Mammography/ Breast Sonography Student Handbook

ARKANSAS STATE UNIVERSITY

MAMMOGRAPHY/BREAST SONOGRAPHY PROGRAM STUDENT HANDBOOK

2026/2027

GENERAL INTRODUCTION

This handbook has been compiled to acquaint students with the policies and procedures utilized by the professional program in Mammography and Breast Sonography. **It is the responsibility of the student to read the entire handbook.**

Students enrolled in the Mammography/Breast Sonography Program are responsible for observing all policies and procedures stated in this handbook, in addition to any rules and regulations which are contained in the A-State Undergraduate Bulletin and/or the A- State Student Handbook. **Failure to read this handbook does not excuse students from the requirements and regulations contained herein.**

Students are expected to adhere to the highest standards of medical ethics in all periods of attendance in the clinical education centers. All clinical education centers (CEC), while separately located, are considered to be an integral part of the University campus. Any infraction of medical ethics in the clinical education center will be dealt with under the appropriate disciplinary policy of the University. It is the student's responsibility to know what the appropriate policies and procedures are at each of the clinical education centers. This is covered during the orientation session.

The curriculum is based on the Mammography Curriculum published by the American Society of Radiologic Technologists. A copy of this document may be found in the Mammography/Breast Sonography Program Coordinator's office.

The Program Faculty of the Mammography Program at Arkansas State University reserves the right to make any additions or changes in program policies as deemed necessary at any time throughout the course of the program.

Students will be notified of new policies and/or changes in program policies in writing.

Arkansas State University Mammography/Breast Sonography Program Faculty:

Cheryl DuBose, Ed.D., RT(R)(MR)(CT)(QM)
Department Chair
Medical Laboratory & Radiation Sciences
CNHP Building, Room # 405A
(870) 972-2772

cdubose@astate.edu

Mary Grace Caubble, MSRS, RT(R)(M)(BS)(ARRT)
Mammography/Breast Sonography Program Coordinator
Medical Laboratory & Radiation Sciences
CNHP Building, Room # 404
(870) 972-3309

mcaubble@astate.edu

Mrs. Kristen Maxie, MSRS, RT(R)(M)(ARRT)
Instructor
Medical Laboratory & Radiation Sciences

kharper@astate.edu

Amber Wooten MSHS, RT(R), RDMS, RVT
Program Director/Assistant Professor
Diagnostic Medical Sonography
CNHP Building, Room # 408
(870)-972-2914
awooten@astate.edu

MISSION, PHILOSOPHY AND GOALS

University Mission

Arkansas State University educates leaders, enhances intellectual growth and enriches lives.

College of Nursing & Health Professions Mission

The primary mission of the College of Nursing and Health Professions is to provide quality education to students, graduates and health care providers in a variety of health disciplines.

Recognizing its unique position in the Lower Mississippi Delta region, the College provides educational programs that are designed to promote lifelong learning based on the expressed needs of its varied constituencies. The College assesses the attainment of this mission in terms of the contributions its graduates make to health care in the Delta region and beyond.

Program Philosophy

The Mammography/Breast Sonography Program was established to provide education and training opportunities for individuals seeking entry or advancement as registered Mammography technologists. Our program is based on the concept that education is a continuing process where by the learner determines goals, clarifies values, and develops such discipline and understanding as best meet individual needs for self-actualization. Our goal is to educate students for a successful professional career.

Program Mission

The mission of the Mammography/Breast Sonography Program is to prepare competent, entry-level Mammography technologists able to function within the healthcare community.

Goal: Students will be clinically competent.
Student Learning Outcomes: Students will provide appropriate patient care.
Students will practice proper radiation safety.
Students will produce quality images.

Goal: Students will demonstrate communication skills.
Student Learning Outcomes: Students will demonstrate written communication skills.
Students will demonstrate oral communication skills.

Goal: Students will develop critical thinking skills.
Student Learning Outcomes: Students will adapt positioning and imaging parameters for non-routine patients.
Students will critique images and recommend corrective action for suboptimal images.

Goal: Students will model professionalism.
Student Learning Outcomes: Students will demonstrate professional work ethics.
Students will summarize the value of life-long learning

AMERICAN REGISTRY OF RADIOLOGIC TECHNOLOGISTS CODE OF ETHICS

1. The registered technologist acts in a professional manner, responds to patient needs, and supports colleagues and associates in providing quality patient care.
2. The registered technologist acts to advance the principal objective of the profession to provide services to humanity with full respect for the dignity of mankind.
3. The registered technologist delivers patient care and service unrestricted by the concerns of personal attributes or the nature of the disease or illness, and without discrimination on thebasis of race, color, creed, religion, national origin, sex, marital status, status with regard to public assistance, familial status, disability, sexual orientation, gender identity, veteran status, age, or any other legally protected basis.
4. The registered technologist practices technology founded upon theoretical knowledge and concepts, uses equipment and accessories consistent with the purposes for which they were designed, and employs procedures and techniques appropriately.
5. The registered technologist assesses situations; exercises care, discretion, and judgment; assumes responsibility for professional decisions; and acts in the best interest of the patient.
6. The registered technologist acts as an agent through observation and communication to obtain pertinent information for the physician to aid in the diagnosis and treatment of the patient and recognizes that interpretation and diagnosis are outside the scope of practice for the profession.
7. The registered technologist uses equipment and accessories, employs techniques and procedures, performs services in accordance with an accepted standard of practice, and demonstrates expertise in minimizing radiation exposure to the patient, self, and other members of the healthcare team.
8. The registered technologist practices ethical conduct appropriate to the profession and protects the patient’s right to quality registered technology care.
9. The registered technologist respects confidences entrusted in the course of professional practice, respects the patient’s right to privacy, and reveals confidential information only as required by law or to protect the welfare of the individual or the community.
10. The registered technologist continually strives to improve knowledge and skills by participating in continuing education and professional activities, sharing knowledge with colleagues, and investigating new aspects of professional practice.
11. The registered technologist refrains from the use of illegal drugs and/or any legally controlled substances which result in impairment of professional judgment and/or ability to practice registered technology with reasonable skill and safety to patients.

STUDENT POLICIES

1.0 Academic Advising

Each Mammography/Breast Sonography student is assigned to the Program Coordinator astheir advisor as well as Rachel Post rpost@astate.edu. Regularly scheduled office hours are posted on

the PC’s office door and other hours by appointment.

If a student plans to seek employment in addition to carrying a full-time academic load, this should be discussed with his or her adviser. A realistic workload is recommended. ***Under no circumstances should employment schedules interfere with academic or clinical responsibilities***.

Regularly scheduled classroom and clinical activities may not exceed 40 hours per week.

An eight-semester program completion schedule is linked under the A-State Knowledge Base Mammography/Breast Sonography webpage on the University’s website https://www.astate.edu. Courses specific to the Mammography/Breast Sonography Program are listed below:

Mammography/Breast Sonography Program Courses and Schedules

Program name and description	Semester	Pre- requisites
RADG 44303 Radiography Clinical IV	Summer	Program Admission
RADG 33232 Radiography Clinic I	Summer	Program Admission
DMSO 44833 Breast Sonography	Summer	Program Admission
RISP 33102 Legal and Regulatory Environment of Rad*	Fall	Program Admission
RISP 44603 Mammography Procedures	Fall	Program Admission
RISP 44553 Breast Imaging Clinical Education I	Fall	Program Admission
DMSO 31003 Ultrasound Physics and Instrumentation I	Fall	Program Admission
RISP 44903 Bone Density Image Production	Fall	Program Admission
RISP 44703 Mammography Instrumentation*	Spring	RADG 44303
RISP 44563 Breast Imaging Clinical Education II	Spring	RADG 44553
DMSO 44503 Physics and Instrumentation II	Spring	DMSO 31003

RISP 44753 Bone Density Procedures	Spring	Program Admission
RISP 44573 Imaging in Women's Health Clinical Education	Summer	RISP 44563
RISP 33733 Geriatric Considerations in Radiology*	Summer	Program Admission
RISP 44802 Psychosocial Factors in Healthcare Delivery*	Summer	Program Admission

*May be offered in an online or hybrid format. Additional fees associated with online(distance education) courses may incur Student Identity Compliance Fees ($10/hour). Academic Responsibilities and Standards

1.1 Textbooks

Each student is responsible for purchasing the required textbooks **before the second meeting of the class**. Because the same textbook may be used in later courses again, it is strongly recommended that, before selling books, a student consult the Mammography/Breast Sonography

faculty who will be teaching future courses.

1.2 Assignments

Each student is responsible for completing all reading, writing, and oral assignments made by the faculty. If a student is absent from class for any reason, he or she is still responsible for the material disseminated in class.

1.3 Classroom Etiquette

Each student is responsible for learning the content of any course in which he or she is enrolled and for respecting the rights of fellow students in the classroom.

The instructor has the right to request any disruptive student to leave the classroom. Continued misbehavior in the classroom is cause for disciplinary action.

The use of any tobacco product, cell phones, and personal laptops (unless required by the course instructor) are prohibited in the classroom and/or in the laboratory.

1.4 Social Media

Students are allowed, and at times encouraged, to use various social media sites foreducational or personal reasons. However, at no time shall students in the Mammography/Breast Sonography Program post or contribute to conversations that may, in any way, violate patient rights or damage the relationship between the Mammography program and its clinical affiliates. Cyberbullying by any student within the program will not be tolerated.

1.5 Course Syllabus

Within the first two class meetings of the semester each instructor is required to provide each student in the course with a syllabus. The syllabus will contain a description of the course, the goals and/or objectives of the course, the method ofevaluating and grading students, make-up policy, and a description of written or oral assignments.

1.6 Evaluation and Grading

The program has established standards of grading that supersede the University’s grading policy and that are consistent with the minimum passing score on the certification exam for Mammography.

The grading scale used is:

A = 90 – 100
B = 80 – 89
C = 75 – 79
D = 60 – 74 F =< 60

Due to the uniqueness of the Mammography/Breast Sonography Program and the responsibilities of the Mammographer, a high level of academic and technical competence is required of all students in the program.

Therefore, the student must achieve a final of “C” or better to meet minimum academic standards in all RS and RSU courses.

1.7 Standards of Academic Achievement

If the cumulative, semester, or session grade point average falls below 2.00, the student will be placed on academic probation. At the end of the next semester or session of enrollment, the cumulative grade point average must be at least 2.00 for the student to remain in the Mammography/Breast Sonography Program.

A student who receives a grade below “C” in any of the Mammography/Breast Sonography courses may not continue in the Program. The policy and procedure for readmission into the Mammography/Breast Sonography Program is clearly outlined in the A- State Undergraduate Bulletin, which is available on the University website.

Clinical and student self-evaluations will be completed each semester and may be used to set goals for future clinical assignments. Failure to progress in clinical may result in program dismissal.

1.8 Cheating and Plagiarism

The maintenance of academic standards and integrity includes the obligation of honesty. A student who uses dishonest or deceitful means to obtain a grade is guilty of cheating; a student who submits another’s work as his or her own without adequate attribution is guilty of plagiarism. Copying and/or sharing test questions in any manner (written, photo, typed, screen save, spoken, recorded, etc.) is plagiarism, theft of intellectual property, and against department policy. Students are prohibited from reproducing any form of assignments, quizzes, or exams in the Mammography/Breast Sonography program.

Submission of clinical hours other than those hours actually worked is also considered cheating and is considered subverting the integrity of the ARRT Examination and Code of Ethics. According to college-wide practice, cheating and/or plagiarism will result in disciplinary action according to the following:

- First offense: The student will receive a **zero** on the assignment/test. If in a clinical situation, the first offense/warning is considered the signing of the Dishonesty Policy prior to the start of the program.
- Second offense: The student will be dismissed from the Program.

Students will not be eligible for any MLRS program if removed from a course or program. Cheating includes, but is not limited to: receiving test questions/answer from another person/source, use of any additional materials during the exam (notes (of any kind), textbooks, smart watches, electronic devices, calculator notes, audio-recorded sources, head/ear phones, Meta AI glasses (or similar), etc.), leaving the classroom prior to finishing the exam, sharing test questions/answer with others,

and/or looking at another student's test. Students caught performing any of these acts or another form of academic dishonesty will receive a zero on the exam and may be ineligible for admission to any MLRS program.

