



SCHOOL OF MEDICINE  
RADIOLOGIC SCIENCES PROGRAM

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# **Radiologic Sciences Program BSRS, Nuclear Medicine, and Medical Imaging**

## **2020-2021 Student Handbook**

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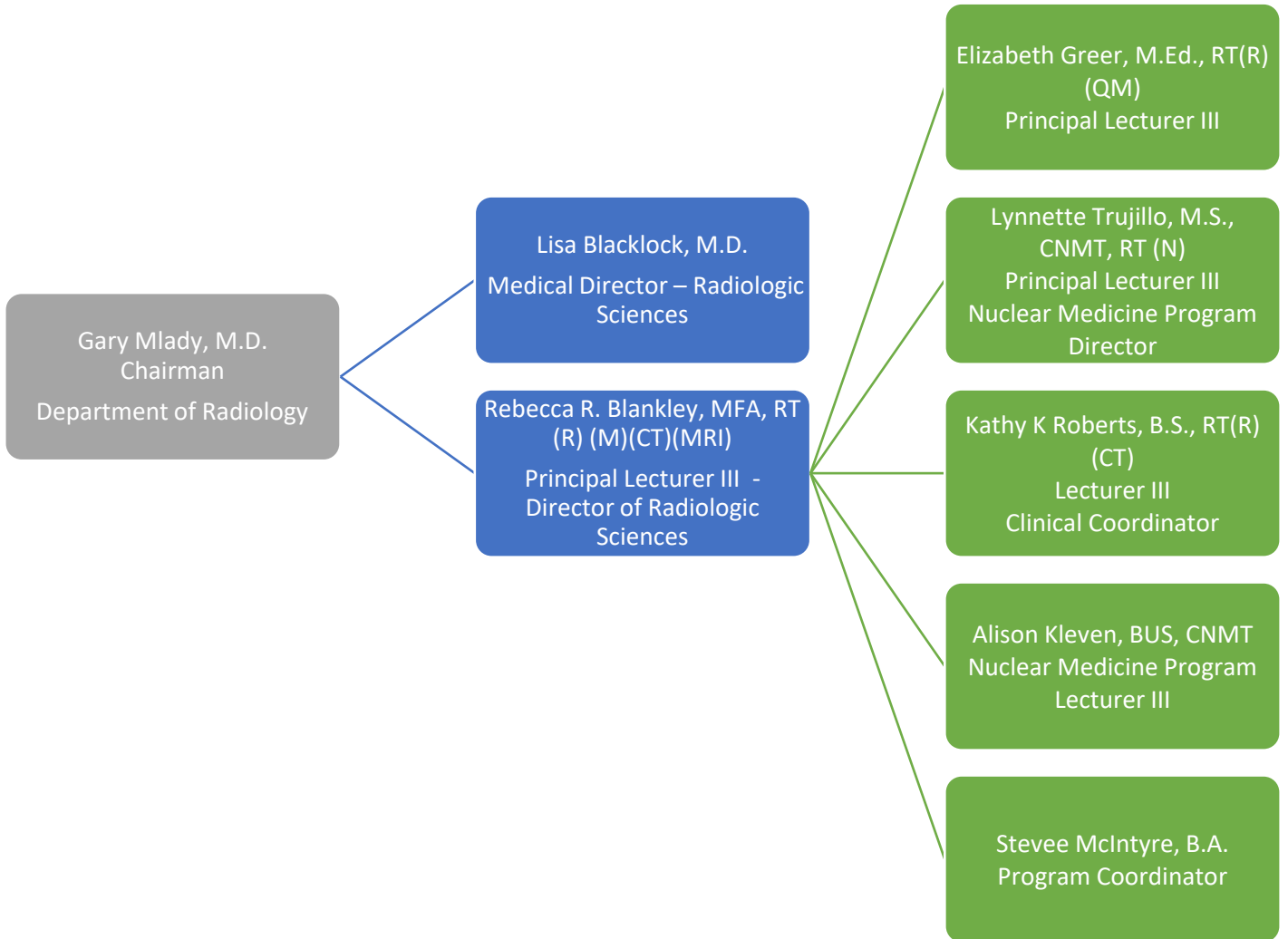
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The UNM catalog and this Student Handbook are designed primarily to describe the programs, course of instruction, and academic regulations of the University of New Mexico and the Radiologic Sciences Program. The provisions of this handbook and the UNM catalog are not to be regarded as an irrevocable contract between the student and the University. The University reserves the right to change any provisions or requirements at any time within the student's term of residence.

# Organizational Chart UNM Radiologic Sciences Program



## **RADIOLOGIC SCIENCES PROGRAM**

### **Bachelor of Science Degree**

The Bachelor of Science in Radiologic Sciences (BSRS) degree is available through the University of New Mexico (UNM), School of Medicine (SOM), in partnership with the New Media and Extended Learning (NMEL) distance education programs. The course content is delivered using UNM's Learning Management System - Blackboard LEARN.

This program provides:

BSRS degree and/or primary certification for Nuclear Medicine to entry-level students or BSRS and/or post- primary certification in Computed Tomography or Magnetic Resonance Imaging to primary-certified Technologists in active status.

Each individual educational program is designed to prepare the student for eligibility to successfully complete one or more nationally recognized certification examinations in the content area specified. The Certificates are completed in 12 to 24 months depending on the selected program. Prospective students are selected through an application and interview process.

**Students are required to transfer their previously completed college course work each semester to the University of New Mexico for approval in order to be included in a degree/certificate granting program. This course work includes prerequisites for the Nuclear Medicine program.**

### **BSRS Program Mission Statement**

To enable students to develop the critical thinking, knowledge and skills required to assume professional responsibility and leadership roles in health promotion. Students will learn to promote excellence in patient care delivery and clinical practice in a variety of health-care settings. Radiologic Sciences faculty are committed to student-centered learning, scholarship and service.

### **Completion of the BSRS degree in Nuclear Medicine:**

The BSRS with an emphasis in Nuclear Medicine Includes additional course work specifically for completion of the primary pathway to certification for Nuclear Medicine Technologists. Once accepted into the Nuclear Medicine program this primary pathway course work is completed through face to face participation in classrooms, clinical rotations as well as in hybrid classes. This course work follows national curriculum standards as set forth by the Society of Nuclear Medicine and Molecular Imaging (SNMMI) which is reviewed annually for adoption by the UNM Nuclear Medicine faculty. The BSRS degree course work in Nuclear Medicine for primary certification consists of prerequisites + BSRS courses + Nuclear medicine course work and clinical requirements.

Certified Nuclear Medicine Technologists seeking to complete the BSRS degree will be required to transfer all course work to UNM. Students are required to remain in good standing in a Primary Certification while completing the BSRS. Proof of certification will be requested before starting the degree completion program.



### **Completion of the BSRS degree in Medical Imaging:**

The BSRS with an emphasis in Medical Imaging offers a degree completion pathway for technologists who have successfully passed one or more of the five American Registry of Radiologic Technologists (ARRT) Primary Certifications. Also recognized are Primary Certifications completed through the Nuclear Medicine Technology Certification Board (NMTCB) and the American Registry of Diagnostic Medical Sonography (ARDMS).

Through participation in this degree completion program, registered technologists may earn up to an additional 50+ credit hours of under-graduate course work to fulfill the UNM BSRS degree requirements. The BSRS program offers a variety of subject content and course work emphasizing medical imaging ethics and professionalism, cross-sectional anatomy and pathology as well as research topics within the field.

### **Completion of the Computed Tomography or Magnetic Resonance Imaging Certification:**

Participants are selected through an interview process offered once a year following completion of a primary certification (i.e. primary certification in radiography, nuclear medicine, radiation therapy or ultrasound).

The BSRS may be completed along with the post- primary certification through a degree completion program in advanced coursework in Magnetic Resonance Imaging (MRI) (face to face in classroom and clinical rotations as well as hybrid courses) and/or Computed Tomography (CT) (online course work and clinical rotations). The Post-Primary Certification pathways also provide opportunities for the student to gain the BSRS degree. Certification training and education provides opportunities for students with a bachelor's degree or higher or who are a Primary Certified Technologist to gain an additional Post-Primary Certification.

The Radiologic Sciences certificate program offers enhanced clinical and didactic training and expertise without additional courses such as English, math or psychology. The UNM Radiologic Sciences CT and/or MRI certificate program qualifies for verification of completion of the ARRT certification eligibility requirements of a minimal of 16 ARRT hours of content specific course work needed to be eligible to complete the ARRT Post Primary Certification in Computed Tomography and/ or Magnetic Resonance Imaging.

### **Completion of ARRT Structured Educational Requirement Student (SERS):**

Participants are required to fill out the SERS application located on the UNM Rad Sci website. Participants are required to apply to the Radiological Sciences Program and the University at least two months prior to the semester. The Radiologic SERS (structured education requirement student) is provided educational opportunities to achieve the requirements to sit for the ARRT board exam. This student is given the didactic training to aid in an ARRT Post Primary Certification in Computed Tomography and/ or Magnetic Resonance Imaging. The clinical portion is not included in this program. This pathway also provides opportunities for the student to complete the BSRS degree.

### **Promotion for advance education and training**

Advanced Imaging offers career advancement and mobility for registered technologists. The curriculum is innovative in its online delivery and geared to the changing practice environment.

Annual review of curriculum and comparison to state and national standards of practice as well as national curriculum standards are implemented yearly.

Faculty and staff stay up to date on current trends and technology advancement through participation in state and national conferences. Current information is added to the UNM Radiologic Sciences Program's curriculum to meet the demands and changes asked of today's medical imaging technologist. The program makes programmatic changes through curriculum design and advisement as the field changes.

## Goals of the Radiologic Science Program

### KNOWLEDGE

**Nuclear Medicine/CT/MRI** - Demonstrate application, critical analysis, integration synthesis and evaluation of concepts and theories in the performance of medical imaging procedures.

Student Learning Outcomes:

Course examinations and Clinical evaluations

- Participate in self-assessment exercise of course content, identify strengths and limitation and develop own learning goals.
- Demonstrate ALARA principals of radiation protection and safety with self and others.
- Demonstrate knowledge of human structure, function, pathology as it relates to medical imaging.

Clinical competencies

- Demonstrate clinical competence by demonstrating accurate positioning skills and selecting appropriate technical factors.
- Successful completion of comprehensive registry

**BSRS** - Student will demonstrate competency in the evaluation of a medical imaging procedure.

Student Learning Outcomes:

- Demonstrate application, critical analysis, and evaluation of concepts and theories in the evaluation of cross-sectional medical images
- Demonstrate knowledge, evaluation, and location of human anatomy in cross-sectional presentation.

**SERS** - Demonstrate application, critical analysis, integration synthesis and evaluation of concepts and theories in the academic content in the CT and or MRI.

Student Learning Outcomes:

Course examinations

- Participate in the theoretical knowledge of course curriculum in CT/ MRI.
- Describe theories to promote excellent patient care and communication in the healthcare setting.
- Demonstrate ALARA principals of radiation protection and safety with self and others.

- Learn and demonstrate safety techniques associated with the CT and MRI clinical environment.
- Demonstrate knowledge of human structure, function, pathology as it relates to medical imaging.
- Successful preparation of comprehensive registry review concepts.

## **COMMUNICATION**

**Nuclear Medicine/CT/MRI** - Demonstrate effective oral and written communication strategies with patients and family members, the public and members of the healthcare team to safely perform medical procedures.

Student Learning Outcomes:

Written and oral clinical midterm and final examinations

- Learn clear and concise medical language as it pertains to the imaging medical field.
- Demonstrate oral and written communication with referring physician and Radiologist.
- Demonstrate effective communication strategies with patients and family members, the public and members of the healthcare team.

Successful completion of comprehensive registry

- Comprehensive clinical competencies of diagnostic procedures

Evaluation of student by clinical personal

- Student completes the site evaluation at the end of each rotation

**BSRS** - Student will demonstrate competency in professional oral and written communication

Student Learning Outcomes:

- Demonstrate effective oral and written communication strategies with patients and family members, the public, and members of the healthcare team
- Demonstrate effective leadership and communication skills in the clinical workplace.

**SERS** - Demonstrate effective oral and written communication strategies in the healthcare field.

Student Learning Outcomes:

Written and midterm and final examinations

- Learn clear and concise medical language as it pertains to the imaging medical field.
- Learn effective patient care communication.
- Employ effective patient care skills and communication for diverse populations.

## **INTERPERSONAL AND CULTURAL SKILLS**

**Nuclear Medicine/CT/MRI** – Demonstrate patient care skills including communication and professionalism that minimize the potential negative impact of social-cultural differences (e.g.: socio-cultural status, family and communities structure and function, race, creed, color, gender, sexual orientation or disability/health status) on access to health care services as well as needs, attitudes, beliefs and practices relative to health care.

Student Learning Outcomes:

Diagnostic image critique/assessment and objective structured course examinations

- Learn clear and concise medical language as it pertains to the imaging medical field.
- Demonstrate effective communication strategies while affirming the dignity and worth of all patients, family members, the public and members of the healthcare team

Evidence based presentation component is ongoing throughout the clinical courses.

- Learn to recognize cultural and socioeconomic differences while performing medical imaging procedures on children and adults.

**BSRS** – •Demonstrate patient care communication and professionalism that minimize the potential negative impact of social-cultural differences on access to health care services as well as needs, attitudes, beliefs and practices relative to health care.

Student learning Outcomes:

- Discuss the current status of the U.S. healthcare system and the Affordable Care Act,
- Discuss the U.S. Health Care cost/coverage structure, and marginalized groups in relation to receiving health care.

**SERS** - Demonstrate patient care skills including communication and professionalism that minimize the potential negative impact of social-cultural differences (e.g.: socio-cultural status, family and communities structure and function, race, creed, color, gender, sexual orientation or disability/health status) on access to health care services as well as needs, attitudes, beliefs and practices relative to health care.

Student Learning Outcomes:

Diagnostic image critique/assessment and objective structured course examinations

- Learn clear and concise medical language as it pertains to the imaging medical field.
- Demonstrate effective communication strategies while affirming the dignity and worth of all patients, family members, the public and members of the healthcare team
- Learn to recognize cultural and socioeconomic differences while performing medical imaging procedures on children and adults.

## **PROFESSIONALISM AND PATIENT CARE**

**Nuclear Medicine/CT/MRI** - Demonstrate professional values in relevant aspects of patient care as defined by the governing bodies of Medical Imaging.

Student Learning Outcomes:

Clinical competencies of student's performance and comprehensive examination and National registry examination

- Participate in personal and professional organizational opportunities.
- Adhere to professional appearance
- Establish professional relationships with imaging professionals
- Awareness of culturally sensitive factors impacting delivery of healthcare and acting with professionalism
- Practice nondiscrimination based on age, ethnicity, gender identity, disability and sexual orientation.

- Determining patient needs and providing appropriate care and education.
- Promote self-awareness of unconscious bias.

**BSRS** – Students will be able to: identify the characteristics of a team, examine the roles of community service in the health care field, identify and assess useful healthcare information, analyze patient care information sources, and determine the characteristics of a team leader

Student Learning Outcomes:

- Demonstrate the ability to adapt to and communicate effectively in different learning environments and learning experiences, and demonstrate problem solving in professional practice
- Demonstrate the ability to participate successfully in team projects, community service, and take on the role of the team leader.

**SERS**- Demonstrate professional values in relevant aspects of patient care as defined by the governing bodies of Medical Imaging.

Student Learning Outcomes:

Clinical competencies of student's performance and comprehensive examination and National registry examination

- Recommend participating in personal and professional organizational opportunities.
- Awareness of culturally sensitive factors impacting delivery of healthcare and acting with professionalism
- Awareness of culturally sensitive factors based on age, ethnicity, gender identity, disability and sexual orientation.
- Practice nondiscrimination based on age, ethnicity, gender identity, disability and sexual orientation.
- Determining patient needs and providing appropriate care and education.
- Promote self-awareness of unconscious bias.

## Accreditation

The Commission on Institutions of Higher Education has granted, through the Higher Learning Commission, reaccreditation to UNM since 1922 and the university holds accreditation in good standing through to the 2020-2021 academic year.

Website: <http://www.ncahlc.org/component/directory/?Action=ShowBasic&Itemid=&instid=1511&lang=en>

The UNM Radiologic Sciences Program has been approved through UNM faculty senate since 2001, and the Nuclear Medicine Imaging program since 1973 to offer training and education. A baccalaureate degree in Radiologic Sciences with special emphasis in Advanced Imaging was implemented spring of 2009.

Upon successful completion of program requirements, students are awarded a transcribed Certificate in the area of study and are eligible to apply for national certification given by the American Registry of Radiologic Technologists (ARRT) and or the Nuclear Medicine Technology Certification Board (NMTCB).

# PROGRAM STANDARDS

## Student Technical Standards

- Emotional stability for exercising good judgment in assessing and responding to patient care needs associated with diagnostic imaging and therapy procedures.
- Maintain composure and emotional ability to respond to patient care needs in both routine and emergency clinical settings.
- Visually monitor patients during imaging procedures and recognize when patients are in distress and effectively respond to emergent situations.
- Provide patient assessment throughout exam and know when to initiate a code.
- Utilize the ability to practice previously learned knowledge and critical thinking skills. These skills apply performing effective imaging procedure.
- Be able to correlate correct diagnosis to written orders and correct imaging procedure.
- The ability to comprehend 2D and 3D relationships to anatomical structures identified on medical images.
- Must be free from health or medical disorders that limit the ability to completely and effectively perform the duties of an advanced imaging student.
- The student must not be chemically dependent throughout the duration of the program. Student may incur additional program costs to confirm chemical free dependency.
- If student has valid chemically dependent prescription drug use, it is incumbent on said student to be cleared by clinical facilities.
- If student is unable to be cleared of prescribed chemical dependency, they will be dropped from program, due to not fulfilling clinical requirement.
- Ability to move/ transfer and skillfully position patients weighting up to 400 pounds.
- Ability to lift/ handle and carry objects up to 35 pounds.
- If student is unable to meet physical requirement due to physical injury, they will be dismissed or from program, due to not fulfilling clinical requirement. The program will try and accommodate physical injury with clinical postponement.
- Must be able to communicate effectively in both the academic and clinical setting. The clinical environment involves both routine and emergency situations in the clinical health care system.
- The student must be able to set up advanced imaging procedures and protocols and perform examinations from beginning to end within the area of their training.

The Radiologic Sciences Program is cognizant of its responsibilities under the Americans with Disabilities Act. Any applicant with a disability that has any questions or needs with respect to the above standards, he/ she should contact the Director of Radiologic Sciences at (505) 272-5254 or (505) 277-3750 for the UNM Accessibility Resource Center.

Website: <https://arc.unm.edu/>

## Essential Cognitive/Conceptual Quantitative Abilities and English Language

Students are required to have the ability to read and understand written documents in English and solve problems involving measurement, calculation, reasoning, analysis and synthesis of routine procedures. They must have the ability to perform patient assessment, develop a plan of action, establish priorities and react effectively in a routine and or emergency situation.

All lectures, labs, and clinical education rotations are conducted in English. Knowledge and demonstration of written and spoken English is essential for completion of successful student outcomes.

Per UNM undergraduate admission requirements:

Website: <http://geo.unm.edu/admission/undergraduate/index.html>

If English is not the student's first language, the student is required to demonstrate English language proficiency. Students may need to submit official English proficiency test scores (details provided in the link above) that are *less* than 2 years old.

English Proficiency Test Requirements:

To demonstrate English proficiency, students can complete one of the following:

- The International English Language Testing System (IELTS)
- The Test of English as a Foreign Language (TOEFL)
- Cambridge CPE or CAE.

Minimum score requirements are listed in the web link provided. Official test results must be sent directly to the University of New Mexico. The TOEFL code for UNM is 4845.

### **Essential Communication Skills**

- Ability to understand complex and detailed medical written and spoken instructions.
- Ability to apply instructions while ensuring the safety of patients and staff.
- Communicate effectively with all levels of personnel, patients and the public.

Both the Radiologic Sciences profession and program's clinical sites require the technologist and student have a mastery of conversational English in order to be able to converse effectively with patients and staff. For patient and radiation safety requirements, it is vital that technologists and students be able to clearly explain a procedure and record a comprehensive history upon every encounter with a patient.

## **STUDENT RESOURCES**

### **UNMH SOM / HSC Student ID Badge**

Authorized through the University of New Mexico Hospital (UNMH) security office.  
(Required for library and computer pod facilities)

### **Library Facilities**

Students have full privileges in all University of New Mexico libraries. Students are encouraged to utilize the Health Science Library resources for submission of academic papers and research proposals.

### **Health Sciences Library & Informatics Center (HSLIC)**

Hours of operation: Subject to change due to COVID-19

Monday - Thursday: 7am - 11pm Friday: 7 am - 6 pm  
Saturday: 9:30 am - 6 pm Sunday: 12 noon - 11 pm  
Library Info Desk: 505-272-2311  
HSC library website link: <http://hslic.unm.edu>

Radiologic Sciences program library resource page can be found at the website:  
Website: <http://libguides.health.unm.edu/radiologic>

## Computer Facilities

Computers are available daily through the Health Sciences Library-HSLIC at:  
Website: <http://it.unm.edu/pods/index.html>

## Students with Disabilities

### Office of Academic Resources and Support (OARS)

Academic support services are offered to School of Medicine students as part of Undergraduate Medical Education Office of Academic Resources and Support (OARS). Please visit the link listed above for more information. Learning specialists assist students in assessing and addressing the following:

- Study Skills
- Test-taking Strategies
- Test Anxiety
- Time Management
- Organizational Skills
- Problem-Solving Conceptualization
- Learning and communication style assessments to help your understanding and address your learning issues
- Issues related to clinical skills, communication skills, and professionalism and ethics
- Related Areas of Concern
- Referrals. Students are directed to available resources, special courses (Boards Review), or special diagnostics as needed.

Students with diagnosed disabilities who need accommodations for learning and/or testing must maintain current documentation in the OARS office. OARS will guide students through the process of acquiring services and suggesting relevant accommodation formats, (e.g., laptop computer and printer instead of handwriting patient notes). An HSC advisory committee evaluates the necessity for and appropriateness of accommodation requests to assist students in meeting the technical standards necessary for successful completion of the Radiologic Sciences Program.

Website: <http://som.unm.edu/education/md/ume/oars.html>

## UNM Net ID and Password

UNM Net ID and password are required to access Learning Central to complete on-line modules for all clinical students. A separate password will be required to complete the Presbyterian Health



Systems online modules for clinical participation (introduced prior to clinical rotation). All students will be assigned a Salud.unm.edu email as well as a UNM.edu email. Students are required to use these emails when enrolled in the program. Both emails should be linked. Emails need to be checked weekly for course updates.

A separate password will be required to complete the Presbyterian Health Systems online modules for clinical participation (introduced prior to clinical rotations).

Website: [https://netid.unm.edu/form\\_new\\_netid.php](https://netid.unm.edu/form_new_netid.php)

### **Student Needle Stick Insurance**

Each student will be charged a required \$16.00 fee for needle stick insurance. This fee will automatically be charged to the student account each semester (excluding the final summer semester prior to graduation).

### **Tuition and Fees**

Students will pay to the UNM Bursar's office the current published tuition rate and fees for all courses.

To obtain a list of the current rates students can refer to the Bursar's office website under tuition and fees.

Website: <http://bursar.unm.edu/>

### **Financial Aid**

The SOM financial aid office will assist students in navigating the process for obtaining financial support for their education. A comprehensive Financial Aid Handbook is available in the SOM Financial Aid Office, BMSB 147, or call 272-8008. Questions regarding financial aid should be directed to the financial aid office.

Website: <https://hsc.unm.edu/academicaffairs/financialaid/som/index.html>

### **Student Academic Records**

The Office of Student Services maintains an academic record for each student. The record contains all grades and narrative evaluations submitted by faculty for completed academic coursework. The file is available for student review during regular working hours (Monday-Friday 8 am- 5 pm). All student files are governed by the Student Records Policy of The University of New Mexico, as well as FERPA. For more information, review the catalog link:

Website: <https://registrar.unm.edu/privacy-rights/ferpa.html>

### **Parking and Transportation Expenses and Liability**

As a student, you will be expected to pay for parking and transportation expenses for all class and clinical related activities. Some clinical sites provide parking free of charge or at a discounted rate. The University assumes no responsibility for damage to any student's vehicle or injuries that may occur during transportation to and from class related activities.

### **Security/ Escort**

Campus police can be reached 24 hours per day at 277-2241. UNM also provides escort services to your car, dorm, or classroom after dark. Security aides are available evenings throughout the week. Call Campus Police for any safety related issue.

