



CENTER FOR EDUCATION

**STUDENT HANDBOOK
2025-2026**

SCHOOL OF MEDICAL IMAGING

St. Mary's Medical Center
Center for Education
SOMI
Student Handbook

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INTRODUCTION

Welcome to the Center for Education at St. Mary's Medical Center, which is home to the St. Mary's/Marshall University Cooperative Associate in Science in Nursing Program, the St. Mary's/Marshall University Cooperative School of Medical Imaging, and the St. Mary's/ Marshall University Cooperative School of Respiratory Care. As you begin your program of study, you are beginning challenging and mobile professions. Health care today offers a variety of career options in a wide range of settings.

The policies, rules and regulations are designed to assist your academic progression and promotion in the program. As a student, you will be held responsible for the contents of this handbook during your enrollment in the program.

The Vice President for Schools of Nursing and Health Professions (VPSONHP), directors, faculty, and staff wish you well in your studies. If we can be of any help to you, please feel free to contact us at any time.

In order to maintain a work atmosphere that is conducive to student learning, while promoting the highest quality of patient care and organization, there are policies, procedures, and rules that must be followed. These are outlined in the Center for Education portion of this handbook, and the additional policies listed in the School of Medical Imaging portion of the handbook. Key portions of this manual will be reviewed during class.

Over the next three years, you will benefit from a broad range of experiences that will prepare you for entry level work as a radiographer. There are many times that you will find yourself stressed, overworked and emotionally drained. Keep in mind that many people before you have had the same experiences and can be of help if you ask.

Again, we extend our welcome to each of you.

Disclaimer

The provisions of this handbook do not constitute a contract, expressed or implied between any applicant or student and the Center for Education (CFE) at St. Mary's Medical Center (SMMC). The Center for Education reserves the right to change any of the provisions, schedules, programs, courses, rules, regulations, or fees whenever school authorities deem it expedient to do so.

Program Overview

St. Mary's School of Medical Imaging (SOMI) was started in 1964. It is a hospital-based educational program consisting of 36 months of competency-based clinical and didactic instruction to prepare graduates for entry level employment as a radiographer or sonographer, and to sit for the American Registry of Radiologic Technologist (ARRT) certification exam upon graduation.

St. Mary's School of Medical Imaging offers two different degree pathways.

Students can choose a **BS degree through Marshall University** and will be granted a Bachelor of Science in Medical Imaging degree once the applicant has fulfilled all requirements from the School of Medical Imaging. Students may also choose an **AAS degree through Mountwest Community and Technical College (MCTC)** and will be granted an Associate of Applied Science degree once the applicant has fulfilled all requirements from the School of Medical Imaging.

Applicants must specify which degree they wish to pursue when making an application to the program. Both programs are selective in their admission practices and can only offer a limited number of spaces to applicants each year. See the Application Procedures link to the left of this page.

Radiography is a multi-dimensional career that includes digital radiography, trauma radiography and fluoroscopy. Radiographers have many advanced imaging opportunities available including computed tomography, magnetic resonance imaging and cardiovascular intervention radiography.

The School of Medical Imaging (SOMI) is a thirty-six month program designed to prepare the student for entry and professional level employment as a radiographer/sonographer. The SOMI/Radiography Program is accredited by the Joint Review Committee on Education in Radiography (JRCERT), and recognized by the West Virginia Board of Examiners of Radiologic Technologists. Radiography Graduates of the program are eligible to take the entry-level American Registry of Radiologic Technologists (ARRT). Radiography Students will also be didactically prepared for an advanced practice modality in imaging. Radiography Graduates in the will have three years after completing the program to sit for the Primary certification exam; however, post-primary certification exams (advanced imaging) clinical competency must be dated within 24 months of submitting an application. Since senior students in the BS pathway from Marshall University will be documenting post-primary competencies, students who enter the program must complete all didactic and clinical requirements including general education requirements within four years (forty-eight months) of entering the SOMI portion of the program (sophomore MU year). Post Primary competencies do not apply to the AAS pathway from MCTC.

The program is composed of two major components; a clinical component and an academic (classroom) component. Each component is designed to complement the other so that procedures taught in the classroom are performed under supervision in the clinical setting at that time. Each component is discussed separately in their respective sections.

Mission Statement and Program Philosophy

The mission of St. Mary's School of Medical Imaging is to prepare qualified graduates in the area of imaging sciences through current educational methodologies. The faculty, in collaboration with internal and external groups, will foster the development of a learning environment that is responsive to local and national trends in health care to produce multi-competent radiology professionals.

The faculty of St. Mary's School of Medical Imaging believes that medical imaging is a unique combination of art and science based on the desire to meet specific health care needs of the community. The focus of radiography medical imaging is to provide optimal results with the highest quality of patient care. The achievement of this goal requires the application of the physical and biological sciences coupled with effective communication and interaction skills.

We believe that learning is an end product of education. We believe that motivation, readiness, interest and perseverance are essential to effective learning. We also believe that learning occurs best in an atmosphere built on a cooperative teacher-student relationship.

We believe that medical imaging education is a planned program for the guidance of students in acquiring the knowledge and skills that will prepare them for entry level employment in the various fields of medical imaging. We believe that learning does not stop at graduation and the continuing education is an integral part of their professional development.

With this in mind, it is the responsibility of the faculty to select, plan, organize, implement and evaluate educational experiences for the students in a progressive manner that gives the students direction and allows for individual differences. In doing so, it is the responsibility of the student to cooperate with faculty in all programmatic policies and procedures and to fully cooperate in group activities. Only then can this educational program foster a cooperative environment that is conducive to student learning.

Revised 5/13, Reviewed 7/14, 6/15, 7/16, 7/17, 8/17, 7/18, 6/19, 7/21, 6/22, 24, 6/25

Articulation Agreement between St. Mary's Medical Center and Marshall University

SMMC SOMI is affiliated with Marshall University's College of Health Professions (COHP) to offer a Baccalaureate degree in Medical Imaging upon satisfactory completion of all SOMI didactic and clinical course work and satisfaction of MU general education requirements. American Registry of Radiologic Technologists requires a college degree as well as the pro in order to sit for the primary certification boards. Marshall University awards the degree

Revised: 6/07, 7/09, 7/10, 6/11, 5/16

Reviewed: 8/12, 8/15, 5/16, 8/17, 7/18, 6/19, 6/20, 6/24, 6/25

Articulation Agreement between MountWest Community and Technical College (MCTC)

SMMC SOMI is affiliated with MCTC to offer an AAS in Radiology upon satisfactory completion of all SOMI didactic and clinical course work and satisfaction of MCTC general education requirements. American Registry of Radiologic Technologists requires a college degree as well as the program in order to sit for the primary certification boards. Marshall University and/or MCTC awards the degree

Revised: 6/25

Reviewed: 8/12, 8/15, 5/16, 8/17, 7/18, 6/19, 6/20, 6/24, 6/25

Programmatic Accreditation

Candidates pursuing primary pathway certification in Medical Imaging must have, within the preceding three years, successfully completed an educational program that is accredited by a mechanism acceptable to the ARRT. The Radiography Program is accredited by the Joint Commission on Education in Radiologic Technology (JRCERT)

As part of their education, candidates must also demonstrate competency in didactic coursework and an ARRT specified list of clinical procedures by completing competency requirements established for the discipline in which they are seeking certification.

Ethical Standards

Every candidate for certification must, according to ARRT governing documents, "be a person of good moral character and must not have engaged in conduct that is inconsistent with the ARRT Rules of Ethics," and they must "agree to comply with the [ARRT Rules and Regulations](#) and the [ARRT Standards of Ethics](#) which investigates all potential violations in order to determine eligibility.

Issues addressed by the Rules of Ethics include convictions, criminal procedures, or military court martial as described below: Felony, Misdemeanor.

Criminal procedures resulting in a plea of guilty or nolo contendere (no contest), a verdict of guilty, withheld or deferred adjudication, suspended or stay of sentence, or pre-trial diversion.

Juvenile convictions processed in juvenile court and minor traffic citations not involving drugs or alcohol do not need to be reported.

Additionally, candidates for certification are required to disclose whether they have ever had any license, registration, or certification subjected to discipline by a regulatory authority or certification board (other than ARRT/ARDMS). Primary pathway candidates must indicate any honor code violations that may have occurred while they attended school.

Candidates becoming certified through the primary pathway may complete a [pre-application](#) to determine their ethics eligibility prior to enrolling in or during their educational program.

The appropriate financial aid offices at the COHP at MU will be notified if a student is dismissed from the program or voluntarily withdraws. The student should contact the Financial Aid office and the College directly to determine any related penalty or sanctions that may occur.

School of Medical Imaging Goals

To assure that St. Mary's Medical Center School of Medical Imaging is effective in providing the highest quality educational opportunities to students as set forth in the Standards of an Educational Program in Radiography by the Joint Review Committee on Education in Radiography, the SOMI has developed an Assessment Plan based on the following goals. The Assessment Plan and goals are evaluated on an annual basis and are published in an annual report to the Advisory Committee members. Students interested in reviewing the program's Assessment Plan or Annual Report should contact the Chair

Radiography

- I. Goal: The program will graduate clinically competent imaging professionals to meet community healthcare needs**
- II. Goal: Students/graduates will be effective communicators**
- III. Goal: Students/graduate will model professionalism**
- IV. Goal: Students/graduates are effective at critical thinking.**

Reviewed: 8/15, 5/16, 7/2017, 6/18, 6/20, 2/21, 7/21, 6/22,6/23,5/25

Revised: 3/2004; 6/2005; 8/2007; 3/2010; 8/2012, 5/13, 1/14, 5/16, 7/17,6/19, ,6/24,5/25

Professional Development

The American Registry of Radiologic Technologists (ARRT) requires that certified the radiographer document continued education (CE) on a biennial basis Student professional development includes information on the ARRT rules and regulations and various means of acquiring CE credits. In addition, during the spring semester, imaging professionals will speak during the scheduled seminar on professional growth and opportunities.

Radiography Students are encouraged to become members of the American Society of Radiologic Technologists (ASRT) and the West Virginia Society for Radiologic Technologists (WVSRT) to begin the pathway to professional development. Junior year students are required to attend the annual WVSRT meeting. Senior year students are highly encouraged to attend. Students are also encouraged to apply as an intern for the annual ASRT meeting in June This is an excellent opportunity to become involved on a national level and make valuable professional contacts.

Learning Opportunities and Resources

Clinical Practicum

In addition to the knowledge required to become an entry-level imaging professional, students at SMMC SOMI who are enrolled in the BS degree program with Marshall are accorded the opportunity to experience advanced imaging modalities in radiography, and radiation oncology as electives during the sophomore and junior year

Fourth year BS radiography students will focus on one advanced practice modality including cardiovascular imaging, interventional radiology, computed tomography, magnetic resonance imaging, or mammography. They will take advanced coursework designed to prepare them for an advanced practice certification exam and will begin documentation of the required clinical competencies.

Third year AAS radiography graduate students will be prepared to take their ARRT Certification.

SMMC SOMI is affiliated with several medical facilities in order to provide a broad range of learning opportunity and exposure to the most modern medical imaging technologies in the region. Radiography clinical rotations include SMMC including both the main and Ironton campuses, Cabell Huntington Hospital (CHH), the Huntington VA Medical Center (VA), Huntington Internal Medical Group, Inc. (HIMG), Rivers Health, and Valley Health. . Clinical instructors are available at all clinical rotations to teach and assist students in achieving mandatory clinical practicum assignments.

Examples of technological innovations available to students include: digital imaging, computed radiography, PACS, fluoroscopy, bone densitometry, orthopedic imaging, geriatric imaging, pediatric imaging. The SOMI curriculum also offers electives such as trauma/surgery, pediatric radiology and geriatric radiology.

FACULTY AND ADMINISTRATION

Joey Trader, ED RN	Vice President, SMMC Center for Education
Debby Moore, RT (R) (CT) ARRT	Chair and Program Director School of Medical Imaging
Jeffrey Jobe, MA, RT (R) ARRT	Faculty, SMMC Medical Imaging
Nikki Napier, MS, RT (R) (MRI), ARRT	Faculty, SMMC Medical Imaging
Derry Osborne, MBA, RT (R) (CI) ARRT	Faculty, SMMC Medical Imaging
Gabby Ransbottom,BS,RT(R)(CT)(VI) ARRT	Faculty, SMMC Medical Imaging
LeighAnn White,RT, RT (R), ARRT	Clinical Instructor, SMMC
Jeremy Mathis, RT (R), ARRT	Clinical Instructor, SMMC
Natasha Stiltner	Clinical Instructor SSMC
Rina Angus	Clinical Instructor SSMC
Jeremy Mathis	Clinical Instructor SSMC
Kelly Jo Cox	Clinical Instructor, SMMC Scott Campus
Jay Arnette, RT (R) ARRT	Clinical Instructor, SMMC Ironton Campus
Melanie Dailey, RT (R) ARRT	Clinical Instructor, CHH
April Wright, AAS, RT (R) ARRT	Clinical Instructor, HIMG
Amy Stratton, RT (R) ARRT	Clinical Instructor, VA Med Center
Paula Cremeans	CFE Secretary

SCHOOL FACILITIES

OFFICES:

VICE PRESIDENT FOR SCHOOLS OF NURSING AND HEALTH PROFESSIONS/DIRECTOR SCHOOL OF NURSING OFFICE – ROOM 138 Phone: 304/526 - 1416

The Vice President of Schools of Nursing and Health Professions (VPSONHP) also serves as the Director School of Nursing. The Director is available at most times to consult with the student(s). You are encouraged to schedule an appointment in advance.

CHAIR SCHOOL OF MEDICAL IMAGING OFFICE – ROOM 141 Phone: 304/526 - 1259

The Chair is available at most times to consult with the student(s). The Chair also serves as the director of the radiography program. You are encouraged to schedule an appointment in advance.

ADMINISTRATIVE SECRETARY'S OFFICE – ROOM 137 Phone: 304/526 - 1426

Appointments with the Vice President for Schools of Nursing and Health Professions may be scheduled through this office.

BUSINESS OFFICE – ROOM 133 Phone: 304/526 – 1435

All financial transactions are handled in this office.

FACULTY OFFICES

You should arrange an appointment in advance, whenever possible.

****An automated phone menu is utilized for directing incoming phone calls. The phone number is 304/526 – 1415.**

LIBRARY / LIBRARIAN'S OFFICE – ROOM 107 Phone: 304/526 – 1433

The librarian catalogs library holdings and coordinates the care of the library either in the office or in the library.

CLASSROOMS – 213, 217, 218, 219, 220, 221, 222

No food or drink is allowed in any classroom. Classrooms are equipped with tables, chairs, and electrical outlets for personal laptops.

COMPUTER LABS – 125, 127, 128, 130

No food or drink is allowed in any computer lab. Computer labs are for the use of CFE students and personnel only. Copy righted software is not allowed out of the lab; no software is to be downloaded onto flash drives, etc.

LIBRARY – (See Library section for summary of policies and services.) Students are to review the Library Handbook on reference in the library. No food or drink is allowed in the library.

SKILLS and ENERGIZED LABORATORIES –

No food or drink is allowed in the skills laboratories. The labs are utilized for instruction, practice and evaluation. Please check the schedule posted beside each door for availability. Energized lab is secured and requires a member of the radiography program faculty to be present when students are utilizing the x-ray equipment.

ACADEMIC SUPPORT CENTER – 178

No food or drink is allowed in the academic support center. Resources are available for students who may need academic assistance. Appointments should be scheduled with the designated faculty.

STUDY/TESTING ROOMS – 184, 185, 186, 187, 188, 189

No food or drink is allowed in the study/testing rooms. These rooms are available for use by students, unless the room is needed for testing purposes.

STUDENT LOUNGE/PATIO – The lounge and patio are available for students to relax and/or dine. There are vending machines available, as well as refrigerators and microwaves.

LOCKERS – Each student is assigned a locker. The student is expected to provide their own lock. CFE personnel do have the right to inspect a locker if it is deemed necessary to do so.

PHONES/ELECTRONIC DEVICES – No electronic device is to be used in any classroom and/or lab unless the faculty member has instructed the student(s) to utilize the device for a class assignment. Phones are to be turned off during classes/labs. No phones, tablets, smart watches (Apple Watch, FitBit, etc.) etc. are permitted in any class/lab during test review. All electronic devices are to be placed in the student's assigned locker. Electronic devices with the camera function in the "on" position and smart watches (Apple Watch, FitBit, etc.) are forbidden in the clinical areas. Watches are not permitted during exams as clocks are provided in each room.

BULLETIN BOARDS – Bulletin boards are located throughout the CFE. Check the boards as advised by faculty.

ELECTRONIC MESSAGES – Check email and MU on-line daily.

THE SCHOOL WILL NOT ASSUME RESPONSIBILITY FOR LOST OR STOLEN PROPERTY

Reviewed: 7/10, 7/12, 7/13, 8/17, 7/18, 6/20, 7/21, 6/22, 6/24, 5/25

Revised: 5/05, 6/07, 4/08, 7/08, 11/08, 11/09, 2/17, 7/18, 5/25

STUDENT SERVICES

Counseling and Other Assistance

SMMC has a readily available and accessible Employee Assistance Program through the Department of Mental Health Counseling (304/526-6675), which offers 24 hour service. They maintain an office in the Center for Education exclusively for student use. This program is available to all St. Mary's employees and students, and includes the following specified service to students and employees and their eligible family members:

- 24 hour telephone access
- Free assessment by professionals
- Short term counseling
- Referral service
- Crisis intervention

Help is also available on the Marshall University campus at the Student Health Education Program (SHEP), MU Recreation Center (304/696-4800). See next page for list of some of the available services.

Formulated: Prior to 5/95

Reviewed/Revised: 5/95, 5/97, 4/98, 10/98, 6/07, 11/08, 11/09, 7/10, 7/13, 8/17, 7/17, 6/19, 6/20, 7/21, 5/25

Revised: 5/04, 5/05, 4/08, 7/08, 7/12, 6/22, 6/24, 5/25

Marshall University Student Services

SERVICE	EXPLANATION	LOCATION/PHONE
Student Health Education Program (SHEP)	Provides wellness opportunities, substance prevention, and health education	MU Recreation Center – 1st floor 304/696-4800
Health & Fitness Center (W. Don Williams Center)	Cardiovascular and weight training equipment. Students must go through a brief orientation prior to use of the center.	Gullickson Hall – 1st floor 304/696-3653
Health Services (see SHEP above)	Provided by University Physicians and Surgeons, an affiliate of the University's School of Medicine. The clinic is located in the new building next to Cabell Huntington Hospital. *Part-time students may be required to pay fees for services. http://www.marshall.edu/studenthealth/	1st Floor, Family Practice, CHH Hal Greer Blvd. 304/696-1100
Recreational Facilities (Henderson Center)	Exercise facilities, weight room, indoor pool, etc.	20th Street, 5th Avenue 304/696-6833
Speech and Hearing Center	Services for students with speech, voice or hearing concerns.	Smith Hall – Room 143 304/696-3640
Campus Christian Center	The ecumenical staff of the Center is responsive to the personal, academic, vocational and spiritual needs of the students.	Campus Christian Center Building 304/696-2444
Counseling Services	Provides individual and small group counseling.	Prichard Hall – 1st floor 304/696-3111
Office of Disability Services	Provides resources for students with disabilities.	Prichard Hall – Room 117 304/696-2271
Psychology Clinic	Low-cost services available for a range of problems, including depression, anxiety, marital, family, etc.	Harris Hall – Room 335A 304.696-2772
Academic Advising Services	Provides program/major information by college	Laidley Hall 304/696-7041 Link: www.marshall.edu/uc/advising
H.E.L.P. Program (Higher Education for Learning Problems)	Testing and Assistance Program for students with learning problems.	Myers Hall 520 18th Street 304/696-6252
Returning Students Program	Provides counseling and referral for students who are 25 or older and/or are returning after a break in their education.	Prichard Hall – Room 135 304/696-3111 or 304/696-3338
Tutors (Educational Support Service)	Provide list of tutors for specific topics.	Laidley Hall 304/696-3169
Career Services	Career counseling and testing. Computers for resume creation. Part-time and summer employment assistance and many more services.	17th Street and 5th Avenue 304/696-5627

Financial Aid	Scholarships, grants and loans	Old Main – Room 116 304/696-3162
Other:		
Artists Series	Educational, cultural and entertaining concerts, productions, opera, films, etc. *Part-time students may purchase tickets at half price.	Joan C. Edwards Performing Arts Center 304/696-6656
Legal Aid	Attorneys offer advice and counseling on all legal matters, which concern students (lease/tenant disputes, consumer rights, domestic relations, auto accidents, etc.)	Memorial Student Center 2W23 304/696-2285
Library	John Deaver Drinko Library Health Science Library	MU campus Health Center next to CHH
Parking	Parking pass for students lots for a fee	Bliss Charles Public Safety Building 5th Avenue and 18th Street 304/696-6406
Sporting Events	Discount tickets are available for students.	Tickets on sale at Henderson Center 1-800-THE-HERD
Student Government	Executive, Legislative & Judicial branches. Elections are held in November and March with representatives from academic colleges within the university.	Memorial Student Center – Room 2W24 304/696-6435

Revised: 5/04, 5/05, 4/08, 7/08, 11/09, 7/12, 12/16, 6/19

Reviewed: 11/08, 7/09, 7/10, 7/13, 8/17, 7/17, 7/18, 6/19, 6/20,6/22,,6/24,5/25

Student Support Programs MCTC

Student Support Programs is committed to helping students succeed by offering a range of essential resources. We provide free bus passes for transportation, access to a food pantry, professional clothing for job interviews and internships, and much more. Their goal is to ensure every student has the support they need to thrive academically and personally. For more information visit the Student Services One Stop located on the 1st floor.

