Medical Dosimetry Program
Phone 616-331-5752, Fax 616-331-5632
College of Health Professions
Center for Health Sciences
301 Michigan Street, Suite 412
Grand Rapids, Michigan 49503

GRADUATE PROGRAM IN MEDICAL DOSIMETRY
STUDENT HANDBOOK 2018-2019

8/6/2018
This handbook will be superseded by all versions bearing subsequent dates.

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ACKNOWLEDGMENT IN RECEIVING THE STUDENT HANDBOOK

This page is to be signed by the student and returned to the Educational Coordinator upon receipt of this handbook.

PREGNANCY

To assure the radiation safety of your baby in the event you become pregnant, please read the Pregnancy Radiation Safety Policy carefully. If you wish to declare or undeclare a pregnancy, you must do so in writing according to the policies and procedures in this handbook.

STUDENT PHYSICAL EXAMINATION AND ASSOCIATED INFORMATION RELEASE

I hereby give my permission for the release of my physical examination and associated information (including but not limited to laboratory results and TB skin test results) to any GVSU Medical Dosimetry clinical education center to which I am assigned. I realize that I may rescind this permission by providing a written statement to that effect to the Medical Dosimetry Program Director/Educational Coordinator but understand that any information previously released with my permission may be retained by the clinical education center that received it.

Date	Student Signature	Printed Name

Under the Federal Family Educational Rights & Privacy Act of 1974 (Buckley Amendment), students have the right to inspect and review any and all official records, files and data pertaining to them. Adequate and reasonable notice of intent to inspect must be given and access may require the physical presence of a university official during normal operating hours.

CRIMINAL RECORDS

Individuals who have been involved in a criminal proceeding or charged with or convicted of a crime may not be eligible for national certification by the Medical Dosimetry Certification Board. Because this certification is available to graduates of the medical dosimetry program as part of preparation for clinical practice, students to whom this may apply are strongly advised to work with the MDCB for pre-application review of eligibility for certification from their website at www.mdcb.org (Exam Information Tab). The MDCB may be contacted by phone at 856-439-1631.

ACCREDITATION AND NATIONAL BOARD EXAMINATIONS

Students who receive a M.S. degree in Medical Dosimetry from GVSU will be eligible for the Medical Dosimetrist Certification Board (MDCB).

The program is accredited by the Joint Review Committee on Education in Radiologic Technology (JRCERT). The program adheres to the standards which are posted on their website. You have the right to notify the JRCERT if you believe the university is not adhering to these standards. The Standards are available for review at http://www.jrcert.org/programs-faculty/jrcert-standards/. Additionally, a list of the current Standards can be found in the Appendix of this Handbook. The JRCERT may be contacted at 20 N. Wacker Dr. Suite 2850, Chicago, IL 60606 -3182, phone 312-704-5300 or www.jrcert.org.

ANTI-DISCRIMINATION Policy

Note that the program adheres to university policies regarding student admission including policies regarding anti-discrimination toward all persons (See the current University Undergraduate and Graduate Catalog at http://www.gvsu.edu/catalog/ for policy details).

The university policy is also described below:

Grand Valley State University is an affirmative action, equal opportunity institution. It encourages diversity and provides equal opportunity in education, employment, all of its programs, and the use of its facilities. It is committed to protecting the constitutional and statutory civil rights of persons connected with the university.

Unlawful acts of discrimination or harassment by members of the campus community are prohibited. In addition, even if not illegal, acts are prohibited if they harass or discriminate against any university community member(s) through inappropriate limitation of access to, or participation in, educational,
employment, athletic, social, cultural, or other university activities on the basis of age, color, disability, familial status, height, marital status, national origin, political affiliation, race, religion, sex/gender, sexual orientation, veteran status, or weight. Limitations are lawful if they are: directly related to a legitimate university purpose, required by law, lawfully required by a grant or contract between the university and the state or federal government, or addressing domestic partner benefits.

GRADING STANDARDS

All students pursuing degrees in GVSU medical imaging and radiation sciences are required to attain a minimum of B- or Pass (Credit) competency in all courses required for completion of the professional program. Students who fail to achieve this level of competency will be required to repeat all courses not meeting this standard and may be restricted from additional clinical courses until the deficiency has been corrected. In addition, other courses with pre or co-requisites may not be available to students until the deficiencies have been corrected.

ACCESS TO CLINICAL EDUCATION

Because the university has an obligation to assure clinical education centers that patient care standards will not be compromised by students, no student will be allowed to continue in clinical education if objectives from previous courses are not met. Note that this includes the achievement of satisfactory performance on clinical affective evaluations from self-assessment as well as from clinical practitioners, preceptors, and instructors at educational sites and the demonstration of professional behavioral development.

RECEIPT OF STUDENT HANDBOOK

I have received a copy of the current Student Handbook. It is my understanding that if I have any questions concerning material in this handbook I may contact any of the Grand Valley State University Medical Dosimetry faculty for further clarification. I understand and agree to the specific clauses above but realize that I am responsible for all the information contained in this handbook as well as any subsequent additions, and I will be expected to conform to its procedures during my enrollment in the program, including all clinical education.

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Statement of Understanding
Regarding Clinical Education and Hybrid Course Meeting Travel

By my signature below, I acknowledge my understanding of the following program travel requirements.

I acknowledge my understanding that my clinical education may include assignment to clinical education sites not located within reasonable driving distance from GVSU's Center for Health Sciences due to a hybrid program format utilizing remote clinical sites. Additionally, I understand that completion of assigned clinical hours does not include travel time and are my responsibility.

While it is the intent of the university to assure beneficial clinical experiences within reasonable travel distance for the student, the student should be aware that special travel accommodation is neither assured nor guaranteed.

Additionally, I acknowledge my understanding that the program follows a hybrid format that requires students to attend face-to-face course meetings at predetermined times during each semester. While the university will work with the local community to assure the most reasonable financial cost to the student, it is the responsibility of the student to ensure that travel arrangements are made for attendance. Also, **attendance is mandatory** at onsite hybrid course meetings to facilitate maximum educational benefit. Onsite course meetings may be located at GVSU campus or an affiliated clinical site. Students will be given ample notice of meeting dates, times, and locations for onsite course meetings. Additional onsite meetings may be required for JRCERT accreditation site visits.

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Statement of Understanding
Regarding Clinical Hours

By my signature below, I acknowledge my understanding of the following program clinical requirements.

I acknowledge my understanding that while I am documenting clinical hours I may not be paid as an employee at the clinical site. Additionally, I understand that during those clinical hours I must adhere to the GVSU Medical Dosimetry Handbook and JRCERT regulations.

I acknowledge my understanding that while documenting clinical hours I will adhere to the JRCERT direct supervision policy. The JRCERT defines direct supervision as student supervision by a credentialed practitioner (e.g., registered radiation therapist, credentialed medical physicist, licensed radiation oncologist) during all aspects of the procedure. All medical dosimetry calculations and treatment plans must be approved by a credentialed practitioner prior to implementation. All treatment plans must be checked before treatment delivery and a certified person must be in the room during patient contact. Direct patient contact procedures (e.g., simulation, fabrication of immobilization devices, etc.) must be also performed under the direct supervision of a credentialed practitioner. Under no circumstances shall any student ever provide indirectly supervised care or treatment of any patient.

Date	Student Signature	Printed Name

I. MISSION STATEMENT

The program's mission is to provide graduates with the knowledge, clinical skills, and professional behaviors for a career in Medical Dosimetry. The goals of the program are to graduate students who will:

1. demonstrate clinical competence.
2. communicate effectively.
3. develop critical thinking and problem solving skills.
4. demonstrate professional behavior in clinic and the profession.

The program provides students opportunities to develop technical knowledge and personal skills necessary for a career in the radiation sciences. The curriculum is designed to combine compassion with integrity in order to shape a student into a professional. The program provides a unique learning environment which includes state of the art equipment. By recruiting the help of highly qualified Radiation Oncology faculty, students acquire skills necessary to become successful Medical Dosimetry Professionals.

Student Learning Outcomes

The students/graduates of the Medical Dosimetry program will be able to:

1. apply didactic knowledge to treatment plans.
2. generate clinically acceptable IMRT/VMAT treatment plans.
3. communicate effectively with healthcare staff
4. communicate effectively through written work.
5. evaluate, critique, and recommend changes to the radiation therapy plan as necessary.
6. participate in the development of optimal treatment strategies.
7. demonstrate professional behavior in the clinic.
8. engage in the medical dosimetry profession.

II. ACADEMICS

All students are also held to GVSU's Graduate Education Policies and Procedure Manual found at https://www.gvsu.edu/gs/policies-and-procedures-58.htm

A. Outside Employment

If a student plans on engaging in employment in addition to participating as a Medical Dosimetry student, the program recommends a schedule of less than 30 hours per week. Students should remember that academic and clinical schedules will not be revised for their employment requirements. Additionally, students must be aware that they cannot be paid as employees during student clinical hours.

B. Standards of Achievement

1. For each program required course or discrete unit of instruction in the professional curriculum, a minimum proficiency level of 80 percent on all course evaluations as described in each course syllabus is required. A minimum course grade of "B-" or higher is required for passing all RMD courses. In addition, the GPA must never drop below 3.0 in any semester or the student may be placed on academic probation or dismissed from the program. Demonstration of completion of the 37 credits in the professional curriculum is required for the student to be granted the M.S. in Medical Dosimetry degree. General graduate academic policies and regulations can be found at: https://www.gvsu.edu/gs/policies-and-procedures-58.htm.

2. Course Failure/ Repeats Policy in the Medical Dosimetry Program Courses at GVSU
    - Courses required for completion of the professional program may be repeated only once.
    - Clinical education that need to be repeated will be scheduled only when clinical positions are available at sites with university clinical education agreements.

3. Required for the successful completion of all clinical and didactic courses for each student is an available a laptop, webcam, microphone, and high speed internet that can be utilized by the student for remote access. The laptop must have virus protection and be able to contain CITRIX access software. The student will be required to access the Internet and utilize treatment planning software and GVSU University Blackboard for assignment completion.

4. Course Waiver Policy
   From the Graduate Education Policies & Procedure Manual: "Course waivers are not acceptable in the Medical Dosimetry Program because nationally all

programs are autonomous and meet the Accreditation Standards set forth by JRCERT in unique ways. Because of each program‘s individuality and uniqueness, individual courses are not equal across institutions, so medical dosimetry courses cannot be waived.”

If an academic policy exception is made and approved (https://www.gvsu.edu/gs/exception-to-policy-requests-56.htm), students must still acquire the 37 credits required to graduate from the Medical Dosimetry Program.

