



Los Angeles City College
Department of Radiologic Technology

Policies and Procedures Manual
for Radiologic Technology Program Students

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Los Angeles City College Radiologic Technology Program

Introduction

Los Angeles City College offers a complete program in Radiologic Technology and is accredited by The Joint Review Committee on Education in Radiologic Technology.

An Advisory Committee composed of Radiologists, Radiographers, Hospital Administrators, Clinical Instructors, other industry partners, and Students. Cooperates with the Faculty and College Administrators in continuous assessment and program revision to ensure “state of the art” training in medical imaging.

This manual has been prepared to assist you in assuming the obligations and privileges to study in the Los Angeles City College Radiologic Technology Department.

Mission Statement

The mission of the Radiologic Technology Program at Los Angeles City College is to instruct students with the technical and interpersonal skills necessary for success as a professional diagnostic medical radiographer.

Program Goals

1. Prepare clinically competent entry-level Radiologic Technologists.
2. Cultivate Radiologic Technologists who utilize exceptional communication skills with patients and coworkers.
3. Train Radiologic Technologists to use critical thinking and problem solving skills to perform job related functions.
4. Produce Radiologic Technologists who will grow, develop, and become members of professional organizations that foster career growth.

The Joint Review Committee on Education in Radiologic Technology (JRCERT)

The Radiologic Technology program is accredited by the Joint Review Committee on Education in Radiologic Technology (JRCERT)

20 N Wacker Drive
Suite 2850
Chicago, IL 60606
Phone
(312) 704-5300

The [Joint Review Committee on Education in Radiologic Technology Standards](https://www.jrcert.org/accreditation-information/accreditation-standards-2021/) can be found at the following website [https://www.jrcert.org/accreditation-information/accreditation-standards- 2021/](https://www.jrcert.org/accreditation-information/accreditation-standards-2021/)

Additionally, students can report allegations that an accredited program is not in compliance with JRCERT accreditation standards. [Allegations Form](#).

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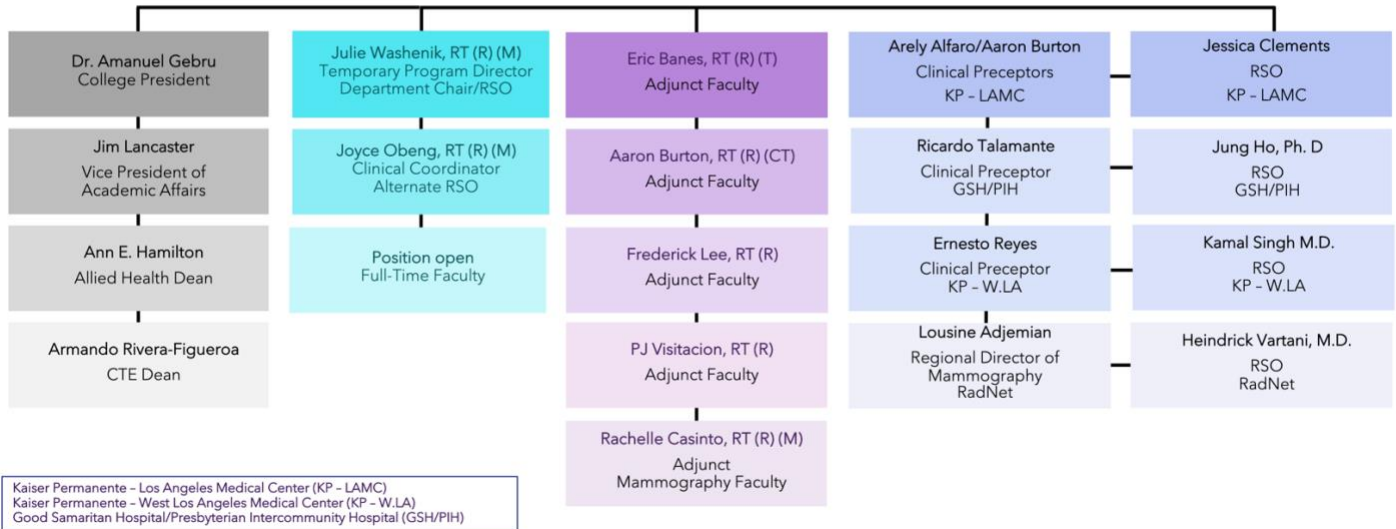
Revised May 2023 (JW, JO)

LACC Organizational Chart

Los Angeles City College RT Organizational chart



LOS ANGELES CITY COLLEGE
90 YEARS **LACC**
The City's College.



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<p>Eric Banes, RT (R)(T), CRT Adjunct Instructor Medical Dosimeter (KP-LAMC) baneser@laccd.edu (323) 953-4000; 2940</p>	<p>Aaron Burton, RT (R), CRT Adjunct Instructor Supervisor (KP-LAMC) burtonam@laccd.edu (323) 953-4000; 2940</p>
<p>Rachelle Casinto RT (R)(M), CRT Adjunct Instructor – Mammography Mammographer Lead – (KP-LAMC) casintr@laccd.edu (323) 953-4000; 2940</p>	<p>Fredrick Lee, RT (R), FAC Adjunct Instructor Regional Director of Imaging (KP-SoCal) Certified Positive Psychology Health & Wellness Coach leefd@laccd.edu (323) 953-4000; 2940</p>
<p>Piper Jan Visitacion, RT (R) Adjunct Instructor Rad Tech (KP-LMAC) visitap@laccd.edu (323) 953-4000; 2940</p>	

Los Angeles City College

Radiologic Technology Department

Clinical Education Centers

<u>Clinical Education Centers</u>	<u>Radiologist</u>	<u>Clinical Preceptors and Administrators</u>
Kaiser Permanente Hospital West LA Department of Radiology 6041 Cadillac Avenue Los Angeles, CA 90034 (323) 857-4373	Christopher Hsu, MD (Chief Radiologist) Merrick Schneider, MD (Medical Advisor)	*Ernesto Reyes RT, CRT, Clinical Preceptor, ernesto.a.reyes@kp.org David Venegas, RT(R) Director of Radiology Helen O. Hien, RT® Assistant Director
Kaiser Permanente Hospital Los Angeles (LAMC/Sunset) Department of Radiology 4867 Sunset Blvd. Los Angeles, CA 90027 (323) 783-7604	Anne Kosco , MD (Chief Radiologist)	*Arely Alfaro, RT(R), Clinical Preceptor, Arely.Alfaro@kp.org *Aaron Burton, RT(R), Clinical Preceptor, Assistant Director Aaron.M.Burton@kp.org James Powell, RT(R) Director of Radiology)
Presbyterian Intercommunity Hospital (PIH)/Good Samaritan Hospital Department of Radiology 1225 Wilshire Blvd. Los Angeles, CA 90017 (213) 977- 2121 Ext. 5229	Eugene Choi , MD (Chief Radiologist)	*Victor Helton RT(R), Clinical Preceptor, Assistant Director victor.helton@pihhealth.org Stacy Johnson (VP of Radiology Services)

RadNet Mammography Imaging Center 465 N Roxbury Dr Unit 101 Beverly Hills, CA 90210 Westchester Advanced Imaging Center 8540 Sepulveda Blvd Unit 101 & 111 Los Angeles, CA 90045	Omid Bendavid,MD (Medical Director)	Lousine Adjemian, Regional Director of Mammography Training lousine.adjemian@radnet.com
*When calling Clinical Education Centers please ask for the Clinical Preceptors.		

Attendance (LACC Catalog)

Only students who have been admitted to the College and have been selected for the radiology program may attend classes. Students must attend every meeting of all classes for which they register. To avoid being dropped from class, students must contact the instructor when they are absent and should be for emergency reasons only.

In addition, the instructor will consider whether there are mitigating circumstances which may justify the absence. If the instructor determines that such circumstances do not exist, the instructor may exclude a student from the class. Students are responsible for officially dropping a class that they stop attending.

*NOTE: Any missed time (tardy, left early, absence) during your clinical education (theory) classes must be made up at your clinical site. Your clinical instructors will be notified. You must submit proof of absence (doctor's note, dentist's note, etc.).

Attendance (Clinical Sites)

The Radiology program has a Monday through Friday (possible Saturdays) schedule during the fall, winter, spring and summer semesters. This means students are obligated to be in class/clinic and not miss any course work on these days regardless of any commitments that students may have. In addition, once students start their full-time clinical training in their RT 280 Clinical Education I course, their schedule may include weekends and evening shifts. Hospitals operate on a 24 hour/seven days schedule and as a clinical student it may be required to participate in training at any hours requested by the clinical coordinator in order to develop competencies in all areas of the radiology training. Please note, JRCERT does not limit programs to a 40-hour week since the new 2021 Standards came into effect on January 1, 2021.

Students are to report to your clinical site at the schedule provided by your Clinical Instructor. Students must stay the entire duration of their designated clinical rotation. If you are tardy, or must leave early, or are absent, you must use the absence link on the Rad Tech Homepage and notify your Clinical Instructor and Clinical Coordinator via email. Before a student may return to the program, a written release from their doctor must be provided prior to returning to the program. The time missed must be made up with the approval of your Clinical Instructor. Students who miss clinical time for any reason must make up the hours within two weeks of returning. Please use the Make-up Time form. If any students' absences exceed **more than two weeks**, the time **cannot be made up** and the student will be asked to withdraw from the program and reapply the following year.

Revised June 2023 (JW, JO)

Students must follow the college's academic calendar. When the campus is closed on holidays or on Sundays, students cannot be at their clinical sites, nor use those days to make up hours. If you are to take a personal or religious holiday off that is not observed by the college, you must make up the time.

Students who have a ***pre-existing disability*** must provide a doctor's statement that they have no physical limitations (e.g., lifting 50 lbs.) and that they are able to lift or push patients and portable radiography equipment.

Notification of Absence-Radiologic Technology Department

Students are required to notify the clinical department via email if they are unable to attend training. In addition, email your instructor *on the day of the absence*. All students must complete the [LACC Clinical Absence Notification Survey](#).

Prior to a student's return to the program, they must submit appropriate documentation to the Program Director before returning to class. The medical or other valid documentation must state that the student is physically and mentally able to continue in the program.

Physical Examination

A physical examination must be performed by a licensed physician to determine physical and mental fitness of the student. The Program Director is authorized to require that records of such examinations are released to the college. These records will be used only to determine fitness for the program, and except for such use, the confidentiality of such records shall be maintained.

Students must be free from communicable diseases, infection, psychological disorders, and other conditions that could prevent the successful performance of the responsibilities and tasks required in the program. Any health condition described above, which is developed by the student after admission to the program, may be considered sufficient cause for suspension from the program.

1. Physical Examination

The student shall bear all the cost of such an examination.

2. Laboratory Tests

The laboratory tests will include complete blood count, TB test or chest x-ray and urinalysis. These tests may be obtained from laboratories of student's choice. The student shall bear all the cost of such tests.

3. Immunization

COVID-19 screening and booster, as well as other immunizations or testing such as for Hepatitis B, TB, and Flu vaccine are required by the respective Clinical Education Centers. The student shall bear all the cost of such tests. The list of required immunizations will be provided during the orientation. Final or "official" acceptance to the Radiologic Technology Program is contingent upon the completion and documentation of the physical examination, laboratory tests, and immunizations.

4. Teeth

Students' teeth should be in good condition; all dental health deficiencies must be corrected. The student shall bear the cost of examination and treatment.

Physician Statement

Any medical problem which requires hospitalization or long-term care from a Physician must be disclosed. A written statement/release from the doctor must be provided prior to returning to the assigned clinical training centers. Failure to comply with this recommendation will forfeit the right of the student to disability and malpractice claims.

