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The information contained in this handbook is subject to change.

WELCOME

Welcome to Marion Technical College Diagnostic Medical Sonography! You are about to embark on two years of educational experiences designed to help you work in this challenging medical profession.

Diagnostic Medical Sonography is a people-oriented business. It carries with it special opportunities. Patient care is a privilege awarded to those who lend themselves to the tasks of learning and to the process of evaluation.

The key ingredients of our educational program are enthusiasm and dedication. The coming years will be difficult, but rewarding. Rest assured we stand ready to be supportive during rough times, and to share your happiness in times of accomplishment.

PHILOSOPHY

Marion Technical College Diagnostic Medical Sonography recognizes the ever-increasing role of sonographers and realizes the need for students to be trained so they can adapt to routine and non-routine situations in the work setting. We hope to instill in our students ethical and legal responsibilities to their patients.

We recognize our obligation to identify the knowledge and essential skills for students to develop high standards of performance. We recognize the need to provide a learning environment for our students. This education will not be denied anyone on the basis of race, color, national origin, sex, disability, age, military status, or sexual orientation.

ACCREDITATIONS

The process of accreditation is a formalized review that assures that the College and individual program meet stringent national standards of excellence. Individual program accreditations also ensures quality curriculum that enables graduates to qualify for applicable certification examinations and/or licensures.

Marion Technical College is accredited by The Higher Learning Commission and member of the North Central Association. In addition, MTC is approved by the Ohio Bureau of Vocational Rehabilitation, the Ohio College Association, the Ohio State Department of Vocational Education, and the State Approving Agency for Veterans Training. Marion Technical College School of Diagnostic Medical Sonography is recognized by the American Registry of Radiologic Technologists.

Program Accreditation

DMS Accreditation: Commission on Accreditation of Allied Health Programs (CAAHEP) January 16, 2019, thru 2024.

The Marion Technical College Diagnostic Medical Sonography Program is currently accredited by the Commission on Accreditation of Allied Health Programs (CAAHEP).

This accreditation is granted upon a recommendation by the Joint Review Committee on Education in Diagnostic Medical Sonography (JRC-DMS) based on a programmatic review and site visit. Recognition by CAAHEP qualifies the Program's graduates for eligibility to apply for and take the following certification examinations for the American Registry of Diagnostic Medical Sonography (ARDMS):

Diagnostic Medical Sonography Abdominal-Extended and Obstetrical and Gynecological Sonography
CAAHEP: Commission on Accreditation of Health Technologies Education Programs

CAAHEP:

Commission on Accreditation of Allied Health Education Programs

9355- 113th St. N, # 7709

Seminole, FL 33775

727-210-2350 727-210-2354 (fax)

www.caahep.org

JRC-DMS:

Joint Review Committee on Education in Diagnostic Medical Sonography

6021 University Blvd Ste 500

Ellicott City , MD 21043

443-973-3251

www.jrcdms.org

MISSION

To provide an environment for student diagnostic medical sonographers to become qualified and competent in a healthcare setting. We partner with the healthcare community to provide higher education for sonographers. The School encourages the process of life-long learning.

INTEGRITY

MTC believes that its actions and reactions not only reflect its mission and goals, but are tempered with the basic principles of honesty, respect, professionalism, fairness, candor, and ethical behavior. College practices are consistent with institutional policies, and employees conduct themselves as extensions of the College.

PROGRAM GOALS

- To prepare competent entry- level sonographers in the cognitive (knowledge), psychomotor (skills), and affective learning (behavior) learning domains for the following concentration(s) it offers: abdominal sonography- extended, and obstetrics and gynecology sonography.
- To provide the community with competent diagnostic medical sonographers.
- To facilitate development of effective communication, critical thinking, and problem-solving skills.
- To facilitate the development of professional attitudes, behaviors, ethics, diversity and inclusion within the framework of the diagnostic medical sonography profession.

STUDENT LEARNING OUTCOMES

- Demonstrate knowledge and skill in abdominal sonography.
- Demonstrate knowledge and skill in OB/GYN sonography.
- Demonstrate knowledge and skill in small parts/ superficial structures /high resolution sonography.
- Modify standard procedures to accommodate for patient conditions and other variables to obtain quality images while utilizing proper ergonomics.
- Evaluate cross sectional anatomy, pathology and image quality.
- Recognize emergency patient conditions and initiate first aid and basic life support procedures.
- Practice the safe limits of equipment operations (ALARA) and report malfunctions to the proper authority.
- Demonstrate knowledge and skills related to quality assurance.
- Exercise independent judgment and discretion when performing imaging procedures.
- Demonstrate an understanding of your role in the healthcare environment.
- Practice effective communication with patients and other health professionals.
- Provide basic patient care, comfort, anticipate patient needs, and patient education.
- Demonstrate an understanding of ultrasound production.
- Demonstrate knowledge of human structure, function, and pathology.
- Support the profession's code of ethics, diversity and inclusion and comply with the profession's standard of practice.

NON-ACADEMIC STANDARDS

All applicants are required to complete the Non-Academic Standards for Admission prior to acceptance into the program.

The student must have:

1. Sufficient eyesight to observe patients, manipulate equipment, and evaluate sonographic quality.
 - Far vision to see object beyond 20 feet
 - Near vision to see object within 20 inches
 - Depth perception to judge distance
 - Field vision to see an area up, down, right and left while eyes are fixed at one point
 - Sharp vision to adjust vision when doing close work that changes in distance from eyes
 - Skillfully use precision instruments
 - Observe and evaluate (i.e., patient gait, skin changes)
 - Observe changes in equipment operation (i.e., smell, overheating, incorrect meter readings)
2. Sufficient hearing to assess patient needs and communicate verbally with other health care providers.
 - Secure information (i.e., questioning of patients)
 - Describe changes in activity, mood and posture
 - Perceive nonverbal communication
 - Hear instructions
3. Sufficient verbal and written skills to communicate needs promptly and efficiently in English.

- Must verbally instruct patients
4. Must have a reading comprehension level of ability comparable to a formal education.
 5. Sufficient gross and fine motor coordination to respond promptly, manipulate equipment, lift a minimum of 30 pounds, and possess the ability to support 175 pounds, and ensure patient safety.
 - Elicit information from patient by diagnostic maneuvers (i.e., palpation)
 - Safely perform laboratory and imaging procedures
 - Safely lift, manipulate and use equipment
 - Reach up to six feet from floor
 - Input data into a computer
 6. Ability to work while standing, sometimes for hours.
 - Must be free to move around and stand without assistance for long periods of time
 7. Satisfactory intellectual and emotional functions to exercise independent judgment and discretion in the safe technical performance of medical imaging procedures.
 - Allow mature, sensitive, and effective relationships with patients and fellow workers
 - Tolerate physically taxing workloads
 - Function effectively under stress
 - Adapt to changing environments (i.e., flexible schedules, emergency conditions)
 - Display compassion, empathy, integrity, concern for others, interest, and motivation
 - The work constantly requires visual concentration and/or attention to focus thoughts or efforts for periods of time
 - Demonstrate patient confidentiality

The work involves risks or discomfort that requires special safety precautions, additional safety education and health risk monitoring (i.e., ionizing radiation and infectious disease). Students are required to use protective clothing or gear such as masks, gloves, and gowns.

