



Joint Review Committee on Education in Radiologic Technology
20 N. Wacker Drive, Suite 2850
Chicago, IL 60606-3182
312.704.5300
www.jrcert.org

April 8, 2025

Alan Kadish, M.D.
President
Touro University
500 7th Avenue, 4th Floor
New York, NY 10018

RE: Program #0672
Previous Accreditation Status: Probation
Most Recent Site Visit: 01/2025

Dear Dr. Kadish:

The Joint Review Committee on Education in Radiologic Technology (JRCERT) appreciated the opportunity to evaluate the certificate and associate degree radiography program, and the good cause extension request, i.e., extension to the compliance timeframe due to non-compliance with student achievement/success objectives, sponsored by Touro University. The JRCERT is the only agency recognized by the United States Department of Education (USDE) and the Council for Higher Education Accreditation (CHEA) for the accreditation of traditional and distance delivery educational programs in radiography, radiation therapy, magnetic resonance, and medical dosimetry. Specialized accreditation awarded by the JRCERT offers institutions significant value by providing peer evaluation and by assuring the public of quality professional education in the radiologic sciences.

The continuing accreditation status of the program was considered at the March 28, 2025 meeting of the Joint Review Committee on Education in Radiologic Technology. The program was evaluated according to the **Standards for an Accredited Educational Program in Radiography (2021)**. The JRCERT awards:

PROBATION
and
APPROVAL OF GOOD CAUSE EXTENSION DUE TO MITIGATING CIRCUMSTANCES.

Consistent with JRCERT Policy 10.100, this accreditation action is not subject to appeal.

The JRCERT, after reviewing the findings of the site visit team and the program's response to the report of findings, has determined that the program is in non-compliance with **Standards Four** and **Six**:

Objective 4.4 - Lack of assurance that the program provides timely, equitable, and educationally valid clinical experiences for all students. (Provide assurance that timely clinical assignments are made available, a 1:1 student-to-clinical staff ratio is maintained, and that students are appropriately supervised.)

Objective 6.1 - Lack of assurance that the program maintains the following program effectiveness data: Five-year average credentialing examination pass rate of not less than 75 percent at first attempt within six months of graduation. (Provide the program's 2021-2025 credentialing examination data.)

The program's current five-year (2020-2024) average credentialing examination pass rate at first attempt within six months of graduation is 72% (144/200).

Objective 6.2 - Lack of assurance that the program analyzes and shares its program effectiveness data to facilitate ongoing program improvement. (Provide the action plan for the unmet program effectiveness data.)

The program is advised that the implemented action plan must identify the issue/problem of the unmet benchmark and that the documentation of data analysis includes trending/comparing of results over time and identifies area for improvement. The action plan must be reassessed annually until the performance concern(s) is/are appropriately addressed.

Objective 6.4 - Lack of assurance that the program analyzes and shares student learning outcome data to facilitate ongoing program improvement. (Provide assurance that the program analyzes student learning outcome data to identify priorities to bring about systematic program improvement.)

Therefore, a progress report documenting compliance with these objectives is required by **January 16, 2026**. The progress report must be submitted via the JRCERT Accreditation Management System (AMS) and will be considered by the Board of Directors at the next available meeting after submission. Based on evaluation of the progress report, the Board of Directors will determine the appropriate accreditation action.

The program is also advised to continue refining its assessment plan, which will be evaluated at the time of the next program review (e.g., continuing application/self-study report and site visit).

In addition, the Committee based this decision on the expiration of the maximum compliance timeframe allowed to document compliance with all accreditation standards. As required by the USDE and consistent with JRCERT Policy 11.400, the program was to have documented compliance with the Standards by April 7, 2025. Consistent with JRCERT Policy 11.400, the JRCERT Board of Directors has granted a 12-month good cause extension to the program's compliance timeframe. The board recognizes that the non-compliance with student achievement/success objectives may have affected the program from documenting compliance with all accreditation standards. The program must now be in compliance with all accreditation standards no later than **April 7, 2026**. This is the maximum time that the board will allow for the program to document progress towards and achievement of compliance with all accreditation standards. The program is advised that no additional extensions will be granted and that the board may consider involuntary withdrawal of accreditation prior to expiration of the good cause extension.

Consistent with JRCERT Policy 11.400, Procedure 11.406B, programs cannot request an increase in program/clinical capacity with a Probationary Accreditation or Administrative Probationary Accreditation status.

Additionally, consistent with JRCERT Policy 12.200, the JRCERT requires the program to submit a [teach-out plan](#) no later than **May 7, 2025**.

As required by the USDE and consistent with the maximum compliance timeframes set forth in JRCERT Policy 11.400, when the JRCERT Board of Directors determines that a program has failed to document compliance with the Standards and has not satisfactorily addressed the identified deficiencies, the existing accreditation status will be withdrawn. Such involuntary withdrawal of accreditation is considered an adverse accreditation action. The JRCERT defines an adverse action as probationary accreditation, any reduction in accreditation award that initiates a compliance timeframe, involuntary withdrawal, or withholding accreditation. Involuntary withdrawal of accreditation will generally, but not necessarily, occur after a Probationary Accreditation status has been awarded. The board may take adverse action prior to the expiration of the maximum compliance timeframe. An adverse accreditation action requires written notification to the United States Secretary of Education, the appropriate state licensing or authorizing agency, appropriate institutional and/or other accrediting agencies, and the public.

Consistent with JRCERT Policy 10.700 (enclosed), the program must notify currently enrolled and accepted students, as well as the public via a website posting, of this status within 7 days of receipt of this letter. The program is required to submit a representative sample of such notification and list of recipients to the JRCERT no later than **April 15, 2025**.

As identified in JRCERT correspondence dated March 5, 2025, documentation of completion of the "New Program Official eLearning Plan" by the acting program director must be submitted no later than **March 5, 2026**.

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The program is further advised that consistent with JRCERT Policy 11.600, the JRCERT reserves the right to conduct unannounced site visits of accredited programs. The sponsoring institution would be responsible for the expenses of any onsite evaluation.

The Joint Review Committee on Education in Radiologic Technology Directors and staff encourage you and the program faculty to continue your efforts in developing a quality educational program. If we can be of further assistance, do not hesitate to contact the office.

Sincerely,



Mahsa Dehghanpour, Ed.D., CMD
Chair

MD/BJL/jm
Enc.

copy: Acting Program Director: Colin G. McGibbon, M.H.A., R.T.(R)(CT)(BD)
Director: Stephanie Evans, M.P.H.
Site Visitors: Gail M. Schroeder, M.P.H., R.T.(R)
Mary A. Curtis, M.S., R.T.(R)(CT), CNMT (NMTCB)
Todd R. Van Auken, Ph.D., R.T.(R)(MR)
New York: Alex Damiani
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