and have equitable exam opportunities comparable to the traditional week (OR, fluoro, ER, etc.). Clinical schedules are first agreed upon by the student and clinical preceptor before final approval is given by the Clinical Coordinator.

B. Students may attend clinical for a maximum of ten-hour shifts (not including a 30min break). Any ten-hour shift schedule must be submitted in writing and approved by the Radiography Program Clinical Coordinator and the Clinical Affiliate Chief Clinical preceptor. Subsequent request for changes is treated as another (separate) variance.

C. Students may not attend clinical between 9:30 PM and 6:00 AM.

D. Students must attend clinical at times when proper supervision is available.
E. A schedule variance must not interfere with the student's education or with the normal operation of the affiliate or the UNLV educational operation.

F. A variance will not be granted to accommodate student scheduling so that the student can take courses required for another program. Students should be aware that their priority should be completion of the Radiography Program before considering entering another program.

II. SCHEDULE VARIANCES

If a need arises to request a minor change in scheduled time, the student must submit in writing the requested change and justification for the change using the Variance Request Form (Appendix F). No modification to the clinical schedule can be done without written approval from the CI and CC. The procedure for adjustments to clinical hours is listed below:

1. A written request must be submitted to the affiliate Chief Clinical preceptor with copies to the Clinical Coordinator and Faculty member responsible for the respective course no less than 30 days prior to the implementation of the change. Failure to do so may result in denial of the request. The request must include the days and times of change and the student's UNLV academic schedule.

2. After conferring with the appropriate affiliate and the appropriate faculty member, the Clinical Coordinator will make the final decision and then notify the student of the decision.

Program Mandated Variance: It may be necessary to alter a student's clinical schedule to accommodate difficulties in scheduling required Program Courses offered by other departments. This will be done only when the student is following the published Radiography Curriculum and not when a student elects to take a required course out of sequence. Mandated variance may also be needed to ensure proper clinical site supervision.

III. EXCUSED ABSENCES

If a student is unable to attend clinical, they must notify the Chief Clinical preceptor or a Shift Supervisor and Clinical Coordinator no less than 30 minutes before the assigned start of clinical for that day for the absence to be considered excused.

A. Holidays: Holidays are in accordance with the UNLV academic calendar. Students are not to attend clinics on holidays. This time will not have to be made up.

B. Personal Time Off (PTO): Students are afforded 16 hours of PTO for each clinical course (RAD 331, 332, 333, & 334). These hours are not cumulative among semesters and does not have to be made up. Arrangements for personal leave must be made with the Chief Clinical preceptor and Clinical Coordinator before the leave occurs.

C. Medical Leave: Medical leave is awarded for personal or dependent illness. All Medical leave time, except the hours allotted for personal leave, must be made up prior to the beginning of the next term or within 30 days whichever comes first. A student should not attend clinics if they are ill. Students who need an extended medical leave must submit a Physician's Statement
(not a Radiologist’s) indicating the student is unable to attend Clinical because of medical reasons no later than 1 week after diagnosis. Students are allowed to return to the affiliate upon receipt of a statement from the Physician indicating the student is medically able to return to work without restrictions. If a dependent is ill, a Physician’s statement is required for the student to use medical leave. Failure to submit a physician’s statement may result in unexcused absences.

D. **Emergency Medical Leave:** Students involved in emergency medical care, (e.g., automobile accident), should notify Radiography faculty and the Clinical Affiliate at their earliest possible convenience of their condition and/or the need for medical leave. Re-admittance to the affiliate and make-up time for emergency medical leave must be approved by the Chief Clinical preceptor and UNLV Clinical Coordinator.

E. **Family Emergency:** If there is an emergency in the student’s family the student may take time off as personal leave.

F. **Jury Duty:** Up to 32 hours of time is excused for Jury Duty. Proof of attendance is required.

G. **Meetings:** At times it is necessary that students meet with affiliate or University personnel. Attendance at these meetings is Mandatory. One unexcused absence from a meeting will result in probation. Multiple unexcused absences at meetings may result in Suspension and/or Dismissal.

H. **Other Excused Absences:** Students may be excused from clinical assignment (without make up time) to attend special University supported or sponsored functions e.g., ACERT, STARS, program sponsored classes, or any other function/activity deemed appropriate by program faculty. Approved functions/activities can count toward clinical time. If the student does not, in fact attend or complete the function for which he/she was excused, the clinical time lost will be unexcused and subject to disciplinary actions and must be made up per program policies.

**IV. UNEXCUSED ABSENCES**

A student is considered unexcused if they do not notify the Clinical preceptor or Shift Supervisor and Clinical Coordinator of their absence 30 minutes prior to assigned time. After one unexcused absence the student will receive a written warning. A second unexcused absence within a semester will result in probation. If a third unexcused absence occurs, the student will be ineligible to continue clinical at their assigned affiliate and will receive a failing grade. Time missed because of unexcused absences must be made up before the beginning of the next semester and is subject to added penalty time.

**V. TARDINESS**

A. **Definition**
   A student is considered tardy if the student arrives after the scheduled starting time, there is no grace period.

B. **Notifying the Affiliate**
If the student anticipates being absent or late, they must notify the Chief Clinical preceptor or a Clinical preceptor or a Shift Supervisor no less than 30 minutes prior to their assigned time. Failure to do so will result in either tardiness or an unexcused absence.

C. **Multiple Tardiness**
   After three incidences of tardiness within a 30-day period, the student will be placed on probation. Continued tardiness may result in suspension and/or dismissal.

D. **Make-Up Time**
   Time missed because of unexcused tardiness must be made up before the next term begins. Failure to complete all make up time can result in disciplinary actions and/or a grade of ‘Incomplete’.

   Additional time (1 hour for every 8) may be added as a penalty. Application of penalties is mutually decided between the affiliate and University.

**VI. MAKE-UP TIME**

All absences, except personal leave hours or program excused absences, must be made up. Make up time must be approved by the chief clinical preceptor and the UNLV clinical coordinator prior to the start of the shift.

A. **PTO** - All personal time off must be exhausted before any make-up time will be approved. Students may not work ahead in an effort to save PTO for a later time. Any excused absence will necessitate the use of PTO.

B. All make up time must be approved by the Chief Clinical preceptor and the UNLV Radiography Program Clinical Coordinator first. Make up time may not be completed until approval is given. Failure to receive approval will void the time worked.

C. Any make up hours are subject to additional penalty time. Typically, 1 hour for every 8 to be made up may be applied. Penalty time is at the discretion of program faculty.

D. Times available for make-up are Monday thru Sunday, 6:00 am to 9:30 pm.

E. **Clinical time record.** Students are responsible for maintaining an accurate clinical time record via Trajecsys. Students must clock in/out from recognized computers at their clinical sites or via their personal cellular device (GPS tracking must be on). Time exceptions are allowed for reasons such as:
   1. Inability to log into the computer
   2. System malfunctions
   3. Notification of PTO usage
   4. Other possible scenarios deemed appropriate by program faculty. Excessive time exceptions may result in disciplinary actions. Excessive time exceptions are defined as 3 or more in a 30-day period.
VII. CLINICAL TRANSFER POLICY

The student may initiate a request for the transfer from one affiliate to another should irresolvable problems occur. Radiography Program Officials may initiate a student transfer when appropriate. Only one clinical transfer is allowed during the program. Transfers will not be approved when the student exhibits unethical or unprofessional behaviors.

