



## **MEDPROS OF AMERICA, INC.**

### **THE COMPLETE DIAGNOSTIC IMAGING COMPLIANCE PROGRAM MANUAL**

#### **HUMAN RESOURCES**

#### **HUMAN RESOURCES**

1. APPLICATION FOR EMPLOYMENT
2. ATTENDANCE – TARDINESS
3. CERTIFICATION OF TECHNOLOGIST
4. CLASSIFICATION OF EMPLOYEES
5. CPR CERTIFICATION
6. CRIMINAL BACKGROUND CHECKS
7. DISCIPLINARY ACTION
8. DRESS REGULATIONS
9. DUTIES OF THE MEDICAL DIRECTOR
10. EDUCATION VERIFICATION
11. EMPLOYEE COMMUNICATIONS
12. EMPLOYEE REQUESTS PAID TIME OFF
13. EMPLOYMENT OF THE DISABLED
14. EQUAL OPPORTUNITY EMPLOYMENT
15. ETHICAL DILEMMAS
16. EXIT INTERVIEW FORM
17. EXIT INTERVIEWS
18. FOREIGN APPLICANTS
19. GARNISHMENT OF WAGES
20. HIPAA TRAINING FORM
21. HOLIDAY POLICY
22. MAMMOGRPAHY TECHNOLOGIST RESTRICTIONS
23. MANAGEMENT AVAILABILITY
24. NEW EMPLOYEE/PREVIOUS OCCUPATIONAL EXPOSURE RECORDS REQUEST
25. NEPOTISM
26. ORIENTATION PROGAM
27. PAYROLL VERIFICATION
28. PERSONAL INFORMATION
29. PERSONNEL FILES
30. PHOTO IDENTIFICATION
31. POSITION CONTROL
32. PRENANT EMPLOYEE CT-MRI
33. PREGNANT PERSONNEL
34. RECRUITMENT, RETENTION AND EDUCATION
35. REFERENCE CHECKING
36. RE-HIRE
37. SICK LEAVE
38. STAFF SELECTION
39. SUPERVISOR RESPONSIBILITIES
40. TERMINATION OF EMPLOYMENT
41. VACATION
42. WORKMENS COMPENSATION

## HUMAN RESOURCES FILE SETUP

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1. **Section One: (Correspondence)**
    - Orientation Checklist
    - Correspondence / Memos
    - Equipment Agreements (If Applicable)
  2. **Section Two: (Personal)**
    - Application for Employment
    - License Copy / Verification
    - Diploma / Degree / Transcript
    - Education Verification
    - Background Disclosure and Authorization Form
    - CPR Card
    - Employee Emergency Information Form
    - Resume (Licensed Professionals Only)
    - (2) References (Employee and Telephone)
    - W-4
    - State Withholding (If Applicable)
  3. **Section Three: (Agreements)**
    - Receipt of Employee Handbook
    - Acknowledgement of New / Revised Policy
    - Letter of Appointment (Safety Director)
    - Job Description
    - Employee Confidentiality Acknowledgement
  - Work Made for Hire and Proprietary Information Agreement
  - Conflict of Interest Disclosure Form
  - Workplace Policies and Procedures Statement of Understanding
  - HIPAA Training Form
  4. **Section Four: (Credentials)**
    - Specialty Training
  5. **Section Five: (In-Service)**
    - Offsite Training
  6. **Section Six: (Confidential File – *Kept Separate*)**
    - Driving Record Check
    - I-9 Form
    - Drug Test Consent and Authorization
    - Mantoux or X-ray
    - Immunizations
    - Other Confidential Information
    - Background Screening Results
    - Drug Screening Results
    - Copy of Driver's License and Social Security Card
    - Drug Testing Consent
  7. **Section Seven: (Evaluations)**
    - Pre-Employment Questionnaire
    - Health Questionnaire for Positive Tuberculosis Skin Test Reactions
    - Informed Consent for Hepatitis B Vaccine
    - Hepatitis B Vaccine Declination Form
    - Time Off Request Form