Pregnancy Policy

It is recommended that any female student enrolled in the program report immediately to the Program Director and/or Clinical Instructor if she becomes pregnant, for her own protection and that of the embryo/fetus. A copy of the Declaration of Pregnancy will be given to each female student who must sign as receiving the policy and a copy is placed in the student file. See Addendum to Pregnancy Policy in the Appendix V. (Declaration of Pregnancy)

Communicable Disease Policy

All students enter the Radiography program free from communicable disease, as evidenced on their medical forms. However, during the two-year program a student may contract a communicable disease from a patient or the general public.

To protect patients, staff, and other students, the following rules must be adhered to:

1. Students must notify the Clinical Instructor and Program Director/Clinical Coordinator immediately upon being diagnosed with a communicable disease.
2. The student must submit written documentation from the diagnosing physician indicating how their contact with patients, staff and students should be limited.
3. The faculty will remove the student from the clinical and classroom instruction in accordance with the recommendation of the diagnosing physician.
4. The student may return to the clinic and/or classroom when they have received a written release from the physician.
5. Classroom and clinical absences will be handled according to the previously described attendance policies.

In recognition of the possibility of coming into contact with patients who carry a communicable disease capable of being spread by blood or bodily fluids, Radiography students at Los Angeles City College should follow these guidelines:

1. Hands should be properly washed before and after each patient contact.
2. Gloves:
 - Should be worn when the possibility of exposure to blood, mucous membrane, body fluids, or secretions exists.

- Should also be worn when handling items soiled with blood or equipment
- Should be changed if there is a break in the glove either by needle stick or tear
- Must be changed between patients

3. Needles, scalpel blades and other sharp instruments should be:

- Considered as potentially infectious and handled with extraordinary care to prevent accidental injuries.
- Should be disposed of in biohazard, puncture resistant containers located in designated areas at each clinical affiliate.
- Should NOT be re-capped, bent, broken, and/or removed from disposable syringes, or otherwise manipulated by hand.

4. When performing procedures involving any contact with blood or body fluids, gloves, gowns, masks, and goggles should be worn in accordance with affiliate procedure.
5. To minimize the need for emergency mouth-to-mouth resuscitation, mouth-to-mouth masks should be used in accordance with affiliate procedure.
6. Blood, body fluid spills, contaminated surfaces, and re-usable items should be cleaned with a 1:10 Clorox solution and other appropriate disinfectant.
7. When obtaining specimens, gloves should be worn. Soiled containers should be placed in plastic bags and properly labeled with blood and fluid precautions before sending them to the lab.
8. Proper isolation procedures for specific instances will be covered in detail during RT 207 Patient Care Management in Radiologic Technology course during the first semester.
9. All students will be required to obtain their immunization records before official acceptance into the RT Program. Students must also receive all mandatory immunizations or vaccines that are required by the clinical training sites before clinical training will start.

Electronic Device and Social Media Policy

Electronic Device Usage in the Clinical and Education Settings

Electronic devices:

1. Must be turned off once entering the clinical/didactic education center
2. Will not be used during clinical time or during class or lab
3. Are restricted to breaks & lunch time
4. May not be used in restricted areas
5. No video or voice recording allowed, no photos of radiograph at the clinical site is permitted. Please keep in mind there is protected sensitive patient data on each image.

If you must make an emergency cell phone call in an unrestricted area, please notify your clinical instructor, technologist, or supervisor before leaving the Imaging Department to do so. Excessive cell phone/text messaging usage will not be tolerated.

LACC Department of Radiologic Technology Social Media Policy

Social Media are powerful communication tools that have a significant impact on organizational and professional reputations. Because the lines are blurred between personal voice and institutional voice, Los Angeles Community College has created a policy to help clarify how to enhance and protect personal and professional reputations when participating in social media.

Social media are defined as media designed to be disseminated through social interaction, creating highly accessible and scalable publishing techniques. Examples include but are not limited to LinkedIn, Twitter, Facebook, YouTube, Instagram, Snapchat.

Both in professional and institutional roles, employees, staff and students need to follow the same behavioral standards online as they would in real life. The same laws, professional expectations, and guidelines for interacting apply online as in the real world. Employees, staff, and students are liable for anything they post to social media sites and may be subject to litigation.

Policies for All Social Media Sites, Including Personal Sites Protect confidential and proprietary information:

Do not post ANY confidential, disrespectful, or unprofessional information about clinical affiliates, clients/patients, faculty, staff, or students. You must still follow the applicable federal requirements such as Family Educational Rights and Privacy Act (FERPA), Health Insurance Portability and Accountability Act (HIPAA), etc.

- Adhere to all applicable privacy and confidentiality policies. Any confidentiality violation is at the risk of [disciplinary action](#) or dismissal from your respective program. Also subject to discipline from respective licensure Boards. You can be held liable for any postings and may be subject to litigation.
- Do not post any content that might place Los Angeles City College, the program or clinical agencies in a bad light or incite litigation.
- Respect copyright and fair use.
- Do Not use LACC or Respective Clinical Affiliate logos for endorsement.
- Respect College/Clinical Affiliate property.
- Do not utilize or access social media platforms during clinical hours. Do not utilize cell phones during clinical hours.

Best Practices:

- Think twice before posting.
- Once you post, you relinquish control of its proliferation forever.
- Be respectful.
- Remember who the audience is.
- Do not share your password or other personal information.

Post Modalities Opportunity Policy

Upon completing all ARRT clinical competencies and California State requirements for radiography certification, cohorts in Los Angeles City College Radiology program are **not guaranteed** a post-modality training. However, if a cohort is interested in a post modality training,

I. The clinical site **must**:

- a. have a post modality (i.e., CT, MRI, NM, Mammography, Radiation Therapy, Dexa etc.) in operational mode.

For a senior cohort to qualify for a post modality opportunity training, he or she **must** complete all ARRT and California State requirements for radiography certification, and **must** have no disciplinary incidents in the college or clinical sites:

- a. Written warning
- b. Pending Investigation
- c. Suspension
- d. Dismissal

At no point should the clinical site or program leaders deviate from this policy. All opportunities **must** be equitable to meet JRCERT standards.

Kaiser West LA Manager Name: _____ Signature: _____

Kaiser LAMC Manager Name: _____ Signature: _____

Good Sam/PIH Manager Name: _____ Signature: _____

LACC Clinical Coordinator Name: _____ Signature: _____

Program Director Name: _____ Signature: _____

Clinical Site Misconduct Report Procedure

Purpose: To ensure all cohorts are treated equally with respect, all student misconduct at the clinical sites must be investigated by the clinical preceptors, managers, and clinical coordinator.

Types of misconduct:

I. Violation of Los Angeles City College Student Misconduct Codes:

[LACC Student Misconduct Codes](#)

II. Violation of ASRT/ARRT Code of Ethics:

[ARRT-Code of Ethics.pdf](#) & [ARRT Standards of Ethics.pdf](#)

III. Violation of Hospital (Radiology Department & Volunteer Service) Policy & Procedure:

Hospital dependent

IV. The Hippocratic Oath for Radiologic Technologists:

[The Hippocratic Oath for Radiologic Technologists](#)

V. Violation of ISRRT Code of Ethics:

[International Society of Radiographers & Radiological Technologists](#)

Procedures:

1. All reports must be documented using the [Student Disciplinary Action forms](#) (see Appendix VIII). Please include the dates and full names of those involved. Please attach all supporting documentation pertaining to the misconduct (i.e., emails, text messages, written statements, pictures, etc.). **Please share only facts that violate any of our policies, rules, or standards. Do not include any subjective data.**
2. The clinical preceptor and clinical coordinator **must** notify the student of the investigation and offer an opportunity to provide detailed information on the event/incidences that occurred.
3. The clinical preceptor and clinical coordinator **must** investigate and document any findings regardless of any misconduct that violates any of the violate any of our policies, rules, or standards, or not.
4. The clinical preceptor and clinical coordinator **must** present all collective documents to the imaging department director at the clinical site, the program chair, the clinical coordinator, the Dean of Allied Health, and the Dean of Student Conduct.
5. Based on the evidence gathered, the violation, and the repetition of the (same or similar) offense(s), the clinical site is obligated to take immediate disciplinary action based on the program and clinical policies and procedures.
6. If misconduct continues, the program must follow the program policies and procedures for dismissal.

Prohibited Discrimination and Harassment

Policy Statement:

It is the policy of the Los Angeles Community College District to provide an educational, employment, and business environment free from Prohibited Discrimination. Employees, students or other persons acting on behalf of the District who engage in Prohibited Discrimination as defined in this policy or by state or federal law shall be subject to discipline, up to and including discharge, expulsion, or termination of the contract.

Academic Freedom:

The Board of Trustees reaffirms its commitment to academic freedom, but recognizes that academic freedom does not allow Prohibited Discrimination. The discussion of ideas, taboos, behavior, or language which is an intrinsic part of the course content shall in no event constitute Prohibited Discrimination, though such ideas may cause some student's discomfort. It is recognized that academic freedom ensures the faculty's right to teach and the student's right to learn.

Prohibited Discrimination is defined as:

Prohibited Discrimination or harassment in violation of state or federal law on the basis of actual or perceived ethnic group religion, creed, sex (including gender-based sexual harassment), pregnancy, marital status, cancer-related medical condition of an employee, sexual orientation, age, physical or mental disability, or veteran status.

Definition of Sexual Harassment:

Sexual harassment is unwelcome sexual advances, requests for sexual favors, and other verbal, visual or physical conduct of a sexual nature, made by someone from or in the workplace or in the educational setting.

Retaliation:

Retaliation means adverse personal, employment, or academic decisions made against anyone who makes a complaint, refers a matter for investigation, participates in an investigation, represents, or serves as an advocate for a complaint or alleged offender.

False Allegations:

Anyone who files a complaint in which he/she knowingly makes false allegations of fact shall also have violated this policy and shall be subject to [disciplinary action](#).

Confidentiality:

All persons involved in an investigation of complaints shall have a duty to maintain the confidentiality of the matters discussed, except as may be required or permitted by law, which includes the rules and regulations of the District. A complete record of each complaint and investigation shall be kept by the Director of Diversity Programs. The Written Decision or any Settlement Agreement regarding the results of the investigation shall be placed in the personnel file of each employee involved as an alleged offender or complainant.

Prohibited Discrimination and Harassment (continued)

Complaint Procedure General

Provisions:

All Supervisors shall be responsible for maintaining a work environment consistent with this policy. Any supervisor who becomes aware of a situation that could be reasonably perceived to be a violation of this policy must report it to the Office of Diversity Programs. All employees are responsible for maintaining an educational environment consistent with this policy. Any employee who becomes aware of a situation that could reasonably be perceived as a violation of this policy should refer it to the Office of Diversity Programs.

Investigation:

A Compliance Officer shall promptly investigate all potential violations of this policy of which he or she becomes aware. A Compliance Officer shall receive the complaint and notify the complainant, the alleged offender, the College President or District administrator, and the Director of Diversity Programs within 5 business days of a potential violation of this policy. During the process of the investigation, the alleged offender has the right to be represented.

Informal Procedure:

A Compliance Officer shall undertake efforts to informally resolve and investigate the charges. This process is limited to 30 days. If a resolution is reached, a Compliance Officer shall draft a Settlement Agreement to be signed by the complainant and the alleged offender. A Compliance Officer shall monitor the situation to ensure that the resolution is properly implemented and maintain records.

Complaint Procedure:

A written complaint must be filed on the prescribed Los Angeles Community College Complaint form. Employment-based complaints shall be filed within 180 days. Non-employment-based complaints shall be filed no later than one year from the date when the complainant knew or reasonably should have known the facts underlying the complaint.

Compliance Office Report:

Within 60 days after becoming aware of a potential violation of this policy, a Compliance Officer shall complete the investigation and make a written report to the College President or Deputy Chancellor. The College President, or Deputy Chancellor, shall independently assess whether the “preponderance of the evidence” establishes a violation and shall determine what action is to be taken, if any. Prior to making the decision, the alleged offender and complainant shall have the opportunity to make an oral statement within 15 days from the receipt of the Compliance Officer’s report. Within 90 days from the start of the investigation, a Written Decision shall be mailed to the complainant and the alleged offender.