A student who uses dishonest or deceitful means to obtain a grade is guilty of cheating; a student who submits another's work as his or her own without adequate attribution is guilty of plagiarism. Academic honesty violations will apply whether they are performed individually or in groups. They apply to didactic, laboratory, and clinic experiences of the program as well as in situations where you are representing your program/college. They apply to students enrolled in any face-to-face, hybrid, or online course. Stealing is to take the property of others without permission or right; to take ideas, credits, words without right or acknowledgment; to accept credit for another's work. Students are responsible for the use if their institutional accounts, including usernames, passwords, and login credentials. Students are prohibited from sharing username, password, or other login credentials with any other individual. Students are prohibited from permitting another person to access, log into, or use their student account for any purpose. They are also prohibited from allowing another individual to use or using another individual's account or credentials to complete, submit, or participate in coursework, discussions, assignments, quizzes, examinations, projects, or other academic activities through their account. Students are prohibited from misrepresenting an individual's identity or permitting another person to represent themselves as an enrolled student.

All coursework, examinations, assessments, and academic activities must be completed solely by the student who is officially enrolled in the course. The use of another person to complete academic work or assessments on behalf of a student constitutes academic misconduct and will be considered a violation of institutional academic integrity standards.

1.9 Copyright Violation

It is illegal to copy any copyrighted material unless permission has been obtained from the copyright owner. A student guilty of copyright violation may face sanctions by the MIRS Department, A-State, the State of Arkansas, and/or Federal authorities.

2.0 Expenses

In addition to the normal university tuition, fees, and book costs, a student in the Mammography/Breast Sonography Program will incur additional expenses.

These expenses include, but are not limited to:

Transportation:
Each student is responsible for transportation to his/her assigned clinical site. Transportation and all costs incurred for travel to the clinical site is the sole responsibility of the student. A valid driver's license is required prior to the start of clinical rotations.

Uniforms:
Each student is responsible for providing his/her own uniforms and shoes. Uniforms and lab coats

must be monogrammed, identifying the student as an A-STATE student.

Verified Credentials Account:
Each student must pay a one-time fee of $35.00 for an account. This program tracks all of the required vaccines, CPR certification, liability insurance, and background checks. Reminders of upcoming expiration dates are sent to the student. Students are responsible for keeping all of the required clinical documentation current.

Vaccination and skin testing:
Students **ADMITTED** to any program in the College of Nursing and Health Professions must present the following immunization and test documentation:

1. Rubella and rubeola (Arkansas statute).
2. Mumps and varicella vaccination or titer (clinical affiliate (hospital) requirements when working with infants and children).
3. If there is no hepatitis immunization or titer, then the student must begin the Hepatitis B vaccine series prior to enrolling in a clinical practicum class.
4. TB skin test each year that the student is enrolled in a clinical practicum. If the skin test is positive, documentation of treatment status must be submitted.
5. Flu vaccination each year that the student is enrolled in a clinical practicum.
6. Cardiopulmonary resuscitation (CPR) certification is required before taking any practicum courses. Certification status must be maintained and documentation submitted to the appropriate department throughout enrollment in any program.
7. Drug screening: May be required prior to attending site-specific orientation.

Liability Insurance:
Proof of professional liability insurance is required before a student can begin clinical education. Students must apply online at http://www.hpso.com/. If applying for liability insurance with HPSO, select the student option for “Radiologic Tech.”

Background Checks:
Criminal background checks may be required by the College of Nursing and Health Professions and/or individual clinical sites. The appropriate forms and applicable fees will be distributed to students prior to the start of the clinical rotation.

Clinical software fee:
The MLRS Department programs at A-State use a clinical software program known as Trajecsys (https://www.trajecsys.com/). Students are charged a one-time fee for annual use of the software program.

Registry Review Software:
The MLRS Department program at A-State uses a registry review software program known as Clover Learning (https://app.cloverlearning.com). Students can be charged annually or monthly for use of the software program.

3.0 Change of Address

The Department of Medical Imaging & Radiologic Sciences and the University registrar's office (http://registrar.astate.edu/) should be notified promptly of changes in name or address. Correct phone numbers should be filed with the Department of Medical Imaging & Radiologic Sciences and the Mammography/Breast Sonography Program so that students can be reached in case of an emergency.

4.0 Health

4.1 Health Examination

Students may be required to undergo additional health screenings and/or vaccines as designated by clinical affiliates. Students are solely responsible for the cost of these requirements and for having the requirements met by the deadline provided by the site and/or Program Coordinator.

4.2 Health Care

The Wilson Student Health Center is open Monday through Friday for the benefit of students. A description of services and the hours of availability are listed in the Undergraduate Bulletin and on the A-STATE website at http://healthcare.astate.edu/New_Pages/FAQ.html. Except for the services of the Student Health Center, the University assumes no responsibility for health care costs (http://registrar.astate.edu/bulletin.htm, page 50).

4.3 Illness

If the student is ill and unable to attend the clinical rotation, the Mammography clinical site supervisor and Mammography/Breast Sonography Program Coordinator must be notified as soon as possible **prior to the scheduled starting time**. A student is expected to use good judgment in determining whether or not to attend the clinical rotation because of illness.

If the student is ill and unable to attend class, the Program Coordinator should be notified. **If a student has a suspected communicable disease, he/she should contact the clinical instructor before reporting for duty.**

Communicable diseases may require that one or more of the following protective measures be taken. The student may be:

1. Required to use reverse isolation techniques while working with non-high-risk patients.
2. Reassigned to a non-patient care area.
3. Relieved from clinical duty until he or she is no longer contagious

4.4 Injury

Should a student become injured or acutely ill during the course of assigned clinical duties, the clinical site to which that student is assigned will provide treatment and emergency care, with any charges for treatment being the sole responsibility of the student.

Any injury, however minor, occurring while on duty at the clinical site must be reported to the clinical supervisor and the appropriate incident form completed with copies to the Mammography Program Coordinator at A- State.

4.5 Health Insurance

Students are strongly encouraged to obtain individual health insurance coverage. Information on Student Health Insurance is available through the Office of Student Affairs, 2105 Aggie Road, in the Administration Building. Professional liability insurance should not be misconstrued as including health insurance coverage.

4.6 Pregnancy

In compliance with the Nuclear Regulatory Commission (NRC) regulations, a female student who becomes pregnant has the option of whether or not to inform program officials of her pregnancy. If the woman chooses to voluntarily inform the officials of her pregnancy, it must be in writing and indicate the expected date of confinement (delivery). In the absence of this voluntary written disclosure, a student cannot be considered pregnant.

If the student does voluntarily disclose her pregnancy, she does have the option of continuing the educational program without modification of interruption. Another option can include modification in clinical assignments. At any point in time, the student may provide a written withdrawal of declaration.

If the pregnant student chooses to disclose her pregnancy, she will receive counseling and be required to sign a form releasing the university and the program of any responsibility should problems develop with the pregnancy. The Pregnancy Release form is found in the Program Documents section of this handbook.

4.7 Radiation Safety

Due to the unique concerns and health risks associated with ionizing radiation, students enrolled in the Mammography/Breast Sonography program are required to wear a personal radiation dosimeter at all times. Students ARE allowed to assist with invasive procedures or other patient care-related tasks during radiation exposure only as absolutely necessary. Students are expected to incorporate the principles of ALARA in all aspects of the Mammography/Breast Sonography suite.

4.8 Physical and Mental Performance Requirements

Because of the nature of the work required in the Mammography/Breast Sonography Program offered at A-State, the applicant must be:

1. Able to reach, manipulate, and operate equipment necessary for exam procedures.

2. Able to move, manipulate, and observe a patient or client as necessary for the profession.
3. Able to visually assess patients, medical test results and the working environment to correctly decide the appropriate action to take for the benefit to the patient/client.
4. Able to clearly communicate, both verbally and in writing, with the patient, client, family members, medical personnel and others.
5. Able to disseminate information relevant to patient care and work duties, and also hear clearly enough to gather information relevant to patient care and work duties
6. Able to make appropriate judgment decisions in an emergency or where a situation is not clearly governed by specific guidelines.
7. Able to demonstrate emotional stability and psychological health in day-to- day interactions with patients/clients, staff, family members, and others in routine and non-routine decision-making processes, and on the daily execution of didactic and clinical assignments.
8. Able to maintain professional demeanor and conduct under extremely stressful circumstances.
9. Able to lift at least 50 pounds.

5.0 STANDARD PRECAUTIONS POLICY STATEMENT

The Mammography/Breast Sonography Program enforces current A-State policies on communicable diseases. Any student suffering from a contagious infection will be asked toprovide medical documentation that the contagious phase has passed prior to continuing in class. This is to ensure minimum risk to others.

Because many people who carry highly infectious pathogens (e.g., AIDS virus, hepatitis A & B, etc.) are not aware of it, all students and faculty will strictly adhere to this policy. These safety guidelines are designed to protect the students, faculty, and patients from the spread of infectious diseases.

- Wear gloves at all times when working with patients where blood/body fluids are evident or likely; i.e., open wound trauma, barium enema tip insertion, IV injection.
- Wear gloves when wiping blood/body fluids from equipment and use appropriate cleaning chemicals.
- Wash your hands after handling any blood and body fluids.
- Wash hands frequently during patient care activities.
- Dispose of linens soiled with blood and body fluids in appropriate containers.
- All infectious needles, tubing, etc., need to be placed in puncture-proof containers. DO not clip needles or recap needles.
- All injuries and splashes must be reported to the faculty and clinical supervisor immediately.
- Any splash of body fluid entering a mucous membrane (eye, nasal passage, and mouth), opencut or wound shall be reported immediately to the faculty. **An incident report will be completed.**

If an occurrence at the clinical site, the student will be sent to the health service or appropriate treatment facility for evaluation and treatment. The student will pay for the

cost of any treatment.

ARKANSAS STATE UNIVERSITY COLLEGEOF NURSING AND HEALTH PROFESSIONS

Policy/Procedure Guidelines for Infection Control (05/15/2013)

INTRODUCTION

The policy guidelines herein are of a general nature and deal with HIV-related infections as well as other blood-borne pathogens. They apply to all students/faculty/staff in the College of Nursing and Health Professions (CNHP). Due to differences in the various programs, individual CNHP programs may have specific rules and/or guidelines that are modifications of those in the general policy; however, the specific policies of the various programs will be consistent in their intent with the guidelines noted herein. This policy shall be reviewed annually and modified as necessary based on the current information from the CDC and other resources.

ADMISSIONS

The HIV/HBV (Human Immunodeficiency Virus/ Hepatitis B Virus) or any significant blood-borne pathogen status of an applicant should not enter into the application process. Applicants applying for healthcare programs should, however, be informed that certain diseases may necessitate either a modification of their program, or in extreme may necessitate their dismissal from a program if they cannot perform procedures and/or tasks that are considered essential to their educational experience.

RETENTION

If it is determined that a student is sero-positive for HIV/HBV, or any other significant blood-borne pathogen, or is clinically manifesting symptoms of a related disease process, that student should receive counseling about personal health care concerns and about interaction with others, especially clients. The student should be counseled by a designated faculty member in his/her respective program. The function of the designated faculty member is to counsel the student as to whether the program of education should be modified, another educational program considered, or in the extreme, whether the student should be dismissed from a program because of the inability to perform procedures and/or tasks crucial to the educational program. When considering the possibility of modifying clinical experiences or whether to dismiss, the designated faculty member will request that the Infection Control Committee convene to consider the specific student situation.

INFECTION CONTROL COMMITTEE

The Infection Control Committee will be comprised of at least one representative from each of the programs in the College of Nursing and Health Professions. The dean will be charged with appointing faculty to serve on this committee after consultation with chairs or directors of the various programs. Once the committee is established, a chair shall be elected by the members. In

addition, a community member who is an expert in infectious diseases will be designated as a consultant to the committee.

The committee shall function to consider the specific student/faculty/staff situations outlined in the HIV/HBV Guidelines. In addition, this committee will function to review the HIV/HBV Guidelines on an annual basis. The committee will coordinate annual instruction on Infection Control Updates for the faculty. This committee will also serve the programs by making recommendations for infection control policy that may impact the student/faculty/staff populations. Information regarding such policy will be included in the various programs' Student Handbook and the CNHP Faculty/Staff Handbook.

When the Infection Control Committee convenes to consider specific student/faculty/staff situations, a timely response is in order. Individuals will be provided a letter outlining the committee recommendations within a one-week period after convening. During this time period, the student/faculty/staff person shall not engage in direct client contact. Should an individual wish to appeal the decision of the committee, the established University Grievance process should be followed (See A-STATE Student/Faculty Handbooks).

COUNSELING

It is the responsibility of the programs to provide counseling to a student/faculty/staff member who is determined to be sero-positive for HIV/HBV, or any significant bloodborne pathogen, or who manifests symptoms of a related disease process. The counselor's interaction with the student/faculty/staff member should be reported to the Infection Control Committee only when the person's health status necessitates a modification in the clinical program or dismissal. It will be the responsibility of the counselor to verify that the student is aware of options for testing, counseling and health care. In addition, the counselor will verify that the student has been provided with specific information that relates to client contact.

