John Patrick University
of Health and Applied Sciences

MRI Clinical Internship & Preceptor Handbook

2025 Edition

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Program: Bachelor of Science in Medical Imaging: Magnetic Resonance Imaging Specialization

Credential Goal: ARRT Certification in MRI – Primary Pathway

Academic Calendar

Important semester dates can be viewed on the Academic Calendar. The Academic Calendar is available on the public website at https://jpu.edu, published in the Academic Catalog, and available on the JPU campus calendar available through the students Populi account.

Overview

The MRI Clinical Internship is a vital component of the John Patrick University Magnetic Resonance Imaging (MRI) program. It is designed to align with ARRT's 2025 Clinical Competency Requirements and JRCERT accreditation standards, offering a comprehensive experience that spans 240 supervised clinical hours.

Clinical Internship Structure

- **Program Length:** 4 semesters (approximately 24 months)
- **Clinical Hour Requirement:** 240 hours minimum
- **Delivery Model:** Hybrid
- **Affiliated Sites:** Hospitals, outpatient clinics, mobile imaging centers

Didactic Courses Specific to MRI (24 Credits)

- **MR400**: Orientation to MRI (1 cr)
- **MR406**: MRI Procedures (4 cr)
- **MR408**: MRI Instrumentation, Physics, Safety (4 cr)
- **MR412**: MRI Anatomy & Pathology Correlation (3 cr)
- **MR414**: Pulse Sequences & Image Contrast (3 cr)
- **MR416**: Advanced Techniques in MRI (3 cr)
- **RS404**: Communication & Information Management (3 cr)
- **RS318**: Productivity & Assessment in Radiologic Sciences (3 cr)

MRI-Specific Safety & Supervision Policies

Students Must:

- Operate only under direct supervision until clinical competency is verified.
- Adhere to MR Zone safety protocols (Zone IV access restricted).
- Pass all 8 mandatory MRI Safety Requirements including SAR risk, implants screening, and MR emergency protocol.

MRI Competency Categories

Category	Requirements
Patient Care Procedures	7 Mandatory (e.g., BLS, vitals, transfer, sterile technique)
MRI Safety Requirements	8 Mandatory (e.g., cryogen, SAR, MR zones)
Imaging Procedures	17 Mandatory + 12 of 32 Electives
MRI QC	7 Mandatory Quality Control Procedures

Evaluation & Progress Monitoring

Weekly Assessments:

- Clinical logbooks
- Preceptor evaluations

Semester Milestones:

- Mandatory safety and procedural competencies
- Midterm & final clinical site performance reviews

Professional Expectations

Students are expected to:

- Maintain ethical conduct
- Uphold MRI patient safety and HIPAA compliance
- Demonstrate ongoing critical thinking and problem-solving
- Exhibit professionalism in diverse healthcare settings

Program Completion & ARRT Eligibility

Upon successful completion:
60 credit hours in didactic coursework
240 clinical hours
Verification that all required competencies are complete

Graduates are eligible to sit for the ARRT MRI Primary Pathway Examination and prepared for roles in advanced imaging, education, and MR safety leadership.

Clinical Compliance

Accidents/Incidents:

As general policy, JPU students will comply with the policies and procedures with the clinical site at which they are assigned. It is the policy that there be written reports of all unusual incidents/accidents.

An incident is an unusual occurrence which is not consistent with the routine operation of the institution or clinical rotation which may or did cause harm, involves possible negligence, requires some immediate consideration or action by a supervisor.

A student enrolled in a program is expected to provide prompt, complete and accurate written documentation of the details related to any accidents/incidents, thus enabling corrective actions and/or programs for prevention. The program adheres to the Infection Control Policy for University Hospitals and Clinics. Students with signs and symptoms of an infectious process should report immediately to the program director for appropriate referral.

All accidents/incidents must immediately be reported to the technical supervisor or immediate person in charge. Proper report forms must be completed.

Equipment Use and Operation:

MRI departments employ the use of highly specialized equipment. Any equipment failure or equipment that is not in proper working order must be reported immediately to the technical supervisor. Do not place any calls to equipment representatives. Do not attempt to repair.