Disciplinary Action:

If appropriate, the College President, Deputy Chancellor, or the Chancellor shall initiate the applicable disciplinary process within 10 business days of receiving the Written Decision. Disciplinary action shall include, without limitation, verbal warning, probation, suspension, expulsion, letters of reprimand, Notices of Unsatisfactory Service, suspension, demotion, or dismissal.

Prohibited Discrimination and Harassment (continued)

Appeals:

If the complainant is not satisfied with the Written Decision, he/she may appeal to the District's Board of Trustees by submitting a written appeal to the Chancellor's office within 15 days. The Chancellor shall present the written appeal, the Written Decision and the investigative report to the Board of Trustees in closed session. If the 45 days elapse without further action, the Written Decision shall be the final decision of the District. In non-employment cases, the complainant has the right to file an appeal with the State Chancellor's Office within 30 days after the Board decision is issued, or the 45 days have elapsed whichever comes first.

Additional Remedies:

The complainant may pursue independent civil law remedies, including but not limited to injunctions, restraining orders, or other orders. An individual who believes that he/she is the victim of Prohibited Discrimination may also file a complaint with the Department of Fair Employment & Housing at (800) 884-1684, the Equal Employment Opportunity Commission at (213) 894-1000, for employment based complaints; and the Department of Education, Office for Civil Rights at (415) 556-4275, for non-employment complaints whether or not the complainant chooses to utilize the District's internal procedure. Complaints may also be filled with the State Chancellor's Office.

The specific rules and procedures for reporting charges of Prohibited Discrimination and for pursuing available remedies are incorporated in the Board Rules in Chapter 15, Board Rules 1501-1522 located at:

<https://www.laccd.edu/FacultyStaff/diversity/Pages/Discrimination.aspx#harassment>

Student Grievance Policy and Procedure

The purpose of the grievance policy and procedures (S-9) are to provide a prompt and equitable means for resolving student(s) grievances. In the pursuit of academic goals, the student should be free of unfair or improper action by any member of the academic community. The grievance procedure may be initiated by one or more students who reasonably believe he/she/they have been subject to unjust action or denied rights involving their status or privileges as students. It is the responsibility of the student(s) to submit proof of alleged unfair or improper action. Grievances pertaining to grades are subject to the California Education Code Section 76224(a) which states: When grades are given for any course of instruction taught in a community college district, the grade given to each student shall be the grade determined by the instructor of the course and the determination of the student's grade by the instructor, in the absence of mistake, fraud, bad faith*, or incompetency, shall be final. (* In general, there is no definitive definition of bad faith. However, bad faith may exist if there is neglect or refusal to fulfill some duty or obligation (e.g., ignoring student evaluation standards published in the course syllabus), not prompted by an honest mistake.)

Complete student grievance procedure and forms located on the LACC website: [Student Grievance](#)

Student Grievance Policy and Procedure (cond.)

Student Grievance Process: Students who meet the criteria for filing a student grievance as described above should complete the following steps:

Step 1: Complete the [Student Grievance Checklist Form](#).

Step 2: Submit the completed Student Grievance Checklist form to Dr. Saadia Lagarde Porché in Admission and Records or via [email](#).

For questions about the student grievance procedures, please contact the campus ombudspersons:

Dr. Saadia Lagarde Porché, Dean of Student Services

Phone: (323) 953-4000 Ext. 2011 | Student Services Bldg., Admissions and Records

Email: ombudsperson@lacitycollege.edu

Incident Reporting - Emergencies

The priority would be to seek medical attention if necessary, and if on campus contact the Sheriff's office at (323) 953-2911 to receive medical assistance. For student injuries on or off campus during a campus sanctioned event, including classes and labs, students must report any incidents to the sheriff's office and Rad. Tech. department as soon as they are able to file a campus injury report. The student will be asked for their student ID (Cub Card) or ID number, California DL/ID if they have one, as well as a description of what occurred. The officer will also mark down any injuries they observe and take photos of the injuries to attach to the report. This report will be used to document the incident and sent to senior leadership. Please note, the Radiologic Technology department follows the clinical training facility's injury reporting policies (if applicable) and all county, state, and national guidelines, regulations, and reporting. Please refer to our current campus [emergency plans and procedures](#).

Liability Insurance

Each student is required to purchase Liability Insurance. The premium is approximately \$68.00 for two years. The insurance is purchased through <http://www.proliability.com/> A copy of your liability insurance policy must be turned in to the Radiology Department immediately upon receipt.

Accommodations Statement

Students with a verified disability who may need a reasonable accommodation(s) for any class are encouraged to notify the instructor(s) and contact the Office of Special Services as soon as possible. All information will remain confidential.

Student Services Building, 1st Floor, (323) 953-4000 ext. 2270, oss@lacitycollege.edu

Uniforms

Students are required to wear scrub uniforms to RT 103, RT 104, RT 207, lab courses, and the Clinical Education Centers.

- Women and Men will purchase uniforms and accessories determined by the program.
- Students are not permitted to wear jeans.
- See Uniform Policy

Appearance

Professional appearance at all times is a reflection of your attitude toward your chosen profession.

*Please refer to the Uniform Policy

1. All uniforms must be clean and pressed at all times.
2. Shoes must be clean and polished at all times.
3. Hair is clean, neat, conservatively trimmed, and pulled up and off the shoulders at all times.
4. Nails must be clean at all times. No longer than .25 inch (.635 cm)
5. In the interest of personal and patient safety, jewelry will be limited to a watch, wedding rings, and stud earrings.
6. Name tags/ID badges must be worn when in uniform. The student shall bear all the costs of the name tag.
7. Radiation dosimeter badges (USB) must be worn (on the left side, collar level) at the Clinical Education Centers and when working the laboratory x-ray equipment on campus. Dosimeter badges are provided by the College and the clinical affiliates. (See *Appendix I – Radiation Safety Rules for Campus Laboratory Classes and Clinical Education Centers.*)

Personal Hygiene

As a professional, your personal hygiene is of utmost importance when working with other people at close range. Please consider the following:

1. Oral and dental hygiene.
2. Perspiration odor.
3. Perfumes, colognes, and smoking odors.

Change of Address

The student must notify, via email, the Program Director of any address, email, or telephone number changes as soon as possible.

Food

Students are not permitted to eat or drink in any class or labs. If students violate this rule, the instructor may ask them to leave the class.

Smoking

Smoking and vaping are not permitted in any room of the Radiologic Technology Department. LACC is a non-smoking campus.

R.T. Facility Maintenance

Proper care and cleanliness of all classrooms, radiographic equipment, and accessories is the responsibility of the student. Improper care and cleanliness of the classroom may result in physical injury to a student and/or faculty member. Failure to comply may result in disciplinary action.

Standards of Student Conduct – LACC Catalog

Students shall respect and obey civil and criminal law and shall be subject to legal penalties for violation of laws of the City, County, State, and Country. Student conduct in all the Los Angeles Community Colleges must conform to District and College rules and regulations. Violations of such rules and regulations, for which students are subject to disciplinary action, include, but are not limited to the following:

Board Rule 9803.10

Willful disobedience to directions of College officials acting in the performance of their duties.

Board Rule 9803.11

Violation of College rules and regulations including those concerning student organizations, the use of College facilities, or the time, place, and manner of public expression or distribution of materials.

Board Rule 9803.12

Dishonesty, such as cheating or knowingly furnishing false information to the College.

Board Rule 9803.13

Unauthorized entry to or use of the College facilities.

Board Rule 9803.14

Forgery, alteration, or misuse of College documents, records, or identification.

Board Rule 9803.15

Obstruction or disruption of classes, administration, disciplinary procedures, or authorized College activities.

Board Rule 9803.16

Theft of or damage to property belonging to the College, a member of the College Community, or a campus visitor.

Board Rule 9803.17

Disorderly, lewd, indecent, obscene, or offensive conduct or expression, which interferes with the College's primary educational responsibility or adversely affects a student's standing as a responsible member of the college community.

Board Rule 9803.18

Assault or battery, abuse, or any threat of force or violence directed toward any member of the College Community or campus visitor engaged in authorized activities.

Board Rule 9803.19

Use, possession, distribution, or presence on a campus or at any college sponsored function while under the influence of alcoholic beverages, narcotics, or other dangerous drugs, such as marijuana and lysergic acid diethylamide (LSD), except as expressly permitted by law.

Board Rule 9803.20

Possession, while on a college campus or at a college-sponsored function, of any object that might be used as a lethal weapon, is forbidden by all persons except members of faculty-sponsored, National Rifle Association affiliated clubs, while participating in sanctioned club activities, sworn peace officers, police officers, and other governmental employees charged with policing responsibilities.

Note: Enrollment in a class may be terminated by the instructor for two class sessions (students are allowed to make-up missed work) due to unsatisfactory student conduct, undue disrespect toward an instructor or administrator, or academic dishonesty.

LACC Radiology Technology Contingency/Crisis Plan

The contingency and crisis planning applies to all Los Angeles City College Radiologic Technology cohorts (i.e., students enrolled in prerequisites, students enrolled in the program).

The Los Angeles City Radiology Technology program has never been a Distance Education program. Upon unforeseen catastrophe circumstances (i.e., mass casualty event, interruption of utility services, pandemics, natural or catastrophic disasters (i.e., Earthquakes in California), civil disorders, and war, etc.) impact the program and our clinical sites operations, it is mandated to effectively change or migrate to Distance Education.

In light of the COVID-19 pandemic or any crisis, all traditional courses have been moved to Canvas/Zoom. Additionally, students are asked to be flexible if any emergent situations arise. Students who are enrolled in Distance Education must have internet access and Wi-Fi service in order to participate in the courses.

Unless the clinical sites have different requirements for those who have not been vaccinated, it is a requirement to have been vaccinated in order to register for classes and beginning clinical rotations. Clinic sites may limit the number of students they accept due to COVID-19.

To ensure the safety of program students and instructors, the Radiologic Technology program may take the following procedures or measures. All graduates will complete graduation requirements, including ARRT necessary competencies and successful completion of all curricula with a "C" or better.

Clinical changes are as follows:

- Assigned clinical site changes along with the schedule (date & time)
- Changes to the expectations for student participation involvement with Isolation Patients
- Extension of clinical course requirements beyond the expected completion date

Didactic changes are as follows:

- Class meeting location, schedule (date and time) changes
- Temporary utilization of distance education tools (i.e., Canvas and Zoom Collaborate) for class meetings

typically delivered face-to-face

- A limited number of students in the lab on campus (4-8 students; two per x-ray table)
- Extension of course requirements beyond the expected completion date

We are committed to ensuring you graduate on time from the LACC Radiology Technology program. However, extenuating circumstances may cause the program requirements to extend beyond the expected graduation date.

Expectations from Program Leadership:

- Timely communication via email with all of our faculties and clinical sites.
- Prioritization of students and faculty safety.
- Commitment to student professional development.
- Assurance that all students in the program successfully meet graduation requirements.

Grading System (See also Appendix I – Grading System)

Students must maintain a minimum grade of “C” (**75%**) in each course. All Clinical Education courses (RT 260, 280, 281, 282, 283) are graded as “Pass or No Pass” with a passing grade of 85% or higher. Courses in the Radiologic Technology Program are scheduled in sequence and offered only once per academic year. All courses must be completed in the semester attempted to remain in the program. Students not able to maintain a grade of “C” or better in their courses will be dismissed from the program.

