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# **Clinical Education / Standards Policy**

The Radiography program at West Virginia University Hospitals (WVUH) recognizes that the application of didactic material in the clinical environment is an essential component of the education process and that the student's clinical performance is valid indicator of professional achievement. In accordance with JRCERT Standard 4.2, WVUH has developed a competency-based curriculum designed to document the student's clinical performance in the Clinical Experience courses (RADI 2290, 2291, 2292, & 2293). This policy serves to identify the structure and standards by which the clinical education process is administered.

#### I. Clinical Education Overview

Clinical education is conducted exclusively at WVUH owned and operated imaging facilities. All clinical sites are located within 5 miles of the main campus. Students are not required to complete any additional orientation procedures beyond those required for admission to participate in clinical rotations. Core clinical assignments include routine diagnostic, mobile, fluoroscopy, operating room, and computerized tomography imaging with limited rotations through various advanced imaging modalities. Clinical rotations are primarily conducted between 8am-4pm each weekday with 2-4 weeks of evening clinical rotations (3pm-11pm) assigned each semester. No clinical education is conducted on weekends, holidays, and/or midnight shifts.

### **II.** Clinical Education Process:

The following describes the progressive procedures employed in achieving and validating clinical competence:

#### a. Didactic Instruction

After matriculation into the program, students are progressively introduced to the various positioning and technical requirements for each radiographic examination through didactic instruction and testing during Semesters I & II.

## **b.** Positioning Laboratory

Concurrent with didactic instruction, the practical application of the various radiographic examinations is demonstrated by a clinical faculty member (clinical preceptor or coordinator) in an energized radiographic laboratory.

# c. Simulation Examinations

After an appropriate time frame for individual practice and review, students are required to successfully complete a simulated study prior to attempting any radiographic examination on a patient. Successful completion is documented by a clinical faculty member.

### d. Core Competency

After satisfactorily completing a simulated study, the student may request that a Core Competency exam be attempted on a patient for that specific examination. Core Competency exams may be conducted by a clinical faculty member or a staff technologist. Successful completion of a Core Competency does not automatically qualify a student to perform that particular examination under indirect supervision unless there is no qualifying examination for that particular exam, in which case a student may operate under indirect supervision.

# e. Qualifying Examination

After successful completion of a Core Competency examination in a specific category, the student may request that a Qualifying Examination be attempted for that category. Qualifying exams should be performed by a clinical faculty member; however, in the event that no clinical faculty member is immediately available, a staff technologist may perform the exam. Successful completion of a Qualifying Examination certifies that a student may perform the examinations in that specific category under indirect supervision.

### f. Comprehensive Examination

At midterm and at semester end, each student will be required to complete a comprehensive exam on a radiographic procedure in which they have previously demonstrated competence. All comprehensive exams are to be performed

by clinical faculty member. The specific imaging procedures designated as approved comprehensive exams will be semester dependent and will be determined by a clinical faculty member.

Refer to the following for clarification of specifics depicted in the previous policy:

- a. Direct / Indirect Supervision of Students
- b. Guidelines for Core Competency Exams
- c. Guidelines for Qualifying Examinations
- d. Student Clinical Education Handbooks

### **III.** Clinical Grade Calculation

The student's clinical grade consists of several components, each utilizing a different mechanism to assure a complete and comprehensive evaluation of clinical performance. The following components and weighted averages are utilized:

Component	Weighted Average
Clinical Instructor Points	8%
Performance Check-offs	12%
Weekly Evaluations	10%
Core Competencies	20%
Qualifying Exams	25%
Comprehensive Exams	25%

Each clinical grading component and related forms are included and explained in the student Clinical Handbook for each performance level.

## III. Clinical Grade Scale

The following grading scale will be utilized as an objective evaluation mechanism for representing the student's clinical grade and performance.

Percentage Grade	Letter Grade	Quality Points
100% - 93%	A	4.0
92% - 86%	В	3.0
85% - 78%	C	2.0
77% - 70%	D	1.0
< 70%	F	0.0

## IV. Clinical Grade Standard (minimum)

Each student is required to achieve a minimum overall weighted clinical average of 86% (B Letter Grade) at the end of each semester in order to successfully complete the clinical education component of the program. Due to the progressive nature of the clinical education component, no provisions are provided for repeating a clinical level. Each clinical education level must be completed before advancing to the subsequent semester; therefore, students who fail to achieve an 86% (B Letter Grade) weighted clinical average at the end of each semester will be dismissed from the program. Students are counseled by a clinical faculty member regarding their clinical progress at midterm, semester end, and/or as needed; however, it is the student's responsibility to maintain awareness of their clinical progress at all times.

Education Manager