The following information is provided in order to refer students when necessary to outside agencies for assistance and follow-up. This information should be reviewed and updated annually

HIV Infection Services provided by A-STATE Student Health Center:

Students at Arkansas State University who desire HIV testing will be referred to the Craighead County Public Health Department for testing. This ensures privacy and integrity of specimen collection.

The Student Health Center has developed a media library (videos, pamphlets) for persons coming in with questions about HIV infection. The Center is located adjacent to the football stadium and can be reached at ext. 2054.

Services offered by the Public Health Department

The Craighead County Public Health Department is open from 8:00 a.m. until 4:30 p.m. for testing. The department offers pre- and post-test counseling as well as HIV testing. The cost of the service is $5.00 which pays the record maintenance fee. The Public Health Department can be contacted

by calling 933-4585. Offices are located in the Arkansas Services Center on 611 E Washington Ave, Ste B, Jonesboro, AR 72401.

An individual who desires testing should allow about one hour for the procedure because pre-counseling is extensive. Appointments are required.

The Public Health Department will provide the Hepatitis B vaccine for persons up to age 18. They will not provide testing for Hepatitis B.

The Public Health Department will provide follow-up care for any individual with a positive TB skin test or one with a diagnosis of tuberculosis.

Services offered by Northeast Arkansas Regional AIDS Network (NARAN)

This organization offers free confidential testing. Pre- and post-counseling is provided by certified counselors. They also provide direct care services or referrals for those persons who need them, including financial counseling. NARAN is also a network agency for persons living with AIDS. A referral can be made by contacting the office at 931-4HIV (4448).

The counselor should not neglect to refer the student/faculty/staff member to his/her private physician for guidance.

Students/faculty/staff outside of Craighead County should seek specific referral information from the Chair of the Infection Control Committee or from a faculty member designated as a counselor at the distant sites.

HIV/HBV GUIDELINES

FOR ON-CAMPUS LABORATORY AND CLINICAL SETTINGS

In accordance with sections 503 and 504 of the Rehabilitation Act of 1973, schools must provide equal treatment to persons who have contracted the HIV/HBV virus.

Furthermore, schools may not discriminate against any individual based on the perception that he/she is infected.

TRANSMISSION INFORMATION

All CNHP students and faculty will employ Standard Precautions while in the clinical setting. CNHP students will receive instruction and annual evaluation regarding transmission of blood-borne pathogens and the use of Standard Precautions. The Infection Control Committee will coordinate instruction on Standard Precautions for faculty on an annual basis. It will be the responsibility of faculty members to document annual instruction through the Infection Control Committee.

POLICY

Students, faculty, and staff with HIV/HBV, or any significant blood-borne pathogen, should be allowed equal access, as long as their medical condition permits, to university facilities or campus activities, including participation in clinical experiences or other academic and social activities offered by the university.

All confidential medical information is protected by statute and any unauthorized disclosure may create legal liability. The duty of the health care providers to protect this confidentiality is superseded by the necessity to protect others in very specific circumstances.

An infected student/faculty who is symptomatic may be excluded from providing direct client care, determined on a CASE-BY-CASE basis by the Infection Control Committee (appropriate supervisory personnel). In addition, should an individual sero-convert and express concern regarding clinical practice, the committee will convene to review the case.

Students may be asked to serve as source partners in on-campus laboratories for procedures involving needle sticks or other forms of vascular access. For criteria related to laboratory participation, see the specific program handbook.

EXPOSURE (Laboratory and Clinical Settings)

Students and faculty in the College of Nursing and Health Professions may be exposed to bloodborne pathogens such as HIV and HBV. In the clinical and classroom laboratory settings, students/faculty are expected to utilize Standard Precautions, hand washing and protective clothing/gear to prevent contact with blood and other potentially infectious materials.

Exposure incident means a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious material that results from one's duties as a CNHP student or faculty member. An exposure incident involving a student/faculty/staff/visitor i.e. volunteer, invited guest in the CNHP, while in a clinical facility or campus laboratory is treated in a similar manner to any type of accident occurring within the agency.

On-Campus Laboratory or Clinical Setting: Blood-Borne Pathogen Post Exposure Protocol

Should a student or faculty member be exposed to a blood-borne pathogen in an on- campus laboratory or clinical setting, the following post-exposure protocol is recommended:

1. The student will notify the faculty member supervising the learning experience. If the exposed individual is a faculty member, he/she will notify the chairperson of the specific program in the CNHP.
2. As soon as possible following the exposure, the college incident form will be completed by the faculty member/student.
3. The exposed individual will be referred to the Student Health Center for evaluation if the event occurs during operating hours. If the exposure occurs when the Health Center is closed, the faculty member will determine the individual's primary care options and refer the person to those resources.

4. It is suggested that the post-exposure protocol be managed by the individual's primary care provider at the individual's expense.
5. If there is a delay in reporting an exposure incident, it is recommended that the same protocol be followed.

Off-Campus Laboratory or Clinical Setting: Blood Borne Pathogen Post Exposure Protocol

If a student/faculty member is exposed to blood or other potentially infectious materials in the off-campus setting, this Blood Borne Pathogen protocol is to be followed.

1. The student will notify the clinical faculty. If the exposed individual is a faculty member, s/he will notify the chairperson of the specific program at the CNHP.
2. The student, clinical faculty or chairperson will notify the supervisor of the area where the exposure occurred. Thereafter, post-exposure protocols for the clinical institution will be followed.
3. The infection control staff member/epidemiologist of the clinical facility will be notified of the exposure immediately by the student or if possible, by the clinical faculty member. If a faculty member has been exposed, this individual will notify the infection control staff/epidemiologist.
4. As soon as possible following a report of an exposure incident, the clinical faculty and infection control staff/epidemiologist should provide the student with counseling about an immediate confidential medical evaluation and follow-up at the student's expense. In the case of a faculty member's exposure, the individual is expected to communicate directly with the infection control staff/epidemiologist. The medical evaluation and follow-up should include, at a minimum, the following requirements:
    1. Documentation of the route(s) of exposure and the circumstances under which the exposure incident occurred.
    2. Identification and documentation of the source individual unless the clinical facility staff establishes that the identification is infeasible or prohibited by state or local law.
5. The source individual's blood shall be tested as soon as possible after consent is obtained in order to determine HBV and HIV infectivity. If consent is not obtained, the clinical facility shall establish that the source individual's consent cannot be obtained. When the source individual's consent is not required by law, the source individual's blood shall be tested and the results documented.
6. When the source individual is already known to be infected with HIV or HBV, testing for the source individual's HIV or HBV status need not be repeated.
7. Results of the source individual's testing shall be made available to the exposed individual who should also be informed of applicable laws and regulations concerning disclosure of the identity and infectious status of the source individual.
    1. The exposed student/faculty member's blood should be tested as soon as possible.
    2. It is suggested that the post-exposure protocol be managed by the student/faculty member's personal healthcare provider.

6.0 Substance Abuse Policy & Procedures

The College of Nursing and Health Professions recognizes its responsibility to provide a healthy environment within which students may learn and prepare themselves to become members of a health occupation. Within each profession there are codes and standards for conduct by which all members of the profession are expected to function. Thus, when engaged in educational activities, whether on campus or in the clinical setting, health professionals are expected to be free from the abusive influence of chemical substances/drugs1. When students are under the influence of drugs and alcohol, they present a threat to patients, other students and the employees and visitors of clinical facilities. It is the responsibility of the student to report any medication/s taken which would adversely affect their ability to perform safely in class or clinic. Written documentation will be required for verification of medications taken and will be placed in the student's file. As a condition of admittance and retention in any professional program in the Arkansas State University College of Nursing and Health Professions, all students must sign a SUBSTANCE ABUSE COMPLIANCE CONTRACT agreeing to adhere to the Substance Abuse Policy & Procedures when conducting any activity associated with their educational program. As the contract notes, it is inclusive of testing for substances and appropriate release of that information.

PROCEDURES

If a student demonstrates behavioral changes associated with substance abuse (see attached list) while engaged in course activities, the following procedures will be enforced:

1. The first time the student is observed exhibiting behaviors that are linked to or associated with substance abuse (see attached list), the student will be approached by a faculty member or a person who is designated to provide supervision. Prior to the approach, an assessment of the situation is indicated and a second observer should be asked to verify the behavior. The purpose of this encounter is multifold. It openly allows recognition that such behaviors have been observed. It also creates the opportunity for the student to pursue behavior modification as an option that is non-punitive and preserves self-direction.

   During the encounter, the student will be informed about and required to seek evaluation by the Counseling Services Center at Arkansas State University. If the behaviors are observed in a clinical setting, the student will be removed from participation in activities and asked to leave the environment. An absence for the day will be recorded. Written documentation that the student was confronted and informed about the Counseling Center is to be signed by the student and faculty. A copy will be forwarded to the Department Chair/ Program Director and retained in the student's cumulative file during the time he/she is enrolled as a professional student in the Arkansas State University

College of Nursing and Health Professions. A copy will be forwarded to the A-STATE Counseling Center. The Center will provide a written evaluation with treatment recommendations to the student and to the Department Chair/Program Director. If the student, upon reviewing the Center's recommendations, declines to allow them to be released to the Department Chair/Program Director, the student will be required to seek a Psychological or Psychiatric evaluation (from a Licensed Physician [Psychiatrist] or Psychologist), and submit the results and recommendations to the Department Chair/Program Director. The student will be expected to comply with ALL recommendations and allow release of records attesting to his or her compliance and improvement.

2. Due to the level of accountability health professionals have for their actions toward others, the second time behaviors are observed and verified by a second observer, the student will immediately be asked to submit to body fluid testing for substances at a lab designated by the College of Nursing and Health Professions who have identified procedures for collection (see attached). The cost of the test will be borne by the student. Refusal to submit for testing warrants immediate program dismissal.

   At the time the specimen is released to the testing lab, the student will sign a release statement requesting that the test results be sent to the Dean's Office, College of Nursing and Health Professions, and to the student. If the results are negative, no further action will be taken and the student will only be allowed to make up work missed. If the results are positive (and substantiated by a second or confirmation test), the student will be dismissed from the professional program. Laboratory results will only be disclosed to individuals whose duties necessitate review of the test results and confidentiality will be adhered to as stringently as possible.

3. Readmission of the student to the program is contingent upon the following conditions:

   1. Formal application for readmission to the program.
   2. Meeting specific program admission criteria as noted in the Undergraduate/ Graduate Bulletin
   3. Clinical space availability.
   4. Documentation that a prescribed treatment program has been completed by the student related to the drug/alcohol condition. The documentation is to be submitted to the Dean's Office, College of Nursing and Health Professions by the designated treatment facility.
   5. Follow-up program as suggested by the treatment facility which may include, but is not limited to, one or more relapse prevention procedures. The follow-up program will be individual-specific and written as part of a contractual agreement with the student.

4. Arkansas State University may be required by state or national regulatory boards to submit information regarding a student's substance abuse history when he/she applies to take the examination for licensure. There is no guarantee that these boards will allow

individuals with a substance abuse history to take the examination. Each case is judged individually by each board.

1. Students will be required to abide by individual institutional policies relating to substance abuse in clinical facilities to which they are assigned.

> 1The generic meaning of the term "drug" is broadly defined as any chemical substance which affects living systems. For the purposes of this policy, substance and/or drug abuse are used interchangeably and defined as socially unacceptable use of drugs or other chemical substances for non-therapeutic purposes. The substance alcohol (ethanol), by its properties and actions, is a drug and is used as such in this policy. Drugs prescribed by a physician licensed to practice medicine and surgery, as long as the drug is taken in accordance with the provider's instructions and do not impair the student's ability to perform his/her duties, are exempted from this policy.
> Reference: Reiss, B. & Melick M. (1987). Pharmacological Aspects of Nursing Care (2nd Ed.). Albany, NY: Delmar Publishers, pp. 2, 627, 631-633.

7.0 Substance Abuse Compliance Contract

7.1 SUBSTANCE ABUSE COMPLIANCE CONTRACT

COLLEGE OF NURSING AND HEALTH PROFESSIONS ARKANSAS STATE UNIVERSITY

I,_____, have read the Board of Trustee approved Substance Abuse Policy & Procedures of the Arkansas

State University College of Nursing and Health Professions and agree, as a student in the professional health program, to comply

with all aspects of the policy as written, including testing for substances and appropriate release of that information.