5. Academic Probation and Remediation Policy

A graduate student who does achieve a course grade of “B-” or higher in a program required course, has a cumulative GPA fall below 3.0 in any semester, or when there is concern for the academic or professional behavior shall be referred to the RMD Progress and Promotions Committee and is placed on academic probation.

Progress and Promotions (P&P) Committee

The purpose of the Progress and Promotions Committee is to monitor the progress of students, both individually and collectively. The P&P Committee is comprised of the Program Director and Educational Coordinator.

The P&P Committee will assemble and then contact the student in question to discuss the issues at hand. The P&P Committee will generate a written account of the meeting and the circumstances under which the meeting was convened. The Program Director will then write a letter to the student detailing the plan for remediation or dismissal.

Probation and Remediation

Definition: Probation is a status that can be assigned to students who have had academic or professional (behavioral) problems and have been referred to P&P Committee for disciplinary action.

Procedure:

i. Students who are placed on probation due to inadequate performance in one or more courses will be required to do remedial work or retake those courses. The opportunity to remediate will be decided by the instructor of the course. The instructor has the option to deny remedial work in which case the student will be required to retake the course. Once the student satisfactorily completes remedial

work or retakes the course, the student may proceed in the program. However, the probationary status will extend, at a minimum, to the end of the following semester.

ii. Students who are placed on probation due to behavioral problems may be required to do assignments, classes, or other educational courses outside of the RMD curriculum if felt appropriate by the P&P Committee and/or the Department Chair.

iii. When a student is placed on probation, the Program Director in conjunction with the Educational Coordinator will draw up a contract which outlines the steps to be followed by the student to be taken off probation. The contract will be signed by the student and the Program Director. During the period of probation, the Program Director or Educational Coordinator will monitor the student's progress; however the student is ultimately responsible for completion of the terms of the remediation plan.

The above policy does not constitute grounds for university probation, but only applies to the Medical Dosimetry Program. Program probationary documents will not become part of a student's university record on student transcripts.

Grounds for Dismissal:

Any one of the following items may constitute grounds for dismissal from the program:

i. Two consecutive semesters of probation.
ii. Failure to complete remedial work, as specified in the remediation contract.
iii. Evidence of unethical or illegal behavior.

Procedure:

i. The Progress & Promotions Committee will be called in session for any student in danger of dismissal from the program.
ii. The committee will review all of the information available regarding the student and determine if the student meets the criteria for dismissal. The final decision regarding dismissal will be made by the Program Director.

Appeal Process:

Should a student decide to appeal a decision for dismissal, the student must submit a written appeal to the Program Director within 30 days after receiving the letter of dismissal. The defense should contain any new information which the student may have and a clarification of old information. The defense will be considered by the Program Director in consultation with the Educational Coordinator within 15 days of receipt of the appeal letter and a decision given to the student. If the student is still not in agreement with the plan, then the student

may elect to appeal their dismissal. Refer to the University Catalog Student Academic Grievance Procedures for further details.

C. Readmission

Readmission to the program requires the dismissed student to complete the Medical Dosimetry application process according to the procedures and policies in effect at the time of the application.

D. Professional Certification

While not required, the university expects students to sit for the MDCB Medical Dosimetry examination. It is difficult to practice Medical Dosimetry without the appropriate professional registration. More information on these examinations and your eligibility is available at www.MDCB.org.

III. CLINICAL EDUCATION CENTERS

The Grand Valley State University Radiologic and Imaging Sciences Department is currently affiliated with a number of Clinical Education Centers. Students may be required to change clinical site rotations throughout the program as needed to assure a comprehensive learning experience. Clinical placement will be determined by the program director and educational coordinator in consultation with the student.

IV. CLINICAL EDUCATION ATTENDANCE

A. Students are expected to attend clinical education each week as specified. Students are expected to adhere to a schedule consistent with the expectations of the clinical education center and will depend on whether the student has selected full-time or part-time options. All students must fill out the Clinical Education Schedule Worksheet. Exact start and end times, lunch and break schedules, etc. are determined by the clinical education center, and thus may vary by the day, the center, and the semester. Clinical education centers are expected to schedule students for clinical hours for attainment of academic credit as specified by the program. Clinical experience hours must not exceed 10 hours per day and the total didactic and clinical involvement to not more than 40 hours/week at any time. Students may not receive compensation from the clinical education center as employees during student clinical hours.

CLINICAL ROTATION MASTER PLAN
(Full-time Option)

- 1st term (Aug-December) - 14 weeks x 3 days per week x 8 hrs per day = 336 clinical contact hours (42 days)

- 2nd term (Jan-April) -14 weeks x 4 days per week x 8 hrs per day = 448 clinical contact hours (56 days)

- 3rd term (May-August)- 12 weeks x 4 days per week x 8 hrs per day = 384 clinical contact hours (48 days)

- 4th term (optional) - additional available time for students who have not completed all mandatory competencies or who require clinical support for theses/projects

Total = 1168 clinical contact hours (146 days or ~7.5 months of full time experience)

Additional clinical education may be required if all mandatory competencies are not achieved in three semesters for full-time students or the equivalent for part-time students. Part time clinical education can be no less than half the hours of the full time option. These hours must be approved by the educational coordinator and program director prior to class registration. 8 clinical hours per week equals 1 semester credit.

B. CLINICAL PLACEMENTS

1. Students are informed in advance of the assigned site of clinical rotation. This schedule is distributed to students and the Clinical Education Centers. This schedule is at the discretion of GVSU faculty.

2. Clinical faculty at the clinical education centers determine the student rotations at a particular institution based on direction from the university. Clinical Instructors may adjust the student schedule according to department patient load or special case availability.

C. CLINICAL EDUCATION PLAN CORRELATION WITH DIDACTIC AND LABORATORY CURRICULUM

Clinical education is correlated with didactic and laboratory courses each academic semester as currently outlined in the degree emphasis plan of the university. This plan outlines which didactic courses and their accompanying laboratories are prerequisites and co-requisites for each clinical course. Each clinical course is designed to place students into a clinical environment that will provide adequate clinical cases, appropriate CMD personnel, and various Medical Dosimetry equipment as defined by the Standards and Guidelines of the Joint Review Committee on Education in Radiologic Technology consistent with instruction previously or concurrently provided in the courses and laboratories at the university.

Clinical correlation is achieved by requirements that students are expected to study, listen to lectures, provide feedback, and successfully meet didactic assessment standards at an 80.0% or higher level for each didactic course. Laboratories are held in the Medical Dosimetry simulation laboratory facilities at the university and are closely correlated with each didactic course. Students should observe and question a demonstration of each procedure by the faculty, practice under direct guidance, practice independently, and meet a 100% pass rate on each laboratory competency. Students should apply didactic and laboratory information in their clinical courses where they are expected to observe a qualified medical dosimetrist perform each procedure, practice the procedure independently until they believe they can meet the competency expectations of an MDCB qualified medical dosimetrist, then request and pass at 100% level a competency on each of the identified mandatory procedures. Additionally, the student will be expected to complete the specified number of optional competencies as directed by the qualified medical dosimetrist. Students must also successfully achieve affective behavioral competence goals to progress in clinical achievement.

The program adheres to an education philosophy that recognizes that adult learners may not learn in a linear or outline fashion. Constructivism is an approach to teaching and learning based on the premise that cognition is the result of mental construction in which students learn by fitting new information together with what they already know. We support this philosophy by making it

possible for a student to learn how to perform a specific procedure in a clinical environment prior to its presentation in a course or laboratory at the university because there is a diverse range of procedures performed daily at the clinical sites. Students are permitted to achieve clinical competency before laboratory or didactic competency but are not excused from the course and lab follow up.

D. CURRICULUM SEQUENCE AND INTEGRATION WITH PROCEDURES COURSES, LABORATORIES, AND CLINICAL EDUCATION COURSES

Grand Valley State University's Medical Dosimetry program requires students to pass each course module at a minimum 80.0% (B-) level. Beginning with the first term, all students attend didactic procedures courses, correlated laboratory courses, and clinical education simultaneously each semester. The program is designed to place students in didactic and laboratories during their hybrid classes, online classes, and clinical education during the week in an integrated manner throughout the program.

E. ASSIGNMENT OF ROTATIONS

1. Rotation assignments are made by the Dosimetry Program Director at the university.

2. Each student will be assigned to clinical education sites to maximize student learning which may require the student to rotate to various clinical settings at the discretion of program faculty. If a student is required to attend clinical education in multiple sites, the student will be allowed the opportunity to be engaged in the process of planning the logistical aspects of the assignments.

3. Observation sites may be used to witness the operation of equipment and/or procedures. These sites provide opportunities for observation of clinical procedures that may not be available at recognized clinical settings. Students may not assist in, or perform, any aspects of patient care during observational assignments.

4. During the last semester of clinical education, students are limited to a maximum 2 week observation/rotation. The observation/rotation cannot occur during the last week of clinical education.

F. STUDENT RESPONSIBILITIES

1. All students are subject to the rules and regulations established by the affiliating Clinical Education Center as well as university and program policies and procedures.

2. Students are responsible for their own transportation to and from the Clinical Education Center as well as all personal needs while at the institution. This includes parking expenses.

3. Students are responsible for meeting all GVSU Health Compliance requirements for attendance in a clinical education course.

G. STUDENT DIRECT SUPERVISION

All Medical Dosimetry students shall be under direct supervision of a certified medical dosimetrist at all times. Under no circumstances shall any student ever provide indirectly supervised care or treatment of any patient. All medical dosimetry calculations and treatment plans must be approved by a credentialed practitioner prior to implementation. Direct patient contact procedures (e.g., simulation, fabrication of immobilization devices, etc.) must be also performed under the direct supervision of a credentialed practitioner.

H. CLINICAL EDUCATION SCHEDULES

1. ROTATIONS

a. The length and nature of clinical rotations will be determined solely by the university as specified in clinical course syllabi.
b. The university will determine the total number of clinical hours required of each student for each rotation and/or academic term.

2. SCHEDULING

a. Clinical Education will be scheduled only during university class sessions. Clinical education schedules will follow the university calendar, including holidays, and breaks. No clinical education is scheduled between terms. The national dosimetry program accreditation agency, JRCERT, defines the operational hours of traditional programs as Monday - Friday, 5:00 a.m. - 7:00 p.m.

b. With advance approval by both the program faculty and the clinical education center, students may make up clinical education time outside the university schedule and this time will be considered part of the university clinical education schedule. Any make up time must not require the student to be present in the clinic more than 10 hours per day and the total didactic and clinical involvement to not more than 40 hours/week at any time. Additionally, make up time must follow all program and university policies in place for medical dosimetry students.

c. All changes in clinical schedules must be cleared in advance with the Clinical Preceptor at the appropriate institution.

d. Clinical schedules will not be changed to accommodate student work schedules. Students in the Part-time option must ensure that their student schedule is approved in advance by program faculty and the clinical site preceptor.

e. Clinical schedules may be changed to accommodate course attendance required for the Medical Dosimetry degree or any previously approved courses at the university when advanced notice of at least 2 weeks is given to the clinical preceptor.

f. Students should be allowed the same time as radiation oncology staff in the institution for breaks and lunch.

g. Banking of clinical hours may be used to complete clinical education requirements in advance of missing clinical education with the approval of program faculty and clinical preceptor in extenuating circumstances. This includes achievement of clinical competency credits.