One Mountwest Way
Huntington, WV 25701
304-710-3140

St. Mary's Medical Center – Student Services

STUDENT HEALTH SERVICES		
Outpatient and Employee Pharmacy	Students are eligible to utilize the Employee/ Outpatient Pharmacy located on 1 East at SMMC. This service is available for currently enrolled students as well as his/her spouse and dependents if claimed on income tax returns. Prescriptions and refills (only for medications originally filled by the SMMC pharmacy) can be filled at cost plus 25%. The pharmacy is open Monday through Friday from 9:30 am – 12:30 noon and 1:30 pm to 3:30 pm. The student is responsible for payment by cash, check, or credit card upon receipt of medication. The student is also responsible for filing this claim with his/her insurance carrier if eligible. Pharmacy services are subject to change without notice.	St. Mary's Medical Center 1 East
Wellness Center	Students may use the Wellness Center at SMMC for a small fee.	St. Mary's Medical Center.
COUNSELING		
Counseling Services	SMMC Employee Assistance Program is available to students. Counselors are available 24 hours/day. Assessment, referral and crisis intervention available.	304/526-6675 Room 209 St. Mary's Medical Center
ACADEMIC ADVISING		
Academic Support	Faculty are available to assist students experiencing academic difficulty.	304/526-1432
Academic Advising Service	Faculty advisor assigned to assist student to progress through nursing program.	See Student Handbook
FINANCIAL AID		
Scholarships	Various scholarships are available to students progressing in the Schools of Nursing, Medical Imaging and Respiratory Care. See guidelines for application for specific scholarships.	See Student Handbook
STUDENT ORGANIZATIONS		
Class Organizations	Each year, student representatives are elected to conduct business and relay information or concerns to the faculty or administration.	See Student Handbook
Lambda Nu	SMMC School of Medical Imaging Honor Society	School of Medical Imaging
OTHER		
Computer Labs	Four computer labs with internet access are available.	Rooms 125, 127, 128, 130 Center for Education See Student Handbook

Library	Libraries available to assist students. Textbooks, periodicals, references, audiovisuals and Internet access available.	Room 107 Center for Education
Skills Labs	Learning lab equipped with patient care items and learning models. Open for student practice at posted times.	Room Center for Education
Study Rooms	Private study rooms with computer are available.	Rooms 184, 185, 186, 187, 188, 189
Parking	Free parking is available in designated areas.	See Student Handbook
Cafeteria Discount – SMMC	Students will receive a 15% discount from the SMMC cafeteria. They must be wearing their SMMC-CFE name tag in order to receive the discount.	
Copy Services	A coin operated copy machine is available for student use in the CFE library. All computer printing is also routed to the CFE library copier.	
Student Lounge/Patio	The student lounge and patio are conveniently located in the CFE, with comfortable seating, tables and chairs. There are vending machines available, as well as refrigerators and microwaves.	
Gift Shop	Gift shops are located in the lobby of SMMC and Cabell Huntington Hospitals.	
ATM	An ATM machine is available at SMMC.	
Internet Access	Students will have access to the Internet for school related research via computers in the CFE library and the computer labs. Access is limited to student research only. Students are not to access personal e-mail accounts (such as Hotmail). Consult with the librarian regarding computer access. Any student attempting to access inappropriate Internet sites will face disciplinary action. Wireless Internet is also available in the CFE.	

Reviewed: 5/04, 7/05, 6/07, 4/08, 7/08, 7/09, 11/09, 7/13, 8/17, 7/18, 6/19, 6/20, 7/21, 6/22, 6/23, 5/25

Revised: 11/08, 7/10, 7/12, 7/18, 6/24

SCHOLARSHIPS

Scholarships for School of Medical Imaging.

The American Society of Radiologic Technology offers a number of scholarships for imaging students. See the website for details. www.asrt.org

The national chapter of Lambda Nu offers scholarships. See the website for details. www.lambdanu.org

The West Virginia Society of Radiologic Technology offers an annual scholarship. See the website for details. www.wvsrt.org

Reviewed: 11/08, 11/09, 7/10, 7/12, 7/13, 8/17, 7/18, 6/19, 7/21, 6/22, 6/24, 5/25

Revised: 5/04, 5/05, 6/06, 6/07, 4/08, 7/08, 7/09, 7/18, 6/20, 3/21, 5/25

SCHOOL OF MEDICAL IMAGING POLICIES

ACADEMIC POLICIES

Academic Integrity 1.0

Section: ACADEMIC POLICIES	Title: Academic Integrity	Policy #: SHB 1.0
Department: Center for Education	Approved by: Faculty Organization	Date last reviewed/revised: 5/25

POLICY: Any act of a dishonorable nature which gives the student engaged in it an unfair advantage over others engaged in the same course of study will be prohibited.

DEFINITIONS:

PROCEDURE:

1. Academic dishonesty shall include, but is not limited to, the following:

a. Cheating

- i. Unauthorized use of any materials, notes, sources of information, study aids or tools during an academic exercise.
- ii. Unauthorized assistance of a person, other than the course instructor, during an academic exercise (exams).
- iii. Unauthorized viewing of another person's work during an academic exercise (exams).
- iv. Unauthorized securing of all or any part of assignments or examinations in advance of the submission by the instructor.
- v. Unauthorized use of electronic devices to photograph or record course or evaluation materials (including but not limited to test reviews, tests, or assignments).

b. Fabrication/Falsification

The unauthorized invention or alteration of any information, citation, data or means of verification in an academic exercise, official correspondence, or a university record.

c. Plagiarism

Submitting as one's own work or creation any material or an idea wholly or in part created by another. This includes, but is not limited to:

- i. Oral, written or graphical material.
- ii. Both published and unpublished work.
- iii. Any material(s) downloaded from the internet.

It is the student's responsibility to clearly distinguish their own work from that created by others. This includes proper use of quotation marks, paraphrases and the citation of the original source. Students are responsible for both intentional and unintentional acts of plagiarism.

d. Bribes/Favors/Treats

Attempting to unfairly influence a course grade or the satisfaction of degree requirements through any of these actions are prohibited.

e. Complicity

Helping or attempting to help someone commit an act of academic dishonesty.

2. Academic dishonesty is serious and will be reported to the appropriate licensing board.
3. The Vice President for Schools of Nursing and Health Professions and SOMI Chair will determine the consequences for breaches in academic integrity. Such punishment shall be based upon:
 - i. the severity of the offense;
 - ii. circumstances surrounding the act;
 - iii. repetition of previous offense;
 - iv. other factors as may be considered pertinent.
4. The Vice President of Schools of Nursing and Health Professions and Chair may:
 - i. place the student on probation;
 - ii. place a written account of the offense in the student's permanent file;
 - iii. expel the student from the school;
 - iv. or take any other steps as may seem appropriate and reasonable.

Formulated: Prior to 5/02

Reviewed: 4/08, 7/08, 11/08, 11/09, 7/10, 7/13, 8/17, 7/18, 7/19, 6/20, 7/21, 6/22,, -5/25

Revised: 5/02, 7/03, 5/04, 1/05, 5/05, 7/07, 7/12

Confidentiality Policy 1.1

Section: ACADEMIC POLICIES	Title: Patient Confidentiality Policy	Policy #: SHB 1.1
Department: Center for Education	Approved by: Faculty Organization	Date last reviewed/revised: 5/25

POLICY: All patient information obtained in the process of completing the program of study in any health care education course will remain confidential.

DEFINITIONS:

PROCEDURE:

1. Every patient has a right to privacy, which is defined and guaranteed by federal and state law and which begins upon admission and continues indefinitely.
2. Unauthorized and prohibited disclosure of information includes discussion with anyone NOT DIRECTLY INVOLVED IN RENDERING CARE TO A PATIENT. (For example, students should not discuss patient information in elevators, hallways, restrooms, cafeteria, and other public areas.)
3. Copying or making a printout of any portion of the patient's medical record is not permitted for any reason.
4. Students will be required to sign an agency confidentiality form prior to beginning clinical experiences.
5. Students may be required to sign additional confidentiality statements upon agency request.

Formulated: 5/98

Reviewed: 4/08, 7/08, 11/09, 7/13, 8/17, 7/19, 6/20, 7/21, 6/22, 6/24, 5/25

Revised: 4/01, 5/02, 5/04, 5/05, 7/07, 11/08, 7/10, 7/12, 7/18

Computer Laboratories 1.2

Section: ACADEMIC POLICIES	Title: Computer Laboratories	Policy #: SHB 1.2
Department: Center for Education	Approved by: Faculty Organization	Date last reviewed/revised: 5/25

POLICY: All students have access to the computer laboratories and will follow specified guidelines when using the laboratories.

DEFINITIONS:

PROCEDURE:

1. The Computer Labs are for the use of the Center for Education students and employees. Visitors, guests, friends, or observers are prohibited unless approval is granted by the Vice President for Schools of Nursing and Health Professions.
2. The copying of copyrighted computer programs is strictly prohibited. Copying copyrighted programs is illegal and could result in severe penalties both to the user and to the Center for Education, and thus, will not be permitted at any time. Violators of this policy will be subject to sanctions imposed by the Vice President for Schools of Nursing and Health Professions.
3. The laboratories are open during the hours the building is open. As class schedules change each semester, the hours the labs are open may vary. Any request for lab use outside normal operating hours must be cleared in advance with the Vice President for Schools of Nursing and Health Professions.
4. Reservations for computer time are recommended. Faculty who plan to use computers for student group activities must reserve time. Requests are to be submitted to the Administrative Secretary. All other users will be accommodated on a "first come, first serve" basis, but will be expected to yield to faculty planned student group reservations.
5. The computer labs are for computer use only. Students seeking a place to study should use the Center for Education study rooms, student lounge or library.
6. Students are not permitted to place any software programs on our computers in order to protect St. Mary's CFE property. Please do not bring, flash drives or other external devices to the computer labs or library with the intention of copying or saving from that device to any CFE computer.
7. Students are expected to contact CFE personnel if they encounter difficulty with a computer or printer.
8. NO FOOD OR DRINKS ARE PERMITTED IN THE LAB OR CLASSROOM AT ANY TIME.

Formulated: 9/17/98

Reviewed: 4/08, 7/08, 7/10, 7/12, 7/13, 8/17, 7/18, 6/19, 6/20, 7/21, 6/22,, 6/24-5/25

Revised: 5/02, 5/04, 5/05, 7/07, 11/08, 11/09, 6/19

Harassment Policy 1.3

Section: ACADEMIC POLICIES	Title: Harassment Policy	Policy #: SHB 1.3
Department: Center for Education	Approved by: Faculty Organization	Date last reviewed/revised: -5/25

POLICY: St. Mary's Center for Education will provide an educational environment conducive to learning and will endeavor to protect the individual at all times.

DEFINITIONS:

PROCEDURE:

1. Any verbal or physical conduct by any individual that harasses disrupts or interferes with the performance of another person's duties; interferes with the delivery of patient care; interferes with a productive education or work environment; or which creates an intimidating, offensive or hostile environment is absolutely prohibited.
2. If the student believes that he/she is the victim of harassment, or if he/she is aware of harassment, it is the student's obligation to file a report promptly with the Director of the School or the Vice President for Schools of Nursing and Health Professions or the Chair of the School of Medical Imaging.
3. If the student does not feel comfortable reporting the matter to the Director or Chair, he/she should report it to a faculty member of choice or the St. Mary's Medical Center Vice President of Patient Services or other administrative official of the medical center.

Formulated: 5/18/98

Reviewed: 4/08, 7/08, 11/09, 7/10, 7/12, 7/13, 8/17, 6/19, 6/20, 7/21,6/22,, ,6/24-5/25

Revised: 5/02, 5/04, 5/05, 7/07, 11/08, 7/18

Incomplete Grade Policy 1.4

Section: ACADEMIC POLICIES	Title: Incomplete Grade Policy	Policy #: SHB 1.4
Department: Center for Education	Approved by: Faculty Organization	Date last reviewed/revised: 5/25

POLICY: A grade of “Incomplete” will be issued when a student has not completed the course requirements within the semester the course is offered.

DEFINITIONS:

PROCEDURES:

1. There must be a valid reason the course requirements are not completed within the specified semester time frame. The instructors in the course, in consultation with the Chair, will determine if the reason is valid.
2. The instructor must utilize the appropriate Marshall University form that requires the student’s signature.
3. The student has the responsibility of completing the work within the period specified by the instructor(s), not to exceed twelve calendar months from the date of receipt of the Incomplete grade.
4. All prerequisite courses must be completed before a student may advance to the next required course.
5. When the work is completed, a grade will be awarded. The instructor must utilize the appropriate Marshall University grade change form.
6. If the student fails to complete the work within the specified time, a failing grade (F) will be recorded.

Formulated: Prior to 5/02

Reviewed: 4/08, 7/08, 11/08, 11/09, 7/10, 7/12, 7/13, 8/17, 6/19, 6/20, 7/21, 6/22, 6/24-5/25

Revised: 5/02, 5/04, 7/17

Library Policies 1.5

Section: ACADEMIC POLICIES	Title: Library Policies	Policy #: SHB 1.5
Department: Center for Education	Approved by: Faculty Organization	Date last reviewed/revised: 5/25

POLICY: The Center for Education will provide a library to facilitate achievement of the educational objectives of the program.

DEFINITIONS:

PROCEDURE:

1. The Librarian will assist library users in the use of card catalog, computers, indices, reference books, and audiovisual materials. The following information is intended to familiarize you with the organizational system used in this library and with the privileges and duties as a library user.
2. The Librarian will review all library policies and procedures during student orientation.
3. **Library Hours:** The library is open from 8:00 am until 4:30 pm, Monday through Friday. The Librarian is on duty during this time, lunch period excepted. If the Librarian is attending a CFE meeting, sick, or taking a personal day off, a staff member will be designated to assist students.
4. **Card Catalog:** A modified Dewey Decimal (DDS) system of classification is used in this library. A listing of all books, periodicals, audiovisuals, computer programs, is found in a card catalog or online catalog. Cards are filed numerically ascending in the DDS.
 - **NOTE:** Some cards have a colored stripe across the top. Yellow denotes a government document, green stands for audiovisual, orange means periodical, and black represents a computer program. A bright orange dot indicates a volume in the special collection of the older books.
5. **Computers:** Three computers are available for Internet, media searches, and videos. The on-line catalog contains information on all books and audiovisuals belonging to the Center for Education. Journal searches are done by accessing www.marshall.edu/library/search/databases.asp. Computers can also be used to access MU online where lecture notes, study guides, and clinical forms may be found. There is a charge of 10 cents per page for printouts and copies for students or hospital employees. Printing instructions are placed at each computer, but the Librarian will assist in any way needed.
1. **Circulating Materials:** Books are loaned for a specified period of time. Upon expiration of this period, the library policy on fines is implemented. All books (general checkout and 24-hour reserve) and 24-hour video tapes are to be returned to the Librarian's desk. If the library is closed, books may be returned by placing them in the book drop container located next to the door.
2. **General Check Out:** Books directly related to class work are loaned for a three day period. These include all books with call numbers between 600 and 620. **EXCEPTION:** Review books for NCLEX-RN, which are loaned for a one week period. All other books are loaned for a two week period. A loan may be renewed twice upon request, unless someone is awaiting use of that particular book. A library user may request that a hold be placed on a book when it is returned.

3. Twenty-Four (24) Hour Reserve: Books on reserve may be checked out for a twenty-four (24) hour period. Books checked out on Friday are to be returned by the specified time on the following Monday. These books will not be renewed during their peak times of usage. A hold maybe requested.
4. Twenty-Four (24) Hour Check Out for Audiovisual Software: In-house produced audiovisual programs, which have been duplicated to allow for use outside the library, and some professionally produced video tapes may be checked out for a twenty-four (24) hour period. Audiovisuals checked out on Friday are to be returned by the specified time on the following Monday. These audiovisual programs will not be renewed during their peak times of usage. A hold may be requested.
5. Special Collection: This collection contains classics, older editions, and books of historical significance that are useful to those involved in nursing research.
6. Non-Circulating Materials: Reference books, periodicals, and designated audiovisuals do not circulate outside the library.
7. Reference: Books in the Reference Section include: hospital manuals, fire safety manual, faculty publications, current textbooks, and books placed there at faculty request. Students may read these in the library, but cannot check them out.
8. Periodicals: Professional periodicals are retained by the library for various periods of time. Issues of Nursing Research have been kept since 1971. Retained indefinitely are the American Journal of Nursing, Nursing, and Nursing Outlook. Current subscriptions are located centrally on a rack while past editions are kept in files on the shelves. Upon request, if the library doesn't have a needed journal, the Librarian will assist in making an Interlibrary Loan (ILL) request.
9. Required/Supplemental Reading File: Instructors may assign outside readings, in the syllabi or through remediation. These may be read in the Library or copied at 10 cents a page for reading later. The Librarian will assist the student in locating the required material.
10. Audiovisuals: Audiovisual materials are located on a shelf in the library. There are various types of software owned by the Center for Education. A subject index listing the software holdings is available in the library. When an instructor shows a video in class and the student is absent, the student will need to come to the library to schedule a make up time to view the video.
11. Fines and Charges: Fines for overdue materials and charges for damaged or lost materials are as follows:
12. Fines: Late books with call numbers between 600 and 620 incur no fine for the first day the books are overdue. The fine is 60 cents for the second day overdue and 30 cents for each day thereafter. If books and videos borrowed for a twenty-four hour period are not returned at the designated time, there will be a late fee of 20 cents per hour or any fraction of an hour.
13. Charges: Lost books or audiovisuals are charged to the person whose name is last signed on the book or audiovisual card. The daily overdue fine accrues until the book or audiovisual is declared lost. Once a book or audiovisual is declared lost, the total amount due is determined by adding the accrued daily fine, the replacement cost, and a \$5.00 processing fee. Replacement cost for lost books will be determined from Books in Print. The replacement price for damaged or lost audiovisuals will be determined from current audiovisual catalogs. Should the item be found after is has been declared lost, it becomes the property of the one whose name was last signed on the card, and the replacement process proceeds as explained above.

14. Students must pay all charges before they may receive their grades, be promoted, or graduate.
15. Copyright Law and Photocopies: Copyright law restricts what may be photocopied and the number of pages of published material that may be duplicated. When there is need for a copy to be made from a library periodical, the copier in the library is to be used. Copies are 10 cents per page. To print from a computer, follow the necessary steps outlined on the laminated sheets posted at the computer or ask the Librarian for assistance.
16. Atmosphere: No food or beverages are to be brought into the library. A quiet, dignified atmosphere must be maintained at all times for the benefit of those who wish to study.
17. Restricted Use: Use of the Center for Education Library by individuals other than nursing faculty, SMMC physicians and employees, and students is permitted only under special circumstances and after the proper permission has been obtained.
18. Marshall University Library: Using their MU identification cards, all students are granted library privileges at both the Drinko Library and the Health Science Library.
19. Remediation: Students who do not pass a nursing exam may be required to complete remediation. Some remediation assignments must be checked for accuracy after completion. The answer key will be available in the library upon completion of the assignment. The answer key may not be photocopied.

Formulated: 5/97

Reviewed: 4/08, 7/08, 11/08, 7/13, 8/17, 6/19, 6/20, 7/21, 6/22,, 6/24-5/25

Revised: 5/98, 5/02, 5/04, 5/05, 11/09, 7/10; 6/12, 7/12

Professional Dress Code 1.6

Section: ACADEMIC POLICIES	Title: Professional Dress Code	Policy #: SHB 1.6
Department: Center for Education	Approved by: Faculty Organization	Date last reviewed/revised: 5/25

POLICY: All students are responsible for professional dress while involved in class or laboratory experiences during the completion of all programs.

DEFINITIONS:

PROCEDURE:

Purpose: In order to promote a professional image and to assure the safety of patients and personnel, students must adhere to the following rules of dress and grooming. Failure to abide by these rules will result in disciplinary action in accordance to the Clinical Disciplinary Policy. Understand, what is allowable at one clinic site (jewelry and tattoos) may not be at another. Students always default to the specific clinical site

Guidelines:

1. Approved uniform colors are black tops and black scrub pants.
2. Styles are selected by the school staff and must conform to the style and brand selected.
3. The official school patch must be sewn on the left sleeve of all tops and lab coats.
4. Black T-shirts are acceptable under scrub tops, as long as the T-shirt sleeves do not extend below the smock sleeves.
5. Black turtle necks or mock turtle neck tops are the only long sleeve shirts that may be worn under scrub tops.
6. Lab coats styles will be selected by the school staff.
7. The official school patch must be sewn on the left sleeve of all tops and lab coats.
8. Hoodies or sweaters are not acceptable in the clinic. The lab coat is the only acceptable wear if you are cold.
9. Black shoes with no flashy colors or logos. Clog style shoes are acceptable as long as there are no openings on top of sides of shoe. Shoes must be entirely closed toe and sides for safety purposes.
10. Only black socks can be worn. Underwear must be full coverage (no thong or bikini style) under the pants.
11. Uniforms and shoes are to be kept clean and neat. This is the student's responsibility.
12. Make-up is to be kept to a minimum..
13. Photo ID: Must be worn on uniform or lab coat. Official IDs are obtained through Human Resources Office of the hospital. The ID must have St. Mary's Medical Center logo, student name, photo, and title of medical imaging student. When a student leaves the program, the photo ID must be returned.
14. Hair: Clean, dry, neatly styled. Loose hair **must** be contained. Long hair **must** be pulled back at the neck and secured with a plain fastener. Hair **cannot** be allowed to fall forward. This is an infection control priority.
15. Beard/Mustaches: Neatly styled and closely trimmed. Students with full beards may be required to wear a mask when interacting with a patient and facial hair must be covered by the mask. This is an infection control priority.
16. Fingernails: Clean and short – should not extend beyond fingertips. Nail polish may be clear or pale pink tones only. **No artificial nails are to be worn.** This is an infection control priority
17. Cosmetics/Fragrances: Skin is to be free of odor, fragrances (perfumes, cologne, after shave, etc.) and excessive make up.
18. Jewelry: :
 - a. Rings – only wedding band and/or engagement ring. **Rings, with stones, should be removed and**

pinned into the pocket while administering patient care.

- b. Necklaces: Only plain gold or silver chain around the neck, inside the uniform.
- c. Earrings: Students with pierced ears may wear one pair of small, post type, no dangle, non-hoop earrings. For safety's sake, no dangling earrings or necklaces are to be worn in the clinical setting. Ear gauges are discouraged, but if present cannot exceed 10 mm in diameter.
- d. One small nasal stud is allowed.