Website: <https://police.unm.edu/>

### Office of Equal Opportunity

OEO has the responsibility for implementing the University's affirmative action policy. As part of that responsibility, OEO shall receive inquiries regarding issues involving civil rights issues; counsel claimants; evaluate claims; receive and process formal claims; prepare written investigative reports, which contain findings of fact; and conciliate meritorious claims separately or jointly with the parties. OEO will also refer claimants to other offices, if appropriate. The office is located at 609 Buena Vista NE, 277-5251.

Website: <https://oeo.unm.edu/>

### Equal Educational Opportunity Policy

The University of New Mexico is committed to providing equal educational and employment opportunity regardless of sex, marital or parental status, race, color, religion, age, national origin, ethnicity, physical handicap, or military involvement (Vietnam era veteran or handicapped veterans). Title IX of the Educational Amendments of 1972 prohibits discrimination on the basis of sex in any educational program or activity receiving federal financial assistance by way of grant, contract or loan. Title VI of the Civil Rights Act of 1964 is similar in its prohibition of discrimination based on race, color or national origin and section 504 of the Rehabilitation Act of 1973 prohibits discrimination against qualified handicapped persons. Equal educational opportunity includes admission, recruitment, extracurricular programs and activities, housing, facilities, access to course offerings, counseling and testing, financial assistance, employment, health and insurance services and athletics.

Responsibility for equal employment and educational opportunity throughout the University rests with the UNM President. The President has appointed an Affirmative Action Director and has assigned responsibility to him/her for promoting and encouraging progress in meeting the University's equal opportunity goals. All grievances, questions or requests for information relating to these concerns should be referred to the OEO office located at:

UNM Office of Equal Opportunity  
609 Buena Vista Dr. NE, ABQ., NM 87106  
Phone: 505-277-5251

It is the policy of the University that "no person...shall, on the ground of race, color, national origin, sex, marital status, age or religion be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity..."

Website link: <http://oeo.unm.edu/>

Title IX prohibitions on sex discrimination include various forms of sexual misconduct, such as sexual assault, rape, sexual harassment, domestic and dating violence, and stalking. Current UNM policy designates instructors as required reporters, which means that if instructors are notified (outside of classroom activities) about any Title IX violations, they must report this information to the Title IX coordinator. However, the American Association of University Professors' (AAUP) "Statement on Professional Ethics" requires that Professors protect students'

academic freedom and "respect[s] the confidential nature of the relationship between professor and student." Therefore, as a Professor I have pledged to honor student confidentiality and will strive to respect your wishes regarding reporting. If you or someone you know has been harassed or assaulted and would like to receive support and academic advocacy, there are numerous confidential routes available to you. For example, you can contact the Women's Resource Center, the LGBTQ Resource Center, Student Health and Counseling (SHAC), or LoboRESPECT. LoboRESPECT can be contacted on their 24-hour crisis line, (505) 277-2911 and the online website link at <http://loborespect.unm.edu/>. Students can receive non-confidential support and learn more about Title IX through the Title IX Coordinator at (505) 277-5251 and or the online website link at: <https://oeo.unm.edu/title>. Reports to law enforcement can be made to the UNM Police Department at (505) 277-2241.

## UNM Safe Reporting Sites for Students

In addition to the UNM Office of Equal Opportunity, students have other options for which to make a complaint of sexual harassment or misconduct to. For more information, please review the lists of available sites.

1) UNM Student Health & Counseling (SHAC)  
PHONE 505-277-3136  
Website: <https://shac.unm.edu/>

2) LBGTQ Resource Center  
PHONE 505-277-5428  
Website: <http://lgbtqrc.unm.edu/>

MSC05 3155  
608 Buena Vista Dr. NE  
Albuquerque, NM 87131  
Physical Location:  
Bldg 20A  
Basement floor (accessibility access phone on ground level)

3) Lobo Respect Advocacy Center  
LoboRESPECT Advocacy Center  
PHONE 505-277.2911  
Website: <http://loborespect.unm.edu/>

University Advisement and Enrichment Center  
Room 262  
ABQ, NM 87131

4) Woman's Resource Center  
PHONE 505-277-3716  
Website: <https://women.unm.edu/>

MSC 06 3910  
Mesa Vista Hall 1160  
1 University of New Mexico

Albuquerque, NM 87131

## 5) Faculty SAFE

Website: <https://facultysafeunm.wordpress.com/>

### Lockers

Lockers can be assigned for student use in the Health Sciences and Services Building (HSSB). Students will need to supply their own locks.

### Professional Organizations

Students are eligible and strongly encouraged to join professional organizations that support the modality of their training. The American Society of Radiologic Technologists (ASRT) and the Society of Nuclear Medicine and Molecular Imaging offer student rates for membership (see Appendix D for websites).

### Program Copy Machine Policy

Students can make duplicate copies at their own expense. Minimal duplicates will be allowed to be made through the program copy machine and will require faculty or staff to be present.

## CLINICAL POLICIES

### Personal Appearance

Students are expected to maintain a clean, neat PROFESSIONAL appearance as they are directly involved in patients in the clinical setting. Professional solid colored scrubs (cherry bottoms, silver tops) are to be worn. If required by a clinical site, a clean white laboratory coat will be worn over the scrubs. The UNM photo ID badge and name badge is always to be prominently displayed. A local vendor that carries the required scrub colors and lab coats is listed below:

Scrubs and Beyond  
5001 Montgomery Blvd NE  
Suite A21C  
Albuquerque, NM 87109  
505-881-7877  
505-881-0025 F

Students can also purchase scrubs from Salus Medical Uniforms.

Website: [www.salusuniforms.com](http://www.salusuniforms.com)

Should the student arrive at any clinical institution dressed in an inappropriate manner, the student will be sent home to change attire. Any missed clinical time must be made up by the end of each semester.

Students with long hair are asked to keep it tied back off the face. Perfume, cologne and aftershave should not be worn as perfume odors may cause nauseated patients' additional discomfort.

In addition, student must abide by the UNM Hospital dress code as outlined at the following website:

Title: HR 140 – Professional Presentation & Appearance (Dress Code)

Website: [https://hospitals.health.unm.edu/intranet7/apps/doc\\_management/index.cfm?project\\_id=1](https://hospitals.health.unm.edu/intranet7/apps/doc_management/index.cfm?project_id=1)

Search: for policy – Dress Code. Select *Professional presentation and Appearance (Dress Code)*. Highlights of the UNMH dress code policy include but is not limited to:

### **For All Students**

- Good personal hygiene is required, including bathing and grooming. Clothing must be neat, clean, wrinkle-free, and in good repair.
- Jewelry must be kept to a minimum. The use of jewelry should be in keeping with the professional and business functions of the organization. Jewelry that may interfere with job functions or possibly result in injury to the staff member or patient is prohibited. Dangling earrings and rings of excessive size or number, for example, can be dangerous to both staff and patient and generally would be considered inappropriate.
- Highly fragranced lotion, perfume, cologne and/or smoke odor must be avoided
- Hair must be worn in a way that prevents contamination and does not present a safety hazard; no unnatural hair colors.
- Mustaches and beards must be well groomed and closely cropped.
- Visible body piercing must be limited to minimal ear piercings.
- Tattoos and/or any form of body art must be covered during the clinical setting.

### **For Areas Involving Direct Patient Care**

- Footwear should be safe, supportive, clean, and non-noise producing; no open-toe shoes may be worn.
- Hose, stockings, or socks must be worn.
- Artificial nails are prohibited; natural nails must be kept short (no longer than ¼ inch beyond the fingertip) and clean.

## **Professional Conduct**

**Student must abide by the UNM Hospital Conduct/Supervision code as outlined at the following website:**

Title: HR 140 – Radiology-Student Supervision

Website: [https://hospitals.health.unm.edu/intranet7/apps/doc\\_management/index.cfm?project\\_id=1](https://hospitals.health.unm.edu/intranet7/apps/doc_management/index.cfm?project_id=1)

Professional conduct will be maintained by the student in the clinical facilities and in the classroom. This includes being considerate to fellow students and healthcare team members. Congregating and socializing in the patient reception areas, patient imaging rooms, radiopharmacy, and halls is not considered professional. HIPPA requires no discussion any patient information unless pertaining to the patient's care. Students are not to share any viewing of images with patients. Any unprofessional conduct will result in disciplinary action.

**Professional ethics demand that health personnel neither consume alcohol/drugs within the hospital nor arrive/return to the hospital after alcohol/drug consumption. Students who violate this policy will be excused from the clinic and appropriate disciplinary action will be taken. (See Disciplinary Policy).**

**Student must abide by the UNM Hospital policy on alcohol and drug use as outlined at the following website:**

**Title: HR 145 – Drug and Alcohol Free Workplace**

Website: [https://hospitals.health.unm.edu/intranet7/apps/doc\\_management/index.cfm?project\\_id=1](https://hospitals.health.unm.edu/intranet7/apps/doc_management/index.cfm?project_id=1)

The program has the right to randomly drug test the student throughout the duration of the program if abuse is suspected.

### Professional Attitude

Insubordination to physicians, clinical technologists, patients and staff will not be tolerated. Students in violation of this policy will receive disciplinary action. (See Disciplinary Policy).

### Suggestions for Academic and Clinical Success

Being a student in the Radiologic Sciences Program implies that you have made a commitment to the intensive educational process that is required. The responsibilities connected with this commitment are many. The program is committed to student success and thus offer the following suggestions as a guideline for meeting these commitments.

1. Prepare for and participate in class - Being prepared for class saves time (an important commodity) because it allows you to direct your questions toward areas truly requiring clarification rather than a general lack of knowledge. Remember also, that you contribute to your classmates' learning through your questions - as they do to yours. It is your obligation to read the material assigned. Your instructors will assume you have completed the material and may not cover it in class.
2. Keep up! – The CT/ MRI and Nuclear Medicine education is akin to learning a new language; the curriculum is progressive; each week builds on the last. Not only will you be better prepared for exams if you keep up with the work, but your stress level may be lower throughout the semester. This approach is particularly valuable in the first part of each semester, budget your time for studying.
3. Be active - Students of each class are asked to elect officers. Students participate in planning for Alumni events. Be willing to volunteer and to work with the members of the Health Professions.
4. Give constructive feedback - Student opinions are essential to program success. Student feedback can inform effectiveness of our educational planning. Students can make individual appointments with faculty and/or the Director to provide constructive feedback in a professional and courteous manner. Both compliments and constructive criticisms are welcome.

### Suggestions for Student Behavior

Recognize the need for and seek help from instructors as early as possible – All faculty are committed to student academic success and are willing to meet to discuss student needs and progress in the program. Feel free to make appointments with any faculty member as appropriate.

- Be courteous - Even in times of stress, strive to be courteous. Our staff, the faculty and your classmates will appreciate your efforts immensely and will certainly reciprocate. Try to remember that the faculty has your best interest in mind.
- Keep your sense of humor! Humor often lowers stress.
- Manage stress in a balanced fashion and be a role model for others around you.
- Be responsible for yourself - Students admitted to the program are accepted with the understanding that they are adults and able to exercise control over their own lives. For this reason, it is deemed inappropriate for parents/family members/significant others to become directly involved with matters that arise which are between the student and the program.

## Patient Care

Patient care is the primary concern at UNMH, VAH, and all other clinical facilities. Respect for patient dignity is required of all students. Students are not to discriminate against patients or members of the healthcare team according to race, culture, ethnicity, gender and /or disabilities. Patient medical records are confidential. **Patient information may NOT be discussed with any patient or student in a non-professional context.** Students are expected to treat each patient with respect and dignity. A kind word, fresh linens, explanation of procedure, and keeping patients covered at all times are just a few of the ways to make their experience more pleasant. Each patient should ALWAYS be treated with the kindness, courtesy and respect one would wish for an immediate family member.

## Health Information Portability and Accountability Act (HIPAA)

All verbal, electronic, and written information relating to patients/clients and contracted agencies is considered confidential and is not to be copied or discussed with anyone. Information may be disclosed only as defined in HIPAA guidelines for educational purposes. Breach of confidentiality will result in disciplinary action, up to and including dismissal from the program and or course. Website: [https://hospitals.health.unm.edu/intranet7/apps/doc\\_management/index.cfm?project id=1](https://hospitals.health.unm.edu/intranet7/apps/doc_management/index.cfm?project id=1)

**Students are cautioned that ONLY a physician may discuss diagnoses/possible diagnoses with the patient or other physicians.** Students must take extreme care not to practice outside of the scope of practice while in the program. This includes denying telephone requests for diagnoses of examinations. The caller is to be referred to a physician. Any deviation from this regulation will NOT be tolerated and will result in disciplinary action, up to and including dismissal from the program and or course.

## Study Interpretation Policy

- **All interpretation of results to clinicians must be performed by Radiology Resident or Staff Physician. No exceptions.**
- All reporting of results will be completed by Radiology Residents or Staff Physicians if available. This includes telephone inquiries as well as in-person requests for exam results.
- It is understood that patients are not to be given results of any procedure performed. All patients will be referred to the primary physician for results.
- Medical Imaging students will not show images to any patient.

## Injection Policy

- **All injections (including radioactive sources) must be performed under the direct supervision of a certified Medical Imaging technologist.**
- A student may only inject with the permission from a supervising certified technologist. See Appendix H for information on adjunctive medications.

## Collimator Change Policy

- **All collimator changes must be performed under the direct supervision of a Nuclear Medicine technologist. If a certified technologist is not present, the collimator may not be changed.**
- Nothing is allowed to be placed on top of any collimator. (No paper clips, flood phantoms, notebooks, etc.) No exceptions.

## Practical Curriculum

Nuclear medicine students will perform clinical nuclear medicine procedures, instrumentation quality assurance, radiopharmaceutical preparation/quality assurance, and other procedures under the direct supervision of staff Nuclear Medicine Technologists or the Program Director at individual clinical sites.

CT and MRI students will perform clinical CT/ MRI procedures, quality control procedures, and contrast media preparation and injection, and other procedures under the direct supervision of staff Radiologic Technologists or the clinical instructor at individual sites.

## Competency Evaluations

Performance objectives for the clinical practicum will be tested using a task-oriented evaluation competency database. Students are encouraged to attempt new tasks/ exams early in the practicum to gain as much clinical experience as possible. Students are technologists-in-training and must realize, however, that staff technologists will not allow errors in patient care to go uncorrected and may, upon occasion, deny the student performance of a procedure if the patient's physical/emotional condition warrants. Completion of all competencies should reflect entry-level performance of each exam by the student. Because of this expectation, the clinical instructor plays a crucial role in determining the level of clinical skills of our graduates. Evaluations will be discussed with each student on an individual basis and retained in the student's personal file. At the conclusion of each practicum, a written examination covering the clinical objectives will be given and retained in the student's personal file.



## Mobile Device

Students participating in the Radiologic Sciences clinical program will be required to purchase or use a mobile device to track the student clinical experience while attending the program. It may also be utilized as a storage and retrieval device for class materials, clinical protocols and recording daily clinical records.

List of mobile devices:

- Apple iPod Touch
- Apple iPhone
- Apple I Pad and I Pad mini
- Android Phone/ Tablet

## Mobile Device Policy

MRI/ CT students are required to submit weekly databases from the mobile device.

- Students have the option to purchase additional software for their personal computer at home, to synchronize databases. Students will be responsible for any lost clinical data.

**Students are not allowed to photograph, record or video tape patient's interactions, procedures or any related information. No Exceptions. Violation of this policy is against federal law and may result in legal disciplinary action including dismissal from the program.**

## CLINICAL ROTATIONS

### Nuclear Medicine Clinical Rotation Hours (*subject to change*)

The following clinical rotations will be in effect:

VAH Imaging/Cardiac	7:00 – 3:30
VAH Radiopharmacy/Laboratory	6:00 – 2:30
VAH General Imaging	7:00 – 3:30
UNM Hospital Radiopharmacy/Laboratory	6:30 – 3:00
UNM Hospital General Imaging	7:00 – 3:30
UNM Hospital Cardiac Imaging/Access	7:30 – 4:00
UNM PET/CT Imaging	7:00 – 3:30
Lovelace (NMHI) Cardiac Imaging	7:00 – 3:30
Christus St. Vincent General	6:30 – 2:30 Week 1 7:30 – 3:30 Week 2
Lovelace Medical Center	6:00 – 2:30

**Advanced Imaging Clinical Rotation Hours** (subject to change)

**Monday/ Wednesday, Tuesday/ Thursday, and or Friday/ Saturday rotations are available.  
(2) 10 hour shifts / week required.**

The following clinical rotations will be in effect for MRI:

PRES Main	8:00 – 6:00 (Mon. - Sat.)
PRES Kaseman	8:00 – 6:00 (Mon. - Sat.)
PRES RUST	8:00 – 6:00 (Mon. -Sat.)
UNMH	8:00 – 8:00 (Mon. –Sat.)
UNMH OSIS	8:00 – 6:00 (Mon. -Sat.)
SRMC	8:00 – 6:00 (Mon. -Th.)
Christus St. Vincent	8:00 – 6:00 (Mon. -Sat.)
Optum	8:00 – 6:00 (Mon. -Sat.)

The following clinical rotations will be in effect for CT:

PRES Main	8:00 – 6:00 (Mon. -Sat.)
PRES Kaseman	8:00 – 6:00 (Mon. - Sat.)
PRES RUST	8:00 – 6:00 (Mon. - Sat.)
UNMH	8:00 –6:00 (Mon. -Sat.)
UNMH OSIS	8:00 – 6:00 (Mon. –Sat.)
SRMC	8:00 – 6:00 (Mon. -Th.)
Christus St. Vincent	8:00 – 6:00 (Mon. -Sat.)
Optum	8:00 – 6:00 (Mon. -Sat.)
Lovelace	8:00 – 6:00 (Mon. -Sat.)

Note: some clinical sites have limited clinical hours available.

**CT/ MRI Clinical Schedule: 2020-2021**

**Clinical start dates may vary from UNM academic calendar.**

Fall Semester dates: August 31 to December 5, 2020

Fall break: October 8-9, 2020 (10 Clinical hours required)

Thanksgiving break: November 26-27 2020 (10 clinical hours required)

Spring Semester dates: January 19 to May 8, 2021

Spring break: March 15-19, 2021 (No clinical hours required if competency goal is complete)

Summer Semester dates: June 7, to July 24, 2021

Independence Day: July 4, 2020 (10 Clinical hours required)

Note: The CT and MRI academic courses follow the UNM Campus Calendar

## **Nuclear Medicine Clinical Teaching Staff**

### **Veterans Administration Hospital**

Department Supervisor: Nicole Lucero, B.S., CNMT

**Clinical Site Preceptor: Ernesto DeLilla, B.S., RT (N), CNMT**

Staff Technologists: Gabriel Munoz, B.S., RT (N), CNMT

Moises Rosales, BS, CNMT, RT (N)(CT)(MR)

Jenny Molden, B.A., B.S., RT(N)(CT), CNMT

Minh Phan, B.S, RT (N), CNMT

### **UNM Hospital**

**Department Supervisor/**

**Clinical Site Preceptor: TBA – Currently Christopher Wallace**

Staff Technologists: Brad Kappenman, B.S., CNMT

Utashni Bhakta, B.S., CNMT, RT (N) (CT)

Melissa Hess, B.S., CNMT, RT(N) (CT)

Laura Morillon, B.S., CNMT, RT(N) (CT)

Karyn Estrada, B.S., CNMT, RT(N) (CT)

Felicia Vaisa, B.S., CNMT, RT(N)

Matthew Silva, B.S., CNMT, RT (N) (CT)

Tess Moraga, B.S., CNMT, RT (N) (CT)

### **Christus St. Vincent Hospital**

Radiology Manager: Yvonne Bieg-Cordova

**Clinical Site Preceptor: Feliz Vigil, B.S., RT (N) (MRI), CNMT**

Staff Technologists: Timothy Valdez, RT

**Lovelace New Mexico Heart Institute**

Department Supervisor: Albert Brieden, B.S., CNMT

**Clinical Site Preceptor: Albert Brieden, B.S., CNMT**

Staff Technologists: Janet Berry, B.S., CNMT

Kiahle Swaziek, B.S., RT (N) (MRI), CNMT

Jeremy Seymour, B.S., RT (N), CNMT

**Lovelace New Mexico Heart Institute**

Department Lead: Ruben Ceballos, CNMT

**Clinical Site Preceptor: Ruben Ceballos, CNMT and Lisa Buss, BA, RT(N), CNMT**

Staff Technologists: Lisa Buss, BA, RT(N), CNMT

Greg Clark, RT(R) (N), CNMT

Maryanne Calonico, B.S. RT(R) (N), CNMT

Crista Wilson. B.S. RT(R) (N), CNMT

Lynnette Trujillo, M.S., B.S., RT (N), CNMT

Alyssa Rivera, B.S. RT (N), CNMT

**Clinical Coordinator, Instructor, and Preceptor**

**Clinical Coordinator:** The UNM faculty member that serves as the liaison between the Radiologic Sciences program and the clinic sites that provide clinical training to the students; monitors all student documentation and may assign final clinical grades.

**Clinical Instructor:** The UNM faculty member authorized to visit clinic sites and to report to the Clinical Coordinator; provides clinical support and direction to Clinical Preceptor and students.

**Clinical Supervisor and/or Preceptor:** The technologist at each clinic site that provides clinical support and direction in the training of students and communicates with the Clinical Coordinator, Program Director and Clinical Instructors.

**Clinical Staff Technologist.** Refer to Clinical Preceptor / Supervisor for direct clinical requirements defined below.

## **Requirements, Knowledge, and Skills for Clinical Site Preceptors, Instructors and Coordinator**

- Provide assistance to clinical preceptor for obtaining yearly updated resume.
- Be available to interact with students and if not, provide information to another participating clinical Instructor/supervisor (Weekend and swing shift of rotating students).
- Participate in faculty development activities.
- Become familiar with ARRT/ NMTCB practice and standards for completing competencies.
- Provide guidance with ARRT/ NMTCB competency requirements.
- Provide access to break room and locker room for student.
- Be available to interact with students at least once a week.
- Perform competencies for students and provide guidance to other technologists performing the task.
- Communicate effectively with Clinical Coordinator/Instructors/Preceptors on a weekly basis via text or e-mail &/or in person.

### **Clinical Instructor Duties and Responsibilities**

- Make weekly site visits
- Assist database grading
- Provide instruction and clinical teaching in courses pertinent to area of study
- Provide image evaluation
- Tracks and reports student progress
- Provide support and direction to Clinical Preceptor and technologists
- Provide support and direction to student

### **Clinical Coordinator Duties and Responsibilities**

- Assist in maintaining and posting clinical schedules
- Review radiation reports with students
- Ongoing verification and update of clinical handbooks in clinical site
- Clinical compliances for students (immunizations)
- Maintain clinical affiliation contracts
- Obtain weekly databases and grade or assist with clinical courses
- Make weekly site visits
- Drug screening, background checks, finger printing, and certification verification
- Assist with providing image evaluation
- Coordinate radiation safety training
- Assist in updating clinical databases
- Oversee training for Clinical Preceptors and staff

## **ATTENDANCE POLICIES**

In order to gain certification in Advanced Imaging or Nuclear Medicine Imaging, students are required to spend 11-14 months rotating in the clinical affiliation sites. Students are required to be present for all scheduled classes and clinical education assignments. Tardiness or absenteeism will not be permitted. All absenteeism, regardless of reason, will be recorded and may negatively impact the final student grade. The Program Director may count any tardy as an absence.

## Didactic

The student is expected to attend all scheduled didactic courses. If a student misses more than 2 scheduled class periods, the student will receive a deduction in points as described in course syllabus.

## Clinical

The student is expected to attend all scheduled clinical rotations. Daily attendance will be recorded on each student's mobile device. Students are required to have a supervising technologist sign in and sign out both their arrival and departure times on the mobile device. **Students are required to sign in as soon as they arrive in the clinical setting. Failure to do so will result in tardiness.**

It is the expectation that you are present for each and every clinical shift. However; students are permitted to miss (2) shifts per semester (Fall and Spring) and (1) shift in Summer without academic penalty. Below is further information regarding absenteeism:

- Students can miss up to (2) days for discretionary days per semester for Fall and Spring and (1) day for Summer.
- Students can miss up to (2) days of sick leave per semester
- Note: During the summer semester, students can miss up to (1) discretionary day and (1) sick leave day per semester.