Dress Code Policy

All students will dress in a professional manner, appropriate for the situation and according to the following guidelines.

Attire

1. All MRI students will wear scrubs with or without a lab jacket for clinic.
2. A solid white or gray shirt may be worn under the scrub top and must be tucked into the scrub pant.
3. Pant hemlines should not touch or drag on the ground.

Accessories & Tattoos

1. Proper JPU photo ID must be worn at all times. The ID must be visible at all times to identify student status.
2. Simple jewelry may be worn with the uniform, i.e., small earrings, wedding rings, and watches.

    a. Earrings must be small and not touching the neck.
3. Single and/or discreet piercings of the ears, nose, lip, tongue and eyebrow are permitted.
    a. Examples of piercings not permissible may include but are not limited to large or multiple loops in the eyebrows, lip or nose, visible transdermal implants, or piercings on other areas of the face.
    b. Ear gauges must be plugged with flesh-colored plugs while in clinic.
4. Bandanas are not permitted.
5. All visible tattoos on the face or neck must be covered (except permanent makeup).
6. All visible tattoo designs that the average person would find offensive, including but not limited to hateful, violent, profane and/or nudity, must be completely covered.

Students are held responsible for their appearance and will be dismissed from clinic if inappropriately attired or groomed, per discretion of their clinical site. Should a clinical site have different policies, the student must adhere to those during the rotation. If a student is sent home from clinic due to a dress code violation, the amount of time missed from clinic will be deducted from the student comp time allotment.

Magnetic Resonance Imaging Student Pregnancy Policy

The ACR Manual on MR Safety states that health care providers may continue to work in the MR environment throughout all stages of pregnancy. Acceptable activities include, but are not limited to, positioning patients, scanning, archiving, injecting contrast, and entering the MR system room in response to an emergency. Although permitted to work in and around the MR environment, pregnant health care practitioners are requested not to remain within the MR scanner bore or Zone IV during actual data acquisition or scanning. These recommendations are based on the preponderance of data on 3T magnetic fields. There is a scarcity of data available to date regarding human pregnancy exposures to 7T magnetic fields. The MRI student must ensure she follows currently accepted safety practices for health care providers in the MRI environment. (ACR Manual on MR Safety, 2024)

Students may voluntarily report suspected or confirmed pregnancy to the MRI Program Director in writing. **The student will be advised that she may continue her educational program without modification.** At the time of declaration to the program, the JPU policies and procedures and the MRI Program specific policies and procedures will be reviewed with the student. Student who fails to disclose a pregnancy should know that the program cannot assist her in offering protection to her or her embryo/fetus.

Any student making a voluntary written declaration of pregnancy may withdraw their declaration of pregnancy at any time. Withdrawal must be done in writing to the MRI Program Director.

All forms related to the student's voluntary declaration of pregnancy are kept in the secured student files.

MRI Safety Policy

The JPU MRI Program is dedicated to providing safe clinical experiences for students. This policy serves to define safe MR practices for students and reflects current American College of Radiology MR Safety guidelines to assure that all students are appropriately screened for magnetic field or radiofrequency hazards.

There are no known biological risks associated with magnetic field or radiofrequency exposure to students that work in close proximity to MRI systems. The static magnetic field of the MRI machine is always on requiring that Zones III and IV be secured at all times. Ferromagnetic objects carried into Zone IV can become projectiles that may cause severe injury, death, or equipment failure.

MRI machines generate strong magnetic fields and radiofrequencies in the areas within and surrounding the MRI scanner, therefore all individuals must be screened to ensure safety prior to entering Zones III or IV of the MR environments. MR students will be educated to maintain safety in the MR environment prior to beginning clinical rotation assignment.

Procedure

All students will be required to complete an MRI screening form prior to start of the program and again during program orientation. The Clinical Coordinator will review this form privately with each student. These forms are kept in the student's private program file.