Furthermore, I agree to abide by the provisions for determining dismissal and to follow the conditions of readmission as outlined.

Student’s Name: _____

Student’s Signature: _____

Date: _____

7.2 Behavioral Changes Associated with Drug Abuse

BEHAVIORAL CHANGES ASSOCIATED WITH DRUG ABUSE

The College of Nursing and Health Professions has developed the following list of behaviors that are not all-inclusive but, when observed, can be used as indices to identify an individual who at the moment of observation, could be under the influence of a “drug” (see the Substance Abuse Policy for definition of the term “drug” and for the mechanisms to operationalize the policy). The College of Nursing and Health Professions is guided by behavioral descriptors that are stated in the latest edition of the Diagnostic & Statistical Manual of Mental Disorders.

*Observation of any of these behaviors will result in dismissal from the learning environment (clinical or classroom).

Attention Deficit/Cognitive Impairment

- ataxia
- tremors, especially of the hands
- slowed response time in a familiar skill
- diminished from the usual in coordination/dexterity

Social Impairment

- inappropriate verbal remarks (subjects/words/expletives)
- inappropriate behaviors or those beyond the societal norm such as:
  - angry outbursts/unrestrained agitation
  - crying that cannot be explained
  - euphoria
  - paranoia
  - hallucination
- behaviors that are markedly changed from that individual such as

    - introversion
      extroversion
    - sullen/irritable
    - giddy
    - defensiveness

Somatic Manifestations/Discomforts

- odor of alcohol on breath
- nausea/vomiting/thirst
- frequent trips to bathroom/complaint of urinary frequency or diarrhea
- hiccoughs
- reddened sclera (bloodshot eyes)
- pupil changes/drooping eyelids
- complain of blurred vision or inability to focus

Speech/Communication Impairment

- slurred (thick tongue)
- rapid/choppy communication pattern
- incoherent speech

BEHAVIORAL PATTERNS ASSOCIATED WITH SUBSTANCE ABUSE

The following is a list of behavioral patterns that may surface when drugs have been abused. While these patterns have many causes, thorough assessment and detailed documentation is needed over a period of time to determine if there is any relationship to drug abuse. Patterns of behavior to observe and validate are:

- repeated tardiness
- frequent absenteeism
- numerous and chronic somatic complaints (colds/GI problems/lack of sleep/weight loss/sluggishness/low energy)
- untidy personal appearance or deterioration in quality of grooming
- lack of attention to hygiene (hair, nails, skin, oral)
- multiple crises in personal life
- avoidance/lack of eye contact
- isolation/lack of peer support
- repeated excuses for below standard performance
- forgetfulness with appointments/assignments
- slowed response time in familiar activities
- behavior shifts/mood swings
- lack of trust and suspicious of the motives of others

- needle tracks on body surface
- behaviors surrounding the administration of narcotics:
  - frequent need to waste “unused” medications
  - recording the administration of larger doses than ordered
  - unauthorized possession of the narcotic key
  - unsupervised entry into narcotic cabinet
  - volunteering to be in situations to gain greater access to narcotics
  - taking frequent breaks/numerous occasions when whereabouts unknown

7.3 Criteria For Urine Drug Screens

NOTICE: PROVIDE LAB WITH THIS CRITERIA

ANY DRUG SCREENS SUBMITTED TO ARKANSAS STATE UNIVERSITY, COLLEGE OF NURSING AND HEALTH PROFESSIONS SHALL HAVE MET THE FOLLOWING CRITERIA:

1. Specimen collection is witnessed
2. BASIC 10-PANEL* DRUG SCREEN INCLUDING ALCOHOL, MEPERIDINE AND DRUG OF CHOICE (SEE #7).
3. Laboratory must be CLIA1 approved.
4. Confirmation of positive results is done by GCMS2. If specimen must be sent to another laboratory for confirmation, the chain of custody is maintained.
5. Report, in addition to results, will include:
   1. Chain of custody
   2. Drug history;
   3. List of drugs screened;
   4. Confirmation of method used; and
   5. Specific gravity.
6. The laboratory will retain negative specimens for a minimum of two (2) weeks and positive specimens for a minimum of one (1) year.

*10-PANEL INCLUDES:

Amphetamines	Benzodiazepines
Cannabinoids	Cocaine
Opiates	PCP
Barbiturates	Methadone
Methaqualone	Propoxyphene

THE DRUG SCREEN SHALL TEST FOR THE FOLLOWING:

Amphetamines	Methaqualone
Barbiturates	Phencyclidine
Benzodiazepines	Propoxyphene
Cannabinoids	Alcohol
Cocaine	Meperidine
Opiates	Drug of choice

DRUG SCREENS WHICH DO NOT TEST FOR THE ABOVE WILL BE CONSIDERED NON-COMPLIANT WITH THE ORDER.

> 1 Clinical Laboratory Improvement Act: Set of Federal Regulations which clinical labs must meet for certification.
> 2 Gas Chromatography Mass Spectrometry Adopted from Arkansas State Board of Nursing, January 1997

7.4 Waiver of Release of Medical Information

ARKANSAS STATE UNIVERSITY
COLLEGE OF NURSING AND HEALTH PROFESSIONS

WAIVER OF RELEASE OF MEDICAL INFORMATION
SUBSTANCE ABUSE POLICY AND PROCEDURES

I,_____, am a professional health student at Arkansas State University and have previously received, read and understand the College of Nursing and Health Professions' Substance Abuse Policy & Procedures.

Since this is my second incident of verified reportable behavior, I hereby consent to having a sample of my body fluid collected on this _____ day of _____ , 20_____ , according to the terms set forth in the policy for the purpose of testing for identified substances at my own expense.

I understand that a positive test result will require a subsequent confirmation test. If that result remains positive, it will affect my status in the professional program. I understand that if I am taking any medications which would adversely affect the results of the test, that I should disclose those immediately. Written medical documentation from my physician will be required by me for verification of those medication/s taken.

I authorize the release of test results related to the screening or testing of my blood/urine specimen to the Dean, College of Nursing and Health Professions at Arkansas State University, and to myself. I understand that my body fluid specimen will be sent to for actual testing.

I hereby release Arkansas State University, its Board of Trustees, officers, employees, and agents from legal responsibility or liability arising from such a test, including but not limited to, the testing procedure, analysis, the accuracy of the analysis, or the disclosure of the results.

_____

_____

Student's signature Date

Time

_____

_____

Witness Date

Time

8.0 Student Records

The registrar's office maintains records of all didactic and related courses attempted and/or completed by all students. The following records are kept in the Department of Health Professions and the Mammography Program:

1. Attendance and clinical rotation records
2. Clinical competency records
3. College transcripts
4. Advising documents
5. Clinical evaluations

8.1 Right to Inspect Records

Under the Federal Family Educational Rights & Privacy Act of 1974 (Buckley Amendment), students have the right to inspect and review any and all official records, files and data pertaining to them.

9.0 Student Counseling

The purpose of student counseling is to promote, assist, and maintain superior student performance. Feedback given in counseling persons may be used to identify areas of strength and

weakness in student performance or behavior. All counseling sessions are documented and filed in the student's permanent folder.

10.0 Withdrawal from the Program

The following steps are necessary when withdrawing from the program.

1. The student should meet with the Program Coordinator to discuss the withdrawal process.
2. The student should write a formal letter of resignation stating the reason for withdrawal. This letter will remain in his/her permanent file and will be considered in the event the student seeks readmission to the program at a later date.
3. The student will return any material that may be on loan.
4. The student will follow University guidelines for completing the withdrawal process, securing the appropriate signatures when necessary.

If a student withdraws from a professional course, the student must withdraw from the program.

11.0 Dismissal from the Program

There are conditions that will necessitate dismissal from the Mammography/Breast Sonography Program. These include, but are not limited to:

1. Failure to meet academic standards. (failing a course)
2. Failure to demonstrate suitable progress in clinical practice. Students are allowed one Incomplete grade in a clinical course. Failure to meet the required clinical standards a second time will result in program dismissal.
3. Patterns of behavior jeopardizing patient safety, individual or group progress, and/or contract agreement with the clinical affiliate.
4. Violation of the repeat radiograph policy after a written warning.
5. Lack of professional compatibility or unsafe clinical practice as identified by the Radiography faculty.
6. Patterns of behavior indicating an attitude of irresponsibility to self, patient, profession, or University.
7. Participation in academic cheating, plagiarism, and/or unauthorized possession of an examination.
8. The unlawful and/or unauthorized use, abuse, possession, distribution, transportation, manufacture, concealment, consumption, promotion or use of alcohol, illegal drugs, and legal drugs obtained illegally, controlled substance, or designer drugs.
9. Illegal possession of weapons.
10. Physical or emotional conditions affecting the ability to attain curricular objectives.
11. Falsification of any records or knowledge of such (i.e., time records, competency evaluations, etc.) related to the Mammography/Breast Sonography Program.
12. Dismissal will be based on the following:

1. Written documentation describing the offense and/or offenses.
2. Review of the student's performance records by the A-State faculty, and the Mammography/Breast Sonography Program Coordinator.
3. A recommendation will be made in writing and discussed with the student and will become part of the student's permanent record. Any student wishing to appeal must follow the appeal process stated in the A-State Student Handbook.

A student WILL be dismissed from all Medical Laboratory and Radiation Sciences programs for:

1. Falsification of patient, affiliate, and/or program records (to include false time clocks for self or others)
2. Patterns of behavior jeopardizing patient safety, individual or group progress, and/or contract agreement with the clinical affiliate.

Dismissal will be based on the following:

1. Written documentation describing the offense(s).
2. Review of the student's performance records by the A-State faculty, Clinical Coordinator, and the Radiography Program Director.
3. Failing the same MLRS course twice.
4. Failing two MLRS courses during enrollment as an MLRS student.

12.0 Readmission to the Program

A student wishing to be readmitted to the program must make a formal application to the program and to the University, if concurrently enrolled. Readmission is granted on an individual basis, based on the student's previous records and the availability of space. Application for readmission for whatever reason will be granted up to one time only under the discretion of the program director and/or clinical coordinator.

Readmission will be denied if:

1. Either cumulative or institutional grade point averages are lower than 2.00.
2. The student has received a final grade lower than "C" in the same course, or has received a grade lower than "C" in professional courses in two separate semesters.
3. The student fails one or more programs, making them ineligible to enroll in MLRS programs.
4. Failing the same MLRS course twice.
5. Failing two MLRS courses during enrollment as an MLRS student.

13.0 Grievance Procedures

A grievance is a complaint alleging that one or more of the "academic rights of students" has been violated. Steps for filing a grievance are listed in detail in the A- State Student Handbook.

These procedures do not apply to student complaints involving alleged sexual harassment. In such cases, the student should contact a department chair, college dean or the affirmative action officer for direction on appropriate steps to follow. In cases where the alleged grievance is based upon a complaint involving discrimination because of race, color, religion, age, disability, sex or national origin, the deadlines and procedures listed in the Student Handbook do apply. In addition, the student shall notify the affirmative action officer. In any case of grievances involving a grade, the student must first accept the disputed grade for the course in order to be eligible to grieve the grade.

14.0 Application for ARRT Certification Examination

The ARRT rules and regulations require that candidates must have successfully completed a program of formal education before sitting for the exam. Additional information will be provided by the Program Coordinator.

15.0 Student Participation in College and Program Organizations

A student may be asked to serve on college and department committees. Participation is voluntary and will in no way affect the student’s grades.

CLINICAL POLICIES AND PROCEDURES

16.0 General Introduction

During the semester of the professional program in Mammography at Arkansas State University the student will be enrolled in a clinical course that requires attendance in the clinical education center in order to:

1. Acquire expertise and proficiency in a Mammography/Breast Sonography clinical environment.
2. Develop and practice work habits and appropriate interpersonal relationships with patients and other members of the health care team.

In the clinical setting, the student will be representing Arkansas State University, the College of Nursing and Health Professions, and the Mammography/Breast Sonography Program. The student is expected to conduct himself/herself in a professional manner at all times.

17.0 Clinical Assignments

Each student is assigned to a specific Mammography/Breast Sonography clinical site. Assignments are arranged by the Program Coordinator and the assigned schedule must be followed closely by each student.

Normal clinical hours for the Mammography/Breast Sonography Program are 8 am – 4 pm with a 30-minute lunch break. Student attendance at a CEC varies by semester. A clinical rotation schedule will be provided in a timely manner prior to the start of each semester. Students will not be required to complete more than 10 hours in one day, nor will they be required to complete more than 40 hours of combined clinical and didactic coursework within one week.