    1. The banked hours may be used to replace only those hours missed from a clinical education course for a course required by the university for a Medical Dosimetry degree or previously approved courses and associated travel.

    2. The banking option may be used to plan for pregnancy.

3. RECORD OF CLINICAL EDUCATION TIME

a. Time records are used at all Clinical Education Centers.
b. Time of arrival and time of departure must be recorded appropriately.
c. All students are required to be present in their assigned areas for clinical education during the hours established with the Clinical Preceptor.
d. Students may not leave the Clinical Education Center without notifying the Clinical Instructor or the Clinical Instructor's designee first.
e. Falsification of time records is considered cheating and is a breach of university and professional ethics and will merit appropriate disciplinary action up to and including dismissal from the program for repeated violations.
f. Students may attend clinical education for only the number of days (semester hour credits) for which they are registered except for time voluntarily requested by the student AND pre-approved by the Program Director for specific learning objectives. No clinical grading requirements may be accumulated during clinical education time attended under this policy (e.g., competencies, proficiencies, etc. cannot be achieved during excess voluntary clinical education time.)

4. ABSENCE FROM CLINICAL EDUCATION

Students must call in advance for all absences and either leave voice mail or obtain the name of the person taking the message. Email to both the clinical instructor and program director must also be sent documenting who the student spoke to at the clinical site. This information must be noted on the Clinical Education Attendance Record (See Forms in Appendix). The Clinical Preceptor must also be notified within 1 hour of the scheduled starting time through phone call or email (if available).

All absence from clinical education is classified as either excused, unexcused, or tardy. **Exception**: If the university is closed for inclement weather, students will not be expected to make this time up and the missed time will not be counted as either an excused or unexcused absence.

Because attending clinical education is a privilege, students may only make up clinical education time as stated in the excused, unexcused, or tardy policies below. Students are not otherwise permitted in clinical education.

All clinical education absence and make up time is defined in half day (4 hour increments).

Clinical experience hours must not exceed 10 hours per day and the total didactic and clinical involvement to not more than 40 hours/week at any time.

a. Clinical grading deadlines will be extended only for cancellation of clinical education, funerals, jury duty, military duty, and excused leave of absence for extenuating circumstances as approved by program faculty. The definitions below will be applied to these types of absences.

b. Excused absences, as listed below, do not have to be made up but may be if the student desires additional time for competency credit completions.

(1) Holidays are granted to students according to the current Grand Valley State University academic calendar available at

https://www.gvsu.edu/registrar/academiccalendar.htm

(2) Upon approval by the Program Educational Coordinator in advance, the following excused absences may be granted:

a) Funeral leave
   i. Up to 2 days in case of death in the immediate family.
   ii. Immediate family is defined as spouse, child, parent, grandparent, brother or sister, brother or sister-in-law, mother or father-in-law, nephew or niece.

b) Jury duty

c) Military duty

(3) Attendance at professional meetings or GVSU student activities when approved in advance by the Program Educational Coordinator.

(4) Excused leave of absence or banking of hours may be granted to individuals in extenuating circumstances as determined by the Program Educational Coordinator and Program director.

c. Unexcused absences are permitted only as listed below.

(1) Two days per term are permitted as unexcused absence without penalty and may be made up.

(2) Illness is considered an unexcused absence unless extenuating circumstances are applied. Do not expect approval of extenuating circumstances for illness unless you have an extended, physician-documented absence. Normal illness,

physician appointments, etc. should be handled within this provision as an unexcused absence.

(3) Four unexcused 4 hour, half day absences per clinical course may be made up with clinical competency privileges by arrangement in advance with the Clinical Preceptor. Use of this policy requires a minimum 4 hour period.

(4) Excessive or unwarranted unexcused absences will result in corrective action. Determination of excessive or unwarranted unexcused absences will be by the Program Educational Coordinator.

(5) Unexcused absences must be in 4 hour, half day increments. (A full day counts as two half day increments).

d. Tardiness

(1) Tardiness is defined as arriving more than 10 minutes late or leaving more than 10 minutes early. Clinical Preceptors may define the exact place where arrival or departure is permitted.

(2) Tardiness of one hour or more (late arrival or early departure) is considered an unexcused absence.

(3) Students are required to notify the clinical education center Clinical Preceptor of tardiness the day it occurs. This notification may be made verbally to the Clinical Preceptor. If the student does not see the Clinical Preceptor that day, notification must be left in writing.

(4) Additional corrective action will be taken for repeated tardiness as outlined below. The basic actions are as follows:

- 2nd tardy per semester – documented verbal warning from Clinical Preceptor
- 3rd tardy per semester – initial written warning and counseling conference with Educational coordinator
- 4th tardy per semester – written warning, counseling conference with Educational coordinator, and written behavior modification plan submitted by student to Educational Coordinator required
- 5th tardy per semester - failure of course with letter grade of "F".

(5) Students suspended for any reason are not permitted to make up any clinical time.

e. Strike or Other Unanticipated Limitations to Clinical Attendance

(1) Strikes and other unanticipated limitations to clinical attendance (such as tornadoes, snow storms, or other acts of God, etc.) obviously cannot be anticipated by the university.

(2) The university will attempt to place all students affected by a strike or other unanticipated limitation in clinical attendance at another appropriately recognized clinical education center as reasonable.

(3) Students will not be allowed to reduce the total clinical education time due to a strike or other unanticipated limitation to clinical attendance. **It is possible that students may need to make arrangements to attend clinical education during additional terms due to a strike and other unanticipated limitations (Tornado, snow storm, etc.) to clinical attendance.** All students are expected to achieve the same level of attendance in all clinical courses therefore this will not count as excused or unexcused absence.

(4) If the university is closed for inclement weather, students will not be expected to make this time up.

5. MAKE UP TIME

a. Make-up time is permitted only as defined above.
b. Make-up clinical time dates must be coordinated with the Clinical Preceptor
c. Make-up time may not begin without approval of the Clinical Preceptor and Medical Dosimetry Program Educational Coordinator.

6. VACATIONS AND OTHER ABSENCES

Vacations and other absences during clinical courses are strongly discouraged and are not eligible for competency privileges.

I. CLINICAL EDUCATION RULES

The overall guideline for all clinical education rules is that students are expected to conduct themselves in a professional manner at all times during clinical education. These rules simply indicate the exact elements of professional behavior and conduct for GVSU students.

1. HEALTH COMPLIANCE

University policy, state and federal statutory regulations, and accreditation standards for academic programs and affiliated organizations, require students enrolled in health/health related programs comply with certain health, safety, and legal requirements. GVSU is contractually required to ensure all students achieve full compliance **prior** to participation in experiential learning and until program completion.

Health compliance requirements are to be completed by the program's identified due date. Failure to complete these items on time may impact a student's ability to participate in experiential learning. No student will be allowed to attend clinical education until all health compliance requirements are met.

GVSU utilizes CastleBranch, a third party vendor, for monitoring health compliance, as well as completion of background checks and drug screens, when required. Blackboard is used for training modules. The Health Compliance Officer provides students with directions for creating a CastleBranch account and submitting documents, as well as with instructions to access the training modules.

Requirements:
Students are required to submit documentation of health compliance items prior to the due date communicated by the Health Compliance Officer. A full description of each requirement can be found in the GVSU Health Compliance Policy at https://www.gvsu.edu/healthcompliance/

It is recommended that students begin submitting health compliance documents as soon as possible as some requirements may take several weeks, or months, to complete.

Requirements may include, but are not limited to:

- Physical exam (required for most programs)
- Immunizations and/or titers (bloodwork) to check for immunity
- Tuberculosis screening
- Influenza vaccine (annually)
- Cardiopulmonary Resuscitation (CPR)
- Training Modules-completed online annually via Blackboard

Criminal Background Checks, Drug Tests and Fingerprinting:

- Students are notified by the Health Compliance Officer when criminal background checks, drug tests and/or fingerprinting are required.
    - Criminal Background Check and Drug Tests must be completed through CastleBranch.
    - Criminal Background Check includes: Seven Year Residency History, County Criminal Records, Statewide Criminal Records, Nationwide Sex Offender Index, Nationwide Healthcare Fraud and Abuse Scan.
    - Drug tests are 10-panel including: Amphetamines, Barbiturates, Benzodiazepines, Cocaine Metabolites, Marijuana Metabolites, Methadone, Methaqualone, Opiates, Phencyclidine and Propoxyphene.
    - Some sites require background checks and/or drug tests within a specific timeframe (i.e. 30 days prior to placement date), which may require students to undergo an additional background check and/or drug test.
    - Fingerprinting must be completed through the Grand Rapids Community College (GRCC) Police Department. Students outside of west Michigan may contact the Health Compliance Officer for other approved locations.

Results of Criminal Background Checks and Fingerprinting are reviewed in accordance with the state regulations on mandatory exclusions. Conviction of a crime on the mandatory exclusion list, or presence of a substance on the drug test, may impact a student's ability to complete experiential learning as required for program progression.

If there is illegal activity in the background check/finger printing, or if there is evidence of one or more prohibited substances in the drug test, the clinical sites have the right to refuse a student's placement, a factor which may negatively impact a student's ability to progress in the Medical Dosimetry Program. Students are required to notify the Program Director if any new illegal activity arises during the course of the program. If the student feels the results are in error, they have the right to appeal to the program director and clinical staff representative.

Health Compliance Costs:

Students are responsible for the cost of obtaining/maintaining health compliance. Health care costs vary widely, with estimates ranging from $250 to $550 depending upon the type of services required and location received. Some services may be covered by health insurance. Students with limited, or no insurance coverage, may find the GVSU Family Health Center or local health department cost effective options.