Body Piercing and Tattooing: In order to maintain a professional image, the School of Medical Imaging highly discourages body piercing and tattooing, however unless the tattoo is deemed offensive, it does not have to be covered unless the specific clinic site has a policy against tattoos. In such a case, the tattoo must be covered with long sleeves.

Miscellaneous: Whenever you are in the hospital for any reason, you must present a professional image. Proper attire is mandatory (this does not include shorts or halter tops). Jeans and T-shirts are not to be worn in the hospital at any time you have on your St. Mary's ID badge. Shirts and shoes must be worn.

Surgical scrubs and surgical jackets are to be **worn only when a student is assigned to portables or surgery, evenings or if the student's uniform becomes soiled.** No street clothes are to be worn under surgical scrubs. Surgical jackets are not to be worn with regular uniforms (students may wear acceptable warm-up jackets if he/she becomes chilled). All surgical scrubs and jackets are to be placed in the hospital laundry bins after the student completes the shift. Surgical scrubs are **NEVER** to be worn outside of the clinical setting. This is tantamount to theft of SMMC (or other clinical affiliate) property. Students caught wearing hospital owned scrubs will be disciplined.

CLASSROOM ATTIRE: Students may wear street clothes to class as long as it is in good taste with the following guidelines:

- Shorts, skirts, and dresses must be mid-thigh or lower
- Necklines must not reveal cleavage
- Midriff must not be exposed
- **ID badges are to be worn at all times in the CFE.**

FACULTY OF THE SCHOOL MAY ASK ANY STUDENT AT ANY TIME TO LEAVE THE LEARNING AREA OR A SCHOOL FUNCTION WHEN ATTIRE IS DEEMED INAPPROPRIATE FOR THE AREA OR THE OCCASION.

Reviewed: 7/08, 7/10, 6/11, 7/13, 8/17, 6/19, 7/21, 6/22, 6/24-5/25

Revised: 1/00, 8/00, 2/01, 5/01, 5/02, 3/04, 7/05, 8/05, 4/08, 11/08, 11/09, 7/12, 9/15, 7/18, 6/19, 6/20

Probation, Suspension and/or Dismissal from Program 1.7

Section: ACADEMIC POLICIES	Title: Probation, Suspension and/or Dismissal from Program	Policy #: SHB 1.7
Department: Center for Education	Approved by: Faculty Organization	Date last reviewed/revised: 5/25

POLICY: All students in the Center for Education must follow the rules and policies of the appropriate school, conduct themselves professionally, and meet program requirements, or be placed on probation and/or dismissed from the program.

DEFINITIONS:

PROCEDURE:

1. The Center for Education strongly supports the standards set forth by the West Virginia Board of Examiners for Registered Professional Nurses (WVBOE-RN), the American Registry of Radiologic Technologists (ARRT), American Registry of Diagnostic Medical Sonographers (ARDMS), and the American Association for Respiratory Care (AARC) regarding the need for nursing students and Allied Health students to be persons of good moral character, who demonstrate responsible behaviors.
2. Conduct derogatory to the morals or standing of health professionals may be reason for denial of admission or dismissal from the program.
3. Irresponsible behavior or conduct denoting questionable moral character will include, but not necessarily be limited to the following:
 - a. criminal activities – e.g. DUI, misdemeanors, felonies
 - b. substance abuse – e.g. manufacture, use, distribution
 - c. cheating/dishonesty (also see policy on Academic Dishonesty)
 - d. harassment
 - e. domestic violence
 - f. discrimination
 - g. breach of patient confidentiality
 - h. failure to meet responsibilities
4. A student whose conduct on or off campus violates school rules and/or policies, fails to meet program requirements, or fails to develop the qualities and characteristics deemed essential for achievement of the school objectives, may be placed on probation and/or dismissed from the program. The decision to place a student on probation and/or to dismiss the student from the program is determined by the Director and appropriate faculty.
5. The faculty reserves the right to request the suspension or dismissal of any student at any time who is declared unsafe in the clinical area, who is found to have irresponsible behavior, and/or is guilty of misconduct.
6. Damage to facilities, caused by the student(s), will be assessed according to the determined cost for repair and/or replacement and charged to the student as a financial obligation.
7. A student who is dismissed is responsible for all financial obligations to the school and university. Failure to fulfill all financial obligations to the school shall mean that the indebtedness will be turned over to the Medical Center Collection Office and the cost of collection will be added to the indebtedness.
8. All student suspensions or probations must be reported to the American Registry of Radiologic Technologists (ARRT), and The Medical Imaging & Radiation Therapy Technology Board of Examiners, which may trigger and ethics review before student is permitted to take their boards.

Formulated: Prior to 5/02

Revised: 5/02, 5/04, 5/05, 4/08, 7/10, 7/12, 5/16, 5/25

Reviewed: 7/08, 11/08, 11/09, 7/13, 8/17, 6/19, 6/20, 7/21, 6/22, 6/24-5/25

Special Accommodations Policy 1.8

Section: ACADEMIC POLICIES	Title: Special Accommodations	Policy #: SHB 1.8
Department: Center for Education	Approved by: Faculty Organization	Date last reviewed/revised: 5/25

POLICY: The CFE is committed to equal opportunity for all students including those with physical, learning and psychological disabilities.

DEFINITIONS: Special accommodations are defined as the need for privacy, extended time or other modalities of learning.

PROCEDURE:

1. Students requesting special accommodations for learning/testing are to contact the Office of Disability Services (ODS) in Prichard Hall, 117, 304/696-2271 or contact the Program Chair to determine if testing is available through St. Mary's.
2. Students will be asked to provide documentation of their disability to the ODS Coordinator/Director.
3. The ODS Coordinator/Director will notify the Vice President for Schools of Nursing and Health Professions (VPSONHP) outlining the academic accommodations needed.
4. The VPSONHP will then notify the appropriate faculty members of the needed accommodations.
5. The student is responsible for meeting with the faculty members to discuss how the accommodations will be provided.
6. ESL (English as Second Language) students will be offered a private room and extended time.

Formulated: Fall 2004

Revised: 5/05, 11/05, 6/06, 7/07, 7/08, 11/09, 1/14, 1/16, 6/19

Reviewed: 4/08, 11/08, 7/10, 3/12, 7/12, 7/13, 8/17, 6/19, 6/20. 7/21,6/22, 6/24,-5/25

Transient Credit 1.9

Section: ACADEMIC POLICIES	Title: Transient Credit	Policy #: SHB 1.9
Department: Center for Education	Approved by: Faculty Organization	Date last reviewed/revised: 5/25

POLICY: All students must comply with Marshall University rules and regulations regarding transfer of credit.

DEFINITIONS:

PROCEDURES:

1. A student planning to take non-professional courses at another institution must obtain an “Approval of Courses to be taken for Advanced Standing” form from the Secretary of Admissions at Marshall University.
2. The completed form must be approved and signed by the Vice President for Schools of Nursing and Health Professions.
3. The completed form must be returned to the Marshall University Admissions Office.

Formulated: Prior to 5/02

Revised: 5/02, 5/05, 7/07, 4/08, 11/08, 11/09, 7/10

Reviewed: 5/04, 7/08, 7/12, 7/13, 8/17, 6/19, 6/20, 7/21, 6/22,, 6/24,-5/25

Readmission Procedure 1.10

Section: Academic Policies	Title: Readmission Procedure	Policy #: SHB 1.10
Department: Center for Education	Approved by: Faculty Organization	Date last reviewed/revised: 5/25

POLICY: All students wishing to return to the program after leaving for any reason must comply with a readmission procedure of the appropriate program.

DEFINITIONS:

PROCEDURE:

1. A student who wishes to make application for readmission to the program must do so by writing a letter of request to the Director of the Schools of Nursing, Medical Imaging, or Respiratory Care, who will forward the request to the Admissions & Progression Committee of the respective school.
2. The request will be reviewed by the Admissions and Progression Committee of the school.
3. The Committee may grant readmission requests based on space available in the class and the student's:
 - a. overall GPA (nursing & respiratory: minimum 2.0 required)(medical imaging: minimum 2.5 required)
 - b. overall Marshall University GPA (minimum 2.0 required)
 - c. overall MCTC GPA (minimum 2.0 required)
 - d. prior performance in radiography, nursing or respiratory care courses
4. Readmission for any student who withdrew for non-academic reasons more than once will be considered on an individual basis.
5. The applicant must submit written explanation to the Director describing the circumstances, how these have changed since withdrawal, and any necessary evidence to consider regarding readmission. It will be at the discretion of the director whether to forward the request to the admissions & Progression Committee for action.

Formulated: Prior to 5/02

Revised: 5/02, 5/04, 5/05, 7/07, 4/08, 11/08, 5/16, 5/25

Reviewed: 7/08, 7/12, 7/13, 8/17, 6/19, 6/20, 7/21, 6/22,, 6/24, 5/25

Disruptive Behavior/Incivility 1.11

Section: ACADEMIC POLICIES	Title: Disruptive Behavior/Incivility	Policy #: SHB 1.11
Department: Center for Education	Approved by: Faculty Organization	Date last reviewed/revised: 5/25

POLICY: Students attending the schools at St. Mary's Center for Education are expected to engage in behavior that is not disruptive to others. St. Mary's Center for Education strives to provide a culture of civility where its members feel safe to express themselves free from discrimination, harassment, threats, and intimidation.

PROCEDURE:

1. The faculty and staff of the Center for Education have a professional and ethical responsibility to assist students to learn the skills necessary to become professional health care providers and to provide a safe teaching and learning environment for students, faculty, and to patients who receive health care from students. Faculty also respect that students are learning, however students are expected to have adequate knowledge, skills and judgments to practice safely in clinical situations. Student behaviors and/or performance should never present a danger (or reasonable assumption of danger) to a person/client/ patient or jeopardize the license of a faculty or health care professional working with the student.
2. All members of the health care provider team including, but not limited to, students, employees, physicians, and allied health professionals, and all direct and indirect recipients of health care including, but not limited to, patients, their families, and visitors, shall be treated in a respectful, dignified manner at all times. Neither St. Mary's Medical Center nor the Center for Education will tolerate disruptive and inappropriate behavior in its environment.
3. Process for imminent danger to self or others: If a student poses an imminent danger to self or others (act or direct threat of violence), notify Security immediately at 304/526-1465 or call 911. Examples of imminent danger include, but are not limited to:
 - a. verbal or physical threats to self or others
 - b. repeated obscenities
 - c. unreasonable interference with the learning environment
 - d. aggressive gesturing
4. Once the disruptive situation is contained, the situation must be reported to the Vice President for Schools of Nursing and Health Professions. Recommendations for therapeutic referrals and/or sanction might follow.
5. Process for unsafe practice/unethical behavior: Student behaviors and/or performance must be safe, ethical, and must not present a danger (or reasonable assumption of danger) to a person/client/patient or jeopardize the license of the faculty or health care professional working with the student. Safe practice is judged by standards and codes of the specific profession and the licensing/certification boards of the respective profession. Students are expected to behave responsibly and they do not have the right to engage in behaviors that may harm and endanger other people, including patients/clients. Examples of unsafe practice/unethical behavior include, but are not limited to:
 - a. failure to be prepared for clinical
 - b. making derogatory comments to or about a patient/client
 - c. making derogatory comments about a fellow student, faculty or other healthcare professional
 - d. consistent failure to follow the dress code in clinical area
 - e. immoral or indecent conduct while on hospital and/or school property
6. If a student demonstrates unsafe/unethical practice, the student will be required to meet with the respective director of the school and the Vice President for Schools of Nursing and Health Professions. There may be

- consequences for such behavior, including expulsion from a specific class or dismissal from the program.
7. Process for student conduct violations: Everyone is expected to act honestly and responsibly in all aspects of campus life. Student behaviors should not violate the welfare and safety of others and/or interfere with the teaching learning process. Such behaviors include, but are not limited to:
 - a. consumption of alcohol and illegal drugs on hospital/school property
 - b. ingestion of substances that can alter a person's level of consciousness
 - c. chronic absences and/or tardiness
 - d. inappropriate use of cell phones, pagers, and other electronic devices during class/lab/clinical
 - e. reading of materials during class/lab/clinical that do not pertain to the class (i.e., newspaper, magazine)
 - f. chatter with another student or students
 - g. sleeping
 - h. rudeness
 - i. frequent interruptions
 - j. monopolizing class time
 - k. loudness, obscene or abusive language
 - l. refusal to perform assignments, having an uncooperative attitude
 - m. condescending language or voice intonation
 - n. committing academic dishonesty, such as copying someone else's work, cheating on exams, copying a computer program for unauthorized use, plagiarism
 8. There will be consequences resulting from conduct violations which may include class suspension or dismissal from the program.
 9. Process for at-risk students: At times, student behaviors do not fit cleanly under the above categories, yet the behaviors suggest the student is at-risk. These behaviors may include, but are not limited to:
 - a. failure to meet deadlines
 - b. deteriorating productivity
 - c. pervasive poor concentration
 - d. difficulty making decisions
 - e. forgetfulness
 10. When a student demonstrates at-risk behaviors, the faculty will meet with them and make referrals as needed.

DOCUMENTATION:

When reporting a suspected incident, please provide the following:

1. Name of the person reporting the incident
2. Date and time the incident occurred
3. Factual description of the incident
4. Name of any individuals involved or witness
5. Circumstances which precipitated the incident
6. Any action taken to intervene, or remedy, the incident

NOTE: The appropriate licensing/certification boards will be notified of incidents.

Formulated: 8/17/09

Revised:

Reviewed: 7/10, 7/12, 7/13, 8/17, 6/19, 6/20, 7/21, 6/22,, 6/24,-5/25

APPEALS/GRIEVANCE

Student Appeals for Instructor-Imposed Sanctions 2.0

Section: Appeals/Grievance	Title: Academic Appeals/Grievance Student Appeals for Instructor- Imposed Sanctions	Policy #: SHB 2.0
Department: Center for Education	Approved by: Faculty Organization	Date last reviewed/revised: 5/25

POLICY: A process for the student to appeal academic sanctions will be in place.

DEFINITIONS:

PROCEDURE:

The student shall follow the procedure below for:

- cases where a student is appealing a grade
- cases in which a student has received an instructor-imposed sanction.

- STEP 1 The student should first attempt a resolution with the course instructor. This initial step must be taken within ten (10) days from imposition of the sanction or, in the case of an appeal of a final grade in the course, within thirty (30) days of the end of the course. The student who makes an appeal is responsible for submitting all applicable documentation. If the instructor is unavailable for any reason, the process starts with Step 2.
- STEP 2 If the procedure in Step 1 does not have a mutually satisfactory result, the student may appeal in writing to the Director of the appropriate school within ten (10) days after the action taken in Step 1, who will attempt to resolve the issue at the departmental level. When a student appeals a final grade, the faculty member must provide all criteria used for determining grades.
- STEP 3 Should the issue not be resolved at the departmental level, either the student or instructor may appeal in writing to the Dean of the College of Health Professions at Marshall within ten (10) days of the action taken in Step 2. The Dean will attempt to achieve a mutually satisfactory resolution.
- STEP 4 Should the issue not be resolved by the Dean, either the student or instructor may appeal in writing within ten (10) days of the action taken in Step 3 to the Budget and Academic Appeals Policy Committee, who shall refer the matter to the University Academic Appeals Board for resolution. The hearing panel has the right to seek additional documentation if necessary.
- STEP 5 Should the student or the instructor be dissatisfied with the determination of the Academic Appeals Board, then either party may file an appeal with the Provost and Senior Vice President for Academic Affairs within thirty (30) days from receipt of the decision of the Board. The decision of the Provost and Senior Vice President for Academic Affairs shall be final.

Formulated: Prior to 5/02

Reviewed: 5/02, 7/08, 11/08, 11/09, 7/10, 7/12, 7/13, 8/17, 6/19, 6/20, 7/21, 6/22, 6/24, 5/25

Revised: 5/04, 5/05, 7/07, 4/08; 2/12

Non-Academic Grievance 2.1

Section: Appeals/Grievance	Title: Non-Academic Grievance	Policy #: SHB 2.1
Department: Center for Education	Approved by: Faculty Organization	Date last reviewed/revised: 5/25

POLICY: A process to provide all students with a systematic policy for the resolution of grievances which may arise with the school, its faculty/staff and/or its policies. This process is divided into two components (1) filing an initial grievance or complaint and/or (2) filing an appeal of any response to a grievance or disciplinary decision.

DEFINITIONS:

Grievance: A formal written statement expressing a circumstance which the student feels resulted in unjust or injurious treatment.

Filing a grievance or complaint: This is the process by which a student files any complaint, including issues relating to the student's perception of unjust or injurious treatment from the school and/or the school's staff/faculty.

Filing an appeal: This is the process by which a student files an appeal due to dissatisfaction with the response to a non-academic disciplinary action, complaint or grievance.

Grievance Panel: A committee made up of the Directors of the School of Nursing, the School of Respiratory Care, and the School of Medical Imaging, and one student, selected from the student representatives of the Student Affairs Committee.

PROCEDURE:

STEP ONE: FILING A NON-ACADEMIC COMPLAINT OR GRIEVANCE

1. Student files a written complaint with the Coordinator or Program Director. The complaint should be filed within three business days of the occurrence.
2. If the grievance involves the Coordinator, the written complaint should be made to the SON/SORC/SOMI Director.
3. The Coordinator (or Director) will respond to the student in writing within three business days.

STEP TWO: APPEAL PROCESS

1. A written appeal is filed with the Grievance Panel.
2. A written explanation of the grounds for appeal should be presented by the student within three (3) business days from the date the appeal is filed. The scope of review shall be limited to the following:
 - a. procedural errors
 - b. evidence not available at the time of the hearing
 - c. insufficient evidence to support the findings of the coordinator or SON/SORC/SOMI Director
 - d. a sanction or sanctions disproportionate to the offense
3. All appeals shall be considered from the records of the original proceedings of the Coordinator or SON/SORC/SOMI Director.
4. If the grievance involves the program Director, the Director shall recuse self from the Grievance Panel.
5. After hearing the grievance, the panel does one of the following:
6. Finds in favor of the student. The panel then forwards its recommendation to the program Director and the Vice President for Schools of Nursing and Health Professions if the Director was involved in the grievance
7. Upholds the resolution of the Coordinator or SON/SORC/SOMI Director. The student will be notified of the panel's decision by the program Director.
8. Decides that more information is needed. The panel shall ask the Coordinator/Director to invite the student and the person named in the grievance to meet with the panel separately or together, at the panel's discretion. After the additional information is collected, the panel shall choose either a or b, as listed above.
9. The Grievance Panel's decision will be forwarded to the student in writing within ten (10) business days following receipt of the written explanation of the appeal.

STEP THREE: FINAL APPEALS

1. If the student is dissatisfied with the Grievance Panel's decision, the grievance may be taken to the President/CEO, St. Mary's Medical Center. The SMMC President/CEO may include a representative from SMMC Human Resources in their decision process at their discretion.
2. This final appeal must be made in writing within 3 business days from of denial of the initial appeal by the Grievance Panel.
3. The SMMC President/CEO will respond within ten (10) business days.
4. All decisions from the SMMC President/CEO will be final.

Formulated: Prior to 2002

Revised: 5/02, 5/04, 5/05, 10/05, 7/07, 4/08, 11/08, 6/20

Reviewed: 7/08, 11/09, 7/10, 7/12, 7/13, 8/17, 6/19, 7/21, 6/22,, 6/24, 5/25

HEALTH RELATED POLICIES

Drug Free Environment Policy 3.0

Section: HEALTH RELATED POLICIES	Title: Drug Free Environment Policy	Policy #: SHB 3.0
Department: Center for Education	Approved by: Faculty Organization and SMMC Legal	Date last reviewed/revised: 5/25

POLICY: Students of St. Mary's Center for Education are prohibited, while on the premises of St. Mary's Medical Center or St. Mary's Center for Education, from participating in the unlawful manufacture, use, distribution, dispensing, consumption, ingestion, or possession of drugs, alcohol, or other controlled substances, including, without limitation, any substance which affects behavior, or impairs the individual's cognitive or motor skills to the extent that they could present a risk to themselves or others.

DEFINITIONS:

PROCEDURE:

Standards of Conduct for Drug Free Environment Policy

Center for Education students are prohibited, while on the premises of St. Mary's Medical Center or Center for Education, from participating in the unlawful manufacture, use, distribution, dispensing, consumption, ingestion or possession of drugs, alcohol or other controlled substances, including, without limitation, any substance which affects behavior, or impairs the individual's cognitive or motor skills to the extent that they could present a risk to themselves or others.

This policy extends to any off-campus programs, activities or functions sponsored by the Center for Education or any activities with outside agencies, which are scheduled as part of class or clinical experiences.

The Center for Education will share this policy with all off-site programs, activities, or functions sponsored by the Center for Education and will request that those persons in charge of such programs, activities and functions report instances of suspected violation of this policy to the Vice President for Schools of Nursing and Health Professions.

Center for Education students are prohibited from reporting to a clinical experience, class or school sponsored function under the influence of any controlled substances, including, without limitation, alcohol or drugs, which have the potential of impairing the student's ability to function in an appropriate and safe manner. A student who is prescribed, by his/her physician, or ingests any drug (including "over the counter" medication), which has the potential of modifying the student's behavior and/or mental/physical acuity, must report to the Vice President for Schools of Nursing and Health Professions that:

- he/she is taking that drug,
- the doctor (if any) who prescribed the drug,
- the condition for which the drug is being taken,
- the dosage, and
- duration that the student will be taking the drug.

The Vice President for Schools of Nursing and Health Professions, or designee, shall maintain the confidentiality of such information, in accordance with State or Federal laws and regulations, and shall rely upon such information for the protection of the student, other students, patients and other third parties. (The Center for Education adheres to its policy prohibiting unlawful discrimination against individuals with a disability. Nothing in the Drug & Alcohol Policy is intended to abrogate its policies against unlawful discrimination.)

St. Mary's Center for Education students, while in the clinical learning setting as students, are subject to all St. Mary's Medical Center policies and procedures. (Refer to SMMC Human Resource Policy "W-8 Substance Abuse".)

