

DIVISION OF HEALTH SCIENCES STUDENT HANDBOOK AND POLICY MANUAL

With the Radiologic Technology Program Addendum

Updated May 2026

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SECTION I: INTRODUCTION AND OVERVIEW

The purpose of this handbook is to provide students, the college community, and the general public with essential information about the educational and behavioral performance requirements expected of individuals entering health professions. To ensure safe practice, the Division of Health Sciences (DHS) has developed specific policies and procedures, in addition to those already established by the College, that govern student matriculation in their respective programs. **It is the responsibility of the student to be familiar with and abide by the policies contained in this manual, the College Catalog, and Student Handbook and Planner, which are referenced throughout this document.**

Each student is issued a copy of the Division of Health Sciences Student Handbook and Policy Manual after admission to their respective program. The content is subject to change. Program-specific policy amendments, supplements, and requirements are contained in the program addenda. At the beginning of each course, the faculty member(s) will distribute a course syllabus. Students should refer to the course syllabus for additional policies, including but not limited to attendance, assessment instruments, make-up requirements, and criteria for successful completion.

Admission to one of the programs offered in the Division of Health Sciences is the first step toward entering an exciting, rewarding career. In order to be successful in any Health Sciences program, engagement in the educational process is essential. Becoming a caring, competent health care professional requires a major commitment of time, energy, and focus of one's efforts toward the needs of clients. This selfless dedication is what makes true professionals stand out. The faculty and administration at DHS are dedicated to helping students become professionals and achieve their educational and career goals.

Clinical agencies, hospitals, and facilities providing education to students may have policies and procedures in addition to those in this handbook.

Division of Health Sciences Mission Statement and Overview

Mission

The mission of the Division of Health Sciences is to prepare graduates to provide professionally competent, safe, ethical, compassionate healthcare and become lifelong learners in their field.

Philosophy

Administrators, faculty, and staff within the Division of Health Sciences believe that education is a lifelong endeavor where students are at the center of the learning continuum. Students ultimately become lifelong learners when engaged in teaching and learning environments that help them to achieve their personal and professional goals. We believe that all students have the ability to learn. Students are encouraged to identify their preferred style of learning, determine their strengths, and realize their potential. Students who develop the ability to think critically will be better equipped to learn new skills, acquire knowledge, and understand the attitudes and behaviors required to succeed in their field of study. Therefore, we believe the goal of the educational process is to teach for understanding and expand the view of the learner.

We believe that healthcare education requires a commitment to diversity, leadership, collaborative partnerships, and evidence-based practice. Accordingly, we are committed to a systematic review process to ensure programs maintain the highest standards and are reflective of current practice. All healthcare professional programs represent a blend of theory and reflective clinical practice that embraces cross-cultural beliefs and values.

Graduates from the Division of Health Sciences can respond to healthcare needs within local, national, and global environments. All healthcare professionals have the responsibility to ensure that quality healthcare is provided by engaging in effective leadership and social advocacy initiatives.

Core Values

Aligned with the Core Values of the College, the Division of Health Sciences believes that:

- Quality education in all health programs is based on current standards of practice, use of technology, and application of contemporary pedagogy.
- Students have the potential for success when academic and personal support services are provided throughout the educational process.
- Communication and teamwork are an integral part of the learning and working environment.
- Appreciation of diversity becomes the foundation for understanding and embracing the richness of differences in opinion, ethnicity, culture, and lifestyle.
- Change is embraced by a willingness to accept new ideas.
- Education becomes a pathway that fosters lifelong learning.

Division of Health Science Goals:

1. Prepare students for employment in a specific health career field.
2. Maintain external accreditation/approval of individual health science programs.
3. Establish academic benchmarks that assess student learning.
4. Promote engagement in community service activities.
5. Utilize a systematic evaluation process to maintain the highest current standard of practice.

September 9, 2009; revised October 16, 2009; revised November 13, 2009; revised January 27, 2010, March 24, 2010; revised May 3, 2013

Massachusetts Bay Community College is an affirmative action/equal opportunity employer and does not discriminate on the basis of race, color, national origin, sex, disability, religion, age, veteran status, genetic information, gender identity or sexual orientation in its programs and activities as required by Title IX of the Educational Amendments of 1972, the Americans with Disabilities Act of 1990, Section 504 of the Rehabilitation Act of 1973, Title VII of the Civil Rights Act of 1964, and other applicable statutes and college policies. The College prohibits sexual harassment, including sexual violence. Inquiries or complaints concerning discrimination, harassment, retaliation or sexual violence shall be referred to the College's Affirmative Action and/or Title IX Coordinator, the Massachusetts Commission Against Discrimination, the Equal Employment Opportunities Commission or the United States Department of Education's Office for Civil Rights.

For more information on Title IX, please visit www.massbay.edu/titleix, which includes contact information for the College's Title IX Coordinator.

Division of Health Sciences Program Accrediting Agencies

Associate Degree Nursing
Accreditation Commission for Education in Nursing, Inc. (ACEN)
3390 Peachtree Road NE, Suite 1400
Atlanta, GA 30326
www.acenursing.org
Phone: 404-975-5000

Massachusetts Board of Registration in Nursing (Approved)
250 Washington Street
Boston, MA 02108
www.mass.gov/dph/boards/rn
Phone: 1-800-414-0168 or 617-973-0900

Emergency Medical Technician and Paramedicine
The Massachusetts Department of Public Health
Office of Emergency Medical Services (OEMS)
Bureau of Health Care Safety and Quality
67 Forest Street
Marlborough, MA 01752
http://www.mass.gov/dph/oems
Phone: 617-753-7300

Paramedicine
Committee on Accreditation of Emergency Medical Services Professions
8301 Lakeview Parkway, Suites 111-312
Rowlett, TX 75088
PH: 214-703-8445
FX: 214-703-8992
www.coaemsp.org

Commission on Accreditation of Allied Health Education Programs
9355 113th Street North, #7709
Seminole, FL 33775
www.caahep.org

Practical Nursing
Accreditation Commission for Education in Nursing, Inc. (ACEN) (Initial Accreditation)
3390 Peachtree Road NE, Suite 1400
Atlanta, GA 30326
www.acenursing.org
Phone: 404-975-5000

Massachusetts Board of Registration in Nursing (Approved)
239 Causeway Street, 5th Floor, Suite 500
Boston, MA 02114
www.mass.gov/dph/boards/rn; Phone: 1-800-414-0168 or 617-973-0900

Radiologic Technology
The Joint Review Committee On Education in Radiologic Technology (JRCERT)
20 North Wacker Drive, Suite 2850
Chicago, IL 60606-3182
www.jrcert.org
Phone: 312-704-5300

Surgical Technology
Accreditation Review Council on Education in Surgical Technology and Surgical Assisting (ARC/STSA®)
19751 East Main Street, Suite 339
Parker, CO 80138
www.arcstsa.org
Phone: 303-694-9262

The Commission for Accreditation of Allied Health Education Programs (CAAHEP)
9355 113th Street North, #7709
Seminole, FL 33775
www.caahep.org Phone: 727-210-2350

SECTION II: Division of Health Sciences Policies

Section A: Academic Policies

A.1.0 Attendance

It is important to your academic success that you attend all classes in which you are enrolled and make up any work due to absences. For each course, your instructor will establish policies regarding class, clinical, and/or laboratory absences and make-ups (if any) and will include these policies in the course syllabus. Your course instructor has full and final authority to allow make-up work and/or absences. Frequent tardiness and absenteeism are not tolerated in the health care professions or by the DHS faculty.

As a student in a Health Sciences program at MassBay, you must follow policies that have been developed to meet the requirements of the appropriate accrediting agencies. To ensure your successful completion of the program and accreditation requirements, attendance in all health programs is mandatory for classes, laboratory sessions, and clinical rotations.

If you have clinical clock hour requirements, you should speak with your instructors about class and clinical attendance policies. Absences may be cause for program withdrawal. Students who demonstrate a pattern of tardiness or absence will receive a counseling notice regarding the attendance policy.

A.2.0 Student Progress

Students are advised that it is important to purchase the required textbooks and read all assigned chapters to be successful. Textbooks contain copyrighted material, and photocopying it is illegal.

To be considered in "good standing" within any of the DHS programs, students are required to achieve a minimum grade of 73% (C) in each Health Sciences Program course, except for Associate Degree Nursing (ADN) and Practical Nursing (PN) courses where the passing grade is a 75% (C), and the EMT and Paramedicine courses where the passing course grade is 77 % (C+). In science courses with a BI or CH prefix the passing grade is 73% (C). Students must pass all segments of courses (theory, laboratory, and/or clinical) to be successful in that specific health course.

Students whose grade in theory, clinical, or laboratory courses is below the minimum required at mid-semester will receive a midterm warning, consistent with the College's policy. Students who receive a midterm warning are required to schedule an appointment with the course's faculty member to develop a learning remediation plan.

Students must successfully complete all required prerequisite and co-requisite courses to continue in a Health Sciences program. It is the professional responsibility of each student to ensure adequate preparation for all program, course, lab, practicum, and/or clinical requirements.

Incomplete Grades: Should a student not complete all course requirements within the last two weeks of the semester but provide evidence of making significant progress toward such completion, he or she may submit a written request to the Health Sciences instructor to

receive an incomplete (I) grade. In each case in which an Incomplete is requested, the circumstances must be compelling and beyond the student's control. The Incomplete will not be awarded in cases of neglect on the part of the student, nor will it be given as a substitute for a failing grade. At the instructor's discretion, the "I" grade may or may not be awarded.

Incomplete grades may be given only in the following circumstances:

- The student must be in good academic standing in class, laboratory, and clinical;
- Attendance has been satisfactory;
- Illness, accident, or other extenuating circumstances prevent the completion of required work;
- Documentation has been provided by the faculty;
- Required work may reasonably be completed in an agreed-upon time frame, no later than the beginning of the next semester.

Instruction to Students:
To request an Incomplete grade, complete section I of the "Request form" and submit it, along with forwarding documentation, to your instructor. A copy of this form is included on page 45.

The instructor will specify the terms and conditions for making up the coursework in section II of the request form. Signed forms will be sent to the Dean for approval. The Dean will forward all approved forms to the Registrar for processing.
When the coursework is completed and with the Dean's approval, the instructor will submit a "Change of Grade Form" to the Registrar's Office.

If the "I" grade is granted, conditions for completion of course requirements will be stipulated in a written agreement to be signed by the instructor, the student, and Dean of the Division prior to the start of the next course in the program sequence. Students who do not resolve their incomplete grade will receive an 'F' and will not progress in the program.

A.3.0 Testing Policy

The specific testing policy for courses is found in the syllabus for each course. Any appeal of score/grade on an examination must be submitted in writing to the instructor within one week of the administration of the test. If a student must leave the room during the test, all test materials must be returned by the student to the testing proctor prior to leaving the testing room. Failure to comply with this stipulation may result in a failing grade for the test.

Test Review
Tests or exams may be considered "Secured" and will not be given to the student to keep after the exam is completed. These tests will be kept on file in the appropriate program office. Specific Health Sciences programs have test review policies. If a test review is permitted, it will be monitored by course faculty.

Make-up Exams
Students are expected to be present for all exams. The faculty recognizes that illness and emergencies may occur and, at their discretion, may allow the student to take a make-up test/exam. Students must notify the faculty prior to the exam time and provide reasons and documentation for the absence. The student must contact the primary course instructor on the day he/she returns to request a makeup exam and, if approved, arrange for an exam date. Faculty have the right to ask for documentation verifying the illness or emergency as part of their decision process to allow or deny a retest. A different examination will be administered.

During exams, the following rules apply:

1. All books, purses, tote bags, cell phones and other electronic devices, etc., will be placed in a designated area and remain there during the exam.

2. Dictionaries of any kind may not be used during an examination.

3. The student's name must be recorded on all test materials and Scantron forms as appropriate.

4. If a Scantron form is used, any erasures must be thorough for accurate scanning.

5. If a test review is offered, exam papers must be returned to the faculty afterward.

A.4.0 Performance Notification Process

Students who are not performing satisfactorily in any laboratory or clinical setting will receive a performance notification. The performance notification form is on page 37 of this handbook. The instructor will use the clinical objectives or competencies to identify areas of weakness and determine the remediation needed to ensure compliance with student learning outcomes. Repeated performance notification may lead to a failing grade. Students are expected to complete all learning outcomes by the end of the course. Infractions of the policies, performance codes, or inadequate levels of academic/clinical performance may be communicated to the student through a written warning. A record of such a written warning shall be entered into the student's file.

A.5.0 Student Grievance Procedure

The student grievance procedure is described on page 56 of the current MassBay Community College Student Handbook.

A.6.0 Grade Appeals

The first step in the grade appeal process is to contact the faculty member in writing within 10

calendar days of the last day of the instructional period, stating that you would like a review of your course grades. Grade appeals are to determine if there are any mathematical errors in computing the final course grade.

The student grade appeal process is described in the current MassBay Community College Student Handbook.

Section B: Professional Behavior

B.1.0 Division of Health Sciences Code of Student Conduct: Professional Integrity / Behavior Policy & Affective Domain Standards

The Division of Health Sciences Faculty has identified criteria for professional performance under the standards of the affective domain. Faculty has a legal and ethical obligation to inform students of behaviors that are inconsistent with these standards and to act to ensure that any inconsistency is acknowledged and corrected by the student. Students are responsible for integrating an understanding of professional and ethical standards associated with their discipline in order to meet the criteria identified below. Faculty have the right and the responsibility to apply reasonable professional judgment to determine if a standard has or has not been met.

- *Standard 1 Accountability:* To exhibit a willingness to accept responsibility for their own actions and the consequences of their behavior.
- Standard 2: *Adaptability/Flexibility:* To adapt to new, different, or changing requirements or circumstances positively and constructively.
- Standard 3: *Assertiveness/Effective Communication*: To integrate an understanding of the need to communicate effectively by analyzing priority needs, conveying those needs clearly and directly, and working toward a mutual understanding and participation in an appropriate action.
- Standard 4: *Compassion and Empathy*: To view situations from the perspective of the other person and take appropriate actions to preserve the dignity and worth of others.
- Standard 5: *Diligence and Dependability:* To exhibit a strong work ethic, persistence toward positive outcomes, and consistency in the performance of all duties and responsibilities.
- Standard 6: *Honesty and Integrity*: To exhibit truthfulness and accuracy in all actions, conduct themselves in a fair and ethical manner, and work to continuously uphold the values of the health care profession they are affiliated with.
- Standard 7*: Respect***:** To exhibit esteem and deference to other persons or entities that reflects an awareness and acceptance of diverse cultural and social norms.
- Standard 8: Other Standards Specific to the Division: refer to program addendum for codes of ethics/conduct maintained by the profession

Each program will assess individual students for any or all of those behaviors listed above. If a student does not demonstrate these behaviors at appropriate levels in all domains, it may negatively affect his or her grade and/or ability to complete the program.

B. 2.0 Affective Domain Standards of Performance Violation Policy and Procedure

Should faculty determine that a student's behavior violates one or more of the affective domain standards, an affective domain warning will be issued to the student. Upon discovery of the violation, faculty has up to one week to investigate and issue the warning to the student. In certain instances, the student may be withheld from clinical until the process is carried out and the student completes corrective action. Once a student is notified that they will receive an affective domain warning, the student has 48 hours to meet with the faculty. At the discretion of the faculty or department chair, in certain instances, the student may be withheld from clinical, lab, or lecture until the process is carried out and the student completes corrective action.

The student will meet with faculty and have the opportunity to review a written summary that explains the nature of the violation, any required remedial action, and its implications for the student. A copy of the affective domain will go to the Program Director and will become part of the student's permanent record. Any affective domain violation may impact the student's ability to seek readmission, serve as a student representative, or receive a favorable recommendation for professional or educational purposes.

Recommendation for Dismissal from the Health Sciences program based on Affective Domain violations may occur when a student has received two Affective Domain Warnings and a third Affective Domain Violation occurs.