A. Student Initiated Transfer:

After unsuccessful attempts to resolve any of the student's problems or grievances, the student will submit in writing, to the Program Clinical Coordinator a request for transfer. The letter should contain the reason(s) for requesting the transfer, and the attempts that have been made to resolve any problems or grievances. If the decision is made to transfer the student, the Program Clinical Coordinator will assist the student in finding another affiliate. In the event capacity limits are reached at other affiliates, and a transfer is not feasible, modifications to the student’s clinical schedule may be required. All clinical records from the affiliate releasing the student will be submitted to the Radiography Program office.

B. Administrative Transfer:

Radiography Program Officials may initiate an administrative transfer in cases where a transfer would benefit a student's clinical education.

VIII. CLINICAL BADGES/PARKING

A. ID Badges. Some clinical sites may require a site-specific badge. It is the student’s responsibility to follow all site protocols to obtain and wear the badge.

B. Parking lots at the affiliates are provided for Employee and Student convenience. The student is required to park in areas designated for Student use and not those areas normally restricted for doctors, patients, ambulances, or visitors. The affiliate will provide information regarding the location of these parking lots.

SECTION 4: CLINICAL ASSESSMENTS

I. CLINICAL COMPETENCY FORMS

Clinical competency is assessed in the Radiography Program with two forms during the students’ clinical experience. These forms are designed to assess the student's competency in hard and soft skills in the clinical environment. The assessment forms include the Competency Evaluation form (Appendix G) and Professional Growth Assessment Form (Appendix H).

The Competency Evaluation Form (Addendum G) is used to assess the students’ clinical performance and psychomotor learning abilities. The Professional Growth Assessment (Appendix H) is used to assess the students’ professional behaviors.

Other forms employed for Radiography Clinical are:
A. The Examination Log is completed by the student in Trajecsys. Spaces are provided for the student to indicate the level of assistance that was given. A student may not comp on an exam until the student indicates they ‘performed’ the exam in their daily log.

B. The Semester Competency Form (Appendix I) details the number of competencies that are required for each semester.

C. The Summary Competency Evaluation Form (Appendix J) is a one-page form which lists all the procedures the student must complete during their entirety of their clinical participation and complies with the ARRT requirements. This enables the evaluator to determine the student’s status by observing which examinations the student has completed and which are incomplete.

II. COMPETENCY TESTING PROCEDURES

Individuals identified as Clinical preceptors (CI) may complete a competency exam on a student. A CI is an individual who meets JRCERT requirements and completed the UNLV clinical preceptor workshop. Because of the large number of individuals involved in the evaluation process, every attempt is made to reduce the subjectivity and maintain equitable standards. A method of obtaining uniform evaluation criteria is by defining the term competent. Competent, as employed for student assessment, refers to "the minimal acceptable performance necessary to obtain a diagnostic image while maintaining maximum radiation protection, patient care and safety practices."

The radiography testing procedures are as follows:

1. A student initiates the testing request, and the Clinical preceptor evaluates the request in relation to the student’s achievements (e.g., exam log records).

2. A student may request evaluation after having performed several exams in the area of interest.

3. All contrast media studies, and retention testing must be done on live patients. Only under unusual circumstances approved by program faculty can this be modified.

4. One retention test is completed on each student each term (with the exception of RAD 331). Retention testing is considered a "pop quiz" on any procedure that the student has been certified as competent in either the current or previous term(s).

5. After the evaluation has been completed in accordance with the scoring and criteria identified for the evaluation form employed, the Clinical preceptor signs the Competency Evaluation Form, records the grade on the Competency Evaluation Form, then initials and dates the Summary Competency Evaluation Form.

6. All grades are kept in a secure place to protect the student’s privacy in Trajecsys.

7. A student should complete all testing by utilizing a minimum of three different Clinical preceptors if possible.

For each term, there are a specific number of competencies which must be completed for a grade. The specific competencies are listed on the Summary Competency Evaluation Form per term, along with the list of selected competencies. The student must complete specific competencies and choose and
complete the appropriate number of selected competencies from the list to satisfy the requirements for a grade for the term.

III. PROFESSIONAL GROWTH ASSESSMENTS (EVALUATIONS)

The Professional Growth Assessment (Appendix H) appraises the students’ professional behaviors which include attitudinal ethical behavior or affective learning domain. This assessment is completed at the end of each outpatient rotation and by the hospital Clinical Preceptor at the end of each semester. The objective of the form is to provide the student with feedback concerning their areas of strengths and weaknesses. The student reviews the completed form with the Chief Clinical preceptor. Students will view their evaluations in Trajecsys. It is expected that the student will maintain their areas of strength and remove any deficiencies.

SECTION 5: CLINICAL SUPERVISION AND SAFETY

I. SUPERVISION POLICIES

A. Direct Supervision: Until a student achieves and documents competency in any given procedure, all clinical assignments must be carried out under the direct supervision of qualified Radiographers. Direct supervision is required for all repeat examinations, surgical, and all mobile, including mobile fluoroscopy, procedures regardless of the level of competency.

B. Indirect Supervision: Once Competency in a particular procedure is documented, the student may perform the examination under indirect supervision with the exception of repeat, surgical, or all mobile, including mobile fluoroscopy procedures.

II. RADIATION SAFETY POLICIES

A. Patient Holding: Students should not hold a patient during any radiographic procedure when an immobilization method is the appropriate standard of care.

B. Image Receptor Holding: Students must not hold an image receptor during any radiographic procedure.

III. AFFILIATE ACCIDENTS

Accidents involving patient, equipment, supplies, etc. occurring at the affiliate must be reported to the Chief Clinical preceptor or appropriate Supervisor immediately. The proper affiliate forms must be completed, and proper affiliate procedures must be followed. Refer to the affiliate employee handbook for details. If an injury occurs, the student may obtain medical care at the medical facility of their choice. The student is liable for all medical costs incurred as a result of the accident.
Clinical grading is S/F. Grading is based on the following scale:

- 90% and above is an ‘S’
- 80-89% is an ‘S’ with probationary status
- 79% and below is an ‘F’.

Grades are calculated based on the following:

- Competency Evaluations – 50%
- Professional Growth Assessments– 30%
- Assignments –20%

A. Competency Evaluations: Students must complete the required number of competencies as indicated on their semester competency clinical form. These minimum requirements are necessary to ensure progression toward ARRT eligibility but are not meant to be restrictive. Students should request evaluation on any examination they feel prepared to perform, even if they have completed their requirements for the semester. Competency evaluations completed over the minimum requirements will be counted toward the next semester.

To ensure continued competence, once all program required and elective competencies are completed, a minimum of 5 retention competencies must be completed each semester. These retentions may not be completed in a previous semester and there may be no repeat of retentions.

The student must pass all clinical competency evaluations with a minimum grade of 90%. Competencies below 90% must be repeated.

B. The Professional Growth Assessment will be completed by the clinical preceptor. During any term, the average of the PGA must not be below 75%. The 1st PGA received below a 75% will result in clinical probation. The student must meet with the Clinical Coordinator to set up a plan to improve.

a. Total points for the Professional Growth Assessment are 45 points. Students must maintain a 34 or higher in order to remain in good standing.