Center for Education students must report to the Vice President for Schools of Nursing and Health Professions, or designee, any student or employee of the Center for Education or St. Mary's Medical Center, reasonably suspected of being "under the influence" or "impaired". Such reporting obligation includes an obligation to self-report any impairment that a student believes may be the result of the use of any medication or other controlled substance. The terms "under the influence" or "impaired" shall mean that the individual displays behavior or conduct which suggests that the ability to function mentally or physically in a safe and/or appropriate fashion is compromised or affected by drugs, alcohol or the combination use of any controlled substances. (See IIIA, 1)

Any student of the Center for Education who is arrested for driving under the influence of alcohol or violating any statute pertaining to the manufacture, possession, sale or use of any drug shall notify the Vice President for Schools of Nursing and Health Professions, or designee, of such arrest within five (5) days after such arrest. Thereafter, the student must notify the Vice President for Schools of Nursing and Health Professions whether such arrest has resulted in a conviction or acquittal, including whether the student entered a plea of guilty or nolo contendere (no contest), as well as whether the student entered into any agreement with the prosecution to reduce charges or defer prosecution.

Any drug screening results which are positive for the presence of alcohol or other controlled substances may be reported to appropriate health care licensing boards or authorities in accordance with local, state or federal laws or regulations.

Student – Initiated Rehabilitation

Students are encouraged to volunteer for rehabilitation assistance before their problems leads to a situation which could jeopardize their student and/or health care worker status. Students who volunteer for such rehabilitation through the Medical Center's Employee Assistance Program or by means (before performance problems arise and/or before the Medical Center is aware of a policy violation) will not be subject to discipline solely on the basis of the student's voluntary request for rehabilitation. The Employee Assistance Program Coordinator may require a student who voluntarily seeks rehabilitation assistance through the Medical Center's Employee Assistance Program to enter into a Contract for Safety. Notwithstanding, if there is any evidence of Substance Abuse during or following completion of a rehabilitation program, disciplinary action up to and including expulsion may be rendered.

General

Any student who violates any portion of this policy or related policies of St. Mary's Medical Center is subject to disciplinary action up to and including expulsion. Similarly, any conduct by a student which has the potential of adversely impacting the Center for Education and/or St. Mary's Medical Center, and/or presents a threat to the health and/or safety of himself/herself or others, may be subject to review and disciplinary action.

The Vice President for Schools of Nursing and Health Professions, or designee, should document any reported suspicion that a student is impaired or under the influence, any efforts to confront the student and request a drug test, as well as any post-testing communication, and should place such documentation in the student's file.

Definitions

“Medical Center Premises” – includes, but not limited to, any building on Medical Center grounds, including property owned or leased by the Medical Center, parking lots, the Center for Education, vehicles or equipment owned or operated by the Medical Center.

“Contraband” – means drug paraphernalia.

“Contract for Safety” – means an agreement between a student and the Medical Center’s Employee Assistance Program wherein the student agrees to commit to safe conduct. Such Contract may include, but not be limited to, an express agreement by the student to abstain from the use of controlled substances, to participate in a rehabilitation program, to participate in a Twelve-Step Program and/or to submit to Medical Screening.

“Medical Screening” – means testing for the presence of Unauthorized Drugs and/or alcohol. Medical Screening means an analytical procedure to determine whether an individual may have a positive concentration of alcohol or Unauthorized Drugs in his or her system.

“Return to School/Work Agreement” – means an agreement which defines the terms and conditions under which a student may return to school in the event that the Center for Education elects to suspend the student for a violation of this Policy.

“Safety-Sensitive Position” – means a job which involves public safety or the safety of others.

“Search” – includes a search of an individual’s personal property located on Medical Center or Center for Education premises (including, but not limited to, personal effects, lockers, desks, lunch boxes, containers, purses, billfolds, parcels and private vehicles, any Medical Center/Center for Education property assigned to a student, and a limited search of the person.)

“Substance Abuse” – means Unauthorized Drug use and abuse or misuse of alcohol or other legally controlled substances.

“Unauthorized Drugs” – means non-medically prescribed controlled substances capable of altering the mood, perception, behavior or judgment of the individual consuming it, and any substance obtained with improper prescription or taken in a manner or quantity other than that for which it was prescribed or manufactured.

“Under the Influence” – means the student tests positive for Unauthorized Drugs or alcohol.

Center for Education requires drug testing as follows:

Reasonable Suspicion Testing: Any student who demonstrates unusual, unexplained behavior in the class, clinical environment or anywhere on Hospital or Center for Education premises. Observable signs might include, but not be limited to:

- slurred speech
- odor of alcohol on breath or person
- unsteady gait
- disoriented or confused behavior
- significant changes in work habits
- hallucinations
- unexplained accident or injury
- other clinical observations consistent with impairment

- sloppy, inappropriate clothing and/or appearance
- physically assaultive, unduly talkative, exaggerated self-importance, making incoherent or irrelevant statements, excessive sick leave, excessive lateness when reporting for class or lab experience, returning from breaks, or frequent unscheduled short term absences work takes more time to produce, missed deadlines, careless mistakes
- unable to concentrate or distracts easily, inattention or sleeping in class, clinical, or other school setting inconsistent behavior or mood swings

Notification of selection for reasonable suspicion testing will be initiated by the Vice President for Schools of Nursing and Health Professions or authorized designee, who will refer the collection to the Clinic Specialist or authorized designee.

Searches

In enforcing the policy, unannounced Searches of students and their property on Medical Center/Center for Education Premises are authorized accordance with the policy, without limitation. Entry upon the Medical Center's Premises by such persons will be deemed to constitute consent by such persons to Searches pursuant to this policy. Such Searches should be made only after a determination has been in advance by the Medical Center's Security Department in consultation with the Vice President for Schools of Nursing and Health or designee that reasonable suspicion exists that a violation of Medical Center policy has occurred.

If Unauthorized Drugs, alcohol or Contraband are discovered in a common area and its ownership or control cannot be determined, students reasonably considered to have access to such areas may be required to submit to further Search and/or Medical Screening.

Policy Enforcement

Enforcement

The Center for Education expects its faculty to enforce this policy where a reasonable belief exists that a violation of the policy may have occurred or is occurring. It is also the responsibility of each student to assure his or her own safety by enforcing compliance with this policy with respect to his or her own conduct, as well as encourage the appropriate conduct of all other students.

Discipline

Any violation of this policy, including any refusal by a student to fully comply with the Center for Education/Medical Center's Medical Screening or Search procedures, is grounds for Disciplinary action up to and including suspension/termination.

Any unlawful actions by a student which discredits the Center for Education and/or Medical Center involving Unauthorized Drugs, alcohol or Contraband during non-school hours is grounds for disciplinary action, up to and including suspension/termination.

A student charged with, convicted or under investigation in connection with a drug or alcohol-related criminal offense may be subject to discipline, up to and including suspension/termination, and may be required to submit to Medical Screening. A student of a criminal drug or alcohol statute violation must report this information to the Vice President for Schools of Nursing and Health Professions within 5 days after such conviction.

The Center for Education may require that a student undergo a professional assessment and complete a rehabilitation program as a condition of continued enrollment.

It is within the Center for Education's sole discretion to determine if student may continue as a student who violates the policy. Any student who is permitted to continue in the school may be required to meet the following requirements:

The student should undergo an evaluation by a substance abuse professional to determine if the student has a Substance Abuse problem that requires rehabilitation. If recommended, the student will be required to successfully complete a rehabilitation program approved by the Medical Center's Director of Employee Assistance Program.

Before returning to school, the student should be retested and must produce a negative result. The student must also agree in writing to the conditions outlined in any Return to School Agreement subsequent violations of the policy or these terms will in termination.

Students suspected of being Under the Influence

If a student is suspected of being Under the Influence, the Center for Education may perform a Medical Screening as previously set forth in this policy. In order to promote the safety of the student by working with the student to make arrangements to go home, the Vice President for Schools of Nursing and Health Professions or designee should:

1. explain to the student the Center for Education's concerns regarding his or her ability to drive safely;
2. encourage the student not to drive;
3. offer to call a taxi, relative, or friend to drive the student home and
4. offer to allow the student to stay at the Center for Education until such transportation arrives; and if the student insists upon driving, inform the student that the appropriate law enforcement authority will be notified of the Center for Education's concerns related to the student's suspected impairment and that disciplinary action may result up to and including suspension/termination.

Center for Education – Required Rehabilitation

The Center for Education's approach to rehabilitation is based on the professional view that some properly motivated individuals who abuse drugs and/or alcohol have an addiction that can be controlled. Some students may require the assistance of a rehabilitation program. The Center for Education required treatment programs for students will be offered on a one-time basis.

Medical Confidentiality

The results of Medical Screenings, as well as records associated with the Medical Center's Employee Assistance Program, are medical records and must be kept strictly confidential. Unauthorized release of such information shall subject the person who releases such information to disciplinary action, up to and including discharge.

Miscellaneous

This policy is not to create a contract between the Center for Education and its students. The Center for Education reserves the right to interpret, change, amend, modify or terminate this policy at any time with or without notice at its sole discretion. Such right includes the right to dismiss students at any time for any reason just as students have the right to terminate their enrollment at any time for any reason.

Re-Formulated: 5/02

Revised: 5/04, 6/04, 5/05, 7/07, 4/08, 7/08, 7/12

Reviewed: 11/08, 11/09, 7/10, 11/10, 7/13, 8/17, 6/19, 6/20, 7/21, 6/22,, 6/24,-5/25

Statement of Understanding Regarding Drug and Alcohol Policy

I have read the Drug and Alcohol Policy and completely understand the Center for Education's position on drug and alcohol use as a student and agree to fully comply with this Policy. I understand that I may be tested at any time during my tenure in a school of the Center for Education. I further understand that any violation of this policy during my tenure as a student in the Center for Education will result in disciplinary action which may include dismissal from the program.

Signature of Applicant

Date

Revised: 3/04, 6/07

Reviewed: 7/08, 11/08, 11/09, 7/10, 7/12, 7/13, 8/17, 6/19, 6/20, 7/21, 6/22,, 6/24, 6/25

Student Health Policies 3.1

Section: HEALTH RELATED POLICIES	Title: Student Health Policy	Policy #: SHB 3.1
Department: Center for Education	Approved by: Faculty Organization	Date last reviewed/revised: 5/25

POLICY: Students must be mentally and physically able to meet the course objectives.

DEFINITIONS:

PROCEDURE:

1. The student must have the knowledge and skills required to safely and effectively care for people who require medical care.
2. The student enrolled in the Center for Education accepts accountability for patient care and safety upon acceptance of admission to the program.
3. The student must notify faculty when health problems or medications may affect classroom or clinical performance, intellectually or physically. (See Student Handbook 3.0 and school catalog.)
4. Students entering the first healthcare course of the program must provide the following forms completed as directed:
 - 3.1A Physical Examination Form
 - 3.1B Immunization Form
 - 3.1C Initial two-step PPD or documentation from a healthcare provider indicating the PPD status
5. Thereafter, at the beginning of each academic year, the student must provide documentation of one-step PPD
6. Students may apply for a leave of absence in order to give themselves time to receive treatment and improve their mental or physical health. (See Student Handbook 5.6.)
7. Students may be required to provide evidence from their healthcare provider that the challenges of classroom and clinical laboratory experience will not negatively affect the student's health or the safety of patients. (See Student Handbook 3.1D Healthcare Provider Release Form.)
8. Students may be dismissed or suspended from the Center for Education, if they do not notify faculty of their health problems, which may affect patient safety.
9. Students may be dismissed or suspended from the Center for Education if they are not able to provide safe patient care.
10. Students should retain a copy of all completed health forms that are provided to the Center for Education.

Formulated: 9/97

Revised: 5/02, 5/04, 5/05, 7/07, 4/08, 7/08, 11/08, 2/11, 9/13, 1/17, 9/17

Reviewed: 11/09, 7/10, 7/12, 7/13, 8/17, 6/19, 6/20, 7/21, 6/22, , 6/24, -5/25

PHYSICAL EXAMINATION FORM 3.1A

Directions:

1. Students entering the first healthcare course of the program must submit this completed form to the CFE Admissions Office.
2. This form must be completed by a Physician/Nurse Practitioner/Physician Assistant

TO THE HEALTHCARE PROVIDER: Please be advised that the student's classroom and clinical responsibilities may include, but not be limited to:

- 1) coping with stressors inherent in the student healthcare professional's role
- 2) sitting in student desks for up to six hours with limited, scheduled breaks
- 3) using normal body mechanics in positioning and working with patients, and moving and lifting supplies and equipment weighing five pounds or more
- 4) lifting patients
- 5) exposure to diagnosed and undiagnosed viral and bacterial infections
- 6) CPR

ASSESSMENT:

Do you find the applicant mentally and physically competent to attempt a course of study in a healthcare profession? Yes or No.

If no, please explain below.

Are there any restrictions or limitations? Yes or No If no, please explain below.

Print Name of Physician/Nurse Practitioner/Physician Assistant

Signature: _____

Address: _____

Phone: _____

Date: _____

Reviewed: 4/08, 7/08, 11/08, 11/09, 7/10, 7/12, 7/13, 1/17, 8/17, 6/19, 6/20, 7/21, 6/22, 6/24, 5/25

Revised: 2/11, 9/17

IMMUNIZATION FORM 3.1B

Directions: Students entering the first healthcare course of the program must submit this completed form to the CFE Admissions Office.

Please use this form as a personal checklist when gathering your documentation of immunizations and titers. Your submission will not be complete until proof of all items has been submitted. You will not be permitted to attend the first day of class if all of this documentation is not submitted. (These will be uploaded to Bridges/Castle Branch as well as copies must emailed to clinical coordinator by 7/31)

- ☐ COVID vaccination proof (Not required however records are needed on Castle branch whether or not it was received)

- ☐ Two-Step PPD TEST FOR TUBERCULOSIS:
 - Student must have the two-step PPD on initial entry into the healthcare program. (See Form 3.1C Initial two-step PPD form)

- ☐ MMR Titer must be provided – IF NEGATIVE, YOU MUST SHOW PROOF OF REVACCINATION/BOOSTER

- ☐ VARICELLA (Chicken Pox) Titer must be provided - IF NEGATIVE, YOU MUST SHOW PROOF OF REVACCINATION/BOOSTER

- ☐ Proof of HEPATITIS C screen must be provided

- ☐ Proof of Polio Vaccination must be provided with the date

- ☐ Proof of Tdap administration within the past 7 years must be provided
 - These are typically good for 10 years. Therefore, if it is 7 years or longer since the last administration, it will be due again before your program completion. However, re-administration of Tdap earlier than this is a decision to be considered by your health care provider.

- ☐ Proof of HEPATITIS B VACCINATION and Titer results must be provided
 - It is recommended to have a positive titer indicating immunity to HEPATITIS B
 - If you have a negative titer indicating non-immunity to HEPATITIS B, you must discuss the options with your healthcare provider to determine the best course of action to re-administer the series or to administer a booster. You must provide proof of this.

2/99, 1/05, 5/05

Reviewed: 4/08, 7/08, 11/08, 7/10, 7/12, 7/13, 8/17, 6/19, 6/20, 7/21, 6/22,, -6/24,, 5/25

Revised: 11/09, 2/11, 3/13, 1/17, -6/24,, 5/25

INITIAL TWO-STEP PPD FORM 3.1C

Directions: Students entering the first healthcare course of the program must submit this completed form to the CFE Admissions Office.

PPD TEST FOR TUBERCULOSIS

Student must have the two-step PPD upon **initial entry** into the healthcare program.

Date of 1st test: _____

1st Reaction and date read: _____

Signature of Doctor/Nurse reading reaction: _____

Date of 2nd test: _____

2nd Reaction and date read: _____

Signature of Doctor/Nurse reading reaction: _____

Please note: Students must also have an annual PPD done prior to the beginning of each academic year which begins in August.

Reviewed: 8/17, 9/17, 6/19, 6/20, 7/21, 6/22, 6/24, 5/25
Revised: 1/17

HEALTHCARE PROVIDER RELEASE FORM

St. Mary's Center for Education
 Phone: 304/526-8224 / Fax: 304/399-1981

STUDENT'S NAME _____ DATE _____

HEALTHCARE PROVIDER'S NAME _____

STUDENT'S DIAGNOSIS _____

TO THE HEALTHCARE PROVIDER: Please be advised that the student's classroom and clinical responsibilities upon returning to school may include, but not be limited to:

- 1) coping with stressors inherent in the student health care professional's role
- 2) sitting in student desks for up to six hours with limited, scheduled breaks
- 3) using normal body mechanics in positioning and working with patients, and moving and lifting supplies and equipment weighing five pounds or more
- 4) lifting patients
- 5) exposure to diagnosed and undiagnosed viral and bacterial infections
- 6) CPR

I, therefore, **RELEASE** _____ to classroom and clinical
 (Student Name)
 responsibilities with **NO** ___ **SOME** ___ limitations/impediments.

LIMITATIONS/IMPEDIMENTS MUST BE LISTED HERETYPEEXPECTED DURATION

I, therefore, **DO NOT RELEASE** _____ to classroom and clinical
 (Student Name)
 responsibilities at this time.

COMMENTS:

 Physician's Signature

 Date

 Telephone

6/99

Revised: 5/04, 5/05, 4/08, 7/08, 2/11, 9/17

Reviewed: 11/08, 11/09, 7/10, 7/12, 7/13, 6/19, 6/20, 7/21, 6/22,, 6/24,, 5/25

Health Services (St. Mary's campus) 3.2

Section: HEALTH RELATED POLICIES	Title: Health Services (St. Mary's campus)	Policy #: SHB 3.2
Department: Center for Education	Approved by: Faculty Organization	Date last reviewed/revised: 5/25

POLICY: Specified health care services are available to all students.

DEFINITIONS:

PROCEDURE:

1. The student is accountable for assessing his/her own health status and using good judgment in fulfilling class and clinical responsibilities.
2. St. Mary's Center for Education will comply with current immunization policies of St. Mary's Medical Center, Marshall University, and other agencies utilized for clinical rotations, as applicable to incoming or current students.
3. Student prescriptions and refills may be filled through the Employee/Outpatient Pharmacy on 1 East. See posted hours of operation. The student is then billed through the Center for Education Business Office.
4. Students are responsible for any laboratory or radiology services that would be ordered. The student is billed through their insurance carrier or private pay.
5. See the Marshall University Student Handbook for student health and other health services available. (www.marshall.edu/student'affairs/stubook)
6. See the MCTC Student Handbook for student health and other health services available.

Formulated: Prior to 5/02

Revised; 5/02, 5/04, 5/05, 7/07, 4/08, 7/08, 11/08, 2/11, 7/12, 1/15, 5/25

Reviewed: 11/09, 7/10, 7/13, 8/17, 6/19, 6/20, 7/21, 6/22, 6/24, 5/25

Exposure to Blood and/or Body Fluids 3.3

Section: HEALTH RELATED POLICIES	Title: Exposure to Blood and/or Body Fluids	Policy #: SHB 3.3
Department: Center for Education	Approved by: Faculty Organization	Date last reviewed/revised: 5/25

POLICY: Students exposed to blood and/or body fluids must follow agency policy regarding a report of the event and procedures related to the event.

DEFINITIONS:

PROCEDURE:

1. Upon exposure to blood and/or body fluids, the following steps must be taken immediately:
2. Cleanse the wound with soap and water. For eye splash, irrigate with water or normal saline.
3. Report incident to instructor.
4. Complete incident report specific to exposure to blood/body fluid.
5. Contact the Infection Control Officer or designee for assistance as needed.
6. Follow guidelines as specified by the agency policy.
7. The student should be encouraged to complete the exposure procedure as administered by the Emergency Department or at Marshall University Student Health Services at their own expense.

Formulated: Prior to 5/02

Revised: 5/02, 5/04, 5/05, 7/07, 4/08, 7/08, 11/08

Reviewed: 11/09, 7/10, 7/12, 7/13, 8/17, 6/19, 6/20, 7/21, 6/22, , 6/24,, 5/25

Exposure to Chickenpox (Varicella)/Shingles (Herpes Zoster) 3.4

Section: HEALTH RELATED POLICIES	Title: Exposure to Chickenpox (Varicella)/Shingles (Herpes Zoster)	Policy #: SHB 3.4
Department: Center for Education	Approved by: Faculty Organization	Date last reviewed/revised: 5/25

POLICY: Upon exposure to Varicella or Herpes Zoster, the student must notify the appropriate instructor immediately and follow listed provisions.

DEFINITIONS: An exposure is defined as “non-immune persons (negative history of Varicella/unknown post vaccination titer/negative titer post vaccination) having contact with shingles or chickenpox lesions (prior to crusting), drainage, or articles soiled with drainage, when not wearing a mask and gloves.

PROCEDURE:

1. Students must provide the school with their Varicella status prior to entering the program.
2. Any student with a known Varicella or Herpes Zoster exposure must report to their instructor, coordinator/director and/or the employee/student health clinic. All exposures are then reported to Infection Control, the Vice President for Schools of Nursing and Health Professions and appropriate faculty.
3. Students with Herpes Zoster (Shingles) symptoms will:
 - a. not be permitted to high-risk clinical areas such as OB, Pediatrics or Oncology until the skin eruptions are crusted,
 - b. be permitted in other areas as long as clothing covers the lesions,
 - c. be excluded from all clinical areas if the lesions are on hand, neck, face or arms until all lesions are crusted.

Formulated: 4/00

Revised: 5/02, 5/04, 5/05, 7/07, 4/08, 11/08, 2/11

Reviewed: 7/08, 11/09, 7/10, 7/12, 7/13, 8/17, 6/19, 6/20, 7/21, 6/22, , 6/24,, 5/25

Hepatitis B Vaccine 3.5

Section: HEALTH RELATED POLICIES	Title: Immunizations	Policy #: SHB 3.5
Department: Center for Education	Approved by: Faculty Organization	Date last reviewed/revised: 5/25

POLICY: Students must comply with specified immunizations, and may not participate in any course sessions until immunization records are complete.

