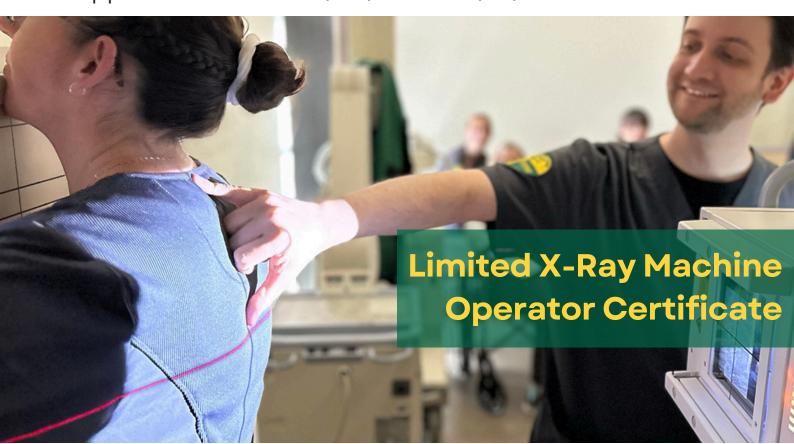
School of Health & Wellness

# Application Forms & Information

Summer 2026

Application Dates: 02/08/2026-03/14/2026



### **Radiology Department**

3800 N Glassford Hill Road Prescott Valley, AZ 86314 928.776.2333



# APPLICATION DEADLINES

APLICATION CYCLE OPEN DATE

**February 8, 2026** 

APPLICATION CYCLE CLOSE DATE

March 14, 2026 11:59pm

ACCEPTANCE STATUS NOTIFICATION

March 20, 2026

CASTLEBRANCH IMMUNIZATION/ DOCUMENT UPLOADS

**April 18, 2026** 

CASTLEBRANCH IMMUNIZATION/ DOCUMENT APPROVALS

April 30, 2026

**ACADEMIC ADVISING** 

**Prescott Campus** 

928-776-2106

advising@yc.edu



#### **Selection Criteria & Scoring**

Admission to the Limited X-Ray Machine Operator Certificate Program is based on a 900-point system, utilizing the criteria listed below. Students will be required to provide proof of residency, minimum 1 year at the time of application. <a href="https://www.yc.edu/v6/registrar/residency.html">https://www.yc.edu/v6/registrar/residency.html</a> In addition, the advisor checklist must be provided and complete. Proof of coursework and registration history at Yavapai College will be established by the records on file in the Registrar's Office.

Category	Ranking Criteria	Criteria Points Values	Possible Points
1	HESI A2 ENTRANCE EXAM (valid for 1 year, may be taken twice to achieve a higher score)	95-100% = 500 points 90-94.99% = 425 points 84-89.99% = 350 points 75-83.99% = 175 points <b>Example:</b> cumulative score of 85% = 350 pts	500
2	Agency Affiliation (are you employed with a healthcare agency?)	Yes = 50 points (be sure to type in employer name) No = 25 points	50
3	Biology Course Requirement- BIO160 or equivalent (completed or in-progress)	4 biology credits = 50 points In-progress = 25 points	50
4	Residency	Yavapai County = 150 points State of Arizona = 50 points Outside state or county = 25 points	150
5	Current Yavapai College Student	Completed credits at Yavapai College:  12 or more = 150 points  9-11 = 100 points  6-8 = 75 points  3-5 = 50 points	150

An application must be complete for the applicant to be considered for final selection and placement. Applicants will be notified via email after final determination has been made and will be required to email back to confirm their placement in the program.

Applications that meet the minimum scores for admittance to the program will be evaluated
The 10 highest ranked applicants will be offered placement, based on clinical education site availability.
The next 5 applicants will be offered alternate status. When several applicants have the same ranking score, the following criteria will determine tie breakers:

- 1. Cumulative HESI A2 score
- 2. Overall critical thinking score
- 3. Number of attempts on the entrance exam



#### **Application Checklist for Radiology Technology Program-AAS**

The application must be completed by 11:59 pm on Saturday, March 14, 2026.

ADDITIONS SUDMITTED	DEEODE OD AETED THE	A DOME DATE WILL	NOT DE CONCIDEDED
APPLICATIONS SUBMITTED	DEFUKE UK AFIEK INC.	ADUVE DATE WILL	NOI DE CONSIDERED.