If a student misses more than (2) shifts they will receive a full letter grade reduction. Students missing more than three (3) shifts will receive advising and will be placed on clinical probation. Further clinical absenteeism may result in removal from the program. Clinical attendance will be reflected in the clinical grade. The following procedures will apply to clinical attendance:

### Lateness or Absenteeism

Students must initiate contact by calling the clinical site and emailing their assigned Radiological Sciences' clinical instructor and clinical site at the beginning of the scheduled shift if they will be late or absent, or if they need to leave early. Additionally, students must e-mail the Clinical Coordinator at least thirty (30) minutes before the beginning of the scheduled shift if they will be late or absent or immediately when they know they will be leaving early. No show/no call will result in a referral to the Program Director and will be reviewed for disciplinary action.

The following procedures must be followed regarding schedule changes:

Instructions on how to call in for missed clinic:

- Contact clinical Coordinator before start of shift (30 minutes prior)
- Contact clinical site (30 minutes prior)
- Missed clinical site information needs to be submitted with clinical database submission and or e-mail to clinical instructor.

### All Clinical Students

1. Students who have excessive absences- see # 8 below.
2. This is exclusive of the scheduled lunch break. **Students may not work through lunch in order to leave clinic early.** 30 minutes are provided for students to attend lunch and does not affect their total 10 hour scheduled shift.
3. Identify excesses absences- See # 8 below.

### CT/MRI Students ONLY

1. Students are responsible to attend the entire (10) hour shift to receive full credits for the hours attended. Each hour in clinic is equal to (1) point per hour.
2. Students do not receive partial points for hours worked. For example, if a student works 9.5 hours, the student will only receive 9 points for that shift.
3. Schedule changes must be initiated by the clinical site and approved in advance by Program Director or Clinical Coordinator prior to the date(s) involved. All procedures listed above apply to any new schedule approved. This is due to the nature of the clinical assignments and the limited access to clinical sites.
4. Scheduled changes for time off must be submitted one week prior to gain approval prior to the time of schedule change. Changes need to be approved by both the Radiologic Sciences Department and the clinical site Supervisor.
5. Any change to the clinical schedule must be submitted in writing to the clinical coordinator. (Kathy Roberts at [kkrobe@salud.unm.edu](mailto:kkrobe@salud.unm.edu))
6. Students can miss up (2) days of sick leave per semester- except during the Summer semester. Any days in excess of the two days will require a doctor excuse. Students have the option to access to their own physician and or visit SHAC to obtain the Doctors excuse. If the clinical site requires documentation it will need to be cleared through SHAC before the student is allowed back in clinic.
7. Students can miss up (2) days of discretionary leave per semester. If a student exceeds the two days, an academic penalty will apply, and will need approval by the Director. Excessive absences can result in academic dismissal from the program.
8. Excessive absences beyond the 2 discretionary and 2 sick days, will result in a 10% penalty deduction per total clinical hour grade. Example, during the Fall semester, total clinical points equals 300 therefore a 10% deduction would be minus 30 points for each additional absence.
9. Make-up time must be approved by the Clinical Coordinator and Clinical Supervisor one week prior to approve any clinical changes to the schedule.
10. MRI class attendance is a course requirement. Two absences (2) per semester will result in a total point reduction penalty. (10) points will be deducted for each class absence after the allotted two days/semester. Students are allowed only one (1) absence during the Summer Semester.

CT and MRI currently utilize a block schedule for clinical rotations. Students are required to work a minimum of 20 hours per week. Students work 10 hour shifts twice per week. The available shifts are Monday/ Wednesday, Tuesday/ Thursday and or Friday/ Saturday.

Note: when students attend MRI or CT class, they are excused from clinic to attend class, but the hours missed need to be made up within the week or directly after class time.

Any change to the clinical schedule must be submitted in writing and approved by the Clinical Coordinator and Clinical Supervisor.

### Scheduled Absences

If a student knows in advance that they will not be in clinic (due to doctor's appointment, etc.) they must submit in writing to the Clinical Coordinator and Clinical Supervisor at least 24 hours in advance.

The Clinical Coordinator will decide if the missed clinical hours must be made up prior to the end of the semester and the student may be required to remain beyond the scheduled date of program completion to fulfill required clinical hours and or clinical requirements.

## Lunch

- Students do not have scheduled lunch periods during clinical rotations, but a minimum of 30 minutes will be assigned by the supervising staff technologist. This applies to students who perform a clinical rotation more than six hours in duration.

## Down Time

During periods when there are no clinic patients or equipment is down, students are expected to restock rooms and help with any clinical exams per the clinical preceptor or technologist they are shadowing. The student should check with their clinical preceptor and gain permission to work on classwork or read program related material.

## Leaving Early

Students are allowed to leave early with the approval of both the Clinical Coordinator and Clinical Supervisor. There are special circumstances when the Program Director will have the students leave early for guest lecturers or laboratory sessions. Any time a student leaves early, it must be recorded as such on the student attendance record. In addition, students are required to contact the Radiologic Sciences Program or the clinical instructor to provide explanation for leaving early. Student may be required to work in the Radiologic Science department to fulfill clinic hours. Department contact: 505-272-5254

## Leave and Holidays

The following holidays are observed at the University of New Mexico Hospital (UNMH):

Labor Day	Christmas Eve	New Year's Day
Thanksgiving Day	Christmas Day	Memorial Day
Day after Thanksgiving Day	New Year's Eve	Independence Day

The VAH observes several holidays (Columbus Day, Veteran's Day, and President's Day) that UNM does not. Students who are assigned to the VAH on federal holidays not observed at UNM will arrange with the Clinical Faculty/Clinical Coordinator to either make up the clinical hours, or report to a different clinical site on that day.

Religious holidays can be observed with prior notice provided to the clinical instructor.

## Snow Delays and Cancellations

It has been noted that UNM tends to announce delays and cancellations late at night or early in the morning due to weather concerns. The late announcement can make it difficult to decide whether to go into clinic or not. As a result, we follow the Albuquerque Public Schools (APS) schedule regarding clinical attendance. For example, If APS goes on a delay, then clinical start time will also follow the delay. Students will not be penalized for going to clinic late due to weather issues. If APS cancels, then do not go to clinic. Note this only applies to clinic. You may still be required to go to



classes in the afternoon dependent upon UNM closures or delays. Faculty will notify students by phone, text, or email for delay or late arrival time.

Those students that live in the East Mountains will follow the East Mountain School delay and cancellation schedule. Students rotating in Santa Fe at Christus St. Vincent will follow the Santa Fe Public Schools delay and cancellation schedule.

**Discretionary Leave (Does not apply to BSRS Students)**

Clinical students are allowed discretionary days each semester (16 hours for nuclear medicine and 20 hours for CT and MRI). (See chart below) Discretionary leave is defined as a personal day. This does not include sick days (see below). Discretionary leave should be reserved for family emergencies or other personal circumstances. Students must notify the Radiologic Sciences Program Director and/or Clinical Coordinator of their program as well as the Clinical Supervisor of the clinical site as soon as possible with any changes to the schedule. If a student does not use their discretionary leave by the end of the semester, the student may utilize these hours during finals week. **Discretionary leave hours will not be carried over into the next semester.** Use of discretionary leave DOES NOT excuse a student from making up assignments that are due or making up a scheduled exam. Discretionary leave for CT and MRI students must be used before being allowed to make changes to the clinical schedule.

Semester	CT/MRI Students	NM Students
Fall	20 hours	16 hours
Spring	20 hours	16 hours
Summer	10 hours	8 hours (2 <sup>nd</sup> year students)

**Sick Leave - Does not apply to BSRS Students**

All clinical students are allowed sick days. If a student calls in sick for the day, he/she will receive credit for the day (i.e. If points are given for attendance or hours in clinic, the student will not be penalized and will receive the points). If a student calls in past two days, the student is required to bring in a doctor’s note in order to be excused. Otherwise, all absences past the second day will be recorded as unexcused and points will be deducted. In the event the student has excessive sick days, or it appears to be a pattern, the student will be brought in for counseling and could result in dismissal from program.

**Nuclear Medicine students must inform the Program Director and Nuclear Medicine Faculty of any pre-existing conditions that may potentially affect the students’ ability to perform clinical duties (i.e. Migraines).**

**If the student is sick and may be “contagious” DO NOT GO TO CLINIC.** The Student Health Center on main campus is available for physician care. Contact for Student Health: 505-272-3136.

**COVID Pandemic Exemption**

In the event a student contracts COVID-19, sick leave allowance will be adjusted based on CDC guidelines. A student will not receive any course or clinic penalty based on time off due to COVID.

SICK LEAVE	CT/ MRI Students	NM Students
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Fall See # 8 above	2 Sick Days, any further occurrence of sick days needs Physician note	2 Sick Days, any further occurrence of sick days needs Physician note
Spring See # 8 above	2 Sick Days, any further occurrence of sick days needs Physician note	2 Sick Days, any further occurrence of sick days needs Physician note
Summer See # 8 above	1 Sick Day, any further occurrence of sick days needs Physician note	2 Sick Days, any further occurrence of sick days needs Physician note

If the Program Director and/or Clinical Coordinator feel that a student is unable to perform their clinical duties due to an injury or illness, then the student may be required to leave clinic. The Program Director and/or Clinical Coordinator and or Clinical Supervisor will decide when a student may return to clinic based on the documented physician release provided to the program.

**CT/MRI Clinical students must call the Radiologic Sciences Program (505-272-5254) and the assigned Clinical Supervisor within 30 minutes before the start of the clinical rotation.** When leaving a message, identify yourself, and provide the anticipated time of return to the clinic site. Failure to notify faculty and the clinical site will result in an unexcused absence. Clinical students must follow the call-in procedure as listed below.

**Nuclear Medicine students must call/text the Program Director and Nuclear Medicine faculty at least 1 hour before the start of the clinical rotation; 2 hours if clinical rotation is in Santa Fe.** In addition, the student is responsible for contacting the clinical supervisor and technologist whom he/she is working with and notify them of their absence. Not doing so will warrant a student write-up.

Note: The Program Director and/or Clinical Coordinator will decide if missed clinical hours must be made up prior to the completion of the semester and students may be required to remain beyond the program completion date to complete clinical requirements.

### Bereavement Leave

Student will make arrangements with the Program Director and Clinical Coordinator to make up clinical and didactic coursework. Bereavement leave is granted for immediate family only (parents, siblings, spouse, domestic partner, grandparents, and children). All others the student will have to utilize a discretionary day.

Please notify the program immediately following a death in the family so class/clinical adjustments can be made. The program will take into consideration cultural traditions.

<https://pathfinder.unm.edu/campus-policies/class-absences-and-student-attendance.html>

### Religious Leave

Religious leave will follow the UNM University policy and dates included.

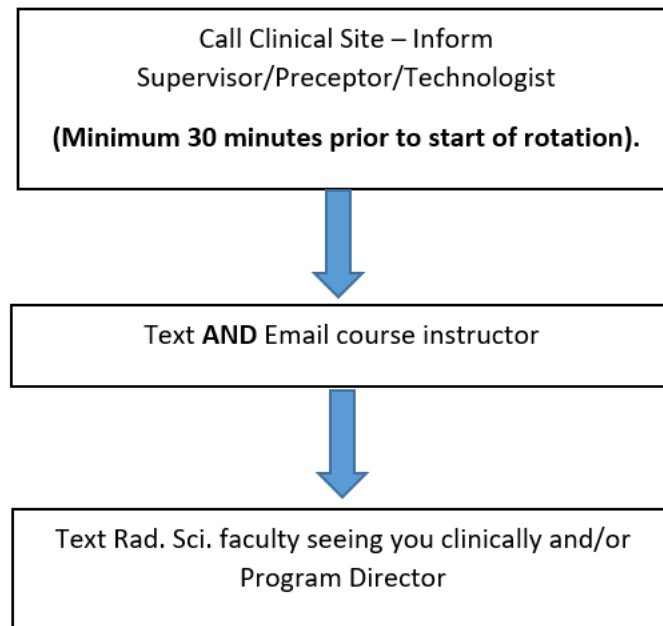
<https://diverse.unm.edu/news-events/religious-observances.html>

Prior notice will be required to notify the clinical site and the Radiologic Sciences Department. The student will be responsible for clinical and academic coursework.

## Call In Procedure

Clinical students should first inform the clinical site at least 30 minutes prior to the clinic start time. The process for calling in should be to inform the supervisor/preceptor and the technologist at the clinical site. Secondly, the student needs to email and text the course instructor with the details of the absence. Thirdly the student should inform the radiological faculty of the absence. (This can be done by email or text). Database submission should include the explanation and date of the absence.

Review the flow chart below:



## Outside Employment

### Employment as a Student

Outside Employment in Nuclear Medicine Program: Due to the intensity of the Nuclear Medicine Program, the program recommends that students do not work during the program. However, if you need to or elect to work, your employment hours cannot interfere with attendance requirements of the program. Likewise, employment during clinical rotations must also be outside of rotation time. Typical class time on campus is between 6:00 am – 5:00 pm, Monday through Friday. Typical clinical rotation times are 6:00 am to 5:00 pm, Monday through Friday

Nuclear Medicine Employment: National standards and state licensure does not allow students to perform Nuclear Medicine examinations in the role of a technologist or student technologist. Students will need to have completed the national certification through JRCNMT and/or ARRT- Nuclear Medicine. Students also need to be awarded a State of New Mexico Medical Imaging and Radiation Therapy Program License through the State of New Mexico before practicing in Nuclear Medicine. At no point will students be substituted for regular staff.

## HEALTH REGULATIONS AND POLICIES

### General

Students **must be** covered by adequate health/major medical insurance, including hospitalization coverage (with a company of their choice) throughout the entire program. Students are eligible to

participate in the student health insurance program available through the University of New Mexico AcademicBlue UNM Student Health Plan or AHP. It is the student's responsibility to decline the UNM provided healthcare coverage each semester.

Students must present evidence of having a physical examination which must include complete blood count, urinalysis, and PPD results, within six months prior to program entry. In addition, immunization for Hepatitis B is **required**. Physicals and the Hepatitis B series are available through the Student Health Center. This information is reviewed during summer orientation.

The Radiologic Sciences Program reserves the right to request additional information or a physical examination if the student is experiencing prolonged or chronic illness. Failure to fulfill clinical requirements may result in dismissal from the program.

Students are cautioned to maintain a professional attitude toward their personal health at all clinical sites. Faculty and resident physicians should not be asked to diagnose, treat or prescribe medication for students.

### Student Health Center and Counseling (SHAC)

SHAC is a comprehensive outpatient health care service for UNM students. It provides essentially the same kind of health facilities that would be provided at private clinics but at a greatly reduced cost to the student. This is due to budgetary funding allocation from student fees. Fees are charged for lab tests, x-rays, infirmary admissions, procedures and medication. The center provides immediate care under the walk-in service. The SHAC is located on the main campus north of Johnson Center and across the mall from (east of) the Student Union Building (SUB).

Limited patient parking is available behind Student Health & Counseling. Students may obtain parking permits from the SHAC Reception Area, Counseling Services, or the Pharmacy. SHAC provides medical care, counseling and therapeutic services, and health education.

**SHAC is open Monday - Friday, 9:00 AM - 5:30 PM.** (The last appointment of the day is at 5:30 PM.) SHAC is closed on all official UNM holidays (and campus closures due to weather/unforeseen circumstances).

Medical services include primary medical care by appointment and a walk-in clinic. Specialty consultations are also available in allergy, dermatology, internal medicine, nutrition, physical therapy, podiatry, psychiatry, and surgery. There are separate Women and Men's Health Services, plus an Allergy & Immunization Clinic which offers routine and travel immunizations. All patient information is held in strict confidence. Student Health and Counseling (SHAC) services are available to all currently enrolled UNM students.

For information on health insurance and fees for services, please visit the SHAC website, listed below. Or call Student Health & Counseling at 505-277-3136.

Website: <http://shac.unm.edu/>

### Health Insurance Available

#### Undergraduate Students

All students are required to show proof of health insurance coverage each semester. It is the student's responsibility to notify staff when/ if health coverage expires or is no longer valid.

**To ensure that all students will be covered, each student will automatically be billed for UNM Student Health Insurance (AcademicBlue Student Health Plan or AHP) at the beginning of the fall and spring/summer sessions unless you formally waive the insurance**

**Waiver procedures and deadline information are available at**

Website AcademicBlue: <https://unm.myahpcare.com/>

Website: <https://hr.unm.edu/benefits/student-health-plan>

To purchase medical group insurance please visit:

Website: <https://hr.unm.edu/benefits/student-health-plan>

According to the University of New Mexico Health Science Center Affiliation Agreement Section V, Item D:

***“In the event of injury to a Student at the Clinical Facility, the Student will seek treatment at a facility selected by the Student. If necessary, the Clinical Facility will provide emergency medical treatment to Students while they are assigned to the Clinical Facility. **The cost of such treatment will be paid by the Student or the Student's third party payer.**”***

If you need further assistance, call 505-277-3136 to schedule an appointment with a Health Insurance Navigator.

## **Background Check**

All students will be required to complete and pass a New Mexico Department of Health and Presbyterian Health Systems background check, arranged by the Medical Imaging program, prior to assigned clinic rotations. Students will be responsible for the cost of the test.

## **Urine Drug Screening**

All students will be required to complete a 10 point urine drug screening test, arranged by the Radiologic Sciences Program, prior to assigned clinic rotations. Students will be responsible for the cost of the test. Students are subject to random drug tests through-out the program at the discretion of the Radiologic Sciences Program.

## **Universal Precautions**

**The following are universal precautions and will be observed by all Radiologic Sciences students while participating in the program:**

- *Hands*  
Hands should always be washed before and after contact with patients. Hands should be washed when gloves are used. If hands come in contact with blood, body fluids or human tissue, they should be immediately washed with soap and water.
- *Gloves*  
Gloves will be worn when contact with blood, body fluid, tissues or contaminated surfaces are indicated. Gloves are required when performing IV injections.

- *Gowns*  
Gowns or plastic aprons are indicated if blood splattering is likely.
- *Masks and Protective Goggles*  
Masks and protective goggles will be worn if aerosolization or splattering are likely to occur such as in certain dental and surgical procedures, wound irrigations, post-mortem examination and bronchoscopy.
- *Emergency Equipment*  
To minimize the need for emergency mouth-to-mouth resuscitation, mouth pieces, resuscitation bags, or other ventilation devices are strategically located and available for use in areas where the need for resuscitation is predictable.
- *Sharps*  
Sharp objects should be handled in such a manner as to prevent accidental cuts or punctures. Used needles should not be bent, broken, reinserted into their original sheath or unnecessarily handled. They should be discarded intact immediately after use into an impervious needle disposal box which should be readily accessible (placed in all clinical areas, including patient rooms). All needle stick accidents, mucosal splashes or contamination of open wounds with blood or body fluids will be reported immediately to the Clinical Coordinator and Clinical Supervisor.
- *Blood Spills*  
Blood spills will be cleaned up promptly with a disinfectant solution as provided by the clinical site
- *Blood Specimens*  
All patients' blood specimens will be considered biohazardous.
- *COVID Requirements*  
Students will wear masks in clinic at all times unless eating or drinking. Students need to follow CDC and state guidelines when in the clinical environment. Students are to practice social distancing when possible.

### Accident/Injury/Needle Stick Procedures –See Appendix B

The student will report any accident/injury immediately to their Clinical Site Instructor and Clinical Faculty/Clinical Coordinator, and will begin following the UNM SOM needle stick accident protocol, as seen below.

The form to be filled out when a student received a needle stick is under "Obtaining Medical Care" Website: <https://shac.unm.edu/services/allergy-immunization/blood-body-fluid-exposure.html>

This is the statement from the site:

The student should notify his/her supervisor immediately. The supervisor and student should fill out a UNM Notice of Incident form. This form needs to accompany the student to his/her evaluation for treatment.

The incident form is located in the Handbook- Appendix C, or downloaded from the following link: Website: <http://policy.unm.edu/common/documents/6150-exhibit-d.pdf>

### **Students need to report to the following departments if an accident/ injury or needle stick occurs:**

1. Student needs to notify the Clinical Coordinator and the Clinical Supervisor immediately upon exposure/ incident.

2. After accidental exposure/ or incident occurs, the student is to report to SHAC on main campus. SHAC is open during normal business hours of 8:00 to 5:00 PM.
3. After hours, the student needs to report to the clinical site ER or student's choice for medical care. The student needs to notify ER personal immediately regarding the incident so that treatment is not delayed.
4. Student needs to have Appendix forms B and C filled out with a copy provided to the Radiologic Sciences program.

## **OBTAINING MEDICAL CARE FOR EXPOSURES for Blood & Body Fluid Exposure/Needle-Stick**

### **1. When an exposure occurs:**

Wounds and skin sites that have been in contact with blood or body fluids should be washed with soap and water; mucous membranes should be flushed with water. There is no evidence that the use of antiseptics for wound care or expressing fluid by squeezing the wound further reduces the risk for HIV transmission. However, the use of antiseptics is not contraindicated. Use of caustic agents, e.g., bleach is not recommended.

### **2. Medical Evaluation:**

It is very important that medical evaluation take place immediately because treatment decisions must be made within 2 hours after exposure. HIV prophylaxis for high-risk exposure appears most effective if started within 2 - 4 hours. It is also extremely important to evaluate the donor's risk status immediately. UNM Student Health and SHAC will provide guidance.

### **3. Medical Evaluation Facilities:**

The student should report IMMEDIATELY to UNM Student Health & Counseling (SHAC). SHAC Hours: 9 am to 5:30 pm, Mon. through Fri. Hours are subject to change.

Website: <http://shac.unm.edu/>

Outside of these hours, the student should go IMMEDIATELY to the nearest emergency room associated with the clinic or office where the incident occurred for the initial evaluation. Follow-up can be done at SHAC. (Do not go to UNM Employee Occupational Health unless you are a student employee and the exposure occurred after business hours).

The student should notify his/her supervisor and clinical instructor immediately. The supervisor and student should fill out a **UNM Notice of Incident form (Appendix C)**, located in the clinical handbook. This form should go with the student to his/her evaluation for treatment.

Note: If the incident occurs at the VA Hospital, the VA Employee Health Clinic will do the initial evaluation.

Note: The supervisor and student should also fill out a **UNM RADIOLOGIC SCIENCES PROGRAM STUDENT ACCIDENT/INJURY REPORT (Appendix B)**.

### **4. Laboratory Testing/Treatment:**

a) To determine whether treatment of the student is necessary, blood must be drawn from the patient/donor to evaluate Hepatitis B, C, and HIV status. Call the Infection Control Nurse or Nursing Supervisor to order these tests on the patient/donor. The Infection Control Nurse (7 am to 4 pm) or Nurse Supervisor (after hours) should review the medical record, question the patient/donor about risk factors, and obtain the patient's/donor's consent to do the tests necessary to evaluate their health status.