C. Assignments: Various assignments related to clinics will be given and indicated in the course syllabus. Assignments include but not exclusive to self-reflections, self-assessments, daily logs, registry review activities, onboarding activities, dosimetry exchange, etc.

Grade Deductions: Deductions from the final grade will be assessed for breach of clinical policies.

A. Competency Evaluations: Three percentage (3%) points will be deducted from the final grade for each competency not completed by the end of the semester.

B. Absence: Once PTO has been exhausted, one percentage point (1%) for every eight (8) hours of missed clinical time. UNLV faculty will determine enforcement on a case-by-case basis.
SECTION 7: CLINICAL DISCIPLINARY PROCEDURES

I. ACCOUNTABILITY REPORTS

Accountability Reports (Appendix K) are a written documentation of any clinical or didactic activities that are areas of concern regarding a student’s behavior. These may include but not limited to unprofessional behavior, policy (site or program) violations, unethical actions, patient care concerns, etc. No disciplinary action will be taken without submission of this report. Accountability Reports may be submitted by the clinical site or program faculty. Accountability Reports will be reviewed by the appropriate faculty and reviewed with the student.

Once an Accountability Report is received, the appropriate Program Faculty will meet with the student. Students are required to meet with Program faculty to discuss the Accountability Report. The officiating Program Faculty will write an Action Report that outlines the expected corrective actions. The student and faculty will sign the Action Report and a copy will be made available to the student.

II. DISCIPLINARY ACTIONS

Based on the content of the Accountability Report, disciplinary action may be taken. If disciplinary action is warranted, the details will be provided to the student. Students are afforded the opportunity to rebut the report in writing.

A. Probation. A student may receive probation for any infraction of University and/or affiliate policy. A probation will define the problem and state suggested disciplinary action. The student will meet with Program Faculty to review the probationary letter. Copies of the letter can be e-mailed or delivered to the student’s advisor and Program Director. Probation letters will define the length of time the probation will be in effect.

B. Suspension. A suspension is a removal of the student from the program for a specific length of time. Suspensions will be administered in writing and delivered to the student. If suspended from clinics, students will need to make up the time missed.

C. Dismissal. Dismissal is expulsion from the program. Dismissal letters will be delivered to the student either in person, via e-mail, or mail. Dismissal letters will explain the policy violations.

Students have the right to appeal any disciplinary action using the grievance process (see Chapter 1 Section 5 (III)).

SECTION 8: ADDITIONAL POLICIES

I. STUDENT EMPLOYMENT IN MEDICAL IMAGING

The UNLV Radiography Program encourages students to seek employment in medical imaging; however, time spent as a paid employee does not substitute for student clinical hours. In addition, competencies may not be completed while being a paid employee.
II. ADVANCED MODALITY ROTATIONS AND MRI SCREENING

Students may assist in other modalities during their clinical shift. These modalities include Mammography, MRI, CT, Nuclear Medicine, Interventional Radiology, and Sonography. In addition, students may rotate through other modalities during their final Summer term if all competencies are complete and with approval from the Chief Clinical preceptor and UNLV Clinical Coordinator. Students must remain under direct supervision whilst working in these other areas. Students must abide by the following criteria:

A. **Mammography**: Students may request the opportunity to participate in clinical mammography rotations. The program will make every effort to place students in a clinical mammography rotation if requested; however, the program is not in a position to override clinical setting policies that restrict clinical experiences in mammography to students. Students are advised that placement in a mammography rotation is not guaranteed and is at the discretion of a clinical setting.

B. **Magnetic Resonance Imaging**: The powerful magnet of the MR system will attract iron-containing (known as ferromagnetic) objects. Care must be taken to be certain the objects that are attracted to and by magnetic forces NOT be taken into the magnet room.

Students need to be aware of objects on or within their bodies that are NOT to be in the magnet area including but not limited to:

- Purse, wallet, money clip, credit cards, cards with magnetic strips
- Cell phones
- Metal jewelry, pens, paper clips, hair pins, keys, hair barrettes, analog watches
- Clothing and badges that have metallic threads or fasteners.

In addition, students with implanted devices may be restricted from entering the MRI suite which include but not limited to:

- Medication pumps
- Aneurysm clips
- Heart pacemakers
- Electrical stimulator
- Neurostimulator
- Bullets or metallic fragments.

Prior to entering an MRI suite, each student must be screened for potential hazards. Screening will be done by completing an MRI screening form (Appendix L) prior to the start of the program and may be screened at the site. The screening form will be reviewed by an MRI technologist. If any contraindications are present the student may not enter the MRI suite. Any changes to the
students’ medical history must be disclosed to program faculty to ensure the student is safe to enter an MRI suite.

Students desiring additional MRI safety information may visit www.MRIsafety.com

III. SUBSTANCE ABUSE POLICY

The UNLV Radiography Program recognizes its responsibility to provide a healthy environment within which students may learn and prepare themselves to become members of a health occupation. The Radiography Program has adopted the ARRT standards of ethics as a model by which all students are expected to function. These standards prohibit the "Actual or potential inability to practice radiologic technology with reasonable skill and safety to patients by reason of illness; use of alcohol, drugs, chemicals, or any other material" (Rules of ethics number 8). Therefore, the following procedure will be enforced if there is any suspicion (see behavioral changes associated with drug abuse) a student may be under the influence of alcohol, illegal drugs or medication which impairs judgment while in the health care facility, university, or other locations as a representative of the UNLV Radiography Program.

1. **Procedure**

   1. When a faculty member, clinical preceptor or staff member perceives that the student is mentally or physically impaired, the faculty or staff member will immediately relieve the student from their duties and remove the student from the clinical setting or classroom. This is for the protection of the patient, public, other students, and the suspected student.

   2. The faculty or staff member will then inform the student as to why actions are being taken to relieve them of their duties and remain with the student until transportation is available. If the incidence occurs in the clinical setting the staff member will notify the UNLV Radiography Program Clinical Coordinator immediately.

   3. The student will then be asked to consent to a drug and alcohol screening test which will be conducted at the expense of the student. If the student agrees to the drug and alcohol screening the faculty or staff member will arrange for the student’s transportation to a designated medical testing facility. The student will sign a statement requesting the results of the test will be sent securely to the UNLV Radiography Program office.

   4. Refusal to submit for testing warrants immediate program dismissal.

   5. If the student admits to alcohol or drug use, the testing procedures will still need to be completed.

   6. If the results are negative, no action will be taken, and the student will be allowed to make up the work missed.

   7. If the results are positive (and substantiated by a second or confirmation test) the student will be dismissed from the program.
8. The faculty or staff member will be required to submit in writing the factors that lead to this suspicion. The formal write up must be received within (2) days of the incident.

2. **Readmission Procedure**
   A student who has been dismissed from the UNLV Radiography Program for reasons related to substance abuse may apply for readmission by completing the following criteria:
   1. After a period of (1) calendar year the student may submit a letter requesting readmission to the admissions committee.
   2. Document completion of a prescription treatment program.
   3. Include documentation from a mental health specialist who specializes in addiction behaviors the status of the student's substance abuse issues(s), status of the student's recovery and/or include other documents demonstrating rehabilitation to the drug and/or alcohol issues.
   4. Repeat the drug and alcohol screening process immediately prior to readmission.
   5. If a student, after being readmitted receives another positive drug and alcohol test they will be permanently dismissed from the UNLV Radiography Program.