	Official transcripts <u>must be sent directly to the Yavapai College Registrar</u> from any previous institution(s) for official evaluation. <u>Mail transcripts to</u> : Yavapai College, Office of the Registrar,
_	1100 E. Sheldon Street, Prescott, AZ 86301
Ш	Unofficial transcripts (can be photocopies) from all colleges or universities attended (to be
	included with this application)
	Preliminary Clinical Schedule (see instructions on the sheet to be uploaded)
	HESI A2 Entrance Exam Results
	o Min. 75%
	<ul> <li>2 attempts per year during fall semester</li> </ul>
	<ul> <li>Exam dates open when the Fall 2025 semester begins and will close in December</li> </ul>
	Pre-Entry Check Sheet Form for the Radiologic Technology Program
	<ul> <li>Provided and signed by an academic advisor</li> </ul>
	Copy valid driver's license
	Immunization and Documentation Coversheet
	<ul> <li>No supporting documentation needed at time of application</li> </ul>
	Signed Healthcare Provider Signature Form
	→ If a physician will not sign your form acceptance into the program will be denied.
	Proof of Information Session attendance
	<ul> <li>In-person: Attendance Certificate (provided at meeting)</li> </ul>
	<ul> <li>Online: Confirmation of Presentation Attendance (receipt of JotForm responses)</li> </ul>
	**DO NOT PURCHASE CASTLEBRANCH UNTIL CONDITIONALLY ACCEPTED**
	Upon conditional acceptance you will be instructed to purchase CastleBranch.
	Be prepared to upload:
1.	Copy of current negative 2-Step TB skin test.

- - a. Blood tests are not acceptable
  - b. A chest x-ray can only be used IF you have proof of a positive skin test
- 2. Copies of all immunizations or titers in support of your immunization documentation for CastleBranch.
- 3. Copy of Health Insurance Card.
  - a. Required for the duration of the program
- 4. Passport style photograph. (2x2 photo, white background, no glare- can be taken at CVS or Walgreens)

CPR IS NO A PRE-PROGRAM REQUIREMEN. A CLASS WILL BE HELD IN THE SUMMER FOR ALL STUDENTS. \$7.00 FEE APPLIES. MORE INFROMATION WILL BE PROVIDED AFTER CONDITIONAL ACCEPTANCE.

Medical and/or religious exemptions for COVID-19 & Flu are not needed for application. These will be handled by the clinical coordinator on case-by-case once the student is fully accepted to the program.



#### **Immunization and Documentation Sheet**

Please complete this form and have supporting documentation ready for conditional acceptance.

Name:	Y#:	
Immunizations: MMR / Hepatitis B / Varice	ella / TDaP /2-Step TB Skin To	est
MMR		
Date of <b>1st MMR</b> Immunization	or	
Date of Titer		
Date of <b>2nd MMR</b> Immunization		
Hepatitis B		
Date of <b>1st Hep B</b> Immunization		
Date of <b>2nd Hep B</b> Immunization	or	
Date of Titer		
(2nd Hep B not required for program entry)		
Date of <b>3rd Hep B</b> Immunization		
(3rd Hep B not required for program entry)		
Varicella		
Date of <b>1st Varicella</b> Immunization	or	
Date of Titer		
Date of <b>2nd Varicella</b> Immunization		
TDaP		
Date of <b>TDaP</b> Immunization		
2-Step TB Skin Test: Can be submitted afte documentation upload deadline. Please pu		
Date of 1st read		
Date of 2nd read	Result	



#### **Required Immunizations**

1. MMR (measles/rubeola, mumps, rubella)

Options to meet this requirement:

- a. Attach a copy of proof of two previous MMR vaccinations to the Immunization and Documentation Cover Sheet; **or**
- b. If you have had all three illnesses <u>or</u> you have received the vaccinations but have no documented proof, you must have a <u>titer drawn for each</u> illness.
  - i. If the titer is POSITIVE, attach a copy of the results to the Immunization and Documentation Cover Sheet; or
  - ii. If the titer is NEGATIVE, you must get two MMR vaccinations (each 30 days apart) and attach documentation to the Immunization and Documentation Cover Sheet.

#### 2. Varicella (chicken pox)

Options to meet this requirement:

- a. Attach a copy of proof of a POSITIVE IgG titer for Varicella;or
- b. If the titer is NEGATIVE, attach a copy of proof that you received two Varicella vaccinations (each 30 days apart) to the Immunization and Documentation Cover Sheet.