B.3.0 Cell Phone Policy

In keeping with the "respect" affective domain above (Standard 7), the Division of Health Sciences adheres to the following policy regarding the usage of cell phones during class time:

- Cell phones will be off during all class and lab time.
- Students and instructors will not make or receive cell phone calls during class and lab time.
- Students and instructors will not send or receive text messages during class and lab time.
- Unless required for completing clinical assignments, Cell phones will not be used at clinical in patient-care areas, and students must adhere to the policies of the clinical agency.

In the case of an emergency where it is ***vital*** that the student or instructor keep a cell phone turned on, it should be in vibrate mode, and should be answered outside of the classroom or lab. *It is the student's responsibility to notify the instructor before the start of class that an emergency call is due and that the student's cell phone will be on. It is the instructor's responsibility to notify the students of this situation before the start of class that an emergency call is due and that the instructor's cell phone will be on.*

Use of a cell phone for any purpose during a class or lab other than for an emergency situation as stated above, will result in the student being asked to leave the class or lab for the remainder of class/lab time. The student is responsible for the missing material as well as for making up the

time missed in class/lab. In addition, the student will receive a written warning indicating that the affective domain competency was not met.

B.4.0 Social Media/ Electronic Communication Policy

For the purposes of this policy, social media/electronic communication is defined as the use of email, electronic images, blogs, networking sites, applications, chat rooms, forums, video sites and other platforms. This policy applies to information posted in private or protected sites that can be accessed or shared by other users.

Faculty recognize that the use of social media to communicate has become commonplace. The implications for healthcare providers and healthcare students are serious. The accessibility and efficiency of technology make it easy to post content or images without considering the proprietary, confidential, or professional implications of such behavior.

The DHS holds the health sciences students to the highest standards for the responsible use of social media and electronic communication. Standards have been established that are aligned with the professional and ethical codes of each discipline.

The following behaviors are considered grounds for recommendation for dismissal:

- The use of social media to make disparaging remarks about other students, faculty, staff or patients, the division, individual departments or clinical affiliates/partners and associated individuals and communities- even if nicknames or codes are used and/or identifying information appears to have been removed.

- The posting, distribution or dissemination of patient, student, facility, laboratory or classroom images or associated content (please note: taking pictures, videos or audio recordings in the classroom or clinical agency is strictly prohibited without the permission of all parties involved).

- The posting of any content or images that could in any way compromise the safety, reputation and/or professional image of the Health Sciences Department, staff, faculty or students.

- The posting of any content or images that could in any way compromise the safety, reputation and/or professional image of clinical affiliates, partners, communities or individuals associated with the Division of Health Sciences or its departments.

- Posting inappropriate, suggestive, abusive, violent, potentially threatening, derogatory or discriminatory content in networks, forums or platforms while identifying oneself as a student within the Health Sciences Division. Note: Identification as a Division of Health Sciences student can be established through both statements and images on electronic and

social media sites (e.g., wearing a uniform or posting a college, division, or department logo).

- The use of any electronic communication or applications for the purpose of distributing or disseminating information that could be used to commit acts of academic dishonesty or fraud.

- The use of any electronic communication or applications to share or distribute proprietary academic or facility information, including, but not limited to, policies, procedures, or patient care tools.

Students are encouraged to view the following sites for tips for the responsible use of social media by healthcare professionals. Please note that nothing in these documents negates the policies established by the Division of Health Sciences.

http://www.nursingworld.org/FunctionalMenuCategories/AboutANA/Social-Media/Social-Networking-Principles-Toolkit.aspx

https://www.ncsbn.org/2930.htm

B.5.0 Snow/Weather Emergency Policy

If the College closes due to inclement weather or for any other reason, all classes, clinical, and laboratory classes are canceled. The student handbook and the College website (www.massbay.edu) provide information on the various communication methods used by the College to notify everyone of the College's closure and course cancellations.

Students are expected to attend their regularly scheduled classes, clinical and practicum when the College is open, and no official announcement has been made to close the College or cancel classes.

Students who believe that conditions are unsafe for travel to class or clinical/practicum must call their instructor and the clinical agency to explain why they are not able to attend the regularly scheduled class or clinical/practicum.

If a student and faculty member arrive at a clinical site before the school closing is announced, students and faculty will remain at the clinical site until the closing is announced. Students will be expected to leave the agency as soon as it is feasible to do so after the closing announcement is made. Any student who is in a preceptor clinical experience will be notified of the College closure by each program's Clinical Coordinator and/or Department Chair.

If the closing announcement occurs while students are en route to classes and arrive as the College is closing, students will be expected to return home without attending any classes. Cancellations that occur while classes are in session will require students and faculty to leave the campus as soon as possible after the announcement.

Make-up classes and clinical may occur at the discretion of each specific program within the Division of Health Sciences if the College had to close.

Section C: Recommendation for Dismissal, Appeal of Dismissal, and Readmission Policies

Students enrolled in Health Sciences programs are expected to be familiar with and follow the College's Code of Conduct, Division policies, Program policies, and course syllabi. When a student is found to be in violation of these policies, and after appropriate interventions and warnings have occurred, the student will be recommended for dismissal from their program, subject to due process. The Dean of Health Sciences will notify the student that they have been dismissed via MassBay email and certified mail. This is a dismissal from the Health Sciences program, not a dismissal from the College; however, a violation of the College's Code of Conduct may be grounds for dismissal from the College. The appropriate faculty or department chair will advise the student of the process and next steps, utilizing the Program Dismissal Worksheet, which the student will be asked to sign.

C.1.0 Medical Leave Policy

Students who leave a course mid-semester with verified medical or family illness documentation will be withdrawn from the course but not the restricted health sciences program. Students who are granted medical or family leave will be accommodated in the subsequent offering of that course, after first providing medical documentation approving their participation. Students will have 12 months to be reinstated in the withdrawn course for medical reasons. If additional time is required, the student will be withdrawn from the health science program and, if eligible, provided the readmission process. Students coming back from medical leave will be required to pay tuition for all enrolled courses. Students are only eligible for medical leave during a semester. Medical leaves will not be granted once the course is completed and/or grades have been issued.

C.2.0 Grounds for Recommendation for Immediate Dismissal

Demonstration of any of the following actions or behavior is grounds for recommendation for immediate dismissal, contingent upon the student's right to due process as outlined in the Appeals Process flowsheet in this handbook:

a. When the Affective Domain Warning identifies multiple violations of standards;
b. When the student refuses to accept or implement the corrective actions, and/or
c. When the precipitating behavior or response is egregious (e.g., reckless, threatening, abusive, or illegal). In this case, the Associate Dean of Students, as the College's Code of Conduct Officer, will be consulted.

Students have the right to appeal the program dismissal as outlined in this handbook and described in the Appeal of Dismissal from the Division of Health Sciences Programs policy.

C.3.0 Appeal of Dismissal from Division of Health Sciences Programs

Process of Appeal of Dismissal
A student has the right to appeal a dismissal from a Health Sciences program related to affective domain violations as outlined in the Division of Health Sciences Student Handbook, the appropriate program addendum, and/or the course syllabus, should the student believe they were wrongly dismissed.
Students must follow the appropriate appeals process listed below. Students may attend classes and laboratory sessions, but not clinical rotations, during the appeals process, if permitted by the Program Director.

The following four-step process outlines the appeal process for dismissal from a Division of Health Sciences program.

Step 1
Within five calendar days from the date of the recommendation for dismissal from the program, the student must submit, in writing, reason(s) why he or she believes the decision was wrong, reason(s) why the student should be reinstated, and any additional information or documentation that would support the appeal to the Dean of Health Sciences.

Step 2
The program/faculty will provide the Dean of Health Sciences with student records related to the student's initial recommendation for dismissal from the program within five calendar days.

Step 3
The Dean of Health Sciences will convene the Appeals Committee of three voting faculty members to review and judge the merits of the student's appeal. The committee members will be Health Sciences' faculty outside the student's program, a representative from outside the Division of Health Sciences, and the Dean of Health Sciences. Depending on the nature of the appeal, other individuals may be consulted as necessary. If the reason for dismissal involves a College Code of Conduct violation, the Associate Dean of Students/Code of Conduct Officer will be consulted. The Dean of Health Sciences will provide the Appeals Committee with all documentation submitted by the student and the program/faculty. The student does not appear in this meeting in person. The Appeals Committee will either overturn or uphold the recommendation for dismissal.

Step 4
The Dean of Health Sciences will send a written communication of the decision to the student. Decisions made by the Appeals Committee are final.

Appeal of Dismissal and Grade Appeal Processes Flowchart

During the processes described below, the student:

- May enroll and attend lecture and laboratory sections with Program Director permission.
- May NOT attend clinical courses.
- Is subject to all costs associated with course enrollment and Add/Drop policies.

Grade Appeal

Student must initiate College Grievance Policy at Level 1 - Informal Procedure (College Handbook) within 10 calendar days of the end of the instructional period.

Faculty responds to student appeal within 10 calendar days.

Student may decide to pursue College Grievance Policy at the Level 2 - Formal Procedure if the student is unsatisfied with the Faculty response or if the Faculty fails to respond within 10 calendar days.

If the appeal is resolved in the student's favor, the Program will attempt to return the student to clinical activites based on the curriculum, availability, and other factors.*

Appeal of Recommendation for Immediate Dismissal OR Affective Domain Violation(s) Dismissal

Within **5** calendar days of notification of dismissal, student must submit, in writing, why he/she/they believe the decision was wrong, why he/she/they should be reinstated, and any additional information or documentation to support their appeal to the Dean of Health Sciences.

Within 5 calendar days of the student submitting documentation, the Faculty provides the Dean of Health Sciences with student records related to the recomendaton for dismissal from the program.

The Dean of Health Sciences will convene an Appeals Committee (Step 3 above) and will provide all documentation submitted by the student and program/faculty. The Dean will participate in a non-voting capacity. The Appeals Committee will either overturn or uphold the recommendation for dismissal.

The Dean of Health Sciences will send a written communication of the decision to the student. Decisions made by the Appeals Committee are final.

If the appeal is resolved in the student's favor, the Program will attempt to return the student to clinical activites based on the curriculum, availability, and other factors.*

*Each Program within the Division of Health Sciences has specific procedures and policies concerning the return of the student to clinical activities based on the program curriculum.

C.4.0 Readmission Policy

Students who have been dismissed or who have withdrawn from any program within the Division of Health Sciences at MassBay Community College will be considered only once for readmission to the same program. Students who have not been successful in one health sciences program can apply for admission to a different health program if they have an overall College GPA of 2.0 or better. Students who have been dismissed or withdrawn from a program for reasons of "clinically unsafe practice/behavior" as defined in the DHS Student Handbook and Policy Manual (**see E.14.0)** or who violate the College's Student Code of Conduct are not eligible for admission/ readmission to any DHS program. **See program addenda for specific requirements for admission/readmission.**

Application for readmission must be made within 12 months of withdrawal or dismissal from the original program. Readmission application deadlines are February 1 for the fall semester and June 1 for the spring semester. Qualified candidates will be selected from a readmission pool and based on the seat availability for that course and/or program.

Based on specific course/program requirements and accreditation standards, students may be required to retake courses, take competency exams, or undergo skill testing prior to readmission, even if courses have been completed successfully. Should the student not attain a passing grade on skill or competency testing, they will be required to retake the course(s) in their entirety.

Section D: Health and Immunization Requirements

Complete immunization and other required documentation are necessary for participation in a Health Sciences program. All immunization and CPR documentation is managed by Viewpoint, a secure, web-based platform. Students will receive instructions on creating a personal profile, called a "Viewpoint Account," and on uploading their immunization and CPR documentation. Viewpoint will send the student email "alerts" when documentation is missing, incomplete, or needs updating. The Division of Health Sciences faculty will refer to Viewpoint account data to determine whether a student is cleared for clinical. The following items are required by your selected program's due date or within 30 days of the first day of the semester* (see *Division of Health Sciences Program Grid* on page 49). **Failure to submit all the forms below on time and in the proper format will jeopardize the student's place in his/her program. Jeopardize means the student will not be allowed to start the program or will have to withdraw if they have started the program and documents are found not to meet submittal or compliance requirements.**

Immunizations:

Hepatitis B -
You must allow a minimum of 6 months to complete the series. For students in Associate Degree Nursing, Central Processing Technology, Medical Assistant, Paramedicine, Phlebotomy, Practical Nursing, Radiologic Technology, and Surgical Technology programs, a positive Antibody Titer is required. This may be submitted along with the vaccine or alone. Documentation of the Antibody titer must include numerical results and an indication of 'positive' or 'reactive' status, and must be on the MassBay medical form, a laboratory report, or a physician's verification of results. If the titer is negative or equivocal, new alerts will be created for you to repeat the vaccine series and antibody titer. Individuals who document negative or non-reactive antibody titers following two vaccine series are considered 'non-responders' and must provide a letter from their healthcare provider. Students in the EMT program are required to submit the three doses of the Hepatitis B Vaccine OR a positive antibody titer (lab report or physician verification of results required).

Tuberculosis Testing –
2-Step TB/PPD Skin Test or Chest X-Ray or QuantiFERON-TB or T-Spot - An initial 2-Step TB screening, QuantiFERON or T-Spot blood test, or negative Chest X-Ray is due by the published deadline for your program. This process for the 2-Step TB must be followed:

Step I: PPD (Purified Protein Derivative) "implant" is injected into the forearm. In 2 - 3 days, this implant must then be "read" as negative and documented by a clinician.

Step II: Within 3 weeks of completing Step I, students are required to return to the clinician's office for a second "implant." Again, the student is required to return in 2 - 3 days to have this implant read and documented as negative by the provider.

Once students have completed Steps I and II, only a single TB implant is required annually and must be updated each year to remain in compliance with medical requirements.
If you have a positive TB/PPD result, submit documentation of a clear (negative) Chest X-ray.
A negative symptom review check by a health care provider is required annually thereafter.

Tetanus & Diphtheria (Td) or Tetanus/Diphtheria/acellular Pertussis (Tdap) - Documentation of one dose of Tdap at or after 7 years of age. If it has been more than 10 years since the Tdap was given, a Td booster is required.

Measles, Mumps, Rubella (MMR) 2-Dose Vaccine or Titers* - There must be documentation of either a positive antibody titer for all 3 components OR documentation of each vaccination. If the titer is negative or equivocal, 2 booster shots are required.

Varicella 2-Dose Vaccine or Titer* - There must be documentation of either a positive Varicella antibody titer OR vaccination. If the titer is negative or equivocal, 2 booster shots are required.

Seasonal Influenza Vaccine (when available) – Submit documentation of a flu shot administered in August prior to the upcoming flu season OR a declination waiver. Students who cannot be immunized for the flu may be required to wear a mask in clinical settings.

COVID-19 Bivalent Vaccine Dose – Submit documentation of a Bivalent Booster dose (after September 2022. Associate Degree Nursing and Practical Nursing students may submit documentation of a medical exemption provided by a healthcare provider. Students in other programs may submit a declination form or a medical exemption. These forms are available for download on the students' Viewpoint accounts.

Report of Physical Examination & Immunization Record - This requires the student's physician to fill in confirmation of immunizations you've received and your physical exam results within the past year.

** Titers are laboratory blood tests to determine immunity to specific diseases. They are not immunizations.*

Some clinical facilities may require additional information and/or screenings prior to clinical placement. Examples include submission of social security number; Fingerprinting; Drug-testing; CORI checks; CNA Registry Check, COVID-19 Vaccine and additional immunizations.

Meningococcal Vaccine (for full-time students who are 21 years old or younger) – 1 dose MenACWY (formerly MCV4) received on or after the student's 16th birthday. Doses received at younger ages do not count towards this requirement. Students may decline MenACWY vaccine after they have read and signed the MDPH Meningococcal Information and Waiver Form.