3. **Students Requiring Medical Prescriptions**
   If a student requires medical prescriptions that alter the mental and/or physical status of the student, the student will be withdrawn from the UNLV Radiography Program for medical reasons. This is to protect the patient and the student in the clinical environment and complies with the ARRT standard of ethics.

4. **Behavioral Changes Associated with Drug Abuse**
   The following is a list of patterns associated with substance abuse. Observation of ANY of these behaviors will result in implementation of the substance abuse procedures. This list is not the only indicators that may initiate the testing procedures.
   - Attention deficit/cognitive impairment
     - Ataxia
     - Tremors
     - Slowed response time
     - Diminished coordination/dexterity
   - Social Impairment
     - Inappropriate verbal remarks
     - Inappropriate behaviors including but not limited to:
       - Angry outbursts
       - Euphoria
       - Paranoia
       - Hallucinations
       - Repeated tardiness
       - Frequent absenteeism
• Untidy appearance

• Somatic Manifestations
  o Odor of alcohol
  o Nausea/vomiting
  o Frequent unexplained trips to the bathroom
  o Reddened sclera (bloodshot eyes)
  o Pupil changes/drooping eyelid
  o Blurred vision or inability to focus

• Speech/Communication Impairment
  o Slurred speech
  o Rapid/Choppy speech
  o Incoherent speech

IV. COMMUNICABLE DISEASE POLICY

Standard Precautions Policy Statement: Any student suffering from a contagious infection will be asked to provide medical documentation that the contagious phase has passed prior to continuing in class. This is to ensure minimum risk to others.

All students and faculty will strictly adhere to this policy which is designed to protect the students, faculty, and patients from the spread of infectious diseases.

• Wear gloves at all times when working with patients where blood/body fluids are evident or likely.
• Goggles or face-shields should be worn per facility requirements.
• Wash hands before and after patient contact.
• Dispose of linens in appropriate containers.
• All infectious needles need to be placed in a puncture proof container. Do not re-cap the needle.
• All injuries must be reported to the faculty and clinical supervisor immediately.

If a student is exposed to infectious materials whether it be by blood or air (such as TB) at the clinical site, the student will be sent to a health service provider at the clinical site or of the student's choice. The student is responsible for any costs incurred for treatment.

Policy for student exposure of infections materials (blood or airborne) at the clinical setting:

1. The student will notify the Clinical Supervisor and Clinical Coordinator immediately.

2. The student and Clinical Supervisor will generate an incident report to be sent to the University Clinical Coordinator and the clinical site infectious control department.

3. The student will be sent for testing. It is the student's prerogative to decide which facility to obtain medical treatment. This could be at the clinical setting, the University Health Center, or their personal physician. All costs associated with testing and treatment are the responsibility of the student.
4. Results of the testing will be provided to the University Clinical Coordinator.

5. If testing and/or treatment is required during clinical time the student may be excused. However, this will count toward the student's PTO and if exceeded will need to be made up once the student is able to return.

V. ACKNOWLEDGEMENTS

By accepting admission to the UNLV Radiography Program, the student must sign and submit the following acknowledgements.

A. Technical Standards (Appendix M)
B. Policy Manual Acknowledgement (Appendix N)
C. School of Integrated Health Sciences Statement of Responsibility (Appendix O)
APPENDICES

Appendix A: ARRT Code of Ethics

Appendix B: Pregnancy Declaration Form

Appendix C: Clinical Checklist

Appendix D: Additional Cost Disclosure

Appendix E: Hospital Preference

Appendix F: Variance Form

Appendix G: Sample Competency Examination

Appendix H: Professional Growth Assessment

Appendix I: Summary Competency Examination Form

Appendix J: Competency Requirements

Appendix K: Clinical Accountability Form

Appendix L: MRI Screening Form

Appendix M: Technical Standards

Appendix N: Policy Manual Acknowledgement

Appendix O: School of Integrated Health Sciences Statement of Responsibility
The Code of Ethics forms the first part of the Standards of Ethics. The Code of Ethics shall serve as a guide by which Certificate Holders and Candidates may evaluate their professional conduct as it relates to patients, healthcare consumers, employers, colleagues, and other members of the healthcare team. The Code of Ethics is intended to assist Certificate Holders and Candidates in maintaining a high level of ethical conduct and in providing for the protection, safety, and comfort of patients. The Code of Ethics is aspirational.

1. The radiologic technologist acts in a professional manner, responds to patient needs, and supports colleagues and associates in providing quality patient care.

2. The radiologic technologist acts to advance the principal objective of the profession to provide services to humanity with full respect for the dignity of mankind.

3. The radiologic technologist delivers patient care and service unrestricted by the concerns of personal attributes or the nature of the disease or illness, and without discrimination on the basis of race, color, creed, religion, national origin, sex, marital status, status with regard to public assistance, familial status, disability, sexual orientation, gender identity, veteran status, age, or any other legally protected basis.

4. The radiologic technologist practices technology founded upon theoretical knowledge and concepts, uses equipment and accessories consistent with the purposes for which they were designed, and employs procedures and techniques appropriately.

5. The radiologic technologist assesses situations; exercises care, discretion, and judgment; assumes responsibility for professional decisions; and acts in the best interest of the patient.

6. The radiologic technologist acts as an agent through observation and communication to obtain pertinent information for the physician to aid in the diagnosis and treatment of the patient and recognizes that interpretation and diagnosis are outside the scope of practice for the profession.

7. The radiologic technologist uses equipment and accessories, employs techniques and procedures, performs services in accordance with an accepted standard of practice, and demonstrates expertise in minimizing radiation exposure to the patient, self, and other members of the healthcare team.

8. The radiologic technologist practices ethical conduct appropriate to the profession and protects the patient’s right to quality radiologic technology care.

9. The radiologic technologist respects confidences entrusted in the course of professional practice, respects the patient’s right to privacy, and reveals confidential information only as required by law or to protect the welfare of the individual or the community.

10. The radiologic technologist continually strives to improve knowledge and skills by participating in continuing education and professional activities, sharing knowledge with colleagues, and investigating new aspects of professional practice.

11. The radiologic technologist refrains from the use of illegal drugs and/or any legally controlled substances which result in impairment of professional judgment and/or ability to practice radiologic technology with reasonable skill and safety to patients.
APPENDIX B

Pregnancy Declaration Form

This form letter is provided for your convenience. To make your declaration of pregnancy, you may fill in the blanks in this form letter and give it to a Radiography faculty member or you may write your own letter.

DECLARATION OF PREGNANCY

To: ________________________________  UNLV Radiography Program Faculty

I am declaring that I am pregnant. I believe I became pregnant on:

Month: ____________________________  Year: ____________

A fetal dosimeter will be assigned to me, and I agree to wear it as instructed when working around radiation. I understand that my occupational radiation dose during my entire pregnancy will not be allowed to exceed 0.5 rem (5 millisieverts) (unless that dose has already been exceeded between the time of conception and submitting this letter). I also understand that meeting the lower dose limit may require a change in job or job responsible during my pregnancy. I may request schedule modifications or continue in the program without modification by notifying the Radiography program faculty in writing.

This Declaration may be rescinded by me at any time through written notification.