These non-academic standards for admission are located on the reverse side of the program application and require students' acknowledgement and signature.

ADMISSION/ACADEMIC SERVICES

Application deadline for each class is June 1st. Students are admitted into the program based upon an admission point system, whereby the most qualified applicants are considered based upon highest point totals. Admission to the College in accordance with College Admission Policy #401 shall precede admission to the School of Diagnostic Medical Sonography. The number of approved clinical education facilities and student-teacher ratios limits the number of students admitted into the program. See Alternate Policy.

ADVANCED STANDING

Credit for Life Experience

Students with work experience in a clinical setting may be granted life experience in certain technical courses if it is determined by the Department Director that the life experience fulfills the requirements of the offered MTC course. Please refer to the MTC catalog for additional information. In order to receive life experience credit, the student must:

- Complete and return the Life Experience Credit form
- Submit supporting documents which must be completed by a person who has been the student's immediate supervisor at least six months
- Pay the applicable Life Experience fee of \$15 per credit hour

Credit by Examination

If you have qualifications from previous education, job training, self-study, occupational, or other experiences, you may be able to earn credit in certain courses by successfully completing a proficiency examination. A maximum of 48-semester hours of credit may be earned through exam, life experience, or any combination thereof. A \$15 per credit hour, nonrefundable fee must be paid to the Business Office before proficiency examinations can be taken. Courses available through credit-by-examination are denoted in your curriculum in the college catalog. Contact the department director or administrative assistant for additional information.

Transfer of Credit

To transfer credit from another college, your courses must be from institutions approved by appropriate regional accrediting associations as recognized in the Higher Education Directory.

At least 32 credit hours for any degree program must be earned at MTC, of which 16 must be in technical courses. The number of transfer credits accepted toward the degree or certificate will vary depending upon the program requirements and credit hour totals.

A student who is in good standing and wishes to transfer to MTC Sonography Program may submit a completed program application to the program director. Transfer students must meet our admission requirements to be considered for the program. The student must submit an official transcript of all schools attended. The student must submit final course grades for courses related to the previous sonography program, as well as course descriptions, and a definition of the grading system. Previous records must indicate the exact dates of education to date. Once the appropriate documents are submitted, the program director will arrange a meeting with the student.

Admission is contingent upon the following:

- Student must have a passing status in the previous program
- If there is an opening in the class the student wishes to enter
- The combined length of both programs will not be less than two school years
- Approval of the program director

WITHDRAWAL FROM PROGRAM

If you wish to withdraw from the College, you may do so by completing the drop/add form available from the Office of Student Records. Courses may be dropped up to ten calendar weekdays before the course ends. After the tenth class day before the course ends, no drop or section transfer forms will be accepted.

READMISSION TO THE PROGRAM

Students may request readmission in writing to the program director within one year of the date of the end of the semester in which the last sonography course was successfully completed. The request should include the semester the student wishes to return and the year of anticipated graduation. The student will be considered for readmission according to the Sonography Admission Policy. Students are encouraged to request readmission as quickly as possible, since the number of positions available in the program is limited. The student must schedule a meeting with the program director to develop an educational plan for readmission.

ATTENDANCE

An essential of the program is for the student to develop a good work ethic. This includes not only a willingness to help patients, but being a dependable employee in the future.

You are expected to attend all scheduled classes. If you must miss a class on a rare occasion, you are advised to notify the instructor in advance and inquire about make-up assignments.

Students must fulfill attendance requirements for the clinical component. One day is equivalent to eight hours. A maximum of one day absence in clinical is permitted without penalty and with no required make-up. A maximum of two absences in clinical can be accommodated by successfully completing a rescheduled clinical assignment. Clinical assignments must be made up to fulfill clinical requirements. More than two absences per semester will result in an unsatisfactory clinical grade. Failure to complete make-up clinical assignment will result in an unsatisfactory clinical grade.

Students are expected to be at their assigned clinical area at the scheduled time. In the case of an illness or emergency, the student must notify the clinical instructor or supervising sonographer at least one half hour prior to scheduled time of arrival. **Failure of clinical notification may result in disciplinary action.**

Make-up time is arranged through the clinical coordinator. Students do not schedule make up time without approval from the clinical coordinator.

In the event that the clinical coordinator is unavailable, the student will report to the program director.

If an unforeseen situation occurs, such as the student requiring a surgical procedure, exceptions may be made for the student to fulfill their clinical assignment. This is by approval of the program director.

Sick days will be counted as an absence. Court date or jury duty will not count as an absence. Doctor's appointments or any appointment cannot be made during clinical time. Student must make arrangements with clinical instructor to make up missed clinical time. Attendance Policy included in this document.

TARDINESS

Tardiness is defined as a late arrival or more than five minutes after the scheduled clinical time. Tardiness in excess of one hour is considered a half-day absence. Three tardy in one semester will be counted as one day's absence. Attendance Policy included in this document.

LIABILITY INSURANCE

Students are covered under the college's professional liability insurance prior to enrolling in their clinical courses. Clinical contracts for students with outside agencies require this insurance coverage before a student is permitted to participate in a clinical experience. This fee will be included with tuition fees. No refunds will be made for coverage due to dropouts for any semester.

RESPONSIBILITY FOR TREATMENT

The student enrolled in Sonography will receive a Responsibility for Treatment form with their packet of information during orientation. The student is required to return the completed form verifying the student will assume the cost of treatment or care for any personal injury or medical condition incurred during the course.

It is the student's responsibility to have personal health insurance. Students may purchase health insurance through Marion Technical College. Students are responsible for any medical expenses accrued while enrolled in the program.

PHYSICAL EXAMINATION

All Sonography students must complete a physical examination to meet the health requirements of the clinical sites. Medical forms will be provided during orientation. The student is responsible to submit the completed form with immunization record and laboratory reports by the specified deadline provided during orientation. All records will be maintained by the School of Diagnostic Medical Sonography and once submitted, become the property of the School and cannot be released. A student may not participate in clinical until the physical exam is complete and the documentation provided.