Throughout the duration of the program, if a student has a change in their medical history that would change their MR screening status, they are required to alert the Clinical Coordinator before participating in any clinical rotations. Students are also required to successfully complete MRI Safety Training for Level 1 personnel prior to clinical rotations. Upon successful completion of Level 1 training, students may enter Zone III and Zone IV unaccompanied. However, students may not grant any individual (i.e., patient, visitor, or non-MRI staff) access to Zone IV without a certified MRI Technologist present.

Students must comply with each clinical site's policies and procedures on MR safety.

Any incident in which a student is responsible for a breach into Zone IV must be reported by completing a Safety Incident Report Form. The student is also responsible for notifying the Clinical Coordinator of the incident the same day the event occurs. Each incident will be reviewed with the student by the Clinical Coordinator. If a student continues to be responsible for unsafe MRI practices, disciplinary action may occur.

Personal Property

JPU and all clinical affiliate sites are not responsible for students' valuable possessions. All valuables and money should be monitored closely by each individual.

Student Employment Guidelines

1. Students may not take the place of regular staff in the clinical areas to which they are assigned. It is appropriate, however, for students to assume the responsibility for performing defined activities and tasks, with adequate direction and supervision, after demonstration of clinical competencies.
2. Students may be employed in a clinical setting outside regular educational hours; however, students may not obtain any clinical competencies or clinical sign-offs while acting as an employee.

Supervision of Students

Direct supervision is defined as:

1. Student supervision by a qualified practitioner, who reviews the procedure in relation to the student's achievement, evaluates the condition of the patient in relation to the student's knowledge, is present during the procedure, and reviews and approves the procedure. A qualified MRI technologist is present during student performance of a repeat of any unsatisfactory scanning procedure.
2. The staff technologist reviews the examination request to determine the capability of the student to perform the examination with reasonable success and determines if the condition of the patient contraindicates performance of the exam by the student.
3. The staff technologist reviews the patient safety and screening forms with the student before allowing the patient entry to the MRI suite.
4. The staff technologist is physically present during the procedure.
5. The staff technologist checks the exam and approves the exam prior to the dismissal of the patient.

Indirect supervision is defined as:

1. Student supervision by a qualified practitioner, who is immediately available to assist students regardless of the level of student achievement.
    - "Immediately available" is interpreted as the physical presence of a qualified MRI technologist adjacent to the room or location where an MRI procedure is being performed.

Clinical Supervision of Students:

All MRI students must have adequate and proper supervision during all clinical assignments as specified by individual institutional, program, and accreditation policies. The following policies and procedures apply to clinical assignments for students, technologists/ therapists, and evaluators.

Clinical Evaluation:

In a general sense, the duties and responsibilities for clinical evaluations in the MRI program are to:

- Evaluate students required clinical competencies and affective behavior in the clinical setting.
- Supervise imaging modalities students' and determine the necessity of repeat procedures
- Provide direct supervision and assistance for all procedures until competency has been evaluated
- Complete appropriate evaluation form and return to the clinical instructor or program director
- Provide documentation of any unusual, positive, and/or negative incidents involving the student's performance of clinical objectives or competencies that occurred during the assigned clinical rotation to the clinical instructor or program director
- Intervene when a critical error appears imminent and offer corrective instruction or demonstration before proceeding with the procedures.

Supervision of Students:

Students must have adequate and proper supervision during all clinical assignments, which would include **direct supervision** until specific competency is established, thus allowing the student to perform under **indirect supervision**. A staff technologist is responsible for determining the degree of student participation in diagnostic MRI procedures.

Clinical Performance Evaluations

1. The evaluation will assess the three domains of learning: cognitive (knowledge), affective (professional behaviors), and psychomotor (technical skills).
2. The student will receive a minimum of two evaluations before the midpoint of the clinical component of the program and a minimum of one per semester.
3. Clinical instructor and staff feedback will be used in the evaluation process.

Competencies and Documentation Required Prior to Beginning your Internship

All students must receive clearance from the Program Director before beginning their clinical rotation.

