



**DIVISION OF HEALTH SCIENCES  
STUDENT HANDBOOK  
AND  
POLICY MANUAL**

**With the Computed Tomography  
Program Addendum**

Revised by faculty in April 2020 for the 2020-2021 Academic Year

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## SECTION I: INTRODUCTION AND OVERVIEW

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

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

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

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

## **Division of Health Sciences Mission Statement and Overview**

### **Mission**

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

### **Philosophy**

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

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

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

### **Core Values**

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

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

**Division of Health Science Goals:**

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

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

***MassBay Community College does not discriminate on the basis of sex, religion, color, race, sexual orientation, age, national origin or disability in all of its educational programs, activities or employment policies, as required by Title IX of the 1972 Education Amendments and other federal and state anti-discrimination laws. MassBay makes a serious effort to represent a diverse group of students, faculty and staff, and to promote a climate of acceptance for minority groups.***

***If you have any questions about compliance with the Title IX, please contact the MassBay Community College Affirmative Action Officer in the Human Resources office at the Wellesley Hills Campus.***

## **Division of Health Sciences Program Accrediting Agencies**

### **Associate Degree Nursing**

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

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

### **Radiologic Technology**

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

### **Emergency Medical Technician and Paramedicine**

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

### **Paramedicine**

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

Commission on Accreditation of Allied Health Education Programs  
9355 113th Street North, # 7709  
Seminole, FL 33775  
[www.caahep.org](http://www.caahep.org)



**Surgical Technology**

Accreditation Review Council on Education in Surgical Technology and Surgical Assisting  
(ARC/STSA®)

W. Dry Creek Circle, Suite #110

Littleton, CO 80120

[www.arcstsa.org](http://www.arcstsa.org)

Phone: 303-694-9262

The Commission for Accreditation of Allied Health Education Programs (CAAHEP) 9355

113th Street North, #7709

Seminole, FL 33775 [www.caahep.org](http://www.caahep.org) Phone: 727-210-2350

**Practical Nursing**

Massachusetts Board of Registration in Nursing (Approved)

239 Causeway Street, 5<sup>th</sup> Floor, Suite 500

Boston, MA 02114

[www.mass.gov/dph/boards/rn](http://www.mass.gov/dph/boards/rn); Phone: 1-800-414-0168 or 617-973-0900

## SECTION II: Division of Health Sciences Policies

### **Section A: Academic Policies**

#### **A.1.0 Attendance**

It is important to your academic success that you attend all classes in which you are enrolled and make up any work due to absences. For each course, your instructor will establish policies regarding class, clinical, and/or laboratory absences, and make-ups (if any), and will include these policies in the course syllabus. Your course instructor has full and final authority to allow make-up work and/or absences. If you miss more than five (5) class hours, your instructor has the right to withdraw you from the course by notifying the Registrar. Frequent tardiness and absenteeism are not tolerated in the health care professions or by the DHS faculty.

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

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

**NOTE:** Refer to College Absence policies in the College's Student Handbook. When taking courses in other Academic Divisions you are to follow the attendance policy set forth by that Division's faculty.

#### **A.2.0 Student Progress**

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

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

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

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

**Incomplete Grades:** Should a student not complete all course requirements within the last two weeks of the semester but provides evidence of making significant progress toward such completion, he or she may submit a written request to the Health Sciences instructor to receive an incomplete (I) grade. In each case in which an Incomplete is requested, the circumstances must be compelling and beyond the control of the student. The Incomplete will not be awarded in cases of neglect on the part of the student nor will it be given as a substitute for a failing grade. At the instructor's discretion, the "I" grade may or may not be awarded.

Incomplete grades may be given only in the following circumstances:

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

Instruction to Students:

To request an Incomplete grade, complete section I of the "Request form" and submit it, along with forwarding documentation, to your instructor. A copy of this form is included on page 34.

The instructor will specify the terms and conditions for making up the coursework in section II of the request form. Signed forms will be sent to the Dean for approval. The Dean will forward all approved forms to the Registrar for processing.

When the coursework is completed and with the Dean's approval, the instructor will submit a "Change of Grade Form" to the Registrar's Office.

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

### **A.3.0 Testing Policy**

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

### **Test Review**

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

### **Make-up Exams**

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

During exams, the following rules apply:

1. All books, purses, tote bags, cell phones and other electronic devices, etc., will be placed in a designated area and remain there during the exam.
2. Dictionaries of any kind may not be used during an examination.
3. The student’s name must be recorded on all test materials and Scantron forms as appropriate.
4. If a Scantron form is used, any erasures must be thorough for accurate scanning.
5. If a test review is offered, exam papers must be returned to faculty afterwards.

### **A.4.0 Performance Notification Process**

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

### **A.5.0 Student Grievance Procedure**

The student grievance procedure is described on page 56 of the current MassBay Community College [Student Handbook](#).

### **A.6.0 Grade Appeals**

The first step in the grade appeal process is to contact the faculty member in writing, within 10 calendar days following the last day of the instructional period, stating that you would like a review of course grades. Grade appeals are to determine if there are any mathematical errors in computing the final course grade.

The student grade appeal process is described in the current MassBay Community College [Student Handbook](#).

## Section B: Professional Behavior

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

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

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

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

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

Should faculty determine that a student's behavior violates one or more of the affective domain standards, an affective domain warning will be issued to the student. Upon discovery of the violation, faculty has up to one week to investigate and issue the warning to the student. In certain instances, the student may be withheld from clinical until the process is carried out and the student completes corrective action. Once a student is notified that they will be receiving an affective domain warning, the student has 48 hours to meet with the faculty. A student refusing or neglecting to take corrective actions is grounds for dismissal from the program.

The student will meet with faculty and be provided with the opportunity to review a written summary explaining the nature of the violation, any remedial action that is required and the implications for the student. Limited time will be provided for the student to address their concerns. The Affective Domain Violation form can be found in the back of this handbook. A copy of the affective domain will go to the Program Director and will become part of the student's permanent record. Any affective domain violation may impact the student's ability to seek readmission, serve as a student representative or receive a favorable recommendation for professional or educational purposes.

Students may receive a maximum of two affective domain violations. **A third affective domain violation constitutes grounds for dismissal from a Health Sciences program.**

## **B.3.0 Cell Phone Policy**

In keeping with the "respect" affective domain above (Standard 6), the Division of Health Sciences adheres to the following policy regarding usage of cell phones during class time:

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

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

Use of a cell phone for any purpose during a class or lab other than for an emergency situation as stated above, will result in the student being asked to leave the class or lab for the remainder of

class/lab time. The student is responsible for the material missed as well as for making up the time missed in class/lab. In addition, the student will receive a written warning indicating that the affective domain competency was not met.

#### **B.4.0 Social Media/ Electronic Communication Policy**

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

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

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

The following behaviors are considered grounds for dismissal:

- The use of social media to make disparaging remarks about other students, faculty, staff or patients, the division, individual departments or clinical affiliates/partners and associated individuals and communities- even if nicknames or codes are used and/or identifying information appears to have been removed.
- The posting, distribution or dissemination of patient, student, facility, laboratory or classroom images or associated content (please note: taking pictures, videos or audio recordings in the classroom or clinical agency is strictly prohibited without the permission of all parties involved).
- The posting of any content or images that could in any way compromise the safety, reputation and/or professional image of the Health Sciences Department, staff, faculty or students.
- The posting of any content or images that could in any way compromise the safety, reputation and/or professional image of clinical affiliates, partners, communities or individuals associated with the Division of Health Sciences or its departments.
- Posting inappropriate, suggestive, abusive, violent, potentially threatening, derogatory or discriminatory content in networks, forums or platforms while identifying oneself as a student within the Health Sciences Division. Note: Identification as a Division of Health Sciences student can be established by both statements and images used in electronic and



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

- The use of any electronic communication or applications for the purpose of distributing or disseminating information that could be used to commit acts of academic dishonesty or fraud.
- The use of any electronic communication or applications to share or distribute proprietary academic or facility information including, but not limited to, policies, procedures or patient care tools.

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

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

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

### **B.5.0 Snow/Weather Emergency Policy**

If the College closes due to inclement weather or for any other reasons, all classes, clinical, and laboratory classes are cancelled. The student handbook and the College website (www.massbay.edu) provide information regarding the various communications methods used by the College to notify everyone about the closure of the College and course cancellations.

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

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

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

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

as soon as possible after the announcement.