Additional Notes: Students who have previously taken the required MMR, Varicella, and Hepatitis B vaccines discussed above but who are unable to produce acceptable documentation must have titers drawn. Students who refuse to be vaccinated due to religious or medical reasons may be in jeopardy of losing their seat in the respective program, as most clinical agencies will not allow unvaccinated students to participate in direct patient care. Some clinical facilities where students will be assigned may require additional information and/or screenings prior to clinical placement.

Other Related Requirements:

CPR Certification – The CPR certifications acceptable for health students include "BLS Provider" from the American Heart Association (AHA), the American Red Cross, or the equivalent from the American Military Training Network. The copy must be front & back of the card, and it must be signed. An eCard from the AHA is also acceptable.

Technical Standards - Students must meet certain physical demands of performance so that they can successfully progress in their coursework and ultimately graduate. This form is completed and signed by the student.

Consent to Release Form – Student signature on this form permits the College to release personal information to clinical sites when requested to do so, such as vaccine records, Social Security Number, date of birth, and e-mail address.

National Background Check – A national county records search is also conducted through their Viewpoint account.

CORI and SORI forms –The student must complete the CORI (Criminal Offender Record Information) form to authorize a search of conviction and pending criminal case information under Standard Required Level I by the DCJIS (Department of Criminal Justice Information Services). As required, the student must provide the last six digits of their social security number on the CORI form and present a valid government-issued ID (such as a license or passport) to verifying staff. The student must also complete the SORI (Sex Offender Registry Information) form. The CORI and SORI completion process will occur prior to the beginning of clinical/practicum experiences. If a student is late or is absent the day the CORI/SORI check is completed, it is his/her responsibility to complete CORI and SORI request forms at the Division of Health Sciences Administrative Office. The Division of Health Sciences may conduct subsequent CORI checks within one year of the date the form was signed by the student. The Division of Health Sciences will first provide the student of written notice of the check. The student may also be required to complete subsequent CORI and SORI request forms according to clinical facility requirements. If a CORI and/or SORI Report is returned with a finding(s), it may or may not prohibit progression in a Health Sciences Program. CORI and/or SORI findings will be forwarded to a college-wide Review Committee, and the student will be invited to the review session. The final decision regarding the student's progression in a Health Sciences program will be determined at that time.

**30-Day Grace Period: Massachusetts Law states that students subject to 105 CMR 220.600 (Immunization Requirements for Post-Secondary Students) may have a 30-day grace period after enrolling before all required immunization records must be submitted. Upon entering a Health Sciences program, students may also have a 30-day grace period from the start of the semester before being subject to withdrawal from their program provided if this does not interfere with the start of a required clinical rotation. If a program's clinical rotation starts sooner than 30 days, students in that clinical course must comply with the Division of Health Sciences' published deadlines in order to meet the standards of the clinical sites and begin their rotation on time. If the student does not have all records submitted and in the proper format by published deadlines or by the end of the 30-day grace period, whichever applies, he or she may be withdrawn from the program.*

Section E: Clinical/Practicum Policies

Introduction & Definitions

The purpose of this section is to present those policies and procedures that are most relevant to the clinical/practicum component of the programs**. The information contained in this handbook is subject to revision. Students will be given written notice of any amendments or revisions.**

The policies and practices are in addition to those stipulated in official College publications, the didactic policies portion of this handbook, and specific program course syllabi. **It is the policy of the College to reserve the right to add, withdraw, or revise any provision or requirement.**

To promote understanding of the scope of this handbook, the terms clinical, clinical fieldwork, clinical affiliations, and clinical rotations are used interchangeably and refer to the required clinical experiences of each of the programs.

Terms used for the various individuals involved with clinical education in the Health Programs include:

- **Clinical Instructor:** This term refers to any person recognized by the program as having the responsibility to supervise and assess the performance of any student while on clinical. This term is used interchangeably with **Clinical Supervisor, Clinical Faculty, Faculty and/or Clinical Preceptor.** Either the college or the clinical site may employ the individual with this title, depending on the program.

- **Clinical Coordinator (CC):** This term refers to the college faculty member responsible for securing and/or assigning clinical placements, and for assessing the student's clinical performance. Other terms used to describe this individual include **Academic Fieldwork Coordinator (AFC), and Clinical Coordinator (CC)**. For the ADN and PN programs, the CC is the Program Chair.

- **Center Coordinator for Clinical Education (CCCE):** This term refers to the person employed by the clinical site whose responsibility is to coordinate and supervise the clinical program at each site. Other terms used to describe this individual include **Clinical Site Supervisor (CSS) and/or Clinical Instructor (CI).**

- **Preceptor:** This term refers to the person on staff at a clinical facility who supervises and instructs students in clinical experiences.

Individual clinical sites may use different titles for those serving in the positions listed above within their institutions. Refer to the program appendices for this information.

The clinical experience(s) is integrated within the overall program requirements. It provides practical experiences that augment laboratory and classroom learning and facilitates the transition from student to health care practitioner.

E.1.0 Professionalism

The student will adhere to all accepted standards, policies, procedures, rules, and regulations of the College, DHS, the program, the clinical site, and his/her profession's code of conduct. The student's performance and behavior must be safe and appropriate at all times. **Refer to the Professionalism and Affective Domain Standards and the program appendices for professional codes of conduct specific to each program/profession.**

E.2.0 Confidentiality

Of equal importance to the confidentiality of student records is the unequivocal requirement to preserve the confidentiality of any and all patient/client medical information. It is the moral, ethical, and legal responsibility of health professionals and DHS students to ensure that any and all medical-related information is held in confidence. Client information should only be shared with appropriate clinical personnel within the context of that personnel's need to know for the delivery of quality care. Students are required to adhere to all such policies while in the clinical environment. All students will receive from the College patient privacy training (HIPAA) prior to clinical.

E.3.0 Health Status

It is the student's responsibility to ensure that completed physical exam and immunization records are submitted to and approved by Viewpoint. (See Section D. Health and Immunization Requirements.) Failure to submit this information and other required documentation could affect clinical placement and the ability to complete a Health Sciences program. Health forms are available from the Division of Health Sciences.

Should the student's health status change in a manner that would restrict clinical participation after he/she has health clearance and has matriculated in a DHS program, he/she MUST immediately notify the Department Chair. The student must also submit to the CC a note from his/her primary care provider indicating the nature of the restriction and the date at which the restriction(s) must be imposed. To re-enter the clinical environment, the student must submit a note from his/her primary care provider to the CC affirming the removal of restrictions and the date at which the student can resume unrestricted participation in clinical activities. If a student is unable to resume his/her participation in the program, he/she should refer to the Division of Health Sciences' Medical Leave Policy (Section C.1).

E.4.0 Communicable Disease Statement

Students have an ethical and legal responsibility to maintain a high standard of health. When providing care, the student should routinely and without discrimination take all precautions against exposure and transmission of communicable diseases consistent with the policies and procedures of the clinical site. The DHS student who has a communicable disease must inform the CC and the appropriate clinical instructor. Should there be any questions as to potential restrictions or precautions relating to clinical participation, the student may be required to seek medical advice and documentation from his/her primary care provider.

E.5.0 Emergency Care

The College's contractual agreement with clinical agencies states that emergency care will be provided by the clinical facility if that facility maintains an emergency room. Furthermore, the

agreement stipulates that the student will assume the cost of such emergency care. Therefore, students should refer to their health insurance policy for coverage in the event of an emergency in the clinical area.

E.6.0 Latex Sensitivity & Allergy Policy

Latex products are common in the medical environment. Allergic responses to latex can range from irritation and allergic contact dermatitis to the possibility of life-threatening anaphylactic shock. Guidelines have been established at MassBay Community College to provide information to potential allied health and nursing program applicants/students who are sensitive to latex.

Latex-free environments are seldom available in either clinical or academic settings. Therefore, an individual with a latex allergy/sensitivity wearing alternative vinyl or nitrile gloves is still exposed to latex residue of others working in the area or to latex present in the equipment, models, and mannequins. Although latex gloves are the most prominent source of latex allergen, many other products contain latex, including, but not limited to:

- Blood pressure cuffs, medication vials, syringe connectors, and wound drains;
- Stethoscopes, catheters, respirators, and goggles;
- Oral and nasal airways, surgical masks, and electrode pads;
- Endotracheal tubes, syringes, IV tubing, and tourniquets.

Any student who has or develops symptoms consistent with latex allergy/sensitivity is advised to consult a qualified allergist for evaluation prior to enrollment in the Division of Health Sciences. If a student is already admitted to a Health Sciences program, he/she must consult a qualified allergist for evaluation of latex allergies should signs and symptoms develop. All such evaluations are at the student's expense. If it is determined that a student suffers from a latex sensitivity/allergy and the student desires an academic adjustment, including auxiliary aids or service, or reasonable accommodation due to this condition, the student must contact the College's Office of Accessibility Resources.

As with all matters related to one's health, the utmost precautions should be taken by the student to reduce the risk of exposure and allergic reactions. This may include the carrying of an epi-pen by the individual or other precautions as advised by the student's health care provider. It is the responsibility of the student with a latex sensitivity to understand and acknowledge the risks associated with continued exposure to latex during a clinical education, fieldwork, and healthcare career, even when a reasonable accommodation is made, and to regularly consult with his/her health care provider.

In an effort to minimize the presence of latex in the Division lab facilities, MassBay Community College will provide latex-free and powder-free gloves in all College lab facilities. Should a clinical agency NOT provide latex-free gloves, the College will provide latex-free gloves for clinical use. Additionally, the College is taking the following steps to minimize latex in its lab facilities: *1) replacement of all gloves in use by faculty and students with nitrile or vinyl gloves; 2) maintaining an inventory of products/equipment and supplies in each health science program that contain or could contain latex; and 3) future purchasing of latex-safe supplies and equipment whenever possible.*

As with all students in the Division of Health Sciences programs, a student with a latex sensitivity or allergy is required to satisfactorily complete all requirements and technical standards of the program to which they have been accepted.

E.7.0 Blood and Body Fluid Exposure Policy and Procedure

Occupational Exposure Guidelines

According to the Centers for Disease Control and Prevention, the primary means of preventing occupational exposure to HIV and other blood-borne pathogens is the strict adherence to infection control standards, with the assumption that the blood and other body fluids of all individuals are potentially infectious. The routine utilization of barrier precautions when anticipated contact with blood or body fluids, immediate washing of hands or other skin surfaces after contact with blood or body fluids, and careful handling/disposing of contaminated sharp instruments or other equipment during and after use is recommended.
For more information: https://stacks.cdc.gov/view/cdc/20711

Faculty & Student Responsibilities

1. Receive agency/unit orientation regarding infection control policy and post-exposure management procedures.
2. Utilize appropriate barrier precautions during the administration of care to all individuals.
3. Utilize appropriate safety devices for the handling/disposing of contaminated sharp instruments or other equipment.
4. Immediately report accidental exposure to blood or body fluids.
5. Initiate immediate intervention of the management of accidental exposure to blood or body fluids.
6. Provide health education to individuals and groups regarding the prevention, transmission and treatment of HIV.

Accidental/Occupational Exposure Procedure

In the event of an accidental/occupational exposure to blood or body fluids, students and faculty should:

1. **Immediately** wash the area of exposure with soap and water.
2. **Immediately** report the incident to the instructor and/or supervisory personnel.
3. Complete appropriate documentation according to agency standards and provide a copy of the report to the Division of Health Sciences department chair. Another copy will be kept in the student's file.
4. Complete the Division of Health Sciences' Incident Report. This form is included as an appendix in this handbook; this **must be completed within 24 hours of the incident.**

PLEASE NOTE:

1. Decisions regarding post-exposure management, prophylaxis, and follow-up will be at the discretion of the individual and his/her health care provider.

2. The injured party will be financially responsible for emergency treatment, prophylaxis, and follow-up care resulting from the incident.

E 8.0 Accommodation for Disability Conditions

DHS students who request an accommodation in lecture, lab, or clinical due to a documented disability must inform the College Office of Accessibility Resources. The Office of Accessibility Resources, the Department Chair, and the Academic Coordinator of Clinical Education will determine if the accommodation is appropriate and reasonable. This means that the accommodation does not compromise either the essential duties/student teaching responsibilities at the clinical/practicum site or the requirements of the program's competency-based educational equivalents. (See Technical Performance Standards description and form in the Health and Immunization Requirements section of this Handbook.)

E 9.0 Clinical Sequence and Placement

E.9.1 The Clinical Coordinator or Program Chair determines the clinical placement of students. The primary consideration in arranging clinical placements is the academic integrity and value of the educational experience. A student shall not be placed at a site if he/she or an immediate relative volunteers or works in a department or unit within that site that is similar to his/her chosen field of study. When possible, advance notice will be given so that the student may make appropriate arrangements and clinical practicum sites may prepare for the student.

E.9.2 Contacting and arranging clinical affiliate placements is the purview of the Program Chair and/or Clinical Coordinator. Students **shall not** contact a present or prospective clinical site without obtaining prior approval from the Clinical Coordinator or Department Chair.

E.10.0 Transportation, Housing, and Parking Fees

The student is responsible for transportation to and from the clinical/student teaching sites as well as any parking fees. For programs with out-of-state clinical/student teaching sites, students are responsible for the cost of housing, transportation, meals, and other expenses unless otherwise provided.

E.11.0 Professional Appearance - Dress Code

While each program may have specific uniform requirements, all programs have the following expectations. The student must at all times:

E.11.1. appear neat, clean, and well-groomed.

E.11.2. maintain good personal hygiene.

E.11.3. adopt a conservative approach to dressing, minimizing jewelry and cosmetic/ fragrances, not wearing clogs, open-toed shoes or sandals, nor extremely loose-fitting or tight clothing.

E.11.4 wear MassBay student identification pin with name and his/her program of study.

E.11.5 remove personal pagers and/or cell phones before entering the clinical site.

E.11.6 limit body piercings to small, post-type earrings. Only one earring in each ear is permitted. No other body piercing jewelry is permitted in clinical and laboratory settings.

E.11.7 cover visible tattoos upon request in the clinical setting.

E.11.8 keep fingernails short and clean. Clear nail polish may be worn. Artificial fingernails are not permitted.

Refer to individual program appendices for specific requirements.

E.12.0 Attendance

Attendance during the clinical affiliation is mandatory. Students are expected to report promptly, consistent with the schedule of the site and clinical faculty. It is unacceptable to schedule personal appointments during clinical hours. Tardiness and early departures are also unacceptable. If a student for any reason misses more than one-quarter of the scheduled clinical/student teaching day, he/she will be considered absent for the whole day.

E.12.1 Should illness or any other reason prevent the student from reporting to the clinical facility on time, the student must notify his/her clinical instructor, Clinical Coordinator, or appropriate College office at least 30 minutes before the scheduled start of the clinical day. Failure to notify either the clinical instructor or College of an absence is a serious breach of professional conduct.

E.12.2 If a student is ill and in danger of exceeding the attendance policy of his/her program, a note from his/her health care provider must be submitted to the Clinical Instructor at the affiliate and to the Clinical Coordinator at the college. The student will not be permitted to resume the clinical experience without a note from the health care provider stating that the student is capable of resuming (without restriction) all activities associated with the clinical education component of the program.

E.12.3 Any clinical skill acquisition or experiences missed due to absence, tardiness, or early departure must be made up at the discretion of the clinical instructor and approved by the CCCE and Clinical Coordinator. The determination as to which alternative assignments and locations may be required to make up missed days/hours and/or substitute for any missed clinical skill acquisition or experiences will be made at the discretion of the clinical affiliate, Clinical Coordinator, CI, and/or the Department. Chair at the College.

Refer to the appendices for individual program policies and/or syllabi.

E.13.0 Evaluation of Clinical Performance

Each program develops instruments and assessments used to evaluate student clinical performance. Refer to the appendices for the clinical grading policies for the respective program. The CC /CI/Department Chair will issue grades consistent with the policy contained in the College catalog and course syllabus. In most programs, clinical experiences are graded pass/fail. Grades: Clinical grades below the program's specific minimum will result in withdrawal from the program. Refer to the minimum grade information in section A2. Students who are having difficulty meeting the established learning objectives of the clinical experience are encouraged to seek prompt advice and/or assistance from the CCCE, CC, and /or the clinical instructor/faculty to develop a learning plan to address concerns.