DEFINITIONS:

PROCEDURE:

A. Hepatitis B Immunization

1. Hepatitis B vaccine and titer (HBSAB) are required.
2. Students must provide the Admissions Office proof of beginning the immunization series, by the designated date prior to entering the program.

B. Rubella Immunization

1. Immunization for rubella is required for all students born after January 1, 1957.
2. Students must provide the Admissions Office with proof of results to a rubella titer by the designated date prior to entering the program.

C. TDAP Vaccination

1. The TDAP (tetanus, diphtheria and pertusis) is required for all students. It is suggested that there be a two (2) year waiting period between receiving the TD and TDAP.
2. Documentation of TDAP must be provided to the Admissions Office by the designated date prior to entering the program.

DOCUMENTATION:

Individual records will be maintained with student health records.

Formulated: Prior to 5/02

Revised: 6/02, 5/04, 5/05, 7/07, 4/08, 11/09, 7/10, 2/11, 8/17, 6/19, 6/20, 7/21

Reviewed: 7/08, 11/08, 7/12, 7/13, 6/22, , 6/24,, 5/25

Tuberculosis Testing 3.6

Section: HEALTH RELATED POLICIES	Title: Tuberculosis Testing	Policy #: SHB 3.6
Department: Center for Education	Approved by: Faculty Organization	Date last reviewed/revised: 5/25

POLICY: All students must have an annual PPD.

DEFINITIONS:

PROCEDURE:

1. A 2-step PPD test must be completed prior to beginning the first clinical course. Students entering in the fall semester must have the 2-step PPD in June-July. Students entering in the spring semester must have the 2-step PPD in November-December.
2. Thereafter, students must have a PPD during the months of June-July, as long as they remain in the program.
3. Students that are known positive PPD reactors must have proof of this and follow St. Mary's Medical Center policy.
4. Documentation of the PPD and the results should be sent to the Admissions Office by the designated date.

Formulated: Prior to 5/02

Revised: 6/02, 5/04, 5/05, 7/07, 4/08, 11/09

Reviewed: 7/08, 11/08, 7/10, 7/12, 7/13, 8/17, 6/19,6/20, 7/21,6/22, , 6/24,,5/25

Latex (Rubber) Allergy/Sensitivity Policy 3.7

Section: HEALTH RELATED POLICIES	Title: Latex (Rubber) Allergy/Sensitivity Policy	Policy #: SHB 3.7
Department: Center for Education	Approved by: Faculty Organization	Date last reviewed/revised: 5/25

POLICY: Students known to have a sensitivity to latex shall be provided with alternative products for laboratory experiences.

DEFINITIONS:

PROCEDURE:

1. When a student indicates a possible sensitivity to latex, the student should be referred to the Coordinator/Director.
2. The Coordinator/Director will provide the proper forms to be completed.
3. First Report of Injury (online SMMC Intranet).
4. Latex Screening Questionnaire.
5. A copy of the above forms will be:
 - a. placed in the student's health record file.
 - b. submitted to the Employee Health RN.
6. The student may also seek assistance from their personal health care provider (at the student's expense).
7. Products such as protective lotions or specific gloves may be suggested by the student's health care provider.
8. Whenever possible, these products and/or items will be provided by St. Mary's Center for Education.
9. The student will arrange with the Coordinator/Director for the appropriate products and for replacement of the products, as needed.
10. It is the student's responsibility to inform each clinical instructor of this allergy and request the appropriate products when needed.

Formulated: 6/01

Revised: 6/02, 5/05, 7/07, 11/08, 7/10, 6/15

Reviewed: 5/04, 4/08, 7/08, 11/09, 7/12, 7/13, 8/17, 6/19, 6/20, 7/21, 6/22, , 6/24, 5/25

ADDITIONAL POLICIES

Advertisement and Posting of Information Policy 4.0

Section: Additional Policies	Title: Advertisement and Posting of Information Policy	Policy #: SHB 4.0
Department: Center for Education	Approved by: Faculty Organization	Date last reviewed/revised: 5/25

POLICY: All signs or information posted on the St. Mary's campus or in the St. Mary's Medical Center must be approved by the appropriate administrative personnel.

DEFINITIONS:

PROCEDURE:

1. Bulletin boards are located throughout the Center for Education. Any signage to be posted by students and other non-Center for Education personnel must be reviewed and approved by the Vice President for Schools of Nursing and Health Professions or authorized designee prior to posting.
2. Students wishing to post signage in the St. Mary's Medical Center must: receive approval from the Vice President for Schools of Nursing and Health Professions, and receive approval of hospital Administration and/or Marketing
3. All signage should be removed within twenty-four (24) hours after the event is completed.

Formulated: 10/02

Revised: 5/02, 5/05, 7/07, 11/09

Reviewed: 5/04, 4/08, 7/08, 11/08, 7/10, 7/12, 7/13, 8/17, 6/19, 6/20, 7/21, 6/22, , 6/24,, 5/25

Miscellaneous School Rules 4.1

Section: Additional Policies	Title: Miscellaneous School Rules	Policy #: SHB 4.1
Department: Center for Education	Approved by: Faculty Organization	Date last reviewed/revised: 5/25

POLICY: All students will abide by the listed rules and regulations governing behaviors of a student enrolled in the Center for Education programs.

DEFINITIONS:

PROCEDURE:

Data Changes: When the student has a change in name, address and/or phone number, he or she is responsible for notifying the St. Mary's and Marshall University or MCTC Admission Offices immediately. Forms for this purpose are available from the Admissions Office on the St. Mary's Center for Education campus.

Fire Drill: All students are responsible for knowing instructions for actions during medical center and school fire alarms. FIRE MANUALS are located in the school library.

Smoking: St. Mary's Medical Center and the Center for Education is SMOKE/TOBACCO FREE. No smoking or use of smokeless tobacco will be allowed on the St. Mary's Center for Education campus.

Cellular Phones and Pagers: Cell phones and pagers are to be turned off or on silence when inside the classrooms or labs. Cell phones must be turned off or on silence mode in clinical settings.

****Marshall University provides security for that campus.** Information regarding safety/security incidents can be reviewed on the university web page at www.marshall.edu.

Formulated: Prior to 5/02

Revised: 5/02, 5/05, 7/07, 4/08, 11/08, 11/09

Reviewed: 5/04, 4/08, 7/08, 7/10, 7/12, 7/13, 8/17, 6/19, 6/20, 7/21, 6/22, 6/24,,5/25

Parking Policy 4.2

Section: Additional Policies	Title: Parking Policy	Policy #: SHB 4.2
Department: Center for Education	Approved by: Faculty Organization	Date last reviewed/revised: 5/25

POLICY: Students are required to inform the school administration of the type of car they will be driving and to park in designated areas.

DEFINITIONS:

PROCEDURE:

1. Each student **MUST** register car, make, model, color and license number with the administration of their respective program: SON and SORC Admissions Secretary; SOMI Clinical Coordinator.
2. This enables the security guard and receptionist to notify students of problems that may occur involving the car and avoids possible towing, etc.
3. Students are to park on the Center for Education parking lot, 5th Avenue and 29th Street. Shuttle buses are provided to transport students from the parking lot to St. Mary's Medical Center. Do not park on the parking lots around the Medical Center.
4. Failure to comply with this policy can lead to ramifications up to and including dismissal from the program.
5. Evening students may use any non-reserved parking area surrounding the Medical Center or Center for Education.
6. Neither the Medical Center nor the Center for Education will assume any responsibility for damage to or theft of cars parked on their respective property.

Formulated: Prior to 5/02

Revised: 6/02, 5/04, 5/05, 6/06, 7/07, 4/08, 11/09

Reviewed: 7/08, 11/08, 7/10, 7/12, 7/13, 8/17, 6/19, 6/20, 7/21, 6/22, 6/24,,5/25

Publication Policy 4.3

Section: Additional Policies	Title: Publication Policy	Policy #: SHB 4.3
Department: Center for Education	Approved by: Faculty Organization	Date last reviewed/revised: 5/25

POLICY: Student policies for St. Mary's Center for Education are published in one or more appropriate institutional publications, i.e., student catalog, student handbook, brochure, and/or course syllabi.

DEFINITIONS:

PROCEDURE:

1. All policies are written or approved by the faculty or administration of St. Mary's Center for Education.
2. Students are informed of designated policies upon application to the program in the form of the school catalog.
3. Students are further informed of designated policies upon acceptance into the program of study during orientation to the program and the student handbook.
4. Any change in policy is provided to the student. Changes will be posted electronically, or a written copy will be distributed to each student and/or posted in a prominent area.
5. A copy of the school catalog and the student handbook is housed in the Center for Education Library.
6. Such policies are subject to change with reasonable notice provided to the student.

Formulated: 12/01

Reviewed: 5/04, 7/08, 11/08, 7/10, 7/12, 7/13, 8/17, 6/19, 6/20, 7/21,6/22, 6/24,,5/25

Revised: 5/05, 7/07, 4/08, 11/09

CPR 4.4

Section: Additional Policies	Title: CPR	Policy #: SHB 4.4
Department: Center for Education	Approved by: Faculty Organization	Date last reviewed/revised: 5/25

POLICY: All students enrolled in the Center for Education programs must demonstrate competency in CPR.

DEFINITIONS: CPR certification is that defined by the American Heart Association for Health Care Providers.

PROCEDURE:

1. All students will be required to successfully pass a CPR certification course offered at the Center for Education prior to their first class.
2. This certification will be for a period of two years. If the student has not graduated by the time their certification expires, they will be required to recertify at a time designated by the Center for Education staff.

Formulated: June 2007

Reviewed: 4/08, 7/08, 11/09, 7/12, 7/13, 8/17, 6/19, 6/20, 7/21,6/22, 6/24,,5/25

Revised: 11/08, 5/09, 7/10

Fire, Safety and Physical Premises 4.5

Section: Additional Policies	Title: Fire, Safety and Physical Premises	Policy #: SHB 4.5
Department: Center for Education	Approved by: Faculty Organization	Date last reviewed/revised: 5/25

POLICY: All students at any CFE school must be updated annually on fire and safety guidelines of the medical center.

SAFETY REGULATIONS:

1. Report any unsafe condition(s) to the department head.
2. Report any foreign material on the floor or remove it to prevent someone from falling or tripping.
3. Walk, do not run. Keep to the right and use caution at intersecting corridors.
4. Know the location of the fire extinguishers, fire alarms and the proper procedure for calling a fire code.
5. Know what to do in the case of a fire:
 - a. *Rescue patients and others to safety
 - b. *Alarm (know the proper procedure)
 - c. *Contain the fire (close all doors)
 - d. *Extinguish a small fire (know the location of the fire extinguishers) or evacuate if a large fire
6. Be careful when opening doors. Observe through the glass window if present.
7. Report all injuries to yourself or patient, no matter how slight.
8. No horseplay or practical jokes will be tolerated.
9. When in doubt about what should be done, ask the department head or clinical instructor.
10. Only authorized personnel will be allowed to use radiation producing equipment.
11. All personnel who remain in the radiographic room must stay behind the lead barrier or wear an apron (refer to the Radiation Protection Policy concerning students holding patients during exposures).
12. SOMI students must wear film badges at all times (unless you are undergoing a radiographic exam as a patient).
13. Smoking is not permitted in the Medical Center.
14. Students will complete safety orientations at each clinical site as needed.
15. Students must adhere to SMMC annual educational updates.

FIRE EVACUATION PLAN

The designated fire drill code for St. Mary's Medical Center is "Code RED, location. Code RED, location."

If the fire is not in your area:

- close all doors for containment
- turn off electrical equipment and appliances
- keep patients in your area
- remain in your assigned area
- prepare for further instructions, including evacuation if needed.

If the fire is in your area:

- remove any patients in danger
- activate the alarm
- notify the telephone operator of the exact location and extent of the fire
- turn off all electrical appliances and equipment
- close all doors
- isolate and extinguish the fire if not excessive

- Pull the extinguisher pin
- Aim the extinguisher nozzle toward the base of the fire
- Squeeze the handle to activate the extinguisher
- Sweep the extinguisher across the base of the fire
- if smoke is present, use wet linens around doors

MEDICAL CENTER LAYOUT AND UPDATES

St. Mary's Medical Center is divided into three main sections. The main Medical Center, also called the South Tower, contains most of the patient centered areas of the Medical Center, including radiology and surgery. The original building of the Medical Center, also called the east and west wings, contains most of the support areas of the Medical Center, as well as radiation oncology and the Wound Care Center. The Outpatient Center is adjacent to the main Medical Center across Collis Avenue and is connected by a skywalk. The map on the next page will be helpful.

*****MAIN LOBBY DOORS ARE LOCKED AFTER 8:00 PM FOR THE SAFETY & SECURITY OF PATIENTS, VISITORS, AND STAFF, AND REOPEN AT 10:00 PM FOR MIDNIGHT SHIFT AND 5:00 AM FOR ONCOMING DAYSHIFT. BETWEEN THOSE TIMES, YOU MUST ENTER THROUGH THE EMERGENCY ROOM AND BE PREPARED TO BE STOPPED BY A SECURITY GUARD AND QUESTIONED.**

Reviewed: 5/09, 7/10, 7/12, 7/13, 8/17, 6/19, 6/20, 7/21,6/22, , 6/24,,5/25
 Revised: 7/09, 11/09, 12/09

Community Service 4.7

Section: Additional Policies	Title: Community Volunteer Service	Policy #: SHB 4.7
Department: Center for Education	Approved by: Faculty Organization	Date last reviewed/revised: 5/25

POLICY: To be eligible for graduation, a student must successfully complete a volunteer community service component in order to develop attitudes and skills that foster responsiveness to the community's needs.

DEFINITIONS:

PROCEDURES:

1. Students must complete eight (4) hours of community service each semester. Four (4) hours can be service to SMMC and/or the CFE and four (4) hours must be service to the community.
2. If the student is unable to participate in the event as planned, the faculty member who recruited them for the event must be notified 48 hours in advance. The student is also asked to attempt to find a replacement for the event. Failure to notify the faculty member 48 hours in advance will result in an increase in the amount of required hours for that semester. The hours requirement will be doubled according to the type of service in which the student was unable to participate.
3. Students may select their own service agency/project from a faculty approved list of agencies or submit a request for approval for an unspecified agency to the Vice President for Schools of Nursing and Health Professions.
4. To document time spent at the selected agency, the student must submit a completed Verification of Community Service form (4.7A) signed by faculty or a representative of the service agency/project. The student is to submit this form to the designated Center for Education Secretary, who will maintain a record.
5. The designated CFE Secretary will distribute a list of students with the total number of community service hours to each faculty periodically throughout the semester.
6. Any required course related community service will not count toward the required total number of community service hours.
7. Community service must be health related activities that benefit the community and cannot be part of employment responsibilities.
8. Exceptions to this policy for professional students (RT or RRT to BS) will be managed by the Director of each respective school.
9. Community service requirement will be doubled if the student has not met the community service hour requirement by the date grades must be submitted to Marshall University.

Requirement increases to 8 hours for service to community or SMMC. Students will not be submitted for graduation from the program until all Community Service requirements are satisfied.

SUGGESTIONS FOR COMMUNITY SERVICE AGENCIES:

Alzheimer's Support Group

American Cancer Society

American Heart Association

American Diabetes Association

American Red Cross

Hospice (also Hospice House)

Huntington City Mission

Mountain State Centers for Independent Living

Nursing Homes

Autism Services	Ronald McDonald House
Branches Domestic Violence Shelter	Senior Citizen Centers
Contact Rape Crisis Center	SMMC related community activities
Ebenezer Medical Outreach	Special Olympics
Community Food/Clothing Pantries:	Sarah Care
**Cridlin Pantry (Trinity Episcopal Church)	Disability Expo
**ECCHO (Milton)	Lilly's Place
**YMCA (Lucy's Attic)	

Formulated: 1/08

Reviewed: 4/08, 5/10, 7/12, 3/14, 8/17, 6/20, 7/21, 6/22, 6/24,, 5/25

Revised: 7/08, 11/08, 10/09, 7/10, 12/10, 12/11, 8/12; 7/13; 3/14; 6/16, 4/21

4.7A This proof of participation must be completed by student and turned in to the Administrative Secretary, (see list of agencies in the Student Handbook, 4.7).

Verification of Community Service

Student Name (Please print)

School in which you are enrolled:

School of Medical Imaging

Class of 2026 _____

Class of 2027 _____

Class of 2028 _____

Date volunteered: _____

Hours volunteered: _____

Name of service agency/project: _____

Description of service: _____

Circle the type of service: SMMC/CFE Service or Community Service

Participation verified by: _____

Must be signed by faculty or a representative of service agency/project (i.e., City Mission, 5K Walk/Run)

NOTE: It is highly recommended that you make a copy for your records.

Formulated: 12/10

Revised: 2/14/11; 12/11; 6/12; 7/14, 6/19, ,6/24

Reviewed: 7/12; 7/13; 3/14, 8/17, 6/19,6/22, , 6/24,,5/25

Electronic Devices /Social Media 4.8

Section: SHB Additional Policies	Title: Electronic Devices/Social Media	Policy#: SHB 4.8
Department: CFE	Approved by: Faculty/Staff	Date Last Reviewed/Revised: 5/25

POLICY:

To ensure that electronic devices, including cell phones, PDAs, etc. are used appropriately by students.

DEFINITIONS:

Electronic devices includes, but not limited to: pagers, smart phones, mobile/cell phones, CD players, PDAs, Palm pilots, laptops, MPs, i-Pads, etc.

Social media is interactive dialog using electronic devices and the web and includes but is not limited to: Facebook, Instagram, TikTok e-mail, blog, Twitter, Topix, instant messaging, etc.

PROCEDURE:

1. Electronic devices are not to be used in any clinical facility by students unless the student is given permission to do so by the program director.
2. Students in the School of Nursing (SON) and School of Respiratory Care (SORC) have required reference texts on electronic devices. These students may access the specific software in faculty approved areas (such as the conference rooms or report rooms).
3. SON and SORC students must have their devices on “Airplane Mode” while in the clinical agency.
4. Any CFE student found to be using an electronic device in the clinical area for any reasons (other than the required reference software), will have the final grade lowered by one letter per event.
5. Social media sites are not to be accessed while the student is engaged in course activities.
6. If a student does access a social media site outside of course activities, the student is not allowed to mention the name of any clinical facility nor any information related to patients.
7. When a student does access social media sites, it is highly recommended that the student be very cautious of making any negative comment about other persons.

NOTE: Failure to comply with this policy may result in dismissal from the CFE.

DOCUMENTATION:

All course syllabi will include a statement related to the appropriate utilization of electronic devices, including social media.

Formed: 8/12/11

Revised: 8/17, 4/21

Reviewed: 7/12; 7/13. 6/19, 6/20, 7/21,6/22,6/24,,5/25

Inclement Weather Policy 5.3a

Section: Academic Policies	Title: Inclement Weather Policy	Policy #: SHB 5.3a
Department: Center for Education - SON	Approved by:	Date last reviewed/revised: 5/25

POLICY: Guidance in the event of inclement weather is provided in this policy.

DEFINITIONS:

1. St. Mary's Center for Education will follow Marshall University in regard to closing the campus for BS students and will follow MCTC in regard to closing for the AAS students.
2. See attendance policy regarding make up of missed class or clinic.
3. If school is not cancelled, but there are some surrounding communities wherein travel may be hazardous, the Vice President for Schools of Nursing and Health Professions may implement what is called "Code Weather". The VP will notify Program Directors who will then post a Code Weather announcement on Blackboard.
4. If a student under "Code Weather" determines that inclement weather poses a potential hazard to safety, he or she must notify the main desk at the school (304-526-1415), the Clinical Coordinator and or Instructor if a class day, and the clinical unit if it is a clinical day.
5. If this occurs for a campus lab or clinical experience under "Code Weather" the campus lab or clinical experience must be made up at a time deemed appropriate by faculty.

JUDGEMENT REGARDING SAFETY AND RESPONSIBILITIES IS ALWAYS THAT OF THE INDIVIDUAL. INSTITUTIONAL POLICY SERVES ONLY TO ESTABLISH GUIDELINES

Formed: 11/15

Reviewed: 8/17, 6/20, 7/12, 7/21, 6/22, 6/24,, 5/25

Revised: 1/17, 6/24

Non-compliance with JRCERT 1.1

Section: General Policy	Title: Non-compliance with JRCERT	Policy #: SHB 1.1
Department: Center for Education – SOMI	Approved by: Academic Committee	Date last reviewed/revised: 5/25

POLICY: To provide a mechanism for students to file complaints regarding noncompliance with JRCERT mandated Standards.

PROCEDURE:

SMMC SOMI is accredited by the Joint Review Committee on Education in Radiologic Technology (JRCERT). The JRCERT provides peer review and establishes Standards for programs in Radiography, Radiation Oncology and other educational programs. Applicants or Students can find current Standards for Radiography programs at www.jrcert.org. Students may file a complaint with the Program Director and the JRCERT if they feel the program is in violation of any Standard.

Guidelines:

Students should identify in writing the Standard reflecting program non-compliance.

Students should provide the Program Director with a copy of the complaint identifying the Standard in question.

The Program Director will make every attempt to explain the Program's policy and answer any questions the student may raise.

If the Program Director concurs that a policy or procedure does seem to be in noncompliance, the policy procedure will be remedied to more accurately reflect JRCERT Standards. The Program Director will contact JRCERT in order to ascertain the appropriate measures to be taken.

If the Program Director does not concur with the student and/or the student is not satisfied with the response;

Students may forward a copy of the complaint to JRCERT.

JRCERT can be contacted by mail, phone, fax, email or via the internet. Addresses are:

JRCERT Phone: 312-704-5300

20 N. Wacker Dr. Fax: 312-704-5304

Suite 2850 email: mail@jrcert.org

Chicago, IL 60606-3182 web: www.jrcert.org

The SMMC program reference number is: 3403. This number should appear on all correspondence with the JRCERT.

The student is assured that there will be no retaliatory action by the Program for any complaint filed with the JRCERT.