2. CLINICAL CONDUCT
   In addition to being expected to follow the rules and regulations established by the clinical education center, students are also expected to practice professional ethics, the American Hospital Association's Patient's Bill of Rights, and to:

   a. Consider all aspects of the Medical Dosimetry program in the Clinical Education Centers and all information concerning patients to be totally confidential. THESE ASPECTS ARE NOT TO BE DISCUSSED WITH OTHER STUDENTS, FRIENDS OR FAMILY OUTSIDE OF THE CLINICAL EDUCATION CENTERS. Violation of this professional trust will result in charges of misconduct from the university and/or may also result in legal action from victims of your actions. There are severe penalties for violating patient's rights to confidentiality. Students are responsible for their own actions under these laws (which includes all HIPAA regulations). Students are strongly advised to adhere to generic descriptions of all patients, health care professionals, and other medical staff when completing assignments involving clinical experiences. Never use the name or a unique description of a patient or professional that is so specific it would violate their confidentiality rights.

   b. Remember that students are not permitted in hospitals or other health care institutions during non-clinical education hours unless on specific business not related to university clinical education.

c. Avoid personal telephone calls on institutional phones except in the case of an emergency. Personal phones are to be used for all non-institutional business. **Additionally, no texting, tweeting or other use of social media is allowed during clinical hours.** Remember that many health care institutions have specific policies about cell phones and that you are responsible to make sure your phone is turned off in those areas.

   d. No smoking, alcohol, or non-prescription stimulant or depressant substance use is permitted during clinical education. The use of prescribed substances may also be restricted during clinical education courses. Check with your Clinical Preceptor before attending any clinical assignments under the influence of anything. Clinical education center policies and procedures apply to these rules in addition to all university policies and procedures.

   e. Remember that your clinical education experience is designed to encourage responsibility in a professional and an ethical environment and this includes behavior such as cooperation, accepting constructive criticism, and dependability.

   f. Patterns of behavior indicating an attitude of irresponsibility to self, patient, profession, university, or clinical site may result in actions directed at dismissing a student from the program.

3. AMERICAN ASSOCIATION OF MEDICAL DOSIMETRISTS CODE OF ETHICS (www.medicaldosimetry.org)

The following principles represent goals to which all Medical Dosimetrists should aspire:

i. Medical Dosimetrists are obliged to uphold the honor and dignity of their profession by exhibiting sound moral character and the highest degree of competence in their work.

ii. Medical Dosimetrists must be honest and forthright at all times in their dealings with employers, clients, and patients. Remuneration expected should be consistent with the type and quality of service provided.

iii. Patient privacy must be respected and confidentiality of patient information must be maintained.

iv. Medical Dosimetrists should strive continually to improve their knowledge and skills and participate in programs that lead to the improvement of the Medical Dosimetry profession and the health of the community.

v. Collegiality, openness, and mutual respect shall characterize the relationships among Medical Dosimetrists.

vi. Medical Dosimetrists should conduct their affairs in a manner consistent with standards of excellence.

4. THE PATIENT'S BILL OF RIGHTS

This Patient's Bill of Rights was adopted by the American Hospital Association in 1992. It is designed to inform patients of their rights while in a hospital. As a healthcare professional, you are obligated to respect these rights.

These rights can be exercised on the patient's behalf by a designated surrogate or proxy decision maker if the patient lacks decision-making capacity, is legally incompetent, or is a minor.

a. The patient has the right to considerate and respectful care.

b. The patient has the right to and is encouraged to obtain from physicians and other direct caregivers relevant, current, and understandable information concerning diagnosis, treatment, and prognosis. Except in emergencies when the patient lacks decision-making capacity and the need for treatment is urgent, the patient is entitled to the opportunity to discuss and request information related to the specific procedures and/or treatments, the risks involved, the possible length of recuperation, and the medically reasonable alternatives and their accompanying risks and benefits. Patients have the right to know the identity of physicians, nurses, and others involved in their care, as well as when those involved are students, residents, or other trainees. The patient also has the right to know the immediate and long-term financial implications of treatment choices, insofar as they are known.

c. The patient has the right to make decisions about the plan of care prior to and during the course of treatment and to refuse a recommended treatment or plan of care to the extent permitted by law and hospital policy and to be informed of the medical consequences of this action. In case of such refusal, the patient is entitled to other appropriate care and services that the hospital provides or transfer to another hospital. The hospital should notify patients of any policy that might affect patient choice within the institution.

d. The patient has the right to have an advance directive (such as a living will, health care proxy, or durable power of attorney for health care) concerning treatment or designating a surrogate decision maker with the expectation that the hospital will honor the intent of that directive to the extent permitted by law and hospital policy. Health care institutions must advise patients of their rights under state law and hospital policy to make informed medical choices, ask if the patient has an advance directive, and include that information in patient records. The patient has the right to timely information about hospital policy that may limit its ability to implement fully a legally valid advance directive.

e. The patient has the right to every consideration of privacy. Case discussion, consultation, examination, and treatment should be conducted so as to protect each patient's privacy.

f. The patient has the right to expect that all communications and records pertaining to his/her care will be treated as confidential by the hospital, except in cases such as suspected abuse and public health hazards when reporting is permitted or required by law. The patient has the right to expect that the hospital will emphasize the confidentiality of this information when it releases it to any other parties entitled to review information in these records.

g. The patient has the right to review the records pertaining to his/her medical care and to have the information explained or interpreted as necessary, except when restricted by law.

h. The patient has the right to expect that, within its capacity and policies, a hospital will make reasonable response to the request of a patient for appropriate and medically indicated care and services. The hospital must provide evaluation, service, and/or referral as indicated by the urgency of the case. When medically appropriate and legally permissible, or when a patient has so requested, a patient may be transferred to another facility. The institution to which the patient is to be transferred must first have accepted the patient for transfer. The patient must also have the benefit of complete information and explanation concerning the need for, risks, benefits, and alternatives to such a transfer.

i. The patient has the right to ask and be informed of the existence of business relationships among the hospital, educational institutions, other health care providers, or payers that may influence the patient's treatment and care.

j. The patient has the right to consent to or decline to participate in proposed research studies or human experimentation affecting care and treatment or requiring direct patient involvement, and to have those studies fully explained prior to consent. A patient who declines to participate in research or experimentation is entitled to the most effective care that the hospital can otherwise provide.

k. The patient has the right to expect reasonable continuity of care when appropriate and to be informed by physicians and other caregivers of available and realistic patient care options when hospital care is no longer appropriate.

l. The patient has the right to be informed of hospital policies and practices that relate to patient care, treatment, and responsibilities.

m. The patient has the right to be informed of available resources for resolving disputes, grievances, and conflicts, such as ethics committees, patient representatives, or other mechanisms available in the institution. The patient has the right to be informed of the hospital's charges for services and available payment methods.

The collaborative nature of health care requires that patients, or their families/surrogates, participate in their care. The effectiveness of care and patient satisfaction with the course of treatment depend, in part, on the patient fulfilling certain responsibilities. Patients are responsible for providing information about past illnesses, hospitalizations, medications, and other matters related to health status. To participate effectively in decision making, patients must be encouraged to take responsibility for requesting additional information or clarification about their health status or treatment when they do not fully understand information and instructions. Patients are also responsible for ensuring that the health care institution has a copy of their written advance directive if they have one. Patients are responsible for informing their physicians and other caregivers if they anticipate problems in following prescribed treatment.

Patients should also be aware of the hospital's obligation to be reasonably efficient and equitable in providing care to other patients and the community. The hospital's rules and regulations are designed to help the hospital meet this obligation. Patients and their families are responsible for making reasonable accommodations to the needs of the hospital, other patients, medical staff, and hospital employees. Patients are responsible for providing necessary information for insurance claims and for working with the hospital to make payment arrangements, when necessary.

A person's health depends on much more than health care services. Patients are responsible for recognizing the impact of their life-style on their personal health.

5. DRESS CODE

a. A lab coat over professional business clothes are to be worn at all times when engaged in clinical education.

b. Clothes worn under the lab coat must adhere to usual, acceptable, reasonable and professional dress as defined by the Clinical Preceptor. Students not adhering to institutional standards for dress may be removed from clinical education until their dress meets these requirements. Clinical education time lost as a result of dress code violations is considered an unexcused absence.

c. All non-professional pins, badges, and other symbols are prohibited during clinical education. This includes holiday, spirit, political, and any other non-professional items. Accepted cancer organization symbols (i.e., the pink breast cancer ribbon) are considered professional and are therefore exempted from this policy.

6. GROOMING RULES

a. Clean and pressed professional clothing and lab coat should be worn every day.

b. Cosmetics and perfume/ cologne should be worn in moderation.

c. Hair should be worn professionally. Facial hair should be kept neat.

d. Loud or flashy jewelry should not be worn with the uniform at any time, and jewelry should be in moderation at all times.

e. Inappropriate undergarments are prohibited.

f. As students engaged in clinical education may be in close proximity with patients, acceptable personal hygiene must be maintained at all times.

g. Students may be required to remove rings, other jewelry, or other items before being allowed into specific situations (i.e. surgery).

h. Fingernails should be kept trimmed and neat with no artificial nails.

7. NAME BADGES

a. Each student is required to wear an approved name badge stating first and last name and the word "Student" along with the Grand Valley State University logo. Purchasing information is provided by the Educational Coordinator. Students must purchase name badges from the vendor specified by the university.

b. GVSU name badges are not to be worn outside of assigned clinical education for the university.

8. INCIDENTS

It is very important that hospitals have a record of all incidents (accident or injury) in case of litigation. The prescribed format must be followed according to hospital policies for reporting incidents:

a. An institutional incident report and an appropriate university report must be filled out immediately.

b. A copy of the institutional incident report must be requested to be sent to the university

c. An appropriate university report must be forwarded to the Educational Coordinator immediately.

d. Students will be subject to corrective action for failure to follow this procedure.

e. Significant RMD incident form must be completed by a designated clinical instructor and is located in the back of this handbook.

9. PATIENTS WITH INFECTIOUS DISEASES

a. Students are required to follow the exact procedures established by our Clinical Education Centers (standard precautions, blood borne pathogen precautions, etc.) in caring for these patients.

b. Students are required to report any contact with communicable disease in accordance with the policies of the Clinical Education Center in which the contact occurs.

10. STUDENTS WITH INFECTIOUS DISEASES

Students with an infectious disease may not attend clinical education. They should inform both the Clinical Preceptor immediately upon diagnosis. They may not return to clinical education until a doctor's release has been presented to the Clinical Preceptor and copied to the Educational Coordinator. Absence due to infectious disease is considered unexcused until extenuating circumstances are

granted by the Clinical Preceptor and Educational Coordinator.

11. HEALTH SERVICES

a. Emergency medical services will be provided by the Clinical Education Centers when needed but students are responsible for payment for all services rendered by the institution.

b. All students must have a current GVSU physical examination form on record with the university prior to beginning clinical education.

12. NOTICES

Students are responsible for all information posted to class email, class list servs, or announced in class.

INSURANCE

MALPRACTICE

All students must be covered under a malpractice insurance policy prior to beginning clinical education.