THIRD PARTY CLINICAL REQUIREMENTS

Experience in a clinical setting is an integral component of educating students in Marion Tech's Nursing and Allied Health programs*. As a condition of these programs, set forth by their respective accrediting bodies, students must complete clinical placement prior to successful completion of their program. Marion Tech has entered into required agreements with health care facilities and providers to serve as clinical placement sites for Marion Tech students. As always, and defined in these agreements, Marion Tech students are required to adhere to the policies and procedures set forth by clinical placement sites. Marion Tech does not set the requirements for the clinical site, we are only making you aware of these third-party requirements. A student must comply with the clinical requirements, including vaccinations. If a student does not meet all clinical requirements, including getting the vaccines a clinical site has deemed mandatory, the student may disqualify themselves from the Nursing and Allied Health programs at Marion Tech.

CRIMINAL BACKGROUND CHECK

All accepted applicants will be required to submit to a criminal background check facilitated by MTC and conducted by The Ohio Bureau of Criminal Identification and Investigation. The background check will include, but is not limited to, an analysis of fingerprints and review of prior criminal records. Students with any criminal record will be ineligible for admission into the School of Sonography. The submission of any false information to MTC shall be cause for immediate dismissal from the School of Diagnostic Medical Sonography.

DRUG SCREENINGS

Applicants admitted to the program are required to submit to an eight-panel (certain sites require additional ten-panel drug screens) drug screen. Unsatisfactory results of a drug screen will result in ineligibility for admission and/or continuation in the program. The student must also authorize the release of the test results to the Marion Technical College per normal reporting procedures. Any student who refuses/fails to cooperate, or complete any required drug screenings will be considered “positive” and dismissed from the program. Students may also be subject to “random” drug screenings during the program for cause. The clinical sites reserve the right to conduct periodic “random” drug screenings.

If a student is dismissed from the program as a result of a “positive” drug screening, and requests readmission to the program in the future, he or she will be subject to periodic “random” drug screenings for the first year of their readmission into the program. Upon readmission, payment of all required drug screens will be the sole responsibility of the student.

STUDENT ILLNESS, MEDICAL ABSENCE

In the event of student illness, injury or disability, the program director may require a physician’s statement detailing student safety and accommodations.

Students should notify the program director or clinical coordinator if they are too sick to attend class or clinical assignment. The program director may ask for verification from physician of student’s wellness to attend school or their clinical assignment.

STUDENT ACADEMIC IMPROVEMENT NOTICE

If, by the eighth week of any semester, it becomes evident that your academic work is less than satisfactory (less than a grade of “C”), your instructor will provide you with a Student Academic Improvement Notice describing the areas in which you are deficient. You must then meet with your advisor to discuss any difficulties you may be experiencing and together develop strategies for improvement.

COURSE EVALUATION

Ongoing evaluation of the program is essential for the continued growth and excellence of the program. The students’ input is necessary for this evaluation. At the end of each course, students are asked to fill out an evaluation of that course. This information is used in planning future courses. Students are urged to provide constructive comments throughout the program.

PROGRAM EVALUATION

Approximately three months post-graduation, a program evaluation form will be sent to each employer of graduates of the previous school year. School officials review the evaluations each year. Results are used to validate the curriculum and to ensure the output is consistent with program goals.

DISCIPLINARY ACTION

If you violate the Marion Technical College Code, you may be placed on disciplinary probation or dismissed. Disorderly, dishonest, and immoral conduct is grounds for probation or immediate dismissal. In a technology that includes clinical, good standing with the cooperating clinical site is expected and is essential for continuation in the program. This procedure is used when another student, faculty or staff member accuses a student of violating the College code. Charges against a faculty or staff member are referred to that employee's vice president and/or the Director of Human Resources. Depending on the seriousness of the violation, the student may be given an Interim Suspension while the investigation is conducted and during the hearing process.

A. Complaint made:

1. A complaint is made to the Vice President of Student Services
2. A preliminary investigation is conducted by the Vice President; if the student is believed to be in violation, an administrative hearing is scheduled.

B. Administrative hearing:

1. The student is presented with the charges and sanctions are set.
2. If the student does not admit the violation or accept the sanctions, a judicial committee hearing may be scheduled.

C. Judicial Committee hearing:

1. This committee consists of two students, two faculty, and two administrators.
2. The student is officially notified of charges, the alleged regulations violated, witnesses, and the time of the hearing.
3. The student may be found not in violation, if so, the case is dismissed.
4. If the student is found in violation, sanctions are determined.
5. If the student chooses to appeal, the College President will review the case.

D. President's review:

1. The President may reverse the Judicial Committee's decision or affirm their decision. Any further appeals must be directed to a State, Local, and Civil Court of Appeals.

DISMISSAL

The sonography department reserves the right to recommend withdrawal or dismissal of a student who fails to meet academic or clinical professional standards. Such decisions would be made after consultation with the student.

ACADEMIC RENEWAL

If you have returned to MTC after an absence, you may be eligible to have your accumulative grade point average reviewed and recalculated so you can resume your education. Refer to Vice President of Instructional Services Office for form.

GRADING SYSTEM

Didactic and Clinical grading scale will be as follows:

GRADING SCALE:

93 -100 = A

84 - 92 = B

75 - 83 = C

74- 70 = D

69-60 = F

FINAL GRADE CRITERIA:

Exams 55%

Final 25%

Assignments 15%

Professionalism 5%

“U” or Unsatisfactory may be used in certain circumstances.

GRADUATION REQUIREMENTS

As per college policy, students must receive a minimum grade of “C” in all required courses for graduation. Once in the program, students must maintain a 2.0 minimum accumulative grade point average for continuation/graduation in the program sequence. Students must maintain a 75% minimum clinical grade to continue in the program. Please refer to the MTC Student Handbook for additional information.

ARTICULATION AGREEMENTS

MTC has entered into transfer agreements with other Ohio colleges and universities. These agreements enable graduates to enter the “transfer college” with junior status so they can, in most cases, complete a bachelor’s degree in as little as two more years. Please refer to the **Transfer Module** brochure for more specific information and options.

STUDENT-FACULTY CONFERENCES

Students will be counseled regarding their clinical and didactic performance at least twice a year. This is an opportunity for students to receive input from faculty on their progress in the program. Students will receive periodic counseling as needed. Class meeting are held periodically providing additional feedback.

ACADEMIC ADVISING

You are required to schedule an appointment with your academic advisor prior to registering for your second semester of classes. You are also required to meet with your advisor at the end of each semester, or if your accumulative grade point average drops below 2.0 (“C” average). Two semesters before you plan to graduate, you are encouraged to take the initiative to review with your advisor the progress you have made and your plans to complete the program.