Required Training and Documentation Prior to your Clinical Internship

Training

1. HIPAA/OSHA/Infection Control training a. Including completion of the Infection Control Quiz

2. Patient Care and PPE training

3. MRI Safety Training and completion of the MRI Safety Screening form

Didactic Prerequisites

Successful completion of MR408 (MRI Instrumentation, Imaging Physics, and Safety)

Documentation

1. CPR
2. Health Insurance
3. Physical exam
4. Background check
5. TB
6. Hepatitis B*
7. Rubella*
8. Rubeola*
9. Mumps*
10. Tdap*
11. Varicella*
12. Annual flushot
13. Annual MRI safety training form
14. Complete the HIPPA and OSHA Completion Form
15. Drug test (do not complete until 30 days prior to your internship start date)

*This requires immunization documentation submitted or a titer. Some clinical sites may require additional documentation such as additional background check items, additional forms or evaluations, or additional documentation. All students are required to comply with all requirements outlined by their assigned clinical site.

Clinical Site Placement

Students typically begin their clinical internship during the final semester of their program. JPU works with each student to place them in a clinical site within a reasonable distance from their place of residence. Based on clinical site availability or unforeseen circumstances outside of the

control of the student or JPU, the student may be assigned to a site that required them to temporarily relocate across state lines.

Students may propose a clinical site closer to their place of residence than is currently available. In this instance, the University prefers to receive notice 5-6 months in advance for the purposes of communicating with the clinical site and securing paperwork. The Program Director and/or Educational Coordinator will evaluate any proposed site to ensure it would provide a clinically relevant and valid clinical experience for the student.

A student may not wish to accept the clinical site assigned to them. Although JPU works to provide a reasonable clinical site placement for the student, the student is required to accept their assigned clinical site if they have chosen to decline one previous site assignment. Failure to accept a clinical site assignment after one previous declination will result in the student being placed on administrative hold for non-compliance with the Clinical Obligations policy. Failure to resolve the administrative hold status within 90 days will result in dismissal from the program.

Attendance Policy

In order to maintain a quality program and to ensure compliance with regulatory requirements, the following attendance policy is in effect:

Attendance at all clinical education sessions is mandatory.

One (1) absence is defined as one (1) missed session.

The course schedule will be provided to each student prior to the first day of the Semester. In addition to the course schedule, the number of absences for each course may be found in the course syllabi provided to the students during the first session of each course.

Time Off

Students are allowed time off for extenuating circumstances. Students are permitted 3 unexcused absences per clinical semester that do not require make up hours. Examples of such absences include, but are not limited to: illness, child care, bereavement of a nonimmediate family member, mandatory court dates. If a student experiences extenuating circumstances that will exceed the maximum number of absences permitted per course, students may request the absences to be excused. Students should contact their Program Director/Clinical Coordinator for further instructions. Make up hours will be scheduled for excused absences.

Examples of such absences include, but are not limited to: serious or contagious illness, quarantine, admission to a hospital for treatment, bereavement of an immediate family member, jury duty, mandatory court dates.

Clinical Internship Absences

Students are required to complete all clinical internship hours. Students are allowed 3 clinical absences per semester with no make-up hours.

All absences must be logged in Trajecsys on or before the date of absence. Absences not logged in Trajecsys on or before the date of absence will be required to be made up on a 2:1 ratio.

Maximum Absences
The following table represents the maximum number of clinical internship hours per quarter/term that a student may make up:

Clinical Late, Left Early, Half-Absence and Absence

The following table represents the definition of clinical Late, Half-Absence and Absence:

Student Arrival/Presence	**Considered**
Arrives within one hour of the scheduled shift start time	Late
Fails to clock out	Left early
Present for 50% of scheduled rotation time	Half-absent
Present for < 50% of scheduled rotation time or fails to clock in and out	Absent

Three occurrences of tardiness per course are considered one absence as calculated toward the student's course grade.

Exceeding Maximum Absences

Students who exceed the maximum number of didactic, laboratory or clinical internship absences will receive a grade of "F" and will be considered to have failed the course regardless of their calculated course average. Students who fail a course are required to follow the Progression Policy as published in the Catalog.