#### 3. Tetanus/Diphtheria and Pertussis (TDaP)

Provide documentation of a TDaP vaccination within the last 10 years. Students with a TDaP older than 10 years or without proof of a current TDaP will need to get a TDaP booster. The renewal date will be set for 10 years from the administered date of the booster. *Optional*: For this requirement, a vaccination record more recent than 9 years is recommended.

#### 4. Tuberculosis

Options to meet this requirement:

a. Attach a copy of proof of a recent NEGATIVE 2-STEP TB skin test (PPD). Note: TB 2-step skin test is two separate tests given with two separate readings within 3 weeks of each other and *must be current*. Records for PPD require the name and signature of the healthcare provider as well as the findings. or



b. If you have a POSITIVE TB skin test you must submit a **current** chest x-ray diagnostic report stating that you are negative for TB with the proof of positive 2-Step TB Skin Test.

No other form of TB testing will be accepted for admission into the program.

#### 5. Hepatitis B

In order to apply to the program, you must complete at least one injection and stay on track with the subsequent two injections according to the timeline set forth in "c" below.

Options to meet this requirement:

a. Attach a copy of proof of completion of three Hepatitis B injections to the Immunization and Documentation Cover Sheet.

<u>or</u>

b. Attach a copy of proof of a POSITIVE HbsAB titer to the Immunization and Documentation Cover Sheet.

or

c. If you have not received the injections in the past, you must obtain the first injection and attach a copy of proof of the injection to the Immunization and Documentation Cover Sheet. Then, you must receive the <u>second</u> injection in one month and the <u>third</u> injection five months after the second injection. Submit documentation to the Radiology Department Instructional Support Specialist.

#### 6. **COVID-19**

Declinations/exemptions may be available, please ask for more information.

#### 7. Influenza

Each season there are new strains of flu, which requires the production of a new vaccine to cover them. The flu "season" generally runs from September through March. Students should wait to get a flu shot until the new vaccine becomes available in the fall. Declinations/exemptions may be available please ask for more information.



#### **Ethics Requirements**

Admission to or graduation from the Yavapai College Radiologic Technology Program does not guarantee eligibility for the American Registry of Radiologic Technologists (ARRT) Post-Primary Certification Examination. Other eligibility requirements of the ARRT must be met. Individuals with misdemeanor or felony convictions should apply to ARRT for an evaluation of examination eligibility prior to admission to the certificate program. You may request a preapplication review form by contacting the ARRT at: <a href="Ethics Violation Pre-Application Form https://www.arrt.org/pages/resources/ethics-information">Ethics Violation Pre-Application Form https://www.arrt.org/pages/resources/ethics-information</a>

651-687-0048, ext. 8580 1255 Northland Drive, St. Paul, MN 55120-1155

Students are encouraged to disclose any issues related to the ARRT Rules of Ethics, the ARRT Rules and Regulations, and the ARRT Standards of Ethics prior to application. *Failure* to disclose any ethics issues prior to admission could result in ineligibility to challenge the ARRT Registry exam.

#### **Basic Life Support (BLS) for Healthcare Providers**

All students must have valid, current BLS for Healthcare Providers certification through the American Heart Association (AHA)— "BLS Provider" this can be during the summer.

#### **Current Health Insurance Coverage**

All students must have current health insurance for the duration of the program. *Failure* to maintain can result in withdraw from the program.

#### DON'T FORGET TO TAKE YOUR HESI EXAM:

- 1. 2 attempts per year during the fall semester
  - a. Contact the test center to schedule: <a href="https://www.yc.edu/v6/testing-center/">https://www.yc.edu/v6/testing-center/</a>
- 2. You'll need to create an evolve student account: http://evolve.elsevier.com
- 3. Make sure you pay for the exam (each attempt costs the same): https://hesistudentaccess.elsevier.com/payments.html?PaymentID=28951
  - a. If you have used this payment link before you MUST contact <a href="mailto:radiology@yc.edu">radiology@yc.edu</a> to get a new link. This includes 2<sup>nd</sup> attempts.

\*you will need a photo ID, your evolve account login and proof of payment to take your exam on your scheduled date.\*



# HESI AZ ENTRANCE EXAM

Entrance exam can only be taken 2 times per year during the Fall Semester.