Grounds for Dismissal

1. Academic Requirements: Students unable to maintain a final grade of “C” (**75%**) or better in any didactic courses, including the 85% threshold for Pass/No Pass in any RT Clinical Education classes, will be dismissed from the program.
2. Student Conduct: Students who violate the Los Angeles Community College Standards of Student Conduct, including furnishing false college and program documents, Violation of Los Angeles City College Student Misconduct Codes, Violation of ASRT/ARRT Code of Ethics, The Hippocratic Oath for Radiologic Technologist, Violation of ISRRT Code of Ethics will be dismissed from the program and cannot reapply for entry.
3. Clinical Education Center: Students who violate policies and procedures governing the operation of the radiology department will be dismissed. Violation of Hospital (Radiology Department & Volunteer Service) Policy & Procedure:
4. Performance of Required Tasks: Grounds for dismissal will develop when a student is able to master didactic knowledge but is unable to perform the required tasks at the clinical education centers. This includes passing all Clinical Education classes assigned during your clinical education experience.

***NOTE: The program will not guarantee placement in the same or a different clinical site.**

Reinstatement to the Program

Didactic and Clinical Education Courses: A student who fails any didactic or clinical portion of the Radiologic Technology Program must follow the procedure stated below for potential readmission to the RT Program.

NOTE: LACCD Board Policy 4225, allows a student to repeat a course in which a substandard grade was earned. Limitations to course repetition is described in LACCD AP 4225.

Procedure:

1. A formal grievance must be filed with the LACC Ombudsperson. (See Student Grievance Policy & Procedure)
2. An informal resolution must be agreed upon by the Ombudsperson, student, and RT Program (Director and Department Chair) for readmission into the program.
3. The initial informal resolution to retake the course is contingent upon the decision of the clinical site to allow the return of the student.
4. There is no guarantee that the RT program can place you in the same or a different clinical site.

Clinical Education Performance: Students dismissed due to lack of clinical performance will not be eligible for readmission into the program.

***NOTE: The program will not place you in another clinical site once you are dismissed from your assigned site.**

Attendance Requirement: Students who withdraw because of failure to meet the attendance requirement are not eligible for readmission into the Radiologic Technology program. (See Attendance policy)

Employment

Students assigned to Clinical Education Centers are not permitted to perform radiologic procedures in the department other than those that are required under the scope of the educational guidelines set forth by the program. However, a student may be employed on a part-time basis in positions at the facility other than that of a student technologist under supervision. Please check the clinical site policy to see whether a dual role as student and employee is allowed. Regardless, students are prohibited from being used as a substitute for regular radiology department staffing.

Counseling

Counseling is provided by the Program Director, Faculty, and Clinical Instructors of the respective clinical education centers. Areas of deficiencies and a plan for improvement are discussed with the student. The student is encouraged and given a reasonable amount of time to improve which may involve satisfying an “action plan” outlining areas of improvement and expected outcomes.

Counseling and evaluation will continue to assess the student’s progress. A student who fails to meet the basic requisites of the plan will be dismissed from the program.

Library – L.A.C.C. Learning Resource Center

Radiologic Technology books are available in the Radiologic Technology Department and the LACC library. Students should contact the library for a scheduled tour of the facilities and resources available to them.

Radiologic Technology Department – Resource Center

The Radiologic Technology Department maintains audiovisual and resource materials. Students should contact an instructor if they wish to use the available materials. Audiovisual and resource materials are only available for use in the Radiologic Technology Department.

Student Representative to Advisory Board

The class will elect a representative and alternate to the Los Angeles City College Radiologic Technology Advisory Board. The class representative will attend each meeting and are the means of communication between the class and the Advisory Board. In the event the elected representative cannot attend a meeting, an alternate will attend.

Student Placement in Clinical Education Centers

A lottery selection process conducted by the Radiologic Technology Program is used to place students in their respective clinical training sites. This process ensures each student has an equal opportunity to be selected to train at one of our affiliated sites.

In addition, a student intake process will be conducted prior to being assigned to a clinical education site. The purpose of this intake is for the prospective students to become acquainted with the clinical staff and for the clinical preceptors and staff to outline clinical performance expectations.

When program students (Juniors) begin their clinical training (RT260) at their assigned clinical site, the attendance policy will be strictly enforced.

Graduation

All Radiologic Technology students must receive the Associate Degree of Science in Radiologic Technology.

- Students are to refer to the current college catalog for graduation requirements. Graduation counseling is available in the Counseling Office. Additional counseling is available in the Radiologic Technology office.
- Application for graduation must be filed with the Graduation Clerk in the Admissions Office prior to the end of the ninth week of the Fall semester (date will vary).
- At the beginning of the Spring semester you are graduating, you must petition to graduate through LACC's Admissions & Records department.
- A copy of the graduation evaluation must be turned in to the Program Director no later than the second week of December (date will vary). Failure to comply may result in the student not being able to take the American Registry of Radiologic Technology Examination.

All Radiologic Technology students must:

- Pass and complete all didactic RT program courses, and general education courses needed to graduate with an A.S. Degree. (please check with the counseling department).
- Complete 1850 clinical hours (CA State) and meet all required mandatory and elective competencies (ARRT)
- Complete all Patient Care competency sign offs required by the ARRT.

Policy on Pre-Application of Eligibility for A.R.R.T. Certification and Registration (<https://www.arrt.org/>)

An individual who has been involved in a criminal proceeding or who has been charged with or convicted of a crime may file a pre-application with the ARRT to obtain a ruling on the impact of the situation on their eligibility for certification and registration. A charge or conviction of a plea of guilty to, or a plea of nolo contendere (no contest) to, an offense which is classified as a misdemeanor or felony constitutes a conviction for ARRT purposes. This includes situations in which the result is deferred or withheld adjudication or suspended or withheld sentence. This procedure may enable the individual who has been involved in a criminal proceeding or has a criminal conviction to avoid any delays or possible ineligibility in processing an Application for Examination that is made at the time of graduation from an approved program.

Certification

Students who complete the curriculum in Radiologic Technology, including the clinical education phase, will be eligible to sit for examinations prepared by the American Registry of Radiologic Technologists (ARRT) and Radiologic Health Section of the California Department of Public Health (CRT).

Clinical Schedule

The LACC radiology program has students scheduled at various hours weekly from 5:00 am to 7:00 pm, depending on the student's class schedule and clinical rotation. The clinical education schedule is full-time, 40 hours per week. This does not include courses taken on campus or online. Students follow the college calendar for holidays. Students meet regularly with the Clinical Coordinator and/or Program Director at the student's clinical site at prearranged times to evaluate the effectiveness of the clinical training.

Professional Organizations

The LACC radiology program requires all cohort students to become members of professional societies.

American Society of Radiologic Technologists (ASRT):

The American Society of Radiologic Technologists is the premier professional association for the medical imaging and radiation therapy community through education, advocacy, research, and innovation.

ASRT will help you prepare for your future and succeed in school. Members get access to study tools, practice exams, career planning tools, and much more.

California Society of Radiologic Technologists (CSRT):

The California Society of Radiologic Technologists is the only full-service professional organization representing the interests of more than 22,000 registered radiologic technologists and medical imaging professionals in California. The CSRT delivers valuable member benefits that assist and protect you as a member of the medical imaging community in California. Benefits feature a wide range of educational and career tools. In addition, your membership will allow the CSRT and its members to be a catalyst for healthcare improvement by fostering communication and networking among its members and the greater healthcare community.

Estimated Financial Cost

Legal residents of the State of California are required to pay nominal enrollment fees. Non-resident students are required by State law to pay non-resident tuition fees. Consult Los Angeles City College Admissions and Records for current fees. (Fees are subject to change per the State Legislature.) In addition, students may expect other fees and expenses during the length of the program.

Enrollment Fee	\$ 46 per unit (19 credit = \$3,542)
Associated Student Body Membership (optional)	\$ 7 (Fall/Spring) \$ 3 (Winter/Summer)
Health Fee	\$19 (Fall/Spring) \$16 (Winter/Summer)
Parking Fee (as of Spring 2023)	\$0
Identification Badge	\$8
Pre-entrance medical examination	\$200
Immunizations	\$200
Liability/Malpractice insurance	\$68 (annually)
Drug Testing and Background Check	\$100
Textbooks and supplies (entire program)	\$800
Professional organizations: student membership	
1. CSRT	\$30 (annually) x 2
2. ASRT	\$35 (annually) x2
Uniforms	\$280
OSL Dose Badges (replacement)	\$80
Rad Review subscription	\$250
Graduation fees & expenses	\$200
Graduation sashes	\$35
Graduation pins	\$25
Certification Examinations:	
1. ARRT Radiography Exam fee	\$225
2. CA DPH-RHB CRT permit – Radiography	\$112
3. CA DPH-RHB CRT permit – Fluoroscopy	\$112
Kettering Board Review Seminar	\$200
Total	\$7,362

Equitable Educational Opportunity - Conflict of Interest

I. Introduction

All JRCERT accredited education programs must ensure that the institution provides equitable learning opportunities for all students. This policy will aid our clinical locations and the LACC Radiologic Technology program in preventing, detecting, and correcting inequitable didactic and clinical training practices. The LACC RT Program must ensure that all students receive the same educational opportunities. To this end, students may receive an extra benefit if they have an instructor, Clinical Preceptor, or clinical staff employee who is a relative. Students must disclose any familial relationships that they have with LACC RT Program faculty, clinical training staff, or any employee in any of our clinical affiliates. Students' clinical competency forms and timesheets shall not be signed by relatives in all our approved Clinical Sites. The following outlines the procedure when such a situation exists.

II. Policy Statement

To ensure equitable learning opportunities for all our students in the RT Program, students will not be allowed to rotate at the same clinical site with any relative or family member, as this may be perceived by other students as an unfair advantage or possible “favoritism” when it comes to the clinical experience and evaluations. Other students may perceive they may not receive an equitable level of training or the same learning opportunities.

The LACC RT Program requires that **students MUST disclose the nature of the relationship directly to the LACC RT program.** Once disclosed, employees at any of our clinical sites are prohibited from directly supervising or evaluating their relatives and family friends.

III. Purpose of Policy

This policy is in support of the *JRCERT Standard 1.1: “...Policies and procedures must be fair, equitably applied, and readily available.”*

All students must receive the same didactic and clinical training opportunities. Therefore, it is necessary to outline the limits of a potential student-relative relationship in the didactic and clinical settings. Favoritism must be eliminated as a potentially unfair advantage, as other students may rightfully perceive they are not receiving the same teaching, clinical training, or other possible opportunities in an equitable manner.

IV. Definitions of Relative

This policy applies to ALL STUDENTS in the Los Angeles City College Radiologic Technology program as described by any of the following familial relationships.

A member of the immediate family of a student or a member of the immediate family of an employee's spouse/domestic partner, including but not limited to:

1. spouse/domestic partner
2. parent/step parent/parent in-law/step parent in-law/in loco parentis
3. child/stepchild/legal ward/foster child/adopted child
4. daughter/step daughter/daughter in-law/step daughter in-law
5. son/step son/son in-law/step son in-law
6. nephew/ niece/ first cousin
7. sister/step-sister/sister-in-law/step sister-in-law

Definition of Non-relatives:

A family member who is not connected to the student by blood, marriage, or adoption, e.g., a friend or acquaintance.

V. Reporting Procedure

Students must disclose the nature of the relationship in writing directly to the LACC RT Program. If applicable, this form must be completed and submitted to the Program Director or Department Chair at the same time as the [Student Affirmation Form](#) prior to the start of your first Fall semester in the Program.

This policy requires students to disclose a potential conflict of interest. If you have a family member who may be providing didactic or clinical instruction and training, this familial relationship must be disclosed. Please disclose a list of relatives' names and the clinical site/institution of employment. Violation of this policy is non-disclosure and could be grounds for discipline up to and including dismissal from the LACC Radiologic Technology Program.

Student Name: _____

Name of family member / significant other: _____

Signature: _____

Date: _____

Assigned Clinical Site: _____

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Appendix I Grading System

To standardize our grading system, all instructors will use the following grading scale:

A = 100-94%

B = 93-83%

C = 82-75%

D = 74-61%

F = 60% & below

Students must maintain a minimum grade of “C” (75%) in each course. All clinical education classes (RT 260, 280, 281, 282, 283) are “PASS or NO PASS” with a passing score of 85% or higher.