Signature: ________________________________

Printed Name: ________________________________
<table>
<thead>
<tr>
<th>Clinical Check List</th>
</tr>
</thead>
<tbody>
<tr>
<td>10-Panel Drug Screening (Time Sensitive)</td>
</tr>
<tr>
<td>PPD (Tuberculosis 2-Step)</td>
</tr>
<tr>
<td>Hepatitis A/B</td>
</tr>
<tr>
<td>Tetanus and Pertussis (Tdap)</td>
</tr>
<tr>
<td>MMR</td>
</tr>
<tr>
<td>COVID-19 Vaccine</td>
</tr>
<tr>
<td>Flu shot</td>
</tr>
<tr>
<td>Varicella (vaccine or titer)</td>
</tr>
<tr>
<td>Physical</td>
</tr>
<tr>
<td>Background Check (Time sensitive)</td>
</tr>
<tr>
<td>Current CPR</td>
</tr>
<tr>
<td>Medical Insurance</td>
</tr>
<tr>
<td>Bloodborne Pathogen (Vault)</td>
</tr>
<tr>
<td>HIPAA Training (Vault)</td>
</tr>
<tr>
<td>COVID-19 Training (ASRT)</td>
</tr>
</tbody>
</table>
Vault - Bloodborne Pathogen and HIPAA training are free and online and at:
https://rms.unlv.edu/occupational/training/online/

COVID-19 Training is free and online at:
https://asrt.mycrowdwisdom.com/diweb/catalog/item/eid/108889?_ga=1.2.1248440584.1685649235
## UNLV Radiography Program Additional Clinical Cost Disclosure List

<table>
<thead>
<tr>
<th>ITEM</th>
<th>COST</th>
<th>FREQUENCY</th>
</tr>
</thead>
<tbody>
<tr>
<td>SCRUBS (MAROON OR GRAY)</td>
<td>Various prices based on company</td>
<td>Must wear at any affiliate while in the program</td>
</tr>
<tr>
<td>XRAY MARKERS</td>
<td>Varies based on company</td>
<td>To be used in labs and clinics</td>
</tr>
<tr>
<td>MEDICAL INSURANCE</td>
<td>Various prices based on company</td>
<td>Must have while in the program</td>
</tr>
<tr>
<td>CPR (BLS FOR HEALTHCARE WORKERS)</td>
<td>Various prices</td>
<td></td>
</tr>
<tr>
<td></td>
<td>American Heart Association</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SITE ONBOARDING SUBSCRIPTION†</td>
<td>UP TO $40.00</td>
<td>Every 6 months</td>
</tr>
<tr>
<td>BACKGROUND CHECK‡</td>
<td>$38.00</td>
<td>Every 6 months</td>
</tr>
<tr>
<td>10 PANEL DRUG SCREENING *</td>
<td>$35.00</td>
<td>Every 6 months</td>
</tr>
<tr>
<td>PPD (2 STEP TUBERCULOSIS) *</td>
<td>$20.00 (per implant)</td>
<td>Yearly</td>
</tr>
<tr>
<td>HEPATITIS A VACCINE (2 SHOT SERIES) *</td>
<td>$54.00 (per shot)</td>
<td>Documented once</td>
</tr>
<tr>
<td>HEPATITIS B VACCINE (3 SHOT SERIES) *</td>
<td>$57.00 (per shot)</td>
<td>Documented once</td>
</tr>
<tr>
<td>HEPATITIS A/B (3 SHOT SERIES) *</td>
<td>$90.00 (per shot)</td>
<td>Documented once</td>
</tr>
<tr>
<td>FLU VACCINE *</td>
<td>Free</td>
<td>Yearly</td>
</tr>
<tr>
<td>PHYSICAL *</td>
<td>Free</td>
<td>Yearly</td>
</tr>
<tr>
<td>TETANUS AND PERTUSSIS (TDAP) **</td>
<td>$55.00</td>
<td>Every 10 years</td>
</tr>
<tr>
<td>MMR **</td>
<td>$90.00</td>
<td>Twice in a lifetime</td>
</tr>
<tr>
<td>VARICELLA TITER ***</td>
<td>$46.00</td>
<td>Once to show antibodies. If negative, the vaccine is required</td>
</tr>
<tr>
<td>VARICELLA VACCINE (2 SHOT SERIES) *</td>
<td>$150.00 (per shot)</td>
<td>Once</td>
</tr>
<tr>
<td>TRAJECTSYS ^^^</td>
<td>$150.00</td>
<td>Once</td>
</tr>
<tr>
<td>TEXTBOOKS</td>
<td>Varying pricing (Approximately $200.00)</td>
<td>Dependent on course</td>
</tr>
</tbody>
</table>

#Subscriptions are site dependent and may include myClinical Exchange, Compio, Pronto Wellness, or others

##Complio background check. May be used with other onboarding systems.

* Can be obtained with Compio or at the UNLV Student Health Center. Appointments can be made by calling 895-3370. Prices are subject to change. No appointment needed for vaccines. Vaccines are offered Monday through Thursday 8:00am-4:00pm and Friday 9:00am-4:00pm.

** Per Nevada Administrative Code (NAC) 441A.755 all students must provide documentation of Td and MMR to enroll in classes.

*** Varicella Titer is a blood test verifying antibodies to varicella (chicken pox) is present. The varicella vaccine IS NOT required if the titer is positive for the antibodies.

^^^ Trajecsys is the online clinical tracking system used for all clinical activity.
Hospital Preferences

Please include a logical justification for each choice. While justifications can be considered, placement is at the sole discretion of the Program Faculty.

Student Name: __________________________________________________________

1st Choice: ______________________________________________________________
Justification: _____________________________________________________________

2nd Choice: ______________________________________________________________
Justification: _____________________________________________________________

3rd Choice: ______________________________________________________________
Justification: _____________________________________________________________

4th Choice: ______________________________________________________________
Justification: _____________________________________________________________

5th Choice: ______________________________________________________________
Justification: _____________________________________________________________

6th Choice: ______________________________________________________________
Justification: _____________________________________________________________
UNLV Radiography Program Variance Request Form

(Per program policy form must be submitted 30 days prior to the semester begin date)

Student Name: ____________________________________________________________

Clinical Site: ______________________________________________________________

Date Submitted: ____________________________________________________________

Current Day(s) and Time(s)

________________________________________

________________________________________

Proposed Day(s) and Time(s):

________________________________________

________________________________________

Reason for request:

________________________________________

________________________________________

Student Signature: ___________________________ Date: ____________

Chief Clinical preceptor Signature: ___________________________ Date: ____________

UNLV Clinical Coordinator: Approved Not Approved

UNLV Clinical Coordinator Signature: ___________________________ Date: ____________

Comments:

________________________________________

________________________________________
## APPENDIX G

### Sample Competency Examination

<table>
<thead>
<tr>
<th>Student:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evaluator:</td>
<td>Exam:</td>
</tr>
</tbody>
</table>

**Describe the Patient’s Condition:**

*This part to be filled out by ANY R.T.*


**Required Items: Before and/or during the exam, the student:**

(A NO on ANY of the required items is an automatic termination of the evaluation)

| 1. Cleaned radiographic table and/or upright bucky | Yes | No | N/A |
| 2. Had radiographic room in an organized and tidy state | Yes | No | N/A |
| 3. Correctly identified the patient | Yes | No | N/A |
| 4. Asked if pregnancy was a possibility when appropriate | Yes | No | N/A |
| 5. Confirmed patient history and exam to be performed | Yes | No | N/A |
| 6. Closed x-ray room door prior to exposure | Yes | No | N/A |
| 7. Utilized appropriate ALARA technical factors | Yes | No | N/A |
| 8. Utilized the correct L/R marker | Yes | No | N/A |
| 9. Provided proper collimation | Yes | No | N/A |
| 10. Provided appropriate shielding to the patient | Yes | No | N/A |