Allow yourself enough time to retake the exam if necessary. Completing the exam is a prerequisite for applying to the Rad Tech AAS & LXMO Cert. programs.

#### What is the on HESI A2 Entrance Exam?

**English:** Reading Comprehension, Vocabulary, Grammar

**Math:** Basic Math Skills

**Science:** Biology and Anatomy & Physiology

**Critical Thinking:** Problem Solving, Biases & Ethical

Dilemmas, Argument Analysis, Analysis

of Data, Prioritization of Care



#### **Exam Requirements**

Timed for 3 hours to complete all categories listed above.

The minimum passing score is 75%



#### **Schedule your Exam**

Call and schedule your exam with one of our YC Test Centers. <a href="https://www.yc.edu/v6/testing-center/">https://www.yc.edu/v6/testing-center/</a>

Bring: Photo ID, Evolve Username & Password, Payment Receipt.



## What happens if I don't pass with a 75%?

There is a 2nd test taker exam available: equal cost to 1st attempt. Email: radiology@yc.edu to receive the payment link.



#### **Study Guide**

Recommended review book is available online averaging: \$20-\$40

ISBN: 9780323582261

#### Steps to pay the \$65.00 exam fee...

fee is subject to change

To make a HESI Exam payment through your Evolve account, follow these simple steps: Click on this link: <a href="https://hesistudentaccess.elsevier.com/payments.html?PaymentID=28951">https://hesistudentaccess.elsevier.com/payments.html?PaymentID=28951</a>

- 1. Click on the link provided and you will be prompted to login to your Evolve account.\*
- 2. Once you are successfully logged in, select *HESI Assessment Student Access > Payments*. Sections 1 and 2 will be pre-populated with your payment ID and information.
- 3. Enter your billing information into Section 3. After payment confirmation, a proof of payment statement will be displayed and stored in your account under *Payment History*.

\*If you have not added HESI Assessment — Student Access to your Evolve account, follow these steps:

- 1. Go to <a href="http://evolve.elsevier.com">http://evolve.elsevier.com</a> and click on I'm a student.
- 2. In the HESI Secured Exams section, click the link that says Register for Results and Remediation.
- 3. Click Register For This Now to place this in your cart, and then *Redeem/Checkout* from the cart screen.
- 4. If you are a returning user, enter your Evolve username and password and click Login. If you are new to Evolve, enter your name, email, desired password, institution information (if applicable), and click **Continue**.

Once you have registered, the *HESI Assessment — Student Access* link will appear under the *My Evolve* section in your Evolve account.



#### Healthcare Provider Signature Form: (bring form to your physician)

(Please Print) Applicant Name:

A licensed healthcare provider must sign the Healthcare Provider Signature Form and indicate whether the applicant will be able to function as a Radiologic Technology student. Healthcare providers who qualify to sign this declaration include a licensed physician (MD, DO), nurse practitioner, or a physician's assistant.

It is essential that Radiologic Tecthe clinical portion of the prograpatients, stand for several hours required to transport patients or clinical site, and must be physica guideline assigned to weight-lifti requiring them to lift and maniptheir physician(s) prior to the stajob requirements. Students who safe, direct patient care while m	m. At a minimum, sto at a time, and perfor a gurneys and in whe ally capable of perform a capability is 50 po allate greater than 50 art of this program an have a chronic illnes	udents will be requirem bending and twist elchairs, move heavening CPR in an emerounds; however, study pounds. It is advisated determine their also or condition must	red to lift and/or reposition ting activities. Students will be y equipment throughout the gency situation. A standard dents will encounter situations ble that students consult with bility to perform the necessary be capable of implementing	
The clinical experience also place undertake responsibilities and drational and appropriate behavior consideration to the mental and	uties that impact pat or under stressful cor	ients' lives. Students nditions. Individuals	must be able to demonstrate	
Licensed Healthcare Provider to	complete the follow	ving section:		
I believe the applicantWILL orWILL NOT be able to function as a Radiologic Technology student as described above and as designated in the statement of Technical Standards.				
If "WILL NOT," please explain:				
Licensed Healthcare Provider (C	ircle one: MD / DO	/ NP / PA )		
Print Name:		Medical Licen	se No.:	
Signature:			Date:	
Address:				
City:	State:	Zip Code:	Phone:	



#### Statement of the Technical Standards of the Yavapai College Radiologic Technology Program

This statement of the Technical Standards of the Radiologic Technology program at Yavapai College identifies the functional abilities deemed by the radiography faculty to be essential to the practice of radiography. The Technical Standards are reflected in the Radiologic Technology Program's performance-based outcomes, which are the basis for teaching and evaluating all Radiologic Technology students. The practice of radiography requires the following functional abilities with or without reasonable accommodations.