There are NO makeup quizzes, presentations, Midterm, or Final exams. There is NO repeat of any failed exam in any of the RT courses.

- **There is NO rounding up on any quiz, exam, lab practicum or final grade.**
- **Instructors will NOT throw out your lowest quiz grade.**
- **There is no reviewing of any exams taken. This includes the midterm and final exam after the student submits their exam and is graded.**
- **Students are NOT allowed to screen capture any quiz/exam questions posted on Canvas, it is a violation of publication rights and the college’s dishonesty policy.**

Exceptions for quizzes ONLY: Doctor's note, court note, police report, towing slip.

- 10% of your grade will be deducted for any make-up quizzes.
- Exams that meet makeup requirements must be made the day following the missed scheduled examination for instructors to administer and grade a make-up examination. Failure to do so will result in a grade of zero (0) for that examination.
- This includes being tardy for quizzes.

If you are tardy or absent for your Midterms or Final Exams/Practicums, there are **NO** make-up test(s). **The program is simulating the same environment and requirements as the ARRT Board examination testing centers.** All quizzes and examinations will be timed. In addition, it is very distracting to your classmates that showed up on time.

Appendix II

Radiation Safety Rules for Campus Laboratory Classes and Clinical Centers

The following rules have been established for your protection against ionizing radiation during campus laboratory classes and at the Clinical Education Centers. These rules are mandatory and must be followed without exception.

1. A Radiation Dosimeter (OSL) is provided to each student during the entire course of their training. Monitors must be properly oriented and must be worn at all times during labs and during their training at their assigned clinical sites. If protective aprons are used, the OSL monitor must be worn outside the apron, left side, at collar level so that any radiation reaching any part of the body will be recorded.
2. Except for three specific situations, you may not remain in a radiographic room at any time during activation of the tube (when x-rays are being generated). The three exceptions are **surgery, portables, and fluoroscopic work**, which are discussed below.
3. You must not hold or support a patient during exposure, nor will you hold or support a cassette during exposure, except in an emergency. If such an emergency arises, you must wear a protective apron and gloves.
4. During activation of the tube, you must not be in direct line with either tube or the patient. You must not observe the patient during exposure from an adjacent room or hall unless through a protective window. You must not “peek” around a door nor through a crack between the door and the wall.
5. During an exposure, do not place yourself in direct line with the central ray, even though you are wearing a lead apron and even though a lead shield is interposed between the tube and yourself. The tube must, in all cases, be pointing away from your body.
6. **Under no circumstances will you permit yourself or your fellow students (or any other human being) to serve as “patients” for test exposures or experimentation.**
7. If, during fluoroscopic procedures, you remain in the radiographic room, the following will prevail:
 - A lead apron must be worn at all times, or you must remain behind a lead protective screen.
 - The OSL badge will be worn as noted above.
 - You must stand as far from the patient and tube as possible, preferably at a right angle (90°), consistent with the conduct of the examination.
8. Do not, during the observation period (RT 260), make exposures on patients. You may assist in helping patients onto tables, etc., but only under the direct supervision of a staff technologist.

9. With the permission of the technologist, you may make test exposures on inanimate objects such as phantoms. In doing so, all radiation safety rules must be followed.
10. When assisting and/or performing radiographic procedures in surgery and/or at the bedside the following will prevail:
- A lead apron will be worn.
 - A OSL badge will be worn (see #1 above).
 - Stand as far from the patient and tube as possible.
 - Stand so that the central ray is pointing away from your body.
 - Observe all regulations which apply to work in surgery, such as preserving sterile fields, wearing surgical garments, etc.
11. **All students must perform all medical imaging procedures under the direct supervision of a qualified practitioner until a radiography student achieves competency.** The JRCERT defines direct supervision as a student being supervised by a qualified practitioner who reviews the procedure in relation to the student's achievement; evaluates the condition of the patient in relation to the student's knowledge; is present during the conduct of the procedure; and reviews and approves the procedure and/or image.
- Four areas that require direct supervision regardless of the level of competency:
1. Repeat x-rays
 2. Portables
 3. Fluoroscopy procedures
 4. OR surgery procedures
12. **All students must perform all medical imaging procedures under the indirect supervision of a qualified practitioner after a radiography student achieves competency.** The JRCERT defines indirect supervision as that supervision provided by a qualified practitioner immediately available to assist students regardless of the level of student achievement. Immediately available is interpreted as the physical presence of a qualified practitioner adjacent to the room or location where a radiographic procedure is being performed. This availability applies to all areas where ionizing radiation equipment is in use.
13. Repeat radiographic examinations: All radiologic technology students, regardless of the student's level of competency and in support of professional responsibility for the provision of quality patient care and radiation protection, **NON-DIAGNOSTIC RADIOGRAPHS SHALL BE REPEATED ONLY IN THE PRESENCE OF A QUALIFIED RADIOGRAPHER.**
14. FAILURE TO COMPLY WITH THIS POLICY WILL BE GROUNDS FOR [DISCIPLINARY ACTION](#). CONTINUED ABUSE WILL RESULT IN TERMINATION FROM THE PROGRAM.

Appendix III

2014 Addendum for High Exposure Dose (ALARA)

Annual Radiation Exposure Limits			
Whole Body (Annual) Dose for Occupational Workers	5,000 mRem/year (50 mSv) Stochastic Effects		
Lens of the Eye	15,000 mRem/year (150 mSv) Non-Stochastic Effects		
Extremities and Skin	50,000 mRem/year (500 mSv) Non-Stochastic Effects		
Fetal Entire Gestation	500 mRem/year (5 mSv)		
Fetal Monthly Dose Limit	50 mrem/year (0.5 mSv)		
General Population	100 mRem/year (1 mSv)		
Dosimeter	ALARA Level I	ALARA Level II	ALARA Level III
Whole Body (Monthly)	100 mRem (1mSv)	300 mRem (3 mSv)	500 mRem (5 mSv)
Whole Body (Quarterly)	300 mRem (3 mSv)	900 mRem (9 mSv)	1,500 mRem
Extremity (Monthly)	1,000 mRem (10 mSv)	1,000 mRem (10 mSv)	5,000 mRem (50 mSv)
Extremity (Quarterly)	300 mRem (3 mSv)	3,000 mRem (30 mSv)	15,000 mRem (150 mSv)
Declared Pregnant Worker (Monthly)	20 mRem (0.2 mSv)	40 mRem (0.4 mSv)	50 mRem (0.5 mSv)
ALARA I	Radiation Safety Officer Notified. Report Kept on File.		
ALARA II	Badged Radiation Employee/ Student receives a Report of Unusual Radiation Exposure (RURE)		
ALARA III	Badged Radiation Employee/ Student receives a Report of Unusual Radiation Exposure (RURE)		
	RSO performs a Review of a Worker Exposure Conditions and Procedures		

- The ALARA concept imposes lower operational dose limits that are even more restrictive than the maximum Legal dose limits shown in Table I above.
- This ensures an enhanced safety factor for what are already considered to be safe annual doses for radiation workers.

What are the ALARA Investigational Levels?

There are two types of ALARA investigational levels for external occupational radiation exposure as indicated by a dosimeter. If a worker's dose for any calendar month (30 days), calendar quarter (3 months), or calendar year (12 months) exceeds these values. An investigation is conducted by the RSO to determine if there are reasonable ways to reduce the dose levels.

Appendix IV
Radiation Protection Program – Policies and Procedures
(Excerpts from the full Radiation Protection Plan (RPP) for students)

Procedure:

The following safety rules have been established for the protection of the patient, other personnel, and you from ionizing radiation during your hospital observation, clinical education, and laboratory experience. These rules are a combination of international, state, and federal regulations and/or laws learned from human experience with ionizing radiation. These rules are mandatory, and any exception must be reported to the Department Manager/Clinical Instructor and/or Clinical Coordinator/Program Director as soon as possible.

Policy:

1. Regarding dosimetry badges and reports while enrolled in the program: No charge will be required to cover the cost of providing radiation dosimetry services for the student (including fetal badge).
 - a) An OSL dosimetry badge, properly placed, must be worn at ALL times during laboratory or clinical practice, including anytime you are completing your laboratory experiments. In other words, any time you are in a designated radiation area.
 - b) When protective aprons are used, the dosimetry badge must be placed above the apron, at collar level, left side.
 - c) It is the student's responsibility to submit the OSL radiation monitoring badge to your Clinical Coordinator or Clinical Education instructor by the 1st day of each new quarter. The student's clinical grade may be affected if he/she does not comply with this timeframe. Points will be deducted for late submissions.
 - d) The dose readings are available to students provided by Landauer's reports, and each student must adhere to FERPA privacy rules.
 - e) The most current dosimetry report will be available at the school on a quarterly basis.
 - f) Each monitored individual is responsible for reviewing his/her dosimetry report reading and documenting they have reviewed their reading by entering and initialing their reported dosimetry reading.
 - g) Immediately inform the Program Director/RSO if you lost, washed, accidentally expose, or otherwise damaged your dosimetry badge. In addition, a "Radiation Dosimetry Questionnaire" must be completed and submitted to the Program Director. Copies of this questionnaire are located in the classroom.
 - If a dosimetry report reading exceeds the dose limits, the student will be required to complete a *Radiation Exposure Report Questionnaire* and *LACC's District Supervisor's Report of Injury* to the Program Director to ascertain what factors might have contributed to the excessive exposure. You will receive a letter of concern and a copy of the letter will be placed in your file.
 - If the "Questionnaire" does not identify any accidental radiation explanation for your excessive reading, a letter of concern will be forwarded to your Clinical Instructor/Department Manager. The student's subsequent dosimetry report will be closely monitored to ensure that the problem has been resolved. If questions arise, a full investigation will ensue.

- h) Past dosimetry badge reports are filed indefinitely in the RT file room or the RSO/Program Director's office.
 - i) Upon graduation, students will receive one free copy of his/her termination dosimetry report. Copy and file this final dosimetry report for future reference.
 - j) Landauer OSL badges are the school's dosimetry provider. Student radiation exposures are monitored quarterly throughout the program and are maintained by the College as part of the student's permanent file.
2. When an X-ray exposure is about to be made, you MUST:
 - a) Leave the room, or
 - b) Stand behind the lead shield, or
 - c) Stand at least 6' away from the source, or
 - d) Otherwise, be suitably protected for surgery, portable and fluoroscopic work.
 3. Specifically, you must not hold or support a patient or test phantom nor hold or support an imaging receptor during an exposure.
 4. You may not observe the patient during exposure from an adjacent room or hall unless through a lead-glass protective window. You must NOT "peek" around a door nor through a crack between the door and wall.
 5. When sitting to rest in the hall, do not sit in direct line with the tube or radiographic table, even if it is not being used.
 6. During an exposure or procedure, do not place yourself in direct line to the primary beam, even though you are wearing a lead apron.
 7. Under no circumstances will you permit yourself or any other human being to serve as "patients" for test exposures or experimentation.
 8. If, during fluoroscopic procedures, you remain in the radiographic room the following will prevail:
 - a) A lead apron (preferably 0.5 mm lead equivalent) must be worn at all times or you must remain behind an adequate lead protective screen and not in visible line with either tube, patient or the x-ray phantom.
 - b) The dosimetry badge must be worn left side, above the lead apron at collar level.
 9. Do not, during the observation periods, make exposures on patients. You may assist by helping patients onto tables, etc., but only under direct supervision of a staff technologist.
 10. With permission of the principal staff technologist, you may make test exposures on inanimate objects. In so doing, all radiation safety rules must be followed as well as tube safety factors, etc.