TUTORIAL ASSISTANCE

Tutoring services are available at MTC. Tutors are arranged through the Center for Student Success (CSS) and the instructor. Forms from the CSS need to be completed by the tutor and student.

REQUEST FOR SPECIAL ACCOMMODATIONS

Marion Technical College (MTC) strives to facilitate equal and equitable access to all programs, services, and activities. Students with disabilities or disabling conditions, including learning disabilities, mental health, chronic health, physical, sensory, cognitive/neurological, should request the accommodations as soon as possible, as some accommodations may take additional time to arrange. The student must meet with the Disability Services (DS) staff to determine eligibility for the specific accommodations they plan to use to reduce or remove the barriers experienced at MTC. The DS staff work with the students and the faculty/staff/administration to facilitate equal and equitable access to the campus, courses, and all programs, services, and activities. We look forward to meeting with you and making sure you have access. If you are not sure your condition qualifies for accommodations, please reach out to speak with the DS staff as soon as possible. For more information and to arrange a meeting with DS, email DS@mtc.edu or call 740-386-4222.

CONDUCT

College Code

Definitions

- The term “College” means Marion Technical College. The College is sometimes referred to as “MTC” or “Marion Tech”.
- The term “student” means any person registered for enrollment in courses at Marion Technical College at the time of the alleged violation of this code, or any person on college-related premises, for any purposes related to registration for enrollment on campus.
- The term “registered student organization” means a group or association of students, which has received recognition for the Student Activities Office.
- The term “student publication” means written material, including but not limited to brochures, newspapers, and special interest magazines edited and published by students for distribution to members of the campus community.
- The term “College property” means all property owned, leased, or on loan to Marion Technical College.
- The term “College document” means any Marion Technical College record, written, or electronic communication or form.
- The term “College premises” means all land, building used, facilities owned, leased, or controlled by Marion Technical College, and facilities under contract or mutual agreement either expressed or implied.

Academic Misconduct

If you violate the Marion Technical College Code, you may be placed on disciplinary probation or dismissed. Disorderly, dishonest, and immoral conduct is grounds for probation or immediate dismissal. In a technology that includes employment internship; good standing with the cooperating employer is expected and is essential for continuation in the program.

Harassment/Discrimination

The complete Policy #141 is available to you in the President's Office or Human Resource Office.

Marion Technical College's policy against sex discrimination and harassment is applicable to discrimination and harassment on all bases protected by law, such as race, color, national origin, sex, disability, age, military status or sexual orientation.

Marion Technical College prohibits sexual harassment of its employees and students. It is a violation of this College policy and of federal/state law for any employee or student to sexually harass another employee or student, or to condone such conduct by any employee, student, or third party. A violation of this policy may result in disciplinary action up to and including dismissal or other action as appropriate. It is everyone's responsibility to maintain a discrimination and harassment-free work and educational atmosphere.

Consensual romantic and sexual relationships between supervisors and their employees or between instructors and their adult students are strongly discouraged. Consensual romantic and sexual relationships between employees and minor students (under age 18), under Ohio Revised Code Section 2907.03 (A) (8), is a third degree felony and is strictly prohibited.

Student Grievances

A grievance is defined as a claim or assertion of a violation of a Board of Trustee policy/procedure, an administrative procedure, an administrative rule or regulation, or a State statute.

The following procedure should be followed:

1. The aggrieved student shall meet with the person against whom he or she has a complaint (within five class days). If there is no resolution to the problem, the student shall proceed with step 2.
2. The aggrieved student shall document the grievance form and submit it to the appropriate department dean or director or respective department head within five (5) class days after completion of step 1. The department head shall provide the student with a written decision within five (5) class days of receiving the grievance form.
3. Upon receipt of the written disposition, the aggrieved student shall indicate above his or her signature on the grievance form, the decision as being satisfactory or dissatisfactory. If the aggrieved student is not satisfied with the decision in step 2, he or she shall within 10 class days forward the written grievance and department head's decision to the area vice president for consideration. The area vice president shall provide the student with his or her written decision within 20 class days of receiving the grievance form.
4. Within 10 class days of receiving the written disposition from the vice president, the aggrieved student shall sign the form and indicate whether the decision is satisfactory or dissatisfactory. If the aggrieved student is dissatisfied with the decision, he or she may request a review by the President of the College. The review shall take place within 20 class days after it is requested.
5. The President shall present his or her decision to the aggrieved student. The President's decision shall be considered final and is the last step internally for due process.

These procedures apply to any grievance, which may arise in matters of general administration and matters involving rights, which directly affect the personal interests and well-being of students. All

problems involving grades are excluded from the scope of this policy. A student believing that he or she has a legitimate claim arising from the action of a person(s) acting for the College may bring a grievance under these procedures. The Vice President of Student Services shall serve as advisor/interpreter of all matters pertaining to this policy.

Complaint Procedure

These procedures apply to any grievance/complaint that may arise in matters of general administration and matters involving rights that directly affect the personal interest and well-being of students. All problems involving grades are excluded from the scope of this policy. A student believing that he or she has a legitimate claim arising from the action(s) of a person(s) acting for the College may file a grievance or complaint under these procedures. The Vice President of Student Services shall serve as advisor/interpreter of all matters pertaining to this policy.

If a student believes that he or she has a grievance or complaint, an earnest effort shall be made to settle such differences immediately in the following manner:

Step 1: Student shall meet with the person against whom he or she has a complaint (within five class days). If there is no resolution of the problem, the student shall proceed with Step 2.

Step 2: Student shall document the grievance in writing (or by completing a grievance form) and submitting it to the appropriate department dean or director or respective department head within five (5) class days after completing Step 1. The written complaint submitted by the student should include the nature of the complaint, the facts and circumstances leading to the complaint, reasons in support of the complaint, and the remedy or remedies requested. The written complaint should also note what attempts were made at informal resolutions and should include any evidence pertinent to the issues identified. The department head shall provide the student with a written decision within five (5) class days of receiving the complaint or grievance form.

Step 3: Upon receipt of the written disposition, the student shall respond in writing whether the decision is satisfactory or dissatisfactory. If the student is not satisfied with the decision given in Step 2, he or she shall within 10 class days forward the written grievance or complaint and department head's decision to the area vice president for consideration. The area vice president shall provide the student with his or her written decision within 20 class days of receiving the complaint or grievance form.

Step 4: Within 10 class days of receiving the written disposition from the vice president, the student shall sign the form and indicate whether the decision is satisfactory or dissatisfactory. If the student is dissatisfied with the decision, he or she may request a review by the President. The review shall take place within 20 class days after it is requested.