The ARRT instituted **“daily reporting limits”** for mammography and breast sonography clinical experiences. Students may record 16 mammography competencies (mammograms, QC procedures, mammographic image evaluation, and elective procedures) and 9 breast sonography competencies daily. Students may participate in more, but these numbers are the limit for recording competencies each day of clinical experience.

Occasionally, a desired clinical exam may be scheduled outside normal clinical hours. Students are allowed to attend the clinical site to obtain these exams, as long as the non-traditional schedule is a voluntary assignment by the student AND is approved by the clinical site and Mammography/Breast Sonography Program Coordinator. No student may deviate from clinical hours without approval of both the clinical site and Mammography/Breast Sonography Program Coordinator. Deviating clinical hours are voluntary only and will not contribute towards make-up time and/or weekly scheduled hours.

Clinical education is an integral part of any allied health profession. Student employment is not to interfere with clinical assignments.

18.0 Clinical Affiliates - Mammography/Breast Sonography

Arkansas Methodist Medical Center	900 W Kingshighway, Paragould, AR 7245	870-239-7826 (tech station) (leave VM if needed)	Carrie Rowland	Mammo E US

Baptist Memorial Hospital-Desoto	363 Southcrest Circle, Suite 303 Southaven, MS 38671	662-772-2188	Jami Stafford Anna West	Mammo E US BD
Baptist Women's Health Center	50 Humphreys Center Memphis, TN 38120	901-226-0847 (Main) 901-226-0824 (Tech station)	Paige Nuchols (manager) Teresa Hardy (lead) Ramona McGee (lead)	Mammo E US BD
Bluff Imaging and Women's Center Poplar Bluff, MO	2588 N Westwood Blvd, Poplar Bluff, MO 63901	573-785-6610 573-776-9325	Katie Shavalia Suzanne Thurman (admin)	Mammo E US
Cross Ridge Community Hospital	310 S Falls Blvd, Wynne, AR 72396	870-208-1325	Melanie Burnette	Mammo
Conway Regional Medical Center	2302 College Ave. Conway, AR 72034	501-513-5101 (Lori Office)	Lori Haley, mgr	Mammo E US
Desoto Imaging Center	7420 Guthrie Dr N Ste 105, Southaven, MS 38671	662-349-4321		Mammo
Great River Medical Center	1520 N Division St, Blytheville, AR 72315	870-838-7371 (Suzie office)	Suzie Edwards	Mammo
NEA Baptist Memorial Hospital – Women's Center	4800 East Johnson Jonesboro, AR 72401	870-936-8035 (tech station)	Dakota Andrews, lead Ashlee Walszonia, (F16 manager)	Mammo E US BD
Outpatient Radiology Clinic	200 S Rhodes St #B West Memphis, AR 72301	870-735-5555 (tech station)	Carolyn Meurrier Kassi Sullivan Scott Ferguson, MD	Mammo E US BD
Unity Health Breast Center Searcy UHBC	415 Rodgers Dr, Searcy, AR 72143	501-278-3298 (at site main)	Melanie Potter	Mammo E US
St. Bernard's Imaging Center	1144 E. Matthews Ave Jonesboro, AR 72401	870-207-8048 (tech station)	Kerri Hart Michelle Sneed, Education Coordinator Julie Adamson (admin)	Mammo E US

Saint Francis Hospital System	5959 Park Ave, Memphis, TN 38119	901-765-1000		
Unity Health/ Harris - Newport	1205 McLane St. Newport, AR 72112	870-523-8911 870-512-3004	Shawna Worthington Megan Benish	Mammo E US
West Breast Center	7945 Wolf River Blvd, Germantown, TN 38138	901-604-6618 (Kelsey Cell)	Beverly Gressei Kelsey Gallin	Mammo Breast US
White River Medical Center	1710 Harrison Street Batesville, AR 72501	870-262-1678 (tech station)	Lori Konklin Amy Williams Andi Henson	Mammo E US

Click the clinic sites to navigate to their websites.

19.0 Time Records

The Mammography/Breast Sonography program is currently using Trajecsys, a web- based clinical platform. This software is used to access time clock, log daily activities, access clinical evaluations, and record clinical competency exams. Students are required to purchase a software license from Trajecsys (www.trajecsys.com). **Students will clock in/out at the clinical site**, while technologists will approve and complete clinical evaluations online. The Program Coordinator or Clinical Faculty will approve the Time Records.

20.0 Attendance

All students are expected to attend clinical education for the days/hours designated on the Clinical Schedule. Students are required to be in attendance 100% of all assigned clinical days, unless otherwise specified. Attendance and punctuality are very important for clinical education Students should arrive at the clinical site promptly and remain until the scheduled departure time. Late arrival or early departure in excess of one hour will count as an absence for that day.

Clinical Time Deviation Policy: Time deviations are defined as:

- Arriving later or leaving earlier than **1 minute** from the scheduled time policy.
- Clocking in from a mobile device or location with an unrecognized IP address.

On the fourth (**4th**) time deviation, an **absence** is recorded for the semester. **Time deviations are for emergency situations only.** Time deviations do not provide an option or choice to go in late or leave early a few times. The student has professional accountability for meeting this

standard. The student is expected to attend during the assigned hours of which are not to exceed eight hours per day.

Students are allotted a specific number of (2) personal days every semester in which the student is enrolled in a clinical education course. Personal days allow the student to be absent from clinic for any reason. Personal days are to be used at the student's discretion. Students must notify the Mammography Program Coordinator and their clinical site instructor of their absence prior to the start of the clinical day. Failure to notify appropriate supervisors will result in a deviation.

Any absences from clinic, other than the allowed personal days, MUST be made up prior to the end of finals or during the time approved by the Clinical Coordinator. Should a student miss three (3) or more days for any reason, other than a death in the immediate family (parent, grandparents, siblings, children, grandchildren, spouse) or required court appearance, a drop in one (1) letter grade will occur for every additional absence. Exceptions to this policy will be made in the event of the death of an immediate family member (parents, grandparents, children, grandchildren, siblings, and spouse), extreme illness of the student involving hospitalization, or required court appearance (jury duty, witness, etc.). The student who experiences an unplanned, extenuating circumstance that affects their ability to attend clinical education as required by this syllabus should contact the Mammography Program Coordinator as soon as possible.

When making up clinic time due to absence, make-up attendance must be Monday- Friday during normally assigned clinic time. Extenuating circumstances includes, but is not limited to, jury duty, extended illness, a death in the family, etc.

CLINICAL COURSE REQUIREMENTS

21.0 Miscellaneous Policy Concerns and Proposals

Any student attending less than 100% scheduled clinical hours will receive an incomplete grade for that clinical course, regardless of the number of competency objectives achieved. Exceptions to this rule exist only in the event that the assigned machine is down (maintenance, low volume, etc.) and the assigned technologists have left the premises. The clinical grade will be comprised of the requirements specified in the specific course syllabus.

Evaluation criteria for Clinical Competency Objectives as well as Student Clinical Evaluations are clearly stated on the forms available in Trajecsys and will be discussed during orientation of the Mammography Program.

22.0 Dress Code

22.1 All students:

1. Charcoal grey scrubs with the A-State MIRS logo on the upper left corner of the shirt will be the required uniform. Solid white, black, or pink shirts may be worn under the scrub top.
2. White lab coats are optional and may be worn based on student preference. Style length should cover the hips. No other coats or jackets are acceptable during clinic hours.
3. Shoes must be closed-toe, made of fluid-resistant material, and predominantly white, grey, or black. Avoid neon colors and busy designs.

22.2 General Appearance:

1. Student ID badges are to be worn in the clinical area at all times.
2. Student ID badges **ARE NOT TO BE WORN** during employment hours if a student is being paid as an employee by a health care facility.
3. Hair should be neat/clean. Long hair should be pulled back, away from the face.
4. Personal hygiene is to be maintained at all times.
5. Plain wedding bands and watches are the only recommended jewelry to be worn. If ears are pierced, smaller studs may be worn. Excessive body piercing is not allowed.
6. Visible tattoos must be covered.
7. Uniforms must be kept clean, neat, and pressed at all times. Shoes and laces should be kept clean and stain-free.
8. Fingernails should be kept trimmed and neat. If polish is not prohibited at the CEC, students are allowed to wear light, neutral colors. No glitter or designs and the length must be **short** to maintain patient safety and comfort during positioning.
9. Regulations regarding appearance are intended to foster professionalism. Faculty reserve the right to regulate student appearance. Students who appear unprofessional in conduct or dress may be removed from the clinical setting.

23.0 Clinical Competency Objectives

As part of their educational program, candidates must demonstrate competence and meet the clinical experience requirements specified in ARRT Mammography Clinical Experience Requirements document (ARRT Mammography Clinical Experience Requirements). Demonstration of clinical competence means that the Clinical Instructor has observed the candidate performing the procedure independently, consistently, and effectively. Candidates must demonstrate competence in the areas listed below.

- Screening/Diagnostic + MQSA
- Mammography Electives

- Mammography Quality Assurance
- Breast Sonography
- Interventional Breast Sonography

Clinical competency exams must be documented in the clinical software program (Trajecsys). All competency exams must be completed on a patient with a written doctor's order, not on a volunteer.

24.0 Clinical Advising Program

All students enrolled in clinical education are evaluated and advised regarding their ability to care for patients in a professional and ethical manner. The advising program is conducted via several documents:

1. "**Student Evaluation Form**" forms are used by technologists to give students and faculty an opinion of the students' trends in professional attitudes and behavior (affective domain). The results of the clinical evaluations will be discussed with the student at the end of the semester. Students are evaluated at midterm and semester end.
2. Clinical grades do not include advising results, however, students may be subject to corrective actions including incomplete or failing course grade due to failure to comply with advising suggestions and/or not making satisfactory progress toward goal completion.

25.0 Clinical Supervision

Students are allowed to operate the mammography and sonography equipment **only with a registered mammographer and/or registered sonographer present.** Technologist are responsible for student supervision to ensure proper patient care, imaging, and radiation safety occur in breast imaging.

Students are allowed to operate the controls and set the machine ONLY if the student and technologist both feel confident the student is ready. The technologist must be present and verify the accuracy of the student's work with direct supervision (sitting beside the student) until clinical competency is obtained and documented.
Thereafter, exam completion may be performed under indirect supervision (the technologist should be within an easily accessible and communicable distance.)

26.0 Evaluations and Clinical Checklist

The student's Student Evaluation Forms are completed by the technologist and will be discussed in Orientation. The student will fill out an evaluation for the clinical instructor he/she was assigned to

throughout his/her rotation.

It is the student's responsibility to complete the Clinical Procedures Daily Log table included in Trajecsys (www.trajecsys.com) for each exam/clinical assignment they are assigned. The Clinical Procedures Daily Log is to be kept daily and marked according to the procedures the student has observed or performed each day.

At the beginning of a student's rotation of the clinical assignment they will be given the clinical syllabus. Student are responsible for working with registered technologists to complete all documents in Trajecsys including the Clinical
Procedures Log, Time Records, Competency exams, Room Orientation, and Department Orientations completed by the end of each rotation. Failure to complete these items by the due date will result in a penalty to the student's clinical grade.

27.0 Clinical Rotation

The student's first few days on a new clinical rotation should be used for observation. This gives the student time to learn the setups, equipment and routine of the machine. Students should help the clinical site care for patients, stock rooms, transport, and any other daily duties assigned to working technologists. Once comfortable with the imaging routine, students are encouraged to begin imaging patients as soon as possible.

Students must be MQSA compliant prior to performing required clinical procedures. The student must perform a minimum of 25 examinations under the direct supervision of an individual qualified under paragraph (a)(2) (https://www.ecfr.gov/current/title-21/chapter-I/subchapter-I/part-900/subpart-B/section-900.12#p-900.12(a)(2)). ARRT will request confirmation that the student is MQSA compliant through the online worksheet. Students will keep a record of these exams and document them as MQSA on their log sheets.

28.0 Cell Phone Policy

28.1 Classroom:

Cell phones are not to be used during class time. Cell phones should not ring during class. If the student has an emergency that they need to respond to they can leave the class quietly and be allowed to return. If there is an emergency during the class period, you may be reached through the MIRS Department office at 972-3073. Should your cell phone ring during scheduled class time, please excuse yourself with minimal class disruption. If a cell phone is seen during testing, it will be assumed the student is cheating, and they will be asked to leave without being allowed to finish the exam.

28.2 Clinic:

All cell phones are to be turned off while the student is in the clinical site. Phones are to be stored in a locker or other provided place, and not carried on the student at all. Phones may only be used during breaks away from patient care areas. Any student caught carrying their cell phone in clinic will be asked to leave clinic and will result in an unexcused absence.