11. When observing radiologic procedures in the operating room and bedsides portables:
 - a. A lead apron must be worn.
 - b. A dosimetry badge must be worn above the lead apron at collar level, left side.
 - c. Stand as far from the patient and tube as allowable.
 - d. Stand so that the central ray is pointing away from your body.
 - e. Observe all regulations which apply to work in surgery, such as preserving sterile fields, wearing surgical garments, etc. The staff technologist will provide details.
 - f. In addition, when observing, you must step outside the room, if you cannot stand at least 10 feet from the patient or stand behind the staff technologist during actual exposure.
12. Permission to make actual exposure on patients will be determined by:
 - a. The opinions of the Radiologist/Department Manager/Clinical Instructor.
 - b. The opinions of the Program Director/Clinical Coordinator/Clinical Supervisor.
 - c. Your own feeling of security and competence.
13. Items pertinent to patient radiation safety include:
 - a. Make sure careful collimation is used to restrict the X-ray beam to the area of clinical interest only. (The X-ray field may **never** be larger than the size of the image receptor used.)
 - b. Use gonadal shielding where and when appropriate. Review your clinical facility's policies regarding the use of gonadal shielding.
 - c. Make sure the X-ray room is cleared of all nonessential persons before an exposure is made.
 - d. If an individual is needed to hold a patient, use appropriate protective apparel such as a leaded apron (at least 0.5 mm of Pb equivalence) and lead gloves or lead shields.
14. Items pertinent to the technical aspects of the radiographic procedure and radiation protection (if applicable)
 - a. Use the best image receptor/grid combination for the lowest dose practicable and commensurate with the objectives of the radiographic procedure.
 - b. Know exactly what examination and which view or views are to be taken
 - c. Position the patient correctly for the required examination/position and view before making the actual exposure.
 - d. Use high (optimum) kilovolt peak (kVp) and low milliamperage-seconds (mAs) techniques for low dose radiography, consistent with obtaining a diagnostic quality image unless otherwise indicated by facility protocol.
 - e. Take steps to avoid patient motion by clearly instructing patients not to move, by using appropriate immobilization positioning aids, and by keeping the patient comfortable and under constant observation.
 - f. Help keep image receptors clean.
 - g. Place positioning markers correctly on the image receptor.
 - h. No eating or drinking in the working area of the department.
15. Failure to obtain diagnostic quality radiographs with the least exposure to the patient for the radiographic procedure required means failure to meet the accepted standard of care. A copy of the Department of Public Health's NOTICE TO EMPLOYEES (RH 2364) is posted in the lab. Current copies of Title 17

“California Radiation Control Regulations” as well as 10 CFR Part 20 “Standards for Protection Against Ionizing Radiation” can be retrieved online. Steps on how to access Title 17 are posted in the hallway.

16. Energized Labs- supervision: student utilization of energized laboratories **MUST** be under the guidance of a qualified practitioner; otherwise, the radiations exposures mechanism must be disabled.
 - a. If ionizing radiation is being utilized during laboratory sessions, a radiation warning sign indicating one is entering a potential radiation area.
 - b. The entrance to each x-ray lab suite is posted with an acceptable radiation warning sign indicating one is entering a potential radiation area.
17. The school’s designated Radiation Safety Officer (RSO) is Julie Washenik, R.T. (R)(M). The Alternate Radiation Safety Officer (RSO) is Joyce Obeng, R.T.(R)(M)(CT).
18. Procedures for ensuring that the combined occupational total effective dose equivalent (TEDE) to any student/employee receiving occupational exposure at your facility and at other facilities does not exceed 5 rem (50 mSv) per year.
19. Students and faculty dosimetry reports are monitored frequently to ensure their combined occupational total effective dose equivalent does not exceed 5 rem (50 mSv) per year and are below the ALARA Levels set by the LACC RT Program. A student’s exposure is investigated further if their quarterly deep dose equivalent is greater than 125 mRem (1.25 mSv).

Appendix V

Declaration of Pregnancy

Student Name: _____ Date: _____

1. This declaration is VOLUNTARY. You do not have to declare your pregnancy unless you choose to do so. By declaring your pregnancy Los Angeles City College, Radiologic Technology Program and the clinical affiliates will take all precautions necessary to keep the radiation dose to the embryo/fetus at or below the legal limits in accordance with the Nuclear Regulatory Commission, 10 CFR 20. 1208. **Additionally, you have the right to withdraw your declaration (must do so in writing).**
2. The student was informed on _____ of the risks of occupational exposure of a fetus and fertile women as outlined in the appendix to Regulatory Guide 8.13 of the U.S. Nuclear Regulatory Commission, entitled Possible Health Risks to Children of Women Who Are Exposed to Radiation During Pregnancy. **Students initial: _____**
3. Los Angeles City College and the Clinical Affiliate agree to furnish the student with an additional dosimeter badge for embryo/fetal monitoring during the gestational period. The student will wear one dosimeter badge on the collar of the uniform and the additional dosimeter badge at waist level to measure fetal dose. When wearing a lead apron, the second badge will be worn at the waist level under the lead apron. The radiation monitoring company will be informed, in writing, that the second dosimeter badge report is for fetal monitoring and a separate report from the mother's dose record will be recorded.
4. Pregnancy does not preclude a student's continuation in the program. The student's clinical activities may be changed within the radiography curriculum to minimize the radiation exposure to the embryo/fetus.
5. The student will be advised to consult with her personal physician to help her decide whether she should continue or withdraw from the Radiologic Technology Program. **A written statement from the physician as to their determination of the student's ability to continue in the program will be requested and discussed with the student.**
6. The student will be informed that she has the option to temporarily withdraw from the program when the pregnancy interferes with her abilities to safely perform the required duties of a student radiographer. **Additionally, the student has the option to continue in the education program without modification. If the student elects to temporarily withdraw from the program the student can return to the program and complete the requirements of the program without modification within a three month period post- partum {No Exceptions}.** If a student does not return or notify the program within the three-month time period (needs to be in writing) the student will be excluded from the program.

A formal letter of resignation will be required, and the student must go through the entire application process again

7. The student's signature indicates a written notice of **"Voluntary Declaration of Pregnancy"** **(Page 37 of the Student Manual)** and or a written notice of **"Voluntary Declaration Revocation of Pregnancy"** **(Page 39 of the Student Manual)**

In order to qualify for graduation, the student must satisfactorily complete all of the classroom and externship (clinical) requirements and credits necessary to fulfill the Los Angeles City College Radiologic Technology Program graduation requirements.

Student Initials: _____

Declaration of Pregnancy Form

Voluntary Declaration of Pregnancy

Student Name: _____ LACC ID: _____
Date of Birth: _____ Phone Number: _____

I am submitting this Declaration of Pregnancy to inform the Radiation Safety Officer (RSO) that I am pregnant. The estimated date of delivery is _____. I have made the decision to permit application of the embryo/fetal dose limits specified by the Nuclear Regulatory Commission (NRC) in Title 10 Code of Federal Regulations Part 20.1208 (10 CFR 20.1208) or the State of California Ionizing Radiation Rules as applicable.

Declarant must choose one of the following options:

I prefer that dosimeters issued to me for fetal monitoring and corresponding reports of results be:

- _____ held at the RSO office where I will arrange to personally collect and exchange them at the start of each wear period.
- _____ sent to me via the contact person of the Dosimeter series assigned to the authorized user or facility where I carry out my Clinical Training, at the start of each wear period.

I have read and understand the written material regarding the potential health effects from exposure to ionizing radiation published in Regulatory Guide 8.13 by the Nuclear Regulatory Commission and distributed by RSO. I also have read and understand the written explanatory information on the reverse side of this form. The decision to declare my pregnancy to the Radiation Safety Service is a personal choice which I have made freely.

I understand that by making this declaration:

1. The fetal dose limits specified in 10 CFR 20.1208 (NRC) will become applicable for the entire period of gestation and can result in RSO placing restrictions on work I perform using radioactive materials or other sources of ionizing radiation for the sole purpose of ensuring compliance with the embryo/fetal dose limits specified in 10 CFR 20.1208 (NRC) and that such restrictions might otherwise not be imposed absent this declaration.
2. I may revoke this declaration at any time without explanation by submitting a signed and dated Revocation of Declaration of Pregnancy to RSO.
3. Stipulation Regarding Didactic Training
 - a) While enrolled in the program, I agree to attend and complete all classes in which I have registered and complete all class assignments in a manner consistent with my peers within the guidelines set forth by the individual instructor and LA City College. I understand that at the instructor's option, I am not to be given any allowances regarding absenteeism or quality or quantity of didactic work as required for the individual courses.
 - b) Regarding my participation during experiments utilizing the live lab on campus or any experiment requiring an ionizing radiation source, I understand, agree with, and shall adhere to the provision set forth in the following section of this policy.

- c) While enrolled in the program, I agree to attend and complete all classes in which I have registered and complete all class assignments in a manner consistent with my peers within the guidelines set forth by the individual instructor and LA City College. I understand that at the instructor's option, I am not to be given any allowances regarding absenteeism or quality or quantity of didactic work as required for the individual courses.
- d) Regarding my participation during experiments utilizing the live lab on campus or any experiment requiring an ionizing radiation source, I understand, agree with, and shall adhere to the provision set forth in the following section of this policy.
- e) **Accommodation:** In the event that I am unable to successfully complete the course objectives and requirements, I understand that I may be dropped from the program at the completion of the semester. I also understand that once my pregnancy is over, reinstatement to the program will be set for the first available opening at my level of training. After this period of time has elapsed, I may be required to remediate before being formally accepted back into the program at the appropriate level of training.

2. Stipulation Regarding Clinical Training

- a) I have read the following publications that have been provided:
 - U.S. Nuclear Regulatory Commission - Regulatory Guide - Office of Nuclear Regulatory Research: Regulatory Guide 8.13 - Instruction Concerning Prenatal Radiation Exposure, revision 3, June 1999.
 - U.S. Nuclear Regulatory Commission - Regulatory Guide - Office of Nuclear Regulatory Research: Appendix VI: Questions & Answers Concerning Prenatal Radiation Exposure.

Student Signature _____

Date_____

Program Director Signature _____

Date_____

RSO Signature_____

Date_____

Revocation of Pregnancy Form
Voluntary Pregnancy Declaration Revocation Form

Student Name: _____ LACC ID: _____
Date of Birth: _____ Phone Number: _____
Date of Declaration of Pregnancy to RSO: _____

I wish to formally notify the Radiation Safety Officer (RSO) that, as of this date, **I am revoking the Declaration of Pregnancy** I filed with RSO on the date shown above. Included with this notice are any unreturned pregnancy monitor dosimeters that were still in my possession. Please arrange to end the issuance of any additional pregnancy monitor dosimeters.

I have read and understand the written material regarding the potential health effects from exposure to ionizing radiation published in Regulatory Guide 8.13 by the Nuclear Regulatory Commission and distributed by RSO. The decision to revoke my prior declaration of pregnancy to Radiation Safety Service is a personal choice which I have made freely.

I understand that by making this declaration, the fetal dose limits specified in 10 CFR 20.1208 will no longer be applicable for any remaining period of gestation. This revocation terminates any previous restrictions on work I perform using radioactive materials or other sources of ionizing radiation, that had been imposed by RSO, for the sole purpose of ensuring compliance with the embryo/fetal dose limits specified in 10 CFR 20.1208.

Student Signature _____ Date _____

Program Director Signature _____ Date _____

RSO Signature _____ Date _____

Appendix VI

Questions and Answers Concerning Prenatal Radiation Exposure (Addendum to Pregnancy Policy)

1. Why am I receiving this information?

The NRC's regulations (in 10 CFR 19.12, "Instructions to Workers") require that licensees instruct individuals working with licensed radioactive materials in radiation protection as appropriate for the situation. The instruction below describes information that occupational workers and their supervisors should know about the radiation exposure of the embryo/fetus of pregnant women. The regulations allow a pregnant woman to decide whether she wants to formally declare her pregnancy to take advantage of lower dose limits for the embryo/fetus. This instruction provides information to help women make an informed decision whether to declare a pregnancy.

2. If I become pregnant, am I required to declare my pregnancy?

No. The choice whether to declare your pregnancy is completely voluntary. If you choose to declare your pregnancy, you must do so in writing and a lower radiation dose limit will apply to your embryo/fetus. If you choose not to declare your pregnancy, you and your embryo/fetus will continue to be subject to the same radiation dose limits that apply to other occupational workers.