- **Visual acuity** sufficient to assess patients and their environments and to implement the radiography-services plans that are developed from such assessments. Examples of relevant activities:
  - Detect changes in skin color or condition.
  - Collect data from recording equipment and measurement devices used in patient services.
  - Detect a fire in a patient area and initiate emergency action.
  - Draw up the correct quantity of medication into a syringe.
- **Hearing ability** sufficient to assess patients and their environments and to implement the radiography-services plans that are developed from such assessments. Examples of relevant activities:
  - Detect audible alarms within the frequency and volume ranges of the sounds generated by mechanical systems that monitor bodily functions.
  - Communicate clearly in telephone conversations.
  - Communicate effectively with patients and with other members of the health-services team.
- Olfactory ability sufficient to assess patients and to implement the radiography-services plans that are developed from such assessments. Examples of relevant activities:
  - Detect foul odors of bodily fluids or spoiled foods.
  - Detect smoke from burning materials.
- **Tactile ability** sufficient to assess patients and to implement the radiography-services plans that are developed from such assessments. Examples of relevant activities:
  - Detect changes in skin temperature.
  - Detect unsafe temperature levels in heat-producing devices used in patient services.
  - Detect anatomical abnormalities, such as infiltrated intravenous fluid.
- Strength and mobility sufficient to perform patient services activities and emergency procedures. Examples of relevant activities:
  - Safely transfer patients in and out of bed or wheelchair.
  - Turn and position patients as needed to prevent complications due to bed rest.
  - Hang intravenous bags at the appropriate level.
  - Accurately read the volumes in body-fluid-collection devices hung below bed level.
  - Perform cardiopulmonary resuscitation.
  - Transport patients using stretchers or wheelchairs.
- **Fine motor skills** sufficient to perform psychomotor skills integral to patient services. Examples of relevant activities:
  - Safely dispose of needles in sharps containers.
  - Manipulate small equipment and containers, such as syringes, vials, and ampules, in preparation for contrast-media administration.
- Physical endurance sufficient to complete assigned periods of clinical practice.
- Ability to speak, comprehend, read, and write English at a level that meets the need for accurate, clear, and
  effective communication.
- Emotional stability to function effectively under stress, to adapt to changing situations, and to follow through
  on assigned patient-services responsibilities.
- **Cognitive ability** to collect, analyze, and integrate information and knowledge to make clinical judgments and manage decisions that promote positive patient outcomes.



#### PRELIMINARY CLINICAL SCHEDULE

The preliminary clinical schedule is to be uploaded with your application to the Limited X-Ray Machine Operator Certificate program as a scheduling tool for the clinical coordinator. Days and times are not guaranteed due to clinical facility restrictions. Provide the days and times you are available around your current work schedule to aid in clinical placement. *If you are currently working for a facility that offers imaging services and want placement with your employer, please list them.* Green fields are required of all students.

Student Name.	
Facility Name:	
Schedule Details (18 weeks) • Start Date: August 3, 2026 • End Date (if applicable): December 13, 2025	
• Days of Work: □ Monday □ Tuesday □ Wednesday □ Thursday □ Fr □ Saturday	iday
*Provide shifts no shorter than 8.5 hours to account for lunch*  • Shift Start Time:	
• Shift End Time:	
Break Periods: 30 min lunch required for 6.5 hr shift or more	

#### **Duties & Expectations**

Ctudent Name

- The student agrees to adhere to the assigned clinical schedule.
- The student must follow all program policies regarding attendance and clinical requirements.

#### **Modification & Cancellation**

• Total Weekly Hours: 16 hours minimum

- This schedule is preliminary and subject to change as needed.
- The Yavapai College clinical coordinator reserves the right to adjust the schedule with reasonable notice.
- The student may request changes in writing, which must be approved by the clinical coordinator.



#### CastleBranch.com

#### Student Instructions \*remember not to purchase until conditionally accepted\*

#### What is CastleBranch.com?

CastleBranch.com is a background-check and drug-screen service that allows you to purchase your own background check and drug test. The results of the background check and drug test are posted to the CastleBranch.com website in a secure, tamper-proof environment where students and Yavapai College Radiology Department faculty can view the results.