Program Documents

Mammography/Breast Sonography Program Competency Requirements

Breast Sonography Competency Requirements

The American Registry of Radiologic Technologists (ARRT) specifies clinical competency requirements for the post- primary certification in breast sonography, as follows:

- Mandatory Procedures
    - 200 breast sonography patient exams, limited or complete, which may not be simulated.
    - Bilateral exams are the equivalent of two (2) breast exams.
- Elective Procedures
    - 20 interventional procedures in any combination
        - Fluid aspiration (abscess, seroma, cyst)
        - Fine needle aspiration biopsy
        - Needle core biopsy (e.g., spring-loaded)
        - Vacuum-assisted core biopsy
        - Clip placement
        - Pre-op need localization (e.g., wire, seed)
    - Participation is required and is defined as the following activities:
        - Patient preparation (e.g., explain procedure, verify informed consent)
        - Select and prepare equipment
        - Perform time out procedure
        - Position patient
        - Practice infection control and prevention
        - Provide post-procedural care and instruction
    - Observation and simulation of the interventional procedure may be possible if the candidate is limited by the facility and the patient population to complete the interventional procedures.

Therefore, A-State students in the Mammography/Breast Sonography Program must actively perform breast sonography examinations under direct supervision of a certified and licensed mammographer, radiographer, sonographer or licensed physician. The Program competency requirements for clinical credit are as follows:

Mandatory Breast Sonography Competency:

- Students must scan independently, if allowed by the site and/or physician.

- If independent scanning is not allowed, competency for clinical credit may be documented if the student scans to the satisfaction of the Clinical Instructor (CI) after the procedure, if time allows.
    - Students may not document this clinical competency as ARRT clinical experience, as this is a simulated sonography exam.

Competency for a mandatory breast sonography exam should not be verified by the CI if the student does not fully and actively participate in the procedures, as allowed by the physician or site.

Independently scanning varies per clinical facility. Please refer to the Mammography/Breast Sonography Program Breast Sonography Competency Requirements document for more information and specific examples.

Elective/Invasive Breast Sonography Competency:

- Competency can be recorded for the student as long as the student participates in the procedure **as much as allowed** by the site and/or physician for the ARRT **and** Program clinical credit.
- Ensure the following activities are performed to acceptable standards of the CI:
    - Equipment preparation, such as a sterile tray set up
    - Patient communication - accurate pre-procedure history questions, informed consent verification and post- procedure care instructions
    - Patient care, the student is competent in the following (if applicable to the US procedure):
    - Instructs and assists the patient in the proper position
    - Assists in patient care during the procedure
    - Assists in post-procedure care, i.e. holds pressure, provides towels for gel removal, etc.
- If students are **not** allowed to operate the US equipment during the procedure, the student must:
    - Demonstrate knowledge of necessary equipment operation.
    - Explain the necessity of the US procedure to the satisfaction of the CI

Competency should **not** be verified by the CI if the student does not participate fully in the procedure, as allowed by the physician or site.

Mammography Competency Requirements

The American Registry of Radiologic Technologists (ARRT) specifies clinical competency requirements for the post- primary certification in mammography, as follows:

Mandatory Mammography Procedures

Any mammographic procedures/imaging the candidate performs prior to their MQSA compliance date may not be submitted towards their clinical experience requirements.

A. Mammographic Imaging

The candidate must independently complete the mammographic imaging requirement (screening and/or diagnostic) on 75 patients. The candidate must perform all mammograms on patients (not phantoms or simulations), demonstrating the following tasks for each mammogram performed

- Patient Preparation/Education Tasks:
  - Provide for patient comfort and cooperation by familiarizing patient with the equipment and process, stressing the need for compression, and providing general psychological support.
  - Solicit and record patient clinical, surgical, and family history relevant to the performance and interpretation of the mammographic procedure.
  - Document areas of interest including location of lumps, scars, moles, etc., by means of radiopaque markers on the breast and/or diagram on clinical information sheet, per department protocol.
  - Respond to patient questions regarding breast self-examination, clinical breast examination, patient dose, possible need for additional views, and process for receiving results.
  - Respond to patient questions regarding American Cancer Society (ACS) and American College of Radiology (ACR) guidelines for screening mammography, and other breast imaging procedures.
- Mammographic Imaging Tasks:
  - Select equipment (e.g., compression paddles, magnification stand) appropriate to the patient and the views to be performed.
  - Adjust exposure factors, as needed (e.g., implanted devices, augmentation, postradiation changes).
  - Position patient and equipment to acquire views per department protocol specifications.
  - Evaluate the images to ensure that they contain proper identification and labeling and are of diagnostic quality.

B. Quality Control (QC)

The candidate must participate in the performance, evaluation, and recording of all the QC tests as indicated in the 2018 ACR Digital Mammography Quality Control Manual or according to the equipment manufacturer’s recommendations.

If the manufacturer’s QC recommendations do not require a test listed below, candidates should follow the 2018 ACR Digital Mammography Quality Control Manual information to perform the test.

- QC Documentation (limited to one submission per day per test)
  - Phantom Image Quality (10)

- Compression Thickness Indicator (5)
- Visual Checklist (5)
- Acquisition Workstation Monitor QC (5)
- Radiologist’s Workstation Monitor QC (2)
    - If the radiologist’s workstation monitor is remote, the candidate is responsible for reviewing the documentation of the monitor QC, according to facility protocol.
- Compression Force (2)
- Facility QC Review (1)
- Repeat Analysis (1)
- Review of Medical Physicist’s Annual Survey Report (1)
    - Including Signal-to-Noise Ratio (SNR), Contrast-to-Noise Ratio (CNR), Modulation Transfer Function (MTF), Manufacturer Detector Calibration, Artifact Evaluation, Flat Field, as applicable.

C. Mammographic Image Evaluation

Candidate must consult with an MQSA-qualified interpreting physician at least once to review 10 (or more) mammographic cases for breast anatomy, pathology, and image quality, and establish corrective action per EQUIP regulations. ARRT highly recommends that the candidate makes their best effort to participate in this evaluation in person. However, if the interpreting physician is remote, the candidate may review the same images on a local monitor through a HIPAA-compliant virtual meeting with the physician.

D. Elective Procedures

The candidate must observe, assist with, or participate in at least five of the procedures listed below. For each individual patient per day, the candidate may count up to two procedures. The candidate may document all five elective procedures in one day.

- Needle Localization
- Localization Imaging (postplacement)
- Surgical Specimen Imaging
- Breast MRI
- Breast Ultrasound (e.g., diagnostic ultrasound, biopsy)
- Stereotactic Biopsy with Clip Placement
- Stereotactic Specimen Imaging
- Tissue Marker Clip Placement Imaging
- Screening Breast Implant Imaging
- Diagnostic Mammogram
- Recall from a Screening Mammogram

“Participate” means being actively involved in the performance of the procedure even though the

candidate may not have primary responsibility for performing the procedure.

Bone Densitometry Competency Requirements

Candidates applying for certification and registration are required to meet the Professional Requirements specified in the ARRT Rules and Regulations. ARRT's Bone Densitometry Clinical Experience Requirements describe the specific eligibility requirements that must be documented as part of the application for certification and registration process.

Candidates for bone densitometry certification and registration must document performance of a minimum of 125 mandatory procedures and three additional elective procedures according to the criteria noted below.

Completion of each procedure must be verified by an ARRT certified and registered technologist (postprimary certification not required), supervisor, or licensed physician.

A maximum of 15 mandatory and elective procedures may be logged for each day. Remote scanning is not acceptable for completion of ARRT Clinical Requirements. The candidate must complete the examination or procedure at the facility where the patient and equipment are located. The candidate must be physically present during the examination or procedure.

A. Mandatory Procedures

- Daily Quality Control Procedures

Candidates must perform and interpret results of the required daily QC tests on DXA scanning equipment, according to manufacturer guidelines, at least 25 times.

B. Patient Scanning Utilizing Dual Energy X-Ray Absorptiometry (DXA) Equipment

- Spine
- Femur

Candidates must perform **50 scans of both the lumbar spine and femur**. If a patient is scanned at two or more anatomical sites, each scan can be counted as a separate occurrence. Dual proximal femur scans are considered one site. However, scanning the same site two or more times on a single patient the same day counts only as one scan. Scans must be performed on humans; scans of phantoms and other types of simulated tissue cannot be counted as scans. Candidates must incorporate the following clinical activities into each DXA examination.

C. Patient Preparation/Education

- Explain the procedure: Obtain relevant patient history (including screening for possible pregnancy); assure that all artifact-producing objects have been removed; and verify that

patient has not been subjected to medical procedures or medications that may invalidate the scan results (e.g., received contrast, prosthetic devices).
- Acquisition and Analysis: Enter patient data required to utilize reference data; select positioning aids and position patient; record unusual positioning details; and perform DXA scan.
- Evaluation of Results: Verify regions of interest; evaluate quality of measurements for problems due to artifacts, pathology, etc.; recommend additional scans as necessary; flag values that require physician's attention (low T-score; unreliable results, etc.); and archive results.

D. Elective Procedures

Candidates must complete at least three of the following activities the number of times specified. Mandatory and elective procedures cannot be counted on the same patient on the same day.

- Perform and analyze a DXA scan of the forearm 10
- Perform and analyze a VFA scan using DXA equipment 5
- Perform and analyze scans for in vivo precision study 1
- Perform and analyze a DXA scan on pediatric patients (age 5-19 years) 2
- Perform a FRAX® assessment using an online FRAX® calculation tool 10
- Perform follow-up scan and compare bone density measurements from two occasions (for same patient) to assess changes over time 10
- Answer basic questions from patients or family members about lifestyle choices related to bone health, fall prevention, and drug therapies 20
- Give lecture to other health care professionals or provide community education workshop related to bone health and bone densitometry 1

Arkansas State University Mammography/Breast Sonography Program Breast Sonography

Competency Requirements Statement of Understanding

Sign below as verification and acceptance of the following:

- I have read the Mammography/Breast Sonography Program policy on Breast Sonography Competency Requirements.
- I understand the requirements to obtain Program clinical course credit for breast sonography competency.
- I understand the requirements to obtain ARRT clinical experience requirements for breast sonography certification.
- I understand that some of the competencies accepted for the Program’s clinical course grade may not be used as evidence of clinical experience in breast sonography for the ARRT Breast Sonography Post- Primary Certification.
- I accept full responsibility for maintaining accurate clinical competency records for both the Program and the ARRT.

_____

_____

Print Student Name Date

_____

_____

Student Signature Witness Signature

ARKANSAS STATE UNIVERSITY COLLEGE OF NURSING AND HEALTH PROFESSIONS

Incident Report Form

CLINICAL LABORATORY SCIENCES

Date:_____ COMMUNICATION DISORDERS

NURSING

Time:_____ PHYSICAL THERAPY

RADIOLOGIC SCIENCES

Location:

_____

(On Campus/Off Campus)

Student:_____ SS#: _____

Description of Incident (Name all persons involved):

_____

_

_____

_

_____

_

_____

_

_____

_

_____

_

_____

_

Witnesses of the Incident:

_____
_

_____
_

Action taken (notification of/by whom):

_____
_

_____
_

Review/Comments:

_____
_

_____
_

Does this need review by the Infection Control Committee? Yes No

_____
_____
Student Date

_____
_____
Faculty Date

Follow-up:

_____
_

_____
_

If more space is necessary, use additional pages or back of sheet.

ARKANSAS STATE UNIVERSITY MAMMOGRAPHY/BREAST SONOGRAPHY PROGRAM

Counseling Document Form

Student:_____

Date:_____

Faculty Advisor: _____

Reason For Counseling	
Suggestions for Corrective Action	**Goals**
Faculty Advisor's Comments	

Student’s Comments

_____

_____

Faculty Advisor Signature Student Signature

ARKANSAS STATE UNIVERSITY MAMMOGRAPHY/BREAST SONOGRAPHY PROGRAM

ROOM ORIENTATION CHECKLIST

Student: _____ Date: _____

Clinical Site: _____

Student working in a Mammography/Breast Sonography suite should be oriented to the following:

ROOM EQUIPMENT	YES	NO	N/A
1. Main breaker switch			
2. Emergency off buttons			
3. Equipment controls			
4. Exposure mechanism			
5. Computer Console			
6. Exam storage (optical disks, magnetic tape, PACS)			
8. Patient Consent/Education Forms			
9. Linens			
10. Immobilization devices			
11. Storage area for accessories (Ex. Emesis basin, gloves, etc)			
13. Radiation safety reference manual			
14. Quality Assurance procedures/ devices			
15. Any additional information not listed above:			

Technologist's Signature: _____

ARKANSAS STATE UNIVERSITY MAMMOGRAPHY/BREAST SONOGRAPHY PROGRAM DEPARTMENT

ORIENTATION CHECKLIST

Student: _____ Date: _____

Clinical Site: _____

Topic	Yes	No
1. Codes relevant to institution (Fire, Patient, Emergency)		
2. Room safety		
3. Review Direct Supervision Policy		
4. Location of Crash Cart		
5. Rules and Regulations of Department		
6. Radiation Safety Policies		
7. Tour of Department		
8. Department Chain of Command		
9. Incident Report Policy		
10. Parking		
11. Lunch Breaks		
12. Expectations of Students		

_____

_____

Clinical Supervisor Signature Date

_____

Student Signature

ARKANSAS STATE UNIVERSITY MAMMOGRAPHY/BREAST SONOGRAPHY PROGRAM

Student Evaluation Form

Student Name: _____ **Date:** ___/___/___

Clinical Site: _____ **Grade:**_____**%**

Clinical observations: Circle one.