Formed: 3/04

Reviewed: 7/09, 7/10, 7/12, 5/13, 7/14, 7/15, 7/16, 8/17, 6/19, 6/20, 7/21,, 6/24,,5/25

Revised:

Admission Policy 1.2a

Section: General Policy	Title: Admission Policy	Policy #: SHB 1.2a
Department: Center for Education – SOMI	Approved by: Academic Committee	Date last reviewed/revised: 5/25

POLICY: Admission into the SOMI.

PROCEDURE:

Admission to the SMMC SOMI is made by application. Applications as well as the Technical Standards and Technical Standards declaration form can be obtained through the Program web site at www.st-marys.org Admission to the SMMC SOMI is separate from admission to MU and MCTC. Admission into MU or MCTC does not guarantee admission into the SOMI. There is a \$30 application fee for the SMMC SOMI. All application materials, including college and high school transcripts/GED, must be received by May 15th Any application received after May 15th will not be considered.

Along with the application and fee, a signed copy of the technical standards declaration form.

Applicants must show proof of high school graduation or successful completion of the GED exam. Program admission requires a minimum GPA of 2.50 and at least 15 college credit hours that must include the following prerequisites:

Marshall University

coursework in college algebra (MU Math 121, 127, 130)
coursework in human anatomy (MU BSC 227)(MU BCS 227 L)
coursework in introductory physics (MU PHY 101)(MU PHY 101 L)
coursework in human physiology (MU BSC 228)(MU BSC228 L)
medical terminology
statistics (can be taken as a co-requisite and is required for MU graduation

Mountwest

Math 120
Science 110 with Lab
Biology 260 with Lab
Biology 265 with Lab
AH 151

Course work submitted for admission criteria from colleges or universities apart from Marshall University (MU) or MCTC must be equivalent (acceptable in transfer) to those offered at

Marshall or MCTC. Applicants should contact the registrar's office at MU or MCTC if they have questions about the transfer of coursework. Applicants must take both semesters of any human anatomy and physiology course taught in two separate terms. Applicants will receive points for human anatomy and physiology in such instances. Any variation from the prerequisite coursework requirement requires direct permission from the Program Director.

Applicants are scored and ranked based on overall college GPA, course grades in prerequisite courses, and high school GPA or GED scores. Applicants who submit ACT scores will receive extra points for scores of 19 or greater on the composite, math and/or science components. Provisional admission will be offered to the top 26 applicants based on total points. All other completed applications will be ranked for the alternate list. The alternate list is maintained until the program begins in August. A new application must be submitted for the next year.

The program reserves the right to conduct personal interviews to aid in applicant selection.

All offers of admission are contingent upon a background check and drug screening. Contact the Program regarding incurred expense.

St. Mary's Medical Center School of Medical Imaging

Admission Data

Name _____

College GPA (min 2.5)				Total _____
2.50-2.74	10 points	3.50-3.74	30 points	
2.75-2.99	15 points	3.75-3.99	35 points	
3.00-3.24	20 points	4.00	40 points	
3.25-3.49	25 points			

College Coursework A = 4 points B = 3 points C = 2 points Below C = 0 points

Course	Grade (x CR)	Enrolled (3-4 point)	Total _____
Medical terminology	_____	_____	
Math 121 (applications in algebra)	_____	_____	
BSC 227 (human anatomy)	_____	_____	
BSC 227 L (lab)	_____	_____	
PHY 110 (introductory physics)	_____	_____	
BSC 228 (human physiology)	_____	_____	
BSC 228 L (lab)	_____	_____	
Statistics	_____	_____	
Extra credit			
CHM 203 (chemistry)	_____	_____	
PHY 203 (gen physics)	_____	_____	

ACT Scores : Math ____ = ____ Science ____ = ____ Reading ____ = ____ Composite ____ = ____

18 or less	0 points	
19-22	1 points	
22-25	2 points	
Above 26	3 points	Total _____

High School GPA/GED Composite

High School	GED	Total _____
Below 2.5	0 points	
2.5-3.0	1 point	
3.1-3.99	2 points	
4.0 or Above	3 points	

Total Points _____

Revised 1/12/04, 3/04, 2/06, 7/09, 3/11, 5/13, 6.19, 6/20, 6/24,5/25

Reviewed: ,6/24,6/25

Transfer of Credit 1.3

Section: General Policy	Title: Transfer of Credit	Policy #: SHB 1.3 (in addition to CFE Policy 1.9)
Department: Center for Education – SOMI	Approved by: Academic Committee	Date last reviewed/revised: 6/23

PURPOSE: All transfer of credit must comply with Marshall University or MCTC policies and procedure.

See CFE Policy 1.9, Transfer of Credit regarding non-medical imaging credits.

Students wishing to transfer from another imaging program will have to provide proof that they were not dismissed due to an ethical or academic violation (per ARRT Code of ethics). A letter from the Program Director stating the student was in good standing will be required.

Imaging course work credit transfers will be evaluated on a course-by-course basis through comparison of course syllabi and program requirements.

General education course transfer must meet Marshall University or MCTC requirements.

Formed: 8/09

Reviewed: 7/10, 8/12, 5/13, 7/14, 7/16, 7/17, 6/19, 6/20, 7/21, 6/22, 6/24, 5/25

Revised: 8/12, 6/15, 6/19, 5/25

Withdrawal Policy 1.4

Section: General Policy	Title: Withdrawal Policy	Policy #: SHB 1.4
Department: Center for Education – SOMI	Approved by: Academic Committee	Date last reviewed/revised: 5/25

POLICY: Withdrawal procedure from SOMI.

PROCEDURE:

Withdrawal requires the student to inform the program director of their intention to withdraw and completion of the withdrawal form. Students who fail to inform the director or to submit the withdrawal form prior to the end of the semester, in which they are withdrawing, will be dismissed from the program and a grade of F will be recorded for all attempted coursework for the term. Students who choose to withdraw from SMMC-SOMI must also drop their MI coursework from MU. Withdrawal information will be sent to Marshall University Financial Aid or other issuers of financial aid or scholarship as appropriate.

Students may not withdraw from individual courses. Withdrawal is from the Program.

Students may withdraw at any point. Students may be readmitted the following year if:
They voluntarily withdraw due to pregnancy (refer to Pregnancy Policy).
They withdraw due to medical reasons (see Attendance Policy).
They withdraw due to family emergency.

Students who withdraw may receive a partial tuition refund (see Tuition Refund Policy).

Students who withdraw for any other reason must resubmit an application and go through the entire admission procedure. Students who are dismissed from the program for disciplinary reasons should know they must report this information to the ARRT if they seek admission into another Radiography program.

Formed: 3/04

Reviewed: 7/10, 8/12, 5/13, 7/14, 7/15, 7/16, 7/17, 6/19, 6/20, 7/21, 6/22, 6/24, 5/25

Revised: 7/09, 8/12, 6/19

Tuition Refund Policy 1.5

Section: General Policy	Title: Tuition Refund Policy	Policy #: 1.5
Department: Center for Education – SOMI	Approved by: Academic Committee	Date last reviewed/revised: 5/25

POLICY: Tuition Refund Policy

Students who withdraw from SOMI may receive a partial tuition refund based on guidelines established for Marshall University or MCTC tuition refund policies. Students may still be responsible for financial aid obligations even if they withdraw from the Program. Students should contact the their respected Financial Aid office for further information. Tuition deposits along with background or drug screening are non-refundable.

Formed: 3/04

Reviewed: 7/09, 7/10, 8/12, 5/13, 7/14, 7/15, 7/16, 7/17, 6/19, 6/20, 7/21,6/22, 6/24,5/25

Revised: 6/07, 6/24,5/25

Disciplinary Policy 1.6

Section: General Policy	Title: Disciplinary Policy	Policy #: SHB 1.6
Department: Center for Education – SOMI	Approved by: Academic Committee	Date last reviewed/revised: 5/25

POLICY: Refer to CFE SHB policy Appeals Grievance 2.0 and 2.1.

PURPOSE: The purpose of a sanction, in addition to protecting others, is primarily to educate an individual by increasing his/her awareness of the importance of responsibility to the SMMC SOMI community for one's actions. This will ordinarily be the guiding force behind imposition of sanctions by the SOMI judicial system. Sanctions may range from the issuance of demerits for minor violations of clinical procedural policies to probationary status. In some instances, however, the program's need to properly function outweighs the program's ability to so educate an individual. In such case, for the benefit of both the student and the community, suspension or expulsion from the SOMI may result.

Normally, students facing suspension or expulsion from the institution will be entitled to a hearing prior to the imposition of the sanction. However, a student may be temporarily suspended pending final action on the charges when the student's continued presence on campus would constitute a potential for serious harm to himself/herself or the safety of other members of the institutional community. Such temporary suspension shall be followed with speedy disciplinary proceedings consistent with these policies, rules and regulations.

See CFE Policy 2.1, Non-Academic Grievance Policy regarding due process for any disciplinary action other than demerits.

The following sanctions may be imposed for violation of the Code of Conduct:

A. Expulsion

This is termination of all student status, including any remaining right or privilege to receive some benefit or recognition or certification. Students have the right to submit in writing an appeal of a primary decision for expulsion to the CFE Grievance Panel pursuant to CFE Policy 2.1 Non-Academic Grievance. During the expulsion, the person is barred from coming onto or using SOMI property and facilities. (The individual is not barred from coming onto or use of any medical affiliate in a non-student capacity.) Students may also initiate a secondary appeal for re-admission to the SOMI. Conditions for secondary readmission may be established only through a written appeal to the Vice President for Schools of Nursing and Health Professions no sooner than one complete calendar year from the date the expulsion was placed in effect. The action will appear on the student's official transcript until such time as any and all appeals for

readmission is made to and granted by the Vice President for Schools of Nursing and Health Professions to terminate the expulsion.

B. Suspension

This action involves separation of the student from the SOMI for a definite stated period of time up to three days. Condition on resumption of activities, if any, also may be imposed. The SOMI may deny readmission in those instances where the suspended student fails to demonstrate a positive change in behavior which indicates the suspended student is prepared to become again a responsible member of the SOMI community. Numerous resource persons may be used to assist the student in identifying and clarifying experiences, goals, educational and career choices, and other personal objectives. Suspensions must be reported to the ARRT during the application process. Students are encouraged to contact the ARRT ethics committee prior to submitting an application in order to determine if there are any problems associated with the application. Students have the right to submit in writing an appeal of a primary decision for expulsion to the CFE Grievance Panel pursuant to CFE Policy 1.2, Non-Academic Grievance. Any student who receives a second disciplinary suspension may be terminated from the SOMI.

C. Demerits

A system of demerits is in place for specified violations of clinical procedure policies. Demerits may be awarded by any clinical instructor, the Clinical Coordinator or the SOMI Director. The demerit policy is further discussed under Clinical Policy and Procedures. Demerits may not be appealed.

D. Probation

This action involves a specified period of time, not to exceed one semester, determined by the SOMI Director during which a student in violation of one or more SOMI regulations is given an opportunity to prove that he or she can become a responsible and positive member of the SMMC SOMI community.

Any student violating program regulations or the terms of probation while on probation may be subject to further disciplinary action as specified under this Code, up to and including termination from the SOMI.

Academic Probation: All SMMC SOMI students whose overall SOMI GPA drops below 2.50 will be placed on academic probation. All probation students are subject to the following restrictions:

- Students on probation must meet with the Program Director to develop an Academic Improvement Plan to achieve good academic standing. This plan will be binding on the student. Students on probation must earn a 2.50 GPA or higher during every semester they are on probation.
- Failure to achieve a 2.50 semester GPA or higher while on Academic Probation may result in expulsion. Failure to achieve a 2.50 GPA in all subsequent semesters may result in expulsion.
- Other requirements may be imposed in the Academic Improvement Plan.

- The student is returned to Academic Good Standing when his or her overall SOMI GPA is 2.50 or higher.
- A Grade of D or F in any course work results in automatic academic probation. See the Progression policy.

Clinical Probation

- The foundation of a student's clinical progress is competency based clinical education. Competency based education is a systematic process of psychomotor development assuring that students are competent clinically through a defined sequence of content delivery, practice and evaluation (see Competency Based Education criteria for learning sequence). Any student who has passed a particular competency, but cannot adequately perform the procedure with indirect supervision, will have the competency revoked and must begin the competency sequence again.
- Clinical Instructor Evaluations: Students who receive negative clinical instructor evaluations from more than one clinical instructor/clinical site may be placed on clinical probation.
- Clinical competency/proficiency progression: Students who are not progressing at an acceptable rate through demonstration of clinical competency/proficiency may be placed on clinical probation.
- Conditions and restrictions for probation may be imposed, as deemed appropriate, including but not limited to:
- Students on probation must meet with the Program Director or Clinical Coordinator to develop a Clinical Practice Improvement Plan to achieve the requisite level of clinical skills. This plan is binding on the student.
- The student may be required to simulate a range of clinical procedures.
- The student may be required to repeat any or all clinical competency exams.
- Students will not be allowed to graduate from the program while on probation.
- Probation will be lifted when all goals of the Clinical Practice Improvement Plan have been achieved.

Formed: 3/04

Reviewed: 7/10, 8/12, 5/13, 7/14, 7/15, 7/16, 7/17, 6/19, 7/21, 6/22, 6/24, 5/25

Revised: 6/07, 8/09, 8/12, 5/13, 7/16, 7/17, 6/19, 6/20

Attendance Policy 1.7

Section: General Policy	Title: Attendance Policy	Policy #: SHB 1.7
Department: Center for Education – SOMI	Approved by: Academic Committee	Date last reviewed/revised: 5/25

PURPOSE: St. Mary's Medical Center School of Medical Imaging emphasizes the need for all students to attend classes and clinical assignments on a regular and consistent basis. In addition to research which demonstrates that regular class attendance enhances student success, consistent attendance and punctuality helps students develop good habits and behaviors necessary to compete in a highly challenging job market. The clinical experience is essential to achieving the required level of competency/proficiency for ARRT certification. Moreover, a minimum amount of clinic time is mandated by the accreditation bodies.

Guidelines: All clinical absenteeism (including time missed due to inclement weather) must be made up according to the guidelines below.

- 1. All missed clinic time must be made up. Make up times will be on Saturdays.** The number of available slots is limited so students should arrange make up time ASAP with Derry Osborne, Clinical Coordinator
- 2. Any time not made up will result in an incomplete grade for the clinical course. The missed time must be made up within the first four weeks of summer--dates will vary depending on when the summer intercession begins .After the time is made up a grade change will be sent to Marshall or MCTC. The recorded grade will be at least one letter grade lower than it would have been prior to the incomplete unless there were extraordinary circumstances as determined by the Program Director. Examples might include evidence of extended illness that prevented the student from making up absenteeism in a timely manner. Failure to satisfy the incomplete will result in a grade of F for the course -A failure in a clinic course will result in dismissal from the program.**
3. Students, who enroll in a summer intercession course, may NOT use that time as make up for a different class or to bank clinic time for a future class as the summer course has its own clinical requirements. One class cannot satisfy the requirements of another.
4. The only exceptions to the make-up requirements are the 3 day grievance policy for immediate family members (parents, spouse, siblings, children, grandparents). Students may be required to present information from a funeral home or obituary.
5. Conferences or registry reviews actually enhance the clinical experience and are not considered absences.
6. Students who have extended jury duty, military responsibilities, or illness that exceeds two weeks in duration may have to take a leave of absence (LOA). Students with extended family health issues may petition for a LOA as well. LOA will be considered on an individual basis. A leave of absence is good for one academic year.

Guidelines: Didactic class absenteeism including tardiness:

- 1. Attendance is Mandatory. Any tardy will equal an absence and there will be a letter grade drop on the 4th occurrence and another letter grade drop for any subsequent**

absence. Unexcused absences on scheduled exams may not be made up. The student will incur a grade of zero.

2. Absenteeism will be documented for each class missed, not the entire day. Excused absences will be counted. The difference for excused absenteeism versus unexcused is exams or other graded work may be made up for an excused absence pending specific course policy. See course syllabi.
3. Any student, who receives a letter grade drop in any didactic course due to absenteeism or tardiness, will be placed on academic probation. If the student continues to have issues with attendance in subsequent courses/academic terms, they will be dismissed from the program upon the 3rd instance of absenteeism or tardiness in any individual class.
4. Failure of a class as a result of dropped course grades due to absenteeism will impede progression in the program or graduation. See the progression policy.

Guidelines: Clinical absenteeism: Attending all scheduled clinical shifts is extremely important both for professional development and gaining the clinical competence required by the ARRT for certification.

1. Tardiness is unprofessional and causes a disruption in the clinical schedule. We do understand there are occasional issues with shuttle schedules that may result in tardiness and students will make up the time missed for the first three episodes of tardiness in a term. However, upon the fourth episode of tardiness, the time missed becomes eight (8) hours of absence. Each subsequent occurrence will be counted as 8 hours. For example, you are late 5 minutes three times (= 15 minutes). Then you are late one minute on the fourth time (the time owed for make up is now 8 hours). You are late a fifth time: time owed is another 8 hours. Students, who exceed five occurrences of tardiness, will meet with the appropriate program director and may face additional disciplinary action including dismissal from the program.
2. Clinical Make Up Criteria:
 1. Only four radiography students (sophomores and/or junior) will be able to make up time on any given Saturday (2 at CHH and 2 at SMMC). Special arrangements have to be made for any other sites with the clinical coordinator.
 2. **Students who schedule make up and fail to appear, will be considered to have incurred another 8 hours of absenteeism.**
 3. Clinical make up assignments will not be punitive in nature.
 4. Students may not use regularly scheduled lunch hours to make up time
 5. Students who elect to make up assignments that will cause them to exceed a 40 hour combined class/clinic time limit in a work week will be required to sign a statement that they voluntarily choose to exceed the 40 hour/week limitation.
 6. Students must notify both the clinical site and the program office if they are going to be absent or substantially late for a clinical rotation (more than 10 minutes). **Failure to notify both the clinic site and the office will result in a demerit on the first episode.** A pattern of failure to notify (more than once) will result in additional disciplinary action up to and including course grade deductions up to 10%. It is important that the clinic and the program know will you do not meet your obligations. The only exception would be if the student is physically unable to phone. Evidence supporting the physical inability to phone the appropriate parties will be required.

Formed: 3/04

Reviewed: 7/10, 8/12, 5/13, 7/14, 6/15, 6/19, 7/21, 6/22, 6/24, 5/25

Revised: 6/05, 6/07, 6/08, 7/08, 8/09, 8/12, 5/13, 7/14, 6/15/7/16, 8/17, 8/18, 6/20

Pregnancy Policy 1.8

Section: General Policy	Title: Pregnancy Policy	Policy #: SHB 1.8
Department: Center for Education – SOMI	Approved by: Academic Committee	Date last reviewed/revised: 5/25

PURPOSE: All students will be advised of the potential danger to an unborn fetus resulting from radiation exposure by giving each student the Regulatory Guide 8.13 from the Nuclear Regulatory Commission in accordance with the Standards for an Accredited Educational SOR in Radiological Sciences from the Joint Review Committee on Education in Radiography. This policy will also apply to students in the sonography track.

Because of the potential effects of radiation exposure on the unborn fetus, the SOMI strongly recommends that the pregnant student inform the SOMI Director of her pregnancy as soon as possible if the dose to the unborn child is to be minimized. However, the decision of whether or not to inform the SOMI Director of pregnancy is voluntarily up to each student. Students will sign an acknowledgment statement regarding the Pregnancy Policy, which will be placed in their file.

If the student voluntarily chooses to inform the SOMI Director of her pregnancy, it must be in writing on the Declaration of Pregnancy form. At this point, the student will be scheduled to meet with the radiation safety officer as soon as possible so she can make an informed decision as to how she wishes to proceed. The student is invited to bring the father or other individuals to the meeting with the radiation safety officer. The radiation safety officer will inform the student of the effects of radiation on the fetus, as well as acceptable radiation practices. The radiation safety officer will endeavor to answer any questions the student may have.

After meeting with the radiation safety officer, the student will determine which of the following options they wish to exercise and so declare on the Declaration of Pregnancy form. Sonography students will not be required to meet with the radiation safety officer and will also have the following options from which to choose.

Option 1. The student may withdraw from the SOMI. A student who withdraws in good standing may reapply to the SOMI when applications are considered. This student will be evaluated on an equal basis with all other applicants.

Option 2. The student may withdraw from the SOMI and be guaranteed reinstatement the following year at the point the student withdrew. This guarantee is only for the year following the student's withdrawal.

Option 3. The student may withdraw from the clinical phase of the SOMI while continuing to take the didactic classes. All missed clinical time, including the post-partum period, must be made up before the student can graduate.

Option 4.1 without modification. The student may choose to continue as a full-time student in both the clinical and didactic portion of the program with or without modifications as described below. The pregnant student that chooses to continue as a full-time student shall bear the complete risk of injury to her fetus. In addition, the following measures are required: The pregnant student will be issued an additional radiation monitor to be worn at the abdominal level to monitor fetal exposure. The student must continue to wear her radiation monitor at the collar to monitor her occupational exposure.

During the entire pregnancy, the Dose Equivalent limit to the fetus cannot exceed .5 rem. If it does, the student must withdraw from the clinic portion of the SOMI and make up all missed clinical time prior to graduation.

The student must present a written unrestricted release from her physician allowing her to take classes and continue her clinical education.

In accordance with federal law, the student can "undeclared" their pregnancy at any time by submitting a written request to do so to the Program Director and proceed in all aspects of the program as if they were not pregnant.

The student will not assist in holding patients or remain in the radiographic room while an exposure is being made, otherwise they will continue all other phases of training as expected of any other student, including clinical rotations in surgery, portables or fluoroscopy.

Option 4.2 with modification.

At the student's request, she may elect not to be assigned to surgery, portables or fluoroscopy during her pregnancy. These rotations must be made up prior to graduation.

If a student chooses not to inform the SOMI Director of her pregnancy in writing, that student will not be considered pregnant and must continue in all phases of the SOMI, maintain all academic and clinical performance standards and abide by all SOMI policies and procedures as is expected of all students. Furthermore, that student shall be deemed to have assumed all risks of any possible danger of radiation exposure to the unborn fetus.