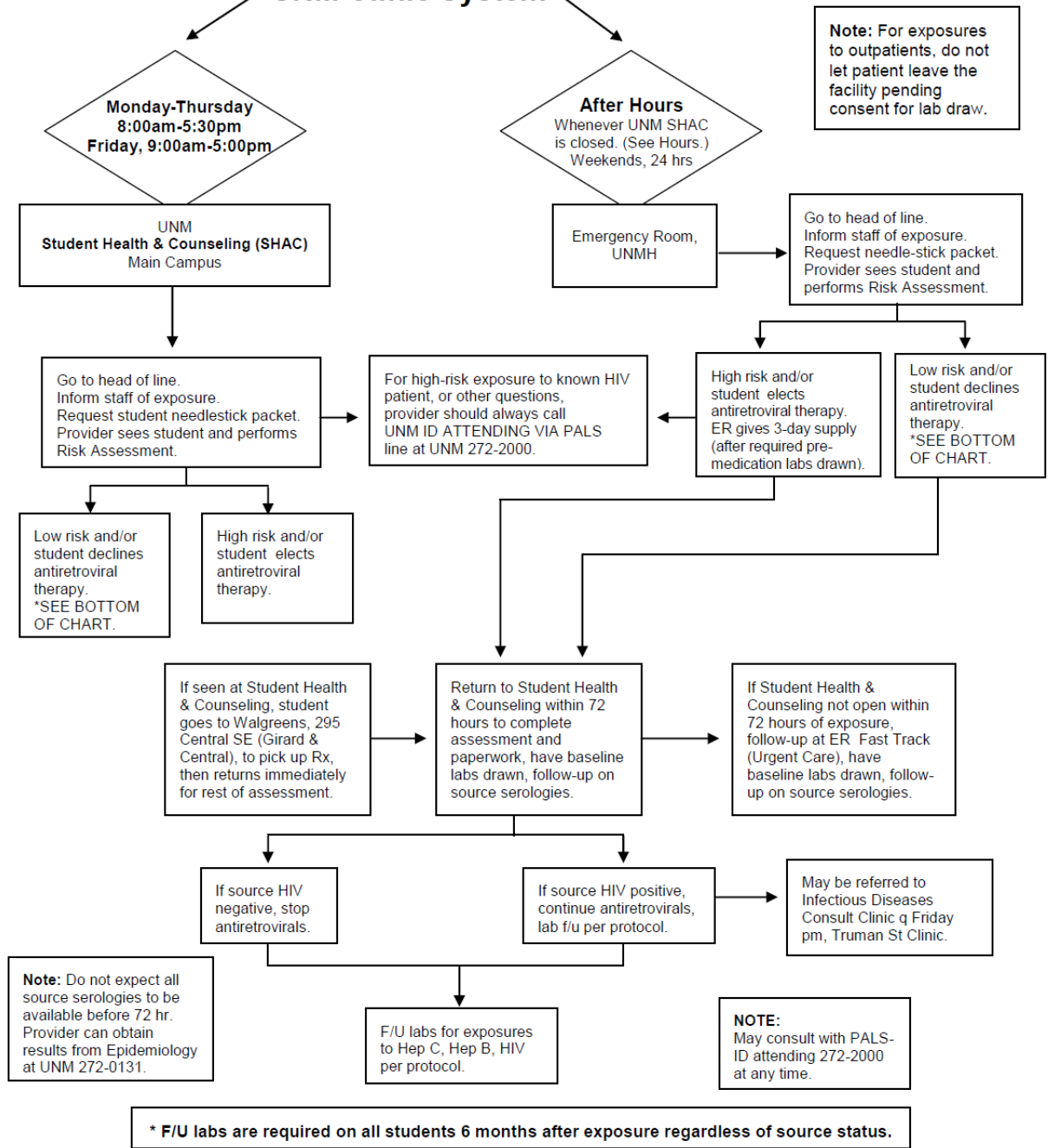
b) If the exposure occurs in an outpatient setting (and these tests cannot be done), send the patient/donor to Student Health & Counseling (SHAC) with the exposed student for evaluation.

**5. For more information on testing and treatment decisions or protocols:**

- PALS line, Infectious Disease physician on call: (505) 272-2000 or 1-888-UNM-PALS (1-888-866-7257)
- Student Health & Counseling (SHAC): (505) 277-3136 (Mon. through Fri., 9 am to 5:30 pm. Hours are subject to change; check website [shac.unm.edu] for updates.)
- Student Health & Counseling (SHAC) Needle-Stick Web Page:  
<https://shac.unm.edu/services/allergy-immunization/blood-body-fluid-exposure.html>

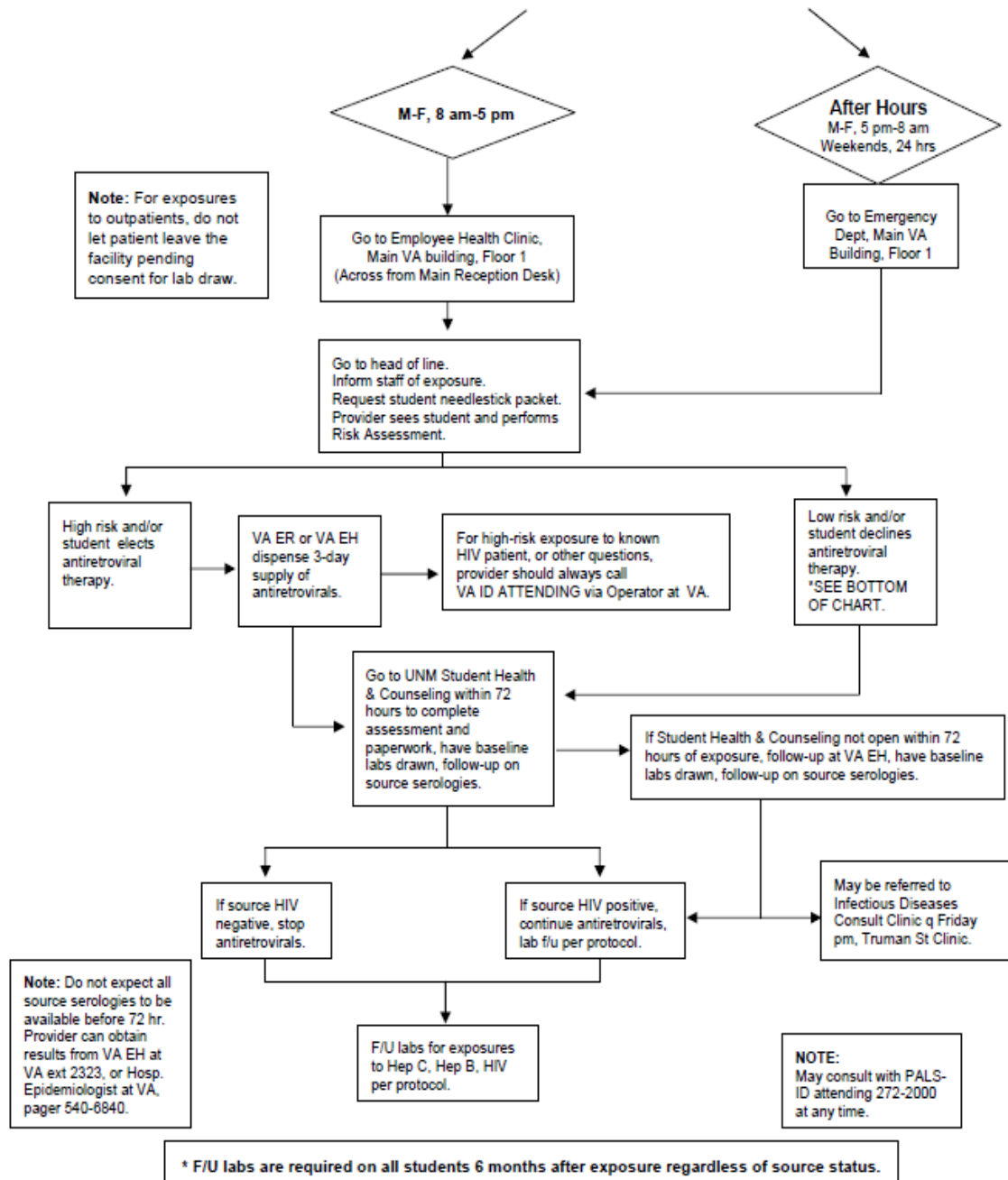


# BBF Exposure in UNMH or UNM Clinic System



This flowchart is updated by UNM Student Health & Counseling. Revised 08/16/13  
X:\Policies\Medical\Practice Guidelines\Blood Body Fluid\BBF UNMH Flow Chart.doc

# BBF Exposure in VA



This flowchart is updated by UNM Student Health & Counseling. Revised 1/31/13  
 X:\Policies\Medical\Practice Guidelines\Blood BodyFluid\BBF VA Flow Chart.doc

## LIABILITY

### General

As stated in the Radiologic Sciences Affiliation agreement:

#### V. LIABILITY AND COVERAGE

A. As between the parties, each party acknowledges that it will be responsible for claims or damages arising from personal injury or damage to persons or property to the extent they result from negligence of that party's employees or (in the case of School) Students. The Clinical Facility understands that School is not indemnifying Clinical Facility for the acts or omissions to act of School's Students and/or employees. The liability of School, its Students and employees will be subject in all cases to the limitations and immunities of the New Mexico Tort Claims Act, Sections 41-4-1 et seq. NMSA 1978, as amended.

B. The New Mexico Risk Management Division provides professional liability coverage of School, its students and employees for their health care instructional activities at the Clinical Facility as set forth in the New Mexico Tort Claims Act.

## RADIATION SAFETY

Government regulations state that eating, drinking, smoking and application of cosmetics are not permitted in areas exposed to ionizing radiation. Eating and drinking at clinical sites are allowed only in **non-restricted** areas designated for food consumption.

**Gloves** are worn during the preparation of radiopharmaceuticals by nuclear medicine students and injections by all students to protect their hands from contamination. Contamination will occur if gloves contaminated in the Radiopharmacy are worn elsewhere in the department. Students are cautioned to remove their gloves before leaving the Radiopharmacy and quickly **survey their hands** for contamination. Not wearing gloves and other personal protective equipment is in violation of program policy and may result in disciplinary action and/or negatively affecting the student clinical evaluations.

### Dosimetry

Whole body and ring thermoluminescent dosimeters (TLDs) to monitor exposure to ionizing radiation **must be worn at all times** by students in the clinical facilities. Failure to wear body and/or ring dosimeter, is considered to be out of uniform and non-compliant. **For example, if a ring badge is in the student's back pocket, then the student is in violation of program policy and appropriate disciplinary action may be taken.** Students will be sent home if they do not have their dosimeters and time will be deducted from their discretionary time. Radiation badges are replaced quarterly and students are informed as to their updated exposure levels. The University must pay a fee for each badge lost, so students must be responsible for monitoring devices. Maximum exposure may be reported for the student for the period covered by the lost badge. Whole body badges are to be worn at or near the collar and ring badges are worn with the TLD turned inward on the index finger of the dominant hand.

Students are required to wear dosimetry badge during all clinical hours. If student is found not wearing the badge during clinical hours, points will be deducted from the clinical final grade. MRI students are exempt from wearing TLD's. Students are required to sign and date their radiation reports within one week after student receipt. These will be provided by the clinical coordinator.

### Authorized Use of Radiopharmaceuticals (Nuclear Medicine Students)

Radiopharmaceuticals may not be administered to technologists, students, and other individuals without a Doctor's order for the exam and must be for a medical reason. Educational exercises, demonstrations, and other non-medical reasons are not sufficient reason for administration of radiopharmaceuticals. Any use of radiopharmaceutical doses or nuclear scans done without a written directive specifically for medical use will not be tolerated.

### Radioactive Spills

Nuclear medicine students should be familiar with each clinical site's policy and procedure for cleaning and reporting any spills involving radioactivity (see Appendix E). Any spill must be reported immediately to the Clinical Site Instructor, Program Director, and Clinical Coordinator. A student who is present during a radioactive spill, whether directly responsible or not, must report the spill immediately to the Clinical Coordinator.

### Pregnancy Policy

See Appendix L: Pregnancy Declaration Form & NRC Guidelines

The University of New Mexico Radiologic Sciences Program has adopted the guidelines for occupationally exposed pregnant workers identified in the National Council on Radiation Protection (NCRP), Report #39, as its policy on student pregnancy. Exposure to the fetus shall be maintained below 0.5 rem during the period of pregnancy. The student will wear protective clothing as appropriate and will wear a fetal monitor external to and below the protective clothing so that the Program Director/Clinical Coordinator/Radiation Safety Specialist can ascertain at any time that exposure is not above the recommended level. The student will not be considered pregnant until written notification is provided to the Program Director and Radiation Safety Officer (RSO) using the declaration form (**Appendix J**). The declaration form requires the signature of the Medical physicist. A student is not required to declare a pregnancy. UNM and its employees cannot be held responsible for the radiation safety of a fetus if the mother decides not to declare her pregnancy. The student is highly encouraged to **inform the Program Director and Clinical Coordinator of the pregnancy as soon as possible** so that proper radiation safety practices can be initiated. Students are also strongly advised to consult with the RSO or designee before she declares in order to make an informed decision. It is anticipated that exposure would never exceed the recommended level. If there is a possibility that exposures may exceed 0.5 rem, clinical rotations in the Radiologic Sciences program will be discontinued. All time away from the program must be made up. A written request to the Program Director to resume clinical activity must be on file before returning. The student is encouraged to complete required course work.

As stated in the declaration form, if the student is notified, they are not pregnant, or if the pregnancy is terminated, the student must promptly inform the RSO in writing that the pregnancy has ended. The student may un-declare the pregnancy at any time and for any reason (in writing to the RSO).

# SCHOLASTIC POLICIES

## Performance and Evaluations

Grades are used to indicate how well each student is performing and progressing toward his/her individual objectives and are not used to compare one student's academic performance with another student.

All students must maintain a 76% average **in all courses** to remain in good standing in the Radiologic Sciences program. A student who receives less than 76% in any course will be placed on **academic review** and must bring the course average up to 76% prior to the conclusion of the course/ semester.

Students who earn a final grade which falls **below 76% in any course will be dismissed from the program**. The program reserves the right to terminate any student who fails to meet minimum academic or clinical standards.

**Grading:** The following grading system is used by the UNM Radiologic Sciences Program

A+	>97
A	93-96
A-	90-92
B+	87-89
B	83-86
B-	80-82
C+	77-79
C	73-76
C-	70-72
D+	67-69
D	63-66
D-	60-62
F	< 60

## Probation Policy

When reviewing all students' progress, the faculty may choose to place a student on probation. The student and faculty must agree upon a remediation plan for improvement. The student will be informed in writing about the probation status by the Director and/or Program Director. Probation is to be construed as a warning that, if academic/clinical performance or professional behavior does not improve, the student is in danger of being dismissed from the program. Remediation plans will be reviewed by the faculty and modified if necessary. The duration of probation will be determined by the faculty. If all conditions of the remediation are met within this timeframe, the student will be removed from probation.

## Professional Behavior Criteria

Minimal expected criteria for professional behaviors are identified as follows: meeting performance criteria for each academic and clinical semester, as stated in course syllabi.

A student who is identified by any academic or clinical faculty as not meeting the

professional behavioral criteria of the appropriate level of any generic ability will be required to meet with the Director, or the faculty member(s) expressing concern to discuss the student's behavior.

## 1. Probation

Placing a student on probation serves as a notice that the student's performance is not up to academic, clinical, professional, and/or technical standards. Students who have been placed on probation will be notified in writing by the Director and/or Program Director and will be informed of the specific conditions that must be met in order to be removed from probationary status.

Probation may be assigned to a student who:

1. Has received 2 student write-ups during a summer course or 3 student write-ups during a fall/spring course. (Note: Write-ups must be in the same course and can include homework, quizzes, or exam scores).
2. Has not demonstrated professional behaviors in the clinical site or academic setting.
3. Demonstrate concerns about professional behaviors during a clinical internship such that they do not result in remediation but indicate concerns about future performance.
4. An average grade below 76% (C) for any course at midterm.
5. A student who cannot successfully pass the final exam following the **first** attempt at the exam.
6. An unsatisfactory report in a clinical setting (Significant Concerns noted by the clinical instructor, clinical preceptor, or reported on a clinical evaluation).
7. Reoccurrence of unprofessional behaviors or significant or consistent breach of professional behavior in the judgment of the faculty.

## 2. Suspension/Dismissal

The following conditions will result in suspension or possibly dismissal from the program:

1. A final average grade below 76% (C) for any course.
2. A student who cannot successfully pass the final exam following **two** attempts at the exam. Refer to each course syllabus for specifics to each course.
3. Academic dishonesty. Policy signed by each student at the start of the program.

## Competency-Base Clinical Program

This is a competency-based clinical program. Students are required to demonstrate clinical proficiency through the successful completion of competency exams. Competency exams in which the student is required to master are identified each clinical semester. Students cannot progress clinically or didactically to the next semester without the successful completion of the clinical competency exams per semester.

Students will receive periodic clinical evaluations during the clinical rotations. Evaluations will be discussed with each student on an individual basis.

**All written examinations will be maintained in the student's personal files in the Radiologic Sciences Program office.** Students may refer to these examinations during the course of the program.

Students who fail to meet the minimum academic/clinical standards as outlined in the clinical and didactic course objectives will not receive the designated certificate and will be ineligible to sit for national certifying examinations.

For promotion, the student must demonstrate satisfactory performance in lecture and clinical practice, as well as personal qualities appropriate to the profession of Medical Imaging. Reports on progress are given to students at the completion of each semester.

**The faculty of the Radiologic Sciences Program reserves the right to terminate the education of any student who, in the faculty's judgment, does not satisfy the course and clinical requirements.**

A further statement of policy by the Regents of the University of New Mexico may be found in the appendix section of The UNM Pathfinder. University Standards, Policies, and Regulations can be accessed at: <http://pathfinder.unm.edu>

### Make-Up Examinations

Arrangements to make up missed examinations (missed because of **illness only and/or family emergency**) must be made directly with the instructor and always within a period of **3 days** from the initial testing date. Failure to do so will result in a "0" grade for the examination. **A penalty will be imposed on any make-up examination.** No repeat or make-up final exam is allowed. The final exam must be taken on the scheduled day and time. **Late Homework will not be accepted.**

### Due Process

A student who feels they were assigned an incorrect grade or dealt with inappropriately by any member of the staff or faculty may appeal to the Program Director for resolution of the matter. Students need to submit a written letter describing the incident to: [Rblankley@salud.unm.edu](mailto:Rblankley@salud.unm.edu). Rebecca Blankley, MFA, RT (R) (M) (CT) (MRI), Radiologic Sciences Director.

If the matter is not resolved, the student may appeal (in writing) to the UNM School of Medicine Health Professional Programs Student Due Process Policy: Refer to the HPP due process policy: Policy is subject to change. If the policy changes within the academic year 2019-2020, students will be notified.

<https://hsc.unm.edu/school-of-medicine/education/assets/doc/health-professions-due-process-policy.pdf>

### Academic Honesty

Radiologic Sciences Academic Honesty policy is reviewed and signed at the beginning of the students' academic semester for the Radiologic Sciences program. Please see (*Appendix P*) for the complete policy.

Refer to UNM Policy Office for Academic Dishonesty Policy.

<http://policy.unm.edu/regents-policies/section-4/4-8.html>

The following statement appears among the scholastic regulations listed in the School of Medicine Student Handbook, regarding dishonesty in academic matters

"Each student is expected to maintain the highest standards of honesty and integrity in academic and professional matters. The University reserves the right to take disciplinary action, up to and including dismissal, against any student who is found guilty of academic dishonesty or otherwise fails to meet these standards.

Academic dishonesty includes, but is not limited to, dishonesty in quizzes, tests, or assignments; claiming credit for work not done or done by others; and nondisclosure or misrepresentation in filling out applications or other university records.

The Radiologic Sciences program is dedicated to student success. The program will use a step process to address academic dishonesty. The program has the right to dismiss students if egregious dishonesty has occurred.

The steps to determine the infraction include:

1. First offense- instructor will inform and write up student of infraction.
2. Second offense- instructor will inform and write up student. Student will be placed on probation.
3. Third offense- student will be informed and written up. Probation and or dismissal from program as determined by director.

Examples include: student handed in a paper without site resources and submitting as if writing in their own words.

## **STUDENT APPEAL PROCESS FOR ACADEMIC FAILURE**

### **Submission in Writing**

The applicant must submit in writing to the Program Director an explanation of his/her particular circumstances that would warrant special consideration. Relevant information may include health problems, financial situations, or reasons for recent changes in academic performance. The case will be reviewed by an advisory committee consisting of the Radiologic Sciences Program Director, Radiologic Science faculty as well as a faculty advocate provided to the student from another program within the Health Professional Programs (HPP) located in the School of Medicine. Each applicant's case will be considered on an individual basis.

Following the meeting of the Advisory Committee, the student will be notified regarding the Committee's decision.

### **Withdrawal Policy**

A student may withdraw from the Radiologic Sciences Program in accordance with UNM policies and deadlines if he/she is unable to fulfill the established academic/clinical criteria. Withdrawals are subject to grades of W (Withdraw), to be determined by the Program Director at the time of the withdrawal. A W will not jeopardize the student's possible return into the program the following year in the event time cannot be made up (in cases of chronic illness, for instance). Each situation will be evaluated individually by the Program and students who withdraw must reapply for readmission into the program. For more information please click on the following link:

Website: <http://registrar.unm.edu/forms/enrlauth-univwith.pdf>



# DISCIPLINARY POLICY

## Inappropriate Behavior

**\*Disciplinary action taken will be determined by the Program Director. The following actions should be considered a general guideline and will be adjusted to fit the circumstances. Severe violations may warrant immediate dismissal from the program.**

Some examples of inappropriate behavior which may result in disciplinary procedures is inclusive but not limited to the following:

- Dress code violation
- Tardiness
- Failure to call in absence to the Nuclear Medicine, CT, MRI program, Clinical Coordinator and clinical site
- Insubordination and/or unprofessional behavior
- Failure to maintain academic or clinical proficiency.
- Under influence of alcohol or drugs or otherwise impaired.
- Abusive language or unprofessional behavior in the judgement by faculty of clinical staff.
- Injecting and/or scanning without direct supervision of staff technologist
- Performing a competency without direct supervision of a staff technologist
- Failure to maintain clinical requirements
- Falsifying clinical attendance or competency records
- Unprofessional hygiene
- Failure to follow HIPAA regulations. This includes storing patient information on handheld device.
- Personal cell phone usage during class time and clinical rotation is prohibited.
- Academic dishonesty such as copying homework cheating on quizzes or exams and/or plagiarism.
- Excessive absences in class or clinic.

## Cell Phone Usage

**Student must abide by the Radiologic Sciences policy regarding cell phone usage:**

Personal cell phones may be retrieved and used **during break time and lunch**. Students must go outside or to a designated break area to respond to personal calls or text messages. Cell phones are not permitted in areas with telemetry equipment or where cell phone restrictions are posted. Cell phones with games should not be played during clinical rotations. Camera phones will not be used to record protected health information, Hospitals' business, or unauthorized pictures of Hospitals' employees.

Populating clinical databases should not be performed during the interaction with patients. The clinical expectation is to complete clinical databases when not performing a clinical exam.

## Adverse and/or Corrective Action Policy and Procedure

The Radiologic Sciences Program policy states that faculty/staff has the right to correct a student's behavior if the student violates the program's Handbook, UNM Pathfinder, or UNM School of Medicine polices as they relate to undergraduate student education.

The procedure for Student Adverse and/or corrective action:

The faculty/staff involved with the adverse and/or corrective action will try to resolve the issue with the student directly.

- Verbal warning: written record of the warning will be reviewed by the student and faculty member and a copy will be placed in student file.
- Written warning: written record of the warning will be reviewed by student and faculty member and a copy will be placed in student file.
- Coaching document (written plan outlining the issues and steps to correct the concern (s))  
If the issue cannot be resolved, the faculty will refer the matter in writing, including supportive documents, to the Program Director within three business days of non-compliance of the coaching document.

### **Student Grievance Policy and Procedure**

Note: The student has the right to appeal the corrective action of the faculty/staff member. Students can find more information on the Health Professions Program Due Process at this link or see below

## Appendix Q: HPP Due Process Policy

The Radiologic Sciences Program must abide by the Health Professional Program (HPP) Due Process policy. It is the student's responsibility to read and understand the HPP Due Process policy and adhere to the guidelines.

The current HPP Due Process policy has not been approved by the Board of Regents. A final copy will be made available to the student upon final approval.

- The student has the right to submit a written statement to the Radiologic Science Program Director or appear in person to drop off statement.
- The Program Director reserves the right in consultation with the Assistant Dean of Health Professions Programs, to remove a student from any aspect of training when there is a concern of safety to the student, faculty and staff, patients or other healthcare workers. The student will be informed in writing of the action to remove them from training.
- Note: The Program Director reserves the right to convene a committee in lieu of steps 1 and 2 if the violation of any policy is serious in nature.
- The Student has the right to appeal the Program Director's decision to the Assistant Dean of the HPP. The student may bring a formal appeal of the decision as set forth in the
- UNM HPP due Process Policy at: <https://hsc.unm.edu/school-of-medicine/education/assets/doc/health-professions-due-process-policy.pdf>

### Situations Warranting Immediate and Permanent Dismissal from the Radiologic Sciences Program

Some actions by students warrant immediate and permanent dismissal from the Radiologic Sciences Program because they constitute a violation of UNM policy and the Code of Ethics for the profession.

These situations include:

- Cheating or plagiarism- Review signed Academic Honesty policy
- Under the influence of alcohol or illegal drugs during program activities
- Falsifying clinical records (e.g., time sheets, evaluations)
- Repeated clinical incidents of misadministration of a radiopharmaceutical and/or contrast and/or scanning of the wrong patient.
- Failure of academic success- see Adverse or Corrective Action.

The student **may be** permanently dismissed from clinical rotations for unsafe or inappropriate clinical practice any time during the clinical semester. In such cases a grade of "F" will be recorded for the course in which the unsafe or inappropriate practice occurred, and the student will be permanently dismissed from the program.