## **JOB DESCRIPTIONS AND 90 DAY PERFORMANCE EVALUATIONS**

1. CURRENT LICENSURE CERTIFICATION AND REGISTRATION
2. PERFORMANCE EVALUATION
3. 2010 ANNUAL COMPETENCY NATIONAL PATIENT SAFETY GOALS
4. MEDICAL DIRECTOR
  - a. PERFORMANCE EVALUATION CONTINUATION PAGE
  - b. ANNUAL PROFESSIONAL PERFORMANCE AND COMPETENCY EVALUATION
5. ADMINISTRATOR
  - a. ANNUAL PERFORMANCE AND COMPETENCY EVALUATION
  - b. ANNUAL CLINICAL ASSESSMENT
  - c. JOB DESCRIPTION AND 90 DAY PERFORMANCE EVALUATION
  - d. PERFORMANCE EVALUATION CONTINUATION PAGE
  - e. ANNUAL PROFESSIONAL PERFORMANCE AND COMPETENCY EVALUATION
6. CHIEF SAFETY OFFICER
  - a. JOB DESCRIPTION AND 90 DAY PERFORMANCE EVALUATION
  - b. PERFORMANCE EVALUATION CONTINUATION PAGE
  - c. ANNUAL PROFESSIONAL PERFORMANCE AND COMPETENCY EVALUATION
7. CORPORATE COMPLIANCE OFFICER
  - a. JOB DESCRIPTION AND 90 DAY PERFORMANCE EVALUATION
  - b. PERFORMANCE EVALUATION CONTINUATION PAGE
  - c. ANNUAL PROFESSIONAL PERFORMANCE AND COMPETENCY EVALUATION
8. EXECUTIVE SECRETARY
  - a. JOB DESCRIPTION AND 90 DAY PERFORMANCE EVALUATION
  - b. PERFORMANCE EVALUATION CONTINUATION PAGE
  - c. ANNUAL PROFESSIONAL PERFORMANCE AND COMPETENCY EVALUATION
9. DIAGNOSTIC IMAGING MANAGER
  - a. ANNUAL PERFORMANCE AND COMPETENCY EVALUATION
  - b. ANNUAL CLINICAL ASSESSMENT
  - c. JOB DESCRIPTION AND 90 DAY PERFORMANCE EVALUATION
  - d. PERFORMANCE EVALUATION CONTINUATION PAGE
  - e. ANNUAL PROFESSIONAL PERFORMANCE AND COMPETENCY EVALUATION
10. DIAGNOSTIC IMAGING TECHNOLOGIST

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- a. ANNUAL PERFORMANCE AND COMPETENCY EVALUATION
  - b. ANNUAL CLINICAL ASSESSMENT
  - c. JOB DESCRIPTION AND 90 DAY PERFORMANCE EVALUATION
  - d. PERFORMANCE EVALUATION CONTINUATION PAGE
  - e. ANNUAL PROFESSIONAL PERFORMANCE AND COMPETENCY EVALUATION
11. DIAGNOSTIC IMAGING ASSISTANT
- a. ANNUAL PERFORMANCE AND COMPETENCY EVALUATION
  - b. ANNUAL CLINICAL ASSESSMENT
  - c. JOB DESCRIPTION AND 90 DAY PERFORMANCE EVALUATION
  - d. PERFORMANCE EVALUATION CONTINUATION PAGE
  - e. ANNUAL PROFESSIONAL PERFORMANCE AND COMPETENCY EVALUATION
12. DIAGNOSTIC IMAGING TRANSCRIPTIONIST
- a. ANNUAL PERFORMANCE AND COMPETENCY EVALUATION
  - b. ANNUAL CLINICAL ASSESSMENT
- c. JOB DESCRIPTION AND 90 DAY PERFORMANCE EVALUATION
  - d. PERFORMANCE EVALUATION CONTINUATION PAGE
  - e. ANNUAL PROFESSIONAL PERFORMANCE AND COMPETENCY EVALUATION
13. DIAGNOSTIC IMAGING RECEPTIONIST / CLERK
- a. ANNUAL PERFORMANCE AND COMPETENCY EVALUATION
  - b. ANNUAL CLINICAL ASSESSMENT
  - c. JOB DESCRIPTION AND 90 DAY PERFORMANCE EVALUATION
  - d. PERFORMANCE EVALUATION CONTINUATION PAGE
  - e. ANNUAL PROFESSIONAL PERFORMANCE AND COMPETENCY EVALUATION
14. DRIVER
- a. JOB DESCRIPTION AND 90 DAY PERFORMANCE EVALUATION
  - b. PERFORMANCE EVALUATION CONTINUATION PAGE
  - c. ANNUAL PROFESSIONAL PERFORMANCE AND COMPETENCY EVALUATION

## **ORIENTATION CHECKLISTS**

1. ADMINISTRATIVE/MANAGEMENT - ORIENTATION CHECKLIST
2. CLINICAL STAFF - ORIENTATION CHECKLIST
3. CONTINUING EDUCATION ATTENDANCE RECORD
4. EMPLOYMENT APPLICATION POLICY
5. IN-SERVICE CONTINUING EDUCATION
6. IN-SERVICE TOPICS
7. IN-SERVICE ATTENDANCE RECORD
8. OFFICE STAFF - ORIENTATION CHECKLIST
9. ORIENTATION POLICY

## **TERMINATION FORM**

1. DISCIPLINARY ACTION FORM
2. EMPLOYEE EXIT INTERVIEW FORM
3. EMPLOYMENT REFERENCE RELEASE
4. GENERAL RELEASE FOR EMPLOYMENT TERMINATION
5. TERMINATION MEETING CHECKLIST

## **EMPLOYEE HANDBOOK**

Welcome Message  
About this handbook  
Employment at will  
Criminal Background Investigations  
Employees covered by this handbook  
Introductory/Probation Period  
Hours of work  
Personnel Records  
Equal Employment Opportunity  
Harassment  
Sexual Harassment  
Time Documentation  
Wage Assignments-Garnishments  
Social Security  
Payroll Deductions  
Holidays  
Paid Time Off  
Bereavement  
Jury Duty  
Leave of Absence

Workers Compensation  
Compensation  
Employment Expectations  
Safety  
Unauthorized substances  
Attendance  
Conduct  
HIPAA  
Confidentiality  
Conflict of Interest  
Telephone/E-Mail/Internet  
Dress Code  
Media Inquiries  
No Smoking  
Threats of Violence  
Security Inspections  
Problem Resolution  
Automobile Policy  
Resignation/Termination