Step 5: The President shall present his or her decision to the student. The President's decision shall be considered final and is the last step internally for due process.

The Right of Appeal

The right of appeal, for any parties involved, is guaranteed by way of appeal to the Vice President of Student Services. Questions regarding this process should be directed to the Vice President of Student Services.

CLINICAL INFORMATION

DIAGNOSTIC MEDICAL SONOGRAPHER CODE OF ETHICS

PREAMBLE

The goal of this code of ethics is to promote excellence in patient care by fostering responsibility and accountability among diagnostic medical sonographers. In so doing, the integrity of the profession of diagnostic medical sonography will be maintained.

OBJECTIVES

1. To create and encourage an environment where professional and ethical issues are discussed and addressed.
2. To help the individual diagnostic medical sonographers identify ethical issues.
3. To provide guidelines for individual diagnostic medical sonographers regarding ethical behavior.

PRINCIPLES

Principle I: In order to promote patient well-being, the diagnostic medical sonographer shall:

- A. Provide information to the patient about the purpose of the sonography procedure and respond to the patient's questions and concerns.
- B. Respect the patient's autonomy and the right to refuse the procedure.
- C. Recognize the patient's individuality and provide care in a non-judgmental and non-discriminatory manner.
- D. Promote the privacy, dignity and comfort of the patient by thoroughly explaining the examination, patient positioning and implementing proper draping techniques.
- E. Maintain confidentiality of acquired patient information, and follow national patient privacy regulations as required by the "Health Insurance Portability and Accountability Act of 1996 (HIPAA)."
- F. Promote patient safety during the provision of sonography procedures and while the patient is in the care of the diagnostic medical sonographer.

Principle II: To promote the highest level of competent practice, diagnostic medical sonographers shall:

- A. Obtain appropriate diagnostic medical sonography education and clinical skills to ensure competence.
- B. Achieve and maintain specialty specific sonography credentials. Sonography credentials must be awarded by a national sonography credentialing body that is accredited by a national organization which accredits credentialing bodies, i.e., the National Commission for Certifying Agencies (NCCA); <http://www.noca.org/ncca/ncca.htm> or the International Organization for Standardization (ISO); <http://www.iso.org/iso/en/ISOOnline.frontpage>.

C. Uphold professional standards by adhering to defined technical protocols and diagnostic criteria established by peer review.

D. Acknowledge personal and legal limits, practice within the defined scope of practice, and assume responsibility for his/her actions.

E. Maintain continued competence through lifelong learning, which includes continuing education, acquisition of specialty specific credentials and recertification.

F. Perform medically indicated ultrasound studies, ordered by a licensed physician or their designated health care provider.

G. Protect patients and/or study subjects by adhering to oversight and approval of investigational procedures, including documented informed consent.

H. Refrain from the use of any substances that may alter judgment or skill and thereby compromise patient care.

I. Be accountable and participate in regular assessment and review of equipment, procedures, protocols, and results. This can be accomplished through facility accreditation.

Principle III: To promote professional integrity and public trust, the diagnostic medical sonographer shall:

A. Be truthful and promote appropriate communications with patients and colleagues.

B. Respect the rights of patients, colleagues and yourself.

C. Avoid conflicts of interest and situations that exploit others or misrepresent information.

D. Accurately represent his/her experience, education and credentialing.

E. Promote equitable access to care.

F. Collaborate with professional colleagues to create an environment that promotes communication and respect.

G. Communicate and collaborate with others to promote ethical practice.

H. Engage in ethical billing practices.

I. Engage only in legal arrangements in the medical industry.

J. Report deviations from the Code of Ethics to institutional leadership for internal sanctions, local intervention and/or criminal prosecution. The Code of Ethics can serve as a valuable tool to develop local policies and procedures.

PATIENT CONFIDENTIALITY

Students enrolled in the Sonography Program will receive an Agreement to Respect Patient Confidentiality form with their packet of information at the start of the semester. The student is required to read and sign and agree to honor and abide by the rules of patient confidentiality.

STUDENT PROGRESS ALERT

A student may be placed on Progress Alert as a formal indicator of a need for improvement in clinical performance, when the student is not meeting criteria as defined in the course syllabi. The student is made aware of specific areas in need of change and is given the opportunity to show improvement. Each individual situation is unique and is discussed with the student. During this period of Progress Alert, the student is expected to work closely with the director to improve in the specific areas of difficulty. A contract with guidelines for improvement/change will be developed, read, and signed by the director as well as the student. Student progress will be reviewed regularly with the student for the duration of the clinical experience for that semester. If the student does not show improvement and meet the terms of the Progress Alert, a grade of “D”/”unsatisfactory” will be recorded for the course.

STANDARD PRECAUTIONS

All healthcare workers to protect the patient as well as employee against communicable disease should follow standard precautions.

Standard precautions require healthcare workers to assume that all patients’ blood and moist body substances (including feces, urine, sputum, saliva, semen, vaginal secretions, wound drainage, etc.) are infectious. Protective equipment (i.e. gloves, masks, gowns, goggles) should be used by healthcare workers to prevent parenteral, mucous membrane and non-intact skin exposure to these substances.

Students will receive instruction of proper standard precaution practices in the Methods of Patient Care course.

GLOSSARY OF TERMS

COMPETENCE:

The ability to function within a realm of limited supervision and assume those duties and responsibilities as set forth in course and clinical objectives.

COMPETENCY EVALUATION:

The procedure by which a student's performance and the resulting scan is evaluated.

ULTRASOUND EXAMS/ PROCEDURES:

Series of images produced by sound waves of an anatomical region, sufficient to permit diagnostic evaluation of that region.

LAB PROCEDURE EVALUATION:

The student will perform imaging procedure on phantom or a volunteer simulated patient.

Students are permitted to demonstrate lab competency during clinical rotations after the examination is covered in class.

LABORATORY:

MTC Sonography Lab, Room 141 A.

CLINICAL PARTICIPATION:

Experience the student gains through performing scans and related duties.