Reasons for unsafe or inappropriate clinical practice include, but are not limited to the following:

- Failure to attain the required level of cognitive or motor skills following documented corrective action.
- Inadequate preparation following documented corrective action.
- Inaccurate documentation following corrective action.
- The inability to perform clinical requirements safely following corrective action.
- The inability to practice professionalism with patients, staff and faculty.

## Appendix A

### Emergency Student Preparedness

Students of the University of New Mexico recognize the classroom leadership of their faculty. In the event of an emergency, students will expect their faculty to provide guidance to mitigate and respond to the situation. The following is offered as a guide to develop those plans in advance of an incident.

1. **In Case of Emergency** - If one encounters an emergency situation, they must first provide for their own safety. The UNM Police Department is available 24/7 and provides more than just emergency response. In addition to the items listed, they also house “lost and found”, bicycle registration and fingerprinting, offer an escort service, and can provide copies of Police Reports.
  - a. **If you come across an emergency situation, you should:**
    - i. **Step One:** Make yourself safe
    - ii. **Step Two:** Warn others in the immediate area of the situation
    - iii. **Step Three:** Call for assistance. DO NOT assume that someone else has called. UNM PD: (505) 277-2241; 911 from a campus phone; or, via blue light phone.
2. **UNM Communications Systems** - The primary ways that UNM can provide emergency updates to students, faculty and staff are via LoboAlerts (<http://loboalerts.unm.edu>) and the Warning Siren. Although cell phones may be a distraction in the classroom, it is recommended that at least one device be left available to receive LoboAlerts messages. Since different devices and service providers may account for messages being received at different times, it may be prudent to allow several devices to be active for such messages.

Other than testing, a sounding of the warning siren means that something has occurred which makes it unsafe to be outdoors. All persons should take shelter in the nearest building, and look for additional information which will be coming via LoboAlerts, local media, email or the UNM Webpage.

3. **Shelter In Place** - In some instances, it is safer to shelter in place and wait for further instructions. If you are instructed to Shelter in Place, then:
  - a. Remain calm
  - b. Move away from windows and glass.
  - c. Silence your cell phones.
  - d. Lock the door and wait for further instructions.
  - e. Keep the telephone lines free for emergency information. Do not call 911 or the UNM Police Department for information. *However, if you are trapped or need assistance, please call 911 for assistance!*
  - f. Don't leave your room until instructed by a Police Officer, authority figure or LoboAlerts.
4. **Evacuation** – Know two ways to get out of your building and determine a location to meet to make sure that everyone is accounted for. Share this plan with your students in advance.
5. **Suspicious Behavior** – There are many ways to report behavior that is concerning (AGORA, BIT, CARS, etc.). Report suspicious person(s) and/or activities to the UNM Police promptly.
6. **Awareness** – The first level of prevention is awareness of your surroundings.

**For further information please contact:**

UNM Police Department

505- 277-2241

<https://campussafety.unm.edu/>

Appendix B

UNM RADIOLOGIC SCIENCES PROGRAM  
STUDENT ACCIDENT/INJURY REPORT

Program: \_\_\_\_\_ Date: \_\_\_\_\_  
Name of Student: \_\_\_\_\_ DOB: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
City, State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Date of Injury: \_\_\_\_\_ Time: \_\_\_\_\_ AM/PM  
Exact Location: \_\_\_\_\_  
Type of Injury: \_\_\_bruise \_\_\_laceration \_\_\_puncture \_\_\_strain \_\_\_abrasion \_\_\_other  
Exact part of the body injured: \_\_\_\_\_

Describe in full how injury occurred:  
\_\_\_\_\_  
\_\_\_\_\_

Names of witnesses: \_\_\_\_\_  
Immediate supervisor informed of accident/injury: \_\_\_\_\_  
Signature: \_\_\_\_\_  
Supervisor: \_\_\_\_\_ Date: \_\_\_\_\_  
Student: \_\_\_\_\_ Date: \_\_\_\_\_

Review cause of accident and state action taken to prevent recurrence:  
\_\_\_\_\_  
\_\_\_\_\_

Supervisor's Signature: \_\_\_\_\_

First Aid and/or instructions given:  
\_\_\_\_\_  
\_\_\_\_\_

Treated by: \_\_\_\_\_ Date & Time: \_\_\_\_\_

PHYSICIAN'S FINDINGS & DISPOSITION

Physician Findings:  
\_\_\_\_\_  
\_\_\_\_\_

Diagnosis: \_\_\_\_\_  
Treatment: \_\_\_\_\_  
Disposition: \_\_\_\_\_  
Date of Examination: \_\_\_\_\_ Time: \_\_\_\_\_ AM/PM  
Signature of Physician: \_\_\_\_\_, M.D.

**Appendix C**  
**NOTICE OF INCIDENT/UNM Department of Safety and Risk Services**  
**(Record Only)**  
**Revised: 06/01/07**

This form must be completed when a claim is not expected for personal injury or property damage. It is for record only and should be completed as soon as practical after the occurrence, but within ninety (90) days of the occurrence. File the form with:

**Department of Safety and Risk Services**  
**1801 Tucker St. NE, Bldg 233 MSC07 4100**  
**1 University of New Mexico**  
**Albuquerque, New Mexico 87131-0001**

Full Name \_\_\_\_\_ Phone No(s) \_\_\_\_\_  
Mailing Address (Include city, state, zip code) \_\_\_\_\_

Amount of damages (if known) \$ \_\_\_\_\_  
Describe WHERE, WHEN, and HOW the damages or injury occurred. Include names of all persons involved and any witnesses, including their addresses and telephone numbers.

Location of the Occurrence: \_\_\_\_\_  
Date of Occurrence: \_\_\_\_\_ Approximate Time: \_\_\_\_\_  
Description of the Occurrence: \_\_\_\_\_

Describe the injury or damage you sustained and attach copies of all medical reports, bills, or estimates of repairs.

All of the statements made on this form are true and correct to the best of my knowledge.

Date \_\_\_\_\_

Signature of Person Reporting \_\_\_\_\_  
Daytime Phone No: (     ) \_\_\_\_\_

Website: <http://policy.unm.edu/common/documents/6150-exhibit-d.pdf>



## Appendix D NMTCB Code of Ethics

### Code of Ethics

Technologists qualified to perform nuclear medicine procedures are members of the health care profession and must strive as individuals and as a group to maintain the highest ethical standards by adhering to the *Nuclear Medicine Technologist Code of Ethics* approved by the *Society of Nuclear Medicine and Molecular Imaging Technologist Section (SNMMITS)*.

The principles of the *Nuclear Medicine Technologist Code of Ethics* as listed below are not laws, but standards of conduct to be used as ethical guidelines by nuclear medicine technologists.

#### Principle 1

The nuclear medicine technologist will provide services with compassion and respect for the dignity of the individual and with the intent to provide the highest quality of patient care.

#### Principle 2

The nuclear medicine technologist will provide care without discrimination regarding the nature of the illness or disease, gender, race, religion, sexual preference, or socioeconomic status of the patient.

#### Principle 3

The nuclear medicine technologist will maintain strict patient confidentiality in accordance with state and federal regulations.

#### Principle 4

The nuclear medicine technologist will comply with the laws, regulations, and policies governing the practice of nuclear medicine.

#### Principle 5

The nuclear medicine technologist will continually strive to improve his or her knowledge and technical skills.

#### Principle 6

The nuclear medicine technologist will not engage in fraud, deception, or criminal activities.

#### Principle 7

The nuclear medicine technologist will be an advocate for his or her profession.

Website: <https://www.nmtcb.org/policies/ethics.php>

Website: <https://www.snmmi.org/ClinicalPractice/content.aspx?ItemNumber=5532>

**Appendix E**  
**American Registry of Radiologic Technologists**  
**Code of Ethics**

[https://www.arrt.org/docs/default-source/governing-documents/code-of-ethics.pdf?sfvrsn=71f304fc\\_14](https://www.arrt.org/docs/default-source/governing-documents/code-of-ethics.pdf?sfvrsn=71f304fc_14)

*The Code of Ethics forms the first part of the Standards of Ethics. The Code of Ethics shall serve as a guide by which Certificate Holders and Candidates may evaluate their professional conduct as it relates to patients, healthcare consumers, employers, colleagues, and other members of the healthcare team. The Code of Ethics is intended to assist Certificate Holders and Candidates in maintaining a high level of ethical conduct and in providing for the protection, safety, and comfort of patients. The Code of Ethics is aspirational.*

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

10. The radiologic technologist continually strives to improve knowledge and skills by participating in continuing education and professional activities, sharing knowledge with colleagues, and investigating new aspects of professional practice.

11. The radiologic technologist refrains from the use of illegal drugs and/or any legally controlled substances which result in impairment of professional judgment and/or ability to practice radiologic technology with reasonable skill and safety to patients.

## Appendix F

### Useful Websites

Nuclear Medicine Technology Certification Board	<a href="http://nmtcb.org">http://nmtcb.org</a>
Society of Nuclear Medicine and Molecular Imaging	<a href="http://www.snmmi.org">http://www.snmmi.org</a>
The American Registry of Radiologic Technologists	<a href="http://www.arrt.org">http://www.arrt.org</a>
American Society of Radiologic Technologists	<a href="https://www.asrt.org">https://www.asrt.org</a>
American College of Radiology	<a href="http://www.acr.org">http://www.acr.org</a>
New Mexico Society of Radiologic Technologists	<a href="http://nmsrt.com/index.html">http://nmsrt.com/index.html</a>
Society of Diagnostic Medical Sonographers	<a href="https://www.sdms.org/">https://www.sdms.org/</a>

New Mexico Environment Department  
Radiation Control Bureau  
Medical Imaging and Radiation Therapy Program  
Website: <http://www.nmenv.state.nm.us>

## Appendix G Radioactive Spill Procedures

**UNM Hospitals**

Applies To: UNM Hospitals Responsible Department: Nuclear Med. Revised: 11/2013
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Title: <b>Radiology - Nuclear Medicine - Radioactive</b>	<b>Procedure</b>
--	------------------

<b>Patient Age Group:</b> ( <input type="checkbox"/> N/A ( <input checked="" type="checkbox"/> All Ages) ( <input type="checkbox"/> Newborns) ( <input type="checkbox"/> Pediatric) ( <input type="checkbox"/> Adult)
---

[https://hospitals.health.unm.edu/intranet7/apps/doc\\_management/index.cfm?project\\_id=1](https://hospitals.health.unm.edu/intranet7/apps/doc_management/index.cfm?project_id=1)

### DESCRIPTION/OVERVIEW

An accident may happen to even the most careful of workers, and any worker may be called upon to assist in the case of a radioactive spill, a contamination incident, or an emergency. The following procedure defines major and minor spill, indicates who to notify and how to respond to a radioactive spill.

The UNM Radiation Safety Officer / Radiation Safety Division must be notified **immediately** on all major radioactive spills or any other questionable situation involving ionizing radiation, e.g., accidental injection or ingestion of radionuclides into a person, contaminated wounds, contaminated person or personal effects, unauthorized release of radioactivity into the air or sewage system or to normally non-contaminated areas, unauthorized removal of radioactive materials, and known or suspected overexposure of personnel to ionizing radiation.

### REFERENCES

- New Mexico Radiation Protection Regulations, Part 4 (Standards for Protection Against Radiation), NMAC 20.3.4.7
- New Mexico Radiation Protection Regulations, Part 7 (Medical Use of Radionuclides), NMAC 20.3.7.702
- US Nuclear Regulatory Commission, NUREG-1556, Vol. 9, Rev. 2 (January 2008), Consolidated Guidance
- UNM Radiation Safety Manual

### AREAS OF RESPONSIBILITY

- Nuclear Medicine Technologist — manages the initial spill response appropriately and notifies Nuclear Medicine Supervisor and Radiation Safety Officer / Radiation Safety Division; fills out Radiologic Spill Log Sheet, takes steps to prevent a spill by following safe handling practices as described in the “Radiology – Nuclear Medicine – Radiopharmaceutical Administration and Handling” procedure. Assess whether the patient may be at risk of urinary incontinence (child or elderly patient), and take steps to minimize the impact of a urine loss.
- Nuclear Medicine Supervisor — ensures all Nuclear Medicine staff have access to incident contact phone numbers, spill procedures and support necessary to ensure safety and compliance. Confirms notification of RSO/RSD and supervisory personnel as detailed in the attached flowchart. Confirms spill report form has been appropriately filled out. Is responsible for staff compliance with this procedure and audits.
- Nuclear Medicine Attending Radiologist — the radiologist covering the Nuclear Medicine section at the time of the spill (may or may not be the Nuclear Medicine Section Chief or another Authorized User). Nuclear Medicine Section Chief or Authorized User (if the section chief is unavailable)—part of the notification chain as described below.

- UNM Radiation Safety Officer (RSO) and Radiation Safety Division (RSD) — manages all major spills; assists with management of minor spills as needed.

## **PROCEDURE**

The response to any radiological incident shall be immediate. The response shall be initiated by the individual(s) who first identify the occurrence. For major spills, the initial response requires concurrent, immediate notification of the Radiation Safety Officer (RSO) / Radiation Safety Division.

The primary hazard should always be addressed first (e.g., extinguish fire, manage the radiological issue next).

Life-saving measures take precedence over radiation exposure received by attending medical personnel. Only those persons required for medical management of a life-threatening situation where radiation is also involved shall be allowed access.

Major and minor spills (defined below) require different responses.

## **MINOR SPILL:**

Small quantities of radioactive material, spilled within the Restricted Area of Nuclear Medicine only, with no contamination of people, where cleanup can be safely and effectively handled by NMTs without contacting the RSO. If there is doubt, call the RSO/RSD immediately.

Process for handling minor spills:

- **ATTEND TO** all persons in the immediate vicinity of a spill. If staff or other person(s) are contaminated, immediately contact the RSO. People first, and then clean up!
- **ALERT** people outside the area to stay out.
- **LIMIT MOVEMENT** in and out of the area, except when medically necessary, to avoid spreading contamination. If any person must leave the immediate area, they must be surveyed from head to toe to ensure that they have no contamination (i.e., survey levels should be similar to background).
- **PUT ON PROTECTIVE EQUIPMENT** such as double gloves, safety goggles, and shoe covers. Change gloves, shoe covers, and gown frequently as needed to avoid spread.

## **CLEAN UP:**

- Place absorbent paper towels or blue pads over liquid spills.
- Find the spill perimeter using a survey meter. Decontaminate from the outer boundary moving inward to avoid spread, and from areas of lower contamination to higher.
- Place all materials into plastic bags, seal the bags and transfer to the designated radioactive waste containers.

## **SURVEY/WIPE:**

- Use the Radiologic Spill Log Sheet.
- Draw a map and take multiple surveys and wipes of the entire affected area, remembering the floors, equipment, handles, rails, and wall switches.
- Determine whether all removable contamination has been removed by confirming contamination levels are below trigger levels (see table below). This is to be performed by a Nuclear Medicine Technologists or RSD

**REPEAT CLEANUP** if contamination is still detected.

- Use Radiac Wash or other similar decontaminant to clean up the remains of the spill.
- Repeat cleanup/decontamination until contamination is below trigger levels.
- If survey or wipe activity cannot be reduced below trigger levels (see below),
- Add shielding to reduce exposure levels at 5 cm to less than trigger limits.
- If shielding does not reduce exposure levels at 5 cm to less than trigger levels, contact the RSO/RSD staff.

**DOCUMENT:** Verify and document area to be free of contamination and that proper spill procedure was followed. Use the attached Radiologic Spill Log Sheet and provide to the Nuclear Medicine supervisor to be placed in a log.

**INFORM:** The NMT involved in the spill must inform the Nuclear Medicine Supervisor as soon as feasible of the spill and cleanup procedure. The Nuclear Medicine Supervisor will report the spill to the Radiology Executive Director and the Nuclear Medicine Attending Radiologist on the day that it occurs.

Contamination trigger levels:

	Survey	Wipe Test (dpm)
<b>Minor Spill, Restricted Area</b>	<b>1 mR/hr at 5 cm</b>	<b>1500 dpm</b>

**MAJOR SPILL:**

If a spill meets ANY ONE of the following criteria, it is a major spill:

- Occurs outside the Restricted Areas of Nuclear Medicine (defined above), **OR**
- Quantity of radioactive material spills is near or exceeding the amounts below, **OR**  
Not readily or easily contained and cleaned by NM technologists, **OR**
- Involves any injury, or contamination of a person or persons (e.g., skin) or possible internal contamination due to inhalation, ingestion, or skin absorption, **OR**
- Radioactive materials that are volatile or may become airborne, or spread to the environment (air, sewer, water, ground) **OR**
- Initially a minor spill, but continues to have exposure rates greater than 1 mR/hr at 5 cm after cleanup, **OR**
- The person responsible for the radioactive material cannot immediately attend to the spill for any reason.

The following will be considered a major spill: Any quantity: Beta emitters ( $^{131}\text{I}$ ,  $^{153}\text{Sm}$ ,  $^{90}\text{Y}$ ,  $^{89}\text{Sr}$ )

>1 mCi  $^{18}\text{F}$ ,  $^{111}\text{In}$ ,  $^{67}\text{Ga}$ ,  $^{123}\text{I}$

>10 mCi  $^{99\text{m}}\text{Tc}$ ,  $^{201}\text{Tl}$

>Exposure rate greater than 30mR/hr at 5 cm

If there is any question about whether a spill is a major or minor spill, handle as a major spill and contact the RSO/RSD immediately for guidance.

**Process for handling major spills:**

- **NOTIFY** all persons in the immediate vicinity that a spill has occurred. Clear the area of all persons not involved in the spill. People **FIRST!**

- **PREVENT THE SPREAD:** Contain the spill by placing absorbent material over liquids to prevent spread of contamination. **Do not attempt to clean spill.** Limit movement of people to prevent spread of contamination. **Do not allow people to leave the area** (unless medically necessary) until confirmed that they are not contaminated (survey to background)
- **CONSIDER EVACUATING AND CLOSING THE ROOM:** Specific details of each situation will be evaluated by the RSO/RSD/Nuclear Medicine Authorized User in collaboration with the Professional and Support Services Administrator and a decision will be made to ensure ALARA and the health and safety of patient and staff. —this is not typical for nuclear medicine diagnostic examinations. **If evacuation is performed, close and lock the doors or secure area to prevent entry.**
- **NOTIFY:** **Notify the RSO/RSD immediately.** Cleanup and decontamination of major spills should be conducted under the supervision of the RSO/RSD staff. The RSO/RSD staff will manage the situation. The NMT must remain at the major spill location and does everything possible to reduce the hazards generated by the spill until the RSD staff arrive. RSD staff will then either assist, oversee, or take over depending on the situation.
- **DECONTAMINATE** personnel/patients by procedure below.
- **STAY IN THE AREA** to control access to the room and to inform/assist the RSO/RSD staff upon arrival. Do not leave the area until instructed to do so by the RSO/RSD staff.
- **DOCUMENT:** Document spill and any containment/cleanup procedure performed prior to arrival of the RSO/RSD staff on the Radiologic Spill Log Sheet. The RSO/RSD may continue to document on this form or may ask the NMT to assist with this documentation. A copy of the completed form should be given to the NM Supervisor to be placed in a log.
- **INFORM:** Nuclear Medicine Supervisor, Radiology Executive Director, Nuclear Medicine Attending Radiologist (covering the nuclear medicine service that day), and Nuclear Medicine Section Chief or other Authorized User as soon as feasible. (Please refer to attached flow chart.)

### **SKIN DECONTAMINATION (STAFF OR OTHERS):**

- **REMOVE** contaminated clothing, bag and place the bag in the Nuclear Medicine Storage until decayed.
- **WASH** contaminated skin. Wet the skin thoroughly and apply mild detergent. Avoid irritating or breaking the skin. Do not use abrasives or solvents. Work up to a full lather and keep it wet. Wash contaminated area for 2-3 minutes. Work over a sink or wash container to avoid spread of contamination onto surfaces or other areas of skin.
- **RINSE** thoroughly with lukewarm water, dry with towels, place towels in bag, and store in Nuclear Medicine Storage until decayed.
- **MONITOR** effectiveness using survey meter, writing down all survey measurements at 5 cm and recording the area of skin involved.
- **REPEAT** 3-4 times, using a soft brush if necessary, but avoid irritation of skin. Goal is for contamination to be below 0.1 mR/hr near skin surface.
- **PROTECT SKIN** by applying a gentle hand lotion to prevent chapping.

If contamination of skin cannot be fully removed (that is, if exposure rates are still > 0.1 mR/hr near skin surface), cover affected area with a bandage, instruct affected person to continue washing at home (if appropriate), and have them return to Nuclear Medicine the next day to document decay and return of skin to background radiation levels.

### **UNINTENTIONAL RELEASE OF Xe-133:**

- Evaluate hazard.



- If possible, remove the patient and staff from the room.
- If the room has been evacuated, close it off.
- Remain outside the imaging room for the posted amount of time to allow the xenon concentration to be reduced to an acceptable level.
- Survey the room; if exposure levels are acceptable, then the room may be used. If exposure levels are still high, close room and wait an additional amount of time.
- Document the release and that the decontamination procedure (i.e. closing doors and waiting for ventilation system to clear room).

If the activity spreads or has the potential for spreading beyond the building or area, additional assistance may be obtained from the University Police Department.

The RSO/RSD and the Nuclear Medicine Department Staff must participate in routine drills or reviews of spill clean-up/containment practices. The Nuclear Medicine Supervisor will ensure the staff and self undergoes spill drills by conducting the spill drills at a minimum of once every other month. All NMT's will attend an annual 1-hour in-service by the RSO/RSD that reviews the Spill SOP, reviews lessons learned from spills occurring over the previous year and has a quiz to demonstrate competency. These drills and in-services must be documented and logged in the Spill Report Binder. The RSO/ RSD will at a minimum review and conduct audits of spill drill documentation, spill logs, and spill procedures quarterly. The audit report will be recorded and available for review in the Nuclear Medicine Department Spill notebook. The audits conducted on the report sheet will be annotated as "Spill Audits," and a submitted copy will be sent to the Radiology QA meeting and then reported to the Radiation Control Committee and to the hospital Quality Oversight Committee.

## **DEFINITIONS**

**Restricted areas of Nuclear Medicine:** A restricted area is an area to which access is limited by the licensee or registrant for purposes of protection of individuals against undue risks from exposure to sources of radiation. These are the areas within the posted "Restricted Area: Radioactive Materials" signs in UNMH Nuclear Medicine, UNMH SPECT-CT, UNMH PET-CT, and OSIS PET-CT.

## **SUMMARY OF CHANGES**

Replaces the 6/2011 Radiology-Nuclear Medicine document.

6/2014: Minor changes to Spill Log Sheets and phone number updated on Notification Flow Diagram.

**DOCUMENT APPROVAL & TRACKING**

<b>Item</b>	<b>Contact</b>	<b>Date</b>	<b>Approval</b>
<b>Owner</b>	ED, Radiology		
<b>Consultant(s)</b>	Joanna Fair, MD (Nuclear Medicine Section Chief), Meaghan Carey (Radiology Unit Director), Greg Chambers, Cathy Anderko		
<b>Committee(s)</b>	Clinical Operations PP&G Committee, Radiation Control		Y
<b>Medical Director</b>	Gary Mlady, MD		Y
<b>Official Approver</b>	Erin Doles, Professional and Support Svcs Administrator		Y
<b>Official Signature</b>		Date: 11/21/2013	
<b>Effective Date</b>			11/21/2013
<b>Origination Date</b>			6/2011
<b>Issue Date</b>	Clinical Operations Policy Coordinator	11/25/2013	ar

**ATTACHMENTS**

- Radiological Spill Report Log Sheet
- Radiological Spill Report Log Sheet Part II
- Notification Flow Diagram

**UNMH Radiological Spill Log Sheet**  
**\*Keep this form for personal records\***

The spill occurred at \_\_\_\_\_ on \_\_\_\_\_ in room \_\_\_\_\_ of \_\_\_\_\_.  
Time Date #Building

Instrument used to check for contamination:

Meter model: Meter serial number: \_\_\_\_\_

Personnel Present: Personnel Contamination Results:\*

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

(\*mR/hr at 5 cm from affected skin. Note area of skin involved and location on body)

\*On the back of this sheet, indicate any personnel decontamination, additional monitoring, or care instituted.

Survey the spill area to identify hot spots and then begin decontamination. When finished, conduct a post cleaning contamination wipe test. (See page two.)