Grand Valley State University provides professional liability insurance for students while engaged in student clinical learning activities. The coverage ranges up to $3,000,000.00 depending on the incident.

Student malpractice insurance is available privately should the student desire additional coverage.

The university malpractice insurance plan does not cover a student who may work in institutions outside of scheduled clinical education time.

HEALTH

Health Insurance

While encouraged, GVSU does not require students to have health insurance. Some sites may require proof of insurance as a condition of placement at the site. Lack of insurance coverage could impact a student's ability to participate in experiential learning at sites with this requirement.

Students are not covered by a site's workman's compensation coverage during their experiential learning. All health care costs if exposed to a medical condition that requires assessment, monitoring or treatment, or if injured while working with a patient/client, are the student's responsibility.

For information about optional health plans students may purchase please use this link https://www.gvsu.edu/studentinsurance/health-insurance-2.htm

Neither the Clinical Education Centers or Grand Valley State University assumes responsibility for medical expenses that may be charged students for incidents occurring during clinical education (i.e., puncture wounds from contaminated needles, contagious diseases, etc.).

The student must inform the Health Compliance Office immediately should coverage be discontinued for any reason.

If the student does not have comprehensive personal health /accident insurance, they may be prevented from participating in clinical training.

STUDENT CORRECTIVE ACTION

To assure Clinical Education Centers that students do not compromise their high standards of health care, corrective actions will be enforced according to the GVSU Code and Catalog.

DISMISSAL FROM CLINICAL EDUCATION

A student may be dismissed from clinical education immediately (with recommendations for advising or charges of misconduct forwarded to the Clinical Preceptor or Program Faculty later) by any clinical education center authority in accordance with the academic review policy (https://www.gvsu.edu/sasc/academic-standing-63.htm) for any of the following reasons:

1. Insubordination to institutional or university personnel.

2. Failure to comply with the policies, rules and regulations of the institution or university.

3. Unprofessional conduct.

4. Unauthorized schedule changes.

The time missed due to dismissal from clinical education for misconduct cannot be made up and may result in a fail for the affected course. Dismissal from clinical education may result in dismissal from the Dosimetry program. Students may not return to clinical education until they have received permission from the Program Educational Coordinator or Director and will depend upon the details of the dismissal.

STUDENT GRIEVANCE PROCEDURE

Students who are unsatisfied with conditions or procedures during clinical education should first use the following chain-of- command to seek redress:

The person who caused the problem

The healthcare practitioner who is directly supervising the student

The Clinical Education Center Clinical Preceptor

The university Medical Dosimetry Educational Coordinator

The university Medical Dosimetry Graduate Program Director

The Chairperson of the Diagnostic and Treatment Sciences Department

If necessary, the timeline for program officials' response to grievance will be as follows:

The clinical preceptor and/or student should inform the program's educational coordinator of unresolved incidences related to students within 2 days of the incident. The program educational coordinator has 8 working days from being informed to gather information and respond to clinical complaints from students. If the grievance is not resolved to the satisfaction of the educational coordinator and/or student, the program director will be informed within 15 working days of the incident. The program director will issue a written decision regarding the incident within 5 working days of being informed. If the decision is not acceptable to the student, the department chairman will be informed within 5 working days of the program director's written decision. The chairman will make a decision that is final for the department unless the student wishes to submit a formal grievance with the university for resolution at which time the grievance will be handled following university policy.

For program complaints that cannot be satisfactorily handled by the university and/or are related to program nonadherence to JRCERT accreditation standards, anyone may contact JRCERT at 20 N. Wacker Dr. Suite 2850, Chicago, IL 60606-3182, phone 312-704-5300 or www.jrcert.org. The program director prefers that the grievant contact the program director prior to submission of a complaint to the JRCERT to determine if it is a noncompliance issue. Additionally, the program director will assist in the complaint submission process and work collaboratively with the grievant, university, and JRCERT

representatives to resolve the issue satisfactorily.

For instances where the student cannot discuss the problem with the person who caused it or when the problem is with a person who is defined as #2-4 above, the student may go to the next person on the list. However, it is considered professional and polite to inform the person in advance that you are going to proceed with a complaint. You do not need to ask their permission to do this, but it is recommended that you inform them of your intentions in advance. In cases that might be considered harassment we do not recommend informing the person causing the problem.

Students who decide to file grievances must follow the guidelines and procedures of the GVSU Code and Catalog available at

https://www.gvsu.edu/studentcode/

This provides review up through the Office of the Provost.

RADIATION PROTECTION

PROGRAM POLICY:

Student Radiation Safety:

Students new to clinical internship must receive orientation to radiation safety practices and requirements by the Radiation Safety Officer.

A radiation monitoring badge must be worn by the student at all times while in the department.

Students assisting in the simulator and treatment units must never be in the room during exposures or treatments.

Students working in brachytherapy must remember and put to use techniques of time, distance, and shielding.

Radiation exposure levels will be monitored by the university RSO. If a student's radiation exposure reading exceeds 150 mrem on a single report, the program director must be informed. The RSO and program director will investigate the reason for the reading and determine an action plan within 10 business days to ensure that the student follows ALARA principles.

If the student exceeds 300 mrem in one quarter, the student will be removed from clinical education for the next quarter.

Radiation Protection Rules:

Students are expected to conform to the Michigan Department of Environmental Quality Ionizing Radiation Rules, the Radiation Monitoring and Reporting rules of the Michigan Radiation Environmental Monitoring Program, the Michigan Radioactive Material and Standards Unit, and all other state standards, regulations, recommendations, and guidelines.
See http://www.michigan.gov/lara/0,4601,7-154-11407_35791---,00.html

All policies and procedures included in the current edition of the Student Handbook/s for the radiologic and imaging sciences program apply, as do the GVSU Radiation Safety Manual, and the State of Michigan Ionizing Radiation Rules.

Students in locations outside of the state of Michigan must also conform to the rules and regulations of the state in which the clinical experience is located.

PERSONNEL MONITORING

All students in the program will wear a personnel monitoring device provided by the university at the collar at all times when using ionizing radiation during clinical education and energized laboratory procedures. Students not having a badge may be dismissed for the day at the discretion of the faculty member or clinical instructor responsible for the instruction or clinical experience.

Radiation exposure limits philosophy is to follow ALARA (As Low As Reasonably Achievable) guidelines as established by the National Council on Radiation Protection and Measurements (NCRP), the regulations of the Nuclear Regulatory Commission (NRC), United States Standards for Protection Against Radiation 10 CFR Part 20, and the regulations of the State of Michigan. In addition, the following limits are set by the Grand Valley State University, College of Health Professions:

During fluoroscopy personal monitoring devices will be worn outside the lead apron.

PERSONNEL MONITORING DEVICES ARE NOT TO BE LEFT IN HOT OR WET PLACES (i.e., dashboard of a car, pocket of a lab coat being washed, etc.)

Personnel monitoring devices are to be worn only during clinical education or during college labs. Students may not wear university personnel monitoring devices during outside employment for any reason.

Personnel monitoring devices are to be changed quarterly.

Sickness or excused absences do not relieve students of responsibility for changing personal monitoring devices.

Loss or accidental exposure of a personal monitoring device shall be reported to the Radiation Safety Officer immediately. A telephone message shall be left the day of the incident with a written report to follow in person or by mail as soon as possible.

Students will be assessed for all loss of personnel monitoring device charges.

Personnel monitoring reports will be made available to employers upon receipt of written release from the student/alumnus.

Personnel monitoring reports will be posted on the bulletin board in Lab CHS 411 and on the clinical course blackboard page for students enrolled in distance education

programs. It is the expectation of the program that students will review their report quarterly.

PREGNANCY

The student will have several options:
Continue in the program as scheduled.
Take a leave of absence during her pregnancy.

IMPORTANT NOTE: The first 3 months (1st trimester) of a pregnancy is the most critical time as far as exposure to ionizing radiation in concerned.

Any student who believes she may be pregnant may declare a pregnancy. Students also have the right to un-declare pregnancy at any time. All pregnancy declarations and un-declarations must be in writing to the radiation safety officer, must be dated and signed legibly, and shall be submitted to the program director's office.

The student's total accumulated exposure during her pregnancy shall not exceed 0.5 rem/5 mSv (Not to exceed 50 mrem/0.5 mSv for the gestational period). In the event that this exposure limit is exceeded, the student shall be advised to withdraw from all clinical education for the remainder of the pregnancy. It is the student's responsibility to continually check the personnel monitoring device reports. The student, the Radiation Safety Officer and/or the Program Director shall initial the personnel monitoring device reports monthly to verify that they have checked the total accumulated exposure.

If the student decides to continue her clinical education she will be expected to participate in all clinical assignments and/or duties.

A student will be allowed to make up any clinical time missed due to pregnancy or immediate post-partum care. See absence from clinical education policy for more details.

Made up time will be structured to compensate for loss of clinical experiences during pregnancy.

CLINICAL EVALUATION SYSTEM

Students must be competent in both the art and science of Medical Dosimetry. The Grand Valley State University Medical Dosimetry Program will evaluate the student's skill through the Clinical Evaluation Program.

Students must complete all competencies and observations prior to graduation and are strongly encouraged to complete as many proficiencies as possible.

All competencies are based on information taught during university courses.

The student must successfully complete 21 mandatory clinical competencies and 5 optional competencies during clinical experience.

Additional clinical activities are included in the clinical grade. These activities include, but are not limited to case studies, tumor board, chart rounds, proficiencies, webinars, assignments and clinical quizzes.

Clinical competencies are achieved by performing planning on patient data for treatment delivery during clinical education.

The observation and evaluation of the student's procedural skills is done by certified medical dosimetrists who are clinical preceptors, staff medical dosimetrists, or university faculty.

Students are responsible for arranging for an evaluator to carry out the evaluation. This is normally done by asking a qualified evaluator in advance of the procedure. Students should not expect to be evaluated on a procedure until they have demonstrated their ability to perform the procedure to an acceptable level.

Student competencies may be rejected by university faculty if deemed necessary due to failure of evaluators to note errors.

Students failing a clinical course (grade of B- or less) do not accumulate clinical competencies or hours from that course toward graduation clinical requirements.

Medical dosimetrists must also have the ability to care for patients and interact with healthcare team members in a professional and ethical manner. To assist you in developing these skills the Grand Valley State University Diagnostic and Treatment Sciences Programs conduct a Clinical Advising Program in conjunction with clinical education. This program is designed to assess each student’s personal progress toward achieving objectives consistent with professional clinical practice. This includes behavioral affective characteristics. Each student is required to set personal goals/objectives for each semester that are approved by the Program Faculty and Clinical Preceptor.