Breaks

Students are required to clock in and out before and after their lunch break or the break closest to the midpoint of their shift. After the third failure to clock in or out in a single quarter, two points will be deducted from the student's course grade per occurrence.

Student Portal

Students can view their attendance through their Trajecsys student portal. Students will be advised as they near the maximum percentage allowed.

Absence Notification

Students are required to notify their Clinical Coordinator and the Clinical Site Preceptor when absent from clinic.

Attendance Procedure

Clinical sessions will start exactly on the assigned hour, and students are expected to be on time. The definition of late is up to the discretion of the Clinical Coordinator, but will be no later than 15 minutes after the scheduled shift start time. Excessive tardiness is considered unprofessional conduct and will not be tolerated. Excessive tardiness may result in the student's termination.

If a student must leave early from their rotation for any reason, they must inform their assigned clinical instructor or supervisor/preceptor AND their Clinical Coordinator. Failure to inform the Clinical Coordinator will result in the student being penalized for a full day's absence. Repeated infractions of this type are grounds for termination from the Program.

Volunteering During Off Hours and Holidays

Students may only rotate at John Patrick University's affiliated clinical sites during the shifts and hours assigned to them by their Program Director or Clinical Coordinator. Student may not "volunteer" during off hours in his or her profession's department to obtain additional clinical experience.

Bloodborne Infection Control Guidelines

SUBJECT: Universal Blood and Body Fluid Precautions

Purpose: To minimize the risk exposure to blood and body fluids and prevent transmission of infection in the health care setting.

Policy: Blood and body fluid precautions shall be used whenever there is exposure or possible exposure to ALL blood and body fluids. It will no longer be necessary to label specimens specifically for HIV or isolation. The advantages of applying these precautions universally are:

a. Minimize contact with blood and body fluids by health care workers.
b. Minimize the likelihood of transmission of specific organisms such as Hepatitis B and the Human Immunodeficiency Virus (HIV).
c. Consistent needle and sharp disposal practices.
d. Increased confidentiality for patients as these same precautions shall apply to all patients' blood and body fluids regardless of the patient's diagnosis.
e. Consistent application of infection control principles.

Procedures:

1. HANDS should always be washed before and after contact with patients. Hands should be washed even when gloves have been used. If hands come in contact with blood, body fluids, or human tissue, they should be immediately washed with soap and water.
2. GLOVES should be worn when contact with blood, body fluid, tissues or when contaminated surfaces are anticipated. Gloves should be changed after contact with blood or body secretions.
3. GOWNS or plastic aprons are indicated if blood splattering is likely.
4. MASKS and/or PROTECTIVE GOGGLES should be worn when it is likely that eyes and/or mucous membranes will be splashed with body substances (e.g., when suctioning a patient).
5. Emergencymouth-tomouthresuscitation,mouthpieces,otherventilationdevicesshould be accessible and available for use.
6. Needlesshouldbehandlesinsuchamannertopreventaccidentalcutsorpunctures.They should not be bent, broken, reinserted into their original sheath or reused. They should be discarded intact immediately after use into the disposal box.

Mucosal splashes or contamination of open wounds with blood should be reported immediately to the Occupational Health Department using an Accident Report Form. The area should be cleaned up promptly with a disinfectant solution (e.g., 1:10 dilution of bleach, phenol, or alcohol.

Use of Technology

Policy Statement

1. Personal phone calls during clinic hours must be kept to a minimum.
2. Personal technology may not be used during class or clinic unless for educational purposes as approved by class or clinical instructors.
3. Only department computers may be used for documenting clock in and clock out procedures via Trajecsys. Personal technology may not be used for this function.

MRI competency Requirements from the American Registry of Radiologic Technologists (ARRT)

Competency requirements are publicly available on the ARRT website located at https://assets-us-01.kc-usercontent.com/406ac8c6-58e8-00b3-e3c1-0c312965deb2/e3793243-0ecc-41a3-8d68-cf30433f1626/Magnetic%20Resonance%20Imaging%20Clinical%20Experience%20Requirements%202025.pdf