Radioisotopes present or suspected in the spill:

\_\_\_\_\_ mCi of as \_\_\_\_\_

\_\_\_\_\_ mCi of as \_\_\_\_\_

\_\_\_\_\_ mCi of as \_\_\_\_\_

Give a brief description of the accident:

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

Give a brief description of follow-up actions to prevent recurrence:

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

Name: \_\_\_\_\_

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

**Radioactive Spill Log Sheet, Part II**  
**\*Keep this form for personal records\***

The spill occurred at \_\_\_\_\_ on \_\_\_\_\_ in room \_\_\_\_\_ of \_\_\_\_\_.  
Time Date #Building

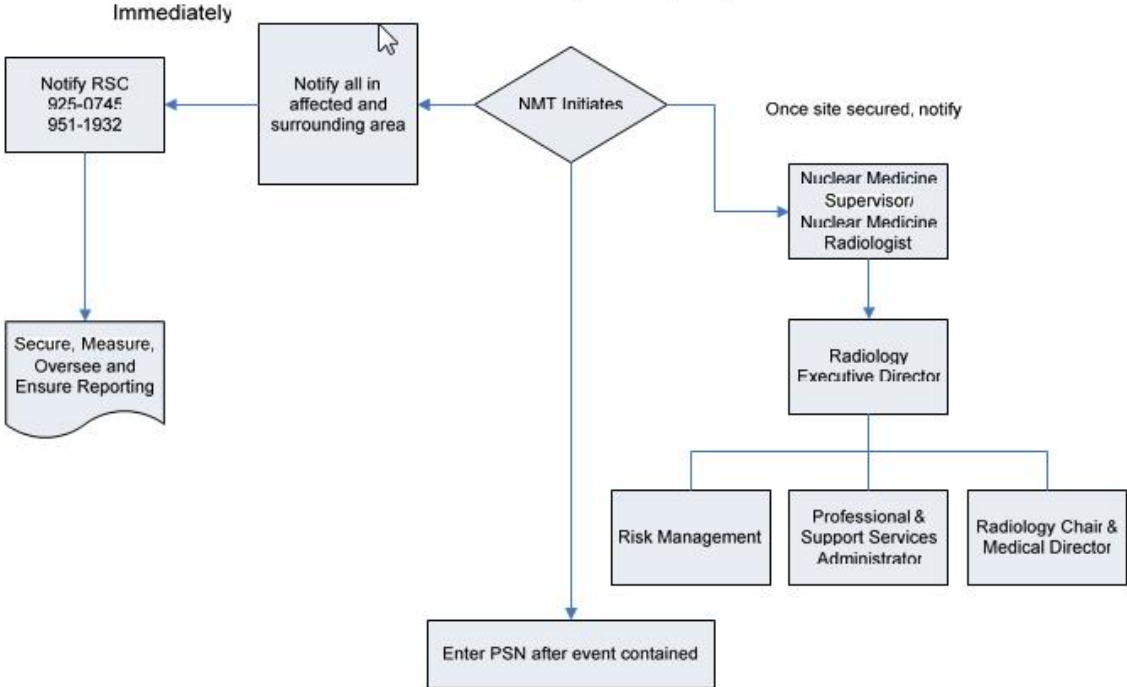
Survey area/wipe map of contaminated room/area:

Survey area/ Wipe number	Pre-clean Survey mR/hr	Post-clean Survey mR/hr:	Post-clean Wipe dpm /100 cm <sup>2</sup>

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

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

# Radiological Major Spill Notification



## Presbyterian Healthcare Services

### Radioactive spill Procedures

- Minor spills of liquids and solids:
  1. Notify persons in the area that a spill has occurred
  2. Prevent the spread of contamination by covering the spill with absorbent paper.
  3. Clean up the spill using disposable gloves and absorbent paper. Carefully fold the absorbent paper with the clean side out and place in a plastic bag for transfer to a radioactive waste container. Also, put contaminated gloves and any other contaminated disposable material in the bag.
  4. Survey the area with a low-range radiation detector survey meter. Check the area around the spill, also check your hands, clothing, and shoes for contamination.
  5. Report the incident to the RSO
  6. The RSO will follow up on the cleanup of the spill and will complete the appropriate forms or documentation letter.
  
- Major spills of liquids and solids:
  1. Clear the area. Notify all persons not involved in the spill to vacate the room.
  2. Prevent the spread of contamination by covering the spill with absorbent paper, but do not attempt to clean it up. To prevent the spread of contamination, limit the movement of all personnel who may be contaminated.
  3. Shield the source if possible. This should be done only if it can be done without further contamination or a significant increase in radiation exposure.
  4. Close the room and lock or otherwise secure the area to prevent entry.
  5. Notify the RSO immediately
  6. Decontaminate the personnel by removing the contaminated clothing and flushing contaminated skin with lukewarm water and then washing with mild soap. If contamination remains, induce perspiration by covering area with plastic. Then wash the affected area again to remove any contamination that was released by perspiration
  7. The RSO will supervise the clean-up of the spill and prepare documentation

**Presbyterian Healthcare Services**  
**RADIOACTIVE SPILL REPORT**

**Institution**

Time of spill \_\_\_\_\_ am/pm Date \_\_\_\_\_ Room \_\_\_\_\_

**Give a brief description of the incident:**

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**Radioisotopes present or suspected in the spill:**

Radionuclide	Activity	Form

**Instrument used to check personnel for contamination:**

Survey Meter Model Number	Serial Number	Probe Model Number	Serial Number

**Personnel present and Personnel contamination survey results**

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**Radioactive Spill Contamination Survey**

Initial survey		Post Decontamination	
Location	mR/hr	mR/hr	dpm/100cm <sup>2</sup>

**Give a brief description of follow-up actions taken to prevent recurrence:**

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**Technologist/ Physicist** \_\_\_\_\_

**SPILL PROCEDURES**

(Adopted from APPENDIX J)

(See 35.21)

**Minor Spills of Liquids and Solids**

1. Notify persons in the area that a spill has occurred.
2. Prevent the spread of contamination by covering the spill with absorbent paper.
3. Clean up the spill using disposable gloves and absorbent paper. Carefully fold the absorbent paper with the clean side out and place in a plastic bag for transfer for a radioactive waste container. Also put contaminated gloves and any other contaminated disposable material in the bag.
4. Survey the area with a low-range radiation detector survey meter. Check the area around the spill. Also check your hands, clothing, and shoes for contamination.
5. Report the incident to the Radiation Safety Officer (RSO).
6. The RSO will follow up on the cleanup of the spill and will complete the Radioactive Spill Report (attached) and the Radioactive Spill Contamination Survey (attached).

**Major Spills of Liquids and Solids**

1. Clear the area. Notify all persons not involved in the spill to vacate the room.
2. Prevent the spread of contamination by covering the spill with absorbent paper, but do not attempt to clean it up. To prevent the spread of contamination, limit the movement of all personnel who may be contaminated.
3. Shield the source if possible. This should be done only if it can be done without further contamination or a significant increase in radiation exposure.
4. Close the room and lock or otherwise secure the area to prevent entry.
5. Notify the RSO immediately.
6. Decontaminate personnel by removing contaminated clothing and flushing contaminated skin with lukewarm water and then washing with mild soap. If contamination remains, induce perspiration by covering the area with plastic. Then wash the affected area again to remove any contamination that was released by the perspiration.
7. The RSO will supervise the cleanup of the spill and will complete the Radioactive Spill Report (attached) and the Radioactive Spill Contamination Survey (attached).



8. Table J-1 and the Decontamination Principles further explain this procedure.

**NOTE:**

The decision to implement a major spill procedure instead of a minor spill procedure will be made by the RSO or his designee. This decision depends on many incident-specific variables such as the number of individuals affected, other hazards present, likelihood of spread of contamination, and types of surfaces contaminated as well as the radiotoxicity of the spilled material. For some spills of short-lived radionuclides the best spill procedure may be restricted access pending complete decay.

TABLE J-1

Relative Hazards of Common Radionuclides

Estimate the amount of radioactivity spilled. Initiate a major or minor spill procedure based on the following dividing line. Spills above these millicurie amounts are considered major, below are considered minor.

			Radionuclide	Millicuries	Radionuclide	Millicuries
P-32	10		Tc-99m	100		
Cr-51	100		In-111	10		
Co-57	100		I-123	10		
Co-58	10		I-125	1		
Fe-59	10		I-131	1		
Co-60	1		Yb-169	10		
Ga-67	100		Hg-197	100		
Se-75	10		Au-198	10		
Sr-85	10		Tl-201	100		

Spill Kit - LOCATED IN 2B111 (BONE DENSITOMETRY)

The spill kit contains:

- Instructions for "Spill Procedures"
- 2 surgical gowns
- 1 plastic gown
- 2 pairs plastic booties
- 8 paper scrubs (tops)
- 4 paper scrubs (bottoms)
- 6 paper caps
- 8 face masks
- 4 pairs (size 6 gloves)
- 4 pairs (size 7 gloves)
- 4 pairs (size 8 gloves)
- 20 plastic bags
- Isoclean, decontamination liquid
- Isopropyl ETOH spray bottle
- Radiation Hazard labels
- 10 chux
- 1 package 4X4 inch cotton squares
- 1 package 2X2 inch cotton squares - wipe tests
- Marking Pen/Pencil

Forms

- \_\_\_\_\_ Decontamination Principles
- Radioactive Spill Procedures
- Radioactive Spill Report
- Radioactive Spill Contamination Survey Forms

Radioactive Spill Report  
(Adopted from EXHIBIT 10)

The spill occurred at \_\_\_\_\_ am  
\_\_\_\_\_ : \_\_\_\_\_ pm on \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_, room \_\_\_\_\_.

Instrument used to check for personnel contamination:

Meter model: \_\_\_\_\_ Probe Model: \_\_\_\_\_  
Meter S/N: \_\_\_\_\_ Probe S/N: \_\_\_\_\_

Personnel present

Personnel contamination results\*

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

\*On the back of the sheet, indicate any personnel decontamination, additional monitoring, or care instituted.

Survey the spill area to identify hot spots, then begin contamination. When finished, conduct a post cleaning contamination wipe-test.

Radioisotopes present or suspected in the spill:

\_\_\_\_\_ mCi of \_\_\_\_\_ as \_\_\_\_\_

\_\_\_\_\_ mCi of \_\_\_\_\_ as \_\_\_\_\_

\_\_\_\_\_ mCi of \_\_\_\_\_ as \_\_\_\_\_

Give a brief description of the accident: \_\_\_\_\_

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

Give a brief description of follow up actions taken to prevent recurrence:

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

NAME: \_\_\_\_\_

DATE: \_\_\_\_\_

Radioactive Spill Contamination Survey  
(Adopted from EXHIBIT 11)

The spill occurred at \_\_\_\_:\_\_\_\_pm on \_\_\_\_ - \_\_\_\_ - \_\_\_\_ in room \_\_\_\_.

Decontamination completed at \_\_\_\_:\_\_\_\_pm.

| |pre- | post-clean |  
| |clean| dpm/ |

    |loc|mR/hr|mR/hr|100cm2|

NAME: \_\_\_\_\_

## Appendix H Nuclear Medicine Adjunctive Medications

### **Adjunctive Medications:**

Involves the identification, calculation, documentation, administration, and monitoring of adjunctive medication(s) used during an in vitro, diagnostic imaging, or therapeutic procedure. Adjunctive medications are defined as those medications used to evoke a specific physiological or biochemical response. Also included are the preparation and administration of oral and IV contrast used in the performance of imaging studies.

A nuclear medicine technologist displays:

- A. A thorough understanding and knowledge of indications, contraindications, warnings, precautions, proper use, drug interactions, and adverse reactions for each adjunct medication to be used.
- B. The ability to procure and maintain pharmaceutical products and adjunct supplies by:
  1. Anticipating and procuring a sufficient supply of pharmaceuticals for an appropriate period in accordance with anticipated need.
  2. Storing pharmaceuticals and supplies in a manner consistent with labeled product safeguards and established facility policies.
- C. The ability to properly prepare and administer pharmaceuticals under the direction of an authorized user in accordance with all federal and state regulations, and institutional policies by:
  1. Employing aseptic technique for manipulation of sterile products and preparations (see Section V.C.).
  2. Selecting and preparing pharmaceuticals in accordance with the manufacturer's specifications.
  3. Confirming the quality of a pharmaceutical in accordance with accepted techniques and official standards.
  4. Documenting the administered dose, date, and time of all pharmaceuticals in a permanent medical record.
  5. Observing the patient for possible complications (e.g., adverse reactions) of adjunctive medication administration, and handling such complications appropriately in conjunction with other available staff.

Reference:

Website: <https://www.sdms.org/resources/other-guidelines-standards>

## Nuclear Medicine Adjunctive Medications

### Interventional Pharmaceuticals

dipyridamole  
adenosine  
dobutamine  
aminophylline  
regadenoson  
captopril  
enaloprilat  
furosemide  
insulin  
acetazolamide  
cholecystokinen/sincalide/CCK  
morphine  
cimetidine/ranitidine/famotidine

### Miscellaneous Non-Radioactive Agents

ACD solution  
heparin  
ascorbic acid  
hetastarch  
contrast media  
Lugol's solution/SSKI  
TSH  
EDTA  
Lidocaine  
Lidocaine (EMLA) cream  
atropine  
recombinant human TSH

Reference:

<http://www.nmtcb.org/exam/pharmalist.php>

**Appendix I**  
**UNM 2020-2021 EVIDENCE OF COVERAGE**

	<b>NEW MEXICO</b> GENERAL SERVICES DEPARTMENT RISK MANAGEMENT DIVISION	<b>EVIDENCE OF COVERAGE</b>
<b>MEMORANDUM NUMBER: RMD-EOC-FY21</b>		
<p>This Evidence of Coverage is used as a matter of information only and confers no rights upon the Certificate Holder. This Evidence of Coverage does not amend, extend, or alter the coverage afforded by the Tort Claims Act or the applicable Certificates of Coverage or policies for the type(s) of coverage listed below.</p>		
<b>CERTIFICATE HOLDER INFORMATION</b>		
<u>INSURED</u> <b>STATE OF NEW MEXICO</b> and <b>UNIVERSITY OF NEW MEXICO (96900)</b> <b>LOSS PAYEE: TO WHOM IT MAY CONCERN</b>		
<b>Coverage Period:</b> <b>12:00 AM 07/01/2020 to 11:59 PM 06/30/2021</b>		
<p>This is to certify that the Insured has the coverages listed below for the period indicated. Notwithstanding any requirement, term or condition of any contract or other document with respect to which this Evidence of Coverage may be used or may pertain, the coverages indicated in this Evidence of Coverage are subject to all terms, exclusions, and conditions of the Certificates of Coverage and other insurance policy(s) to which this Evidence of Coverage pertains. Property and Liability Certificates of Coverage may be obtained by contacting the State of New Mexico's Risk Management Division at 505-827-2036.</p>		
<b>Type of Coverage</b>	<b>Limit of Liability/Coverage</b>	
A) Liability	Statutory Limit NMSA § 41-4-19	
i. General Liability		
ii. Automobile Liability		
iii. Law Enforcement		
iv. Civil Rights		
B) Workers Compensation.....	Statutory Limits NMSA § 52-1-1 et seq.	
C) Property.....	\$550,000,000.00	Limit
i. Auto Physical Damage.....	Actual Cash Value (ACV)	
D) Medical Malpractice .....	Statutory Limit NMSA § 41-4-19	
E) Boiler & Machinery.....	\$100,000,000.00	Limit
F) Fine Arts.....	\$300,000,000.00	
<p>Per 66-5-207, NMSA 1978, - A motor vehicle owned by the United States Government, any state, or political subdivision of the state, is exempt from the Mandatory Financial Responsibility Act.</p>		
<p>Per 66-6-15(E), NMSA 1978, - A vehicle or trailer owned by and used in the service of the State of New Mexico or any county or municipality thereof need not be registered but must continually display plates furnished by the Transportation Services Division of the General Services Department.</p>		
<p>Should any of the above coverages for the Covered Party be changed or withdrawn prior to the expiration date issued above, the State of New Mexico will notify the Certificate Holder, but failure of such notification shall impose no obligation or liability of any kind upon the State of New Mexico, its agents, or representatives.</p>		
<b>Authorized Representative: Mark Tyndall, Director, Risk Management Division, GSD</b>		
<b>Date Issued: 7-1-2020</b>		
For questions please contact the Loss Prevention and Control Bureau at 505-827-2036 or GSD.LPCB@state.nm.us		

N. M. S. A. 1978, § 41-4-19

§ 41-4-19. Maximum liability

Effective: July 1, 2020

A. Unless limited by Subsection B of this section, in any action for damages against a governmental entity or a public employee while acting within the scope of the employee's duties as provided in the Tort Claims Act, the liability shall not exceed:

(1) the sum of two hundred thousand dollars (\$200,000) for each legally described real property for damage to or destruction of that legally described real property arising out of a single occurrence;

(2) the sum of three hundred thousand dollars (\$300,000) for all past and future medical and medically related expenses arising out of a single occurrence; and

(3) the sum of four hundred thousand dollars (\$400,000) to any person for any number of claims arising out of a single occurrence for all damages other than real property damage and medical and medically related expenses as permitted under the Tort Claims Act.

B. The total liability for all claims pursuant to Paragraphs (1) and (3) of Subsection A of this section that arise out of a single occurrence shall not exceed seven hundred fifty thousand dollars (\$750,000).

**Appendix J**  
**UNM Radiation protection Policy for Workers**  
**Declaration of Pregnancy Form**



OFFICE OF RESEARCH - RADIATION  
SAFETY

*Clinical and Translational  
Science Center  
Animal  
Resource Facility  
Biomedical Research  
Education Program  
Biohazard Compliance  
Clinical Trials  
Center  
Conflict of  
Interest  
Export  
Control  
Human Research  
Protections Office of  
Animal Care  
Compliance  
Radiation Safety*

**POLICY AND PROCEDURE**

**TITLE: UNIVERSITY OF NEW MEXICO (UNM)  
RADIATION PROTECTION POLICY FOR PREGNANT WORKERS**

**POLICY:** Under applicable regulations of the State of New Mexico Radiation Protection Regulations <sup>(1)</sup>, and other applicable federal statutes <sup>(2)</sup>, it is the policy of the University of New Mexico to monitor and limit the radiation dose to the embryo/fetus of a declared pregnant woman to 5 mSv (0.5 rem) over the entire gestation period <sup>(3)</sup>. The University of New Mexico shall review the exposure history of the declared pregnant woman and adjust working conditions to avoid a monthly exposure of more than 0.5 mSv (0.05 rem) to the declared pregnant woman <sup>(4)</sup>.

Further, it is the policy of the University of New Mexico to provide counseling and education to the pregnant woman prior to declaration with regard to the risks of radiation exposure and to consult with her regarding recommendations for maintaining the radiation dose to the embryo/fetus within the above limits and As Low As Reasonably Achievable (ALARA) principles. Declarations and records under this policy are confidential. Her employer specifically protects the declared pregnant woman from discharge or discrimination as a result of her pregnancy.



A copy of this policy shall be made available to each radiation worker at the University of New Mexico. This policy shall be incorporated into the UNM Radiation Safety Manual, and a copy of this policy shall be prominently posted.

**RESPONSIBILITY:** The University of New Mexico Radiation Safety Officer (RSO) and his/her designee are responsible for administering the above policy at the University of New Mexico and associated University of New Mexico facilities. In administering this and all other radiation safety policies at the University of New Mexico, the Radiation Safety Officer shall be provided sufficient authority and organizational freedom to identify radiation safety problems, initiate, recommend, or provide corrective actions, and verify implementation of corrective actions.

**PROCEDURE: The University of New Mexico Radiation Protection Policy For Pregnant Workers shall be implemented as follows:**

**1. Method of instruction to workers:**

As part of their initial employment, all radiation workers are required to receive from the Radiation Safety Office, instructions in radiation protection. These instructions may be given at a new employee orientation or at a scheduled radiation safety lecture for new employees. These instructions should include: the effects of radiation to the embryo/fetus, a statement of the special limit for protection of the embryo/fetus of a declared pregnant woman, the responsibility of the pregnant woman to declare her condition to the Radiation Safety Officer and the importance of her doing so. A copy of this policy should be distributed to each new radiation worker at his or her initial radiation safety orientation.

Instruction in the special limit for protection of the embryo/fetus of a declared pregnant woman and the University of New Mexico pregnancy policy should be included in all annual refresher training. Copies of this policy, the U.S.N.R.C. Regulatory Guide 8.13, Instruction Concerning Prenatal Radiation Exposure, and the Declaration of Pregnancy Form shall be made available in all refresher training courses.

At the time of her Declaration of Pregnancy, the declared pregnant woman will receive individual counseling from the RSO or designee. The RSO or designee will discuss with the employee the regulations and potential concerns regarding exposure to radiation and/or radioactive material, precautions or procedures to minimize exposure, and the purposes and functions of protective devices employed. The information shall be tailored to address the specific radiological health concern and shall also include how the worker's duties or schedule could be affected if the fetal exposure approaches or exceeds the regulatory limits.

**2. Responsibility of workers:**

Federal statute <sup>(5)</sup> mandates that; *"It is the fundamental responsibility of the pregnant worker to decide when or whether she will formally declare her condition to her employer"*. Declaration of pregnancy is optional and requires no physical evidence or proof. A radiation worker may declare pregnancy if pregnancy is known, expected, or anticipated by the employee. It is the policy of the University of New Mexico Radiation Safety division that formal declaration is defined as filing a completed, signed and dated Declaration of Pregnancy form with the RSO or designee. A copy of the Declaration of Pregnancy Form, RSF-54-1, is attached. If she chooses not to declare her pregnancy, the Radiation Safety Officer or designee will continue to ensure that she receives all normal occupational protections - the annual occupational dose limit of 50

mSv (5.0 rem) <sup>(6)</sup> and all ALARA considerations will be in effect. All rights of declaration rest with the pregnant woman. The declaration of pregnancy remains in effect until the declared pregnant woman withdraws the declaration with a signed, dated, written statement of withdrawal filed with the Radiation Safety Officer or if she is no longer pregnant <sup>(7)</sup>. A separate written declaration must be completed for each pregnancy.

### **3. Regarding work assignments for pregnant workers:**

In order to ensure that the dose to an embryo/fetus during the entire pregnancy, due to occupational exposure of a declared pregnant woman, does not exceed 5 mSv (0.5 rem), the Radiation Safety Officer shall review the exposure history and the present job duties of the declared pregnant woman and require the adjustment in working conditions so as to avoid a monthly exposure of more than 0.5 mSv (0.05 rem) to the embryo/fetus.

If, by the time the pregnant worker declares pregnancy to the Radiation Safety Officer, the dose to the embryo/fetus has exceeded 4.5 mSv (0.45 rem), the Radiation Safety Officer shall ensure that additional occupational dose to the embryo/fetus does not exceed 0.5 mSv (0.05) rem during the remainder of the pregnancy <sup>(8)</sup>. The radiation dose to the embryo/fetus is defined as the sum of the deep dose equivalent to the declared pregnant woman most representative of the dose to the embryo/fetus from external sources of radiation, such as X-rays and gamma-rays, and the internal dose to the embryo/fetus from the uptake of radionuclides by the declared pregnant woman and by the embryo/fetus <sup>(9)</sup>.

Due to privacy provisions noted in the following section, if an adjustment of working conditions is necessary, the Radiation Safety Officer will consult with the declared pregnant woman, discuss with her any adjustment of working conditions that may be required, and obtain her written authorization prior to discussing such adjustments with her supervisor.

An employee may consult with Human Resources for alternative solutions to refrain from working during pregnancy in lieu of complying with this policy. Solutions may include a personal leave of absence.

### **4. Implementation, records, and reports of the declaration of pregnancy:**

#### **A) Issuance of badges**

Upon completion of declaration via RSF-54-1 "Declared Pregnant Worker" Form, if the declared pregnant woman is likely to receive during the entire pregnancy, from radiation sources external to the body, a deep dose equivalent in excess of 1 mSv (0.1 rem), a monthly exchange fetal badge shall be issued in addition to the whole-body badge, which is exchanged at the normal frequency <sup>(10)</sup>. The fetal badge should be worn each business day, in the abdominal area, underneath lead when applicable and stored in a radiation-free area

in the department (along with the whole-body badge) while not working. The fetal badge is labeled to clearly distinguish it from the whole-body badge. It is the employee's responsibility to correctly wear the two badges.

#### B) Records

Declarations and records required under this policy should be protected from public disclosure because of their personal privacy nature. These records are protected by State and Federal privacy statutes<sup>(11)</sup>. The Declaration of Pregnancy Form, including the estimated date of conception will be maintained in a separate file from the dose records of the declared pregnant woman and the embryo/fetus<sup>(12)</sup>. The Declaration of Pregnancy Form will be over-stamped or bear the prominent heading, "CONFIDENTIAL."