Comments: Any "NO" requires evaluator comment

**Patient Care: The Student was able to and did the following:**

1. Properly identified him/herself to the patient | Yes | No | N/A |
| 2. Followed appropriate isolation/protection procedures when appropriate | Yes | No | N/A |
| 3. Provided the appropriate instructions/gown/jewelry security | Yes | No | N/A |
| 4. Provided explanations and instructions throughout the examination | Yes | No | N/A |
| 5. Provided for the patient’s safety and comfort | Yes | No | N/A |
| 6. Provided proper breathing instructions | Yes | No | N/A |
| 7. Followed appropriate emergency procedures | Yes | No | N/A |
| 8. Provided appropriate instructions to the patient upon completion of exam | Yes | No | N/A |

Comments: Any "NO" requires evaluator comment

**Positioning & Technical Skill: During the exam, the student:**

1. Identified if the exam is done table top or bucky | Yes | No | N/A |
| 2. Selected appropriate IR sizes | Yes | No | N/A |
| 3. Followed procedure manual for appropriate views | Yes | No | N/A |
| 4. Correctly utilized locks to move and adjust tube | Yes | No | N/A |
| 5. Positioned the patient properly for each image | Yes | No | N/A |
| 6. Employed the correct SID for each image | Yes | No | N/A |
| 7. Correctly aligned the CR to the part and IR | Yes | No | N/A |

Comments: Any "NO" requires evaluator comment

*This part to be filled out ONLY by a UNLV Clinical preceptor*

**Image Critique: The student was able to and accomplished the following:**

1. Assessed if the correct IR size was used | Yes | No | N/A |
| 2. Determined if the image is free of artifact | Yes | No | N/A |
| 3. Determined that the pertinent anatomy is properly demonstrated | Yes | No | N/A |
| 4. Identify pertinent anatomy | Yes | No | N/A |
| 5. Determine the presence or absence of motion artifact | Yes | No | N/A |
| 6. Assessed if the density and contrast of the image is optimal | Yes | No | N/A |
| 7. Identified any specific deficiencies present requiring a repeat radiography | Yes | No | N/A |
| 8. Identified specific corrections and/or changes to be employed in the repeat | Yes | No | N/A |
### APPENDIX H

#### Professional Growth Assessment

<table>
<thead>
<tr>
<th>Student:</th>
<th>Term:</th>
<th>Fall</th>
<th>Spring</th>
<th>Summer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical Assignment:</td>
<td><strong>Midterm</strong> or <strong>Final</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>1. <strong>Demeanor</strong></th>
<th>1-2</th>
<th>3</th>
<th>4-5</th>
<th>Score:</th>
<th>Comments:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Outward Behavior, Professional Conduct</strong></td>
<td>Temperamental &amp; sometimes rude, inconsiderate in understanding patient’s needs, expects patient to adjust to various situations.</td>
<td>Tolerant of patient behavior, needs additional experience to understand patient behavior, polite but indifferent. Views patient as part of the system.</td>
<td>Tolerant &amp; understanding of patient behavior, ethical, Empathetic-recognizes patient as an individual.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2. <strong>Appearance</strong></th>
<th>1-2</th>
<th>3</th>
<th>4-5</th>
<th>Score:</th>
<th>Comments:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Maintenance of an outward personal display of what is professionally proper.</strong></td>
<td>Neglects dress code, unbecoming, needs counseling.</td>
<td>May breach code at times, fair appearance, tidy.</td>
<td>Follows dress code, neat, favorable appearance, well groomed.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3. <strong>Adaptability</strong></th>
<th>1-2</th>
<th>3</th>
<th>4-5</th>
<th>Score:</th>
<th>Comments:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Ability to learn new behavior and adjust to change.</strong></td>
<td>Resistance to change impedes learning ability. Argumentative and reluctant to accept constructive criticism or try new ideas. Not able to make necessary adjustments in atypical situations.</td>
<td>Assumes new behavior after adequate instruction and time. Is capable of adjustments to atypical situations with adequate support. Sometimes does not appear to accept suggestions or new ideas</td>
<td>Masters new methods quickly. Able to make appropriate adjustments in atypical situations based on learned concepts, and experience, in typical situations and previous experience. Accepts and profits from constructive criticism.</td>
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<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4. <strong>Productivity</strong></th>
<th>1-2</th>
<th>3</th>
<th>4-5</th>
<th>Score:</th>
<th>Comments:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Ability to complete assigned tasks in accordance with experience level.</strong></td>
<td>Mistakes require extra attention, needs remedial measures to achieve expectations parallel to experience</td>
<td>Adequate grasp of essentials and related factors but requires occasional prompting or assistance to complete task.</td>
<td>Timeliness and accuracy parallels what is expected for experience level, completes tasks assigned.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>5. <strong>Ambition</strong></th>
<th>1-2</th>
<th>3</th>
<th>4-5</th>
<th>Score:</th>
<th>Comments:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Desire to succeed or achieve something.</strong></td>
<td>Would rather watch than directly experience a task, avoids challenges, responsibility, or measures for self-improvement, indolent.</td>
<td>Initiates a routine task when assigned; accepts challenges, responsibility, or measures for self-improvement, consistent</td>
<td>Initiates a routine task without being told; seeks challenges, responsibility, or measures for self-improvement; emulous</td>
<td></td>
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</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>6. <strong>Cooperation</strong></th>
<th>1-2</th>
<th>3</th>
<th>4-5</th>
<th>Score:</th>
<th>Comments:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Ability to work with others effectively.</strong></td>
<td>Inclined to create friction, hinders team progress, discourteous and rude at times, insubordinate.</td>
<td>Willing to vary task assignments when pressured, usually helpful and supportive, courteous when not stressed, accepts authority.</td>
<td>Willingness to vary task assignments; helpful, supportive, courteous, tactful, respects authority.</td>
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<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>7. <strong>Confidence</strong></th>
<th>1-2</th>
<th>3</th>
<th>4-5</th>
<th>Score:</th>
<th>Comments:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Assurance, belief in one's own abilities.</strong></td>
<td>Easily flustered, makes excuses, negative outlook, uncertain, will shy away from responsibility.</td>
<td>Displays composure during ordinary circumstances, occasionally unsure, more secure when others are around.</td>
<td>Displays composure during normal and adverse circumstances, proceeds with calmness, positive outlook, certainty;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Dependability</td>
<td>1-2</td>
<td>3</td>
<td>4-5</td>
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<tr>
<td>Ability to assume responsibility and carry out instructions in a reliable manner.</td>
<td>Expectations not always clear, frequently needs supervisory follow up on repetitive tasks, appears to have no inclination to follow policy or directives, careless with equipment.</td>
<td>Knows expectations requiring occasional supervisory intervention to meet them, can occasionally be distracted from assigned task; usually follows policies and directions without error, demonstrates adequate care for equipment.</td>
<td>Knows expectations and meets them, persistent in following through on tasks on schedule, follows policies and instructions without error, careful with equipment and reports potential problems.</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>9. Communication</th>
<th>1-2</th>
<th>3</th>
<th>4-5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ability to express concepts, verbally or in writing.</td>
<td>Does not communicate well. Seems unaware of what is important to be communicated and the appropriate time to communicate.</td>
<td>Communication skills are adequate. Occasionally fails to communicate important or necessary information.</td>
<td>Is able to communicate well with others, expressing ideas, situations and concepts clearly. Is aware of what must be communicated and when. Is concise when speaking with patients.</td>
</tr>
</tbody>
</table>