E.13.1 Unsatisfactory clinical performance is defined as performance within the clinical environment that demonstrates:

E.13.1.1 consistent pattern of weakness in one or more clinical behaviors/skills objectives

E.13.1.2 failure to demonstrate progressive mastery of clinical behaviors and objectives

E.13.1.3 performance requiring more guidance and instruction than that required by other students at the same level.

If a student does not comply with the academic, professional, or clinical standards listed in this policy manual or the MassBay Student Handbook, a DHS administrator or faculty member will issue a written warning. The student must sign the warning. NOTE: **Signature on the warning** does not constitute the student's agreement with the content of the warning. Space is provided for the student to indicate his or her non-agreement and comments. The original signed copy of the written warning will be placed in the student's record, and a copy will be given to the respective program chair. Should the student refuse to sign the form, the faculty will obtain a witness signature attesting that the notice was given to the student.

E.14.0 <u>Clinically Unsafe Behavior</u>

The following are examples of clinically unsafe behavior**:**

E.14.1 Any incident in which the student's action has or may seriously jeopardize patient care and/or safety. Examples of such actions include, but are not limited to:

E.14.1.1 errors of omission/commission in patient care;

E.14.1.2 any pertinent intervention which places another in danger;

E.14.1.3 failure to report changes in patient status promptly;

E.14.1.4 acting outside of the legal and ethical role of the student as defined by professional standards;

E.14.1.5 abusive behavior;

E.14.1.6 not being accurate regarding any personal conditions that may jeopardize patient care or about the student's own learning needs;

E.14.1.7 repeated and/or consistently unsatisfactory clinical performance which compromises quality of care when the student also demonstrates one or more of the following:

E.14.1.7.1 multiple failed assignments, lab assessment scores or didactic average that falls below the acceptable standard set in the course syllabus.

When a faculty member determines that a student has been clinically unsafe,

1. the student will be immediately removed from clinical and lab settings.
2. the student will be notified immediately that they have been given an unsafe clinical grade and will not be permitted to return to clinical or lab. If the student is in another health course with a clinical component, the student will not be allowed to attend the clinical or lab unless the faculty member and department chair determine that patient safety is not at risk. Written notice by the faculty member will be given to the student, documenting the reasons for the clinically unsafe determination.
3. The faculty will notify the department chair and the appropriate academic

administrator that a failing grade has been issued.

The grade submitted for the course where the unsafe clinical practice occurred will be an F. Any student who receives an F due to unsafe clinical practice will not be eligible for re-admittance to a health program. The student may appeal the unsafe clinical grade by following the Grade Appeal Process described in the MassBay Student Handbook.

E.15.0 Drug Screening Policy

Massachusetts Bay Community College is committed to the promotion of the health and safety of patients, students, faculty, and staff, and our community members, including those with physical, psychiatric, or substance abuse concerns. Policies and procedures are established with this commitment in mind. To ensure that patient care is not compromised, facilities and agencies engaged in patient care have begun to require mandatory drug testing of all their employees and any affiliating groups.

Accordingly, students enrolled in Health Sciences programs may be required to provide proof of a negative ten-panel urine drug screening in order to be eligible for clinical placement if required by the clinical site where the student is assigned. Drug screening will be random at the discretion of the Program. Drug screening must be done through the student's Viewpoint Account before the start of a clinical rotation. Viewpoint will provide step-by-step instructions on how to obtain a drug screening at a local testing facility. Students taking prescription or over-the-counter medications will have the opportunity to provide a list of medications to Viewpoint. All costs associated with drug testing are the responsibility of the student.

Drug-screening results will be sent to the Dean of Health Sciences in a confidential manner. Students who do not pass the drug screening test the first time have the right to request a second drug screening prior to their clinical rotation. If the second drug test is negative, the student will be placed in a clinical rotation. If the second test is positive, the student will be ineligible for clinical placement and recommended for withdrawal from their health program, contingent on due process. Students who fail to comply with any aspect of the drug-screening requirement or who receive positive results will be ineligible for clinical placement and subject to dismissal from the Health Sciences program in which they are enrolled.

Health Sciences clinical affiliating agencies may also have policies on random or scheduled on-site drug screening of students. Students must comply with all clinical facility policies. A positive drug test result from the clinical site will result in the student's immediate removal from clinical and recommendation for dismissal from the Health Sciences program. In the event a faculty member has a reasonable belief that a student is under the influence of alcohol or drugs, the faculty member will immediately remove the student from the clinical setting and follow the College's policy on Alcohol and Drug Use. The student will be sent to the Emergency Department for further evaluation and drug/alcohol testing if necessary. A student under the influence of alcohol or drugs in a clinical setting shall be subject to discipline, up to and including expulsion from the College, in accordance with the College's Alcohol and Drug Use Institutional policy.

Any student who is withdrawn from the Division of Health Sciences due to a positive drug test may appeal this decision through the Division's Appeal Process. Please see the Appeal Procedure in the Division of Health Sciences Handbook. Any student who is withdrawn from the

Division of Health Sciences program due to a positive drug test may reapply based on current College and Division of Health Sciences readmission policies.
All students will be notified, in writing, of the requirement for drug screening when enrolling in a program that requires such screening. This form can be found in Section III.
While the recreational use of marijuana is permitted in Massachusetts, marijuana remains classified as a controlled substance under federal law, and its use, possession, distribution, and/or cultivation at educational institutions remains prohibited. Accordingly, students who test positive for marijuana are unable to participate in clinical education, which will affect their status in the program. A student who has a prescription for medical marijuana and seeks to use medical marijuana off-campus during semesters where they have clinical rotations shall contact the College's Accessibility Resources Office. Accessibility Resources will consider the student's request as a request for reasonable accommodation and will engage in an interactive dialogue with the student to determine an effective and reasonable accommodation for their disability. Accessibility Resources will, among other things, request medical documentation to confirm the disability, including the student's Medical Marijuana Card. Use of medical marijuana off-campus during the clinical education shall not be considered a reasonable accommodation if its continued use would impair the student's clinical performance, pose an unacceptably significant safety risk to the public, or violate the College's affiliation agreements with its hospital partners, thereby jeopardizing those affiliations.

Steps

1. Each student enrolled in a program that requires drug screening will be notified of the requirement to report for drug screening to the testing agency. Students will be given 48 hours to complete the drug screening requirement. Students will contact the specified testing agency to schedule an appointment within the specified time period.

2. Students must follow the instructions given by Viewpoint to comply with the screening protocol. Failure to participate in the drug screening process or comply with the protocol will result in the student's inability to participate in the clinical education and, consequently, will result in the student's dismissal from the program.

3. Viewpoint will provide results to the Dean of Health Sciences at Massachusetts Bay Community College. Results can only be accepted directly from Viewpoint. The Dean of Health Sciences will provide the applicable department chair or program coordinator with a list of those students who have completed their drug screening and are eligible to participate in clinical or field education.

4. Students whose results fail to satisfy the screening criteria will not be eligible to participate in the clinical education and consequently will be dismissed from the program unless the disqualifying factor can be satisfactorily remedied.

5. Students with a positive drug test may challenge the results of the test within five (5) days of notification of the drug test results. This challenge must be in writing and delivered to the Dean of Health Sciences.

Section III: Division of Health Sciences Forms

Division of Health Sciences Technical Standards Form

It is necessary for all Division of Health Sciences students to review and sign the following. **Please circle your program from the list below,** then sign and return as directed.

ADN	Associate Degree Nursing	PB	Phlebotomy
CY	Central Processing Technology	PM	Paramedicine
DMS	Diagnostic Medical Sonography	PN	Practical Nursing
EMT	Emergency Medical Technician	RT	Radiologic Technology
MA	Medical Assistant	ST	Surgical Technology

TECHNICAL PERFORMANCE STANDARDS		ADN	PN	PB	PM/ EMT	RT/DMS	ST/ CY
MUSCULAR And SKELETAL	Work at areas located at various positions and elevation levels for durations of at least 30 minutes at a time alternating with the need to make frequent changes in body positions	X	X	X		X	
	Maintain a standing body position for a minimum of two hours, while performing work related functions	X	X	X			X
	Transfer and position movement dependent patients from / to various positions and surfaces, such transfer / positioning frequently requiring a minimum of a 50 lb. weight bearing load	X	X	X	X	X	X
	Move / push / pull / reach equipment and accessories of various weights and sizes from a variety of heights to a variety of heights	X	X	X	X	X	X
	Perform CPR on adults, infants, and toddlers	X	X	X	X	X	X
	Detect and distinguish between variations in human pulse, muscle spasm & contractions, and / or bony landmarks	X	X	X	X	X	
	Safely guide patient in ambulation on level as well as inclined surfaces and stairs, often while the patient is using a variety of assistive devices. In either case, guard patient against falls or other injury	X	X	X		X	
	Apply gradated manual resistance to patient's individual muscular actions in order to determine patient's strength or to apply exercise techniques for stretching or strengthening	X	X	X			
	Quickly move from one site to all other areas of the health care facility	X	X	X	X	X	
AUDITORY	Detect and appropriately respond to verbally generated directions and acoustically generated monitor signals, call bells, and vital sign instrumentation output	X	X	X	X	X	X
VISUAL	Detect and discriminate between various human gestures and non-verbal responses	X	X	X	X	X	X
	Detect and discriminate between large and small gradations in readings on dials, graphs, and displays, such detection made at various distances from the source.	X	X	X	X	X	X
	Read printed and computer screen manuscript text	X	X	X	X	X	X
	Discern a patient's physical status at distances in excess of 10 feet and in subdued lighting	X	X	X	X	X	
	Detect and discriminate between the range of image brightness values present on radiographic and computer screen images					X	
	Manipulate/adjust various types of switches, levers, dials,	X	X	X	X	X	X

MANUAL DEXTERITY & FINE MOTOR SKILLS	control, and/or hand-held equipment and/or in various combinations						
	Hold and use a writing instrument for recording patient history or pertinent information	X	X	X	X	X	X
	Apply gown, gloves, and mask for Universal Precautions when needed	X	X	X	X	X	X
VERBAL	Articulate clearly to a patient in conversational English regarding therapeutic goals and procedures	X	X	X	X	X	X
OLFACTORY	Detect changes in environmental odor and (temperature)	X	X	X	X	X	X
ENVIRONMENTAL	Function within environments which may be stressful due to fast pace, need for accuracy, and distracting sights and sounds	X	X	X	X	X	X
	Recognize that the academic/clinical environment includes exposure to disease, toxic substances, bodily fluids, and/or radiation	X	X	X	X	X	X
	Exhibit social skills necessary to interact effectively with those of the same or different cultures with respect, politeness, and discretion	X	X	X	X	X	X
	Maintain cleanliness of personal grooming consistent with close personal contact	X	X	X	X	X	X
	Function without causing harm to self or others if under the influence of prescription or over the counter medications	X	X	X	X	X	X

Technical Performance Standards Informed Consent

1. I have received, read and understand the meaning of MassBay Community College's Health Professions Technical Performance Standards.

2. I understand that the Standards indicated, as applicable to my intended program of study, relate to the full array of essential performance competencies inherent to my chosen program of study.

3. I also understand that in order to successfully graduate from the program of my choice, I must be able to satisfactorily perform the tasks listed in the standards.

4. It is my responsibility to submit a request to the College's Accessibility Resources Office should I wish to receive a determination of reasonable accommodation in performing any of the stated standards.

5. Lastly, I understand that there may be instances where a reasonable accommodation for a method of satisfying the required performance tasks may not be possible.

Student Name (print):_____ ID#:_____

Student Signature:_____Date:_____

MASSBAY COMMUNITY COLLEGE
DIVISION OF HEALTH SCIENCES
Performance Notification Form

Student's Name _____

Faculty / Administrator's Name _____

Date _____

It has come to the attention of the faculty member / administrator named above that your performance has fallen below acceptable standards or your behavior has violated one or more of the policies of the program, division, college and/or clinical affiliate. The specific lapse in performance level / policy infraction is as follows:

If appropriate corrective action is possible, you must satisfy the following expectancies by any dates / time frames specified:

Should you fail to affect the above requirements as stipulated by the dates / time frames stipulated, the following consequence will occur:

FACULTY / ADMINISTRATOR SIGNATURE _____ DATE_____

Student Comments:

I agree with the above described assessment and prescribed action: [] yes [ ] no

STUDENT SIGNATURE:_____DATE:

(NOTE: Student signature indicates only that the student was given this notification, not that the student agrees with the content of the notification.)

WITNESS SIGNATURE: _____DATE:_____

(NOTE: Witness signature verifies that this notification was given to the student, but the student refused to sign as required)

MASSBAY COMMUNITY COLLEGE
DIVISION OF HEALTH SCIENCES
Counseling Record Form

Date: _____

Student: _____ Student ID#: _____

Faculty/Staff/Advisor Name:_____

Program:_____Course:_____

Present at Meeting:_____

Discussion:

Student Comments:

Recommendation(s):

Referral(s) to College Services? yes no

Faculty/Staff/Advisor Signature: _____ Date: _____

Student Signature:_____ Date:_____
4/15/10 kcc

MASSBAY COMMUNITY COLLEGE
DIVISION OF HEALTH SCIENCES
Affective Domain Standards of Performance Warning Form

Date:_____ Student:_____Student ID #:_____

Faculty/Advisor Name:_____

Program:_____Course:_____

Notice of Affective Domain Violation (Check One): #1____ #2____ #3_____

Nature of Violation:

Affective Domain Standard(s) Violated:

Remediation Plan (Violation #1 & #2):

Student Comments:

Faculty/ Signature: _____ Date: _____

Student Signature:_____ Date:_____

Copy of Document Sent to Program Chair and Advisor:

Program Chair_____ Date Copy of Document Sent_____

Advisor_____ Date Copy of Document Sent_____
4/21/10 kcc

MASSBAY COMMUNITY COLLEGE
DIVISION OF HEALTH SCIENCES
Academic/Lab/Clinical Alert Form

Student Name _____
Course _____ Instructor _____

The Division of Health Sciences faculty wants to provide you with the assistance you need to succeed in your program. We are concerned about your progress and urge you to take the step (s) indicated below immediately.

Academic Concern	Attendance / Clinical Concern / Professionalism
□ **The** grade you earned on Quiz/exam_____ was unsatisfactory Date: _____ Grade _____ □ **WARNING:** Your current test grade average indicates you are in danger of not progressing to the next level. Current test average _____	□ You have had one class/lab/clinical absence on _____ □ **WARNING:** You are in danger of being administratively withdrawn (AW) due to excessive absences □ Your clinical performance on _____ was unsatisfactory □ You have violated the Affective Domain Standards of Performance in the classroom/lab/clinical setting on _____

Recommended Activity:

□See me in my office after class or during office hours by (date) _____ Office # _____ Phone: _____

□Complete the prescribed remediation lab _____by (date) _____

□Attend open lab for review _____skills by (date) _____

□See the Academic Tutor for content including math review by (date) _____

□Utilize appropriate college resources (counseling/disability) _____

Instructor Signature: _____ Date:_____
Comments:

Did the student come for help by the date indicated? □ YES □ NO
Comments:

Students Signatures:
Comments:

NOTIFICATION TO STUDENTS OF RANDOM DRUG SCREENING ANALYSIS REQUIREMENT

Please be advised that students enrolled in the _____ Program at Massachusetts Bay Community College will be required to undergo and pass random drug screening analysis in order to be eligible for placement at a clinical facility or in the field. Students who either fail to pass, refuse to submit to, or fail to schedule and take a drug screening analysis within the designated time frame will be deemed ineligible for clinical placement, which will negatively impact their status in the program.

If you have any questions pertaining to this policy, please contact the Dean of Health Sciences.