3. If I declare my pregnancy in writing, what happens?

If you choose to declare your pregnancy in writing, the licensee must take measures to limit the dose to your embryo/fetus to 0.5 rem (5 mSv) during the entire pregnancy. This is one-tenth of the dose that an occupational worker may receive in a year. If you have already received a dose exceeding 0.5 rem (5 mSv) in the period between conception and the declaration of your pregnancy, an additional dose of 0.05 rem (0.5 mSv) is allowed during the remainder of the pregnancy. In addition, 10 CFR 20.1208, "Dose to an Embryo/Fetus." Requires licensees to make efforts to avoid substantial variation above a uniform monthly dose rate so that all the 0.5 rem (5 mSv) allowed dose does not occur in a short period during the pregnancy. This may mean that, if you declare your pregnancy, the licensee may not permit you to do some of your normal job functions if those functions would have allowed you to receive more than 0.5 rem (5 mSv), and you may not be able to have some emergency response responsibilities.

4. Why do the regulations have a lower dose limit for the embryo/fetus of a declared pregnant woman than for a pregnant worker who has not declared?

A lower dose limit for the embryo/fetus of a declared pregnant woman is based on a consideration of greater sensitivity to radiation of the embryo/fetus and the involuntary nature of the exposure. Several scientific advisory groups have recommended (References 1 and 2) that the dose to the embryo/fetus be limited to a fraction of the occupational dose limit.

5. What are the potentially harmful effects of radiation exposure to my embryo/fetus?

The occurrence and severity of health effects caused by ionizing radiation are dependent upon the type and total dose of radiation received, as well as the time period over which the exposure was received. See Regulatory Guide 8.29, "Instruction Concerning Risks from Occupational Exposure"

(Ref. 3), for more information. The main concern is embryo/fetal susceptibility to the harmful effects of radiation such as cancer.

6. Are there any risks of genetic defects?

Although radiation injury has been induced experimentally in rodents and insects, and in the experiments was transmitted and became manifest as hereditary disorders in their offspring, radiation has not been identified as a cause of such effect in humans. Therefore, the risk of genetic effects attributable to radiation exposure is speculative. For example, no genetic effects have been documented in any of the Japanese atomic bomb survivors, their children, or their grandchildren.

7. What if I decide that I do not want any radiation exposure at all during my pregnancy?

You may ask your employer for a job that does not involve any exposure at all to occupational radiation dose, but your employer is not obligated to provide you with a job involving no radiation exposure. Even if you receive no occupational exposure at all, your embryo/fetus will receive some radiation dose (on average 75 mrem (0.75 mSv) during your pregnancy from natural background radiation. The NRC has reviewed the available scientific literature and concluded that the 0.5 rem (5 mSv) limit 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. If this dose limit is exceeded, the total lifetime risk of cancer to the embryo/fetus may increase incrementally. However, the decision on what level of risk to accept is yours. More detailed information on potential risk to the embryo/fetus from radiation exposure can be found in References 2-10.

8. What effect will formally declaring my pregnancy have on my job status?

Only the licensee can tell you what effect a written declaration of pregnancy will have on your job status. As part of your radiation safety training, the licensee should tell you the company's policies with respect to the job status of declared pregnant women. In addition, before you declare your pregnancy, you may want to talk to your supervisor or your radiation safety officer and ask what a declaration of pregnancy would mean specifically for you and your job status.

In many cases, you can continue in your present job with no change and still meet the dose limit for the embryo/fetus. For example, most commercial power reactor workers (approximately 93%) receive, in 12 months, occupational radiation doses that are less than 0.5 rem (5 mSv) (Ref. 11). The licensee may also consider the likelihood of increased radiation exposures from accidents and abnormal events before making a decision to allow you to continue in your present job. If your current work might cause the dose to your embryo/fetus to exceed 0.5 rem (5 mSv), the licensee has various options. It is possible that the licensee can and will make a reasonable accommodation that will allow you to continue performing your current job, for example, by having another qualified employee do a small part of the job that accounts for some of your radiation exposure.

9. What information must I provide in my written declaration of pregnancy?

You should provide in writing your name, a declaration that you are pregnant, the estimated date of conception (only the month and year need to be given), and the date that you give the letter to the licensee. You may use a form letter the licensee has provided to you or write your own letter.

10. What information must I provide in my written declaration of pregnancy?

You should provide in writing your name, a declaration that you are pregnant, the estimated date of conception (only the month and year need to be given), and the date that you give the letter to the licensee. You may use a form letter the licensee has provided to you or write your own letter.

11. To declare my pregnancy, do I have to have documented medical proof that I am pregnant?

NRC regulations do not require that you provide medical proof of your pregnancy. However, NRC regulations do not preclude the licensee from requesting medical documentation of your pregnancy, especially if a change in your duties is necessary in order to comply with the 0.5 rem (5 mSv) dose limit.

12. Can I tell the licensee orally rather than in writing that I am pregnant?

No. The regulations require that the declaration must be in writing.

13. If I have not declared my pregnancy in writing, but the licensee suspects that I am pregnant, do the lower dose limits apply?

No. The lower dose limits for pregnant women apply only if you have declared your pregnancy in writing. The United States Supreme Court has ruled (in *United Automobile Workers International Union v. Johnson Controls, Inc.*, 1991) that “Decisions about the welfare of future children must be left to the parents who conceive, bear, support, and raise them rather than to the employers who hire those parents” (Reference 7). The Supreme Court also ruled that your employer may not restrict you from a specific job “because of concerns about the next generation.” Thus, the lower limits apply only if you choose to declare your pregnancy in writing.

14. If I am planning to become pregnant but am not yet pregnant and I inform the licensee of that in writing, do the lower dose limits apply?

No. The requirement for lower limits applies only if you declare in writing that you are already pregnant.

15. What if I have a miscarriage or find out that I am not pregnant?

If you have declared your pregnancy in writing, you should promptly inform the licensee in writing that you are no longer pregnant. However, if you have not formally declared your pregnancy in writing, you do not need to inform the licensee of your nonpregnant status.

16. How long is the lower dose limit in effect?

The dose to the embryo/fetus must be limited until you withdraw your declaration in writing, or you inform the licensee in writing that you are no longer pregnant. If the declaration is not withdrawn, the written declaration may be considered expired one year after submission.

16. If I have declared my pregnancy in writing, can I revoke my declaration of pregnancy even if I am still pregnant?

Yes, you may. The choice is entirely yours. If you revoke your declaration of pregnancy, the lower dose limit for the embryo/fetus no longer applies.

17. What if I work under contract at a licensed facility?

The regulations state that you should formally declare your pregnancy to the licensee in writing. The licensee has the responsibility to limit the dose to the embryo/fetus.

18. Where can I get additional information?

The references to this Appendix contain helpful information, especially Reference 3, NRC's Regulatory Guide 8.29, "Instruction Concerning Risks from Occupational Radiation Exposure," for general information on radiation risks. The licensee should be able to give this document to you.

For information on legal aspects, see Reference 7, "The Rock and the Hard Place: Employer Liability to Fertile or Pregnant Employees and Their Unborn Children—What Can the Employer Do?", which is an article in the journal Radiation Protection Management.

You may telephone the NRC Headquarters at (301) 415-7000. Legal questions should be directed to the Office of the General Counsel, and technical questions should be directed to the Division of Industrial and Medical Nuclear Safety.

You may also telephone the NRC Regional Offices at the following numbers: Region I, (610) 337-5000; Region II, (404) 562-4400; Region III, (630) 829-9500; and Region IV, (817) 860-8100. Legal questions should be directed to the Regional Counsel, and technical questions should be directed to the Division of Nuclear Materials Safety.

Appendix VII

MRI Safety Policy

Magnetic Resonance Imaging (MRI) and Ferromagnetic Safety Policy

Although the majority of students' observation and clinical experience will be in conventional diagnostic radiology, students may be given a chance to observe, tour, or perform a particular rotation in the Magnetic Resonance Imaging (MRI) department. Students must follow the following regulations at all times while in the MRI environment in order to safeguard their safety and the safety of others in the department:

1. The clinical and safety rules and screening requirements for MRIs at each facility must be followed and/or completed.
2. Enter the MRI suite only if you have been cleared and are accompanied by an MRI technologist.
3. Assume that the magnet is constantly turned on.
4. Most metallic objects, including oxygen tanks, wheelchairs, carts, monitors, IV poles, laundry hampers, tools, and furniture, are absolutely forbidden from being brought inside the MRI room because they can become projectiles, causing significant damage or death and/or equipment failure. The MRI department has MRI-compliant medical equipment accessible for use; do not borrow or use this equipment in other parts of the medical imaging department.
5. Before entering the MRI room, all ferromagnetic materials must be removed. The following are some of them: purse, wallet, money clip, credit cards or other cards with magnetic strips, electronic devices like beepers or cell phones, hearing aids, metallic jewelry (including all piercings) and watches, pens, paper clips, keys, nail clippers, coins, pocket knives, hair barrettes, hairpins, shoes, belt buckles, safety pins, and any article of clothing with a metallic zipper, buttons, snaps, hooks, or underwires.
6. If relevant, inform the supervising technologist or program faculty of any known indwelling metallic device(s) or fragment(s) before entering an MRI scan room to avoid internal harm as mentioned below.

In addition to the personal objects specified, students should be aware that any metallic implants, bullets, shrapnel, or other similar metallic fragments in the body may constitute a health concern in the MRI suite since they may shift position in reaction to the magnetic field, potentially causing damage. Furthermore, the scanner's magnetic field can harm an external hearing aid or cause a heart pacemaker to malfunction.

Items that could pose a health risk or cause other issues in the MRI examination room include:

- Cardiac pacemaker, wires, heart valve(s) or implanted cardioverter defibrillator (ICD)
- Neurostimulator system
- Aneurysm clip(s)
- Metallic implant(s) or prostheses
- Implanted drug infusion device
- History of welding, grinding or metal injuries of or near the eye
- Shrapnel, bullet(s), BB's, or pellets
- Permanent cosmetics or tattoos (if being scanned)

- Dentures/teeth with magnetic keepers
- Eye, ear/cochlear, or other implants
- Medication patches that contain metal foil (i.e., transdermal patch)

The following items are permitted in the MRI suite and do not constitute a harm to the student or other people:

- Intrauterine devices (IUD's)
- Gastric bypass devices (lap bands)
- Most cerebrospinal fluid (CSF) shunts.

MRI Safety Acknowledgement

As a student in the Los Angeles City College Radiology Program, I _____ acknowledges that I have read and comprehend the MRI Safety Policy. It is my responsibility to exercise the policy and procedures within the document. In order to ensure that you are aware, read and comprehend the MRI Safety Policies and Procedures, you are required to sign at the bottom of this statement prior to onboarding your assigned clinical site. By your signature below, you are acknowledging that you are aware of and are accountable for compliance with the MRI Safety Policy and Procedures.

Student Name: _____

Signature: _____

Date: _____

Appendix VIII

LOS ANGELES CITY COLLEGE STUDENT CONDUCT FORM

Please complete this form whenever you take action against a student for violating the Standards of Student Conduct. Please send it to your department chair/supervisor and holmesj@lacc.edu Dr. J. Holmes, Dean. This form will be filed in a general folder for reference in the case of repeat violations. The student may receive notification of alleged violations or be contacted to make an appointment with the college disciplinarian.

Student's Name: _____ Date _____ Time _____
Student ID # _____ Program/Service _____ Location _____
Course # _____ Section # _____ Who is the Area Dean? _____

See other side of this form and place a check by the appropriate codes of conduct that you believe were violated. Explain below the facts and details substantiating this charge.