#### C) Informing workers of exposure received during gestation

The Radiation Safety Officer shall advise each worker annually of the worker's exposure to radiation as required<sup>(13)</sup> and shall furnish a report of the worker's (or former worker's) exposure to sources of radiation at their request<sup>(14)</sup>. The RSO may also notify each worker of their monthly fetal exposure given the same requirements. If the Radiation Safety Officer is required to report to the State of New Mexico, New Mexico Environment Department (NMED) any exposure of an individual to radiation or radioactive material, the Radiation Safety Officer shall also notify the individual at a time not later than the transmittal to the Radiation Control Bureau<sup>(15)</sup>.

Notification or report to a worker shall be in writing, shall include appropriate identification of the licensed institution, University of New Mexico, the name and identification number of the individual worker, their exposure information and shall contain the statement, "This report is furnished to you under the provisions of the State of New Mexico, NMED. You should preserve this report for further reference."<sup>(16)</sup>

#### D) Reports

The Radiation Safety Officer shall submit a written report to the State of New Mexico, NMED, within thirty days after learning that the 5 mSv (0.5 rem) dose limit for an embryo/fetus of a declared pregnant woman has been exceeded<sup>(17)</sup>. The report shall describe the extent of exposure of the embryo/fetus and of the declared pregnant woman to radiation and radioactive materials and include as appropriate: estimates of each individual's dose; the levels of radiation and concentrations of radioactive material involved; the cause of the elevated exposures, dose rates or concentrations; and corrective steps taken or planned to ensure against a recurrence<sup>(18)</sup>. This report shall be prepared so that identifiers such as name,

identification number and date of birth are stated in a separate and detachable portion of the report in order to conform to privacy laws <sup>(19)</sup>.

ALARA review <sup>(20)</sup> of the declared pregnant woman's Personnel Radiation Dosimetry Report will be performed on a monthly basis to identify a monthly exposure of more than 0.5 mSv (0.05 rem). The declared pregnant woman will be notified in writing if her monthly radiation dose exceeds the 0.05 rem ALARA level and an appropriate ALARA investigation will be performed. The University of New Mexico Radiation Control Committee (RCC) will receive ALARA reports for declared pregnant women with identifiers such as name, identification number and date of birth in a separate and detachable portion of the report.

## **5. Provision of further information:**

Any individual or group having questions related to the radiation protection of the embryo/fetus is strongly encouraged to contact the Radiation Safety Officer. The Radiation Safety Officer will provide appropriate and confidential education and

counseling. Further information may be found in the

following publications:

Regulatory Guide 8.13, Instruction Concerning Prenatal Radiation Exposure, U.S. Nuclear Regulatory Commission, Revision 3, June 1999.

Federal Register, Volume 56, No. 98, Tuesday, May 21, 1991, Rules and Regulations, 10 CFR 20, Standards for Protection Against Radiation, Final Rule.

N.C.R.P. Report No. 54, Medical Radiation Exposure of Pregnant and Potentially Pregnant Women, National Council on Radiation Protection and Measurements, July 15, 1977.

N.C.R.P. Commentary No 9, Considerations Regarding the Unintended Radiation Exposure of The Embryo, Fetus or Nursing Child, National Council on Radiation Protection and Measurements, May 1, 1994.

## **6. Applicable State of New Mexico and Federal statutes referenced:**

- (1) New Mexico Radiation Protection Regulations, 20.3.4 NMAC.
- (2) Federal Register, Vol. 56, No. 98, Tuesday, May 21, 1991, Rules and Regulations, Final Rule, 10CFR20, Standards for Protection Against Radiation, p. 23397, 20.1208, Dose to an embryo/fetus.

- (3) New Mexico Radiation Protection Regulations, 20.3.4.412 (A) NMAC. (4) New Mexico Radiation Protection Regulations, 20.3.4.412 (B) NMAC.
- (5) Federal Register, Vol. 56, No. 98, Tuesday, May 21, 1991, Rules and Regulations, Final Rule, 10CFR20, Standards for Protection Against Radiation, p. 23373.
- (6) U.S. Nuclear Regulatory Commission, Regulatory Guide 8.13, Revision 3, June 1999, Part B, p. 2.
- (7) New Mexico Radiation Protection Regulations, 20.3.4.7 (V) NMAC.
- (8) New Mexico Radiation Protection Regulations, 20.3.4.412 (D) NMAC.
- (9) New Mexico Radiation Protection Regulations, 20.3.4.412 (C) NMAC.
- (10) New Mexico Radiation Protection Regulations, 20.3.4.417 (A)(3) NMAC.
- (11) Federal Register, Vol. 56, No. 98, Tuesday, May 21, 1991, Rules and Regulations, Final Rule, 10CFR20, Standards for Protection Against Radiation, p. 23405, 10CFR 20.2106(d); and,  
  
Privacy Act of 1974, Public Law 93-579, 5U.S.C. 552a, and 10CFR19; and, New Mexico Radiation Protection Regulations, 20.3.4.446 (G) NMAC.
- (12) New Mexico Radiation Protection Regulations, 20.3.4.446 (D) NMAC.
- (13) New Mexico Radiation Protection Regulations, 20.3.10.1003 (B)(1) NMAC.
- (14) New Mexico Radiation Protection Regulations, 20.3.10.1003 (B)(2) NMAC.
- (15) New Mexico Radiation Protection Regulations, 20.3.10.1003 (D) NMAC.
- (16) New Mexico Radiation Protection Regulations, 20.3.10.1003 (A) NMAC.
- (17) New Mexico Radiation Protection Regulations, 20.3.4.453 (A)(2)(c) NMAC.
- (18) New Mexico Radiation Protection Regulations, 20.3.4.453 (B)(1) NMAC.
- (19) New Mexico Radiation Protection Regulations, 20.3.4.453 (B)(2) NMAC.
- (20) New Mexico Radiation Protection Regulations, 20.3.4.404 (B) NMAC.



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

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

**INSTRUCTION CONCERNING PRENATAL RADIATION EXPOSURE**

**A. INTRODUCTION**

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

The Nuclear Regulatory Commission's (NRC's) regulations on radiation protection are specified in

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

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

Other sections of the NRC's regulations also specify requirements for monitoring external and internal

occupational dose to a declared pregnant woman. In 10 CFR 20.1502, "Conditions Requiring Individual Monitoring of External and Internal Occupational Dose," licensees are required to monitor the occupational dose to a declared pregnant woman, using an individual monitoring device, if it is likely that the declared pregnant woman will receive, from external sources, a deep dose equivalent in excess of 0.1 rem (1 mSv). According to Paragraph (e) of 10 CFR 20.2106, "Records of Individual Monitoring Results," the licensee must maintain records of dose to an embryo/fetus if monitoring was required, and the records of dose to the embryo/fetus must be kept with the records of dose to the declared pregnant woman. The declaration of pregnancy must be kept on file but may be maintained separately from the dose records. The licensee must retain the required form or record until the Commission terminates each pertinent license requiring the record.

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

## **B. DISCUSSION**

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

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

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



## C. REGULATORY POSITION

### 1. Who Should Receive Instruction

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

### 2. Providing Instruction

The occupational worker may be given a copy of this guide with its Appendix, an explanation of the

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

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

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

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

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

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

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

may be considered expired one year after submission.

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

According to 10 CFR 20.1208(b), "The licensee shall make efforts to avoid substantial variation above a uniform monthly exposure rate to a declared pregnant woman so as to satisfy the limit in paragraph (a) of this section," that is, 0.5 rem (5 mSv) to the embryo/fetus. The National Council on Radiation Protection and Measurements (NCRP) recommends a monthly equivalent dose limit of 0.05 rem (0.5 mSv) to the embryo/fetus once the pregnancy is known (Ref. 2). In view of the NCRP recommendation, any monthly dose of less than 0.1 rem (1 mSv) may be considered as not a substantial variation above a uniform monthly dose rate and as such will not require licensee justification. However, a monthly dose greater than 0.1 rem (1 mSv) should be justified by the licensee.

### **D. IMPLEMENTATION**

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

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

### **REFERENCES**

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

## QUESTIONS AND ANSWERS CONCERNING PRENATAL RADIATION EXPOSURE

### 1. Why am I receiving this information?

The NRC's regulations (in 10 CFR 19.12, "Instructions to Workers") require that licensees instruct individuals working with licensed radioactive materials in radiation protection as appropriate for the situation. The instruction below describes information that occupational workers and their supervisors should know about the radiation exposure of the embryo/fetus of pregnant women.

The regulations allow a pregnant woman to decide whether she wants to formally declare her pregnancy to take advantage of lower dose limits for the embryo/fetus. This instruction provides information to help women make an informed decision whether to declare a pregnancy.

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

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

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

If you choose to declare your pregnancy in writing, the licensee must take measures to limit the dose to your embryo/fetus to 0.5 rem (5 millisievert) during the entire pregnancy. This is one-tenth of the dose that an occupational worker may receive in a year. If you have already received a dose exceeding 0.5 rem (5 mSv) in the period between conception and the declaration of your pregnancy, an additional dose of 0.05 rem (0.5 mSv) is allowed during the remainder of the pregnancy. In addition, 10 CFR 20.1208, "Dose to an Embryo/Fetus," requires licensees to make efforts to avoid substantial variation above a uniform monthly dose rate so that all the

0.5 rem (5 mSv) allowed dose does not occur in a short period during the pregnancy.

This may mean that, if you declare your pregnancy, the licensee may not permit you to do some of your normal job functions if those functions would have allowed you to receive more than 0.5 rem, and you may not be able to have some emergency response responsibilities.

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

A lower dose limit for the embryo/fetus of a declared pregnant woman is based on a consideration of greater sensitivity to radiation of the embryo/fetus and the involuntary nature of the exposure. Several

scientific advisory groups have recommended (References 1 and 2) that the dose to the embryo/fetus be limited to a fraction of the occupational dose limit.

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

The occurrence and severity of health effects caused by ionizing radiation are dependent upon the type and total dose of radiation received, as well as the time period over which the exposure was received. See Regulatory Guide 8.29, "Instruction Concerning Risks from Occupational Exposure" (Ref. 3), for more information. The main concern is embryo/fetal susceptibility to the harmful effects of radiation such as cancer.

#### **6. Are there any risks of genetic defects?**

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

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

You may ask your employer for a job that does not involve any exposure at all to occupational radiation dose, but your employer is not obligated to provide you with a job involving no radiation exposure. Even if you receive no occupational exposure at all, your embryo/fetus will receive some radiation dose (on average 75 mrem (0.75 mSv)) during your pregnancy from natural background radiation.

The NRC has reviewed the available scientific literature and concluded that the 0.5 rem (5 mSv) limit provides an adequate margin of protection for the embryo/fetus. This dose limit reflects the desire to limit the total lifetime risk of leukemia and other cancers. If this dose limit is exceeded, the total lifetime risk of cancer to the embryo/fetus may increase incrementally. However, the decision on what level of risk to accept is yours. More detailed information on potential risk to the embryo/fetus from radiation exposure can be found in References 2-10.

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

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

In many cases you can continue in your present job with no change and still meet the dose limit for

the embryo/fetus. For example, most commercial power reactor workers (approximately 93%) receive, in 12 months, occupational radiation doses that are less than 0.5 rem (5 mSv) (Ref. 11). The licensee may also consider the likelihood of increased radiation exposures from accidents and abnormal events before making a decision to allow you to continue in your present job.

If your current work might cause the dose to your embryo/fetus to exceed 0.5 rem (5 mSv), the licensee has various options. It is possible that the licensee can and will make a reasonable accommodation that will allow you to continue performing your current job, for example, by having another qualified employee do a small part of the job that accounts for some of your radiation exposure.

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

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

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

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

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

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

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

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

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

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

#### **14. What if I have a miscarriage or find out that I am not pregnant?**

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

#### **15. How long is the lower dose limit in effect?**

The dose to the embryo/fetus must be limited until you withdraw your declaration in writing or you

inform the licensee in writing that you are no longer pregnant. If the declaration is not withdrawn, the written declaration may be considered expired one year after submission.

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

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

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

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

#### **18. Where can I get additional information?**

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

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

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

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

## REFERENCES FOR APPENDIX

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

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<sup>11</sup>Single copies of regulatory guides, both active and draft, and draft NUREG documents may be obtained free of charge by writing the Reproduction and Distribution Services Section, OCIO, USNRC, Washington, DC 20555-0001, or by fax to (301)415-2289, or by email to <DISTRIBUTION@NRC.GOV>. Active guides may also be purchased from the National Technical Information Service on a standing order basis. Details on this service may be obtained by writing

NTIS, 5285 Port Royal Road, Springfield, VA 22161. Copies of active and draft guides are available for inspection or copying for a fee from the NRC Public Document Room at 2120

L Street NW., Washington, DC; the PDR's mailing address is Mail Stop LL-6, Washington, DC 20555; telephone (202)634-3273; fax (202)634-3343. National Radiological Protection Board, *Advice on Exposure to Ionising Radiation During Pregnancy*, National Radiological Protection Board, Chilton, Didcot, UK, 1998.

10. M.L. Thomas and D. Hagemeyer, "Occupational Radiation Exposure at Commercial Nuclear Power Reactors and Other Facilities, 1996," Twenty-Ninth Annual Report, NUREG-0713, Vol. 18, USNRC, 1998.<sup>22</sup>

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<sup>22</sup>Copies are available at current rates from the U.S. Government Printing Office, P.O. Box 37082, Washington, DC 20402-9328 (telephone (202)512-1800); or from the National Technical Information Service by writing NTIS at 5285 Port Royal Road, Springfield, VA 22161. Copies are available for inspection or copying for a fee from the NRC Public Document Room at 2120 L Street NW., Washington, DC; the PDR's mailing address is Mail Stop LL-6, Washington, DC 20555; telephone (202)634-3273; fax (202)634-3343.



**Appendix J:  
Pregnancy Declaration Form (Cont.)**

	<b>RSF-54-1</b>	<b>UNM RADIATION SAFETY DIVISION</b> <hr/> <b>Declared Pregnant Worker</b>
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Please read U.S. Nuclear Regulatory Commission (NRC) Regulatory Guide 8.13 Instruction Concerning Prenatal Radiation Exposure. (revision 3, June 1999). Contact Radiation Safety at 925-0745 or 925-0743 regarding questions on this material.

*A "declared pregnant worker" is a woman who has voluntarily informed her employer, in writing, of her pregnancy and the estimated date of conception.*

Full Name: _____	UNMH Employee ID/Banner# _____
My Date of Birth: _____	Participant # _____ (see reverse for finding your Part#)

In accordance with the State of New Mexico's regulations at 20.3.4.412 "Dose Equivalent to an Embryo / Fetus," I am declaring that I am pregnant.

I believe I became pregnant in \_\_\_\_\_ (Enter Month and

Year). I have been provided a copy of NRC Regulatory Guide 8.13 Instruction Concerning Prenatal

Radiation

Exposure, and have read and understand this document. I have also been given the opportunity to ask questions regarding radiation dose to the embryo/fetus, and understand that I may call the Radiation Safety Office at any time with additional questions.

I understand the licensee shall ensure that the dose to an embryo/fetus during the entire pregnancy, due to occupational exposure of a declared pregnant woman does not exceed 500 millirems (5 millisieverts). I also understand the licensee shall make efforts to avoid a substantial variation above a uniform monthly exposure rate (50 millirem) to a declared pregnant woman so as to satisfy the limit of 500 millirem. I also understand that meeting the lower dose limit may require a change in job or job responsibilities during my pregnancy.

If I find out that I am not pregnant, or if my pregnancy is terminated, I will promptly inform you in writing that my pregnancy has ended. I also understand that I may un-declare my pregnancy at any time and for any reason (in writing to the RSO).

I have been provided a copy of this completed form:

Signature: \_\_\_\_\_ Email: \_\_\_\_\_

Department: \_\_\_\_\_ Phone: \_\_\_\_\_ Title: \_\_\_\_\_

\*Supervisor in Attendance/Informed: Yes No (\*you are not required to inform your supervisor)

If yes, complete the following \_\_\_\_\_

Your Part# can be found on the backside of your dosimeter

Remove from clip holder.



Back

Information on the back of the dosimeter



Location Code, three letters underlined in yellow here

Wearer's Participant Number, 5 digits, underlined in red here. **Look at your dosimeter and give us that number.**

Dosimeter SN number, each dosimeter has it's own serial number. Underlined in blue here.

Website: <https://www.acog.org/clinical/clinical-guidance/committee-opinion/articles/2017/10/guidelines-for-diagnostic-imaging-during-pregnancy-and-lactation>

**Appendix K:  
Incomplete Grade Policy (BSRS)**



***Radiologic Sciences Program***

**INCOMPLETE GRADE POLICY  
Bachelor of Science Radiologic Sciences**

**Incomplete (I) Grade**

According to academic policy, incomplete grades must be completed before a student is eligible to graduate from the University of New Mexico.

The grade of I is given only when circumstances beyond the student's control have prevented completion of the coursework within the official dates of a semester/session.

Students should not re-enroll or re-register (for credit) in a course in which an "I" (Incomplete) grade has been assigned in order to resolve it. If an instructor requires the student to repeat the class in order to resolve the Incomplete, the student must register for the course on an audit basis.

Grade changes: Incomplete grades must be received no later than one year (twelve months) from the published end day of the term in which the grade was assigned. Incomplete grades not resolved within the time frame stated in this policy are automatically converted to an F (Failure) grade.

Students who resolve Incompletes in the term of graduation must have the process completed (including the reporting of the grade to the Records and Registration Office, by the deadline). Students are responsible for informing instructors that they are graduating, and the grade(s) must be reported by the appropriate deadline. Failure to complete the process as described could result in the postponement of graduation until the following term.

The instructor of record reports the final grade for the course in which the Incomplete was assigned to the Records and Registration Office. Graduate students see the section on Graduate Programs related to this policy.

### Extension of Incomplete

A student may apply for an extension of the time allowed to complete the course work required to remove the "I" grade. The request for extension form may be obtained in the Records and Registration Office. A student who re-enrolls in residence may be granted a one-semester extension. If an extension is granted, it is the student's responsibility to ensure the "I" grade is removed by the date indicated. Graduate students are required to obtain the additional signature of the Dean of Graduate Studies. The request form must be submitted no later than the last day of the term.

If a student wants to receive an "incomplete" in their class(es), they need to discuss it with their instructor(s). If the instructor(s) assigns an "incomplete" the student needs to complete whatever work the instructor requires. The instructor will submit an "I" on the grade report. Incomplete grades must be resolved no later than one year (twelve months) from the published end day of the semester in which the grade was assigned. Incomplete grades not resolved within the time frame stated in this policy will be converted automatically to an IF (failing) grade. The student is responsible for making arrangements with the instructor for resolving an incomplete grade.

<http://catalog.unm.edu/catalogs/2020-2021/student-services-information.html>

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

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

**Appendix L:  
Consent for Photography/Videotaping/Filming/Imaging**



Consent for Photography/Videotaping/Filming/Imaging

Name: \_\_\_\_\_ Banner Number: \_\_\_\_\_

Date: \_\_\_\_\_ Purpose: \_\_\_\_\_

I hereby consent to being photographed, videotaped, filmed, or otherwise imaged at the UNM Health Sciences Center. I understand and agree that these photographs, videotapes, films, or images may be used as indicated below (check all that apply):

- Educational activities involving UNMHSC staff and/or employees
- Educational activities outside of UNMHSC involving others besides UNMHSC staff and/or employees
- Research activities
- Legal Purposes
- Public media, including news media, television, advertisements, public relations, or other \_\_\_\_\_
- Social Media
- Program Website

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Witness

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

Radiologic Sciences Program at the University of New Mexico  
MSC09.5260.2500 Marble Ave NE, HSSB Room 217, Albuquerque, NM 87131-0001. 505-272-5254/505-272-8079 fax

## **Appendix M**

### **The Nuclear Medicine Clinical Supervisor's and/or Preceptor's Responsibilities**

The Clinical Supervisor's and/or Clinical Preceptor responsibilities include the following clinical education of students:

- HIPAA:
  - Compliance with Health Insurance Portability and Accountability Act (HIPAA) as they relate to patient care and patient record keeping.
- Radiation safety:
  - Techniques that will minimize radiation exposure to the patient, public, fellow workers and self.
  - Utilize ALARA
- Quality control program:
  - All quality control procedures required of department including but not limited to extrinsic floods, intrinsic floods, weekly bars, CORs, daily constancy, and daily surveys and wipes.
- Radiopharmacy (Radiopharmaceutical):
  - Preparation, calculation, identification administration (where permitted), and disposal of radiopharmaceuticals and the performance of all radionuclide quality control procedures.
- Diagnostic Nuclear Medicine procedures:
  - Performance of an appropriate number and variety of diagnostic nuclear medicine procedures to achieve desired clinical competencies.
- Therapeutic Nuclear Medicine procedures (if applicable):
  - Observations with a variety of therapeutic nuclear medicine procedures to achieve desired clinical competencies.
- Image processing:
  - ROI, SPECT, ROI curves, Image format, Image contrast, Image labeling
- Venipuncture:
  - Vein selection, identification of patient, proper supplies, aseptic technique, tourniquet protocols, hand washing protocol, and recapping of needles.
- Blood draw:
  - Proper blood draw technique per site protocol.
- Review indications:
  - Review indication for exam prior to performing exam
- Review order:
  - Proper review of physician orders
- Patient identification:
  - Verify that patient identification is conducted properly. Two forms of identification.
- Patient care, patient safety:

- Ensure that all students are conducting proper patient care and patient safety.
- Patient interview:
  - Verify that students are conducting patient interviews according to clinical site standards and patient satisfaction.
- Competency evaluation:
  - Evaluate students using electronic device with HandBase software for required competencies.
- Aseptic technique:
  - Verify students are using proper aseptic techniques for all procedures.
- Medical informatics:
  - Computer application and image storage per site protocol and according to HIPAA.
- Collimation:
  - Verifies that the students understand the proper collimation needed for each exam.
- Patient positioning:
  - Students understand proper positioning of patient for each exam.
- Camera positioning:
  - Camera distance, location and angle are positioned properly.
- Supplies:
  - Students are aware of supplies available and use them properly.
- Cross reference modality:
  - Cross reference various modalities related to the exam when appropriate.
- Needle disposal:
  - Students properly cap and dispose of needles in correct disposal location (no two-handed capping).
- Proper disposal of waste material:
  - Proper disposal of biohazard material, cold pharmaceuticals, radioactive materials, and trash in the proper location.
- Emergency protocols:
  - Hospital codes and colors for emergencies along with telephone numbers.
- Serve as a liaison between the clinical coordinator, clinical instructor(s), program director, and staff technologists.
- Be aware of ARRT/ NMTCB competency requirements.
- Be familiar with the Radiologic Sciences Program Handbook.
- Provides feedback to other staff technologists who are completing competencies for the students.
- Models professionalism and provides proper clinical and communication skills.
- Facilitates constructive feedback between students and staff about specific skills and tasks related to performing competencies.



- Facilitates student learning through image evaluation.
- Monitors student interaction with the patient and provides feedback to the student.
- Provides timely written feedback for student write-ups and/or discipline.
- Interacts with the clinical coordinator, clinical instructor(s) and/or program director on a weekly basis to provide feedback for students and demonstrate awareness of weekly goals for students.
- Documents student attendance via electronic device using HanDBase software.
- Addresses concerns with student performance to the clinical coordinator, clinical instructor(s), and program director via e-mail, text, or phone call. All concerns will be documented in a weekly log.
- Complete midterm and final semester evaluations for each student(s) he/she works with throughout each semester.
- Provides recommendations for a successful clinical experience to the student and faculty.