By my signature, I acknowledge that I have been provided with the Massachusetts Bay Community College Drug Screening Policy and notification that I am required to undergo and pass the drug screening analysis. I am aware that refusing to submit to, failing to schedule and take the drug screening analysis, or failing to submit to or pass the drug screening analysis will result in my being ineligible to participate in clinical education, and consequently, I will be dismissed from the program.

_____

STUDENT NAME (PRINTED)

_____ _____

STUDENT SIGNATURE DATE

MASSBAY COMMUNITY COLLEGE
DIVISION OF HEALTH SCIENCES
Report of Exposure, Injury, or Incident Form
To be completed by the clinical supervisor and student

Name of Individual involved:_____

Immediate Faculty/Preceptor: _____

Clinical facility where exposure occurred: _____

Date/Time of Exposure: _____ Type: Needle Stick: ____ Splash: _____
Mucous Membrane_____ Other: _____

Describe how the incident occurred:_____

Personal Protective Equipment Being Used_____

Actions taken (decontamination, clean-up, reporting, counseling, etc.) _____

_____

Date and Time Incident was reported to Infection Control/Occupational Health: _____

Name/Title of Individual to whom the incident was reported: _____

☑ CHECK LIST

☐ Student was provided with the *Division of Health Sciences Blood and Body Fluid Exposure Policy and Procedure*

I have received and read the *Division of Health Sciences Blood and Body Fluid Exposure Policy and Procedure guidelines.* I understand that I have been advised to contact my health care provider for care that is needed as a result of the exposure that has occurred.

_____ _____
Student Name (Printed) and Signature Date

MASSBAY COMMUNITY COLLEGE

Division of Health Sciences
Incident Report Form

Date of Event:	Time of Event:	Department:
Class:	Location:	Instructor:
Involved Parties: *NOTE: All Involved parties must submit separate reports*		
Report of Event Completed By:		Date:
E-mail:		Phone:
Report of Event Requested by:		
Please Select the Appropriate Category (select all that apply):		
Student / Family Issues	Classroom Issue	Clinical Site / Facility
Student Injury	Equipment Issue	Other:
Exposure/Contact to Bodily/Infectious Substance		
Other:		

Incident Description: explain in detail the nature of the incident and to whom it has been reported. Include a description of the incident, any steps taken to resolve it, and any direct observations of the situation. Use both sides of the page if necessary. ***In order to comply with Federal and State laws, please DO NOT Include any of the following information: Date of Birth, Social Security Number, Driver License Number, any Credit Card or Financial Information as well as any Address Information.***

Student Name (Printed)	
Student Signature	
Faculty Name and Signature	
Date Submitted	

MASSBAY COMMUNITY COLLEGE

Incomplete Grade Request Form

Section I and II (to be completed by the Instructor with Input from the Student)

Date: _____

Student Name: _____ Major: _____

Student ID Number: _____Semester and Year: _____

Instructor: _____Course Name and Number:_____

Reason(s) for not completing the coursework before the end of term: Health____ Other____
Brief description of Reason (submit all supporting documentation):

_____

Student Signature: *(or email accompanying the form to acknowledge the student is submitting this Incomplete Form and the current date):* _____

Section III (to be completed by the Instructor)

Instructor's Name: _____

Assignments and/or exams needed to complete this course:

1. _____ 3. _____
2. _____ 4. _____

If work is completed satisfactorily, what is the expected course Grade? _____

Instructor's Signature: _____

When is the Required Completion Deadline: _____

Student's signature indicating acceptance of the terms: _____

Section IV (Send to Dean/Asst Dean to be completed by the Dean): ldavis@massbay.edu, vtoomey@massbay.edu, amacdonald@massbay.edu

Dean/Asst Dean: _____ __ Approved __ Not Approved

Section V

Date Received by Registrar, as needed: _____

Cc. Division Office, Student, Instructor Rev 050925

Division of Health Sciences
Recommendation for Program Dismissal Worksheet

Student Name _____ Student ID _____

Date_____ Program_____ Faculty _____

Dismissal Basis (Check one): ☐ Grade ☐ Affective Domain Policy

Instructions for Faculty/Department Chair: please write a summary below of the reason(s) for the Recommendation for Program Dismissal, list type(s) of supporting documentation and dates in which infractions occurred on Documentation Log and attach student records and relevant program policy or syllabi. Provide this worksheet and any additional documents to the Dean of Health Sciences and student at the time of the program dismissal. The original will be filed in the Division of Health Sciences Offices.

_____
_____
_____
_____

Documentation Log		
Date	Document type	Description
	e.g., Attendance records	*Student clinical attendance*

Instructions to students: Students have the right to appeal a program dismissal. Details of the appeal process related to Affective Domain Program Dismissals are in the Division of Health Science Student Handbook's Appeal of Dismissal from Division of Health Sciences Programs. Details of the Grade Appeal process can be viewed in the College Student Handbook.

Student comments:

_____

_____

_____

Student Signature: _____ Date: _____

Faculty Signature: _____Date: _____

Program Director Signature: _____ Date: _____

Rev. 10/29/2025

APPENDIX A: Health Sciences Program Grid

Program	Day	Evening	Weekend	Hybrid Format	Fall Start	Spring Start	Summer Start	Length of Program	Credits/Type
Central Processing Technology		X			X	X	X	1 Semester	3 credits Certificate
Computed Tomography	X		X	X	X			2 Semesters	Track 1 (8 Credits) Track 2 (14 Credits) Certificate
Emergency Medical Technician (EMT)	X	X			X	X	X	1 Semester	8 credits Certificate
Medical Assistant		X		X	X			2 semesters	26 Credits Certificate
Medical Coding				Online	X			2 Semesters	27 credits Certificate
Associate Degree Nursing	X				X			4 Semesters	68-72 credits Associate Degree
Practical Nursing	X				X			2 Semesters Intersession 1 summer	43 credits Certificate
Paramedicine (Day)	X				X			2 Semesters 1 summer	37/38 credits Certificate
Paramedicine Evening)		X				X		3 Semesters 1 summer	37/38 credits Certificate
Phlebotomy Skills Certificate		X		X			X	1 Semester	6 credits Certificate
Phlebotomy Technician		X		X	X			2 Semesters	20 Credits Certificate
Radiologic Technology (Day)	X				X			4 Semesters and summer	78 credits Associate Degree
Radiologic Technology Flex (Evening)		X	X			X		9 Semesters	78 credits Associate Degree
Surgical Technology (Day)	X				X			5 Semesters	62 credits Associate Degree
Surgical Technology (Evening)		X			X			5 Semesters	62 credits Associate Degree

Revised June 2026

APPENDIX B:
Division of Health Sciences Administration and Faculty

Division of Health Sciences Administration and Faculty (Updated 5/2026)

Lynne Davis, Ed.D., R.T. (R), Dean
508-270-4022
Venusa Toomey, M.D., M.Ed.
Assistant Dean of Health Sciences and Framingham Campus Administrator
508-270-4030

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APPENDIX C:
Program Policies and Student Acknowledgment Form

Addendum

RADIOLOGIC TECHNOLOGY

2024

Department of Radiologic Technology Faculty

Program Director

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Radiologic Technologist Profession

The Radiologic Technologist is a member of the health care team who works directly with the patient and the physician in performing a wide variety of diagnostic imaging procedures. Radiographic Technologists are employed in hospitals, clinics, and various imaging centers. Proficient in the knowledge of computed radiographic exposure, anatomy, and patient positioning, radiologic technologists have many career paths and opportunities for advancement into more progressive imaging modalities.

Program Overview

MassBay offers two different tracks for the associate degree Radiologic Technology.

- Full-time Day Option is a twenty-one-month (five sequential semesters) course of study. Students begin in the fall semester.

- Part-time Evening (Flex) Option is eight semesters long. Students in the Flex option begin classes in the spring semester. Students complete the didactic portion of the program first and then the clinical portion in the last three semesters.

Mission

The mission of the Radiologic Technology Program at MassBay Community College is to provide a high-quality learning environment that produces competent and compassionate qualified professionals for entry-level practice in Radiologic Technology.
Through competency-based learning, the Radiologic Technology Program provides a strong didactic curriculum as well as laboratory and clinical education experiences, to ensure practical skill development of performance and professional standards that will contribute to the needs of the healthcare community.

Program Goals

Goal 1: Students will be clinically competent.

- Students will demonstrate appropriate patient care skills.
- Students will practice effective radiation protection on patient, self, and others.

Goal 2: Students will communicate effectively.

- Students will demonstrate effective oral communication.
- Students will demonstrate effective written communication.

Goal 3: Students will apply effective critical thinking.

- Students will be able to critique the radiographic image for positioning quality.
- Students will be able to critique the radiographic image for technical quality.

Goal 4: Students will model professionalism.

- Students will demonstrate a professional and respectful attitude to patients and others.
- Students will exhibit professionalism working as part of the healthcare team.

Program Effectiveness

- Students will successfully complete the program.
- Students will pass the ARRT national certification exam on the first attempt.
- Graduates will be gainfully employed within 12-month post-graduation.

Current Program Effectiveness Data can be view on the JRCERT website
https://www.jrcert.org/programs/massbay-community-college/

Licensing

MassBay's Radiologic Technology program is fully accredited by JRCERT. Graduation from a JRCERT accredited program assures that you are competent to perform diagnostic imaging procedures and you have the knowledge and skills necessary to provide safe, high quality patient care. After successful completion of all didactic and clinical components of the Radiology Technology Program graduates will be eligible:

- To apply for the certification examination prepared by the American Registry of Radiologic Technologists (ARRT).
- To obtain Massachusetts Department of Public Health's (MDPH) Radiation Control

Program licensing. Licensure to practice as a Radiographer may vary in other states.

Accreditation

The Joint Review Committee on Education in Radiologic Technology
JRCERT
20N Wacker Drive, Suite 2850
Chicago, IL 60606-2901
312.704.5300

The following statements were obtained from the JRCERT website: https://www.jrcert.org/ Please visit the website to view additional or updated information.

About JRCERT

Originally established in 1969, the Joint Review Committee on Education in Radiologic Technology (JRCERT) is the only organization recognized by the United States Department of Education (USDE) and the Council for Higher Education Accreditation (CHEA) for the accreditation of traditional and distance delivery educational programs in radiography, radiation therapy, magnetic resonance, and medical dosimetry.

Over the last several decades, the JRCERT has proven to be the "gold standard" of accreditation for educational programs in the radiologic sciences and currently accredits over 700 educational programs.

We are proud to share our history and sincerely thank you for your interest in, and continuing support of, programmatic accreditation in the radiologic sciences.

Leslie F. Winter
Chief Executive Officer, JRCERT

JRCERT Vision

Assures all medical imaging and radiologic science programs achieve excellence in education through programmatic accreditation.

Mission Statement

The Joint Review Committee on Education in Radiologic Technology (JRCERT) promotes excellence in education and elevates the quality and safety of patient care through the accreditation of educational programs in radiography, radiation therapy, magnetic resonance, and medical dosimetry.

Commitment to Quality

The JRCERT is committed to excellence in education and believes that quality cannot be compromised. Integrity and high ethical principles are the fundamental values that guide the JRCERT in assuring a fair and unbiased accreditation process. Our site visitors value the diversity of our programs and safeguard the education of students by verifying that programs

utilize equitable policies and procedures. The JRCERT remains steadfast in assuring that these core values are reflected throughout the site visit.

Scope

The Joint Review Committee on Education in Radiologic Technology (JRCERT) currently accredits educational programs in radiography, radiation therapy, magnetic resonance, and medical dosimetry offered at the certificate, associate, baccalaureate, and master's degree levels in both traditional and distance education settings. These programs are housed in institutionally accredited, degree-granting institutions and hospitals/medical centers that are either degree-granting or award certificates. The geographic boundaries of JRCERT accreditation activities are within the United States and its territories, commonwealths, and possessions.

Core Values

- Believes educational quality and integrity should not be compromised.
- Respects and protects the rights of students.
- Promotes the welfare of patients.
- Encourages educational innovation.
- Collaborates with other organizations to advance the profession.
- Exemplifies the highest ethical principles in its actions and decisions.
- Strives to incorporate diversity, equity, and inclusion at the center of our accreditation work and interactions with our communities of interest.
- Responds in a proactive and dynamic manner to the environment in which it operates.

Council for Higher Education Accreditation (CHEA) Recognition

The JRCERT is recognized by the Council for Higher Education Accreditation (CHEA). CHEA is a national advocate and institutional voice for self-regulation of academic quality through accreditation. CHEA is an association of 3,000 degree granting colleges and universities and recognizes 60 institutional and programmatic accrediting organizations. For more information on CHEA, go to chea.org.

US Department of Education Recognition

The JRCERT is the only agency recognized by the United States Department of Education (USDE) for the accreditation of traditional and distance delivery educational programs in radiography, radiation therapy, magnetic resonance, and medical dosimetry. For more information about the USDE, go to usde.gov.

What is Accreditation?

Accreditation is the process to ensure that schools, post-secondary institutions, and other education providers meet and maintain minimum standards of quality and integrity regarding academics, administration, and related services. The Council of Higher Education Accreditation (CHEA) defines accreditation as "A review of the quality of higher education institutions and programs. In the United States, accreditation is a major way that students, families, government officials, and the press know that an institution or program provides a quality education.

https://www.youtube.com/watch?v=VGKOReYgjj8

Benefits of Accreditation

Accreditation is the primary means of assuring and improving the quality of higher education institutions and programs in the United States. Active for the past 100 years, this private, voluntary system of self-examination and peer review has been central to the creation of a U.S. higher education enterprise that is outstanding in many respects.
https://www.youtube.com/watch?v=RrXFAXLk4ak

Accreditation Awards

The culmination of the accreditation process is the actual accreditation action. JRCERT staff does not determine accreditation awards. Accreditation decisions are made by the JRCERT Board of Directors, based on compliance regarding the relevant accreditation Standards, and in a process detailed in JRCERT policies. The Board meets in person twice per year and holds conference calls nearly every month to determine accreditation actions.



Example of Program Effectiveness Data

The JRCERT makes available the program effectiveness data (credentialing examination pass rate, job placement rate, and program completion rate) of all its accredited programs on an annual basis. This information is self-reported by the accredited programs via the annual report. To review this information for a particular program, locate that program through the Find a Program feature. Once you locate the program you are interested in attending, you will find the program effectiveness data at the very bottom of the program detail screen. The definitions below provide you with the current JRCERT definitions of program effectiveness data; however, if you have any questions, please contact the program directly.

MassBay's Radiologic Technology Program Effectiveness Data (PED) is updated and made available to the public on the program website annually and can also be viewed on the JRCERT website https://www.jrcert.org/programs/massbay-community-college/

Program completion rate is defined as the number of students who complete the program within the stated program length. The program specifies the entry point (e.g., required orientation date, final drop/add date, final date to drop with 100% tuition refund, official class roster date, etc.) used in calculating the program's completion rate. When calculating the total number of students enrolled in the program (denominator), programs need not consider students who attrite due to nonacademic reasons such as: 1) financial, medical/mental health, or family

reasons, 2) military deployment, 3) a change in major/course of study, and/or 4) other reasons an institution may classify as a nonacademic withdrawal.

Credentialing examination pass rate is defined as the number of student graduates who pass, on first attempt, the American Registry of Radiologic Technologists (ARRT) certification examination or an unrestricted state licensing examination compared with the number of graduates who take the examination within six months of graduation. For Medical Dosimetry programs, graduates sit for the Medical Dosimetry Certification Board (MDCB) examination and must report results within the next testing cycle after graduation.

Job placement rate is defined as the number of graduates employed in the radiologic sciences compared to the number of graduates actively seeking employment in the radiologic sciences. The JRCERT has defined not actively seeking employment as: 1) graduate fails to communicate with program officials regarding employment status after multiple attempts, 2) graduate is unwilling to seek employment that requires relocation, 3) graduate is unwilling to accept employment, for example, due to salary or hours, 4) graduate is on active military duty, and/or 5) graduate is continuing education.