1. Does student check order before set-up?	Yes (2)	usually (1)	no (0)
2. Does student obtain the appropriate patient history?	Yes (2)	usually (1)	no (0)
3. Does the student review the patient's history for any possible contraindications?	Yes (2)	usually (1)	
4. Does student observe patient?	Yes (2)	usually (1)	

5. Does the student provide quality patient care? (Addresses the needs of the patient and the patient's family members.)	Yes (2)	usually (1)

Student Evaluation:

Please evaluate the student on his/her actual observed performance as compared with others of the same rate:

6. APPEARANCE: The student displays professional attire, i.e. hair is clean and styled, uniform is wrinkle- free, shoes are clean, dental hygiene is observed, etc.

a. _____ always professionally dressed and groomed (3)
b. _____ usually professionally dressed and groomed motivated (2)
c. _____ inconsistently groomed, needs improvement (1)
d. _____ does not follow a given hygiene routine, needs counseling (0)

7. MOTIVATION: The desire of the student to increase his/her capability.

a. _____ highly motivated (3) b._____ motivated (2)
c. _____ inconsistent (1) d. _____ purposeless (0)

8. INDUSTRY: The student's capability as reflected by his/her work.

a. _____ seeks additional assignments (3) b._____ does required assignments (2)
c. _____ needs occasional prodding (1) d. _____ purposeless (0)

9. CONCERN FOR OTHERS: Consideration for others' feelings and the student's ability to view the parameters of existing circumstances.

a. _____ sincerely and actively concerned (3) b. _____ generally concerned (2)
c. _____ occasionally concerned (1) d. _____ indifferent (0)

10. EMOTIONAL STABILITY: The student's ability to react under stress in a mature and dependable manner.

a. _____ exceptionally stable (3) b. _____ generally well balanced (2)
c. _____ excitable or unresponsive under stress (1) d. ____ generally hyperemotional or apathetic (0)

11. ADAPTABILITY: The student's ability to interact with and under others' direction.

a. _____ relates exceptionally well, promotes good morale; able to take constructive criticism (3)
b. _____ relates well and contributes to good morale; able to take constructive criticism. (2)

c. _____ generally cooperative with others; but unable to take constructive criticism. (1)

d. _____ unable to interact with others; unable to take constructive criticism. (0)

12. ATTENDANCE: The reliability of the student to be at assigned place on time.

a. _____ always present and on time (3)

b. _____ usually present and/or occasionally late (2)

c. _____ unreliable in attendance and/or frequently late (1)

d. _____ frequent unexcused absences or perpetual tardiness (0)

13. CONDUCT: The student demonstrates professional conduct and appearance.

a._____ always (3) b._____ most of the time (explain) (2)

c. _____ occasionally (explain) (1) d._____ needs counseling (explain) (0)

14. PATIENT RAPPORT: The student's ability to relate with ill people in such a way as to promote confidence and understanding.

a. _____ promotes confidence and understanding (3)

b. _____ relates well with sick (2)

c. _____ has difficulty in developing rapport with sick people (1)

d. _____ tends to be unconcerned and upsets patients (0)

15. COMMUNICATION: The student's ability to communicate on a professional level with physicians, other staff, patients, and patient's families (and anyone else in the healthcare environment).

a._____ always (3) b._____ most of the time (explain) (2)

c._____ occasionally (explain) (1) d. _____ needs counseling (explain) (0)

MISCELLANEOUS INFORMATION AND COMMENTS: Please give any further information that you feel might be helpful in evaluating this student:

DATE: _____ Signature: _____

Position: _____

ARKANSAS STATE UNIVERSITY MAMMOGRAPHY/BREAST SONOGRAPHY PROGRAM

CLINICAL INSTRUCTOR EVALUATION

Technologist _____ Clinical Site _____

Semester _____ Date _____

This questionnaire affords you an opportunity to express your opinions concerning the technologists you have worked with at your assigned clinical site. The primary purpose of obtaining this information is to improve instruction. It will serve this purpose best if you answer the questions carefully and honestly.

Please indicate your response by checking the appropriate box on the rating scale.
1. Strongly agree 2. Agree 3. Disagree 4. Strongly disagree 5. Not applicable

The technologist:	1	2	3	4	5
1. Communicated expectations about my performance					
2. Explained the procedures and what he/she was doing					

3. Was willing to answer my questions					
4. Encouraged me to ask questions					
5. Evaluated my performance and offered suggestions for improvements					
6. Utilized constructive criticism when evaluating my work					
7. Taught and demonstrated radiation safety for patients and staff					

8. Demonstrated sensitivity to the needs of patients and visitors					
9. Demonstrated the importance of high productivity					
10. Always demonstrated professional behavior and positive work ethics					

11. Demonstrated a helpful and cooperative attitude when communicating with other employees and students					
12. Provided positive recognition during clinical rotation					

13. Always recognized my abilities and positively encouraged me to try new procedures					
14. Never expected me to perform exams alone when I had not achieved competency					
15. Working with this technologist was a positive experience					

16. I would like to work with this technologist again					

COMMENTS: _____

_____

ARKANSAS STATE UNIVERSITY MAMMOGRAPHY/BREAST SONOGRAPHY PROGRAM

Physical Performance Requirements

Students are advised of the following physical guidelines for working in the Mammography environment. Please indicate if you can perform at the level indicated or if you need accommodations to accomplish the designated task.

STRENGTH & MOBILITY YES NO

_____ On your feet most of the day.

_____ Walking several hours of the day, either performing exams, patient transfers, or portable procedures.

_____ Assume varied postural positions (bending, kneeling, stretching) to work with equipment and patients.

_____ Lift heavy weight as necessary, either equipment or patients.

_____ Push/pull stretchers, wheelchairs, and supply carts as necessary.
In NO, please explain

MANUAL DEXTERITY & COORDINATION YES NO
_____ Able to perform manipulative skills using thumb/hand/wrist and arm and hand movements such as venipuncture, positioning of equipment, assisting patient movements, operating a computer, and positioning table and gantry.
_____Able to perform manipulative skills using the lower extremities, such as foot table locks.
_____ Wears protective clothing correctly, when necessary, such as gowns, masks, gloves, shoe covers when working with patients in isolation, and surgical gowns, caps, gloves, shoe covers, lead aprons for invasive cases.
If NO, please explain

SENSORY DISCRIMINATION YES NO

_____ Able to see objects distinctly and clearly with or without corrective devices.
_____ Able to compensate for hearing loss.
If NO, please explain

MENTAL ABILITIES YES NO
_____ Follow oral and written instructions correctly.
If NO, please explain

In accordance with the Americans with Disabilities Act,
_____
Print Name
(please check one)
_____ need special accommodations to complete the Mammography Program (list needs on back).
_____ Require no special accommodations to complete the Mammography Program.

Student signature: _____ Date: _____

Fact Sheet

FOR IMMEDIATE RELEASE
Monday, April 14, 2003
Contact: HHS Press Office
(202) 690-6343
PROTECTING THE PRIVACY OF PATIENTS' HEALTH INFORMATION

https://www.hhs.gov

Overview:

The first-ever federal privacy standards to protect patients' medical records and other health information provided to health plans, doctors, hospitals and other health care providers took effect on April 14, 2003. Developed by the Department of Health and Human Services (HHS), these new standards provide patients with access to their medical records and more control over how their personal health information is used and disclosed. They represent a uniform, federal floor of privacy protections for consumers across the country. State laws providing additional protections to consumers are not affected by this new rule.

Congress called on HHS to issue patient privacy protections as part of the Health Insurance Portability and Accountability Act of 1996 (HIPAA). HIPAA included provisions designed to encourage electronic transactions and also required new safeguards to protect the security and confidentiality of health information. The final regulation covers health plans, health care clearinghouses, and those health care providers who conduct certain financial and administrative transactions (e.g., enrollment, billing and eligibility verification) electronically. Most health insurers, pharmacies, doctors and other health care providers were required to comply with these federal standards beginning April 14, 2003. As provided by Congress, certain small health plans have an additional year to comply. HHS has conducted extensive outreach and provided guidance and technical assistant to these providers and businesses to make it as easy as possible for them to implement the new privacy protections. These efforts include answers to hundreds of common questions about the rule, as well as explanations and descriptions about key elements of the rule.

These materials are available at http://www.hhs.gov/ocr/hipaa.

PATIENT PROTECTIONS

The new privacy regulations ensure a national floor of privacy protections for patients by limiting the ways that health plans, pharmacies, hospitals and other covered entities can use patients' personal medical information. The regulations protect medical records and other individually identifiable health information, whether it is on paper, in computers or communicated orally. Key provisions of these new standards include:

- Access To Medical Records. Patients generally should be able to see and obtain copies of their medical records and request corrections if they identify errors and mistakes. Health plans, doctors, hospitals, clinics, nursing homes and other covered entities generally should provide access these records within 30 days and may charge patients for the cost of copying and sending the records.
- Notice of Privacy Practices. Covered health plans, doctors and other health care providers must provide a notice to their patients how they may use personal medical information and their rights under the new privacy regulation. Doctors, hospitals and other direct-care providers generally will provide the notice on the patient's first visit following the April 14, 2003, compliance date and upon request. Patients generally will be asked to sign, initial or otherwise acknowledge that they received this notice. Health plans generally must mail the notice to their enrollees by April 14 and again if the notice changes significantly. Patients also may ask covered entities to restrict the use or disclosure of their information beyond the practices included in the notice, but the covered entities would not have to agree to the changes.
- Limits on Use of Personal Medical Information. The privacy rule sets limits on how health plans and covered providers may use individually identifiable health information. To promote the best quality care for patients, the rule does not restrict the ability of doctors, nurses and other providers to share information needed to treat their patients. In other situations, though, personal health information generally may not be used for purposes not related to health care, and covered entities may use or share only the minimum amount of protected information needed for a particular purpose. In addition, patients would have to sign a specific authorization before a covered entity could release their medical information to a life insurer, a bank, a marketing firm or another outside business for purposes not related to their health care.
- Prohibition on Marketing. The final privacy rule sets new restrictions and limits on the use of patient information for marketing purposes. Pharmacies, health plans and other covered entities must first obtain an individual's specific authorization before disclosing their patient information for marketing. At the same time, the rule permits doctors and other covered entities to communicate freely with patients about treatment options and other health-related information, including disease-management programs.
- Stronger State Laws. The new federal privacy standards do not affect state laws that provide additional privacy protections for patients. The confidentiality protections are cumulative; the privacy rule will set a national "floor" of privacy standards that protect all Americans, and any state law providing additional protections would continue to apply. When a state law requires a certain disclosure – such as reporting an infectious disease outbreak to the public health authorities – the federal privacy regulations would not preempt the state law.
- Confidential communications. Under the privacy rule, patients can request that their doctors, health plans and other covered entities take reasonable steps to ensure that their

communications with the patient are confidential. For example, a patient could ask a doctor to call his or her office rather than home, and the doctor's office should comply with that request if it can be reasonably accommodated.
- Complaints. Consumers may file a formal complaint regarding the privacy practices of a covered health plan or provider. Such complaints can be made directly to the covered provider or health plan or to HHS' Office for Civil Rights (OCR), which is charged with investigating complaints and enforcing the privacy regulation. Information about filing complaints should be included in each covered entity's notice of privacy practices. Consumers can find out more information about filing a complaint at http://www.hhs.gov/ocr/hipaa or by calling (866) 627-7748.