Indicate action taken: ☐ Warning: ☐ Verbal ☐ Written
☐ Suspended from class/activity in progress
☐ Suspended from class/activity in progress and next class/activity
Please explain _____

Sheriff's report filed? Yes No Referred to Student Health Center for counseling? Yes No

Instructor's/Supervisor's Name (Print) Instructor's/Supervisor's Signature Date

----- Give lower portion to student if possible----- X -----

LACC STUDENT CONDUCT FORM

Student's Name _____ Date _____ Time _____
Program/Service _____ Location _____
Course _____ Section # _____

You are charged with violation(s) of the Standards of Student Conduct. The Standards are listed in the Student Handbook, the Class Schedule and the College Catalog. You can see them on the Los Angeles Community College District's website at www.lacc.edu. Select "About Us", then select "Board Rules", within Chapter IX, Article VIII.

You have been issued a warning or suspended from a college class, program, or activity for 1 - 2 days. This will be reported to the College Disciplinarian, Dean of Special Programs. This violation or another violation of the Code of Conduct may lead to more severe discipline which will become a part of your college record.

Indicate action taken: ☐ Warning: ☐ Verbal ☐ Written
☐ Suspended from class/activity in progress
☐ Suspended from class/activity in progress and next class/activity
Please explain _____

Instructor's/Supervisor's Name (Print) Instructor's/Supervisor's Signature Date

StudentConductForm5-11 (2)

9/11/19

STANDARDS OF STUDENT CONDUCT

- 9803.10 **Willful Disobedience** to directions of college officials acting in the performance of their duties.
- 9803.11 **Violations of College Rules and Regulations**, including those concerning student organizations, the use of college facility, or the time, place, and manner of public expression or distribution of materials.
- 9803.12 **Dishonesty**, such as cheating, or knowingly furnishing false information to the colleges.
- 9803.13 **Unauthorized Entry** to or use of the college facilities.
- 9803.14 **College Documents**. Forgery, alteration, or misuse of college documents, records, or identification.
- 9803.15 **Disruption of Classes**. Obstruction or disruption of classes, administration, disciplinary procedures, or authorized college activities.
- 9803.16 **Theft of or Damage to Property** belonging to the college, a member of the college community, or a campus visitor.
- 9803.17 **Interference with Peace of College**. The malicious or willful disturbance of the peace or quiet of any of the Los Angeles Community Colleges by loud or unusual noise, or any threat, challenge to fight, fight, or violation of any rules of conduct set forth in this Article.
Any person whose conduct violates this section shall be considered to have interfered with the peaceful conduct of the activities of the college when such acts are committed.
- 9803.18 **Assault or Battery**, abuse, or any threat of force or violence directed toward any member of the college community or campus visitor engaged in authorized activities.
- 9803.19 **Alcohol and Drugs**. Any possession of controlled substances which would constitute a violation of Health and Safety Code section 11350 or Business and Professions Code section 4230, any use of controlled substances the possession of which are prohibited by same, or any possession or use of alcoholic beverages while on any property owned or used by the District or colleges of the District. "Controlled substance", as used in this section, includes but are not limited to the following drugs and narcotics: a) opiates, opium, and opium derivatives, b) mescaline, c) hallucinogenic substances, d) peyote, e) marijuana, f) stimulants and depressants, g) cocaine.
- 9803.20 **Lethal Weapons**. Possession, while on a college campus or at a college-sponsored function, of any object that might be used as a lethal weapon is forbidden by all persons except sworn peace officers, police officers, and other government employees charged with policing responsibilities.
- 9803.21 **Discriminatory Behavior**. Behavior while on a college campus or at a college-sponsored function, inconsistent with the District's non-discrimination policy, which requires that all programs and activities of the Los Angeles Community College District be operated in a manner which is free of discrimination on the basis of race, color, national origin, ancestry, religion, creed, sex, pregnancy, marital status, sexual orientation, age, handicap or veteran status.
- 9803.22 **Unlawful Assembly**. Any assemblage of two or more persons to 1) do an unlawful act; or, 2) do a lawful act in a violent, boisterous or tumultuous manner.
- 9803.23 **Conspiring to Perform Illegal Acts**. Any agreement between two or more persons to perform an illegal act.
- 9803.24 **Threatening Behavior**. A direct or implied expression of intent to inflict physical or mental/emotional harm and/or actions, such as stalking, which a reasonable person would perceive as a threat to personal safety or property. Threats may include verbal statement, written statements, telephone threats or physical threats.
- 9803.25 **Disorderly Conduct**. Conduct that may be considered disorderly includes: lewd or indecent attire or behavior that disrupts classes or college activities; breach of the peace of the college; aiding, or inciting another person to breach the peace of college premises or functions.
- 9803.26 **Theft or Abuse of Computer Resources** including but not limited to: a) unauthorized entry into a file to use, read, or change the contents, or for any other purpose; b) unauthorized transfer of a file; c) unauthorized use of another individual's identification or password; d) use of computing facilities to interfere with the work of a student, faculty member or college official, or to alter college or district records; e) use of unlicensed software; f) unauthorized copying of software; g) use of computing facilities to access, send or engage in messages which are obscene, threatening, defamatory, present a clear and present danger, violate a lawful regulation and/or substantially disrupt the orderly operation of a college campus; h) use of computing facilities to interfere with the regular operation of the college or district computing system.
- 9803.27 **Performance of an Illegal Act**. Conduct while present on a college campus or at a location operated and/or controlled by the District or at a District-sponsored event, which is prohibited by local, State, or federal law.
- 9804 **Interference with Classes**. Every person who, by physical force, willfully obstructs, or attempts to obstruct, any student or teacher seeking to attend or instruct classes at any of the campuses or facilities owned, controlled or administered by the Board of Trustees of the Los Angeles Community College District, is punishable by a fine not exceeding five hundred dollars (\$500) or imprisonment in a county jail not exceed one year, or by both such fine and imprisonment. As used in this section "physical force" includes, but is not limited to, use of one's person, individually or in concert with others, to impeded access to or movement within or otherwise to obstruct the students or teachers of the classes to which the premises are devoted.
- 9805 **Interference with Performance of Duties of Employees**. Action to cause, or attempt to cause, any employee of the District to do, or refrain from doing, any act in the performance of his/her duties, by means of a threat to inflict any injury upon any person or property
- 9805.10 **Assault or Abuse of Instructor**. Assault or abuse of any instructor employed by the District in the presence or hearing of a community college student or in the presence of other community college personnel or students and at a place which is on District premises or public sidewalks, streets, or other public ways adjacent to school premises, or at some other place where the instructor is required to be in connection with assigned college activities.
- 9806 **Unsafe Conduct**. Conduct which poses a threat of harm to the individual and/or to others. This includes, but is not limited to, the following types of conduct: Unsafe conduct in connection with a Health Services Program (e.g. Nursing, Dental Hygiene, etc.); failure to follow safety direction of District and/or college staff; willful disregard to safety rules as adopted by the District and/or college; negligent behavior which creates an unsafe environment.

[illegible]

STUDENT: _____

DATE: _____

☐ Needs Improvement

☐ Is Unsatisfactory

Action Taken:

Step I: Verbal Warning ☐

Step II: Written Warning ☐

Step III: Counseling/Suspension □

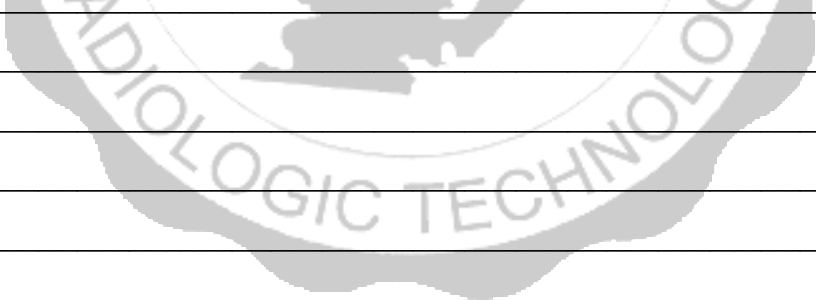
Step IV: Probation ☐

Step V: Dismissal \square

Action Taken Date:

*Suspension: Students **must** be sent home for day(s).

Behaviors/Academic:



Required behaviors to successfully meet objectives/recommendations for remediation:

Student's plan to successfully complete objectives/improve:

Timeframe for improvements:

From: _____ **To:** _____

Follow-up on improvements/evidence of improvements: (please provide dates if possible)

Student signature: _____ **Date:** _____

Instructor/CC signature: _____ **Date:** _____

Witness (if applicable): _____ **Date:** _____

Example of Actions/Behavior requiring student disciplinary or dismissal action form:

- What constitutes Write up/dismissals?
 - Chronic absenteeism/tardiness, taking long breaks, or unscheduled/unapproved breaks
 - The communication barrier that impacts patient care (i.e., disrespectful behavior, unprofessional, argumentative with patients, technologists, radiologists, and clinical instructors)
 - Not following technologist/Radiologist instructions
 - Violations of school, program, and clinical policies
 - Cell phones in clinical settings (i.e., patient room, technologist area, operating room)
 - Students violating Volunteer Service Policies & Procedures (only KP WLA)
 - Wearing the wrong scrubs colors and shoes (please see student manual)
 - Students violating clinical policies and procedures (i.e., HIPAA)
 - Performing the wrong exam on a patient & incorrect marker placement
 - Absent without leave (AWOL) from the clinical site or scheduled rotation (exempt with instructions from lead tech or clinical instructor)
 - Inappropriate comments (i.e., microaggressions, sexual comments)
 - Sexual harassments
 - Excessive absences
 - Lack of competency; causing unnecessary radiation to the patient by excessively repeating x-rays.

References for Appendix

1. National Council on Radiation Protection and Measurements, *Limitations of Exposure to Ionizing Radiation*, NCRP Report No. 116, Bethesda, MD, 1993.
2. International Commission on Radiological Protection, *1990 Recommendations of the International Commission on Radiological Protection*, ICRP Publication 60, Ann. ICRP 21: No. 1-3, Pergamon Press, Oxford, UK, 1991.
3. USNRC, “*Instruction Concerning Risks from Occupational Radiation Exposure*”, Regulatory Guide 8.29, Revision 1, February 1996. (Electronically available at www.nrc.gov/NRC/RG/index.html)
4. Committee on the Biological Effects of Ionizing Radiations, National Research Council, *Health Effects of Exposure to Low Levels of Ionizing Radiation* (BEIR V), National Academy Press, Washington, DC, 1990.
5. United Nations Scientific Committee on the Effects of Atomic Radiation, *Sources and Effects of Ionizing Radiation*, United Nations, New York, 1993.
6. R. Doll and R. Wakeford, “*Risk of Childhood Cancer for Fetal Irradiation*,” *The British Journal of Radiology*, 70, 130-139, 1997.
7. David Wiedis, Donald E. Jose, and Timm O. Phoebe, “*The Rock and the Hard Place: Employer Liability to Fertile or Pregnant Employees and Their Unborn Children—What Can the Employer Do?*” *Radiation Protection Management*, 11, 41-49, January/February 1994.
8. National Council on Radiation Protection and Measurements, *Considerations Regarding the Unintended Radiation Exposure of the Embryo, Fetus, or Nursing Child*, NCRP Commentary No. 9, Bethesda, MD, 1994.
9. National Council on Radiation Protection and Measurements, *Risk Estimates for Radiation Protection*, NCRP Report No. 115, Bethesda, MD, 1993.
10. National Radiological Protection Board, *Advice on Exposure to Ionizing Radiation During Pregnancy*, National Radiological Protection Board, Chilton, Didcot, UK, 1998.

Los Angeles City College
Radiologic Technology Department
Student Manual Acknowledgement Form

I, the undersigned, have read the Policies and Procedures contained within the Radiologic Technology Student Manual and acknowledge that I am responsible for understanding the contents contained herein. Failure to comply may be grounds for dismissal from the program.

Student's name (printed): _____

Student's signature: _____

Student's ID: _____

Date: _____

*Upon completion, keep a copy of this page in your competency binder.