CLINICAL EXPECTATIONS

1. Report to lead sonographer/clinical instructor on time at clinical site.
2. Comply with the student dress code.
3. Wear proper name tag.
4. Refrain from sitting on counter tops, floors and desks.
- 5. Cell phones are prohibited during class and clinical assignments.**
6. Keep voice tone low so patients and visitors will not be disturbed.
7. Use equipment and supplies with concern for patient safety, operator safety, and cost containment.
8. Provide a neat, clean, and orderly work area.
9. Practice Standard Precautions.
10. Maintain a good rapport with students, staff, physicians, supervisors, instructors, patients, and visitors.
11. If there is a question or concern regarding clinical assignments, call the clinical coordinator or program director.
12. Demonstrate confidentiality concerning the patient's right to privacy.
13. Students should remain in their assigned area/room during their scheduled clinical hours. Students are to assist with and perform scans during clinical time. This includes, but is not limited to, preparing patients, performing scans, and reviewing images.
14. If rooms are clean and stocked, students may review notebooks/textbooks that are related to clinical knowledge.
15. Remain current with the semester clinical competency completion schedule.
16. After competency testing, continue to produce quality scans.
17. Students are required to have clinical notebook with them during scheduled clinical hours. They must have pertinent information listed and organized in clinical notebook.
18. Clinical notebooks will be randomly checked by faculty.

STUDENT RESPONSIBILITIES

1. Learn with observation and hands-on experiences.
2. Set up the room for each scan, before the patient is brought into the room.
3. Review previous study prior to scanning, if applicable.
4. Assist with or perform all scans in the assigned room or with assigned sonographer.
5. Instruct and speak to the patient professionally and confidently.
6. Input patient demographics; choose proper transducer and exam type.
7. Assist in dismissing the patients.
8. Review the scan with the sonographer and identify pertinent anatomy.
9. Prepare the room for the next patient.
10. Ask for help or information when necessary (so the patient would not overhear).
11. Become familiar with equipment, knobology, protocols, registration, office, and other areas and policies of the hospital.
12. Participate in quality improvement activities.
13. When not scanning patients, the following activities are recommended:
 - a. Stock the room.
 - b. Clean the room and other equipment.
 - c. Update clinical notebook.
 - d. Practice scanning with another student.
 - e. Help or observe in another room.
 - f. Assist in the office or with other related activities.
 - g. Review clinical information.
 - h. Review knobology.

CLINICAL COMPETENCY OBJECTIVES

GENERAL OBJECTIVE:

1. The student collects pertinent data about the patient and about the scan (cognitive skills).

Specific Objectives: Upon successful completion, the student will:

- 1.1 Assess the requisition for correct and necessary information.
- 1.2 Research for any pertinent previous imaging performed for comparison and correlation.
- 1.3 Recognize conflicting written clinical history with the examination ordered.
- 1.4 Identify type of patient and the scans to be performed on the patient.
- 1.5 Correctly demonstrate how to enter patient and scan information into the unit.

GENERAL OBJECTIVE:

2. The student will demonstrate the proper elements of communication (affective and cognitive skills).

Specific Objectives: Upon successful completion, the student will:

- 2.1 Select the correct patient for the examination by using patient identifiers such as name and DOB.
- 2.2 Converse with the patient in an intelligent and professional manner.
- 2.3 Obtain medical history from the patient, and document on the worksheet.
- 2.4 Recognize conflicting verbal history with exam ordered.
- 2.5 Explain the procedure to the patient and family in a language the patient understands.
- 2.6 Provide patient-centered clinically effective service for all patients regardless of age, gender, disability, special needs, ethnicity or culture.
- 2.7 Demonstrate skills in assessment and evaluation of psychological and physical changes in patient's condition and carry out appropriate actions.
- 2.8 Provide continuity of care and follow-up care regarding imaging procedures.

GENERAL OBJECTIVE:

3. The student will attend to the patient's safety and comfort (affective and psychomotor skills).

Specific Objectives: Upon successful completion, the student will:

- 3.1 Determine whether the patient has been appropriately prepared for the scan, such as dressed in a gown.
- 3.2 Assist the patient to/from the ultrasound room in a safe manner.
- 3.3 Assist the patient onto ultrasound table.
- 3.4 Employ body mechanics when moving or transporting the patient.
- 3.5 Assess factors that may contraindicate the scan, such as medications, non-fasting, bladder not full, post-surgical.
- 3.6 Evaluate lab values prior to procedures.
- 3.7 Apply and practice Standard Precautions.

- 3.8 Monitor the patient's condition throughout the scan.
- 3.9 Demonstrate empathy towards the patient.
- 3.10 Insure patient privacy and modesty throughout the scan.
- 3.11 Recognize and respond appropriately to patient emergencies.
- 3.12 Apply the appropriate medical asepsis and sterile technique.

GENERAL OBJECTIVE:

- 4. The student will demonstrate proper physical facility readiness (psychomotor skills).

Specific Objectives: Upon successful completion, the student will:

- 4.1 Provide a clean, gel-free probe, table or other area for the patient.
- 4.2 Maintain an orderly work area.
- 4.3 Maintain proper inventory of necessary supplies.
- 4.4 Dispense articles to the patient as needed (emesis basin, etc.).
- 4.5 Ready the unit/probe, table and room.
- 4.6 Select appropriate transducer for the scan that has been ordered.
- 4.7 Locate and prepare table, stirrups if needed.
- 4.8 Prepare any necessary sterile trays and instruments.
- 4.9 Exercises priorities required in daily clinical practice.

GENERAL OBJECTIVE:

- 5. The student will demonstrate correct use of transducer in relationship to the scan plane used to image the appropriate anatomy (cognitive and psychomotor skills).

Specific Objectives: Upon successful completion, the student will:

- 5.1 Select the correct transducer for a given examination.
- 5.2 Select the correct anatomical preset for a given examination.
- 5.3 Use correct scan plane to image organ (longitudinal, transverse).
- 5.4 Demonstrate different scan planes and their 90 degree relationship by twisting or turning the probe.
- 5.5 Demonstrate the tilting/rocking technique while scanning.

GENERAL OBJECTIVE:

- 6. The student will manipulate ultrasound unit in the correct manner (psychomotor skills).

Specific Objectives: Upon successful completion, the student will:

- 6.1 Move the ultrasound unit in all possible directions.
- 6.2 Utilize the ultrasound machine locks to avoid damage.
- 6.3 Properly change transducers from different ports.
- 6.4 Operate all controls on the ultrasound unit.

- 6.6 Maintain the correct distance between the machine and table (proper ergonomics).
- 6.7 Report equipment malfunctions to assist with appropriate corrective actions.
- 6.8 Understand and demonstrate transferring of images to PACS (picture archiving and communications system).

GENERAL OBJECTIVE:

7. The student will position the patient using the standard methods employed for each examination (psychomotor skills).

Specific Objectives: Upon successful completion, the student will:

- 7.1 Position the patient in the manner appropriate for the anatomy being imaged.
- 7.2 Position transducer appropriately to achieve the desired scan plane.
- 7.3 Demonstrate an orderly and logical sequence in the performance of the examination.
- 7.4 Instruct patient when to hold their breath or inhale deeply to improve image.
- 7.5 Demonstrate the use of immobilization devices and positioning aids when necessary.
- 7.6 Adapt to changes according to the patient condition and cooperation.