## **Appendix N**

### **Computed Tomography Clinical Supervisor's and/or Preceptor's Responsibilities**

The clinical Supervisor's and/or Preceptor's responsibilities include the following clinical education of students:

- General:
  - Liaison between the clinical instructor and Radiologic Sciences staff and department.
  - Aware of ARRT competency requirements as included in on-site Handbook
  - Provide feedback to other participating technologists who are completing competencies for the students.
  - Provide role model professionalism, clinical and communication skills captured through evaluation process.
  - Facilitate constructive feedback between students and staff about specific skills and tasks related to performing competencies through evaluation process.
  - Verify student learning through image evaluation.
  - Monitor student interaction with patient and provide feedback to students through direct supervision.
  - Address concerns with student performance to the clinical coordinator, clinical instructor(s), and program director via email, text, or phone call.
    - Concerns will be documented in weekly clinical site visit notes.
  - Interact with clinical instructors and/or the clinical coordinator on a weekly basis to provide feedback for students and be aware of weekly goals for students.
  - Facilitate student entry of student attendance, daily clinical records and competency records.
  - Complete midterm and final semester evaluations for each student (s) he / she works with throughout each semester.
  - Provides recommendations for a successful clinical experience to the student and faculty.
- Radiation safety:
  - Techniques that will minimize radiation exposure to the patient, public, fellow workers and self.
  - Utilize ALARA.
- Quality control program:

- All quality control procedures required of department including but not limited to daily quality assurance testing, proper shutdown-reboot of scanner and notification processes for scanner hardware/software errors.
- Image processing:
  - ROI, MPR, curved MPR, 3D Reformatting, Modality applications, Image labeling.
- Venipuncture:
  - Vein selection, identification of patient, proper supplies, aseptic technique, tourniquet protocols, hand washing protocol, and recapping of needles.
- Review indications:
  - Review indications for exam prior to performing exam.
- Review order:
  - Proper review of physician orders.
- Patient identification:
  - Verify that patient identification is conducted properly. Two forms of identification.
- Protocol verification:
  - Verify correct protocol selected for exam based on patient history and indication.
- Patient care, patient safety:
  - Ensure that all students are conducting proper patient care and patient safety.
  - Review patient laboratory values and allergy history for possible contraindications to contrast medium.
- Patient interview:
  - Verify that students are conducting patient interviews according to clinical site standards and patient satisfaction.
- Competency evaluation:
  - Evaluate students using electronic device with HandBase software for required competencies.
- Aseptic technique:
  - Verify students are using proper aseptic techniques for all procedures.
- Medical informatics:
  - Computer application and image storage per site protocol and according to HIPAA.
- Patient positioning:
  - Students understand proper positioning of patient for each exam.
- Supplies:
  - Students are aware of supplies available and use them properly.
- Cross references modality:
  - Cross reference various modalities related to the exam when appropriate.
- Needle disposal:

- Students properly cap and dispose of needles in correct disposal location (no two-handed capping).
- Proper disposal of waste material:
  - Proper disposal of biohazard material and trash in the proper location.
- Emergency protocols:
  - Hospital codes and colors for emergencies along with telephone numbers.
  - Procedure for contacting clinical instructor if issues arise.

## **Appendix O**

### **Magnetic Resonance Imaging Clinical Supervisor's and/or Preceptor's Responsibilities**

The clinical Supervisor's and/or Preceptor's responsibilities include the following clinical education of students:

- **General:**
  - Provide students with interactive process of patient screening.
  - Provide students with entry / exit procedures into MR Zone I, II, III, and Zone IV.
  - Liaison between the clinical instructor and Radiologic Sciences staff and department.
  - Aware of ARRT competency requirements as included in on-site Handbook.
  - Provide feedback to other participating technologists who are completing competencies for the students.
  - Provide role model behavior for professionalism, clinical and communication skills and practicing AIDET in the clinical setting.
  - Facilitate constructive feedback between students and staff about specific skills and tasks related to performing competencies through evaluation process.
  - Verify student learning through image evaluation.
  - Monitor student interaction with patient and provide feedback to students through direct supervision.
  - Address concerns with student performance to the clinical coordinator, clinical instructor(s), and program director via email, text, or phone call.
    - Concerns will be documented in weekly clinical site visit notes.
  - Interact with clinical instructors and/or the clinical coordinator on a weekly basis to provide feedback for students and be aware of weekly goals for students.
  - Facilitate student entry of student attendance, daily clinical records and competency records.
  - Complete midterm and final semester evaluations for each student (s) he / she works with throughout each semester.
  - Provides recommendations for a successful clinical experience to the student and faculty.
- **Safety:**
  - Procedures for proper patient screening prior to entering a magnetic field environment.

- Provide students with entry / exit procedures into MR Zone I, II, III, and Zone IV.
- Methods for minimizing SAR rates.
- Review patient laboratory values and allergy history for possible contraindications to contrast medium.
- Quality control program:
  - All quality control procedures required of department including but not limited to departmental quality assurance testing, proper shutdown-reboot of scanner and notification processes for scanner hardware/software errors.
- Image processing:
  - ROI, MPR, 3D Reformatting for advanced pulse sequences.
- Venipuncture:
  - Vein selection, identification of patient, proper supplies, aseptic technique, tourniquet protocols, hand washing protocol, and recapping of needles.
- Review indications:
  - Review indications for exam prior to performing exam.
- Review order:
  - Proper review of physician orders.
- Patient identification:
  - Verify that patient identification is conducted properly. Two forms of identification required.
- Protocol verification:
  - Verify correct protocol selected for exam based on patient history and indication.
- Patient care:
  - Ensure that all students are conducting proper patient care and patient safety.
- Patient interview:
  - Verify that students are conducting patient interviews according to clinical site standards and patient satisfaction.
- Competency evaluation:
  - Evaluate students using HandBase software for required competencies.
- Aseptic technique:
  - Verify students are using proper aseptic techniques for all procedures.
- Medical informatics:
  - Computer application and image storage per site protocol and according to HIPAA.
- Patient positioning:
  - Students understand proper positioning of patient for each exam.
- Coil positioning:
  - Students understand coil placement and indications of coil use.
- Supplies:

- Students are aware of supplies available and use them properly.
- Cross references modality:
  - Cross reference various modalities related to the exam when appropriate.
    - Evaluation of potential metallic foreign body.
- Needle disposal:
  - Students properly dispose of needles in correct disposal location
- Proper disposal of waste material:
  - Proper disposal of biohazard material and trash in the proper location.
- Emergency protocols:
  - Hospital codes and colors for emergencies along with telephone numbers.
  - Procedure for contacting clinical instructor if issues arise.

## **Appendix P**

### **UNM Radiologic Sciences Program Academic Honesty Policy (2020-21)**

#### **What is Academic Dishonesty?**

Academic dishonesty" includes, but is not limited to, dishonesty on quizzes, tests, or assignments; claiming credit for work not done or done by others; hindering the academic work of other students; misrepresenting academic or professional qualifications within or without the University, and nondisclosure or misrepresentation in filling out applications or other University records.

Each student is expected to maintain the highest standards of honesty and integrity in academic and professional matters. The University reserves the right to take disciplinary action, up to and including dismissal, against any student who is found guilty of academic dishonesty or who otherwise fails to meet the expected standards. Any student judged to have engaged in academic dishonesty in course work may receive a reduced or failing grade for the work in question and/or for the course.

#### References

"Dishonesty in Academic Matters," Faculty Handbook D100.

#### **Plagiarism and How to Avoid It.**

Why is it important to acknowledge sources in academic writing?

In universities, scholars produce new knowledge through interactions with others. We read articles and books written by other scholars, and discuss our ideas with our colleagues, whether informally or at professional conferences. Virtually nobody comes up with a brilliant new idea in total isolation – and even if they did, the first thing they would have to do is to demonstrate how their new idea fits into the existing field of knowledge.

Students and professors in the academic setting are always building on prior knowledge. When a student writes a paper for a course, she /he is in effect entering the researchers' Community of discourse, and must, therefore, abide by the same rules that professional researchers' do. Researchers' are continually in dialogue not only with other researchers' but also with the discoveries from the past. It is crucial therefore to acknowledge where the ideas come from, not only to give credit where credit is due but also to clarify your own original contribution to the field.

Plagiarism occurs when an author takes credit for work that is not the author's own. This is a kind of intellectual theft, and it is extremely serious no matter what form it takes, whether purchasing an essay online or misusing sources in more subtle ways.



The Radiologic Sciences program is dedicated to student success. The program will use a step process to address academic dishonesty. The program has the right to dismiss students if egregious dishonesty has occurred.

The steps to determine the infraction include:

4. First offense- the instructor will inform and write up a student of the infraction.
5. Second offense- the instructor will inform and write up a student. The student will be placed on probation.
6. Third offense- the student will be informed and written up. Probation and or dismissal from the program as determined by the director.

The UNM School of Medicine follows the UNM School of Medicine Handbook Plagiarism Policy. In cases of suspected academic dishonesty, the instructor will meet with the student and allow the student to explain the situation. If the faculty member then judges that academic dishonesty has occurred, the faculty member may then choose to impose a sanction. Students will be offered resources and information that will provide feedback of plagiarized material. Students have the option to use 'Safe Assign' software prior to submitting assignments.

For the complete policy, go to the University of New Mexico, School of Medicine student policies:

Website: <http://www.unm.edu/~unmvclib/handouts/somplagiarism.pdf>

Typical sanctions may include:

- grade reduction or grade of 'F' on the assignment
- additional assignments or rewrite of the assignment
- grade reduction or grade of 'F' in the course
- forced withdrawal from the course

In addition, the faculty member may report the incident to the office of the Dean of Students for further disciplinary action at the university level.

1. Cases of academic dishonesty in graduate courses.

Academic dishonesty is significantly more serious at the graduate level than the undergraduate level, because it is a violation of the ethics of the professional field which the student aspires to join.

Ignorance of professional standards of scholarship is egregious at this level. Therefore, in addition to whatever sanctions the faculty member may choose to impose (as outlined in point 1, above) the faculty member must also report the case to the Committee on Promotions and Evaluation, and the chair of the

student's Committee on Studies (if the student has been appointed one).

## 2. Student appeals.

If a student believes that she/he has received unfair treatment in an academic matter, she/he should follow the procedures outlined in the due process policy for this program. The link is listed directly below.

Please also review the Article 2 of the Pathfinder link for more information for students. This includes meeting with the instructor to discuss the matter, then if necessary, meeting with the department director. If the dispute cannot be resolved informally through these means, then the student may file a grievance with the Dean of the School of Medicine. For the complete policy, go to the Pathfinder at

Website: <https://handbook.unm.edu/d100/>

Student Grievance Procedure

Website: <https://pathfinder.unm.edu/student-grievance-procedure.html>

UNM Policy on Academic Dishonesty

Website: <https://policy.unm.edu/regents-policies/section-4/4-8.html>

Each student is expected to maintain the highest standards of honesty and integrity in academic and professional matters. The University reserves the right to take disciplinary action, up to and including dismissal, against any student who is found guilty of academic dishonesty or otherwise fails to meet the standards. Any student judged to have engaged in academic dishonesty in course work may receive a reduced or failing grade for the work in question and/or for the course.

## **Forms of Academic Dishonesty**

Students should ask their instructor for clarification of these terms if they have any questions or confusion.

### 3. Plagiarism.

You commit plagiarism if you fail to acknowledge the sources of any ideas or information in your paper which are not common knowledge or your own personal knowledge. In other words, plagiarism is claiming credit for ideas and information that are not your own.

This includes:

- copying word for word from sources without adequate documentation
- using phrases and ideas from sources without adequate documentation
- paraphrasing or summarizing a source without adequate documentation

- misrepresenting source material
- purchasing a pre-written paper
- letting someone else write a paper, or portions of a paper, for you
- paying someone else to write a paper, or portions of a paper, for you
- using someone else's data to complete an assignment

4. Collusion.

You collude in academic dishonesty if you collaborate with another person in an unauthorized manner in academic assignments.

This includes:

- allowing someone else to write your papers
- allowing someone else to copy your work
- writing a paper for another person
- taking a test or exam in place of another person
- taking any action that could enable another student to violate the UNM Policy on

5. Fraud.

You commit fraud if you falsify or invent data or source material.

Multiple Submissions:

It is unethical to submit assignments (or parts of assignments) for credit in more than one class without the permission of the instructors.

This information has been offered to you before beginning the UNM Radiologic Sciences course or program.

Print name \_\_\_\_\_

Student signature \_\_\_\_\_

Date \_\_\_\_\_

**Appendix Q**  
**UNIVERSITY OF NEW MEXICO SCHOOL OF MEDICINE HEALTH**  
**PROFESSIONS PROGRAMS STUDENT DUE PROCESS POLICY**

Website: <http://pathfinder.unm.edu/student-grievance-procedure.html>

Website: <https://hsc.unm.edu/school-of-medicine/education/hpp.html>

I. Introduction

This University of New Mexico Health Professions Programs Student Due Process Policy (hereafter “Due Process Policy”) outlines for students, faculty and administrators in the School of Medicine Health Professions Programs, the course of action that is available to a Health Professions Programs student should his or her individual program take either an adverse or corrective action against the student for failure to maintain the academic, professional and/or ethical requirements and standards of the program.

The individual programs that make up the Health Professions Programs and that follow this Due Process Policy are: Dental Hygiene, Emergency Medical Services Academy-Paramedic and Bachelor of Science Programs, Medical Laboratory Sciences, Occupational Therapy, Physician Assistant Program, Physical Therapy, and Radiologic Sciences. Each of these individual programs must have a student guide/handbook made available to its students that includes, at a minimum, the program’s (1) academic requirements; (2) professionalism and/or ethical requirements and standards; (3) a description of the program’s process for dismissing a student or otherwise sanctioning a student for failing to meet program requirements; and (4) a copy of this Due Process Policy.

The individual programs that make up the Health Professions Programs are responsible for monitoring their students’ performance and compliance with academic, professionalism and ethical requirements and standards. The individual programs decide whether to dismiss or suspend a student or take other action for unsatisfactory performance pursuant to program policies and procedures. As discussed below, a student can appeal the program decision pursuant to this Due Process Policy.

II. Adverse and Corrective Action Defined

The distinction between an adverse and corrective action is important. Adverse actions are those that separate the student from his or her Health Professions Programs and include dismissal and suspension. Also, requiring a student to repeat a significant part of the program’s curriculum so that completion of the program will be delayed by more than one semester is an adverse action.

A corrective action involves the program imposing an educational prescription that, in the opinion of designated program faculty, is necessary in order to improve the student's performance. Corrective actions include, but are not limited to, requiring a student to take a specific course, narrowing the choice of elective courses, mandating a student meet with a program advisor regularly, and mandating additional professionalism training.

Adverse actions are subject to being appealed by the student as provided for in Sections III through VI herein. Corrective actions cannot be similarly appealed by the student but may be reviewed at the student's request as provided for under Section VIII of this Due Process Policy.

### III. Appeal of Program Decision Imposing Adverse Action

A student who disagrees with his or her Health Professions Program's decision imposing adverse action is entitled to appeal that decision to the Health Professions Programs Appeals Committee, which is composed of members of the Health Professions Programs Evaluation Committee. The request for appeal must be made in writing to the Assistant Dean for Health Professions, stating the reasons why the student disagrees with the Health Professions Program's decision, and must be received by the Assistant Dean within fifteen (15) calendar days after the student receives the program's written letter imposing adverse action. If the student fails to notify the Assistant Dean within fifteen (15) calendar days, this shall be considered a waiver of his/her right to appeal the adverse action and the Health Professions Program's decision shall be final for the University of New Mexico.

### IV. Formation of a Health Professions Programs Appeals Committee

When an appeal is timely made by a student, the Assistant Dean for Health Professions Programs will form a Health Professions Programs Appeals Committee ("Appeals Committee") consisting of four (4) faculty members from the Health Professions Programs Evaluation Committee ("Evaluation Committee") and one (1) student in good academic standing from the same program but a different class/cohort than the student bringing the appeal.

The Evaluation Committee consists of one faculty member from each program appointed by the director of the program and up to three (3) members appointed by the Assistant Dean for Health Professions Programs. Evaluation Committee members serve a 3-year term which may be renewed for one additional 3-year term. Ideally, the Evaluation Committee will have a mixture of experienced and new members. Members will receive an orientation when appointed to an Appeals Committee, including a review of this Due Process Policy and any relevant policies from the appealing student's program.

The Assistant Dean of Health Professions Programs will review the composition of the Appeals Committee with the student making the appeal. If the student objects that any member is biased against the student or otherwise may not be a fair Appeals Committee member, the Assistant Dean will consider the student's objections and decide whether to remove the members. The Assistant Dean's decision is final. If a Committee member is removed for cause, the Assistant Dean will appoint a new member if one is available from the Health Professions Programs Evaluation Committee. If a new member is not available, the Appeals Committee will proceed to hear the appeal with three faculty and one student member. The Appeals Committee will select one of its faculty members to serve as chair.

#### V. Review of Appeal by Health Professions Programs Appeals Committee

The Appeals Committee will accept relevant documentary evidence for review from the student and the director of the program that took the adverse action. Each party will be provided with a copy of the other's submission. The Appeals Committee will conduct individual interviews with the student, director and faculty from the program that took adverse action and others with relevant information. The Appeals

Committee will decide who will be interviewed. These interviews will be tape recorded and the student will be offered an opportunity to listen to the tapes. The student will not attend the actual interviews. After the Appeals Committee concludes its interviews, if it has additional questions for the student and/or if the student wants to respond to statements from any of the witnesses, the student will be offered one opportunity to meet with the Appeals Committee.

After all of the interviews have been completed, including the final interview with the student, the Appeals Committee will deliberate in closed session. Within thirty (30) calendar days of completing the interviews, the Appeals Committee will decide the appeal by a vote (simple majority) of its members and issue its written decision, which will include its rationale. The final decision will be to uphold or overturn the adverse action imposed on the student by the program. The student and the program director will each be sent the Appeals Committee's decision.

In arriving at its decision, the Appeals Committee shall not overrule the academic judgment of a faculty member in the program on the assignment of grades to the student. The Appeals Committee should, as appropriate in the case, consider: (1) whether the program followed its own policies governing student performance, advancement and program completion; (2) whether the evidence supports the program's decision; and (3) whether the student has significant new information that bears on the program's decision that was not available to the student when that decision was made. If the Appeals Committee finds that the student has significant new information, the appeal shall be referred back to the student's program for reconsideration of the adverse action in light of that information. If the program affirms the adverse action, the student may request review by the

Appeals Committee. The Appeals Committee will consider any additional relevant evidence and/or witness interviews and issue its written decision within thirty (30) calendar days.

#### VI. Appeal to the Dean

Either the student or the program director may appeal the decision of the Appeal Committee to the Dean of the School of Medicine or designee in writing within thirty (30) calendar days of receipt of the Appeals Committee's decision. Failure to submit a timely appeal means that the student and/or program director waive their right to appeal and the decision of the Appeals Committee shall be final for the School of Medicine.

The Dean or designee will review the student's academic record; the decisions of the program, Health Professions Programs Appeals Committee and any other documents in the student's program file. Additionally, the Dean may meet with the student and program director. The Dean (or designee) shall issue a written decision on the appeal and send a copy to the student and the program director.

#### VII. Appeal to the Chancellor

The student may appeal the decision of the Dean of the School of Medicine to the Chancellor of the Health Sciences Center, or his or her designee by providing a written appeal within (15) calendar days of the receipt of the Dean's decision. Failure to submit a timely appeal means that the student waives his/her right to appeal the decision and the decision of the Dean shall be the final decision.

The Chancellor, or his or her designee, will review the student's academic record; the decisions of the program, the Health Professions Programs Appeals Committee, the Dean, and any other documents in the student's program file. Additionally, the Chancellor may meet with the student and program director. The Chancellor shall issue a written decision on the appeal and send a copy to the student and the program director.

In the event that the Dean of the School of Medicine and the Chancellor of the Health Sciences Center are the same person, the Dean/Chancellor will delegate at least one of the student appeals to ensure that each level of appeal is reviewed by a different HSC administrator.

Discretionary review by the UNM President and Board of Regents, as provided in the UNM Student Grievance Procedure, is accorded to students in academic programs in the HSC. The President and the Board of Regents will normally accept review only in extraordinary cases, such as where proper procedures have apparently not been followed, where the decision appears to be unsupported by the facts, or where the decision appears to violate University policy.

## VIII. Review of Corrective Action

As stated in Section II herein, a student is not entitled to go through the appeals process described above to dispute corrective action imposed by his or her program. If the student believes that the corrective action is fundamentally flawed, unfair or otherwise inappropriate, the student may request review by the School of Medicine Senior Associate Dean of Education. The student shall present his or her reasons for disputing the corrective action in writing. The Senior Associate Dean of Education may meet with the student and may discuss the matter with the program director and faculty and the Assistant Dean of the Health Professions Programs, as the Senior Associate Dean deems appropriate. The decision of the Senior Associate Dean of Education is final for the University of New Mexico and is not subject to discretionary review by the President or the Board of Regents.

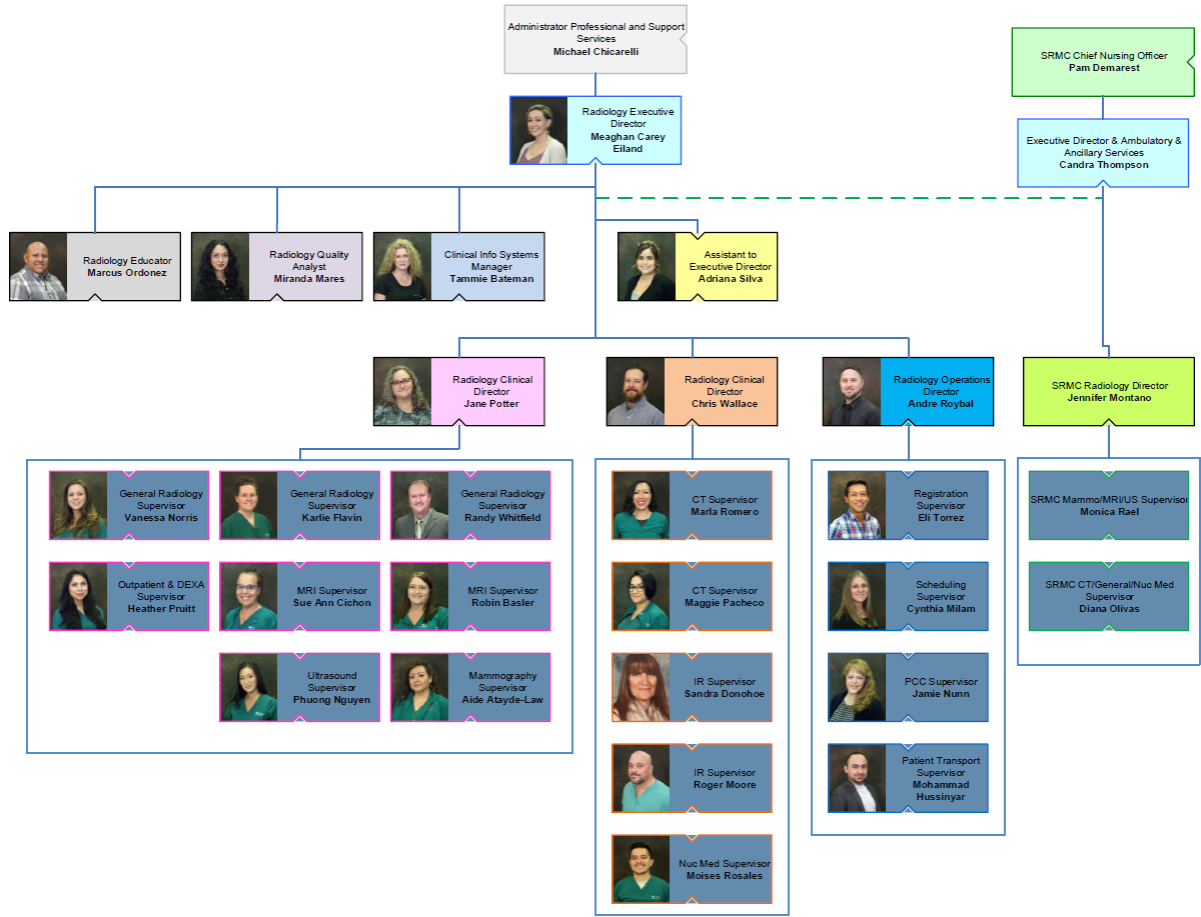
## IX. General Provisions

Minor deviations from this Due Process Policy are permitted so long as they do not substantively impact the due process rights of the student.

For good cause, the time limits for written decisions to be made can be extended. Good cause includes the fact that a deadline falls during school holidays, vacations or summer session if parties or decision makers are absent. Any such time extensions should be communicated in writing to all interested parties and the decision will be made thereafter as expeditiously as possible.

The University of New Mexico Health Professions Programs reserves the right to make changes to this Due Process Policy as it deems necessary, with the changes applicable to all students then in attendance in a Health Professions Program.





## **STUDENT STATEMENT OF UNDERSTANDING**

I have read the UNM Radiologic Sciences Program policies described in the Student Handbook and fully understand the content and policies.

Signed:

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Student Signature

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Date

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Print Name