Summary of strengths: 

Area for future development: 

Comments of Clinical Evaluator: 

Record of Review

Student's Comments: 

Student Signature: ___________________________ Date: ___________________________
### Summary Competency Evaluation Form

#### RAD 331 – SUMMER I

<table>
<thead>
<tr>
<th>Exam</th>
<th>Cl Initials</th>
<th>Date</th>
</tr>
</thead>
<tbody>
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-retention test-

#### RAD 332 – FALL II

<table>
<thead>
<tr>
<th>Exam</th>
<th>Cl Initials</th>
<th>Date</th>
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<tbody>
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#### RAD 333 – SPRING II

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<tr>
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#### RAD 334 – SUMMER II

<table>
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<th>Exam</th>
<th>Cl Initials</th>
<th>Date</th>
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-retention test-
APPENDIX J

Competency Requirements

<table>
<thead>
<tr>
<th>Mandatory Procedures (37)</th>
<th>Elective Procedures (A minimum of 15)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chest and Thorax</td>
<td>Fluoroscopy</td>
</tr>
<tr>
<td>- Chest - Routine</td>
<td>Select two procedures and perform per site protocol</td>
</tr>
<tr>
<td>- Chest AP (Wheelchair or Stretcher)</td>
<td>- Upper GI (Single or Double Contrast)</td>
</tr>
<tr>
<td>- Geriatric Chest*</td>
<td>- Contrast Enema (Single or Double)</td>
</tr>
<tr>
<td>- Pediatric Chest (6 or younger)</td>
<td>- Small Bowel Series</td>
</tr>
<tr>
<td>- Ribs</td>
<td>- Esophagus (Not MBS)</td>
</tr>
<tr>
<td>Upper Extremity</td>
<td>- Cystography/Cystourethography</td>
</tr>
<tr>
<td>- Thumb or Finger</td>
<td>- ERCP</td>
</tr>
<tr>
<td>- Hand</td>
<td>- Myelography</td>
</tr>
<tr>
<td>- Wrist</td>
<td>- Arthrography</td>
</tr>
<tr>
<td>- Forearm</td>
<td>- Hysterosalpingography</td>
</tr>
<tr>
<td>- Elbow</td>
<td></td>
</tr>
<tr>
<td>- Humerus</td>
<td></td>
</tr>
<tr>
<td>- Shoulder</td>
<td></td>
</tr>
<tr>
<td>- Trauma** Shoulder or Humerus (Y, Transthoracic, or Axial)</td>
<td></td>
</tr>
<tr>
<td>- Trauma** UE Non-Shoulder</td>
<td></td>
</tr>
<tr>
<td>- Clavicle</td>
<td></td>
</tr>
<tr>
<td>- Geriatric Upper Extremity*</td>
<td></td>
</tr>
<tr>
<td>Lower Extremity</td>
<td>Head</td>
</tr>
<tr>
<td>- Foot</td>
<td>Must select at least 1</td>
</tr>
<tr>
<td>- Ankle</td>
<td>- Skull</td>
</tr>
<tr>
<td>- Knee</td>
<td>- Paranasal Sinuses</td>
</tr>
<tr>
<td>- Tibia-Fibula</td>
<td>- Facial Bones</td>
</tr>
<tr>
<td>- Femur</td>
<td>- Orbits</td>
</tr>
<tr>
<td>- Trauma** Lower Extremity</td>
<td>- Nasal Bones</td>
</tr>
<tr>
<td>- Geriatric Lower Extremity*</td>
<td>- Mandible</td>
</tr>
<tr>
<td>Spine and Pelvis</td>
<td>- Temporomandibular Joints</td>
</tr>
<tr>
<td>- Cervical Spine</td>
<td></td>
</tr>
<tr>
<td>- Thoracic Spine</td>
<td></td>
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<tr>
<td>- Lumbar Spine</td>
<td></td>
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<tr>
<td>- Pelvis</td>
<td></td>
</tr>
<tr>
<td>- Hip</td>
<td></td>
</tr>
<tr>
<td>- X-table Hip</td>
<td></td>
</tr>
<tr>
<td>- X-table Spine</td>
<td></td>
</tr>
<tr>
<td>Abdomen</td>
<td>Additional Elective Procedures</td>
</tr>
<tr>
<td>- KUB</td>
<td>- Decubitus Chest</td>
</tr>
<tr>
<td>- Upright Abdomen</td>
<td>- Decubitus Abdomen</td>
</tr>
<tr>
<td>Surgical Studies</td>
<td>- Sternum</td>
</tr>
<tr>
<td>- C-Arm (Requiring manipulation to obtain more than one projection)</td>
<td>- Soft Tissue Neck</td>
</tr>
<tr>
<td>- Surgical C-arm (Requiring manipulation around a sterile field)</td>
<td>- Sacroiliac Joints</td>
</tr>
<tr>
<td>Mobile Studies</td>
<td></td>
</tr>
<tr>
<td>- Portable Chest</td>
<td>- Intravenous Urography</td>
</tr>
<tr>
<td>- Portable Abdomen</td>
<td>- Scapula</td>
</tr>
<tr>
<td>- Portable Upper or Lower Extremity</td>
<td>- AC Joints</td>
</tr>
<tr>
<td></td>
<td>- Toes</td>
</tr>
<tr>
<td></td>
<td>- Patella</td>
</tr>
<tr>
<td></td>
<td>- Calcaneus (Os Calcis)</td>
</tr>
<tr>
<td></td>
<td>- Sacrum/Coccyx</td>
</tr>
<tr>
<td></td>
<td>- Scoliosis Series</td>
</tr>
<tr>
<td></td>
<td>- Pediatric Upper Extremity (6 years or younger)</td>
</tr>
<tr>
<td></td>
<td>- Pediatric Lower Extremity (6 years or younger)</td>
</tr>
<tr>
<td></td>
<td>- Pediatric Abdomen (6 years or younger)</td>
</tr>
<tr>
<td></td>
<td>- Pediatric Mobile Study (6 years or younger)</td>
</tr>
<tr>
<td></td>
<td>- Geriatric* Hip or Spine</td>
</tr>
<tr>
<td></td>
<td>- Sternoclavicular Joint</td>
</tr>
</tbody>
</table>

*Geriatric = At least 65 or older and physically or cognitively impaired as a result of aging
**Trauma = Requires modifications in positioning due to injury with monitoring of the patient’s condition
UNLV RADIOGRAPHY PROGRAM
CLINICAL ACCOUNTABILITY REPORT

Reported by: ___________________________  Date of Report: ___________________________

Title/Role: ___________________________  Supervisor/Clinical preceptor: ___________________________

Student Name: ___________________________  Supervising Technologist: ___________________________

Date: ________________  Time: ________________  Location: ___________________________

EXPLANATION OF EVENTS:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

IMMEDIATE ACTION TAKEN:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

FOLLOW UP ACTION:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

All areas of this form must be completed. By signing this document, I acknowledge that the information is true and accurate to my best understanding.