GENERAL OBJECTIVE:

8. The student will demonstrate correct technical factor manipulation (cognitive and psychomotor skills).

Specific Objectives: Upon successful completion, the student will:

- 8.1 Select appropriate transducer for patient's body habitus.
- 8.2 Select appropriate exam setting given the patient's body habitus.
- 8.3 Select appropriate depth for organ being evaluated.
- 8.4 Utilize harmonics or compound imaging when appropriate.
- 8.5 Position focal zones at appropriate level.
- 8.6 Adjust the appropriate Gain level.

GENERAL OBJECTIVE:

9. The student will employ proper ergonomics throughout the scan (cognitive and psychomotor skills).

Specific Objectives: Upon successful completion, the student will:

- 9.1 Proper table and chair height.
- 9.2 Position the ultrasound unit to the appropriate level and angle.
- 9.3 Maintain proper spine alignment (reduce neck and trunk twisting).
- 9.4 Minimize arm abduction to less than 30 degrees.
- 9.5 Reduce transducer grip and pressure applied to patient.
- 9.6 Use proper body mechanics while moving or assisting patients.

GENERAL OBJECTIVE:

10. The student will identify each image in the correct manner (cognitive skills).

Specific Objectives: Upon successful completion, the student will:

- 10.1 Identify each scan with proper spelling of name.
- 10.2 Identify the scan with proper identifier, such as medical record number.

GENERAL OBJECTIVE:

11. The student will complete each scan in an appropriate timeframe as determined by the student's level of learning (cognitive, psychomotor, and affective skills).

GENERAL OBJECTIVE:

12. The student will assess each finished scan for adequacy (cognitive skills).

Specific Objectives: Upon successful completion, the student will:

- 12.1 Identify evaluation criteria required for ultrasound exam.
- 12.2 Describe the adequacy of each image.
- 12.3 Identify different organs and their scan plane.
- 12.4 Review optimal demonstration of anatomic region and pathology.
- 12.5 Discuss means of improving images.
- 12.6 Maintain patient confidentiality.
- 12.7 Exam completeness.

TRAJECSYS Electronic Tracking System

Students will be required to purchase Trajecsyst software. This software is able to be downloaded on any mobile device. This software is used to track clinical information. The cost of the software is \$150.00.

In order for everyone to be onboard and prepared to begin, the first step is for students to register and pay.

Please click (or copy & paste into the search bar) the registration link below to get started:

<https://www.trajecsyst.com/programs/registration.aspx?123>

Under Educational Institution, please be sure to choose:
Marion Technical College- Ohio- Diagnostic Medical Sonography

Next, Please choose New Student
You will be billed for the \$150.00 fee.

You will create your own login and password - which must be **at least 8 characters in length and contain at least 1 letter, 1 number, and 1 special character.**

After registering, you will receive an email verification. Please complete the required verification and you will be ready to go.

If you need help registering, please refer to the following link:
<https://www.trajecsyst.com/programs/help.aspx#4>

ATTAINMENT OF LABORATORY COMPETENCY

Marion Technical College Diagnostic Medical Sonography offers a well-structured clinical education plan. Didactic, laboratory, and clinical instruction is integrated to allow students to apply their acquired knowledge to the clinical setting. The intent of this plan permits the student to achieve competency in the duties of the occupation upon graduation from the program. The program is patterned after a competency-based model and is founded upon a set of behavior objectives. The objectives, which include cognitive, affective, and psychomotor skills, specify the desired behavior to be completed.

The student will receive instruction and demonstration on how to perform scans in the classroom. After classroom demonstration, the student will perform a lab exam evaluation under simulated conditions. Open labs will be assigned on scheduled dates and times. Attendance to open labs is mandatory. If a student is unable to attend an open lab, he/she must make arrangements for a make-up lab with the clinical coordinator. It is also necessary for each student to arrive with their clinical notebook. Points will be deducted from the clinical grade if the student does not have their clinical notebook in lab. Students have weekly examinations that correspond to the didactic lessons to complete during open labs.

In addition, students will complete lab practical exams that will be run accordingly: Students will be scheduled 30 minutes for the practical exam. During this time, students will be expected to set up the room and machine, greet the mock patient, obtain two identifiers and complete history, and acquire six predetermined quality diagnostic images within twenty minutes. Students must complete the practical examination with a score of a 85% , missed mandatory items will result in an automatic failure. If a student fails a practical examination, the student may repeat the practical on time after participating in an additional open lab. The student must pass a repeated practical examination with a minimum score of a 90%. Refer to Laboratory Practicum Grading and Progression Policy.

The lab simulation provides the student the opportunity to refine his or her skills before attempting to do the exam on a patient. It also provides feedback for the instructor's performance in the classroom.

A final lab practicum will be concluded at the end of each junior year semester. Students must perform a complete abdomen and breast examination in the Fall semester and a female pelvis and thyroid exam in the Spring semester. **Students must successfully pass all practical exams each semester in order to continue in the program.**

Image Analysis Criteria

1. Student must correctly identify **any** anatomy documented during examination
 - a. State the anatomy of interest and relational anatomy
 - b. Identify the image orientation
 - c. Provide correct image annotation
 - d. Describe the anatomical location using structural relationship terms (anterior/posterior to, lateral/medial/superior, etc.)

2. Student must describe **at least three** separate organs, vessels, or structures
 - a. Describe contour using sonographic terms
 - b. Differentiate echogenicity of adjacent structures
 - c. State normal dimensions

3. Student must identify any abnormalities
 - a. Sonographically detail abnormalities by specific location, size, contour, and echogenicity

4. Student must know evaluation criteria for individual images and entire case study
 - a. Is each image diagnostic; why or why not
 - b. How can the image and/or case be improved

Image Analysis Grading Scale

Excellent (4): Student is able to completely state plane and detailed anatomy of interest, all relational anatomy using proper terms, sonographically compare all echoes on image, report full description of any abnormality, and answer all questions asked *correctly and confidently without any assistance*.

Good (3): Student is able to completely state plane and detailed anatomy of interest, all relational anatomy using proper terms, sonographically compare all echoes on image, report full description of any abnormality, and answer all questions asked correctly and confidently *with two or less minor errors and very minimal assistance*.

Fair (2): Student is able to completely state plane and detailed anatomy of interest, all relational anatomy using proper terms, sonographically compare all echoes on image, report full description of any abnormality, and answer all questions asked *with three or more minor errors and much assistance, OR with one major error*.

Poor (1): Student is unable to completely state plane and detailed anatomy of interest, all relational anatomy using proper terms, sonographically compare all echoes on image, report full description of any abnormality, and answer all questions asked. *Majority of responses were incorrect*.