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

## **Section C: Dismissal, Appeal of Dismissal, and Readmission Policies**

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

### **C.1.0 Medical Leave Policy**

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

### **C.2.0 Grounds for Immediate Dismissal without the Option for Readmission into any Health Sciences Program.**

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

1. Behavior that threatens the health and safety of patients, students, faculty, or college staff.
2. Academic dishonesty or plagiarism.
3. Impairment due to alcohol or drugs.
4. Behavior or actions that engage in or condone discrimination based on race, gender, age, citizenship, religion, national origin, sexual orientation, or disability.
5. Violation(s) of client (HIPAA policies), student confidentiality (FERPA policies), or sharing any information that relates in any way to the proprietary interests of a clinical agency (e.g., photographs, videos, audio-recording, policies, financial, security, or general operational information/procedures).
6. Behavior that is incompatible with legal and ethical standards established by the discipline or profession the program represents.
7. Failure to maintain compliance with Division/Program/Course policies.

If the cause for dismissal in one of the categories listed above is also a violation of the College's

Code of Conduct, the student name will be sent forward to the Code of Conduct Officer (CCO) in the Office of the Dean of Students.

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

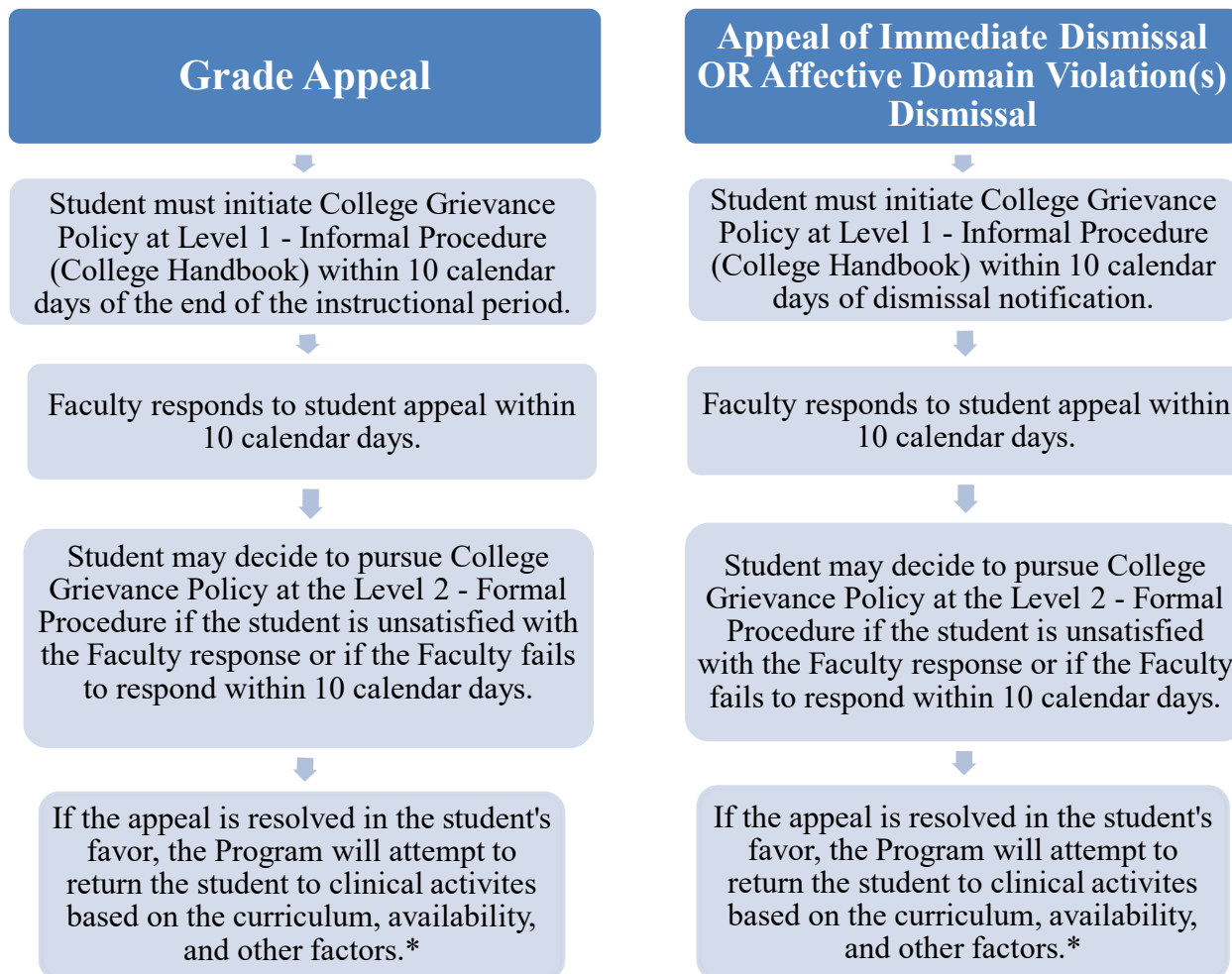
#### **Process of Appeal of Dismissal**

A student may appeal their dismissal from a Health Sciences program. Dismissals fit into one of three categories: Failing Grade/Course Failure (Academic), three Affective Domain Warnings (Professional), and Immediate Dismissal (Flagrant). Each type of dismissal has a slightly different appeals process that incorporates the student's rights, the Division's commitment to safety and integrity in the health fields we represent, and the College's Code of Conduct. Students must follow the appropriate appeals process listed below. Students may attend classes and laboratory sessions, but not clinical rotations during the appeals process.

#### **Appeal of Dismissal Processes Flowchart**

During the Grievance processes described below, the student:

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



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

### **C.4.0 Readmission Policy**

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

Application for readmission must be made within 12 months of withdrawal or dismissal from the original program. Readmission application deadlines are February 1 for the fall semester and June

1 for the spring semester. Qualified candidates will be selected from a readmission pool and based on the seat availability for that course and/or program.

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

## Section D: Health and Immunization Requirements

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

### **Immunizations:**

#### **Hepatitis B –**

You must allow a minimum of 6 months to complete the series. For students in Associate Degree Nursing, Central Processing Technology, Paramedicine, Phlebotomy, and Surgical Technology programs, One of the following is required: EITHER 3 vaccinations (0, one month, and five months) AND positive antibody titer (lab report or physician verification of results required) OR a positive antibody titer (lab report or physician verification of results required) OR documentation from a Healthcare Professional stating that you are a 'Non-Responder' to the vaccine. If the titer is negative or equivocal, new alerts will be created for you to receive 1 booster shot. Students in EMT, Practical Nursing, and Radiologic Technology programs are required to submit the three doses of the Hepatitis B Vaccine OR a positive antibody titer (lab report or physician verification of results required).

#### **Tuberculosis Testing –**

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

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

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

Once students have completed Steps I and II, only a single TB implant is required annually and must be updated each year to meet medical compliance.

If you have a positive TB/PPD result, submit documentation of a clear (negative) Chest X-ray.

A negative symptom review check by a health care provider is required annually thereafter.

**EMT Students** are required to submit 1-step TB/PPD Skin Test or Chest X-ray or QuantiFERON-TB or T-Spot blood test.

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

**Measles, Mumps, Rubella (MMR) 2-Dose Vaccine or Titers\*** - There must be documentation of either a positive antibody titer for all 3 components OR documentation of each vaccination. If titer is negative or equivocal, 1 booster shot titer is required.

**Varicella 2-Dose Vaccine or Titer\*** - There must be documentation of either a positive antibody titer for Varicella OR documentation of vaccination. If titer is negative or equivocal, 1 booster shot is required.

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

**Report of Physical Examination & Immunization Record** - This requires the student's signature authorizing the release of immunization information to clinical affiliating agencies. It also requires your physician to fill in confirmation of immunizations you've received and your physical exam results within the past year.

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

*Some clinical facilities where students will be assigned may require additional information and/or screenings prior to clinical placement. Examples include submission of social security number; Fingerprinting; Drug-testing; CORI checks; CNA Registry Check, and additional immunizations.*

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

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

**Other Related Requirements:**

**CPR Certification** – The CPR certifications that are acceptable for health students are the “BLS for the Health Care Provider” from the American Heart Association (AHA), and the American Red Cross or the equivalent from the American Military Training Network. The copy must be front & back of the card and it has to be signed. An eCard from the AHA is also acceptable.



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

**National Background Check** – A national county records search is also conducted through their ‘My CB’ account.

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

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

## Section E: Clinical/Practicum Policies

### Introduction & Definitions

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

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

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

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

- **Clinical Instructor:** This term refers to any person recognized by the program as having the responsibility to supervise and assess the performance of any student while on clinical. This term is used interchangeably with **Clinical Supervisor, Clinical Faculty, Faculty and/or Clinical Preceptor**. Either the college or the clinical site may employ the individual with this title, dependent upon the program.
- **Clinical Coordinator (CC):** This term refers to the college faculty member responsible for securing and/or assigning clinical placements, and for assessing the student's clinical performance. Other terms used to describe this individual include: **Academic Fieldwork Coordinator (AFC), and Clinical Coordinator (CC)**. In the case of the ADN and PN programs the CC is the Program Chair.
- **Center Coordinator for Clinical Education (CCCE):** This term refers to the person employed by the clinical site whose responsibility it is to coordinate and supervise the clinical program at each site. Other terms used to describe this individual include: **Clinical Site Supervisor (CSS) and/or Clinical Instructor (CI)**.
- **Preceptor:** This term refers to the person on staff at clinical facility who supervises and instructs students in clinical experiences.