Students are required to continue to make progress toward achieving personal goals as established by the clinical advising program each term.

Clinical grades are affected by advising results only when it is determined that the student has failed to make continued and regular progress toward achieving personal goals.

Students may be subject to corrective actions due to failure to comply with advising suggestions. This includes failure to achieve objectives for a clinical education course, which can cause a failing grade to be issued.

On Clinical Advising Program Forms, students must make a minimum score of 15. If the student makes a total score of less than 15 on any advising form or a "Poor" in any section, the student will require remediation counseling and corrective action as determined by program faculty. Continued score of less than 15 or Poor in any evaluation section by a student will result in a Fail for the clinical course and dismissal from the program.

Course grades are assigned as follows per university policy.

Passing Grades	Failing Grades
100.0 - 94.0% A	79.9 - 78.0% C+
93.9 - 90.0% A-	77.9 - 74.0% C
89.9 - 88.0% B+	73.9 - 70.0% C-
87.9 - 84.0% B	69.9 - 68.0% D+
83.9 - 80.0% B-	67.9 - 60.0% D
	59.9 - 0.0% F

Grades are taken to one decimal point and are not rounded up or down.

CLINICAL GRADE SCALE

The student is required to complete a specified minimum number of mandatory clinical competencies in clinical courses as designated by program faculty. A total of 21 mandatory competencies are required during the program and a minimum of 5 optional competencies are required. Evaluators are not required to complete a Mandatory Evaluation Form for optional competencies but must sign and date that the optional competency was performed. The clinical grade scale is the same as didactic courses.

While there is no specification regarding the order of competency mastery, the specific number of mandatory competencies, as outlined in the course syllabi, must be completed in to be eligible to receive credit for clinical courses.

For the part-time option, program faculty will determine the appropriate number of competencies for full credit in each clinical course with 21 mandatory and 5 optional competencies required before graduation from the program.

RUBRIC FOR ASSESSMENT OF CLINICAL ADVISING/PROGRESS (AFFECTIVE)

This system is designed to verify student affective competence and serve as a method to achieve positive changes in professional behaviors. Student engagement will be evaluated through a clinical advising system based on evaluations from medical dosimetrists who have provided direct clinical instruction for the student and self-evaluation by the student using the same criteria. Students will set individual goals by comparing behavioral patterns identified by these evaluations during a private clinical advising session with the university educational coordinator and /or program director and/or clinical preceptor. Satisfactory progress in meeting these goals forms a critical element in the student's engagement in clinical learning while failure to make such progress is grounds for course failure, regardless of the grade achieved through competency or proficiency evaluation. Student engagement refers to the level of involvement in activities during clinical education as well as professional behaviors exhibited as part of the student's experience as a member of the Medical Dosimetry program. It represents more than the ability to achieve cognitive and psychomotor objectives and is based on affective goals. The following criteria represent expectations for engagement toward achieving credit for clinical courses and form the affective grading rubric (See Appendix of this handbook for evaluation forms).

Poor-Zero (0) points indicating does not meet acceptable standard
Fair-One (1) points indicating meets standard but needs improvement
Good-Two (2) points indicating meets acceptable standard
Excellent-Three (3) points indicating exceeds acceptable standard

Outstanding Level of Engagement (30 points) is achieved by displaying a majority of the following characteristics:

Initiative and enthusiasm for the learning experience as evidenced by voluntarily taking a leadership role, encouraging participation by others, sharing workload, willingness to go beyond minimum requirements, actively seeking the concerns and opinions of others, non-verbal expressions consistent with this attitude, exhibiting self-direction to seek out pertinent information beyond that offered as part of the course experiences and freely sharing this knowledge and expertise.

Clear achievement in the development of characteristics essential to a professional life including legal, ethical, and social responsibilities.

Superior achievement in the individual goals of the clinical advising system addressing integrity, empathy, attitude, self- motivation, personal presentation, self-confidence, communication abilities, time management, dependability and reliability, teamwork and diplomacy, respect, patient advocacy, delivery of patient care, application of knowledge, and adaptability.

Above Average Level of Engagement (25-29 points) is achieved by displaying a majority

of the following characteristics:
Active participation in the learning experience as evidenced by active listening and participation in clinical activities, willingness to go beyond minimum requirements, respect for the concerns and opinions of others, non-verbal expressions that project this respect, taking responsibility for completing a full share of group workload and tasks, assisting others as necessary, and freely sharing knowledge and expertise as acquired.

Above average achievement in the development of characteristics essential to a professional life including legal, ethical, and social responsibilities.

Advanced achievement in the individual goals of the clinical advising system addressing integrity, empathy, attitude, self- motivation, personal presentation, self-confidence, communication abilities, time management, dependability and reliability, teamwork and diplomacy, respect, patient advocacy, delivery of patient care, application of knowledge, and adaptability.

Average Level of Engagement (20-24 points) is achieved by displaying a majority of the following characteristics:

Regular attendance and engagement in the learning experiences, participation with others, sharing workload, achievement of minimum requirements, respectful attention to the concerns and opinions of others, non-verbal expressions that project this respect, appropriate responses to questions when asked.

Average level of achievement in the development of characteristics essential to a professional life including legal, ethical, and social responsibilities.

Effectively meeting individual goals of the clinical advising system addressing integrity, empathy, attitude, self-motivation, personal presentation, self-confidence, communication abilities, time management, dependability and reliability, teamwork and diplomacy, respect, patient advocacy, delivery of patient care, application of knowledge, and adaptability.

Satisfactory Level of Engagement (15-19 points) is achieved by displaying a majority of the following characteristics:

Regular attendance (more than 2 unexcused absences without extenuating circumstances granted) to the learning experiences, participation with others, sharing workload, achievement of minimum requirements, respectful attention to the concerns and opinions of others, non-verbal expressions that project this respect, appropriate responses to questions when asked..

Satisfactory achievement in the development of characteristics essential to a professional life including legal, ethical, and social responsibilities.

Some progress in meeting the individual goals of the clinical advising system addressing

integrity, empathy, attitude, self- motivation, personal presentation, self-confidence, communication abilities, time management, dependability and reliability, teamwork and diplomacy, respect, patient advocacy, delivery of patient care, application of knowledge, and adaptability.

Unsatisfactory Level of Engagement (0-14 points or Poor on any evaluation criteria) is achieved by displaying any of the following characteristics:

Failure to attend adequate learning experiences, poor participation with others, failure to share workload, failure to achieve minimum requirements, lack of attention to the concerns and opinions of others, non-verbal expressions that project this inattention or disrespect, inappropriate responses to questions when asked.

Lack of achievement in the development of characteristics essential to a professional life including legal, ethical, and social responsibilities.

Failure to achieve satisfactory progress in the individual goals of the clinical advising system addressing integrity, empathy, attitude, self-motivation, personal presentation, self-confidence, communication abilities, time management, dependability and reliability, teamwork and diplomacy, respect, patient advocacy, delivery of patient care, application of knowledge, and adaptability.

Please see the form in the Forms section of the Appendix of the Student Handbook.

DESCRIPTION OF CLINICAL ASSIGNMENTS AND ASSESSMENT

Each clinical education course will provide the student with an adequate number of scheduled contact hours of clinical education at a clinical center under the direction of a Certified Medical Dosimetrist as part of a total of 1168 scheduled clinical education hours. Students will be required to demonstrate satisfactory clinical competence through the JRCERT-mandated competency-based clinical evaluation system. This evaluation system will include the following clinical procedures:

Mandatory Competencies (must complete all):

Image fusion for planning		
Irregular Field Calc Plan		
Pelvis – 4 field		
Abdomen – 3 or 4 field		
Para-aortic or Nodal Irradiation		
Pelvis - 3 field with wedges		
IMRT or Arc Plan (VMAT/Tomotherapy		
Intact Breast Tangentials		
Chest Wall (Tangents or electrons)		
Thoracic (Initial & Offcord)		
Limb Sarcoma		
Lymphoma		
Prostate - IMRT/Conformal		
Palliative		
Parotid (wedge pair or mixed energy)		
H&N – IMRT/Conformal (Primary and Off Cord plans)		
H&N – IMRT/Conformal (Boost and SC plans)		
Electron Beam Plan		
Brain (Conformal/Fusion)		
Intracavitary Implant Plan		
Interstitial Implant Plan		

Optional (must complete a minimum of 5):

Observe High Dose Rate (Plan and Tx)		
Observe SRS (Plan and Tx)		
Observe SBRT (Plan and Tx)		
Observe Respiratory Motion Mgmt (Plan and Tx)		
Participate in Retreatment Planning		
PA Axillary Boost Plan or Calculations		
Clinical Dosimetrist Assignment *		
Clinical Dosimetrist Assignment *		
Observe Brachytherapy OR Insertion		
Observe Brachytherapy Source Preparation		
Participate in Total Body Irradiation Planning		
Participate in Cranio-Spinal Planning		
Observe Patient Specific QA		
Observe QA of equipment: Simulator		
Observe QA of equipment: Other (HDR, etc.)		
Observe QA of equipment: Linear Accelerator		

*****could include special dosimetry measurements

Below are the components of clinical competency evaluation that the clinical medical dosimetrist must utilize for evaluation of student performance.

GRAND VALLEY STATE UNIVERSITY

Medical Dosimetry Program
Phone 616-331-5753, Fax 616-331-5632
College of Health Professions
Center for Health Sciences
301 Michigan Street, Suite 410
Grand Rapids, Michigan 49503

MANDATORY COMPETENCY EVALUATION FORM

Student Name _____ Date: _____

Evaluator Name _____ Site: _____

This form is to be completed by the evaluator.
Evaluator: Please mark each task as P (pass), F (fail), or NA (not applicable). For mastery, the student must Pass in each Task listed below unless a specific task is determined N/A by the evaluator. **The competency is a Fail and should be repeated by the student for mastery attainment if the plan is not treatable or unacceptable for treatment or has an error that makes a significant difference in the distribution.**

Task	Pass	Fail	N/A	Evaluator Comments
1. Treatment Prescription followed				
2. Isocenter/Calc Point Placement				
3. Treatment structures identified (CTV, PTV, etc.)				
4. Treatment structures covered adequately				
5. Critical structures contoured (OAR, etc)				
6. Critical structure doses appropriate				
7. Hot spot placement				
8. Beam angle selection				
9. Treatment accessory devices appropriately utilized				
10. Dose engine/algorithm appropriate				
11. Heterogeneity appropriately selected				
12. Dose grid selection				
13. Image transfer/Fusion				
14. Tx Couch contoured appropriately				
15. Minor contours				
16. Independent calculation performed (Hand calc., Computer MU Calc., etc.)				
17. Record and Verify System information				
18. Plan can be implemented clinically				
19. Overall plan appropriateness				
20. Overall plan quality				
21. Student obtained plan approval from dosimetrist				
22. Student obtained plan approval from physician				
23. Planning time reasonable				
24. Student demonstrated cognitive competency by answering relevant clinical case questions*				

Evaluator Comments:

Student Comments:

Student Signature and Date:

Evaluator Signature and Date:

Examples of Relevant Clinical Case Questions:

1. What would be other possible treatment options for this clinical case?
2. What possible complications might the patient experience as a result of this treatment dose?
3. What are difficulties that the radiation therapist may experience when implementing this treatment plan?
4. What are some benefits of this particular treatment delivery modality, energy, beam arrangement, etc.?