The credentialing examination pass rate and job placement rate is a five-year average based on the most recent five consecutive years of data. The program's completion rate is a one-year data point. A new program (i.e., an initial program recently accredited by the JRCERT, recent transfer of sponsorship, etc.) may not have five years of data for credentialing examination pass rate and job placement rate, (NOTE: also, possibly no completion rate); therefore, JRCERT records will identify pass rate and job placement rate as "0" in the Program Effectiveness Data section. Refer to the example below. Please contact the program regarding any questions pertaining to the data.

Reporting Allegations

The JRCERT is required to be responsive to allegations of non-compliance with any of its Standards. Please be advised the JRCERT cannot advocate on behalf of any one student. An investigation into allegations of non-compliance addresses only the program's compliance with accreditation standards and will not affect the status of any individual student. The JRCERT takes seriously and follows up appropriately any allegation that an accredited program is not maintaining compliance with its accreditation standards. Before the JRCERT will take action to investigate the program, however, it must be assured that the complainant has addressed the matter internally. Did you follow the program's/institution's due process through to its final appeal? If you have addressed the matter internally and wish to make a formal complaint, please complete an allegation reporting form. https://www.jrcert.org/wp-content/uploads/2023/08/Allegations-Reporting-Form.pdf The allegations must reference the specific accreditation standards/objectives with which you believe the program to be in non-compliance. The Standards for an Accredited Program in Radiologic Sciences can be found under the Accreditation Information menu.

Reporting Process

Important Notes for Reporting Allegations Against a Program

1. The JRCERT cannot advocate on behalf of any student(s). An investigation into allegations of non-compliance addresses only the program's compliance with accreditation standards and will not affect the status of any individual student.
2. The investigation process may take several months.
3. The JRCERT will not divulge the identity of any complainant(s) unless required to do so through legal process.

Process

Before submitting allegations, the individual must first attempt to resolve the complaint directly with program/institution officials by following the due process or grievance procedures provided by the program/institution. Each program/institution is required to publish its internal complaint procedure in an informational document such as a catalog or student handbook. (Standard One, Objective 1.1)

If the individual is unable to resolve the complaint with program/institution officials or believes that the concerns have not been properly addressed, he or she may submit allegations of non-compliance to the JRCERT:

Chief Executive Officer
Joint Review Committee on Education in Radiologic Technology
20 North Wacker Drive, Suite 2850
Chicago, IL 60606-3182

Phone: (312) 704-5300
e-mail: mail@jrcert.org

The Allegations Reporting Form must be completed and sent to the above address with required supporting materials. All submitted documentation must be legible. Forms submitted without a signature or the required supporting material will not be considered. If a complainant fails to submit appropriate materials as requested, the complaint will be closed.

The Higher Education Opportunities Act of 2008, as amended, provides that a student, graduate, faculty, or any other individual who believes he or she has been aggrieved by an educational program or institution has the right to submit documented allegation(s) to the agency accrediting the institution or program.

The JRCERT, recognized by the United States Department of Education for the accreditation of radiography, radiation therapy, magnetic resonance, and medical dosimetry educational programs investigates allegation(s) submitted, in writing, signed by any individual with reason to believe that an accredited program has acted contrary to the relevant accreditation standards or that conditions at the program appear to jeopardize the quality of instruction or the general welfare of its students.

JRCERT Standards for Radiography Programs

Standard One: Accountability, Fair Practices, and Public Information

The sponsoring institution and program promote accountability and fair practices in relation to students, faculty, and the public. Policies and procedures of the sponsoring institution and program must support the rights of students and faculty, be well-defined, written, and readily available.

Standard Two: Institutional Commitment and Resources

The sponsoring institution demonstrates a sound financial commitment to the program by assuring sufficient academic, fiscal, personnel, and physical resources to achieve the program's mission.

Standard Three: Faculty and Staff

The sponsoring institution provides the program adequate and qualified faculty that enable the program to meet its mission and promote student learning.

Standard Four: Curriculum and Academic Practices

The program's curriculum and academic practices prepare students for professional practice.

Standard Five: Health and Safety

The sponsoring institution and program have policies and procedures that promote the health, safety, and optimal use of radiation for students, patients, and the public.

Policy for Potential Non-Compliance with the JRCERT Standards

Accredited programs in Radiologic Technology must meet and maintain specific curricular and educational standards. The JRCERT is the accrediting agency for Radiologic technology.
Students receive a copy of the current *Standards for an Accredited Education program in Radiological Sciences* as adopted by the JRCERT (revised 2021) as part of the core documents contained within the RT Addendum to the Division of Health Sciences Handbook.
Students are instructed on the role and function of JRCERT as part of the pre-clinical activities that introduce important accrediting and regulatory bodies or agencies that influence upon radiologic technology education and practice. As part of ensuring that standards are maintained, students are advised of their rights to due process should they feel that the program is out of compliance with any JRCERT standard.
Students are requested in such a situation to report their concern to the RT faculty, Director or Coordinator or via a student representative of the RT Advisory Board. All concerns will be brought to the program Director or Department Chair.
All concerns will be investigated, documented, and appropriate action will be taken to resolve any concerns in an efficient and timely manner. Feedback will be provided in relation to the resolution or outcome. All documentation will be kept in a locked file cabinet in the RT Department.
Should the situation not be resolved through the departmental policy, students are advised of their ability to follow an external process by contacting JRCERT directly.
Should a member of the public have concerns with the standards or other regulatory requirements in relation to the program or conduct of a student, they are able to contact the RT Department Chair or the Dean of the Division. A similar process will be followed and documented as above. If a resolution is not achieved, the person(s) involved will be provided

with appropriate contact information to the respective regulatory or accreditation agency.

MassBay Radiologic Technology Policies

Radiation Protection Policies

The Radiologic Technology Program and its clinical affiliates operate under the ALARA (as low as reasonably achievable) radiation protection concept and guidelines. The ALARA principle protects patients, radiation workers, and others from excessive or unnecessary exposure to ionizing radiation.

Overview

The National Council on Radiation Protection (N.C.R.P.) has published, as its guideline and, state and federal agencies have promulgated regulations for a recommended annual exposure dose limit for individuals employed as radiation workers. The effective dose limit for whole body exposure of a radiation worker is 5 rem (50 mSv) per year, with a cumulative level not to exceed a level calculated by the formula "10 mSv times the age of the worker". The Commonwealth of Massachusetts Department of Public Health, Radiation Control Program has adopted and enforces these guidelines within its regulations.

The Radiologic Technology Program Radiation Control Officer (RSO) and faculty have established as the annual exposure dose limit for students enrolled in its program, the level of 5 mSv (0.5 rem) per annum. Upon consultation with Certified Radiation Health Physicists, and in the experience of faculty, this level (which is 1/10th that recommended for the radiation worker), is "As Low As is Reasonably Achievable" (A.L.A.R.A.) for medical radiography students.

Student Radiation Monitoring

To help ensure that all student technologists are learning in a safe working environment, the amount of radiation received is monitored. A radiation dosimeter badge is issued to each student by the college. This badge is mandatory and is used to monitor dose at the clinical environment as well as during any laboratory, simulation, image production or quality assurance testing activities. Students are responsible for the safety and security of their badges. Each student must exercise care to prevent loss of or damage to radiation badges. Lost /damaged badges must be reported to the Radiation Safety Officer (RSO) immediately. It is the responsibility of each student to wear the assigned badge whenever he/she is in any clinical or lab area. Failure to wear the dosimeter badge will result in disciplinary action in the clinical or lab.

The badge is to be worn on the collar. If wearing a lead apron, the student should wear the badge outside of the apron on the collar. Students are not allowed to hold patients during radiation exposures. The badge holder must face forward to obtain an accurate radiation measurement. When the student rotates to another clinical site, it is the student's responsibility to take his/her current badge. If the student fails to take the badge when rotating to another clinical assignment, he/she must leave and return with the dosimeter badge, or the student will not be permitted to attend and will make up the lost time. If the student fails to report to lab with the badge the student will be required to return with the badge. Missed lab time will require make up during open lab hours.

Used badges are to be brought to the college for quarterly exchange. It is the responsibility of the student to obtain a new quarterly dosimeter badge and submit the current badge to the RSO on

time. A non-compliance affective domain warning will be filed for repeated infractions. Students will be provided with their radiation exposure data within 30 days of receiving the report.

Confidential disclosure of pregnant is strongly encouraged during the first trimester, however not required. If the student chooses to disclose her pregnancy, she must do so in writing to the Program Director. The pregnant student will be counseled by the Program Director and/or Radiation Safety Officer regarding methods to reduce exposure from ionizing radiation. If the student chooses to continue RT coursework during her pregnancy, immediate efforts shall be instituted to keep the student's radiation exposure during the gestation period well below.05 rem. A second (fetal) radiation badge shall be obtained and worn at the waist. Students employed as a radiation worker in any hospital/medical center/clinic are required to obtain a separate dosimeter badge from the employer. It is critical that student radiation dose records are kept separate from employment records.

Student Radiation Exposure Reports

Whole-body radiation exposure reports are posted quarterly and made available for student review within 30 days of receipt. Radiation exposure reports are reviewed by the Radiation Safety Officer and unusual exposure levels or developing trends will be investigated. Dosimetry reports reflecting radiation levels for each student are kept by electronic file accessed by the RSO. The program provides each student with their accumulated radiation dose at the time of graduation. Subsequent requests for accumulated exposure levels are to be made by the graduate's employer and must be submitted in writing to the RSO or Program Director.

Student Dose Limit Protocol

Radiation exposure reports are reviewed by the RSO and unusual exposure levels or developing trends are referred to a licensed physicist. If a student's quarterly level exceeds 100 mrem as documented on the radiation monitoring report, the student is immediately informed of the increased exposure level and a meeting is held between RSO and the student to determine the cause. Carelessness in radiation protection practices will not be tolerated and repeated offenses subject the student to sanctions up to and including dismissal from the program.

Pregnancy Policy

This policy is designed to inform female applicants/students of the RT program guidelines for radiation protection of an unborn child.

The sponsorship of the program adheres to the United States Nuclear Regulatory Commission (U.S. NRC) Regulatory Guide 8.13 provided by the U.S. Nuclear Regulatory Commission. A copy of this policy is provided to all female applicants prior to their admittance to the program and is appended at the end of this document.

For a pregnant student to fully ensure compliance with the lower radiation exposure limit and dose monitoring requirements, the student must declare her pregnancy to the program. If at any time during the program the student decides to voluntarily declare a pregnancy, she must provide written notification to the Program Director.

The student will be informed of her options regarding this policy prior to enrolling and again, during program orientation.

Option I:
The student has the right to make a voluntary disclosure that she is pregnant, and she has the right to modify training.

Option II:
Once the pregnancy is declared, the student may elect not to have any modification made to her training.

Option III:
The student may elect to take a leave of absence from the RT program and return within 1 year after re-admission and not lose her status in the program. The student must inform the program of her scheduled return so that the program can secure a seat for her.

Option IV:
The student may elect to continue in the RT program, fulfilling all program requirements as contained within the curriculum, and adhere to all radiation protection guidelines and recommendations as follows:

a) The student will be provided an additional radiation monitoring device to monitor exposure to the fetus.
b) The student will be required to adhere to the provisions of ALARA
c) No more than 5 mSv (0.5 Rem or 500 mrem) of exposure is to be received by the student during the pregnancy.
d) The equivalent dose to the embryo-fetus in a month cannot exceed 0.5 mSv (.05 Rem or 50 mrem).

Option V:
The student may withdraw the declaration of pregnancy at any time. This withdrawal of declaration MUST be in writing. Refraction of the pregnancy declaration requires the student to abide by the general guidelines for radiation workers. Therefore, after pregnancy declaration refraction, the student will be monitored according to general guidelines for radiation workers as described by the Nuclear Regulatory Commission and State Laws
Option VI:
The student may choose not to declare the pregnancy to the program.
*The program will not be responsible for any injuries to the embryo/fetus should the student decide to remain in the program during the entire gestational period.

In the event of a declared pregnancy, the following course of action shall be implemented:

- The Program Director will review with the student NCR Regulatory Guide #8.13, "Instruction Concerning Prenatal Radiation Exposure." The student will sign a declaration indicating receipt of this regulation.
- The student will receive counseling regarding minimizing radiation exposure to the embryo/fetus.

- To closely monitor the radiation dose to the fetus, a fetal dosimeter will be issued to the student, to be worn at the student's waist, under the lead apron, if applicable.
- The student will be given the option of taking a leave of absence from the program but may continue with proper precautions. If a leave is chosen, the Program Director will work with the student for planned re-entry at the next appropriate semester.
- If the student continues in the program, and the student feels physical restrictions are applicable, she must obtain documentation from her physician attesting to that fact.
- The program will attempt to reasonably accommodate this request.

Clinical Supervision Policy

The Clinical Supervision Policy is designed to ensure the protection of patient, staff, and students during the application of ionizing radiation. During Pre-clinical Orientation students are provided training on the Clinical Supervision Policy, Clinical Affiliates are provided notification of the Clinical Supervision Policy and annually review policy with all department staff providing supervision of the clinical student. Additionally, each Clinical Affiliate posts the policy in technologist work areas for convenient reference. At the beginning of each clinical semester, students are required to read the Clinical Supervision Policy posted in the RT Addendum or in the current Clinical syllabus. Students must submit Clinical Policy Acknowledgment Form in Trajecsys at the start of each Clinical semester.

Students must be directly supervised while performing radiographic examinations or procedures until they successfully pass the appropriate competency evaluation. Mobile, Mobile Fluoroscopy and Surgical examinations are always performed with direct supervision regardless of competency.

<u>Direct Supervision Guidelines</u>

1. An ARRT qualified radiographer reviews the request for exam in relation to the student's achievement.
2. An ARRT qualified radiographer evaluates the condition of the patient in relation to the student's knowledge.
3. An ARRT qualified radiographer is present during the exam.
4. An ARRT qualified radiographer reviews and approves the radiographs.

When clinical competency of an exam is documented, the student's clinical practice of those specific exams falls under the Indirect Supervision Guidelines.

<u>Indirect Supervision Guidelines</u>

1. An ARRT qualified radiographer who is immediately available to assist the student regardless of the level of achievement provides supervision.
2. The ARRT qualified radiographer is present in an adjacent room or location.
3. This availability applies to all areas where ionizing radiation equipment is in use.

All repeat radiographs, regardless of student competency level, must be performed under direct supervision.

Violation of the Clinical Supervision Policy

Violation of the Clinical Supervision Policy must be reported to the Clinical Instructor and MassBay Community College Clinical Coordinator or Program Director. Reports of a breach in Clinical Supervision policy will be investigated and may result in the removal of clinical student from MassBay's Radiologic Technology Program and the grade Unsatisfactory will be issued.

Student Radiation Safety Practices

At a minimum, state regulations regarding safe operation of radiation-generating equipment will be followed in all educational settings with live radiation, including during laboratory sessions. All laboratory sessions are conducted under the guidance of a qualified practitioner. Students enrolled in the MassBay Community College RT Program will adhere to proper radiation safety practices consistent with clinical site policies and the scope of practice in radiology to include the following:

- Students are to stand behind the lead-lined control area of a radiographic room when an
- exposure is being made.
- All doors leading into a radiographic room from a public corridor are to be closed prior to making an exposure.
- When assisting with fluoroscopic procedures, students are to wear a lead apron and remain at least two (2) feet away from the radiographic table when fluoroscopic exposures are being made.
- When performing portable or bedside radiographic examinations, students are to stand at least six (6) feet from the source of the ionizing radiation and wear a lead apron when the exposure is being made.
- Students are to refrain from holding patients during an exposure.
- Students are to wear college-issued radiation dosimeter badges whenever fulfilling clinical assignments.

Patient Radiation Safety Practices

Students enrolled in the RT Program will adhere to proper radiation safety practices that protect the patient from excessive or unnecessary exposure to ionizing radiation to include the following:

- Students are to review the physician's order or requisition for the examination or procedure prior to performing the study.
- Students are to follow the necessary steps to obtain an informed consent from the patient prior to the start of the examination or procedure i.e. verify patient identity; explain the procedure or examination; obtain a patient history; and inquire about possible pregnancy.