#### Background Check, Immunization Tracker, and Drug Test

The Yavapai College Radiologic Technology Program requires each student entering the degree program to complete the following requirements:

- 1. Completion of a background check by CastleBranch.com.
- 2. Upload to the CastleBranch.com Immunization Tracker: proof of immunizations for MMR, Hepatitis B, Varicella, and TDaP; a *current* American Heart Association CPR/Basic Life Support (BLS) for Healthcare Providers card; a negative TB skin test or clear chest x-ray.
- 3. Purchase a drug test through CastleBranch.com. <u>Please note</u>: Drug tests are administered by Sonora Quest Laboratories. You will have 24 hours to complete the test.

## How Do I Order My Background Check, Immunization Tracker, and Drug Test?

- 1. Go to www.castlebranch.com.
- 2. Click the **Place Order** box on the top right side of the website, enter the package code **YA91** and click **Submit**. This is an all-inclusive package that includes everything you need to pay for with CastleBranch.com for your entire program.
- 3. Enter the required information and finish by selecting a method of payment. There are multiple options: MasterCard, Visa, Discover, or debit card. You may choose to pay for your order in monthly installments; the monthly installment amount depends upon the amount of the order and includes a \$2.99 per installment payment fee. You can also pay by electronic check or money order for an additional \$10.00; payment by electronic check or money order may delay order processing by 7–10 days until the payment is received.
- 4. For criminal search: any additional counties outside of the State of Arizona are \$13.00 each.

#### Your Package Code is YA91 The cost is \$151.49

Students must purchase the package online at <a href="www.castlebranch.com">www.castlebranch.com</a> All required documentation must be uploaded to your account <a href="mailto:and-marked">and</a> marked "Complete" by CastleBranch.

CastleBranch Website: <u>www.castlebranch.com</u> CastleBranch Support Desk: 888-723-4263



#### **Background Check**

All students are required to obtain a background check which requires; a valid social security number. Information regarding how to obtain the background check will be provided to the student *upon conditional acceptance to the program*. The cost of this background check is at the student's expense. Due to clinical agency contracts, any negative results will be reviewed by the Radiologic Technology Program Director on a case-by-case basis to determine admission or continuation in the program. All background checks are national, within the past 7 years and include a Sex Offender Registry search.

#### **Drug Testing**

Random drug testing is a standard procedure throughout the Radiologic Technology Program. The first drug test will be at the student's expense. Any subsequent drug testing will be done at the program's expense. When students are informed that they are subjects of random drug testing, they will be provided an appropriate form and a list of local laboratories that they can utilize. The drug testing must be completed by the end of that business day.

In 2010, Arizona voters approved the Arizona Medical Marijuana Act (Proposition 203), a state law permitting individuals to possess and use limited quantities of marijuana for medical purposes. Because of its obligations under federal law, however, Yavapai College will continue to prohibit marijuana possession and use on campus for any purpose. Under the Drug Free Workplace Act of 1988, and the Drug Free Schools and Communities Act of 1989, "...no institution of higher education shall be eligible to receive funds or any other form of financial assistance under any federal program, including participation in any federally funded or guaranteed student loan program, unless it has adopted and has implemented a program to prevent the use of illicit drugs and abuse of alcohol by students and employees." Another federal law, the Controlled Substances Act, prohibits the possession, use, production, and distribution of marijuana for any and all uses, including medicinal use. This law is not affected by the passage of the Arizona Medical Marijuana Act.

Yavapai College could lose its eligibility for federal funds if it fails to prohibit marijuana, which makes it exempt from the requirements of the Arizona Medical Marijuana Act. Please refer to the following documents: <a href="https://www.yc.edu/Student Code of Conduct">https://www.yc.edu/Student Code of Conduct</a>



#### PROCEDURE ON SCREENING FOR USE OF ALCOHOL AND DRUGS

Intoxicated/impaired behaviors that are disruptive to the learning process violate the Yavapai College Student Code of Conduct. Any individual in a clinical assignment who is under the influence of alcohol or drugs that impair judgment poses a threat to the safety of clients. For these reasons, evidence of use of these substances documented by positive drug and/or alcohol screening tests, will result in immediate withdrawal of the student from the course or program. In the event of an appeal, Yavapai College will make every effort to expedite the appeal process and assure the student of fundamental fairness.