If a passing score, evaluator please rate the overall plan quality (does not affect the student's grade):

	3 (No Changes)	2 (Minor Changes)	1 (Moderate Changes)
Overall Plan Quality			

CLINICAL COURSE SYLLABI

The course syllabi for clinical courses are distributed to the student prior to beginning the clinical education experience.

Program Curriculum Schedule

The following courses comprise the Medical Dosimetry program:

Course	Semester Hours Credit
Fall - 1st Semester	
*STA 610 Applied Statistics for Health Professions	3
*RMD 630 Medical Dosimetry I	3
*RMD 631 Medical Dosimetry I Lab	1
*RMD 693 Medical Dosimetry Research Project**	1-3
or	
*RMD 695 Medical Dosimetry Thesis**	1-3
RMD 661 Medical Dosimetry Clinical Education I	3
Total	**11-13**
Winter - 2nd Semester	
*PH 510 Introduction to Epidemiology	3
*RMD 632 Medical Dosimetry II	3
*RMD 633 Medical Dosimetry II Lab	1
*RMD 693 Medical Dosimetry Research Project**	1-3
or	
*RMD 695 Medical Dosimetry Thesis**	1-3
RMD 662 Medical Dosimetry Clinical Education II	4
Total	**12-14**
Spring/Summer - 3rd Semester	
RMD 663 Medical Dosimetry Clinical III	4
*RMD 670 Professional Issues in Medical Dosimetry	3
*PH 625 Quantitative Research Methods in Public Health	3
*RMD 693 Medical Dosimetry Research Project**	1-3
or	
*RMD 695 Medical Dosimetry Thesis**	1-3
Total	**11-13**
Grand Total	**37**
Elective:	
*RMD 696 Medical Dosimetry Thesis Continuous Enrollment**	1-6

* Hybrid courses

Note: Clinical courses are not available in hybrid format since students are required to attend the assigned clinical setting for the competency based component of the program.

** Project and Thesis courses may be taken at variable credit per semester of 1-3 credits for a required total during the program of 6 credits. RMD 696 Medical Dosimetry Thesis Continuous Enrollment may be required if the student does not successfully complete RMD 695 Medical Dosimetry Thesis course.

APPENDIX: FORMS and STANDARDS

1. STUDENT ORIENTATION CHECKLIST
2. MANDATORY COMPETENCY EVALUATION
3. CLINICAL EDUCATION SCHEDULE WORKSHEET
4. COMPETENCY CHECKLIST FOR GRADUATION
5. CLINICAL ADVISING PROGRAM DOSIMETRIST EVALUATION
6. CLINICAL ADVISING PROGRAM STUDENT SELF-EVALUATION
7. STUDENT EVALUATION OF CLINICAL EDUCATION CENTER
8. INDEPENDENT STUDY COURSE AGREEMENT
9. CLINICAL EDUCATION ATTENDANCE RECORD
10. SIGNIFICANT INCIDENT/ INJURY REPORT FORM
11. RECOGNITION- ABOVE AND BEYOND
12. LIST OF CURRENT JRCERT STANDARDS FOR A MEDICAL DOSIMETRY EDUCATIONAL PROGRAM

Medical Dosimetry Program
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College of Health Professions
Center for Health Sciences
301 Michigan Street, Suite 410
Grand Rapids, Michigan 49503

STUDENT ORIENTATION CHECKLIST

Student Name _____ Clinical Site: _____
Semester _____

This form should be completed by the clinical preceptor, on each new student, the first day of clinical education at a new clinical education center. It should be signed by the clinical instructor and student and sent to university program faculty.

Parking Policy/ Facility Name Badge	
Locker Or Coatroom Location	
Record Of Attendance Policy	
Facility Tour	
Emergency Procedures	
Fire/Disaster Plan Evacuation Routes	
Department Emergency Cart/Equipment Locations	
Public Address Code Responses	
Department Patient Distress Responses	
Initiation Of Emergency Codes (Cardiac Arrest, Etc.)	
Hazardous Material Management/ Infection Control Polices	
Incident Reporting Policy	
Patient Transport Procedures	
Review Of Departmental Routines	

The above items have been explained to me.

Student _____

Clinical Instructor _____

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MANDATORY COMPETENCY EVALUATION FORM

Student Name _____ Date: _____

Evaluator Name _____ Site: _____

This form is to be completed by the evaluator.
Evaluator: Please mark each task as P (pass), F (fail), or NA (not applicable). For mastery, the student must Pass in each Task listed below unless a specific task is determined N/A by the evaluator. **The competency is a Fail and should be repeated by the student for mastery attainment if the plan is not treatable or unacceptable for treatment or has an error that makes a significant difference in the distribution.**

Task	Pass	Fail	N/A	Evaluator Comments
1. Treatment Prescription followed				
2. Isocenter/Calc Point Placement				
3. Treatment structures identified (CTV, PTV, etc.)				
4. Treatment structures covered adequately				
5. Critical structures contoured (OAR, etc)				
6. Critical structure doses appropriate				
7. Hot spot placement				
8. Beam angle selection				
9. Treatment accessory devices appropriately utilized				
10. Dose engine/algorithm appropriate				
11. Heterogeneity appropriately selected				
12. Dose grid selection				
13. Image transfer/Fusion				
14. Tx Couch contoured appropriately				
15. Minor contours				
16. Independent calculation performed (Hand calc., Computer MU Calc., etc.)				
17. Record and Verify System information				
18. Plan can be implemented clinically				
19. Overall plan appropriateness				
20. Overall plan quality				
21. Student obtained plan approval from dosimetrist				
22. Student obtained plan approval from physician				
23. Planning time reasonable				
24. Student demonstrated cognitive competency by answering relevant clinical case questions*				

*See below for examples of relevant clinical case questions.

Evaluator Comments:

Student Comments:

Student Signature and Date:

Evaluator Signature and Date:

Examples of Relevant Clinical Case Questions:

1. What would be other possible treatment options for this clinical case?
2. What possible complications might the patient experience as a result of this treatment dose?
3. What are difficulties that the radiation therapist may experience when implementing this treatment plan?
4. What are some benefits of this particular treatment delivery modality, energy, beam arrangement, etc.?

If a passing score, evaluator please rate the overall plan quality (does not affect the student's grade):

	3 (No Changes)	2 (Minor Changes)	1 (Moderate Changes)
Overall Plan Quality			

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Student Name _____ Clinical Site: _____

Clinical Education Schedule Worksheet

Course	Semester & Year	Credits	Days
RMD 661 Medical Dosimetry Clinical Education I Total = 3 credits			
RMD 662 Medical Dosimetry Clinical Education II			
Total = 4 credits			
RMD 663 Medical Dosimetry Clinical III			
Total = 4 credits			

Anticipated Semester and Year of Graduation:	

It is my understanding that if I require any changes to this plan I am responsible for submitting a new worksheet and have the Program Director's approval before starting the new schedule.

Date	Student Signature	Printed Name

Date	Program Director Signature	Printed Name
Date	Clinical Preceptor Signature	Printed Name

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Student Name _____ Clinical Site: _____

Student Competency Checklist for Graduation

Mandatory (Must Complete All)	Evaluators Initials	Date Performed	Semester Turned In
Image fusion for planning			
Irregular Field Calc Plan			
Pelvis – 4 field			
Abdomen – 3 or 4 field			
Para-aortic or Nodal Irradiation			
Pelvis - 3 field with wedges			
IMRT or Arc Plan (VMAT/Tomotherapy)			
Intact Breast Tangentials			
Chest Wall (Tangents or electrons)			
Thoracic (Initial & Offcord)			
Limb Sarcoma			
Lymphoma			
Prostate - IMRT/Conformal			
Palliative			
Parotid (wedge pair or mixed energy)			
H&N – IMRT/Conformal (Primary and Off Cord plans)			

H&N – IMRT/Conformal (Boost and SC plans)			
Electron Beam Plan			
Brain (Conformal/Fusion)			
Intracavitary Implant Plan			
Interstitial Implant Plan			

Note: Completed Competency Evaluation Form Required for Each Mandatory Competency

Optional (Must complete 5)	**Evaluator**	**Date Performed**
Observe High Dose Rate (Plan and Tx)		
Observe SRS (Plan and Tx)		
Observe SBRT (Plan and Tx)		
Observe Respiratory Motion Mgmt (Plan and Tx)		
Participate in Retreatment Planning		
PA Axillary Boost Plan or Calculations		
Clinical Dosimetrist Assignment *		
Clinical Dosimetrist Assignment *		
Observe Brachytherapy OR Insertion		
Observe Brachytherapy Source Preparation		
Participate in Total Body Irradiation Planning		
Participate in Cranio-Spinal Planning		
Observe Patient Specific QA		
Observe QA of equipment: Simulator		
Observe QA of equipment: Other (HDR, etc.)		
Observe QA of equipment: Linear Accelerator		

* Could include special dosimetry measurements

Medical Dosimetry Program

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CLINICAL ADVISING PROGRAM DOSIMETRIST EVALUATION

Student Name _____ Date _____

Clinical Education Center _____ Course # _____ Semester & Year _____

INSTRUCTIONS: Please rate the student in the following categories by checking inside the appropriate box. We appreciate honest and candid responses as they are essential to the students' professional growth. **DO NOT COMPLETE THIS FORM UNLESS YOU HAVE WORKED WITH THE STUDENT!**

Grading Rubric (see detailed explanation in the Student Handbook):

Poor-Zero (0) points indicating does not meet acceptable standard
Fair-One (1) points indicating meets standard but needs significant improvement
Good-Two (2) points indicating meets acceptable standard
Excellent-Three (3) points indicating exceeds acceptable standard

	Excellent (3 points)	Good (2)	Fair (1)	Poor (0)
1. PROFESSIONAL CONDUCT mannerisms, cleanliness, neatness				
2. ATTITUDE enthusiasm for profession, interest in assigned activities				
3. COMMUNICATION SKILLS interpersonal skills c/ staff				
4. PATIENT CARE SKILLS awareness of emotions, modesty, provide information to patient				
5. COOPERATION willingness to assume duties				
6. DEPENDABILITY punctuality & reliability				
7. SELF-CONFIDENCE confidence in personal ability				
8. APPLICATION OF KNOWLEDGE use of academic information				
9. ORGANIZATION OF DUTIES logical & efficient performance				
10. ADAPTABILITY ability to adapt to changing situations, prioritize duties and cases				

Please use the back of this form to provide additional commentary you believe could be useful in improving the educational experience of this student.