Signature: ___________________________  Date: ________________
APPENDIX L

MRI Screening Form

MAGNETIC RESONANCE (MR) ENVIRONMENT SCREENING FORM FOR INDIVIDUALS*

The MR system has a very strong magnetic field that may be hazardous to individuals entering the MR environment or MR system room if they have certain metallic, electronic, magnetic, or mechanical implants, devices, or objects. Therefore, all individuals are required to fill out this form BEFORE entering the MR environment or MR system room. Be advised, the MR system magnet is ALWAYS ON.

*NOTE: If you are a patient preparing to undergo an MR examination, you are required to fill out a different form.

Date   /   /   Name   Last Name   First Name   Middle Initial   Age   

Address   
City   
State   Zip Code   

Telephone (home)   ( )   
Telephone (work)   ( )   

1. Have you had prior surgery or an operation (e.g., arthroscopy, endoscopy, etc.) of any kind?  ❏ No ❏ Yes
   If yes, please indicate date and type of surgery: Date   /   /   Type of surgery.

2. Have you had an injury to the eye involving a metallic object (e.g., metallic shrapnel, foreign body)?  ❏ No ❏ Yes
   If yes, please describe:

3. Have you ever been injured by a metallic object or foreign body (e.g., BB, bullet, shrapnel, etc.)?  ❏ No ❏ Yes
   If yes, please describe:

4. Are you pregnant or suspect that you are pregnant?  ❏ No ❏ Yes

WARNING: Certain implants, devices, or objects may be hazardous to you in the MR environment or MR system room. Do not enter the MR environment or MR system room. If you have any question or concern regarding an implant, device, or object.

Please indicate if you have any of the following:

❑ Yes  ❏ No  
❑ Cardiac pacemaker
❑ Implanted cardiac defibrillator (ICD)
❑ Electronic implant or device
❑ Magnetically-activated implant or device
❑ Neurostimulation system
❑ Spinal cord stimulator
❑ Cochlear implant or implanted hearing aid
❑ Insulin or infusion pump
❑ Implanted drug infusion device
❑ Any type of prosthesis or implant
❑ Artificial or prosthetic limb
❑ Any metallic fragment or foreign body
❑ Any external or internal metallic object
❑ Hearing aid
❑ Other implant
❑ Other device

IMPORTANT INSTRUCTIONS

Remove all metallic objects before entering the MR environment or MR system room including hearing aids, deep brain stimulation, hearing devices, claustrophobia, hair pieces, barrettes, jewelry (including body piercing jewelry), watches, safety pins, paperclips, money clips, credit cards, bank cards, magnetic strip cards, coins, pins, pacemaker, mill clippers, metal-toothed bootstraps, and tools. Loose metallic objects are especially prohibited in the MR system room and MR environment.

Please consult the MRI Technologist or Radiologist if you have any question or concern before you enter the MR system room.

I attest that the above information is correct to the best of my knowledge. I have read and understand the entire contents of this form and have had the opportunity to ask questions regarding the information on this form.

Signature of Person Completing Form   

Form Information Reviewed By:   

❑ MRI Technologist   ❏ Radiologist   ❏ Other

Date   /   /   

Signature
APPENDIX M

Technical Standards
School of Integrated Health Sciences
Radiography Program

The following are tasks normally performed by students while in the UNLV Radiography Program. Please check the appropriate box below to answer the question (“Are you able to?”). Students must meet these requirements to succeed in the program.

1. Stand for 30 minutes on a tiled or carpeted surface.
   - Yes
   - No

2. Walk 600 feet, one way, on a tiled or carpeted surface.
   - Yes
   - No

3. Lift a 19 lb. sandbag (weight) from the floor to a height of 36 inches.
   - Yes
   - No

4. Lift and carry approximately 22 lbs. of film cassettes (x-ray film holders) a distance of 20 ft.
   - Yes
   - No

5. Lift a 10 lb. leaded apron to shoulder level.
   - Yes
   - No

6. Wear a 10 lb. leaded apron for up to 2 hours.
   - Yes
   - No

7. Push a 250 lb. patient in a wheelchair or on a gurney.
   - Yes
   - No

8. Pull an adult patient 3 to 4 feet using a sheet or sliding board.
   - Yes
   - No

9. Reach overhead to 74” from the floor.
   - Yes
   - No

10. Handle various size objects (such as cassettes, sponges, sliding boards, etc.).
    - Yes
    - No

11. Utilize a computer keyboard for inputting clinical data.
    - Yes
    - No

12. Have sufficient vision to manipulate x-ray control panels, position patients, identify patients, assess radiographs, etc.
    - Yes
    - No

13. Have sufficient hearing to assess patients and answer questions, operate machinery, etc.
    - Yes
    - No

14. Have sufficient verbal and writing skills to give instructions to patients relate patients' symptoms, cope with emergency situations, etc.
    - Yes
    - No

Signature: ________________________________ Date: ____________________________
UNLV Radiography Program
Policy Manual Acknowledgement of Review

I have read and been informed of the content, requirements, and expectations stated in the UNLV Radiography Program Policy Manual. I have received a copy of the policy manual and agree to abide by the policy guidelines as a condition of my status as a student in the UNLV Radiography Program.

I understand that if I have questions, at any time, regarding the policy manual, I will consult with the Program Director.

I also understand, that at any time during the duration of my time spent in the Radiography Program, if I do not abide by the policy guidelines, I may be subject to disciplinary actions such as probation, suspension, or dismissal from the Radiography Program.

Name (Printed): ___________________________ NSHE #: _______________________

Check the following boxes for acknowledgement:

☐ I have read and been informed of the UNLV Radiography Program Policy Manual.
☐ I agree to abide by the policy guidelines.

Student Signature: ___________________________ Date: _______________________
School of Integrated Health Sciences Statement of Responsibility

As a student participating in an internship or off-site clinical training, the undersigned assumes all risks and is solely responsible for any injury, illness, or loss sustained while traveling to or from, or participating in the __________________________ program, operated by the Board of Regents of the Nevada System of Higher Education, the University of Nevada, Las Vegas, School of Integrated Health Sciences, and their agents, officers, and employees, at its rotation sites and throughout its programs unless such injury or loss arises solely out of the sites’ gross negligence or willful misconduct.

Student Signature: ___________________________________________ Date: __________________________

Student Name (Printed): ______________________________________ Date: __________________________
UNLV Radiography Program

Student Education Model

In order to properly prepare students for the responsibilities of a Radiologic Technologist, the UNLV Radiography Program uses students as medical education models. Modeling allows program participants to obtain the basic knowledge and skills required to provide quality health care. Specifically, students will be positioned for x-ray procedures and used for non-invasive patient care simulations. During positioning and patient care simulations, students will be palpated to ensure accuracy. Procedures performed by UNLV students on student medical models are supervised by an appropriately qualified health care professional. Students enrolled in this program are encouraged to speak with their instructor if they have questions or concerns about participating as a medical education model.

Initial on the spaces to the left of the statement:

______ I consent to take part in the student education experience, including as a medical education model.

______ I will treat my fellow students professionally and with respect and sensitivity at all times.

______ I will keep confidential any information revealed or discovered during this training.

____________________________________________________
Signature

____________________________________________________
Printed Name

____________________________________________________
Date