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

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

### **E.1.0 Professionalism**

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

### **E.2.0 Confidentiality**

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

### **E.3.0 Health Status**

It is the student's responsibility to insure that completed physical exam and immunization records are submitted to and approved by Castle Branch. (See Section D. Health and Immunization Requirements.) Failure to submit this information and other required documentation could affect clinical placement and ability to complete a Health Sciences program. Health forms are available on the MassBay Community College website.

Should the student's health status change in a manner that would restrict clinical participation after he/she has health clearance and has matriculated in a DHS program, he/she MUST immediately notify the Department Chair. The student must also submit to the CC a note from his/her primary care provider indicating the nature of the restriction and the date at which the restriction(s) must be imposed. To re-enter the clinical environment, the student must submit a note from his/her primary care provider to the CC affirming the removal of restrictions and the date at which the student can resume unrestricted participation in clinical activities. If a student is unable to resume his/her participation in the program, he/she should refer to the Division of Health Sciences' Medical Leave Policy (Section B.2).

### **E.4.0 Communicable Disease Statement**

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

and documentation from his/her primary care provider.

### **E.5.0 Emergency Care**

The College's contractual agreement with clinical agencies states that emergency care will be provided by the clinical facility if that facility maintains an emergency room. Furthermore, the agreement stipulates that the student will assume the cost of such emergent care. Therefore, students should refer to their health insurance policy for coverage in the event of an emergency in the clinical area.

### **E.6.0 Latex Sensitivity & Allergy Policy**

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

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

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

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

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

In an effort to minimize the presence of latex in the Division lab facilities, MassBay Community College will provide latex-free and powder-free gloves in all College lab facilities. Should a clinical agency site NOT provide latex-free gloves, the College will provide latex-free gloves for

clinical use. Additionally, the College is taking the following steps to minimize latex in its lab facilities: *1) replacement of all gloves in use by faculty and students with nitrile or vinyl gloves; 2) maintaining an inventory of products/equipment and supplies in each health science program that contain or could contain latex; and 3) future purchasing of latex-safe supplies and equipment whenever possible.*

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

### **E.7.0 Blood and Body Fluid Exposure Policy and Procedure** **Occupational Exposure Guidelines**

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

For more information: <http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5409a1.htm>

### **Faculty & Student Responsibilities**

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

### **Accidental/Occupational Exposure Procedure**

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

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

**PLEASE NOTE:**

1. Decisions regarding post-exposure management, prophylaxis, and follow-up will be at the discretion of individual and his/her health care provider.
2. The injured party will be financially responsible for emergency treatment, prophylaxis and follow-up care resulting from the incident.

**E 8.0 Accommodation for Disability Conditions**

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

**E 9.0 Clinical Sequence and Placement**

- E.9.1 The CC or Program Chair determines the clinical placement of students. The primary consideration in arranging clinical placements is the academic integrity and value of the educational experience. A student shall not be placed at a site if he/she or an immediate relative volunteer or work in a department or unit within that site which is similar to his/her chosen field of study. When possible, advance notice will be given so that the student may make appropriate arrangements and clinical practicum sites may prepare for the student.
- E.9.2 Contacting and arranging for clinical affiliate placements is the purview of the Program Chair and/or CC. Students **shall not** contact a present or prospective clinical site without obtaining prior approval from the CC or Department Chair.

**E.10.0 Transportation, Housing, and Parking Fees**

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

**E.11.0 Professional Appearance - Dress Code**

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

- E.11.1. appear neat, clean, and well-groomed.
- E.11.2. maintain good personal hygiene.
- E.11.3. adopt a conservative approach to dressing, minimizing jewelry and cosmetic/ fragrances, not wearing clogs, open-toed shoes or sandals, nor extremely loose-fitting or tight clothing.
- E.11.4 wear MassBay student identification pin with name and his/her program of study.
- E.11.5 remove personal pagers and/or cell phones before entering the clinical site.
- E.11.6 limit body piercings to small, post-type earrings. Only one earring in each ear is

permitted. No other body piercing jewelry is permitted in the clinical and laboratory settings.

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

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

**Refer to individual program appendices for specific requirements.**

**E.12.0 Attendance**

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

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

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

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

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

**E.13.0 Evaluation of Clinical Performance**

Each program develops instruments and assessments used to evaluate student clinical performance. Refer to appendices for the clinical grading policies for the respective program. The CC /CI/Dept. Chair will issue grades consistent with the policy contained in the College catalog and course syllabus. In most programs, clinical experiences are graded pass/fail. Grades Clinical grades below the programs specific minimum will result in withdrawal from the program. Refer to minimum grade chart include in section A2. Students who are having difficulty meeting the established learning objectives of the clinical experience are encouraged to seek prompt advice

and/or assistance from the CCCE, CC, and /or the clinical instructor/faculty to develop a learning plan to address concerns.

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

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

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

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

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

#### **E.14.0 Clinically Unsafe Behavior**

The following are examples of clinically unsafe behavior:

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

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

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

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

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

E.14.1.5 abusive behavior;

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

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

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

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

1. the student will be immediately removed from clinical and lab settings.
2. the student will be notified immediately that they have been given an unsafe clinical grade and will not be permitted to return to clinical or lab. If the student is in another health course with a clinical component, the student will not be allowed to attend the clinical or lab unless the faculty member and department chair determine



- that patient safety is not at risk. Written notice by the faculty member will be given to the student documenting the reasons for the clinically unsafe determination.
3. the faculty will notify the department chair and appropriate academic administrator that a failure grade has been issued.

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

#### **E.15.0 Drug Screening Policy**

All current students and those admitted into a Division of Health Sciences educational program may be required to provide proof of a negative nine-panel urine drug screening in order to be eligible for placement in a clinical rotation. Drug screening must be done at an approved testing site within 30 days before the start of a clinical rotation during each clinical semester. Clinical rotation start-dates vary by program. Students taking prescription or over-the-counter medications should provide the testing facility with a list of these medications at the time of testing. All cost associated with drug testing is the responsibility of the student. Some health care facilities which provide clinical sites may also have policies on random and scheduled drug-screenings of students. Students must comply with clinical facility policies. If there is a positive drug result from the clinical, students may be withdrawn from the program.

Students who do not successfully complete this drug screening within the 30-day time frame will be withdrawn from the Division of Health Sciences program in which they are enrolled. All drug screening results will be sent to the Dean of Health Sciences in a confidential manner. Students will only be notified if their screening results are positive.

Students who do not pass the drug screening test the first time have the right to request a second drug screening at an approved testing site within the 30-day period prior to their clinical rotation. The student will be notified by the Dean of Health Sciences if the second test is positive. If the second drug test is negative, the student will be placed in a clinical rotation. If the second test is positive, the student will be withdrawn from a health program. The student can appeal to the Dean of Health Sciences for a hearing regarding withdrawal from a health program due to a positive drug screening test.

Any student who is withdrawn from a Division of Health Sciences program due to a positive drug test may reapply based on current College and Division of Health Sciences readmission policies.

## Section III: Division of Health Sciences Forms

## Division of Health Sciences Technical Standards Form

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

ADN Associate Degree Nursing	PB Phlebotomy
CT Computed Tomography	PM Paramedicine
CY Central Processing Technology	PN Practical Nursing
EMT Emergency Medical Technician	RT Radiologic Technology
NA Nursing Assistant	ST Surgical Technology

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

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

### Technical Performance Standards Informed Consent

1. I have received, read and understand the meaning of MassBay Community College's Health Professions Technical Performance Standards.
2. I understand that the Standards indicated, as applicable to my intended program of study, relate to the full array of essential performance competencies inherent to my chosen program of study.
3. I also understand that in order to successfully graduate from the program of my choice, I must be able to satisfactorily perform the tasks listed in the standards.
4. It is my responsibility to submit a request to the College's Disability Resources Office should I wish to receive a determination of reasonable accommodation in performing any of the stated standards.
5. Lastly, I understand that there may be instances where a reasonable accommodation for a method of satisfying the required performance tasks may not be possible.

Student Name (print): \_\_\_\_\_ ID#: \_\_\_\_\_ OR SS#: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**MASSBAY COMMUNITY COLLEGE  
DIVISION OF HEALTH SCIENCES  
Performance Notification Form**

Student's Name \_\_\_\_\_

Faculty / Administrator's Name \_\_\_\_\_

Date \_\_\_\_\_

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

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

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

FACULTY / ADMINISTRATOR SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Student Comments:

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

STUDENT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

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

WITNESS SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

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

**MASSBAY COMMUNITY COLLEGE  
DIVISION OF HEALTH SCIENCES  
Counseling Record Form**

**Date:** \_\_\_\_\_

**Student:** \_\_\_\_\_ **Student ID#:** \_\_\_\_\_

**Faculty/Staff/Advisor Name:** \_\_\_\_\_

**Program:** \_\_\_\_\_ **Course:** \_\_\_\_\_

**Present at Meeting:** \_\_\_\_\_

**Discussion:**

**Student Comments:**

**Recommendation(s):**

**Referral(s) to College Services?**    **yes**                      **no**

**Faculty/Staff/Advisor Signature:** \_\_\_\_\_ **Date:**  
\_\_\_\_\_

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
4/15/10 kcc

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

**Date:** \_\_\_\_\_ **Student:** \_\_\_\_\_ **Student ID #:** \_\_\_\_\_

**Faculty/Advisor Name:** \_\_\_\_\_

**Program:** \_\_\_\_\_ **Course:** \_\_\_\_\_

**Notice of Affective Domain Violation (Check One):** #1 \_\_\_\_\_ #2 \_\_\_\_\_ #3 \_\_\_\_\_

**Nature of Violation:**

**Affective Domain Standard(s) Violated:**

**Remediation Plan (Violation #1 & #2):**

**Student Comments:**

**Faculty/ Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Copy of Document Sent to Program Chair and Advisor:**

**Program Chair** \_\_\_\_\_ **Date Copy of Document Sent** \_\_\_\_\_

**Advisor** \_\_\_\_\_ **Date Copy of Document Sent** \_\_\_\_\_

4/21/10 kcc

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

Student Name \_\_\_\_\_

Course \_\_\_\_\_

Instructor \_\_\_\_\_

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

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

**Recommended Activity:**

- See me in my office after class or during office hours by (date) \_\_\_\_\_ Office # \_\_\_\_\_ Phone: \_\_\_\_\_
- Complete the prescribed remediation lab \_\_\_\_\_ by (date) \_\_\_\_\_
- Attend open lab for review \_\_\_\_\_ skills by (date) \_\_\_\_\_
- See the Academic Tutor for content including math review by (date) \_\_\_\_\_
- Utilize appropriate college resources (counseling/disability) \_\_\_\_\_

---

Instructor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Comments:**

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

**Comments:**

Students Signatures:

**Comments:**



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

Name of Individual involved: \_\_\_\_\_

Immediate Faculty/Preceptor: \_\_\_\_\_

Clinical facility where exposure occurred: \_\_\_\_\_

Date/Time of Exposure: \_\_\_\_\_ Type: Needle Stick: \_\_\_\_\_ Splash: \_\_\_\_\_  
Mucous Membrane \_\_\_\_\_ Other: \_\_\_\_\_

Describe how the incident occurred: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Personal Protective Equipment Being Used \_\_\_\_\_

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

\_\_\_\_\_  
\_\_\_\_\_

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

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

CHECK LIST

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

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

\_\_\_\_\_  
Student Name (Printed) and Signature

\_\_\_\_\_  
Date



**Division of Health Sciences  
Incident Report Form**

Date of Event:	Time of Event:	Department:
Class:	Location:	Instructor:
Involved Parties: <i>NOTE: All Involved parties must submit separate reports</i>		
Report of Event Completed By:		Date:
E-mail:		Phone:
Report of Event Requested by:		
Please Select the Appropriate Category (select all that apply):		
Student / Family Issues	Classroom Issue	Clinical Site / Facility
Student Injury	Equipment Issue	Other:
Exposure/Contact to Bodily/Infectious Substance		
Other:		
<p>Incident Description: explain in detail the nature of the incident and to whom it has been reported. Include a description of the incident, any steps taken to resolve it, and any direct observations of the situation. Use both sides of the page if necessary. <b>In order to comply with Federal and State laws, please DO NOT Include any of the following information: Date of Birth, Social Security Number, Driver License Number, any Credit Card or Financial Information as well as any Address Information.</b></p>		
Student Name (Printed)		
Student Signature		
Faculty Name and Signature		
Date Submitted		

**MASSBAY COMMUNITY COLLEGE**

**Incomplete Grade Request Form**

**Section I and II** (to be completed by the Student)

Student Name: \_\_\_\_\_ Major: \_\_\_\_\_

Student ID Number: \_\_\_\_\_ Semester and Year: \_\_\_\_\_

Instructor: \_\_\_\_\_ Course Name and Number: \_\_\_\_\_

Reason(s) for not completing the course work before the end of term:  Health  Other

Brief description (submit all supporting documentation):

Student Signature: \_\_\_\_\_

**Section III** (to be completed by the Instructor)

Instructor's Name: \_\_\_\_\_

Assignments and/or exams needed to complete this course:

- |          |          |
|----------|----------|
| 1. _____ | 3. _____ |
| 2. _____ | 4. _____ |

Instructor's signature: \_\_\_\_\_

Completion Deadline: \_\_\_\_\_

Student's signature indicating acceptance of the terms: \_\_\_\_\_

**Section IV** (to be completed by the Dean)

Dean: \_\_\_\_\_  Approved  Not Approved

**Section V**

Date Received by Registrar: \_\_\_\_\_

Cc. Division Office  
Student, Instructor

# **Division of Health Science Program Dismissal Worksheet**

Student Name \_\_\_\_\_ Student ID \_\_\_\_\_

Date \_\_\_\_\_ Program \_\_\_\_\_ Faculty \_\_\_\_\_

## **Dismissal Basis**

Check one:  Grade  Affective Domain Policy  Egregious (Flagrant) Violation

## **Appeals Process Checklist**

### **Dismissal Basis: Grade**

1. Grievant (Student) must initiate College Grievance Policy at Level 1- Informal Procedure (College Handbook) within 10 calendar days of end of instructional period.
2. Faculty provides response to merits of appeal within 10 calendar days of student appeal.
3. Student may decide to pursue College Grievance Policy at the Level 2 - Formal Procedure (College Student Handbook) if student is unsatisfied with Faculty response or Faculty fails to respond.
4. During Grievance process student:
  - a. May enroll and attend lecture and lab courses with Program Director permission
  - b. Student is subject to all costs associated with course enrollment and Add/Drop policies
  - c. Students may not attend clinical courses.
5. If the College Grievance decision results in support of the student's position, the Program will attempt to return student to clinical as feasible.
6. Each Program within the Division of Health Sciences has specific procedures and policy addressing the return of student to clinical activities based on unique curricular program design.

### **Dismissal Basis: Affective Domain Violation & Egregious/Flagrant Violation**

1. Grievant (Student) must initiate College Grievance Policy at Level 1- Informal Procedure (College Handbook) within 10 calendar days of dismissal notification.
2. Faculty provides response to merits of appeal within 10 calendar days of student appeal.
3. Student may decide to pursue College Grievance Policy at the Level 2 - Formal Procedure (College Student Handbook) if student is unsatisfied with Faculty response or Faculty fails to respond.
4. During Grievance process students:
  - a. May enroll and attend lecture and lab courses with Program Director permission.

- b. Student is subject to all costs associate with course enrollment and Add/Drop policy
  - c. Students may not attend clinical courses.
5. If the appeal results in support of the student's grievance, the Program will attempt to return the student to clinical as feasible.
  6. Each Program within the Division of Health Science has specific procedures addressing the return of student to clinical activities based on unique curricular program design.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Faculty Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# APPENDIX A: Health Sciences Program Grid

Program	Day	Evening	Weekend	Fall Start	Spring Start	Summer Start	Length of Program	Credits/Type	Health Requirements Deadline
Central Processing Technology		X		X	X	X	1 Semester	4 credits Certificate	August 30 <sup>th</sup> (for Fall), January 3 <sup>rd</sup> (for Spring), June 7 <sup>th</sup> (for Summer)
Certified Nurse Assistant	X		X	X	X	X	8 Weeks	Non-Credit Certificate	October 24 <sup>th</sup> (for Fall), March 1 <sup>st</sup> (for Spring), July 1 <sup>st</sup> (for Summer)
Computed Tomography	X		X	X			2 Semesters	Track 1 (8 Credits) Track 2 (14 Credits) Certificate	August 1 <sup>st</sup>
Emergency Medical Technician (EMT)	X	X		X	X	X	1 Semester	8 credits Certificate	August 30 <sup>th</sup> (for Fall), February 1 <sup>st</sup> (for Spring), June 1 <sup>st</sup> (for Summer)
Medical Coding		X		X			2 Semesters	27 credits Certificate	Within 30 days of registration
Medical Office Administrative Assistant		X		X			2 Semesters	23 credits Certificate	Within 30 days of registration
Associate Degree Nursing	X			X			4 Semesters	68-72 credits Associate Degree	August 1 <sup>st</sup>
Practical Nursing	X			X			2 Semesters Intersession 1 summer	43 credits Certificate	August 14 <sup>th</sup>
Paramedicine (Day)	X			X			2 Semesters 1 summer	37/38 credits Certificate	August 30 <sup>th</sup>
Paramedicine (Evening)		X			X		3 Semesters 1 summer	37/38 credits Certificate	March 15 <sup>th</sup>
Phlebotomy	X		X	X	X	X	1 Semester	7 credits Certificate	August 30 <sup>th</sup> (for Fall), March 1 <sup>st</sup> (for Spring), May 20 <sup>th</sup> (for Summer)
Radiologic Technology (Day)	X			X			4 Semesters and summer	78 credits Associate Degree	August 1 <sup>st</sup>
Radiologic Technology Flex (Evening)		X	X		X		9 Semesters	78 credits Associate Degree	August 1 <sup>st</sup> before Year 2
Surgical Technology (Day)	X			X			3 Semesters	37 credits Certificate	August 30 <sup>th</sup> January 2 <sup>nd</sup>
Surgical Technology (Evening)		X			X		3 Semesters	37 credits Certificate	August 30 <sup>th</sup> January 2 <sup>nd</sup>

Revised June 2020

APPENDIX B:  
Division of Health Sciences Administration and  
Faculty

**Division of Health Sciences Administration and Faculty**

**Lynne Davis, Ed.D., R.T. (R), Dean  
508-270-4022**

<b>Support Staff</b>		
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<b>Surgical Technology Adjunct Instructors</b>		
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Kristen Santiago, AS, CST	ksantiago@massbay.edu	

Updated June 2020

APPENDIX C:  
Program Policies and Student  
Acknowledgement Form

APPENDIX C:

Computed Tomography Policies  
and Student Acknowledgement Form

Effective Date: 8/21/2018

Reviewed Annually

## **Introduction: Computed Tomography Certificate Program**

MassBay Community College's Computed Tomography program is designed to prepare Registered Radiographers, Nuclear Medicine Technologists and Radiation Therapists for employment as Computed Tomography Technologists in hospitals, clinics, and medical offices. The program emphasizes that quality patient care will be provided by individuals who have received quality instruction based on educational and instructional guidelines consistent with the profession.

### **Accreditation**

The MassBay Community College Computed Tomography Program is recognized and accredited under NEASC.

### **Commission on Institutions of Higher Education (CIHE) of the New England Association of Schools and Colleges, Inc. (NEASC)**

3 Burlington Woods Drive, Suite 100

Burlington, MA 01803-4531

Toll free: 855-886-3272

781-425-7707

<http://cihe.neasc.org>

### **Program Overview**

The Computed Tomography Certificate program is a two-sequential semester weekend didactic program with two tracks. Track ONE is non-clinical/didactic-only and Track TWO is the didactic and clinical practicum track. The program accepts and starts a new class for the fall semester each year.

The Computed Tomography Certificate Program is designed to provide the working Radiologic, Nuclear Medicine or Radiation Therapy Technologist with a structured learning environment and the option to gain clinical competency experience necessary to sit for the Computed Tomography registry examination offered by the American Registry of Radiologic Technologist (ARRT). Completion of the program does not automatically mean the candidate will pass the registry examination.

The Computed Tomography Certificate program prepares the post-graduate registered Radiologic Technologist, Nuclear Medicine Technologist and/or Radiation Therapist to use Computed Tomography Scanners to produce cross-sectional anatomical images of the human body. Computed Tomography (CT) technologists operate CT scanners in both hospital and outpatient centers. CT technologists use this advanced imaging modality to help physicians diagnose disease, identify pathology to expedite trauma cases or acute conditions, biopsy tissue, and assist radiologists in other procedural areas.

## **Certification**

After successful completion of all didactic and clinical components of the Computed Tomography Advanced Certificate Program graduates will be eligible to apply for the certification examination prepared by the **American Registry of Radiologic Technologists (ARRT) for Computed Tomography.**

## **Mission**

The mission of the Computed Tomography Program is to provide each student with the instruction, skills, and learning experiences to become a compassionate, knowledgeable, and competent entry-level Computed Tomography Technologist.

## **Program Goals / Student Learning Outcomes**

### **Goal 1: Students will be clinically competent and able to pass the ARRT Registry Examination.**

#### **Student Learning Outcomes:**

- Students will demonstrate appropriate exam specific positioning skills.
- Students will use CT equipment to obtain diagnostic quality imaging.
- Students will practice effective radiation protection on patients, self and others.

### **Goal 2: Students will communicate effectively**

#### **Student Learning Outcomes:**

- Students will demonstrate effective written communication skills.
- Students will demonstrate ability to communicate with patients.

### **Goal 3: Students will apply effective critical thinking and problem-solving strategies.**

#### **Student Learning Outcomes:**

- Students will be able evaluate quality of image produced and cause for repeat.
- Students will be able to identify and correct positional errors and technical errors
- Students will be able to construct multiplanar reformation of data to obtain diagnostic quality images.

### **Goal 4: Students will demonstrate professionalism and competence in the field of CT.**

#### **Student Learning Outcomes:**

- Students will demonstrate a professional and respectful attitude to patients and others.
- Students/graduates will pursue professional growth by participating in professional development opportunities.

## **Program Effectiveness Data**

The performance of this program is based on the following criteria:

### **Completion Rate:**

This is the number of students that begin the program divided by the number of students that actually complete the program. This is an annual measurement.

- 80% of the students who enter the program will complete.

### **Credentialing Examination Pass Rate:**

This is the number of students that pass the American Registry of Radiologic Technology for Computed Tomography (ARRT) certification examination on the first attempt. This data is averaged over a five-year span.

- 80% of the students who graduate the program will successfully pass on the first attempt.

### **Job Placement Rate:**

This data is collected to determine the number of students that gain employment within twelve months of graduation versus the number that graduate. This data is averaged over a five-year span.

- 80% of the students who graduate the program and are seeking employment will be employed within 12 months of graduation.

## **Curriculum**

The Program's curriculum is designed to conform to recommendations by the American Society of Radiologic Technologists, ARRT, [www.arrt.org](http://www.arrt.org).

## **Program Options**

There are currently two (2) options for the Computed Tomography Program; a part time weekend didactic only TRACK ONE program and a part time weekend didactic and clinical TRACK TWO. Clinical Schedules are determined by the Lead Instructor. The student is expected to complete 16 hours/week in clinical. Clinical hours may include days, afternoons, evenings and weekends.

### **Track 1**

<b>COURSE</b>	<b>COURSE TITLE</b>	<b>CREDITS</b>	<b>COURSE PREREQUISITES</b>
<i>Semester 1</i>			
TO 201	Computed Tomography (I) Introduction	2	Admission to CT Program
TO 214	Computed Tomography Cross-Sectional Anatomy	2	Admission to CT Program
	<b>Credits:</b>	4	
<i>Semester 2</i>			



TO 202	Computed Tomography (II) Advanced	2	TO 201, TO 214
TO 215	Computed Tomography Pathology & Procedures	2	TO 201, TO 214
	<b>Credits:</b>	4	
	<b>Total Credits:</b>	<b>8</b>	

**Track 2\***

COURSE	COURSE TITLE	CREDITS	COURSE PREREQUISITES
<i>Semester 1</i>			
TO 201	Computed Tomography (I) Introduction	2	Admission to CT Program
TO 214	Computed Tomography Cross-Sectional Anatomy	2	Admission to CT Program
TO 220	Computed Tomography Clinical (I)	3	Admission to CT Program, Health Documentation, Background Check Clearance
	<b>Credits:</b>	7	
<i>Semester 2</i>			
TO 202	Computed Tomography (II) Advanced	2	TO 201, TO 214
TO 215	Computed Tomography Pathology & Procedures	2	TO 201, TO 214
TO 225	Computed Tomography Clinical (II)	3	TO 201, TO 214, TO 220 Health Documentation, Background Check Clearance
	<b>Credits:</b>	7	
	<b>Total Credits:</b>	<b>14</b>	

*\*The number students accepted into clinical education (TO 220) and (TO 225) for Computed Tomography will not exceed the number of available clinical spaces.*

**Grading System**

Grading Scale for all Computed Tomography Didactic and Clinical Courses:

Qualitative Letter Grade	
A	94-100 %
A-	90-93%
B+	87-89%
B	83-86%
B-	80-82%

C+	77-79%
C and below	Not passing in CT

Students must maintain a minimum of a “C+/77%” in each course/clinical to remain in the program.

### **Program Completion Requirements**

Policy:

- Maintain a minimum C+ average of 77% or higher in all program course work at the end of each course.
- Complete all required Computed Tomography competencies as required the American Registry of Radiologic Technologists.
- Fulfill all financial obligations to the College.
- Remain compliant with all college and program policies as outlined in the Program Handbook.
- Complete an exit survey, the results of which are used for performance improvement activities.
- Apply for Graduation upon completion of all program courses. (It is free to apply).
- Return ID badges, and radiation monitoring devices.

### **Program Expectations**

Students must make a commitment to learn the materials presented in class and during clinical by allowing adequate study time. This commitment requires a strong support system from family, friends, and peers. Students may organize study groups to maximize the learning experience.

### **Program Costs**

The tuition fee for the Computed Tomography program is determined by the Massachusetts Department of Higher Education. Additional costs that the student may incur while enrolled in the program include the cost of books, personal supplies, and transportation. Please note the program does not offer transportation to and from the clinical affiliates as this is the student’s responsibility.

### **Financial Aid**

This program is not financial Aid eligible.

### **Textbooks**

Textbook lists are provided below for the program.

- 1) Computed Tomography for Technologists: A Comprehensive Text, Lois E. Romans.
- 2) Sectional Anatomy for Imaging Professionals, 4<sup>th</sup> Edition, Lorrie Kelley & Connie Peterson.
- 3) Other texts To Be Determined.

Required textbooks may be purchased in the college bookstore located at MassBay Community College Book Store located on the Framingham Campus. Required textbook information may be located within the schedule of classes located on the MassBay Community College's bookstore website, [www.massbayframinghamshop.com](http://www.massbayframinghamshop.com) or will be placed in your specific class syllabus.

### **Tutors**

*Computed Tomography Program Courses:*

Tutoring is currently available by the program faculty. The students will be kept apprised of any changes to tutoring resources.

### **Program Faculty**

Department of Radiologic Technology

Lead Instructor for Computed Tomography	William Cote M.A., R.T.(R)(CT) Associate Professor	Office 120 A 508.270.4263 wcote@massbay.edu
--	---	---

### **Advisory and Assessment Committee**

The Computed Tomography Certificate program will meet in conjunction with the RT Advisory Committee and will present course specific material to the board during meetings.

### **Course Evaluations**

At the end of each semester, students are asked to complete a Classroom Evaluation Form for Courses and Instructors. Students are encouraged to complete these confidential surveys, add remarks, and, if necessary, offer suggestions to improve classes. It is important for the faculty to get input from the students. Suggestions are used to improve classes for the future. Constructive criticism is welcomed by the program. Through constructive criticism the program will be able to identify program strengths and weakness and will have the documentation necessary to make appropriate changes to better meet the needs of the students and profession. Survey results, as determined by the CT Faculty, are shared with the college, with hospital administration, and kept on file for overall program evaluation.

### **Family Educational Rights and Privacy Act (FERPA) and Student Access to Records**

The Family Educational Rights and Privacy Act (FERPA), also known as the Buckley Amendment, is now in operation in all educational institutions receiving Federal funds. What this law means is that a student has the right to review his/her record, challenge the contents, and be assured of complete confidentiality in all matters pertaining to his/her record. The student may access the MBCC policy in the online College Catalog.

### **Veteran's Center**

MassBay Community College is committed to providing support services to ease the transition from military service-member to student. For more information and assistance, please visit our website for links to important VA and GI Bill information here:

<https://www.massbay.edu/veterans> .

### **Job Placement**

The Program cannot guarantee employment and does not provide job placement services, however, employers in the region often send information about open positions and these opportunities are shared with the students. Students are given assistance with creating their resumes through the Office of Career Development.

### **Organizational Chart**

The organizational structure of the Computed Tomography Program is below.



### **Clinical Education Requirements**

Once accepted into the Computed Tomography program, students will be required to:

1. Purchase a Computed Tomography Badge from the preferred uniform vendor.
2. Assume all responsibility for transportation to and from the clinical sites assigned.
3. Obtain and maintain current CPR certification.
4. Obtain and maintain Health and Immunization records.
5. Complete a Criminal Background Check, and a CORI/SORI (until clearance is received, program acceptance is provisional and may be rescinded).
6. Show proof of health insurance coverage for the student.

### **Technical Standards**

Technical standards are the physical, cognitive, and emotional skills required to successfully complete the program and perform the functions of a Computed Tomography Technologist. If selected, applicants will be required to undergo a physical exam and submit documentation that

the accepted candidate can meet these requirements or provide reasonable adjustments. These individuals provide basic medical care and assist with emergency patient treatment where indicated. Therefore, to be accepted into the program and be retained after admission, all applicants entered into Track TWO will possess the ability to meet the Technical Performance Standards found on page # 35-36 concerning the Computed Tomography Certificate Program.

### **Employment Status of Students**

Students enrolled in the MassBay Community College Computed Tomography Program are not considered employees of the program nor are they employees of the Program's affiliate sites. As such, students are not substituted for regular staff in clinical settings.

### **Licensing**

The MA Department of Health – Radiation Control Program, on August 27, 2017 Issued this communication to Radiologic Technologists. It says, in part -

*To Licensed Radiologic Technologists:*

*Amendments to 105 CMR 125.000: Licensing of Radiologic Technologists went into effect on February 24, 2017. One of the more significant revisions includes a requirement in 105 CMR 125.006(B)(1) that all Computed Tomography Technologists (CT Technologists) successfully pass the American Registry of Radiologic Technologists (ARRT) or Nuclear Medicine Technology Certification Board (NMTCB) CT exam.*

*This new requirement applies to technologists performing diagnostic CT exams, but does not apply to Radiation Therapy Technologists using a CT unit only for treatment planning (CT simulators) or to Nuclear Medicine Technologists who are using the CT portion of a PET or SPECT unit for attenuation coefficients.*

- *Effective January 1, 2018, technologists performing diagnostic CT exams must take and pass the ARRT or NMTCB CT exam.*
  - *Technologists currently performing diagnostic CT exams, and who have not yet done so, must pass the exam by the January 1, 2018 deadline.*
- *While working towards the ARRT or NMTCB CT exam, technologists must work under Appropriate Supervision to gain the clinical experience needed to meet eligibility requirements.*
  - *Appropriate Supervision is supervision of a non-licensed individual commensurate with the risk of the task and may include:*
    - *Direct Supervision - supervisor directly observes the trainee performing the e has*

*demonstrated proficiency. For repeat imaging, a licensed CT Technologist must directly supervise all activities associated with the repeat exposure.*

- *Indirect Supervision – supervisor intermittently observes the trainee and is available at the facility to answer questions or provide additional direction.*
  
- *CT Technologists who initially sat for the MA-only state RT licensing exam, and are therefore ineligible to take the ARRT or NMTCB CT exam and who are performing diagnostic CT exams, must take and pass the MA-only state CT exam by January 1, 2018. The ARRT administers the MA-only state CT exam.*
  
- *While working towards the MA-only state CT exam, Imaging Technologists must work under Appropriate Supervision (see definition in the bullets above) to gain the clinical experience needed to meet the eligibility requirements.*

*The RCP Radiologic Technologist renewal form has a licensing category for CT; RCP will update technologists' licenses during the renewal process. Inspectors will review records during inspections to confirm that licensing categories match the technologist's ARRT or NMTCB certification card. You are responsible for ensuring that your ARRT or NMTCB certificate is at your place of employment to demonstrate compliance with the licensing requirements.*

*For further information, go to <https://www.mass.gov/lists/radiation-control-program-regulations>*

### Clinical Affiliates

All clinical affiliates shall meet the appropriate criteria for delivering clinical education and assessing clinical competency. Each clinical affiliate is also recognized by The Joint Commission (TJC) or an equivalent agency or hold a state issued license. Review of accreditation and/or licenses shall be done annually. The Computed Tomography Program maintains affiliate agreements to assure the quality of the clinical education that is provided to the program students. These agreements are reviewed annually. Under no circumstances will a student be assigned to a clinical site that is not recognized by the TJC or deficient of a signed affiliate agreement. The number of students assigned to any clinical education setting must not exceed the number approved student capacity for that site. The student-to-Computed Tomography clinical staff ratio must be 1:1. It is acceptable on rare occasions that more than one student may be temporarily assigned to one technologist during the uncommonly performed procedures.

### Brigham & Women's Faulkner Hospital

1153 Centre St,

Jamaica Plain (Boston), MA

Phone: 617-983-7935

Facility Contact: Jessica Lorusso, CT Supervisor

Brigham & Women's Hospital (Brigham Health)

75 Francis Street,  
Boston, MA 02115  
Phone: 617-732-5500  
Faculty Contact: Bryan Czajkowski, CT Clinical Educator

Tufts Medical Center

800 Washington Street,  
Boston, MA 02111  
Phone: 617-636-5000  
Faculty Contact: Laura Conway, CT Supervisor

UMass Memorial / Marlborough Hospital

157 Union Street,  
Marlborough, MA 01752  
Phone: 508-481-5000  
Faculty Contact: Diane Brown, CT Supervisor

UMass Memorial HealthAlliance - Clinton Hospital

60 Hospital Road,  
Leominster, MA 01453  
Phone: 978-466-2000  
Faculty Contact: Patricia Vailliant, Director of Diagnostic Imaging

New England Baptist Hospital

125 Parker Hill Avenue,  
Phone: 617-754-5000  
Faculty Contact: Lisa Kamens, CT Supervisor

Lemuel Shattuck Hospital

170 Morton Street,  
Jamaica Plain, Boston, MA  
Phone: 617-522-8110  
Faculty Contact: John Paul, CT Lead Technologist

Urgent Care Norwood

1210 Providence Hwy,  
Norwood, MA  
Phone: 781-255-0500  
Faculty Contact: Sarah Polubinski, CT Lead Technologist

## **Radiation Protection Policies**

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

### **Overview**

The National Council on Radiation Protection (N.C.R.P.) has published, as its guideline and, state and federal agencies have promulgated regulations for a recommended annual exposure dose limit for individuals employed as radiation workers. These level are 5 rem (5,000 millirem) per annum, with a cumulative level not to exceed a level calculated by the formula “1 rem times the age of the worker”. The N.C.R.P. has also published as a recommended annual exposure dose limit for those who may “occasionally” be exposed to radiation in the workplace, a level of 0.5 rem (500 millirem) per annum. The Commonwealth of Massachusetts Department of Public Health, Radiation Control Program has adopted and enforces these guidelines within its regulations.

The Computed Tomography Program Administration and Faculty have established as the annual exposure dose limit for students enrolled in its program, the level of 0.5 rem (500 millirem) per annum. Upon consultation with Certified Radiation Health Physicists, and in the experience of the Program administration and faculty, this level (which is 1/10th that recommended for the radiation worker), is “As Low As is Reasonably Achievable” (A.L.A.R.A.) for medical radiography students.

### **Student Radiation Monitoring**

To help insure that all student Computed Tomography technologists are learning in a safe working environment, the amount of radiation received is monitored. **Students are not allowed to be in the room during radiation exposures.** One radiation dosimeter will be issued for each student. This dosimeter will be for the clinical environment. Students are responsible for the safety and security of their dosimeters. Each student must exercise care to prevent loss of or damage to radiation dosimeters. Lost / destroyed dosimeters must be reported to the CT Lead Instructor immediately.

It is the responsibility of each student to wear the assigned dosimeter whenever he/she is in the clinical area. Failure to wear the dosimeter will result in five (5) points off the Clinical Requirement portion of the overall grade. The dosimeter is to be worn on the collar. The dosimeter holder must face forward to obtain an accurate radiation measurement. Dosimeter badges must be left at the clinical site at the end of each day.

When the student rotates to another clinical site, it is the student's responsibility to take his/her



current dosimeter to the new site.

Used dosimeters are to be brought to the college for quarterly exchange of dosimeters. It is the responsibility of the student to obtain a new quarterly dosimeter and submit the current dosimeter to the radiation control designee. It is the student's responsibility to bring the dosimeter to the College. This policy is to avoid delays in sending dosimeter badges to Landauer for timely reading.

A Non-Compliance Report will be filed for any violation of the dosimeter policy. Repeated offenses subject the student to sanctions up to and including dismissal from the Program.

Confidential disclosure of pregnancy is strongly encouraged during the first trimester, however not required. If the student chooses to disclose her pregnancy, she must do so **in writing** to the CT Lead Instructor. The pregnant student will be counseled by the CT Lead Instructor and/or Radiation Safety Officer regarding methods to reduce exposure from ionizing radiation. If the student chooses to continue CT course work during her pregnancy, immediate efforts shall be instituted to keep the student's radiation exposure during the gestation period well below .05 rem. A second (fetal) radiation badge shall be obtained and worn on the abdomen if the student is involved in clinicals.

Students employed as a radiation worker in any hospital/medical center/clinic are required to obtain a separate dosimeter badge from the employer. It is critical that student radiation dose records are kept separate from employment records.

### **Pregnancy Policy**

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

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

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

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

#### **Option I:**

The student has the right to make voluntary disclosure that she is pregnant and she has the right to modify training.

#### **Option II:**

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

**Option III:**

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

**Option IV:**

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

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

**Option V:**

The student may withdraw the declaration of pregnancy at any time. This withdrawal of declaration **MUST** be in writing. Refraction of the pregnancy declaration requires the student to abide by the general guidelines for radiation workers. Therefore, after pregnancy declaration refraction, the student will be monitored according to general guidelines for radiation workers as described by the Nuclear Regulatory Commission and State Laws

**Option VI:**

The student may choose not to declare the pregnancy to the program.

\*The program will not be responsible for any injuries to the embryo/fetus should the student decide to remain in the program during the entire gestational period.

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

- The CT Lead Instructor will review with the student NCR Regulatory Guide #8.13, "Instruction Concerning Prenatal Radiation Exposure." The student will sign a declaration indicating receipt of this regulation.

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

### **Student Radiation Exposure Reports**

Whole body radiation exposure reports are posted quarterly and made available for student review. Radiation exposure reports are reviewed by the CT Lead Instructor and unusual exposure levels or developing trends will be investigated. Dosimetry reports reflecting radiation levels for each student are kept on file in the CT Lead Instructor's office. The Computed Tomography Program provides each student with their accumulated radiation dose at the time of graduation. Subsequent requests for accumulated exposure levels are to be made by the graduate's employer and must be submitted in writing to the CT Lead Instructor.

### **Student Dose Limit Protocol**

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

### **Student Safety Practices**

Students enrolled in the MassBay Community College CT Program will adhere to proper radiation safety practices consistent with clinical site policies and the scope of practice in Computed Tomography to include the following:

- Students are to be behind the lead-lined control area of a CT Control room when performing diagnostic scans.
- All doors leading into a radiographic room from a public corridor are to be closed prior to making an exposure.
- Students will only be allowed to be inside the scan room while the CT scanner is in operation to assist a Radiologist with CT fluoroscopy/interventional procedures.

### **Patient Safety Practices/Clinical**

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

- Students are to review the physician's order or requisition for the examination or procedure prior to performing the study.
- Students are to follow the necessary steps to obtain an informed consent from the patient prior to the start of the examination or procedure i.e. verify patient identity; explain the procedure or examination; obtain a patient history; and inquire about possible pregnancy.
- Students are to review a patient's assessment form/medical history and obtain information regarding Pregnancy, Glomerular Filtration Rate, Medication Allergies and any contraindications to the use of CT contrast medium before it's use during an exam.
- **All clinical assignments are carried out under the direct supervision of a qualified CT Technologist until the student has achieved competency.**
- **All clinical assignments are carried out under the indirect supervision of a qualified CT Technologist after the student has achieved competency.**
- **If a CT examination is initiated by a student and results in undiagnostic/unsatisfactory images, the student will need direct supervision to perform the exam in question a second time.**

**U.S. Nuclear Regulatory Commission**  
**REGULATORY GUIDE**  
**Office Of Nuclear Regulatory Research**

**REGULATORY GUIDE 8.13**  
(Draft was issued as DG-8014)

**INSTRUCTION CONCERNING PRENATAL RADIATION EXPOSURE**

**A. INTRODUCTION**

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

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

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

Other sections of the NRC's regulations also specify requirements for monitoring external and internal occupational dose to a declared pregnant woman. In 10 CFR 20.1502, "Conditions Requiring Individual Monitoring of External and Internal Occupational Dose," licensees are required to monitor the occupational dose to a declared pregnant woman, using an individual monitoring device, if it is likely that the declared pregnant woman will receive, from external sources, a deep dose equivalent in excess of 0.1 rem (1 mSv). According to Paragraph (e) of 10 CFR 20.2106, "Records of Individual Monitoring Results," the licensee must maintain records of

dose to an embryo/fetus if monitoring was required, and the records of dose to the embryo/fetus must be kept with the records of dose to the declared pregnant woman. The declaration of pregnancy must be kept on file, but may be maintained separately from the dose records. The licensee must retain the required form or record until the Commission terminates each pertinent license requiring the record.

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

## **B. DISCUSSION**

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

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

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

## **C. REGULATORY POSITION**

### **1. Who Should Receive Instruction**

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

19.12.

## **2. Providing Instruction**

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

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

## **3. Licensee's Policy on Declared Pregnant Women**

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

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

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

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

## **5. Substantial Variations Above a Uniform Monthly Dose Rate**

According to 10 CFR 20.1208(b), "The licensee shall make efforts to avoid substantial variation above a uniform monthly exposure rate to a declared pregnant woman so as to satisfy the limit in

paragraph (a) of this section,” that is, 0.5 rem (5 mSv) to the embryo/fetus. The National Council on Radiation Protection and Measurements (NCRP) recommends a monthly equivalent dose limit of 0.05 rem (0.5 mSv) to the embryo/fetus once the pregnancy is known (Ref. 2). In view of the NCRP recommendation, any monthly dose of less than 0.1 rem (1 mSv) may be considered as not a substantial variation above a uniform monthly dose rate and as such will not require licensee justification. However, a monthly dose greater than 0.1 rem (1 mSv) should be justified by the licensee.

#### **D. IMPLEMENTATION**

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

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

#### **REFERENCES**

1. USNRC, “Instruction Concerning Risks from Occupational Radiation Exposure,” Regulatory Guide 8.29, Revision 1, February 1996.
2. National Council on Radiation Protection and Measurements, *Limitation of Exposure to Ionizing Radiation*, NCRP Report No. 116, Bethesda, MD, 1993.



## Clinical Education Policies

### Attendance Policy

The Advanced Certificate Computed Tomography Program at MassBay Community College evaluates the student's performance on their professional behaviors. A detailed description of the professional behaviors can be found on pages 14-17 of the Division of Health Sciences Student Handbook and Policy Manual.

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

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

#### **1. Attendance is mandatory.**

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

#### **2. Students must attend clinical between 7am – 12 midnight (0700hrs-2400hrs). Clinical hours will vary by facility and will be adjusted according to workflow.**

- Students must arrive to the clinical area prepared to engage in clinical activities at the approved and scheduled time they have set with their perspective facility.
- Students must remain at the clinical area until the approved end of the clinical day.

#### **3. Tardiness or absence must be communicated to the designated on-site Clinical Instructor and the lead instructor prior to each infraction. The communication can be verbal (by phone call) or written and must be documented in your weekly clinical log. If you call and speak to someone you must get the name and contact information of the person you called and record the time of your call.**

- Make-up times for absence and/or tardiness are at the discretion of the onsite Clinical Instructor and MassBay CT Lead Instructor.
- Proposed make-up times must be submitted to the CT Lead Instructor via email for approval.
- Make-up time schedule beyond the semester can only be permitted if the clinical student has been issued an (I) Incomplete grade for the clinical course.
- Potential make-up times can occur in the regular semester, winter intercession and spring break.
- Holidays in which the College is closed cannot be used for make-up times.

#### **4. Absences of 16 consecutive hours require the student to provide the CT Lead Instructor with a letter from a physician verifying the student is capable to resume all activities (without limitations) associated with clinical prior to the return to the clinical site.**

#### **5. Absences and tardiness result in a reduction on the clinical grade.**

- Each unexcused absence without a physician's note will reduce the grade 5 points from the clinical attendance portion of the student's grade.
- Each tardiness or early departure will reduce the grade 2 points.

**6. Affective domain warnings are issued by the CT Lead Instructor for the following infractions:**

- Failure to notify Clinical Instructor and/or CT Lead Instructor of absence, tardiness, or early departure from a designated shift.
- Excessive (>24) absentee hours, without a physician's note
- Excessive (>2) tardiness or early departure

**7. An (I) incomplete may be issued as a clinical designation when skill acquisition is incomplete due to absenteeism or tardiness. A student must provide a written request for such consideration to the CT Lead Instructor two weeks prior to the end of the semester.**

- Refer to page 9 of the Division of Health Sciences Student Handbook and Policy Manual for details of the **Incomplete Grade Policy**

**HIPAA Compliance**

It is the moral, ethical and legal responsibility of health professionals, and DHS students to insure that any and all medically related information is held in confidence. Patient information should only be shared the appropriate clinical personnel within the context of that personnel's need to know for delivery of quality care. Students are required to adhere to any and all such policies while in the clinical environment. All students receive HIPAA training during CT pre-clinical orientation on the MassBay campus and are fully informed on this law. Students must pass a test concerning HIPAA requirements before being allowed into the clinical environment. Care must be taken when bringing clinical experiences back to campus for discussion. Information shared should never include protected patient information as defined by HIPAA. For information on the current HIPAA law please refer to the following website. <http://www.hhs.gov/ocr/privacy/> Violation of the HIPAA policy will result in the disciplinary action of written warning. Repeated violations will result in a student's removal from the CT program.

Violation of the Supervision policy must be reported to the clinical instructor and MassBay Community College Clinical Coordinator or Program Director. Reports of a breach in the Supervision policy will be investigated and may result in the removal of clinical student from the clinical course and the grade of (UC) Unsafe Clinical to be given for the course.

## **Clinical Expectations**

### Policy: Prerequisite

Students must be accepted into the Computed Tomography program. Students must maintain a minimum of a “C” (77%) average in all course work, once accepted into the program, to attend clinical education and to be considered as passing a/each course.

In an effort to achieve the Computed Tomography Program mission statement and goals, it is important to have an effective clinical training plan. Clinical training is comparable to “on the job” training and therefore students are required not only to dress and act as professionals, but will be taught the importance of job responsibility and reliability. Attendance at all assigned clinical hours and rotations is mandatory and essential to the content mastery. The school feels that a student should be able to achieve clinical competency by actively fulfilling the required number of assigned, supervised clinical hours each semester.

## **Clinical Requirements**

The purpose of the clinical experience requirements is to verify that candidates have completed a subset of the clinical procedures within a discipline. Successful performance of these fundamental procedures, with mastery of the cognitive knowledge and skills covered by the examination provides the basis for the acquisition of the full range of clinical skills required in a variety of settings.

Candidates for Computed Tomography certification and registration must document performance of a minimum of 125 repetitions of computed tomography procedures according to the criteria noted below. Procedures are documented, verified and submitted when complete via an online tool accessible through My ARRT Info account on arrt.org. ARRT encourages individuals to obtain education and experience beyond these minimum requirements. Completion of each procedure must be verified by a certified and registered technologist, supervisor or licensed physician. The verification process is described within the online tool.

- Until a student achieves and documents competency in any given procedure, all clinical assignments shall be carried out under the Direct Supervision of a certified CT Technologist. Direct Supervision means that a computed tomographer is present before the exam to assess, during the exam, and reviews and approves the finished procedure.
- The student to computed tomography clinical staff ratio must be maintained at 1:1 at all times.
- After demonstrating competency, students may perform procedures under Indirect Supervision. Indirect Supervision means that a certified CT Technologist will be in the immediate audible area and immediately available to assist the student if needed. The practitioner will evaluate and approve finished images for quality assurance.
- If a CT scan of a patient is determined to be undiagnostic the student must immediately notify their supervising technologist and the technologist must be present if a second scan

is needed. A violation of this policy will result in immediate dismissal from the clinical site and disciplinary action up to and including termination from the CT Program.

**All Images and Computer Work Must Be Reviewed and Assessed.**

**All Repeats Must Be Supervised by A Certified Computed Tomography Technologist.**

- By the end of each semester, the student is required to achieve competence in the categories of examinations necessary to meet the ARRT requirements.
- The student is responsible for seeing that the requirements are met. The CT Lead Instructor will monitor student progress to ensure each clinical rotation allows them to reach their goal.
- All professional traits evaluated at the end of a clinical rotation are intended to address the student's overall performance and suitability as a professional. They are not intended to judge the student's character. Students are required to sign each evaluation, not necessarily to indicate approval or disapproval, but rather to verify that they have seen the evaluation. A student may write comments on any evaluation showing agreement or disagreement with the evaluation.
- Students are responsible for having a radiation monitoring badge, identification badge, and a writing utensil with them at all times in the clinical setting. **Students may not have personal electronic devices with them in the clinic setting.**
- All patients will be treated with respect and dignity. Communications skills are a must in the patient care area.

**DIVISION OF HEALTH SCIENCES STUDENT ACKNOWLEDGEMENT FORM**  
***DO NOT SUBMIT UNTIL YOU HAVE READ THE ENTIRE HANDBOOK***

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

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

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

Lastly, I understand that I am required to satisfy the Division of Health Sciences' Medical History/Immunization Records requirement and CPR requirement. Failure to do so will preclude my eligibility to participate in the clinical or practicum phase and may result in my inability to complete the program.

**Please sign and date this form and submit it to your Castle Branch account unless instructed otherwise by a faculty member.**

Student's Name (Printed) \_\_\_\_\_ Student's signature \_\_\_\_\_  
Program: \_\_\_\_\_ Received on (Date): \_\_\_\_\_

**NOTE: Submission of this form is required prior to clinical rotations.**