_____ Evaluator (Sign & Date)

_____ Student (Sign & Date)
I have reviewed this evaluation and have had opportunity for discussion.

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CLINICAL ADVISING PROGRAM STUDENT SELF-EVALUATION

Student Name		Date
Clinical Education Center	Course #	Semester & Year

INSTRUCTIONS: As students, you are constantly evaluated by your instructors in order to monitor your progress during clinical education. However, it is important that your instructors also hear how you perceive your experience and ability. This evaluation asks you to candidly discuss your current progress. Please check the appropriate column or columns which best describes your feelings about your level of proficiency at this point in your education.

1. List the treatment plans you require the most help with

2. In the space below, list the procedure or situation you find most difficult:

3. Rate your abilities in each of the following areas according to the following.

Grading Rubric (see detailed explanation in the Student Handbook):
Poor-Zero (0) points indicating does not meet acceptable standard
Fair-One (1) points indicating meets standard but needs significant improvement
Good-Two (2) points indicating meets acceptable standard
Excellent-Three (3) points indicating exceeds acceptable standard

	Excellent (3 points)	Good (2)	Fair (1)	Poor (0)
1. PROFESSIONAL CONDUCT mannerisms, cleanliness, neatness				
2. ATTITUDE enthusiasm for profession, interest in assigned activities				
3. COMMUNICATION SKILLS interpersonal skills c/ staff				
4. PATIENT CARE SKILLS awareness of emotions, modesty, provide information to patient				
5. COOPERATION willingness to assume duties				
6. DEPENDABILITY punctuality & reliability				
7. SELF-CONFIDENCE confidence in personal ability				
8. APPLICATION OF KNOWLEDGE use of academic information				
9. ORGANIZATION OF DUTIES logical & efficient performance				
10. ADAPTABILITY ability to adapt to changing situations, prioritize duties and cases				

4. Place an X on the line to rate your overall professional ability at this point in your education:

Excellent Good Average Fair Poor

5. In the space below explain the progress you have made in achieving the goals you set at your last self-evaluation. Attach any required documentation.

6. GOALS In the space below list at least one measurable goal that you wish to set for yourself for next term

7. List each of the goals for which you are being evaluated (N/A if initial term)	Goal Met	
	Yes(X)	No(X)
Goal:		
Goal:		
Goal:		
Goal:		
Goal:		
Goal:		
ALL GOALS MET FROM PREVIOUS TERM (N/A if initial term)		

8. Please add any additional comments which you deem important (e.g., disagreements with this or other evaluations, clinical assignments, etc.):

9. Goals for the following semester: (will be completed by GVSU Faculty)
Goal:
Goal:
Goal:
Goal:
Goal:
Goal:

Note: Additional goals may be indicated on attachments

_____ _____

Evaluator (Sign & Date)

Student (Sign & Date)
I have reviewed this evaluation and have had opportunity for discussion.

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STUDENT EVALUATION OF CLINICAL EDUCATION CENTER

Date: _____ Clinical Ed Center: _____

INSTRUCTIONS: Before completing this form consider this question; "Did I make an honest effort to take advantage of the educational opportunities available during my assignment to this clinical education center?" Keep this consideration in mind while completing this evaluation.

Evaluations will be provided to the clinical site and preceptor annually

All results are typed into a cumulative total so that you cannot be personally identified. Honest and candid answers will be most helpful. Please make a written comment to explain all Strongly Agree and all Strongly Disagree marks.
DO NOT SIGN YOUR NAME TO THIS EVALUATION.

REGARDING THE ONCOLOGY NURSES I believe they made every attempt to:	Strongly Agree	Agree	Disagree	Strongly Disagree
1A. recognize that my role was primarily to learn with the resulting service being secondary				
1B. encourage and answer my questions				
1C. display professionalism				
REGARDING THE RADIATION ONCOLOGISTS I believe they made every attempt to:	Strongly Agree	Agree	Disagree	Strongly Disagree
2A. recognize that my role was primarily to learn with the resulting service being secondary in nature				
2B. encourage and answer my questions				
2C. display professionalism				
REGARDING THE RADIATION THERAPISTS I believe they made every attempt to:	Strongly Agree	Agree	Disagree	Strongly Disagree
3A. recognize that my role was primarily to learn with the resulting service being secondary in nature				
3B. encourage and answer my questions				
3C. display professionalism				
REGARDING THE MEDICAL DOSIMETRISTS I believe they made every attempt to:	Strongly Agree	Agree	Disagree	Strongly Disagree
4A. recognize that my role was primarily to learn with the resulting service being secondary in nature				
4B. encourage and answer my questions				
4C. point out alternative methods for me to accomplish a task when necessary				
4D. permit me to correct my own mistakes				
4E. allow me to do things on my own				

4F. display professionalism				
4G. demonstrate a positive attitude toward all students				
4H. schedule and make available valuable clinical experiences for me				
REGARDING MY CLINICAL PRECEPTOR I believe s/he made every attempt to:	Strongly Agree	Agree	Disagree	Strongly Disagree
5A. recognize that my role was primarily to learn with the resulting service being secondary in nature				
5B. encourage and answer my questions				
5C. point out alternative methods for me to accomplish a task when necessary				
5D. permit me to correct my own mistakes				
5E. allow me to do things on my own				
5F. display professionalism				
5G. demonstrate a positive attitude toward all students				
5H. schedule and make available valuable clinical experiences for me				
REGARDING MY PERSONAL FEELINGS As a result of this clinical rotation, I now am:	Strongly Agree	Agree	Disagree	Strongly Disagree
6A. more advanced in clinical knowledge				
6B. more interested in Medical Dosimetry as a profession				

Constructive comments should be made below.

Medical Dosimetry Program

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INDEPENDENT STUDY COURSE AGREEMENT

Independent study courses are available in 1, 2, and 3 credit options. You may propose any topic relevant to the study of medical imaging and radiation sciences but must have this form completed and signed by the faculty member responsible for your course grade. You should expect to propose approximately 42 hours of activity for 3 each academic credit. This is based on a 14 week semester expectation of a didactic course meeting 1 hour per week per credit plus 2 hours per week of preparation and study.

Student Name _____ Date _____

Course # _____ Semester & Year _____

I propose the following for _____ academic credits.

The title of my independent study is:

List each activity and approximate number of hours you plan to devote to achieve your objective/s.

Hours	Activity

I realize I must acquire the signature of a faculty member on this form and in addition, must register for the appropriate course before this proposal can be completed.

_____
Student Signature & Date

_____
Faculty Signature & Date

GRAND VALLEY STATE UNIVERSITY

Medical Dosimetry Program

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College of Health Professions
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CLINICAL EDUCATION ATTENDANCE RECORD

Name of Student ______________________ Clinical Education Center ______________________

GVSU Policies and Procedures include:

- Time of arrival and time of departure must be recorded appropriately
- Clinical instructors will require students to make up time that is not accurately recorded
- Falsification of time records is considered cheating and is a breach of university and professional ethics and will merit appropriate disciplinary action
- All absences require the name of the person taking the message and time the absence was reported.

DATE (MM/DD/YY)	ARRIVAL TIME	DEPARTURE TIME	DOSIMETRIST INITIALS	STUDENT INITIALS

I have reviewed this record and verify that it is accurately recorded. I understand that falsification of time records is grounds for dismissal from the Medical Dosimetry program.

Student

Medical Dosimetry Program
Phone 616-331-5753, Fax 616-331-5632
College of Health Professions
Center for Health Sciences
301 Michigan Street, Suite 410
Grand Rapids, Michigan 49503

Grand Valley State University
Medical Dosimetry Program
Significant INCIDENT / INJURY REPORT FORM

STUDENT

Last Name	First Name	
Date of Birth	Social Security Number	
Street Address		
City	Zip	Phone:

INCIDENT/INJURY

Date of incident	Date reported	Course in which injury occurred
Place of incidence		Type of injury (strain, cut, etc)
Describe how incident/injury happened		
Name of witnesses		
Name of doctor (if known)		
Signature		Date

INSTRUCTOR'S REPORT

What caused this accident? (Please be explicit)	
How was the injury treated? Or how was the incident addressed?	
How can a recurrence be prevented?	
Has preventative action been taken? if 'no', please explain.	Has a report been completed at the institution where the incidence occurred?
Comments by student regarding injury or incident	
Signature	Date

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Grand Valley State University
Medical Dosimetry Program
Recognition
-Above and Beyond-

If you observe a Grand Valley student performing above and beyond expectations, please take a moment to complete the form below:

Student Name	Name of person that observed performance
Date	Clinical Educational Center
Description of the performance that is above and beyond expectations	
Clinical Instructor comments	
Clinical Instructors signature	Date

Standards for an Accredited Educational Program in Medical Dosimetry

EFFECTIVE January 1, 2014

Adopted by: The Joint Review Committee on Education in Radiologic Technology

Joint Review Committee on Education in Radiologic Technology 20 N. Wacker Drive, Suite 2850 Chicago, IL 60606-3182 312.704.5300 ● (Fax) 312.704.5304 www.jrcert.org

The Joint Review Committee on Education in Radiologic Technology (JRCERT) is dedicated to excellence in education and to the quality and safety of patient care through the accreditation of educational programs in the radiologic sciences. The JRCERT is the only agency recognized by the United States Department of Education (USDE) and the Council on Higher Education Accreditation (CHEA) for the accreditation of traditional and distance delivery educational programs in radiography, radiation therapy, magnetic resonance, and medical dosimetry. The JRCERT awards accreditation to programs demonstrating substantial compliance with these STANDARDS.

Standard One *Integrity* Standard One: The program demonstrates integrity in the following:
• Representations to communities of interest and the public,
• Pursuit of fair and equitable academic practices, and
• Treatment of, and respect for, students, faculty, and staff.

Standard Two: The program has sufficient resources to support the quality and effectiveness of the educational process.

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

Standard Four: The program's policies and procedures promote the health, safety, and optimal use of radiation for students, patients, and the general public.

Standard Five: The program develops and implements a system of planning and evaluation of student learning and program effectiveness outcomes in support of its mission.

Standard Six: The program complies with JRCERT policies, procedures and standards to achieve and maintain specialized accreditation.