- Students are to limit the radiation field to a size only large enough to include the anatomic area of interest. Field size is never to exceed image receptor size.
- Students are to shield patients when appropriate and according to facility practices.
- Students are to select exposure factors that produce the minimum amount of radiation exposure needed to obtain a diagnostic image.
- Student must adhere to Clinical Supervision Policy during all clinical activities.

Student Safety Practices - Lab

The MassBay radiography lab maintains compliance with all federal and state regulations, with the appropriate documentation posted in the lab and records maintained in the department office.

The following rules specific to activities in the radiography labs must be followed:

- Eating, drinking, smoking, and other forms of tobacco use are prohibited.
- All radiographic exposures must be part of a specific laboratory exercise and under the supervision of a faculty member.
- No student shall work in any of the lab without wearing a radiation dosimeter.
- Holding of radiographic phantoms during exposure is not permitted and no one should be in the energized lab while exposures are being made.
- Doors to all lab areas must be closed during radiographic exposures and the outer door must be locked when lab is not in use.
- Students are not permitted to utilize lab equipment to make radiographs of any human or animal subject.
- All accidents occurring in any of the labs must be reported to the supervising faculty member immediately and use of equipment discontinued until the problem is corrected.

Failure to comply with lab safety rules will result in immediate dismissal from the program.

MRI Safety Policy for Clinical Rotations

All students participating in an MRI Observation rotation must be aware of magnetic wave or radiofrequency hazards and be appropriately screened. In the MRI suite, the magnetic field is constant and entering the MRI suite with ferromagnetic objects or an implanted device poses a threat to self and others. These objects can become projectiles within the scanning room causing serious injury, death, or equipment failure.
For this reason, the following protocols are in place:

- All students are required to complete the online MRI Safety Module and the MRI screening protocol prior to the start of clinical practice in the first semester.
  - This module is part of the Pre-Clinical Orientation.
- All students must complete the MRI Screening tool prior to observational rotation in the MRI suite.

- Available in student Trajecsys documents

• All students will comply with each clinical site's policies and procedures pertaining to MRI and scanning areas.
• All students will notify the program should their screening status change.

The Program Director will review the completed screening form to identify any potential contraindications to a high magnetic field environment. If necessary, this will be in consultation with MRI professionals. Any questions regarding personal medical history and MR safety should be directed to the Program Director.
For additional information, please review the American College of Radiology's guidelines for MRI safety: ACR Guidance Document on MR Safe Practices and the American College of Radiology's MR Safety Guidelines available at: http://www.acr.org/quality-safety/radiology-safety/mr-safety.
MRI safety rules ensure student safety and the safety of personnel and patients in the department. It is important that all students always respect and follow the rules of MRI safety while in the MRI environment.

MRI Observation Safety Rules

1. Assume the MRI magnet is always ON

2. Do not enter the MRI suite unless accompanied by an MRI technologist.

3. Do not bring personal items or magnetic items into the MRI suite. These may include:
- Wallet, purse, credit cards, cards with magnetic strips
- All electronic devices to include cell phones, tablets, mp3 players
- Hearing aids
- jewelry, watches
- Pens, paper clips, keys, coins, pocketknives, nail trimmers
- Hair accessories
- Clothing that includes metallic fasteners
- Belt buckles, safety pins

4. Do not bring magnetic hospital equipment into the MRI suite. These may include:
- oxygen tanks
- wheelchairs
- carts
- monitors
- IV poles
- stretchers

5. Examples of items that may create a hazard in the MRI department include:
- Pacemakers
- Cardioverter Defibrillator Implants
- Aneurysm clip
- Implanted drug infusion device
- Foreign metal objects
- Bullets or shrapnel
- Permanent cosmetics or tattoos
- Implants that involve magnets
- Medication patches containing metal foil
- Dentures, teeth with magnetic components

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U.S. Nuclear Regulatory Commission

REGULATORY GUIDE

Office Of Nuclear Regulatory Research

REGULATORY GUIDE 8.13
(Draft was issued as DG-8014)
INSTRUCTION CONCERNING PRENATAL RADIATION EXPOSURE

A. INTRODUCTION

The Code of Federal Regulations in 10 CFR Part 19, "Notices, Instructions and Reports to Workers: Inspection and Investigations," in Section 19.12, "Instructions to Workers," requires instruction in "the health protection problems associated with exposure to radiation and/or radioactive material, in precautions or procedures to minimize exposure, and in the purposes and functions of protective devices employed." The instructions must be "commensurate with potential radiological health protection problems present in the workplace."

The Nuclear Regulatory Commission's (NRC's) regulations on radiation protection are specified in 10 CFR Part 20, "Standards for Protection Against Radiation"; and 10 CFR 20.1208, "Dose to an Embryo/Fetus," requires licensees to "ensure that the dose to an embryo/fetus during the entire pregnancy, due to occupational exposure of a declared pregnant woman, does not exceed 0.5 rem (5 mSv)." Section 20.1208 also requires licensees to "make efforts to avoid substantial variation above a uniform monthly exposure rate to a declared pregnant woman." A declared pregnant woman is defined in 10 CFR 20.1003 as a woman who has voluntarily informed her employer, in writing, of her pregnancy and the estimated date of conception.

This regulatory guide is intended to provide information to pregnant women, and other personnel, to help them make decisions regarding radiation exposure during pregnancy. This Regulatory Guide 8.13 supplements Regulatory Guide 8.29, "Instruction Concerning Risks from Occupational Radiation Exposure" (Ref. 1), which contains a broad discussion of the risks from exposure to ionizing radiation.

Other sections of the NRC's regulations also specify requirements for monitoring external and internal occupational dose to a declared pregnant woman. In 10 CFR 20.1502, "Conditions Requiring Individual Monitoring of External and Internal Occupational Dose," licensees are required to monitor the occupational dose to a declared pregnant woman, using an individual monitoring device, if it is likely that the declared pregnant woman will receive, from external sources, a deep dose equivalent in excess of 0.1 rem (1 mSv). According to Paragraph (e) of 10 CFR 20.2106, "Records of Individual Monitoring Results," the licensee must maintain records of dose to an embryo/fetus if monitoring was required, and the records of dose to the embryo/fetus must be kept with the records of dose to the declared pregnant woman. The declaration of pregnancy must be kept on file but may be maintained separately from the dose records. The licensee must retain the required form or record until the Commission terminates each pertinent license requiring the record.

The information collections in this regulatory guide are covered by the requirements of 10 CFR Parts 19 or 20, which were approved by the Office of Management and Budget, approval numbers 3150-0044 and 3150-0014, respectively. The NRC may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently

valid OMB control number.

B. DISCUSSION

As discussed in Regulatory Guide 8.29 (Ref. 1), exposure to any level of radiation is assumed to carry with it a certain amount of risk. In the absence of scientific certainty regarding the relationship between low dose exposure and health effects, and as a conservative assumption for radiation protection purposes, the scientific community generally assumes that any exposure to ionizing radiation may cause undesirable biological effects and that the likelihood of these effects increases as the dose increases. At the occupational dose limit for the whole body of 5 rem (50 mSv) per year, the risk is believed to be very low.

The magnitude of risk of childhood cancer following in utero exposure is uncertain in that both negative and positive studies have been reported. The data from these studies "are consistent with a lifetime cancer risk resulting from exposure during gestation which is two to three times that for the adult" (NCRP Report No. 116, Ref. 2). The NRC has reviewed the available scientific literature and has concluded that the 0.5 rem (5 mSv) limit specified in 10 CFR 20.1208 provides an adequate margin of protection for the embryo/fetus. This dose limit reflects the desire to limit the total lifetime risk of leukemia and other cancers associated with radiation exposure during pregnancy.

In order for a pregnant worker to take advantage of the lower exposure limit and dose monitoring provisions specified in 10 CFR Part 20, the woman must declare her pregnancy in writing to the licensee. A form letter for declaring pregnancy is provided in this guide or the licensee may use its own form letter for declaring pregnancy. A separate written declaration should be submitted for each pregnancy.

C. REGULATORY POSITION

1. Who Should Receive Instruction

Female workers who require training under 10 CFR 19.12 should be provided with the information contained in this guide. In addition to the information contained in regulatory Guide 8.29 (Ref. 1), this information may be included as part of the training required under 10 CFR72 19.12.

2. Providing Instruction

The occupational worker may be given a copy of this guide with its Appendix, an explanation of the contents of the guide, and an opportunity to ask questions and request additional information. The information in this guide and Appendix should also be provided to any worker or supervisor who may be affected by a declaration of pregnancy or who may have to take some action in response to such a declaration.

Classroom instruction may supplement the written information. If the licensee provides classroom instruction, the instructor should have some knowledge of the biological effects of radiation to be able to answer questions that may go beyond the information provided in this guide. Videotaped presentations may be used for classroom instruction. Regardless of whether the licensee provides classroom training, the licensee should give workers the opportunity to ask questions about information contained in this Regulatory Guide 8.13. The licensee may take credit for instruction that the worker has received within the past year at other licensed facilities or in other courses or training.

3. Licensee's Policy on Declared Pregnant Women

The instruction provided should describe the licensee's specific policy on declared pregnant women, including how those policies may affect a woman's work situation. In particular, the instruction should include a description of the licensee's policies, if any, that may affect the declared pregnant woman's work situation after she has filed a written declaration of pregnancy consistent with 10 CFR 20.1208.

The instruction should also identify who to contact for additional information as well as identify who should receive the written declaration of pregnancy. The recipient of the woman's declaration may be identified by name (e.g., John Smith), position (e.g., immediate supervisor, the radiation safety officer), or department (e.g., the personnel department).

4. Duration of Lower Dose Limits for the Embryo/Fetus

The lower dose limit for the embryo/fetus should remain in effect until the woman withdraws the declaration in writing or the woman is no longer pregnant. If a declaration of pregnancy is withdrawn, the dose limit for the embryo/fetus would apply only to the time from the estimated date of conception until the time the declaration is withdrawn. If the declaration is not withdrawn, the written declaration may be considered expired one year after submission.

5. Substantial Variations Above a Uniform Monthly Dose Rate

According to 10 CFR 20.1208(b), "The licensee shall make efforts to avoid substantial variation above a uniform monthly exposure rate to a declared pregnant woman so as to satisfy the limit in paragraph (a) of this section," that is, 0.5 rem (5 mSv) to the embryo/fetus. The National Council on Radiation Protection and Measurements (NCRP) recommends a monthly equivalent dose limit of 0.05 rem (0.5 mSv) to the embryo/fetus once the pregnancy is known (Ref. 2). In view of the NCRP recommendation, any monthly dose of less than 0.1 rem (1 mSv) may be considered as not a substantial variation above a uniform monthly dose rate and as such will not require licensee justification. However, a monthly dose greater than 0.1 rem (1 mSv) should be justified by the licensee.

D. IMPLEMENTATION

The purpose of this section is to provide information to licensees and applicants regarding the NRC staff's plans for using this regulatory guide.

Unless a licensee or an applicant proposes an acceptable alternative method for complying with the specified portions of the NRC's regulations, the methods described in this guide will be used by the NRC staff in the evaluation of instructions to workers on the radiation exposure of pregnant women.

REFERENCES

1. USNRC, "Instruction Concerning Risks from Occupational Radiation Exposure," Regulatory Guide 8.29, Revision 1, February 1996.

2. National Council on Radiation Protection and Measurements, *Limitation of Exposure to Ionizing Radiatio*n, NCRP Report No. 116, Bethesda, MD, 1993.74

MassBay Radiologic Technology Health Policies

Clinical Compliance Policy

Students of the Allied Health Sciences Program must meet and maintain compliance with Health and Immunization Requirements as outlined in the Division of Health Sciences Handbook: Section D Health and Immunization Requirement throughout the entirety of their time in the program.
Failure to meet or maintain compliance with these requirements will result in the issuance of the Affective Domain Warning and removal from the clinical site until compliance is assured. Repeated or continual non-compliance will result in removal from the clinical course and program.

Infection Control Policy

- Student who attends clinical must view Infection Control demonstrations and materials provided by MassBay Community College during Pre-clinical Orientation and any additional materials or training provided by the clinical site.

- Student who attends clinical will be subject to all clinical site policy related to infection control. This may include additional health screenings, continuous mask wearing during clinical hours, and social distancing guidelines.

- Student who works with patient requiring respiratory precautions protocols requiring the use of N95 masks, such as COVID 19 or TB patients, must be provided Fit Tests and PPE equivalent to other hospital employees, when possible. Students without Fit Test and/or appropriate PPE are not permitted to train in areas where N95 masking is required.

- Students' failure to adhere to MassBay RT Program and Clinical Site Policies are subject to disciplinary processes of Affective Domain and Immediate Dismissal found in MassBay Division of Health Sciences Student Handbook.

- Listed below are commonly reported symptoms of infection. Prior to daily entry to clinical each student must review the symptoms listed. If a student exhibit any of these symptoms, they do not attend clinical and notify the MassBay Clinical Coordinator. Return to clinical activity will only occur after it is determined the student in non-infectious by their healthcare provider and have met all hospital Infection Control policies. Upon daily entry to the clinical site, student **must be free** of the following symptoms:

    1. Cough
    2. Sore Throat
    3. Fever
    4. Chills
    5. Body aches
    6. Headache
    7. Loss of taste and/or smell
    8. Shortness of breath or difficulty breathing
    9. Gastrointestinal symptoms (nausea, vomiting, and/or diarrhea)

Exposure and Injury Incident Reporting Policy

Working in a healthcare environment has the potential risk to exposure to pathogenic organisms or physical injury. MassBay Radiologic Technology program provides the clinical student with learning modules addressing best practices to limit these hazards. Learning modules on Infection Control and Safe Body Mechanics are part of the Pre-Clinical Orientation Agenda. Prior to entry to the Clinical environment all students participate in the Pre-Clinical Orientation. In addition to this both a Lab activity on Patient Transfer and skill competency for Stretcher and Wheelchair Transfer is completed as part of RT 101. Also, during the first clinical semester students are given a Clinical Learning Assignment: Infection Control, which requires the student to investigate and report the Clinical areas Infection Control practices.

In the event that a student is exposed to an infectious disease or experiences an injury during their clinical activities a report of the incident must be completed using the Incident Report Form found in Trajecsys. This report must be completed and provided to the Clinical Coordinator within 24 hours of the incident. The student, Clinical Instructor and Clinical Coordinator will review the report and determine appropriate follow up. Detailed information on immediate actions for accidental/occupational exposure are provided in the Division of Health Science Handbook: E.7.0 Blood and Bodily Fluid Exposure Policy and Procedure.

MassBay Radiologic Technology Clinical Education Policies

Attendance Policy

The Radiologic Technology Program at MassBay Community College evaluates the student's performance on their professional behaviors. A detailed description of the professional behaviors can be found on page 15 of the Division of Health Sciences Student Handbook and Policy Manual.

Affective domain standards: dependability, accountability, and effective communication reflect the professional behaviors associated with attendance. Students are evaluated during their clinical course for these affective domain standards by the Clinical Instructor's submission of the Clinical Performance Evaluation.

The clinical student must follow the attendance requirements as described below:

1. Attendance is mandatory.

Students are expected to be in attendance during all assigned clinical days with exceptions as posted holidays, final exam periods and clinical tutorial days, which will be posted through the clinical calendar.

2. Students must attend clinical between 8 am – 4 pm.

- Students must arrive to the clinical area prepared to engage in clinical activities at 8 am.
- Students must remain at the clinical area until 4 pm.

3. Tardiness or absence must be communicated to the Clinical Instructor and Clinical Coordinator prior to 8 am.

- Students must notify the Clinical Instructor via a phone call of absence or tardiness.
- Students must notify Clinical Coordinator via email of absence or tardiness.
- Make up times for absence and/or tardiness are at the discretion of the Clinical Instructor and Clinical Coordinator.