Formed: 2/99

Reviewed: 7/10, 8/12, 5/13, 7/14, 6/15, 7/16, 7/17, 6/18, 6/19, 6/20, 7/21, 6/22, 6/24, 5/25

Revised: 6/03, 3/04, 1/05, 6/15

Pregnancy Policy Acknowledgement Form

St. Mary's Medical Center School of Medical Imaging

In signing this form, it is acknowledged that:

I have been informed and understand the dangers of radiation injury to the fetus and radiation protection guidelines that I should follow. I understand that I am NOT obligated to inform the SOMI if I become pregnant.

I have received a copy of the Nuclear Regulatory Commission guideline 8.13 concerning pre-natal exposure.

I have received and reviewed a copy of the SOMI's Pregnancy Policy.

I understand the foregoing pregnancy policy and agree to abide by its provisions. I understand and agree that if I elect not to inform the SOMI Director in writing of my pregnancy, I shall assume all risks of harm to my unborn fetus and shall indemnify and hold harmless St. Mary's Medical Center, the SOMI Director, the SOMI affiliates and their respective agents, representatives and insurers from all claims for damages arising from any harm to my fetus resulting from my decision.

A copy of this agreement will be placed in my student file.

Student Signature

Date

SOMI Director Signature

Date

Reviewed: 7/10, 7/12, 5/13, 7/14, 6/15, 7/16, 7/17, 6/18, 6/19, 6/20, 7/21, 6/22, , 6/24, 5/25

Revised: 6/03, 3/04

Declaration of Pregnancy

St. Mary's Medical Center School of Medical Imaging

I, _____, do hereby make this voluntary declaration of pregnancy. The estimated date of delivery is _____. I understand that I am making this voluntary declaration of pregnancy in compliance with the requirements of Regulatory Guide 8.13 of the Nuclear Regulatory Commission (Appendix B) as required by the Standards of an Accredited Educational SOMI in Radiological Sciences from the Joint Review Committee on Education in Radiography (see Appendix C).

After having had explained to me the potential for harm to my unborn fetus from radiation exposure during my clinical training, as well as all available options, I have decided to (please initial):

- | | | |
|-------|----|--|
| _____ | 1. | Withdraw from the SOMI completely. |
| _____ | 2. | Withdraw from the SOMI and be reinstated the following year at the point I withdrew. |
| _____ | 3. | Withdraw from the clinical aspect of the SOMI and continue to attend classroom sessions. I understand that all missed clinical course work must be made up within 48 months from the point I entered the SOMI. |
| _____ | 4. | Remain in the SOMI in the capacity of a full-time student, assuming all risk of harm to my unborn fetus. I shall indemnify and hold harmless St. Mary's Medical Center, the SOMI Director, the SOMI affiliates and their respective agents, representatives and insurers from all claims for damages arising from any harm to my fetus resulting from my decision to remain in the program including all clinical rotations. |

Student Signature

Date

SOMI Director Signature

Date

Radiation Safety Officer Signature

Date

Reviewed: 7/10, 8/12, 5/13, 7/14, 6/15, 7/16, 7/17, 6/18, 6/19, 6/20, 7/21, 6/22, 6/24, 6/25

Revised: 6/03, 3/04; 8/12

Academic Integrity 2.0

Section: Academic Policy	Title: Academic Integrity	Policy #: SHB 2.0 (in addition to CFE Policy 1.0 Academic Integrity)
Department: Center for Education – SOMI	Approved by: Academic Committee	Date last reviewed/revised: 6/25

PURPOSE: An important aspect of the SOMI is a rigorous academic component that is designed to give the student a fundamental and theoretical foundation upon which clinical component is based and to prepare the student to take the American Registry of Radiologic Technologists (ARRT) exam upon graduation. Most of the states in the U.S. require that graduates pass this exam before they can be awarded a Radiation Operator's license from that state.

Student should refer to CFE Policy 1.0 Academic Integrity for description of academic integrity expectations. In addition to the policies outlined in CFE Policy 1.0, the ARRT certification application requires students to indicate whether they have been expelled from a medical imaging program or have been sanctioned for academic dishonesty. This application must be reviewed for accuracy by the Program Director or designated official.

Student Academic Rights

Concomitant with other academic standards and responsibilities established by the SMMC SOMI and its clinical affiliates, each student shall have the following academic rights:

The student shall be graded or have his/her performance evaluated solely upon performance in the course work as measured against academic standards.

The student shall not be evaluated prejudicially, capriciously, or arbitrarily.

The student shall not be graded, nor shall his/her performance be evaluated, on the basis of his/her race, color, creed, sex, sexual orientation, or national origin.

Each student shall have the right to have any academic penalty as set forth herein, reviewed pursuant to the procedures described. Except in those cases where a specific time is provided, this review shall occur within a reasonable time after the request for such review is made.

Each student shall have access to a copy of the Student Handbook or program brochure in which current academic program requirements are described (e.g., required courses, total credit requirements, minimum grade point average, probation standards, professional standards, etc.).

Each student shall receive from the instructor written descriptions of content and requirements for any course in which he/she is enrolled (e.g., attendance expectations, special requirements, laboratory requirements, grading criteria, standards and procedures, professional standards, etc.).

The instructor of each course is responsible for assigning grades to the students enrolled in the course consistent with the academic rights set out in the preceding sections.

SMMC SOMI is responsible for defining and promulgating:

The academic requirements for admission to the program.

The criteria for maintenance of satisfactory academic progress, for the successful completion of the program, for the award of a degree or certification, for graduation.

Probation, suspension, and dismissal standards and requirements.

Normally, a student has the right to finish a program of study according to the requirements under which he/she was admitted to the program. Requirements, however, are subject to change at any time, provided that reasonable notice is given to any student affected by the change

Sanctions

A student who fails to meet the academic requirements or standards, or who fails to abide by the policy on academic dishonesty may be subject to academic sanctions. Sanctions for academic dishonesty may be imposed by the instructor of a didactic course, a clinical instructor, the Clinical Coordinator or the SOMI Program Director.

The instructor may impose the following sanctions:

A lowering or failing project/paper/test grade.

A lower final grade.

Failure of the course (including clinic).

Clinical demerits.

Exclusion from further participation in the class (including laboratories or clinical experiences).

The following sanctions may be recommended by the instructor, but will need to be imposed by the SOMI Program Director:

Failure of a course grade

Exclusion from the academic program.

Academic probation up to one (1) semester.

Academic or clinical suspension up to five (5) days.

Dismissal from the program.

A student will be informed in writing by the instructor or responsible SOMI official, of any charges and subsequent sanctions imposed for academic dishonesty. Written notification of academic dishonesty charges (and the inclusion of confirmed charges/sanctions in a student's records) is designed to inform a student of the potential repercussions of repeat offenses and his/her rights of appeal.

If a student believes that charges of academic dishonesty have been erroneously levied, he/she should appeal such charges in accordance with CFE Policy 2.0, Student Appeals for Instructor Imposed Sanctions.

Sanctions for repeated academic dishonesty will be imposed by the Program Director after consultation with the appropriate instructor and CFE Vice President.

A student's record of academic dishonesty offenses will be maintained throughout their enrollment at SMMC SOMI and the period of time between offenses may have no impact on sanctions for repeated offenses.

A student with a second academic dishonesty offense during his/her enrollment will be academically suspended for a period of time not to exceed five (5) days.

A student with a third academic dishonesty offense during his/her enrollment will be dismissed from the program.

Any time an accusation of academic dishonesty is made, and a sanction imposed (or a sanction will be imposed with the submission of final grades), a notice should be sent to the SOMI Program Director within ten (10) days of the sanction.

Notice of an act of academic dishonesty will be reported through the completion of an "Academic Dishonesty Report Form" or the clinical demerit form as appropriate. Accused students will be provided with copies.

Formed: 3/04

Reviewed: 7/10, 7/12, 5/13, 7/14, 6/15, 7/16, 7/17, 6/19, 6/20, 6/24, 6/25

Revised 3/10, 7/14, 6/19

Progression Policy 2.1b Remediation

Section: Academic Policy	Title: Progression Policy	Policy #: 2.1a
Department: Center for Education – SOMI	Approved by: Academic Committee	Date last reviewed/revised: 6/25

PURPOSE: Remediation

Any student who makes less than 75% on a quiz/exam will remediate the missed concepts. The purpose of the remediation is to allow the instructor to try to identify specific problem areas and link them to steps that can produce attainable results. A template to easily record remediation plans/and results for communication with students will be supplied in the course content of a particular class and attached to the course syllabus.

Remediation will take the form of the student meeting with the Instructor within 1 week of the failed exam. An appointment must be made with the instructor to go over the completed form within two weeks of the failed exam.

Students, who do not make good faith attempts at remediation and ultimately fail a course, may be dismissed from the program.

Formed 1/15

Reviewed 7/15, 7/16, 8/17, 6/18, 6/19, 6/20, 7/21, 6/22, 6/24, 6/25

Revised 7/15

Grading Policy 2.2

Section: Academic Policy	Title: Grading Policy	Policy #: 2.2
Department: Center for Education – SOMI	Approved by: Academic Committee	Date last reviewed/revised: 6/25

PURPOSE: Grading procedure.

1. **Specific grading criteria may differ from course to course** and will be given to students in a syllabus at the beginning of each session. All SOMI course work must be passed with a grade of C or better. In general, all grades assigned to each course and the grade point averages (GPA) are based on the following grading scale:

- A = 100 – 89.5% (4 points)
- B = 89.5 – 79.5% (3 points)
- C = 79.4– 74.5.0% (2 points)
- D = 74.4- 69.5% (1 point)
- F = 69.4% and lower (0 points)

Student Evaluations

The following evaluations are conducted:

Clinical Instructor Evaluation: The clinical instructor(s) that work with each student during the evaluation period evaluate the student at the end of a student's clinical site rotation. Clinical Instructor evaluations from each clinical site rotation during a semester will be averaged together to determine the clinical performance/behavior portion of the student's clinical grade. Staff radiographers are able to offer input regarding a student's clinical performance/progression through consultation with clinical instructors and through the completion of imaging objectives for specific imaging rotations. Refer to course syllabi for grading component and to clinical instructor evaluation form.

Competency/Proficiency evaluation: Student competency is assessed for specific procedures in accordance with ARRT guidelines. Competency assessment may be performed by clinical instructors and in some cases by staff radiographers designed as a comp tech. Procedures performed under the aegis of a comp tech must be subsequently reviewed with a clinical instructor. The CI has the right to declare the comp null and void if a student cannot answer questions about the procedure.

Progress Advisement: The student will meet with their advisor at the end of each semester to discuss the student's academic and clinical progress. The SOMI director may meet with a student at any point during the semester as is deemed necessary. Students may be required to meet with the SOMI Program Chair, or course instructor if they fail an exam or receive a poor clinical instructor evaluation.

Formed: 1/01

Reviewed: 7/10, 8/12, 6/13, 7/15, 7/16, 8/17, 6/18, 6/20, 7/21,6/22 6/24,6/25

Revised: 8/09, 8/12, 6/13, 7/15, 8/17, 6/24,6/25

Advisory Policy 2.3

Section: Academic Policies	Title: Academic Advisory	Policy #: 2.3
Department: Center for Education - SOMI	Approved by: Faculty Organization	Date last reviewed/revised: 6/25

POLICY: All students will be provided academic support as they progress through their program.

ACADEMIC ADVISOR

All students will be assigned a faculty advisor when they enter the program; however, students may seek information or assistance from any appropriate faculty.

The assigned faculty advisor will schedule a conference with each advisee near the end of each semester to discuss overall progress in the program including clinical instructor evaluations. The advisor will complete a progress report signed by the advisor and student.

It is the responsibility of the student to seek assistance when necessary. Each individual student is ultimately responsible for the outcomes of any examination and/or evaluation.

The Chair of St. Mary's School of Medical Imaging is the Academic Advisor of record at Marshall University for all students enrolled in the Medical Imaging Program. This requires that all registration and other official forms be signed by the Chair prior to processing at Marshall University.

Students will receive evaluations from the clinical instructor for each clinical rotation. CI evaluations will be used as part of the grade calculation in clinical courses. Refer to course syllabi for specific criteria.

Students who receive a negative clinical instructor evaluation (category score of below average) will meet with the Radiography Clinical Coordinator Director to discuss the evaluation.

Individual course instructors will advise students regarding performance in individual courses. Letters from individual instructors will be distributed at approximately mid-term each semester to students with <75% average in the clinical lab component or a didactic class. Students who are failing course work (<74.5% average) will be placed on probationary status. Refer to Probationary policy

Formulated: 10/12

Reviewed: 7/14, 7/15, 7/16, 6/18, 6/20, 7/21, 6/22, 6/24-6/25

Revised: 5/13, 7/15, 8/17, 6/19

Clinical Assignments 3.0a Radiography Tracks

Section: Clinical Policy	Title: Radiography Clinical Assignments	Policy #: 3.0
Department: Center for Education – SOMI	Approved by: Academic Committee	Date last reviewed/revised: 6/25

PURPOSE: Describe clinical assignments.

The clinical component of the SOMI consists of approximately 1400 clinical hours under direct or indirect supervision (see Direct Supervision Policy).

Clinical Assignments

The SOMI has developed a Master Schedule which outlines all clinical assignments for the student's three years in the SOMI. This schedule will be given to students prior to each term. While every attempt is made to assure that the Master Schedule is followed, it may be necessary to make changes to the schedule with notification to the student.

All students will be required to complete a rotation through computed tomography (CT). Additional advanced imaging rotations (including mammography) are considered as electives. Students may select three elective rotations in the sophomore and junior year to assist them in choosing an advanced imaging track the senior year. All assignments are made irrespective of gender. For example, if a male student chooses to rotate through mammography, they may do so. All students should be aware that a patient has the right to refuse to let a student participate in their examination. If such were to occur, the student would still be responsible for the theoretical aspect of the clinical assignment objective.

Clinical Rotation Times

All students are initially assigned to day rotations, beginning at 7:30 am and ending at 3:30 pm, Monday through Friday. Some individual rotations may vary slightly from this schedule (refer to clinical schedule).

Beginning in the second semester, students will be assigned to one evening (1:00 – 9:00 pm) rotation/ semester. These assignments are essential in providing students experience with examinations that occur infrequently during day shifts, in particular trauma, and to promote independence as outlined in the Direct and Indirect Supervision Policy.

Students assigned to portable rotations at SMMC have the option of working from 5:30 am – 1:30 pm or 7:30 am – 3:30 pm. Students who begin at 5:30 am may leave at 12:30 pm in lieu of lunch. Students who wish to work the 5:30 am rotation must notify the SOMI office and the portable radiographer in advance.

Clinical Assignments

Support Assignments: some clinical assignments that are deemed of minimal value educationally are very important for the student to understand how these areas or rotations play in the daily operation of a medical imaging department. These assignments are limited to one rotation. These rotations may include: transport, workflow and files.

Core Assignments: these clinical assignments in general radiology and computed tomography are of significant educational value and are repetitive. The faculty cannot assure that every student receives the same number of rotations through these areas, but faculty will ensure that all rotations are adequate to assure ARRT entry level competence. Core assignments include: routine radiography, intravenous urography, fluoroscopy, mobile/surgical radiography, bone densitometry (dexa scan) and computed tomography. Refer to clinical syllabi for clinical emphasis.

Evening Assignments: students are assigned to one evening rotation/semester (1:00 pm -9:00 pm) beginning with MI 210 Clinical Practice II. This rotation provides the student with exposure to trauma radiography and other procedures more likely to be encountered during off hours. Clinical instructors are available during the evening.

External Rotation: students will rotate through different clinical facilities, all located within reasonable driving distance of the CFE. These assignments provide the student with a broad diversity of patients, procedures and equipment. Clinical instructors are available for all external rotation assignments. All external rotations are participatory in nature.

Elective: Elective rotations are available in MRI, cardiac catheterization/angiography, mammography, nuclear medicine, radiation oncology and Students will select up to 3 electives, beginning with the second semester. Due to the sensitive gender nature of mammography, students are advised patients have the right to refuse a student's observation. Students who elect the mammography or any other elective rotation, but are unable to observe actual procedures will be required to complete a short written discussion that addresses the clinical objectives associated with the rotation.

Advanced practice clinical assignments: senior students enrolled in the BS advanced practice tracks will be assigned to two-three days clinical experience/week. These rotations may or may not fulfill all the clinical requirements for the advanced practice examinations in CT, MRI, CV or CVI, depending upon the work load of the clinical site. Advanced level students may elect to do additional clinical rotations. They need to coordinate any additions to the schedule with the clinical instructor and the clinical site.

Formed: 2/04

Reviewed: 7/10, 8/12, 5/13, 7/14, 7/15, 7/16, 7/17, 6/18, 6/19, 6/20, 7/21, 6/22, , 6/24 6/25

~~Revised: 8/09, 8/12, 5/13~~

Time Clock Policy 3.1

Section: Clinical Policy	Title: Time Clock Policy	Policy #: 3.1
Department: Center for Education – SOMI	Approved by: Academic Committee	Date last reviewed/revised: 6/25

PURPOSE: Establish parameters for use of time records in clinical rotations.

Guidelines and Sanctions:

1. All students must electronically clock in when reporting to clinic and clock out when leaving the clinic. This includes clocking in and out for lunch.
2. Radiography students will clock in and out through the www.trajecys.com program.
3. Students will be provided explicit information on how to access the programs by the respective director/clinical coordinators.
4. Failing to clock in and out will result in a 1 demerit deduction on the third occurrence. A one demerit deduction will occur for each subsequent offense during a semester.
5. Any student, who fraudulently clocks another student in or out or who arranges to have a student or other individual to fraudulently clock him or herself in or out, will be dismissed from the program..
6. Students must use approved IP addresses in order to clock in electronically. They may not use their phone or home computer or any other web based device unless specifically instructed to do so by the Program Chair or specific Program Director.
7. **Any student who uses an unauthorized IP address to clock in or out will be dismissed from the program. IP addresses will be monitored. .**

Formed: 3/04

Reviewed: 7/10, 7/12, 5/13, 7/14, 7/15, 7/16, 6/18, 7/21,6/22, 6/24-6/25

Revised: 7/08; 8/09, 8/12, 5/13, 7/15, 7/16, 8/17, 6/19,-6/24-6/25

Overtime Policy 3.2

Section: Clinical Policy	Title: Overtime Policy	Policy #: 3.2
Department: Center for Education – SOMI	Approved by: Academic Committee	Date last reviewed/revised: 6/25

PURPOSE: Establish parameters exceeding scheduled clinical rotation times. While students are not encouraged to work overtime, the SOMI faculty recognizes that on occasion it may occur. Overtime is always voluntary on the part of the student. Students may be approved for compensatory time.

Overtime must be signed by the clinical instructor or supervisor on duty at that time and submitted to the SOMI Chair, or Radiography Clinical Coordinator for approval. If reasonably possible, all compensatory time off must be taken during the week in which the overtime was received in order to prevent the student from exceeding 40 hours per week. If not possible, the time off must be taken as soon as reasonably possible. Students are not permitted to accrue overtime to obtain additional time off beyond scheduled breaks.

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Formed: 1/99

Reviewed: 7/10, 7/12, 5/13, 7/14, 7/15, 7/16, 6/18, 6/19, 6/20, 7/21, 6/22, -, 6/24-6/25

Revised: 5/99; 6/99; 6/01; 6/02; 3/04; 8/09; 8/12, 8/17-6/25

Clinical Conduct Policy 3.3

Section: Clinical Policy	Title: Clinical Conduct Policy	Policy #: 3.3
Department: Center for Education – SOMI	Approved by: Academic Committee	Date last reviewed/revised: 6/25

PURPOSE: Establish parameters for conduct in the clinical areas. Students must follow these guidelines in governing their relations with others.

Patient and Personnel Relations

1. Relationships with other members of the imaging department or students must be kept professional at all times.
2. Students must be kind, courteous and compassionate to patients and visitors.
3. Students must observe all HIPPA regulations. Failure to do so will result in dismissal from the program.
4. Patients who cannot help themselves are to be neatly dressed and covered before leaving the department.
5. Always protect your patient's privacy by properly gowning them and keeping doors closed during radiographic exams.
6. Avoid discussion in the presence of a patient unless the discussion is centered on the patient and their exam. This is a mandate of HIPPA.
7. Always assist patients on and off tables.
8. Keep only a professional interest in your patients.
9. Identify patients by their last name first, followed by their first name. Always check the patient's arm band for confirmation of correct patient. **Two forms of identification are mandatory.** Imaging the incorrect patient may be considered battery in a court of law.
10. Once your patient is correctly identified, refer to them as Mr., Mrs. or Miss. Do not use terms such as "sweetie", "honey", etc.

Clinical site Conduct Guidelines

Students must always govern their behavior while in the clinical setting according to the following guidelines:

1. Running or horseplay will not be tolerated (see safety regulations).
2. No gum chewing in the clinic. This may result in a demerit.
3. Do not sit on counter tops.
4. If there are no patients, students should stay in their assigned area and practice imaging procedures or ask to assist elsewhere (always get approval from the clinical instructor before leaving your assigned area).
5. Students may bring to clinic their pocket positioning handbook.
6. Students will have their clinical notebook with them during clinical assignments.
7. Students must be in their assigned areas and on time each day.

8. Always answer the departmental phones by stating the department or area first, followed by your name.
9. **Students may not use personal cell phones while in the clinic. They cannot be in your pocket.** Leave 526-8224 as an emergency contact number and we will find you in the event of an emergency. **Students using cell phones in clinic will receive a letter grade reduction in the clinical course.** A second violation of this policy will result in dismissal from the program. All of our clinical sites prohibit employee or student use of personal cell phones within the clinical setting due to the possibility of HIPPA violations.
10. **All clinical facilities are no smoking including their parking lots.** If we receive a complaint about smoking related body odor, you will receive a written warning on the first offense. A subsequent offense will result in dismissal from the program.
11. Students are to be clean, odor free and neat in the clinic. Complaints will addressed with the student. Subsequent complaints will result in demerits or additional clinical sanctions.
12. Students will follow any specific guidelines established by a clinical site.