HEALTH PLANS AND PROVIDERS

The privacy rule requires health plans, pharmacies, doctors and other covered entities to establish policies and procedures to protect the confidentiality of protected health information about their patients. These requirements are flexible and scalable to allow different covered entities to implement them as appropriate for their businesses or practices. Covered entities must provide all the protections for patients cited above, such as providing a notice of their privacy practices and limiting the use and disclosure of information as required under the rule. In addition, covered entities must take some additional steps to protect patient privacy:

- Written Privacy Procedures. The rule requires covered entities to have written privacy procedures, including a description of staff that has access to protected information, how it will be used and when it may be disclosed. Covered entities generally must take steps to ensure that any business associates who have access to protected information agree to the same limitations on the use and disclosure of that information.
- Employee Training and Privacy Officer. Covered entities must train their employees in their privacy procedures and must designate an individual to be responsible for ensuring the procedures are followed. If covered entities learn an employee failed to follow these procedures, they must take appropriate disciplinary action.
- Public Responsibilities. In limited circumstances, the final rule permits – but does not require – covered entities to continue certain existing disclosures of health information for specific public responsibilities. These permitted disclosures include: emergency circumstances; identification of the body of a deceased person, or the cause of death; public health needs; research that involves limited data or has been independently approved by an Institutional Review Board or privacy board; oversight of the health care system; judicial and administrative proceedings; limited law enforcement activities; and activities related to national defense and security. The privacy rule generally establishes new safeguards and limits on these disclosures. Where no other law requires disclosures in these situations, covered entities may continue to use their professional judgment to decide whether to make such disclosures based on their own policies and ethical principles.
- Equivalent Requirements For Government. The provisions of the final rule generally apply equally to private sector and public sector covered entities. For example, private hospitals and government- run hospitals covered by the rule have to comply with the full range of requirements.

OUTREACH AND ENFORCEMENT

HHS' Office for Civil Rights (OCR) oversees and enforces the new federal privacy regulations. Led by OCR, HHS has issued extensive guidance and technical assistance materials to make it as easy as possible for covered entities to comply with the new requirements. Key elements of OCR's outreach and enforcement efforts include:

- Guidance and technical assistance materials. HHS has issued extensive guidance and technical materials to explain the privacy rule, including an extensive, searchable collection of frequently asked questions that address major aspects of the rule. HHS will continue to expand and update these materials to further assist covered entities in complying. These materials are available at http://www.hhs.gov/ocr/hipaa/assist.html.
- Conferences and seminars. HHS has participated in hundreds of conferences, trade association meetings and conference calls to explain and clarify the provisions of the privacy regulation. These included a series of regional conferences sponsored by HHS, as well as many held by professional associations and trade groups. HHS will continue these outreach efforts to encourage compliance with the privacy requirements.
- Information line. To help covered entities find out information about the privacy regulation and other administrative simplification provisions of the Health Insurance Portability and Accountability Act of 1996, OCR and HHS' Centers for Medicare & Medicaid Services have established a toll-free information line. The number is (866) 627-7748.
- Complaint investigations. Enforcement will be primarily complaint-driven. OCR will investigate complaints and work to make sure that consumers receive the privacy rights and protections required under the new regulations. When appropriate, OCR can impose civil monetary penalties for violations of the privacy rule provisions. Potential criminal violations of the law would be referred to the U.S. Department of Justice for further investigation and appropriate action.
- Civil and Criminal Penalties. Congress provided civil and criminal penalties for covered entities that misuse personal health information. For civil violations of the standards, OCR may impose monetary penalties up to $100 per violation, up to $25,000 per year, for each requirement or prohibition violated. Criminal penalties apply for certain actions such as knowingly obtaining protected health information in violation of the law. Criminal penalties can range up to $50,000 and one year in prison for certain offenses; up to $100,000 and up to five years in prison if the offenses are committed under "false pretenses"; and up to $250,000 and up to 10 years in prison if the offenses are committed with the intent to sell, transfer or use protected health information for commercial advantage, personal gain or malicious harm.

Note: All HHS press releases, fact sheets and other press materials are available at http://www.hhs.gov/news

ARKANSAS STATE UNIVERSITY STATEMENT OF CONFIDENTIALITY SUBSTANCE ABUSE COMPLIANCE CONTRACT

COLLEGE OF NURSING AND HEALTH PROFESSIONS ARKANSAS STATE UNIVERSITY

I, _____ , have read the Board of Trustee approved Substance Abuse

Policy & Procedures of the Arkansas State University College of Nursing and Health Professions and agree, as a student in the

professional health program, to comply with all aspects of the policy as written, including testing for substances and appropriate

release of that information.

Furthermore, I agree to abide by the provisions for determining dismissal and to follow the conditions of readmission as outlined.

_____

Student’s Name

_____

Student’s Signature

_____

Date

ARKANSAS STATE UNIVERSITY COLLEGE OF NURSING AND HEALTH PROFESSIONS

PROCEDURES FOR COLLEGE STUDENT CODE OF HONOR

The College Student Code of Honor exists in addition to the University Code of Conduct and the Academic Integrity Policy found in the Student Handbook. An honor offense by the college code is defined as an act of lying, cheating or stealing. These terms are defined as follows:

Lying – a false statement (written or oral) made with the deliberate intent to deceive; something intended to or serving to convey a false impression.
Cheating – to practice fraud or deceit; academic fraud is a form of cheating and includes such things as plagiarism (including Internet resources), false citation, false data and submission of the same work to fulfill academic requirements in multiple classes.
Stealing – to take the property of others without permission or right; to take ideas, credits, words without right or acknowledgement; to accept credit for another's work. Sharing username, password, or other login credentials with any other individual. Permitting another person to access, log into, or use their student account for any purpose. Allowing another individual to use or using another individual's account or credentials to complete, submit, or participate in coursework, discussions, assignments, quizzes, examinations, projects, or other academic activities through their account. Misrepresenting an individual's identity or permitting another person to represent themselves as an enrolled student.

These honor code violations apply whether they are performed individually or in groups. They apply to didactic, laboratory and clinical experiences of the program as well as in situations where you are representing your program/college.

PROCEDURES:

If a student is aware of an honor offense, the student should report that offense to their ethics committee representative. The representative will accompany the student to the faculty member, program/director or chair's office OR will direct the student to the faculty member of the class in question, the program director or the department chair. An investigation will result.

If there is evidence to bring forward, the student will be notified, in writing, of the specific charges, who the hearing body will be and the time and place of the hearing. Such notification will be delivered at least two working days in advance of the hearing. The date of the hearing, if possible, must be set within 10 working days from the date of notification to the student.

The College Code of Ethics Committee will hear the case. The Ethics Committee will be selected each fall and will be comprised of six CNHP student representatives and two CNHP faculty appointed by the dean. A committee of alternate representatives will be selected by the Dean to include six (6) students and two (2) faculty members*. Actions by the Ethics Committee may include: 1) dismissal of the case, 2) sanction the student, 3) refer the case to the Dean of Students, Student Affairs. Disciplinary sanctions by the committee may include educative, reprimand, restrictions and restitution. The committee does not have the authority to suspend or expel the student. However, the committee may forward the case to the faculty member or director/chair with a recommendation of suspension or program dismissal. The Dean of Students, or designee, will educate the committee and their alternates on the hearing process and sanctions in the fall semester of each year.

Student rights in this committee process are outlined in the A-STATE Student Handbook under the caption "Disciplinary Hearings". The student is entitled to one appeal rendered by the Associate Dean for Judicial Affairs. The process for appeal is found in the section on Appeal Process.

*On each distance campus, one student will be designated as an ethics representative.

ARKANSAS STATE UNIVERSITY COLLEGE OF NURSING AND HEALTH PROFESSIONS

College Student Code of Honor

Each student admitted to a professional program in the College of Nursing and Health Professions is charged with the responsibility of honorable conduct. A student is assumed honorable until his/her actions prove otherwise. An honor offense is defined as an act of lying, cheating, or stealing. Formal procedures exist for violations of the honor code.

As a student in a health program, it is fundamental that you act in an honorable and virtuous way so that a community of trust is established among members of the college and your clients. Honor is a practiced ideal that will positively impact your relationship with fellow students, faculty, administrators, patients and other members of the community. As you live an honorable life, you will find that you cannot live without it.

All students in this college are bound by the Honor Code and all are needed to make it work. The atmosphere of trust and integrity that is created by an honor system enables the student to know his/her word will be taken as true, to compete fairly in the classroom and to keep what is rightfully his/hers. The system functions best when all members of the college not only take responsibility for their own actions, but hold their peers to the same standards.

As a student admitted to a health professions program, you must agree to live by and support the basic principles of honesty – no lying, cheating or stealing; be accountable for your actions; and share information about honor offenses. If you are not prepared to accept these responsibilities, you should select a program outside this college.

I have read the explanation of the College Student Code of Honor. I understand that as an admitted student in one of the programs in the college, I have accepted the pledge of honesty and will be expected to meet the standards as set forward.

_____

Student Name

Signature _____ Date _____

ARKANSAS STATE UNIVERSITY

MIRS Academic Honesty Policy

All class members are assumed to be honest. Consequently, any cheating or plagiarism during any class or clinical activity is considered to be unethical and may result in a grade of “0” for that activity, failure of the course, and/or dismissal from the program. Discovery of falsified clinical documents WILL result in immediate dismissal from the program.

I understand this policy and this document will serve as a written warning. I understand that falsification of clinical documentation will result in my dismissal from any MIRS program.

_____

Student Name

Signature _____ Date _____

ARKANSAS STATE UNIVERSITY COLLEGE OF NURSING AND HEALTH PROFESSIONS

Clarification of Student Role

I hereby confirm that I am being assigned to one of the following clinical sites:

- Arkansas Methodist Medical Center in Paragould, AR
- Baptist Memorial Hospital, Desoto, MS
- Baptist Women’s Health Center, Memphis, TN
- Bluff Imaging and Women’s Center in Poplar Bluff, MO
- Conway Regional Medical Center, Conway, AR
- Cross Ridge Community Hospital, Wynne, AR
- DeSoto Imaging Specialists, DeSoto, MS
- Great River Medical Center, Blytheville, AR
- NEA Baptist Memorial Hospital, Jonesboro, AR
- Outpatient Radiology Clinic, West Memphis, AR
- Searcy Breast Center, Searcy, AR
- St. Bernard’s Imaging Center in Jonesboro, AR

- Unity Health Harris, Newport, AR
- West Breast Center, Memphis, TN
- White River Medical Center in Batesville, AR

I recognize and agree that I am not the agent or employee of the University for any purpose whatsoever during my clinical studies at the Institution. I further acknowledge and confirm that I am a student only and have no authority to act on behalf of the University in any capacity.

_____

Student Name

_____ _____

Signature Date

ARKANSAS STATE UNIVERSITY COLLEGE OF NURSING AND HEALTH PROFESSIONS

Clarification of Transportation and Clinical Hours Expectations

I hereby confirm my complete understanding that the program requires extensive travel to the affiliated clinical sites listed above. I understand that I might be assigned to any of the above affiliated institutions and that it is my responsibility to arrange for transportation, day care, extracurricular work or activities that might affect arriving at my assigned clinical site by 8 am and remaining at my assigned clinical site until the dismissal time of 4 pm. I also confirm that I have been given the opportunity to ask questions regarding these expectations. My signature on this form acknowledges that I understand these expectations, and that I will not be financially compensated for these field or clinical courses by either Arkansas State University or the entity who operates the site and location where these field or clinical courses will take place.

_____

Student Name

_____ _____

Signature Date

ARKANSAS STATE UNIVERSITY DEPARTMENT OF HEALTH PROFESSIONS

MAMMOGRAPHY/BREAST SONOGRAPHY PROGRAM

STATEMENT OF UNDERSTANDING/AGREEMENT

NAME (PRINT):

_____

ADDRESS & TELEPHONE:

_____

_____

My signature below certifies that I agree with the following:

1. I have received the Mammography/Breast Sonography Student Handbook.
2. I have read the Mammography/Breast Sonography Student Handbook
3. I understand that I am responsible for all assignments and policies specified in the Handbook, even if they are not stated aloud by the Mammography/ Breast Sonography faculty.
4. I understand all policies stated in the Handbook.
5. I understand the penalties for policy violation and/or misconduct.
6. I understand the clinical grading procedure.
7. I agree to abide by the professional behavior requirements stated in the Handbook.
8. I understand that addendums may be made at any time that will affect the policies listed in the Handbook.
9. I agree to abide by the changes made by those addendums.
10. I agree to adhere to the guidelines and policies stated in the Handbook.

_____

Student Name

_____ _____

Signature Date

Faculty Witness

Revision #7
Created 2026-08-11 17:30:06 UTC by Mary Grace Caubble
Updated 2026-11-04 21:23:41 UTC by Mary Grace Caubble