4. Any clinical skill acquisition or experience missed due to absence, tardiness or early departure must be made up at the discretion of the Clinical Instructor and approved by the Clinical Coordinator.

- Requesting make up time due to missing clinical time requires the student complete the Schedule Accommodation Form found in Trajecsys Documents and submitted to the Clinical Instructor/Preceptor and Clinical Coordinator for approval.
- The determination as to which alternative assignments and locations may be required to make up missed days/hours and/or substitute for missed clinical skill acquisition of experiences will be made at the discretion of the clinical affiliate, Clinical Coordinator and Clinical Instructor.

- Make up time schedule beyond the semester can only be permitted if the clinical student has been issued an (I) Incomplete grade for the clinical course.
- Make up time are only permitted at times/day when the college is open.
- Potential make-up times in the regular semester, winter intercession and spring break.
- Holidays in which the college is closed cannot be used for make-up times.

5. **Absences of 2 or more consecutive days require the student to provide the Clinical Coordinator with a letter from a physician verifying the student's is capable to resume all activities (without limitations) associated with clinical prior to the return to the clinical site.**

6. **Absences and tardiness result in a deduction on the clinical grade.**
   Clinical syllabi will provide specific details on grade reductions and associated rubrics

7. **Affective domain warnings are issued by the Clinical Coordinator for the following infractions:**
   - Failure to notify Clinical Instructor and/or Clinical Coordinator of absence, tardiness, or early departure prior to 8 am
   - Excessive (>2) absences, without a physician's note
   - Excessive (>2) tardiness or early departure

8. An (I) incomplete may be issued as clinical grade when skill acquisition is incomplete due to absenteeism or tardiness and the student provides a written request for such consideration to the Clinical Coordinator two weeks prior to the end of the semester.
- Refer to page 9 of the Division of Health Sciences Student Handbook and Policy Manual for details of the Incomplete Grades Policy
- Incomplete grades will be converted to (S) satisfactory upon completion of skill acquisition through approved make up times prior to the start of the following semester.
- Incomplete grade will be converted to (U) unsatisfactory if make up times are not completed and/or skill acquisition is incomplete at the start of the following semester.

Clinical Documentation Procedure

Trajecsys Reporting System (TRS) will maintain documentation of clinical activities. TRS provides access to evaluations, competencies, daily log, assignments, and attendance documentation. Clinical Instructors and College Faculty will be able to monitor, enter, edit, and evaluate the student's clinical documentation using TRS. Students will be able to view all evaluations and enter daily log and attendance records.

Students are required to purchase and maintain access to this online service for the duration of their clinical experience. Two types of access are available 12 or 24 months. Speak with your Clinical Coordinator, if unsure of which access would meet your need.

Clinical Placement Policy

As part of the determination of clinical placement, the Clinical Coordinator will review student requests and schedule a One-on-One meeting during the summer prior to the clinical course start. Students are primarily assigned to clinical affiliates based on academic appropriateness. At any time during the semester students may be subject to change in their clinical assignment when the Clinical Coordinator deems it no longer meets the academic needs of the student. This is often done to provide students with a complete clinical experience.

Students should maintain a professional relationship with all affiliate personnel and patients. Possible conflicts of interest that create an inequitable learning environment are subject to a change in clinical placement for the affected student.

Students who have violated clinical policies or received an affective domain violation are at risk of losing clinical placement. If a student is removed from a clinical placement due to a clinical or affective domain violation, an alternate clinical placement is not guaranteed. A student unable to complete course objectives due to loss of clinical placement will not pass this clinical course.

HIPAA Compliance

Compliance with the Federal Health Insurance Portability and Accountability Act is the moral, ethical and legal responsibility of health professionals, and DHS students to ensure that any and all medically related information is held in confidence. Patient information should only be shared with the appropriate clinical personnel within the context of that personnel's need to know for delivery of quality care. Students are required to adhere to all privacy-based policies of the clinical site during their clinical experience. All students receive HIPAA training during Radiologic Technology Program's preclinical orientation and are fully informed on this law. Care must be taken when bringing clinical experiences back to campus for discussion. Information shared should never include protected patient information as defined by HIPAA. For information on the current HIPAA law please refer to the following website.
https://www.hhs.gov/hipaa/for-professionals/index.html

Violation of the HIPAA policy will result in the disciplinary action of written warning or dismissal from the program. The Clinical Coordinator and Faculty will investigate the facts of the infraction and determine the most appropriate response. Clinical Affiliates may also refuse the placement of the student found in violation of HIPAA. There is no guarantee of an alternate placement.

MassBay Radiologic Technology Program Student Code of Ethics

The MassBay Radiologic Technology Program Student Code of Ethics was developed to reflect the professional ethics associated with the American Registry of Radiologic Technologist (ARRT). All students of the MassBay Radiologic Technology Program should be well versed in each of these ethical standards and practice within the clinical and academic setting abiding by these ethical standards. Student found to be out of compliance with these standards are subject to disciplinary measures outlined in the Affective Domain Policy and/or grade deductions or dismissal from the program.

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

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

3. The radiologic technologist student respects the confidence entrusted in the course of professional practice, respects the patient's rights to privacy and reveals confidential information only as required by law or to protect the welfare of the individual or community.

4. The radiologic technologist student continually strives to improve knowledge and skills by participating and actively engaging in all opportunities for clinical practice regardless of competency status.

5. Consistent with the level of academic preparation, the radiologic technologist student assesses situations; exercises care, discretion, and judgment; assumes responsibility for professional decisions; and acts in the best interest of the patient.

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

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

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

9. The radiologic technologist student protects patients by adhering to the MassBay Radiologic Technology Clinical Supervision Policy

10. The radiologic technologist student will disclose any physical or academic limitations to clinical employees and/or faculty to protect the patient or others from harm.

11. The radiologic technologist student will act in a professional manner, knowing their presence in the clinical site is a direct reflection of the MassBay Community College, the Radiologic Technology Program, and the clinical affiliate.

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

13. The radiologic technologist student will report any policy violations, illegal acts, ethical infractions, or academic dishonesty as they have the potential to negatively affect the patient, MassBay, the Radiologic Technology Program, the profession or clinical affiliate to the Program Director or Dean of Health Sciences.

MassBay Radiologic Technology Forms

(digital versions are found in Trajecsys Document tab)

Clinical Policy Acknowledgment Form

Receipt and Review

I have received and review the Division of Health Sciences Student Handbook and Policy Manual with the Radiologic Technology Program Addendum.

◯ Yes ◯ No

Acknowledgement check off

In review of the Division of Health Sciences Student Handbook and Policy Manual with the Radiologic Technology Program Addendum you acknowledge and agree to the policies and procedures listed.

MassBay Radiologic Technology Health and Safety
- Student Radiation Monitoring
- Student Radiation Exposure Reports
- Student Dose Limit Protocols
- Student Radiation Safety Practices
- Patient Radiation Safety Practices
- Pregnancy Policy
- MRI Safety Policy
- Clinical Compliance Policy
- Infection Control Policy
- Exposure and Injury Reporting Policy

◯ Yes ◯ No

MassBay Radiologic Technology Clinical Education Policies
- Attendance Policy
- HIPAA Policy
- Clinical Placement Policy
- Clinical Supervision Policy

◯ Yes ◯ No

MassBay Radiologic Technology Program Student Code of Ethics

◯ Yes ◯ No

Clinical Schedule Accommodation Form

Requests for scheduling accommodation must be submitted to the Clinical Instructor via email. Requests will be reviewed within 3 business days for approval/denial.
Days in which college is closed cannot be utilized for clinical.

Student Name: _____ Course/Semester _____

Reason for request

___ Make up time
Provide days/hours missed due to absence, late arrival, or early departure.
_____
_____
_____

___ Additional Experience
Explain rationale.
_____
_____
_____
_____

___ Other _____
_____

Proposal

Location	Date	Time	Supervising Staff

Student Signature: _____ Date: _____

Clinical Instructor Signature: _____ Date: _____

Clinical Coordinator Signature _____Date: _____

___ Check if proposed schedule is outside normal semester and will require student be given an Incomplete grade for the clinical course.

MRI Screening Tool



Warning: The MRI system has a very strong magnetic field that may be hazardous to individuals entering the MR environment or MR system room if they have certain metallic, electronic, magnetic, or mechanical implants, device, or objects. Therefore, all individuals are required to fill out this form BEFORE entering the MR environment or MR system room. Do not enter the MR environment or MR system room if you have concerns regarding an implant ,device, or object. Consult the MR Supervisor be entering the MR environment. Be advised the MR system magnet is ALWAYS on.

Submit this form to your MassBay Clinical Coordinator before your scheduled rotation in MRI.

Date:

Name:

MR location:

MR Supervisor name and Phone Number:

1. Have you had an injury to the eye involving a metallic object (e.g., metallic slivers, foreign body)?

   No ___

   Yes ___ please describe _____
   _____

2. Have you ever been injured by a metallic object or foreign body (e.g., BB, bullet, shrapnel, etc.)?

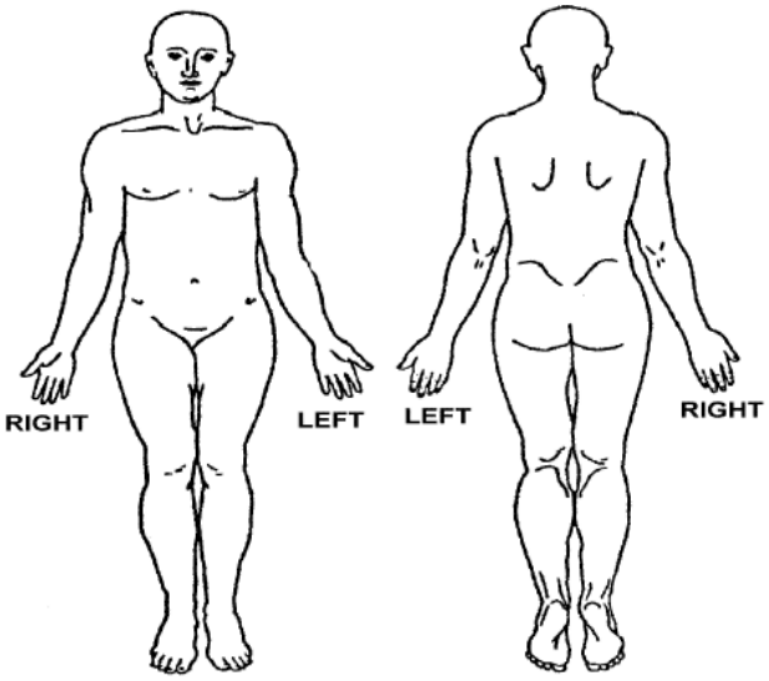
   No ___

   Yes ___ please describe _____
   _____

3. Please indicate if you have any of the following:

Yes _____ No _____	Aneurysm clips
Yes _____ No _____	Cardiac pacemaker
Yes _____ No _____	Implanted cardioverter defibrillator (ICD)
Yes _____ No _____	Electronic implant or device
Yes _____ No _____	Magnetically activated implant or device
Yes _____ No _____	Neuro-stimulation system
Yes _____ No _____	Spinal cord stimulator
Yes _____ No _____	Internal electrodes or wires
Yes _____ No _____	Bone growth/bone fusion stimulator
Yes _____ No _____	Cochlear, otologic or other ear implant
Yes _____ No _____	Insulin or other infusion pump
Yes _____ No _____	Implanted drug infusion device
Yes _____ No _____	Any type of prosthesis (eye, penile, etc.)
Yes _____ No _____	Heart valve prosthesis
Yes _____ No _____	Eye lid spring or or wire
Yes _____ No _____	Artificial or prosthetic limb
Yes _____ No _____	Metallic stent, filter or coil
Yes _____ No _____	Shunt (spinal or intraventricular
Yes _____ No _____	Vascular access port and/or catheter
Yes _____ No _____	Radiation seeds or implants
Yes _____ No _____	Swan-Ganz thermodilution catheter
Yes _____ No _____	Medication patch (nicotine, nitroglycerine, etc.)
Yes _____ No _____	Any metallic fragment or foreign body
Yes _____ No _____	Wire mesh implant
Yes _____ No _____	Tissue expander (e.g., breast)
Yes _____ No _____	Surgical staples, clips or metallic sutures
Yes _____ No _____	Joint replacements (hip, knee, etc.)
Yes _____ No _____	IUD, diaphragm, or pessary
Yes _____ No _____	Dentures or partial plates
Yes _____ No _____	Tattoo or permanent makeup
Yes _____ No _____	Body piercing jewelry
Yes _____ No _____	Hearing aid (remove before entering MR area)
Yes _____ No _____	Other implant
Yes _____ No _____	Breathing problems or motion disorder
Yes _____ No _____	Claustrophobia

Please mark on the diagram where on your body you may have any implants or metal inside your body.



Warning: Before entering the MR environment or MR system room remove any of the following objects: hearing aids, keys, beeper, mobile phone, watch, safety pins, paperclips, money clips, wallet, coins, credit or bank cards, magnetic strip cards, pens, pocket knife or any tools. Any questions or concerns must be addressed with the MR Supervisor prior to entry to any MR area.

I attest to the accuracy of the information provided to the best of my knowledge. I have completed the MR Safety Module prior to my entry to the MR area. I understand the risks associated with entry to the MR area and will comply with all safety protocols for entry to the MR area.

Student name (printed) and signature.

_____

As RT Faculty, I attest that I have reviewed MR Screening Tool with the student.

Faculty name (printed) and signature.

_____

Question or concerns? Please contact Professor Karen Hansen khansen@massbay.edu or Associate Professor Karen Steinhoff ksteinhoff@massbay.edu

DIVISION OF HEALTH SCIENCES STUDENT AGREEMENT FORM

I, the undersigned student, having read and reviewed the entirety of the MassBay Community College Division of Health Sciences Handbook and the addendum specific to my program, do agree to adhere to and abide by all College and Health Program policies and/or their amendments, during my matriculation at MassBay Community College. Furthermore, I agree to adhere to the conduct codes and performance policies of the Clinical Education sites to which I may be assigned. I clearly understand that the failure to adhere to and abide by these policies and regulations of the College, Program, Hospital and/or Clinical Site may result in my removal and subsequent withdrawal from the clinical site/classroom and/or program.

I also understand that in addition to faculty employed at the College, there may be employees of the Hospital / Clinical Agency or Practicum site which are designated by the College as a Supervisors/Preceptors / Clinical Instructors. As such, these individuals will be functioning as members of the team of instructors within one or more of the Program's clinical or practicum courses. Therefore, I understand that assessment/evaluation information about my academic and/or clinical or practicum performance may be shared with the designated / appropriate Supervisor or Clinical Site staff member(s) for the sole purpose of providing them with information needed by them for patient/client assignment or College required clinical performance evaluation/assessment. Furthermore, my academic and/or clinical records may be reviewed by duly authorized representatives of professional, state, or national accreditation agencies.

I further understand that the Hospital or Clinical agencies or Practicum site to which I may be assigned may require that I receive clearance from the Commonwealth of Massachusetts, that I do not have a criminal record of an offence which would compromise the safety or well-being of the clients or patients of that site. Therefore, I understand that my name will be submitted to the state for a CORI (criminal offense record inquiry) and SORI (sexual offense record inquiry) check. A CORI/SORI check report of such an offence may preclude my eligibility for clinical or practicum assignment and thereby may negate my matriculation in the program.

Lastly, I understand that I am required to satisfy the Division of Health Sciences' immunization report requirement and my program's CPR requirement by published deadlines. Failure to do so will preclude my eligibility to participate in the clinical or practicum phase and may result in my inability to complete the program.

Please sign and date this form and submit it to your "Viewpoint Screening" account unless instructed otherwise by a faculty member.

Student's Name (Printed) _____ Date: _____

Student's Signature _____ ID: _____

NOTE: Submission of this form is required for matriculation in the Program.