#### <u>Procedures</u>

- 1. Pre-clinical drug screening
  - a. All Radiology Programs students are required to submit to a urine drug screening prior to the beginning of program.
  - b. Students will be advised of the procedure to follow to complete the urine drug screening prior to the beginning of clinical experiences.
  - c. The cost for preclinical drug screening is not included in the program fees.
  - d. Students cannot begin clinical experiences until the test results are available.
  - e. Students receiving negative drug screens or positive screens due to permissible prescriptive drugs will be permitted to begin/continue clinical experiences. In the latter case, medical review and documentation may be required.
  - f. Students testing positive for illegal substances or for non-prescribed legal substances will be dismissed from the course/program. See Positive Screening Test, below.
  - g. Random drug screening may be required and will be conducted at college expense. Students will be randomly selected by their student "Y" numbers. Students must submit to the drug screening by the specified deadline or may be withdrawn from the course/program.
- 2. Suspicion of substance abuse
  - a. The student will be asked to submit to an alcohol or drug screening test at college expense if Radiology programs faculty, staff, or clinical preceptors:



- Have reasonable cause to expect that the student is mentally or physically impaired due to alcohol or substance abuse immediately prior to or during the performance of his/her clinical duties, or
- ii. Perceives the odor of alcohol or observes physical signs and/or behavior including, but not limited to, slurred speech, unsteady gait, confusion, or inability to concentrate.
- b. Student will sign a consent form and have a blood or urine specimen collected according to current procedure.
- c. The student will be removed from assignments, pending results of the test(s).
- d. Test results will be sent to the Director of Radiology or designee.

#### 3. Positive screening test

- a. If the result of the drug screening test is positive and the student provides documentation of a prescription for the substance, the Director of Radiology and/or designee will consider the case in collaboration with the student and his/her health care provider. Each student will be asked to disclose prescription and over-the-counter medications he/she is taking at the time of testing.
  - b. If the results indicate a positive drug screen for alcohol, illegal substances, or medications not prescribed for that individual, the Director of Radiology and/or designee will withdraw the student from the course/program for a period of not less than one year.
- c. After a one-year absence from the course/program, the student may apply for readmission according to the guidelines below:
  - i. Must meet the current Yavapai College and Radiology Program requirements related to registration and admission to the course/program. Readmission for returning students is contingent on space available in the course/program.
  - ii. Must provide documentation of evaluation by an addiction's counselor and his/her determination as to whether the student is addicted to alcohol or drugs. If positive, the student must provide evidence of rehabilitation related to the alcohol/drug illness to



#### include all the following:

- (1) Documentation of satisfactory completion of recognized substance abuse treatment program.
- (2) Evidence of after-care attendance upon completion of the treatment program.
- (3) Weekly attendance at a 12-step or other mutually agreed upon support group. Attendance will be documented by the student and submitted to the Director of Radiology or designee by the last day of each month.
- 4. Negative screening test results for student tested under Section 2 above.
  - a. If the results of tests indicate a negative drug screen for alcohol or drugs, the student shall meet with the Director of Radiology or designee within two working days of the test results to discuss the circumstances surrounding the impaired clinical behavior.
  - b. If the indicator was the odor of alcohol, the student will be mandated to discontinue the use of the substance that may have caused the alcohol-like odor, before being allowed to return to the clinical setting.
  - c. If the indicator was behavioral, consideration must be given to a possible medical condition being responsible for the symptoms. A medical referral for evaluation, with a report provided to the Director of Radiology or designee, may be required.
  - d. Based on the information presented in the meeting, and a medical report if required, the Director of Radiology or designee will decide regarding return to the clinical setting.
  - e. If readmitted, the student must make up clinical absences incurred for testing.
- Confidentiality: All test results will be sent to the Director of Radiology or designee.
   The Director of Radiology or designee may consult with college officials and outside resources for appropriate action/follow-up.
- 6. Inability to submit to a screening test in a timely manner, sections 1, 2, and 3 above, or refusal to submit to a screening test, Sections 1, 2, and 3 above.



If a student in the course/program is unable to submit to a drug or alcohol screening test in a timely manner, unless due to a documented emergency, or refuses to submit to screening, the student will be removed from the course/program for a period of not less than one year.

7.	Appeals are processed through the Yavapa https://www.yc.edu/v6/college-police/faq.htm	College	Office	of Judicial	Affairs.