Formed: 1/99

Reviewed: 7/10, 7/12, 5/13, 7/14, 7/15, 7/16, 8/17, 6/18, 6/20, 7/21, 6/22, , -6/24-6/25

Revised: 5/99; 6/99; 6/01; 6/02; 6/03; 3/04; 8/09; 8/12, 5/13, 7/15, 7/16, 6/19

Change in Clinical Assignment Policy 3.4

Section: Clinical Policy	Title: Change in Clinical Assignment Policy	Policy #: 3.4
Department: Center for Education – SOMI	Approved by: Academic Committee	Date last reviewed/revised: 6/25

PURPOSE: To assure that all student clinical assignments are educationally valid and appropriate for the student's tenure in the SOMI and to assure that students will not be substituted for paid staff.

All requests to change or alter a student's assigned clinical rotation must first be approved by the SOMI Director or Clinical Coordinator .However, if no procedures are being performed in the student's assigned area, a clinical instructor may temporarily re-assign the student to another area.

Students must submit a clinical assignment change form if they wish to make up clinical time, request clinical time off, or substitute one clinical assignment for another (for example, request an additional rotation through a specified area).

Clinical assignment change forms are available from the Clinical Coordinator.

Forms should be submitted to the Clinical Coordinator a minimum of three (3) business days in advance, otherwise the request may be denied.

Formed: 3/04

Reviewed: 7/10, 7/12, 5/13, 7/14, 7/15, 7/16, 7/17, 6/18, 6/19, 6/20, 7/21,6/22 , 6/24-6/25

Revised: 8/09; 8/12

Clinical Demerit/Merit Policy 3.5

Section: Clinical Policy	Title: Clinical Demerit/Merit Policy	Policy #: 3.5
Department: Center for Education – SOMI	Approved by: Academic Committee	Date last reviewed/revised: 6/25

PURPOSE: Establish policy for demerits and/or merits.

Demerit Guidelines:

1. Students will be given clinical demerits for failure to follow clinical policy or procedures.
2. Demerits can be awarded by Clinical Instructors, Program Directors and faculty.
3. Demerits will result in deductions from the clinical grade.
4. Students who receive more than five demerits in one semester may be subject to further disciplinary measures, ranging from a written warning to suspension.
5. Violations of clinical policy for which a demerit may be awarded, including but are not limited to:
 - a. Marker Policy: 1 demerit per offense (students must have markers at all times in the clinical setting, including laboratory classes). Clinical instructors may request to see a student's marker at any time.
 - b. Time Clock policy (failure to clock in or out): 1 demerit on the third offense; 1 demerit for each subsequent offense.
 - c. Uniform violations: 1 demerit for each offense, including improper uniform, shoes, film badge or name tag.

Merit Guidelines:

1. Students will be awarded merit points in instances of outstanding clinical performance.
2. Merits are the decision of the Clinical Coordinator, Clinical Instructors or Program Director.
3. Merit points will be subtracted from any clinical demerits.
4. In instances where there are no clinical demerits, students may accumulate merit points toward clinical time off: 1 merit point = 1 hour. Merit points may be used at any time, but must be scheduled with the clinical coordinator. They cannot be used as make up for clinical absenteeism.
5. Actions that may result in Merit Points include, but are not limited to:
 - a. letters of commendation from patients
 - b. letters of commendation from staff radiographers or departmental supervisors
 - c. outstanding performance in a clinical setting

Formed: 3/04

Reviewed: 7/10, 7/12, 5/13, 7/14, 7/15, 7/16, 7/17, 6/18, 6/20, 7/21, 6/22, 6/24, 6/25

Revised: 6/05; 8/09; 8/12, 5/13, 7/14, 6/19

Direct and Indirect Supervision Policy 3.6

Section: Clinical Policy	Title: Direct and Indirect Supervision Policy	Policy #: 3.6
Department: Center for Education – SOMI	Approved by: Academic Committee	Date last reviewed/revised: 6/25

PURPOSE: Ensure radiation safety to the public. Medical imaging procedures are performed under the direct supervision of a qualified practitioner until a radiography student achieves competency.

DEFINITION:

1. Direct supervision: a qualified imaging technologist **must be physically present** during the procedure.
2. Indirect supervision: a qualified imaging technologist **is immediately available** to assist students. They cannot be available via the phone. Immediately available is interpreted as the presence of a imaging technologist adjacent to a room or location where an examination is taking place.
3. Competency: the student has satisfactorily completed the clinical competency sequence for a particular imaging procedure, including class room and laboratory instruction, practice exams, and final competency examination.

Direct supervision

1. A qualified staff imaging technologist reviews the request for examination in relation to the student's level of achievement.
2. A qualified imaging technologist evaluates the condition of the patient in relation to the student's knowledge.
3. A qualified imaging technologist is present in the imaging room during completion of the examination.
4. A qualified imaging technologist reviews and approves the medical images.
5. **Required of any student who has not demonstrated competency for a particular procedure.**
6. **Required for all mobile surgical or C-arm examinations (including pain management fluoroscopy).**
7. **Required if an image has to be repeated, or if a patient is pregnant regardless of level of competency.**
8. **Pregnant patients are always imaged with direct supervision.**

Indirect supervision

1. After demonstrating competency for a given procedure, a student may perform that procedure under indirect supervision. Indirect supervision is defined as that supervision provided by a qualified imaging technologist immediately available to assist students regardless of the level of student achievement. Use of an electronic device or intercom does not constitute immediate availability.
2. All completed medical images are to be reviewed and approved by a qualified radiographer or radiologist prior to the patient's dismissal from the imaging department regardless of the student's level of competency. Students cannot dismiss a patient without direct input from a staff radiographer.

It is the responsibility of the student to assure that staff is informed of the level of supervision needed for a given situation. All first semester radiography students will perform imaging exams under direct supervision. Failure of a student to follow this policy may result in disciplinary action.

Formed: 5/99

Reviewed: 7/10, 8/12/5/13, 7/14, 7/15, 7/16, 7/17, 6/18, 6/20, 7/21,6/22, ,6/24-6/25

Revised: 6/03; 3/04; 8/09; 8/12, 5/13, 7/15, 7/16, 6/25

Lunch Policy 3.7

Section: Clinical Policy	Title: Lunch Policy	Policy #: 3.7
Department: Center for Education – SOMI	Approved by: Academic Committee	Date last reviewed/revised: 6/25

PURPOSE: To provide equitable lunch breaks, regardless of clinical rotation.

Guidelines:

1. Radiography students on day shifts will go to lunch between 12:00 – 1:00 p.m. Lunch will be 30 minutes for sonography students due to scheduling.
2. Radiography students on evening rotations will go to lunch between 5:00 – 6:00 p.m.
3. Radiography students will clock in and out for lunch. Failure to clock in/out will result in a clinical demerit.
4. Students may not request to work through lunch in order to leave early unless extenuating circumstances apply. The student must receive permission from the Clinical Coordinator or Program Director.
5. Students assigned to portable/surgery at SMMC in the 5:30 a.m. slot may elect to leave at 12:30 p.m. rather than take lunch.
6. Students may delay lunch in the event they are in the middle of a procedure. Students should check with the Clinical Instructor, Clinical Coordinator, or Program Director for approval.

Formed: 3/04

Reviewed: 7/10, 8/12, 5/13, 7/14, 7/16, 7/17, 6/18, 6/20, 7/21, 6/22, 6/24-6/25

Revised: 8/09; 8/12, 7/15, 7/16, 6/19

Marker Policy 3.8a

Section: Clinical Policy	Title: Marker Policy Radiography	Policy #: 3.9
Department: Center for Education – SOMI	Approved by: Academic Committee	Date last reviewed/revised: 6/25

PURPOSE: Radiographic films are valueless as legal evidence unless there is competent proof of their identity. Along with patient information, right and left markers must be permanently developed on the radiograph.

Guidelines:

1. Students will be issued one set of lead left and right markers free of charge during their orientation as first year students.
2. Each student is responsible for his/her own lead markers.
3. Lost markers must be reported immediately. Each student will be responsible for the purchase of a second set of markers at the current market price, including shipping/handling.
4. **Students must bring their lead markers to all clinical rotations and clinical lab sessions. Failure to have lead markers will result in a demerit.**
5. **Students must never loan or allow their markers to be used by others unless the student is directly participating in the exam. Violation of this guideline will result in the issuance of a demerit. It is strongly suggested students do not let anybody, including a staff technologist use their markers. Markers are a legal documentation.**
6. Students who fraudulently use another student's lead markers will be issued a demerit. Unauthorized use of another student's markers is considered academic dishonesty.
7. Students are reminded that annotation of left or right on digital images is NOT legal marking. The marker must appear on the original image to be considered legal.

Formed: 2/01

Reviewed: 7/10, 8/12, 5/13, 7/14, 7/15, 7/17, 6/18, 6/20, 7/21, 6/22, 6/24, 6/25

Revised: 6/03; 3/04; 8/09; 8/12,

Potentially Pregnant Patients 3.9

Section: Clinical Policy	Title: Potentially Pregnant Patients	Policy #: 3.9
Department: Center for Education – SOMI	Approved by: Academic Committee	Date last reviewed/revised: 6/25

PURPOSE: Radiographic procedures that may expose an embryo or fetus to radiation should not be undertaken without the full knowledge and consent of both the patient and the requesting physician. The guidelines below must be followed when imaging a potentially pregnant patient.

Policy is followed for all female patients within childbearing age.

1. All females within childbearing age must be questioned regarding potential pregnancy.
2. If the potential fetus will be exposed to the primary beam and no physician has determined if the patient is pregnant, then determine if the patient knows if she is pregnant or not.
3. If definitely no, then continue with the procedure.
4. If definitely yes, follow clinical department procedures regarding pregnant patients. For example, consult with patient's physician or request a pregnancy confirmation test.
5. If the patient is unsure of her pregnancy, determine the date of the last menses, then:
 - a. if the menses was within the past two weeks, continue with the procedure.
 - b. if the menses was more than two weeks ago, consult with the physician prior to proceeding.
6. If in doubt, consult with the physician prior to continuing with the procedure.
7. If the potential fetus will be exposed to the primary beam, and if the requesting clinician has determined that the patient is in fact pregnant, continue with the procedure.
8. If the potential fetus will not be exposed to the primary beam, proceed with the procedure using gonadal shielding as indicated.
9. **All pregnant radiography patients must be imaged with direct supervision regardless of level of competency.**

Radiation Protection Policy 3.10

Section: Clinical Policy	Title: Radiation Protection Policy	Policy #: 3.10
Department: Center for Education – SOMI	Approved by: Academic Committee	Date last reviewed/revised: 6/25

PURPOSE: Establish safe occupational practice regarding ionizing radiation.

1. Remain completely inside the control booth during the exposure.
2. Close the doors prior to an exposure.
3. Always face the x-ray source (the patient) during fluoroscopy.
4. Wear protective gloves if your hands are near the primary beam during fluoroscopy.
5. **Always wear a lead apron when performing portable exams. Failure to do so will result in disciplinary actions.**
6. All exposures must be made with the proper amount of collimation (never > than film size).
7. Patients in or below child-bearing years must be gonadal shielded if shielding will not compromise the exam.
8. Everyone that must be present in a radiographic room during an exposure must wear a lead apron. This includes family members as well as students.
9. Follow the three basic rules of radiation protection:
 - a. minimize the time in an exposed area
 - b. maximize the distance from the source
 - c. maximize the amount of shielding whenever possible
10. Radiation dosimeter readings are monitored regularly by the radiation safety officer (RSO), the Radiation Safety Committee, and the SOMI Program Director. The sequence and dose level limits are as follows:
 - a. The RSO reviews radiation reports online in MyLDR on an ongoing basis.
 - b. Quarterly and annual ALARA reports are generated and presented to the Radiation Safety Committee. **Note: St. Mary's Medical Center distributes and submits dosimeters on a monthly basis to all employees and students who meet**

the requirements for monitoring, even though the report from Landaur is received on a quarterly basis. See D for an exception to the quarterly report.

- c. A hardcopy is placed into archive in SMMC Radiation Oncology for inspection review.
- d. d. In addition to the archived reports, all students in the SOMI will receive a copy of their dosimetry report and signify they have received said copy.
- e. e. The RSO receives a notification if any student hits the ALARA II level. The RSO in turn will notify the Program director who will contact the student. The student would then meet with the RSO to determine what circumstances might have led to the issue and will make recommendation for dose reduction measures including removal from clinical rotations. Note: The NCRP sets the ALARA levels and bases them on calendar year dose levels. Doses are prorated according to NCRP monthly/quarterly exposure limits. .
- f.

ALARA Investigational Levels (mrem per calendar year)		
Part of the body	Level I	Level II
Whole body: head and trunk, active blood-forming organs, and gonads	125	375
Lens of eyes	375	1125
Hand and forearms; feet and ankles	1250	3750
Skin of the whole body	1250	3750

- 11. Always wear your radiation dosimeter (except when undergoing a radiographic exam as a patient). Lost or damaged dosimeters must be reported immediately. Students will not be permitted to attend clinical rotations without a radiation dosimeter. Dosimeters are to be worn at the collar and outside of lead aprons. It is the student's responsibility to assure that dosimeters are submitted monthly in a timely manner.
- 12. Students will have access to a copy of their radiation dose accumulations within 30 days after reports are received by the RSO's office and the Program Director.
- 13. Students with declared pregnancy will receive a separate fetal monitor.
- 14. All students must turn 18 years of age prior to beginning the SOMI.
- 15. Students are not to hold patients during exams when an immobilization method is the appropriate standard of care. This especially applies to pediatric patients when a Pigg-O-Statt would be the appropriate standard of care. Even if the facility does not have a Pigg-O-Statt, students should still not hold the patient.
- 16. Students are never to hold image receptors during any radiographic procedure.
- 17. This policy will be reviewed during student orientation.

Formed: 1/01

Reviewed: 7/10, 8/12, 5/13, 7/14, 7/15, 7/16, 7/17, 6/18, 6/20, 3/21, 7/21,,-6/24-6/25

Revised: 6/03; 7/09; 8/12, 7/16, 6/19, 3/21,,6/24

Repeat Radiograph Policy 3.11

Section: Clinical Policy	Title: Repeat Radiograph Policy	Policy #: 3.11
Department: Center for Education – SOMI	Approved by: Academic Committee	Date last reviewed/revised: 6/25

PURPOSE: To ensure appropriate radiation safety practice for patients and public.

1. In support of professional responsibility for the provision of quality patient care and radiation protection, unsatisfactory radiographs **shall be repeated only in the presence of a qualified radiographer, regardless of the student's level of competency or regardless of the nature of the repeat.**
2. It is the student's responsibility to inform staff radiographers and/or clinical instructors if a radiograph needs to be repeated. Failure to follow the repeat radiograph policy will result in disciplinary action.
3. In order to assure compliance with the direct supervision mandate, all students must complete a repeat radiograph log which will be signed by the supervising radiographer. The log will be maintained in the clinical logbook. A hardcopy of the cumulative log will be submitted to the Program Director at the end of each term. All repeats must be recorded in the log regardless of the student's competency level including practices or assistance with technologists. The student should note the reason for the repeat on the log.

Formed: 1/01

Reviewed: 7/10, 8/12, 5/13, 7/14, 7/15, 7/16, 7/17, 6/18, 6/20, 7/21,, 6/24-6/25

Revised: 6/03; 7/09; 8/12, 7/16, 6/19

6/23

Clinical Competency Policy 3.12a

Section: Clinical Policy	Title: Clinical Competency Policy: Radiography	Policy #: 3.12
Department: Center for Education – SOMI	Approved by: Academic Committee	Date last reviewed/revised: 6/25

1. The foundation of a student's clinical progress is competency based clinical education. Competency based education is a systematic process of assuring that students are competent clinically through a defined sequence of content delivery, practice and evaluation. The ultimate goal of competency based education is to assure that students are prepared for entry level employment as a radiographer upon graduation without compromising patient care or safety or the integrity of the SOMI. The ARRT requires a minimum number of procedural competencies for both primary and post-primary certification. Refer to course syllabi or the ARRT www.arrt.org for specific listings. Sophomore and Junior students will focus on the primary certification requirements. Senior students will document selected post-primary competency requirements.

2. Competency Assessment: student competency can only be assessed by program faculty or staff technologists who have been trained to perform competency evaluations. To be eligible to perform competency evaluations on students, technologists must meet the minimal requirements that the JRCERT has established for clinical instructors, which is at least 2 years of full time clinical experience in radiography and be credentialed in good standing with the ARRT. Competency assessment training will consist of completion of an ASRT approved CE self-study activity, review of this policy and the competency process, and documented use of the competency tool in a simulated setting. Students may obtain the most updated list of competency-trained technologists from their respective clinical coordinators.

3. The competency based education sequence is as follows:

1. Presentation of subject material: Subject material is presented during lecture and lab by the SOMI faculty.
2. Practice and feedback: The student practices a given procedure under simulated conditions with volunteers or mannequins or on actual patients under real conditions with the direct supervision of a qualified radiographer.
3. Testing under simulated conditions: The student must be able to perform a given exam under simulated conditions on a volunteer while being evaluated by laboratory instructors. Simulations will meet the ARRT parameters for simulated competencies.
4. Competency evaluation: The student must be able to perform a given procedure on actual patients under real conditions (or simulated if appropriate) independently while being evaluated by clinical instructors or selected technologists who have been trained to perform competency evaluations. Student progression to this level will vary; however, all

primary certification competency requirements must be met by the spring term of the junior year in order to progress to the advanced (senior) level. Program faculty can revoke a previous “comped exam” if the student is unable to answer appropriate procedural questions regarding the procedure. Refer to clinical course syllabi and the competency evaluation form.

5. Refinement of clinical skills: Once a student has proven competent on a given procedure, the student must refine his/her clinical skills on that procedure by performing the exam on actual patients under indirect supervision.
6. Terminal) evaluation: Junior and Senior radiography students will be given a terminal evaluation under simulated conditions as a final assessment of the student’s skill level during the spring semester. Junior students will be assessed to determine areas of weakness prior to graduation. Given the fact most new hires are in diagnostic radiography, junior students who do not pass the terminal exam, may not be allowed to enter advanced certification tracks during the senior year and may be directed toward the advanced diagnostic radiography track instead. Senior students who do not pass the terminal exam will be required to remediate during the summer intercession before they are considered graduates from the program

Formed: 8/12

Reviewed: 5/13, 7/14, 7/15, 7/16, 7/17, 7/18, 6/19, 6/21,6/22, ,6/24-6/25

Revised: 5/13, 7/15, 7/16, 6/20

Energized Lab Policy 3.14

Section: Clinical Policy	Title: Energized Lab Policy	Policy #: 3.10
Department: Center for Education – SOMI	Approved by: Academic Committee	Date last reviewed/revised: 6/25

PURPOSE: Establish safe educational practice regarding ionizing radiation.

The energized lab is kept locked. A faculty member must unlock the door. Students may use the lab to practice without the tube being energized (it can be moved, but radiation cannot be produced.) The lab may be scheduled for practice only with permission of the appropriate faculty member (teaching the course).

In order to engage the x-ray tube, a faculty member with a key will unlock the control panel.. The faculty will provide direct supervision at all times when the tube is engaged. The door to the hallway must be kept closed at all times.

Students will never image themselves or others. Phantoms will be used for all imaging. All personnel in the lab must stay behind the control panel while images are being performed.

If students elect to simulate ARRT procedural competencies, they must do so on a person of appropriate age and may NOT image them. Simulations are only performed under the direct supervision of a faculty member who will assure that the tube is not engaged.

Formed: 9/20

Reviewed 7/21, 6/24-6/25

Revised: 6/23

Section: Faculty Policies	Title: Credit hour determination	Policy #: SHB 3.15
Department: Center for Education	Approved by: Faculty Organization	Date last reviewed/ revised:

POLICY: Determination of credit hours

PROCEDURE:

1. The SOMI uses the industry-standard Carnegie Unit to define credit hours. Each credit hour corresponds to a **minimum** of 3 hours of student engagement per week for a traditional 14-week course or 6 hours per week for a 7-week course. This time may be spent on discussions, readings and lectures, study and research, and assignments.
2. Clinical courses are based on one clinic credit hour requires at least 45 hours of clinical work per credit hour, plus necessary outside preparation.

Formulated: Prior to 5/2002

Reviewed: 7/21,6/22, , 6/24-6/25

Revised: 6/02, 5/03, 5/04, 5/05, 5/06, 4/08, 3/10, 7/10, 9/12, 6/20

Section: SOMI Policies	Title: Advanced Placement	Policy #: SHB 4.0
Department: Center for Education	Approved by: Faculty Organization	Date last reviewed/ revised: 6/24

POLICY: Advancement placement

PROCEDURE:

The School of Medical Imaging does not do advanced placement in radiography.

Formulated: 7/21

Reviewed: ,6/22, 6/24-6/25

Revised: 6/02, 5/03, 5/04, 5/05, 5/06, 4/08, 3/10, 7/10, 9/12, 6/20,6/25

Section: SOMI Policies	Title: Student compensation	Policy #: SHB 4.1
Department: Center for Education	Approved by: Faculty Organization	Date last reviewed/ revised: 6/24 6/25

POLICY: Student compensation

PROCEDURE:

West Virginia law does not allow student radiographers/~~sonographers~~ to work as professional radiographers/sonographers for monetary compensation. Students who work as technical assistants (TA) for clinical entities may not take the radiographic image. No student can use hours worked as a TA as a substitute for scheduled clinical hours or have any exam performed while as a TA for a competency (radiography) or proficiency (sonography). TAs work under the supervision of the clinical site supervisors and not under the supervision of the School of Medical Imaging. It is the clinical site's responsibility to assure compliance with state law. Students who violate the law may be dismissed from the School of Medical Imaging.

Formulated: 7/21

Reviewed: ,6/22, ,~~6/24~~6/25

Revised:

Section: SOMI Policies	Title: Experiential learning credit	Policy #: SHB 4.2
Department: Center for Education	Approved by: Faculty Organization	Date last reviewed/ revised: 6/24 6/25

POLICY: Experiential learning credit

PROCEDURE: The School of Medical Imaging does not award academic credit for experiential learning.

Formulated: 7/21

Reviewed: ,6/22, ,~~6/24~~6/25

Revised: