Los Angeles City College offers a complete program in Radiologic Technology. The program is accredited by the Joint Review Committee on Education in Radiologic Technology. An Advisory Committee composed of Radiologists, Radiographers, Hospital Administrators, Clinical Instructors and Students, cooperates with the Faculty and College Administrators in continuous assessment and revision of the program to ensure “state of the art” training in medical imaging.

This manual has been prepared to assist you in assuming the obligations and privileges of study in the Los Angeles City College Radiologic Technology Department.
Mission Statement:
The mission of the Radiologic Technology Program at Los Angeles City College is to instruct students with the technical and interpersonal skills necessary for success as a professional diagnostic medical radiographer.

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

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  Dr. Carol A. Kozeracki, Dean of Academic Affairs
  Dr. Anna Badalyan, Dean of Institutional Effectiveness
  Dr. A. Alex Davis, Dean: Workforce Development
<table>
<thead>
<tr>
<th>Clinical Education Centers</th>
<th>Radiologist</th>
<th>Clinical Instructors And Administrators</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kaiser Permanente Hospital W.L.A.</td>
<td>Merrick Schneider, MD (Medical Advisor)</td>
<td>Frederick Lee RT, CRT (Department Supervisor)</td>
</tr>
<tr>
<td>Department of Radiology</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6041 Cadillac Avenue</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Los Angeles, CA 90034</td>
<td></td>
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</tr>
<tr>
<td>(323) 857-4373</td>
<td></td>
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</tr>
<tr>
<td><strong>Kaiser Permanente Hospital Los Angeles (Sunset)</strong></td>
<td>Corine Yee, MD</td>
<td>Michael Gumbar, RT, CRT (Administrator)</td>
</tr>
<tr>
<td>Department of Radiology</td>
<td></td>
<td>Michael Loomis RT, CRT (Clinical Instructor)</td>
</tr>
<tr>
<td>4867 Sunset Blvd.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Los Angeles, CA 90027</td>
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<tr>
<td>(323) 783-7604</td>
<td></td>
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</tr>
<tr>
<td><strong>Good Samaritan Hospital</strong></td>
<td>Shawn Butela, MD</td>
<td>Victor Helton RT, CRT (Chief Technologist)</td>
</tr>
<tr>
<td>Department Of Radiology</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1225 Wilshire Blvd.</td>
<td></td>
<td><strong>David de la Torre, RT, CRT (Clinical Instructor)</strong></td>
</tr>
<tr>
<td>Los Angeles, CA 90017</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(213) 977-2121 Ext. 5229</td>
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</tbody>
</table>

*When calling Clinical Education Centers please ask for the Clinical Instructors.*
The Radiologic Technology program is accredited by the Joint Review Committee on Education in Radiologic Technology (JRCERT) 20 N Wacker Drive Suite 2850 Chicago, IL 60606 Phone (312) 704-5300 and the State of California Department of Health Services.

The Joint Review Committee on Education in Radiologic Technology Standards can be found at the following website http://www.jrcert.org/acc_standards.html

Additionally, students can report allegations that an accredited program is not in compliance with JRCERT accreditation standards by going to the following website: http://www.jrcert.org/allegations.html

ATTENDANCE (L.A.C.C. CATALOG)

Only students who have been admitted to the College and have been selected for the radiology program may attend classes. Students must attend every meeting of all classes for which they register. To avoid being dropped from class, students must contact the instructor when they are absent for emergency reasons only. Students who are preregistered in a class and miss the first meeting may lose their right to a place in the class, however the instructor may consider special circumstances. Whenever students are absent more hours than the number of hours the class meets per week, the instructor may drop/exclude them from the class.

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

ATTENDANCE (RADIOLOGY DEPARTMENT)

The Radiology program has a Monday through Friday schedule during the fall, winter, spring and summer semesters. This means students are obligated to be in class and not miss any course work on these days regardless of any commitments students may have. In addition, once students start their clinical training in RT 280 their schedule may includes weekends and evening shifts. Hospital’s operate on a 24 hour/seven days schedule and as a clinical student it may be required to participate in training at any hours.
requested by the clinical coordinator in order to develop competencies in all areas of the radiology training.

Any student who becomes ill or injured during their two years in the radiology program must make-up the missed time. Before a student may return to the program, a written release from their doctor must be provided prior to returning to the program. If any student absences exceed **more than two weeks** the time **cannot be made up** and the student will be asked to withdraw from the program and reapply the following year.

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

**NOTIFICATION OF ABSENCE-Radiologic Technology Department**

Students are required to notify the department in writing if they are unable to attend classes. Email your instructor **on the day of the absence.** In addition, all students must complete the LACC Absence notification survey located: [https://docs.google.com/forms/d/e/1FAIpQLScpMTJDsIgsI3oHJP_s_PRCVfWzaIytmfxKHuzpCDtpE8Vw/viewform](https://docs.google.com/forms/d/e/1FAIpQLScpMTJDsIgsI3oHJP_s_PRCVfWzaIytmfxKHuzpCDtpE8Vw/viewform) Prior to a student’s return to the program they must submit appropriate documentation to the Program Director before to returning to class. The medical documentation must state that the student is physically and mentally able to continue in the program.

**ADDRESS**

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

**FOOD**

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

**SMOKING**

Smoking is not permitted in any room of the Radiologic Technology Department.

LACC is a non smoking campus.
R.T. FACILITY MAINTENANCE

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

PHYSICAL EXAMINATION

A physical examination must be performed by a licensed physician to determine physical and mental fitness of the student. The Program Director is authorized to require that records of such examination are released to the college. These records will be used only to determine fitness for the program and, except for such use, the confidentiality of such records shall be maintained. Students must be free from communicable diseases, infection, psychological disorders, and other conditions that could prevent the successful performance of the responsibilities and tasks required in the program.

Any health condition described above, which is developed by the student after admission to the program, may be considered sufficient cause for suspension from the program.

<table>
<thead>
<tr>
<th></th>
<th>1) PHYSICAL EXAMINATION</th>
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<tbody>
<tr>
<td></td>
<td>The student shall bear all the cost of such an examination.</td>
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<td></td>
<td>2) LABORATORY TESTS</td>
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<td></td>
<td>The laboratory tests will include complete blood count. TB test or chest x-ray and urinalysis. These tests may be obtained from laboratories of student’s choice. The student shall bear all the cost of such tests.</td>
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<tr>
<td></td>
<td>3) IMMUNIZATION</td>
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<tr>
<td></td>
<td>Hepatitis B screening and other immunizations as are required by the administrator of the respective Clinical Education Centers. The student shall bear all the cost of such tests. The list of required immunizations will be provided during the orientation. Final acceptance to the Radiologic Technology Program is contingent upon the completion and documentation of the physical examination, laboratory tests, and immunizations.</td>
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<tr>
<td></td>
<td>4) TEETH</td>
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<tr>
<td></td>
<td>Students’ teeth should be in good condition; all dental health deficiencies must be corrected. The student shall bear the cost of examination and treatment.</td>
</tr>
</tbody>
</table>
STATEMENT

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

PREGNANCY POLICY

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

LIABILITY INSURANCE

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

ACCOMMODATIONS STATEMENT

Students with a verified disability who may need a reasonable accommodation(s) for any class are encouraged to notify the instructor(s) and contact the Office of Special Services as soon as possible. (323) 953-4000, X 2270. All information will remain confidential.

UNIFORMS

Students are required to wear uniforms to the RT 103, RT 104 lab courses, to the Radiation Protection course and to the Clinical Education Centers.

1. Women and Men will purchase uniforms and accessories determined by the program.

Students are not permitted to wear jeans, corduroys or athletic shoes.

APPEARANCE

PROFESSIONAL APPEARANCE AT ALL TIMES IS A REFLECTION OF YOUR ATTITUDE TOWARD YOUR CHOSEN PROFESSION.

1. All uniforms must be clean, and pressed, at all times.
2. Shoes must be polished, at all times.
3. Hair clean, neat, and conservatively trimmed, at all times.
4. Nails must be clean at all times.
5. In the interest of personal and patient safety, jewelry will be limited to a watch, wedding rings, and stud earrings.
6. Name tags must be worn when in uniform. The student shall bear all the cost of the name tag.
7. Radiation film badges must be worn at the Clinical Education Centers and when working the laboratory on campus. Film badges are provided by the College and the clinical affiliates. (See Appendix I – Radiation Safety Rules For Campus Laboratory Classes and Clinical Education Centers.)

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

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

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

Board Rule 9803.10
Willful disobedience to directions of College officials acting in the performance of their duties.

Board Rule 9803.11
Violation of College rules and regulations including those concerning student organizations, the use of College facilities, or the time, place, and manner of public expression or distribution of materials.

Board Rule 9803.12
Dishonesty, such as cheating, or knowingly furnishing false information to the College.

Board Rule 9803.13
Unauthorized entry to or use of the College facilities.

Board Rule 9803.14
 Forgery, alteration, or misuse of College documents, records, or identification.
Board Rule 9803.15
Obstruction or disruption of classes, administration, disciplinary procedures, or authorized College activities.

Board Rule 9803.16
Theft of or damage to property belonging to the College, a member of the College Community, or a campus visitor.

Board Rule 9803.17
Disorderly, lewd, indecent, obscene, or offensive conduct or expression, which interferes with the College’s primary educational responsibility or adversely, affects a student's standing as a responsible member of the college community.

Board Rule 9803.18
Assault or battery, abuse, or any threat of force or violence directed toward any member of the College Community or campus visitor engaged in authorized activities.

Board Rule 9803.19
Use, possession, distribution, or presence on a campus or at any college-sponsored function while under the influence of alcoholic beverages, narcotics, or other dangerous drugs, such as marijuana and lysergic acid diethylamide (LSD), except as expressly permitted by law.

Board Rule 9803.20
Possession, while on a college campus or at a college-sponsored function, of any object that might be used as a lethal weapon, is forbidden by all persons except members of faculty-sponsored, National Rifle Association affiliated clubs, while participating in sanctioned club activities, sworn peace officers, police officers, and other governmental employees charged with policing responsibilities.

GRADING SYSTEM  (See Appendix II – Grading System)
Students must maintain a minimum grade of “C” (75%) in each course. Courses in the Radiologic Technology Program are scheduled in sequence, and offered only once per academic year. All courses must be completed in the semester attempted in order to remain in the program. Students not able to maintain a grade of “C” or better in their courses will be asked to leave the program.
GROUNDs FOR DISMISSAL

Academic Requirements: Students unable to maintain a final grade of “C” (75%) or better in didactic courses will be asked to leave the program.

Student Conduct: Students who violate the Los Angeles Community College Standards of Student Conduct including furnishing false college and program documents, will be dismissed from the program and cannot reapply for entry {Board Rule 9803.12}.

Clinical Education Center: Students who violate policies and procedures governing the operation of the radiology department may be dismissed.

Performance of Required Tasks: Grounds for dismissal will develop when a student is able to master didactic knowledge but is unable to perform the required tasks at the clinical education centers.

ATTENDANCE (RADIOLOGY DEPARTMENT)

Any student who becomes ill or injured during their two years in the radiology program must make-up the missed time. Before a student may return to the program, a written release from their doctor must be provided prior to returning to the program. If any student is absent for more than two weeks the time cannot be made up and the student will be asked to withdraw from the program.

READMISSION TO PROGRAM

1. Didactic Courses: A student who fails any didactic portion of the Radiologic Technology Program in the Fall or Spring Semester must follow the procedure stated below to be considered for re-admission:

   a. The student must resubmit an application for advanced standing in the Radiologic Technology Program for the following Fall Semester.
   b. The student will be placed in the same pool as all new applicants and will be selected by the lottery system with all the new students (re-admission is not guaranteed).
   c. If the student is selected for re-admission, the student must audit all Radiologic Technology courses in which (s) he was enrolled during the semester of dismissal even though a passing grade was received. A score of 75% or better in all classes must be achieved in order to continue in the program.
d. A student will only be allowed to repeat a course in the program one time if dismissal was due to academic performance below the 75% minimum.

2. Clinical Performance: Students dismissed due to lack of clinical performance will not be eligible for re-admission into the program.

3. Attendance Requirement: Students who withdraw because of failure to meet the attendance requirement are not eligible for reentry into the Radiologic Technology program.

EMPLOYMENT

Students assigned to Clinical Education Centers are not permitted to perform radiologic procedures in the department other than those that are required under the scope of the educational guidelines set forth by the program. However, they may be employed on a part-time basis in positions at the facility other than those which require them to perform radiologic procedures on patients. Students are not allowed to be used as substitutes for regular staff.

COUNSELING

Counseling is provided by the Program Director, Faculty and Clinical Instructors of the respective clinical education centers. Areas of deficiencies and a plan for improvement are discussed with the student. The student is encouraged and given a sufficient amount of time to improve. Counseling will continue in order to assess the student’s progress. A student who fails to meet the requisites of the plan will be dismissed from the program.

LIBRARY – L.A.C.C. LEARNING RESOURCE CENTER

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

RADIOLOGIC TECHNOLOGY DEPARTMENT – RESOURCE CENTER

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

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

STUDENT PLACEMENT IN CLINICAL EDUCATION CENTERS

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

GRADUATION

All Radiologic Technology students must receive the Associate Degree of Science in Radiologic Technology. Students are to refer to the current college catalog for graduation requirements. Graduation counseling is available in the Counseling Office. Additional counseling is available in the Radiologic Technology office. Application for graduation must be filed with the Graduation Clerk in the Admissions Office prior to the end of the ninth week of the Fall Semester (date will vary). A copy of the graduation evaluation must be turned in to the Program Director no later than the second week of December (date will vary). Failure to comply may result in the student not being able to take the American Registry of Radiologic Technology Examination.

CERTIFICATION

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

POLICY ON PRE-APPLICATION OF ELIGIBILITY FOR A.R.R.T. CERTIFICATION AND REGISTRATION

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

If a student thinks they may need to file a pre-application they will need to contact a faculty member of the Radiologic Technology Department for more information.

**PROFESSIONAL ORGANIZATIONS**

Students are encouraged to become members of and are expected to participate in activities sponsored by the California Society of Radiologic Technologists - Los Angeles District. Students are encouraged to join the California Society of Radiologic Technologist (CSRT) and the American Society of Radiologic Technologist (ASRT). Applications for membership are available in the Radiologic Technology office. Students will be informed of upcoming activities and seminars.

**CLINICAL WORK SCHEDULE**

The LACC radiology program has students scheduled at various hours weekly from 5:00 am to 7:00 pm depending on the student’s rotation. Each student is required to be at the hospital for 36 hours for their clinical training and then spend 4 hours at the LACC campus for additional training and testing. Students are scheduled to work Monday through Sunday with no more than 10 hours per day or 40 hours per week. Hours exceeding these limitations are voluntary from the student.
APPENDIX

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LOS ANGELES CITY COLLEGE

TO: All Instructors and Students

14
FROM: Israel Fonseca, Program Director

SUBJECT: Radiologic Technology Department Grading System

In order to standardize our grading system, all instructors will use the following grading scale:

A = 100-94%  
B = 93-83%  
C = 82-75%  
D = 74-61%  
F = 60% & below

Students must maintain a minimum grade of “C” (75%) in each course.

The final grade will be calculated using the following percentage criteria.

1. Quizzes will be 25% of the grade.
2. Midterm will be 35% of the grade.
3. Final exam will be 40% of the grade.

Make-up examinations are only administered to students who are absent due to an emergency. Documentation is required. Ten percent (10%) will be deducted from the grade whenever a make-up examination is given.

All quizzes and examinations will be timed.

In order for instructors to administer and grade a make-up examination, arrangements must be made the day following the missed scheduled examination. Failure to do so will result in the grade of zero (0) for that examination.

If there is a project to be turned in, or laboratory assignments, the Midterm will be 30%, or the Final Examination will be 35% of the grade (Instructors discretion) and the project or lab assignment will be 5% of the grade.

RADIATION SAFETY RULES FOR CAMPUS LABORATORY CLASSES AND CLINICAL EDUCATION CENTERS
The following rules have been established for your protection against ionizing radiation during Campus Laboratory Classes and at the Clinical Education Centers. These rules are mandatory and must be followed without exception.

1. A Radiation Dosimeter (OSL), and Instadose USB Badge properly oriented and placed, must be worn at all times. If protective aprons are used, the OSL and Instadose USB badge must be worn outside the apron so that any radiation reaching any part of the body will be recorded.

2. Except for three specific situations, you may not remain in a radiographic room any time during activation of the tube (when x-rays are being generated). The three exceptions are surgery, portables, and fluoroscopic work, discussed below.

3. You must not hold or support a patient during exposure, nor will you hold or support a cassette during exposure, except in an emergency. If such an emergency arises, you must wear a protective apron and gloves.

4. During activation of the tube, you must not be in a direct line with either tube or patient. You must not observe the patient during exposure from an adjacent room or hall unless through a protective window. You must not “peek” around a door nor through a crack between door and wall.

5. During an exposure, do not place yourself in direct line with the central ray, even though you are wearing a lead apron...and even though a lead shield is interposed between the tube and yourself. The tube must in all cases be pointing away from your body.

6. **Under no circumstances will you permit yourself or your fellow students (or any other human being) to serve as “patients” for test exposures or experimentation.**

7. If during fluoroscopic procedures you remain in the radiographic room the following will prevail:

   a. A lead apron must be worn at all times or you must remain behind a lead protective screen.
   b. The OSL badge will be worn as noted above.
   c. You must stand as far from the patient and tube as possible, consistent with the conduct of the examination.

8. Do not, during the observation period (**R.T. 260**), actually make exposures on patients. You may assist in helping patients onto tables, etc., but only under direct supervision of a staff technologist.

9. With permission of the technologist, you may make test exposures on inanimate objects. In so doing, all radiation safety rules must be followed.

10. When assisting and/or performing radiographic procedures in surgery and/or at the bedside the following will prevail:

    a. A lead apron will be worn.
b. A OSL badge will be worn (see #1 above).
c. Stand as far from the patient and tube as possible.
d. Stand so that the central ray is pointing away from your body.
e. Observe all regulations, which apply to work in surgery, such as preserving sterile fields, wearing surgical garments, etc. (The technologist will provide details).

| 11. All students must perform all medical imaging procedures under the direct supervision of a qualified practitioner until a radiography student achieves competency. The JRCERT defines direct supervision as student supervision by a qualified practitioner who: reviews the procedure in relation to the student’s achievement; evaluates the condition of the patient in relation to the student’s knowledge; is present during the conduct of the procedure; and reviews and approves the procedure and/or image. |
| 12. All students must perform all medical imaging procedures under the indirect supervision of a qualified practitioner after a radiography student achieves competency. The JRCERT defines indirect supervision as that supervision provided by a qualified practitioner immediately available to assist students regardless of the level of student achievement. Immediately available is interpreted as the physical presence of a qualified practitioner adjacent to the room or location where a radiographic procedure is being performed. This availability applies to all areas where ionizing radiation equipment is in use. |
| 13. Repeat radiographic examinations: All radiologic technology students, regardless of the student’s level of competency and in support of professional responsibility for provision of quality patient care and radiation protection, NON-DIAGNOSTIC RADIOGRAPHS SHALL BE REPEATED ONLY IN THE PRESENCE OF A QUALIFIED RADIOGRAPHER. |
| 14. FAILURE TO COMPLY WITH THIS POLICY WILL BE GROUNDS FOR DISCIPLINARY ACTION. CONTINUED ABUSE WILL RESULT IN TERMINATION FROM THE PROGRAM. |
Annual Radiation Exposure Limits

<table>
<thead>
<tr>
<th></th>
<th>Whole Body (Annual)</th>
<th>Lens of the Eye</th>
<th>Extremities and Skin</th>
<th>Fetal Entire Gestation</th>
<th>Fetal Monthly Dose Limit</th>
<th>General Population</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Dose for Occupational Workers</strong></td>
<td>5,000mrem/ year</td>
<td>15,000mrem/ year</td>
<td>50,000mrem/ year</td>
<td>500mrem/ year</td>
<td>50mrem / year</td>
<td>100mrem / year</td>
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<tr>
<td><strong>Stochastic Effects</strong></td>
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<tr>
<td><strong>Non-Stochastic Effects</strong></td>
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<thead>
<tr>
<th>Dosimeter</th>
<th>ALARA Level I</th>
<th>ALARA Level II</th>
<th>ALARA Level III</th>
</tr>
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<tbody>
<tr>
<td>Whole Body (Monthly)</td>
<td>100mrem</td>
<td>300mrem</td>
<td>500mrem</td>
</tr>
<tr>
<td>Whole Body (Quarterly)</td>
<td>300mrem</td>
<td>900mrem</td>
<td>1,500mrem</td>
</tr>
<tr>
<td>Extremity (Monthly)</td>
<td>1,000mrem</td>
<td>1,000mrem</td>
<td>5,000mrem</td>
</tr>
<tr>
<td>Extremity(Quarterly)</td>
<td>300mrem</td>
<td>3,000mrem</td>
<td>15,000mrem</td>
</tr>
<tr>
<td>Declared Pregnant Worker (Monthly)</td>
<td>20mrem</td>
<td>40mrem</td>
<td>50mrem</td>
</tr>
</tbody>
</table>

ALARA I: Radiation Safety Officer Notified. Report Kept on File.

ALARA II: Badged Radiation Employee/ Student receives a Report of Unusual Radiation Exposure (RURE)

ALARA III: Badged Radiation Employee/ Student receives a Report of Unusual Radiation Exposure (RURE)

RSO performs a Review of a Worker Exposure Conditions and Procedures

- The ALARA concept imposes lower operational dose limits that are even more restrictive than the maximum Legal dose limits shown in Table I above.
- This ensures an enhanced safety factor for what are already considered to be safe annual doses for radiation workers.
- **What are the ALARA Investigation Levels?**
  - There are two types of ALARA investigation levels for external occupational radiation exposure as indicated by a dosimeter. If a worker’s dose for any calendar month (30 days), calendar quarter (3 months) or calendar year (12 months) exceeded these values, an investigation is conducted by the RSO to determine if there are reasonable ways to reduce the dose levels.

Radiation Protection Program – Policies and Procedures

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

B. Policy
1. Regarding dosimetry badges and reports while enrolled in the program:
   No charge will be required to cover the cost of providing radiation dosimetry services for the student (including fetal badge)
   a. An OSL dosimetry badge, properly placed, must be worn at ALL times during laboratory or clinical practice, including anytime you are completing your laboratory experiments. In other words, any time you are in a designated radiation area.
   b. When protective aprons are used, the dosimetry badge must be placed above the apron, at collar level.
   c. It is the student’s responsibility to exchange their monthly dosimeter badge by the 1st week of each new month and also upload their exposure results to the Instadose website. The student’s clinical grade may be affected if he/she does not comply with this timeframe. Points will be deducted for late submissions.
   d. The dosimetry pick-up/drop-off container and the dosimetry readings reported notebook are located in the Program Director Secretary’s Office.
   e. The most current dosimetry report will be available at the hospital and Instadose website on a monthly basis.
   f. A copy of the dosimetry monthly report is available with the Clinical Instructor at each affiliate.
   g. Each monitored individual is responsible for reviewing his/her dosimetry report reading and documenting they have reviewed their reading by entering and initialing their reported dosimetry reading.
   h. Immediately inform the Program Director/RSO if you wash, accidently expose, or otherwise damage your dosimetry badge. In addition, a “Radiation Dosimetry Questionnaire” must be complete and submitted to the Program Director. Copies of this questionnaire are located in the classroom.

If a dosimetry report reading exceeds the dose limits, the student will be required to complete a “Radiation Exposure Report Questionnaire” and “LA Community College District Supervisor’s report of Injury” to the program director to ascertain what factors might have attributed to the excessive exposure. You will receive a letter of concern and a copy of the letter will be placed in your file.
If the “Questionnaire” does not identify any accidental radiation explanation for your excessive reading, a letter of concern will forwarded to your Clinical Instructor/Department Manager. The student’s subsequent dosimetry report will be closely monitored to ensure that the problem has been resolved. If questions arise, a full investigation will ensue.

i. Past dosimetry badge reports are filed indefinitely in the RSO/program director’s office.

j. Upon graduation, students will receive one free copy of his/her termination dosimetry report. Copy and file this final dosimetry report for future reference.

k. Instadose is the schools dosimetry provider. Student radiation exposures are monitored monthly throughout the program and are maintained by the College as part of student’s permanent file.

2. When an X-ray exposure is about to be made, you MUST:
   a. Leave the room, or
   b. Get behind the lead shield, or
   c. Be otherwise suitably protected for surgery, portable and fluoroscopic work.

3. Specifically, you must not hold or support a patient or test phantom, nor hold or support an imaging receptor during an exposure.

4. You may not observe the patient during exposure from an adjacent room or hall unless through a lead-glass protective window. You must NOT “peak” around a door nor through a crack between door and wall.

5. When sitting to rest in the hall do not sit in direct line with the tube or radiographic table even if it is not being used.

6. During an exposure or procedure do not place yourself in direct line to the primary beam, even though you are wearing a lead apron.

7. Under no circumstances will you permit yourself or any other human being to serve as “patients” for test exposures or experimentation.

8. If, during fluoroscopic procedures, you remain in the radiographic room the following will prevail:
   a. A lead apron (preferably 0.5 mm lead equivalent) must be worn at all times or you must remain behind an adequate lead protective screen and not in visible line with either tube, patient or the x-ray phantom
   b. The dosimetry badge must be worn above lead apron at collar level.

9. Do not, during the observation periods, actually make exposures on patients. You may assist by helping patients onto tables, etc., but only under direct supervision of a staff technologist.
Date: __________________

Dear Clinical Instructor/ Department Manager:

REGARDING:

This memo is to express concern about the RADIATION DOSIMETRY REPORT dated ________ to _________, in which the identified student received _________ millirems.

Please compare this reading with those of your personnel to note any similar excesses in your staff’s readings. If this is the case, please let me know when the Radiation Safety Officer is scheduled to check your x-ray machines for radiation leakage. If the high reading is due to excessive fluoroscopic procedures, please rotate the student through areas of clinical training that would normally give the student the least amount of radiation. The students are closely monitored to conform to the standards recommended by our accreditation board. With your assistance, I am confident we can address this matter appropriately.

Sincerely,

Israel Fonseca,
Diagnostic Radiography Program Director
(323)953-4000 ext. 2942

CC: Richard Sayer and Julie Washenik, Radiation Safety Officers

____________________, Clinical Coordinator

____________________, Student
Los Angeles City College  
Diagnostic Radiologic Technology Program

TO: _____________________, Student

FROM: Israel Fonseca, Program Director

DATE:

RE: RADIATION DOSIMETRY REPORT

Students are closely monitored to conform to the standards recommended by our accreditation board. With that in mind, this memo is being written to express concern about your RADIATION DOSIMETRY REPORT dated __________ to __________, in which you received ___ millirems.

Our investigation limit for a quarterly deep dose equivalent for students is _______ mrems. Students are notified when their exposure exceeded this investigative limit. Your dose is above our limit and indicates a need to review work procedures in order to, if reasonable reduce your exposure.

Please refer to you STUDENT HANDBOOK and PROGRAM POLICIES concerning Clinical Radiation Protection Rules. These safety rules have been established for you protection. As a general rule of good practice, apply the basic rules of time, distance, and shielding to keep your exposure as low as possible. With your assistance, I am confident we can address this matter appropriately.

In order to evaluate any factors affecting your exposure, students are required to complete the attached questionnaire as quickly as possible after and exposure limit has been exceeded. Please return this questionnaire to me when completed.
Los Angeles City College
Diagnostic Radiologic Technology Program

RADIATION EXPOSURE REPORT / QUESTIONNAIRE

Student Name: ____________________ Monitoring Period: ________________ 
Affiliate: ____________________ Exposure Reading: ________________ mrems

1. Was the badge placed or stored near ionizing radiation?
   [ ] no
   [ ] yes if yes, please describe ____________________________

2. Were you accidentally exposed to a beam of ionizing radiation?
   [ ] no
   [ ] yes if yes, please describe ____________________________

3. Did you hold a patient during an x-ray exposure?
   [ ] no
   [ ] yes if yes, please describe ____________________________

4. Did you work significantly more hours or procedures during this period in fluoro (including C- arm)?
   [ ] no
   [ ] yes if yes, please describe ____________________________

5. Did you work significantly more hours or procedures during this period doing portables?
   [ ] no
   [ ] yes if yes, please describe ____________________________

6. Were you involved in procedures requiring unusually high exposure to ionizing radiation besides those addressed in questions 4 & 5?
   [ ] no
   [ ] yes if yes, please describe ____________________________

7. Are there any unusual incident(s) or additional information that will help explain your dose?
   [ ] no
   [ ] yes if yes, please describe ____________________________

__________________________________________  _________________
Your Signature                   Date
DECLARATION OF PREGNANCY

Student Name: ____________________________  Date: _________________________

1. This declaration is VOLUNTARY. You do not have to declare your pregnancy unless you chose to do so. By declaring your pregnancy Los Angeles City College, Radiologic Technology Program and the clinical affiliates will take all precautions necessary to keep the radiation dose to the embryo/fetus at or below the legal limits in accordance with the Nuclear Regulatory Commission, 10 CFR 20. 1208. **Additionally, you have the right to withdrawal your declaration (must do so in writing).**

2. The student was informed on _________________ of the risks of occupational exposure of a fetus and fertile women as outlined in the appendix to Regulatory Guide 8.13 of the U.S. Nuclear Regulatory Commission, entitled Possible Health Risks to Children of Women Who Are Exposed to Radiation During Pregnancy. 
   Students initial: __________

3. Los Angeles City College and the Clinical Affiliate agree to furnish the student with an additional Luxel badge for embryo/fetal monitoring during the gestational period. The student will wear one Luxel badge on the collar of the uniform and the additional Luxel badge at waist level to measure fetal dose. When wearing a lead apron, the second badge will be worn at the waist level under the lead apron. The radiation monitoring company will be informed, in writing, that the second Luxel Badge report is for fetal monitoring and a separate report from the mother’s dose record will be recorded.

4. Pregnancy does not preclude a student’s continuation in the program. The student’s clinical activities may be changed within the radiography curriculum to minimize the radiation exposure to the embryo/fetus.

5. The student will be advised to consult with her personal physician to help her decide whether she should continue or withdraw from the Radiologic Technology Program. **A written statement from the physician as to their determination of the student’s ability to continue in the program will be requested and discussed with the student.**

6. The student will be informed that she has the option to temporarily withdraw from the program if and when the pregnancy interferes with her abilities to safely perform the required duties of a student radiographer. Additionally, the student has the option to continue in the education program without modification. **If the student elects to temporarily withdraw from the program the student can return to the program and complete the requirements of the program without modification within a three month period post partum** [No Exceptions]. If a student does not return or notify the program within the three month time period (needs to be in writing) the student will be excluded from the program. A formal letter of resignation will be required and the student must go through the entire application process again.
7. The student’s signature indicates a written notice of “Voluntary Declaration of Pregnancy” (Page 26 of the Student Manual) and or a written notice of “Voluntary Declaration Revocation of Pregnancy” (Page 27 of the Student Manual)

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

Student’s Initial: ____________
Voluntary Declaration of Pregnancy

Student Name: ___________________________  LACC ID : __________________

Date of Birth : __________________________

Phone Number: __________________________

I am submitting this Declaration of Pregnancy to inform Radiation Safety Officer (RSO) that I am pregnant. The estimated date of delivery is ________________. I have made the decision to permit application of the embryo/fetal dose limits specified by the Nuclear Regulatory Commission (NRC) in Title 10 Code of Federal Regulations Part 20.1208 (10 CFR20.1208) or the State of California Ionizing Radiation Rules as applicable.

Declarant must choose one of the following options:
I prefer that dosimeters issued to me for fetal monitoring and corresponding reports of results be:

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

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

I understand that by making this declaration:

1) The fetal dose limits specified in 10 CFR 20.1208 (NRC) will become applicable for the entire period of gestation and can result in RSO placing restrictions on work I perform using radioactive materials or other sources of ionizing radiation for the sole purpose of ensuring compliance with the embryo/fetal dose limits specified in 10 CFR 20.1208 (NRC) and that such restrictions might otherwise not be imposed absent this declaration.

2) I may revoke this declaration at any time without explanation by submitting a signed and dated Revocation of Declaration of Pregnancy to RSO.
3) Stipulation Regarding Didactic Training

A. While enrolled in the program, I agree to attend and complete all classes in which I have registered and complete all class assignments in a manner consistent with my peers within the guidelines set forth by the individual instructor and LA City College. I understand that at the instructor’s option, I am not to be given any allowances regarding absenteeism or quality or quantity of didactic work as required for the individual courses.

B. Regarding my participation during experiments utilizing the live lab on campus or any experiment requiring an ionizing radiation source, I understand, agree with, and shall adhere to the provision set forth in the following section of this policy.

C. **Accommodation:** In the event that I am unable to successfully complete the course objectives and requirements, I understand that I may be dropped from the program at the completion of the semester. I also understand that once my pregnancy is over, reinstatement to the program will be set for the first available opening at my level of training. After this period of time has elapsed, I may be required to remediate before being formally accepted back into the program at the appropriate level of training.

4) Stipulation Regarding Clinical Training

A. I have read the following publications that have been provided:


_________________________________   ___________________
Student Signature      Date

_________________________________   ___________________
Program Director Signature    Date

_________________________________   ___________________
RSO Signature       Date
Voluntary Pregnancy Declaration Revocation Form

Student Name: ___________________________________
LACC ID       :_____________________________
Date of Birth  : ____________________________________
Phone Number: _____________________________
Date of Declaration of Pregnancy to RSO: ________________

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

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

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

__________________________  ____________
(Student Signature)             Date

__________________________  ____________
Program Director             Date

__________________________  ____________
(RSO Representative)        Date
ADDENDUM TO PREGNANCY POLICY

APPENDIX: QUESTIONS AND ANSWERS CONCERNING PRENATAL RADIATION EXPOSURE

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

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

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

4. Why do the regulations have a lower dose limit for the embryo/fetus of a declared pregnant woman than for a pregnant worker who has not declared? A lower dose limit for the embryo/fetus of a declared pregnant woman is based on a consideration of greater sensitivity to radiation of the embryo/fetus and the involuntary nature of the exposure. Several scientific advisory groups have recommended (References 1 and 2) that the dose to the embryo/fetus be limited to a fraction of the occupational dose limit.
5. What are the potentially harmful effects of radiation exposure to my embryo/fetus?
The occurrence and severity of health effects caused by ionizing radiation are dependent
upon the type and total dose of radiation received, as well as the time period over which
the exposure was received. See Regulatory Guide 8.29, “Instruction Concerning Risks
from Occupational exposure” (Ref. 3), for more information. The main concern is
embryo/fetal susceptibility to the harmful effects of radiation such as cancer.

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

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

8. What effect will formally declaring my pregnancy have on my job status?
Only the licensee can tell you what effect a written declaration of pregnancy will have on
your job status. As part of your radiation safety training, the licensee should tell you the
company’s policies with respect to the job status of declared pregnant women. In
addition, before you declare your pregnancy, you may want to talk to your supervisor or
your radiation safety officer and ask what a declaration of pregnancy would mean
specifically for you and your job status. In many cases you can continue in your present
job with no change and still meet the dose limit for the embryo/fetus. For example, most
commercial power reactor workers (approximately 93%) receive, in 12 months,
occupational radiation doses that are less than 0.5 rem (5 mSv) (Ref. 11). The licensee
may also consider the likelihood of increased radiation exposures from accidents and
abnormal events before making a decision to allow you to continue in your present job.
If your current work might cause the dose to your embryo/fetus to exceed 0.5 rem (5
mSv), the licensee has various options. It is possible that the licensee can and will make
a reasonable accommodation that will allow you to continue performing your current job,
for example, by having another qualified employee do a small part of the job that
accounts for some of your radiation exposure.
9. What information must I provide in my written declaration of pregnancy?
You should provide, in writing, your name, a declaration that you are pregnant, the
estimated date of conception (only the month and year need be given), and the date that
you give the letter to the licensee. You may use a form letter the licensee has provided to
you, or write your own letter.

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

11. Can I tell the licensee orally rather than in writing that I am pregnant?
No. The regulations require that the declaration must be in writing.

12. If I have not declared my pregnancy in writing, but the licensee suspects that I am
pregnant, do the lower dose limits apply?
No. The lower dose limits for pregnant women apply only if you have declared your
pregnancy in writing. The United States Supreme Court has ruled (in United Automobile
welfare of future children must be left to the parents who conceive, bear, support, and
raise them rather than to the employers who hire those parents” (Reference 7). The
Supreme Court also ruled that your employer may not restrict you from a specific job
“because of concerns about the next generation.” Thus, the lower limits apply only if you
choose to declare your pregnancy in writing.

13. If I am planning to become pregnant but am not yet pregnant and I inform the
licensee of that in writing, do the lower dose limits apply?
No. The requirement for lower limits applies only if you declare in writing that you are
already pregnant.

14. What if I have a miscarriage of find out that I am not pregnant?
If you have declared your pregnancy in writing, you should promptly inform the licensee
in writing that you are no longer pregnant. However, if you have not formally declared
your pregnancy in writing, you need not inform the licensee of your nonpregnant status.

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

16. If I have declared my pregnancy in writing, can I revoke my declaration of
pregnancy even if I am still pregnant?
Yes, you may. The choice is entirely yours. If you revoke your declaration of pregnancy, the lower dose limit for the embryo/fetus no longer applies.

17. What if I work under contract at a licensed facility? The regulations state that you should formally declare your pregnancy to the licensee in writing. The licensee has the responsibility to limit the dose to the embryo/fetus.

18. Where can I get additional information? The references to this Appendix contain helpful information, especially Reference 3, NRC’s Regulatory Guide 8.29, “Instruction Concerning Risks from Occupational Radiation Exposure,” for general information on radiation risks. The licensee should be able to give this document to you.

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

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

You may also telephone the NRC Regional Offices at the following numbers: Region 1, (610) 337-5000; Region II, (404) 562-4400; Region III, (630) 829-9500; and Region IV, (817) 860-8100. Legal questions should be directed to the Regional Counsel, and technical questions should be directed to the Division of Nuclear Materials Safety.

REFERENCES FOR APPENDIX


TELEPHONE ROSTER

NAME: ________________________

We recommend you acquire the telephone number of two students in every course. This information may be very useful whenever you miss a class or when you have difficulty with a particular concept or problem.

<table>
<thead>
<tr>
<th>Subject</th>
<th>Name of Student</th>
<th>Telephone Number</th>
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Los Angeles City College
Radiologic Technology
Communicable Disease Policy

All students enter the Radiography program free from communicable disease, as evidenced on their medical forms. However, during the two-year program a student may contract a communicable disease from a patient or the general public. In order to protect patients, staff, and other students, the following rules must be adhered to:

1. Student must notify the Clinical Instructor and Program Director/Clinical Coordinator immediately upon being diagnosed with a communicable disease.

2. The student must submit written documentation from the diagnosing physician indicating how their contact with patients, staff and students should be limited.

3. The faculty will remove the student from the clinical and classroom instruction in accordance with the recommendation of the diagnosing physician.

4. The student may return to the clinic and/or classroom when they have received a written release from the physician.

5. Classroom and clinical absences will be handled according to the previously described attendance policies.

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

1. Hands should be properly washed before and after each patient contact.

2. GLOVES:
   - Should be worn when the possibility of exposure to blood, mucous membrane, body fluids, or secretions exists.
   - Should also be worn when handling items soiled with blood or equipment.
   - Should be changed if there is a break in the glove either by needle stick or tear.
   - Must be changed between patients.

3. Needles, scalpel blades and other sharp instruments should be:
   - Considered as potentially infective and handled with extraordinary care to prevent accidental injuries.
   - Should be disposed of in biohazard, puncture resistant containers located in
<table>
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<tr>
<th>designated areas at each clinical affiliate. Should NOT be re-capped, bent, broken, and/or removed from disposable syringes, or otherwise manipulated by hand.</th>
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<tbody>
<tr>
<td>4. When performing procedures involving any contact with blood or body fluids, gloves, gowns, masks, and goggles should be worn in accordance with affiliate procedure.</td>
</tr>
<tr>
<td>5. To minimize the need for emergency mouth-to-mouth resuscitation, mouth-to-mouth masks should be used in accordance with affiliate procedure.</td>
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<tr>
<td>6. Blood, body fluid spills, contaminated surfaces, and re-usable items should be cleaned with a 1:10 Clorox solution and other appropriate disinfectant.</td>
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<tr>
<td>7. When obtaining specimens, gloves should be worn. Soiled containers should be placed in plastic bags and properly labeled with blood and fluid precautions before sending to the lab.</td>
</tr>
<tr>
<td>8. Proper isolation procedures for specific instances will be covered in detail during RT 207, “Patient Care Management in Radiologic Technology” during the first semester.</td>
</tr>
<tr>
<td>9. All students will be required to obtain Hepatitis B vaccine.</td>
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</tbody>
</table>
Los Angeles City College
Radiologic Technology
Electronic Device and Social Media Policy

Electronic Device Usage in the Clinical and Didactic Education Settings

Electronic devices

<table>
<thead>
<tr>
<th>1. Must be turned off once entering the clinical/didactic education center</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Will not be used during clinical time or during class or lab</td>
</tr>
<tr>
<td>3. Are restricted to breaks &amp; lunch time</td>
</tr>
<tr>
<td>4. May not be used in restricted areas</td>
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</tbody>
</table>

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

Electronic Device and Social Media Policy

Department of Radiologic Technology Social Media Policy

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

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

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

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

<table>
<thead>
<tr>
<th>Do not post ANY confidential, disrespectful, or unprofessional information about clinical affiliates, clients/patients, faculty, staff, or students. You must still follow the applicable federal requirements such as Family Educational Rights and Privacy Act (FERPA), Health Insurance Portability and Accountability Act (HIPAA), etc.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adhere to all applicable privacy and confidentiality policies. Any confidentiality violation is at the risk of disciplinary action or dismissal from your respective program. Also subject to discipline from respective licensure Boards. You can be held liable for any postings and may be subject to litigation.</td>
</tr>
<tr>
<td>Do not post any content that might place Los Angeles City College, the program or clinical agencies in a bad light or incite litigation.</td>
</tr>
<tr>
<td>Respect copyright and fair use.</td>
</tr>
<tr>
<td>Do Not use LACC or Respective Clinical Affiliate logos for endorsement.</td>
</tr>
<tr>
<td>Respect College/Clinical Affiliate property.</td>
</tr>
<tr>
<td>Do not utilize or access social media platforms during clinical hours. Do not utilize cell phones during clinical hours.</td>
</tr>
<tr>
<td><strong>Best Practices</strong></td>
</tr>
<tr>
<td>• Think twice before posting.</td>
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<td>• Once you post, you relinquish control of its proliferation forever.</td>
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<td>• Be respectful.</td>
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<tr>
<td>• Remember who the audience is.</td>
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<td>• Do not share your password or other personal information from ETUDES</td>
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Prohibited Discrimination and Harassment

The Policy

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

Academic Freedom

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

Prohibited Discrimination is defined as:

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

Definition of Sexual Harassment:

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

Retaliation

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

False Allegations

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

Confidentiality

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

General Provisions

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

Investigation

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

Informal Procedure

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

Complaint Procedure

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

Compliance Office Report

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

**Disciplinary Action**

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

**Appeals**

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

**Additional Remedies**

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

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

https://www.laccd.edu/FacultyStaff/diversity/Pages/Discrimination.aspx#harassment
Student Grievance Policy and Procedure

The purpose of the grievance policy and procedures (S-9) are to provide a prompt and equitable means for resolving student(s) grievances. In the pursuit of academic goals, the student should be free of unfair or improper action by any member of the academic community. The grievance procedure may be initiated by one or more students who reasonably believe he/she/they have been subject to unjust action or denied rights involving their status or privileges as students. It is the responsibility of the student(s) to submit proof of alleged unfair or improper action. Grievances pertaining to grades are subject to the California Education Code Section 76224(a) which states:

When grades are given for any course of instruction taught in a community college district, the grade given to each student shall be the grade determined by the instructor of the course and the determination of the student's grade by the instructor, in the absence of mistake, fraud, bad faith*, or incompetency, shall be final. (In general, there is no definitive definition of bad faith. However, bad faith may exist if there is neglect or refusal to fulfill some duty or obligation (e.g., ignoring student evaluation standards published in the course syllabus), not prompted by an honest mistake.)

Complete procedure and forms are located at:

http://www.lacitycollege.edu/services/sao/studentgrievance.html
Los Angeles City College
Radiologic Technology Department

I, the undersigned, have read the POLICIES AND PROCEDURES FOR THE RADIOLOGIC TECHNOLOGY DEPARTMENT STUDENTS and understand that I am responsible for knowing the contents. Failure to comply with the RADIOLOGIC POLICIES AND PROCEDURES will be grounds for dismissal from the program.

Student’s name_______________________________________________

Student’s signature____________________________________________

Date________________________________________________________

Upon completion please return this page to the Radiologic Technology Department.