****Please see the rubric that follows.***

Image Analysis Rubric

Criteria	Excellent (4)	Good (3)	Fair (2)	Poor (1)
State image orientation; organs, vessels, and/or structures being examined with specific sectional anatomy				
Describe echogenicity, contour, and normal dimensions of at least three organs, vessels, and/or structures and relational anatomy				
Identify any abnormalities by location, contour, and echogenicity				
Evaluate image for optimization and determine if image is diagnostic; make improvement recommendations				

DIRECT SUPERVISION

Direct supervision is defined as the student performing an ultrasound exam in the presence of a registered sonographer. The registered sonographer must review the requisition to evaluate the condition of the patient. Upon completion of the exam, the sonographer also reviews and approves the images. During this time, the student continues to develop and refine his or her skills. Students must follow the direct supervision policy until they have successfully completed the competency evaluation. One fundamental aspect of this plan is that students can progress at their own individual paces. However, it is equally important that students demonstrate a degree of minimum progress clinically throughout the program. This is accomplished by successful completion of competencies.

INDIRECT SUPERVISION

Upon successful completion of a competency examination, a student is permitted to perform that scan under indirect supervision. Indirect supervision is defined as the presence of a qualified sonographer adjacent to the room or location where an ultrasound exam is being performed and immediate assistance is available.

CLINICAL COMPETENCY EVALUATIONS

PASS: Upon completion of the competency examination, the student will be allowed to perform that examination under indirect supervision. Attainment of a competency does not excuse the student from performing that examination in the future. The student is expected to remain proficient by repetition of performance.

NONPASS: If a student does not pass the first attempt of a scan, the student must review the procedure with the clinical coordinator, clinical instructor, or supervising sonographer before retesting.

During the second attempt of a scan, if a student does not pass, the student must review the procedure with the clinical coordinator clinical instructor, or supervising sonographer before retesting again.

If a student does not pass the third attempt of a procedure, the clinical coordinator will inform the program director. The student will be dismissed upon the discretion of the program director.

In the **EVENT** that a student fails to complete the required number of competencies for a semester, the student will receive a **two-point deduction for each competency not completed** in his or her semester lab/comp section of the clinical course grade. All required competencies must be completed in order for the student to graduate.

Every attempt to demonstrate competency of an exam must be documented by the clinical instructor or supervising sonographer. Prior to starting the exam, you must inform the clinical instructor or supervising sonographer that you are attempting to demonstrate competence. You must also state a specific organ(s), if an abdomen complete is ordered. The sonographer will then complete the competency information.

INSTRUCTION FOR COMPETENCY EVALUATIONS

A student must complete **all** 29 mandatory competencies in order to graduate. In addition, a student must select **six** of the 41 electives competencies to be completed in order to graduate. Students may attempt competency testing after they have had class instruction, successfully passed the lab simulation, and they have completed the designated exam experience.

The student will be notified of a competency failure by the clinical instructor or clinical coordinator. The clinical instructor or clinical coordinator must review the procedure with the student before another attempt at competency is made. In addition, the student must complete an additional minimum of five exams under direct supervision.

Once a student has demonstrated competency, it is required to maintain competence and continue to perform the required exams throughout the entire program. Students that do not continually demonstrate competency of previously earned examinations will be asked to repeat the competency.

The Program Director, Clinical Instructor, and/or the Clinical Coordinator reserve the right to retest students on previously tested exams.

Clinical competency will be granted when all exam requirements for the program have been documented by the registered sonographer in the clinical setting and reviewed by the Program Director or Clinical Coordinator, and the student has completed all other program requirements.

COMPETENCY REQUIREMENTS

Mandatory Patient Care

The following competencies are obtained during DMS 1010 Methods of Patient Care:

1. Monitoring level of consciousness & respiration
2. O2 monitoring
3. Standard precautions
4. Sterile technique
5. Verification of informed consent
6. Vital Signs (temperature, pulse, respiration, blood pressure)

Mandatory Equipment Care and Scanning Techniques

The following competencies are obtained during DMS 1020, DMS 1051, DMS 1030, and/or DMS 1100:

1. Clean and disinfect transducer
2. QA phantom
3. Prepare transducer for intracavity use
4. Harmonics
5. Doppler
6. M-mode
7. Color

Exam	Required 50% Practice Exams	Required 75% Practice Exams	Required Comp Normal	Required Comp Abnormal	
Mandatory: (29)					<p>Required 50% - The student must know the protocol for scanning the specific organ. The student must successfully complete 50% of the exam without assistance. The student may receive verbal and/or hands on assistance for finding the best window/approach and reminders of technical adjustments. The student must show forward progression for each subsequent 50% practice exam.</p> <p>Required 75% - The student must know the protocol for scanning the specific organ. The student must successfully complete 75% of the exam without assistance. Minimal reminders for fine tuning or technical factor adjustments may be given unless a very infrequent exam is being performed.</p> <p>Competency - In order to receive an exam competency, the student is not permitted to receive any verbal and/or hands on assistance, unless it is an infrequent or elective exam. It is expected that the student is scanning at an independent level for all normal exams and minimal assistance is needed for abnormal exams with pathology. Please note that a student MUST continue to perform at a competent level at the current site from which the competency is earned AND from each subsequent clinical site assignment.</p>
Aorta	2	2	*	*	
Bladder	2	2	*	*	
Biliary System	3	3	1	1	
IVC	2	2	*	*	
Liver	3	3	1	1	
Pancreas	3	3	*	*	
Pelvic TA Uterus**	3	3	*	*	
Pelvic TA Ov/Adn***	2	2	*	*	
Pelvic TV Uterus**	3	3	1	1	
Pelvic TV Ov/Adn***	3	3	1	1	
Renal	3	3	1	1	
Scrotal	3	3	1	1	
Spleen	2	2	*	*	
Thyroid	3	3	1	1	
Pleural Space	2	2	*	*	
Sonographic Guided Procedure****	2	2	*	*	Competency Normal - No pathological process
OB 1st Trimester*****	3	3	*	*	Competency Abnormal - Pathological process
OB 2nd Trimester*****	3	3	*	*	<p>Note-A competency may be revoked if the student is not scanning at a competent level. The student must continue to competently scan organs for which competencies have been earned at each clinical site and during each clinical semester. The Clinical Coordinator and/or Program Director make the final determination if a competency is maintained or revoked.</p> <p>*Select a normal or abnormal exam.</p>
OB 2nd/3rd Trimester Fetal Heart*****	3	3	*	*	
OB 3rd Trimester*****	2	2	*	*	
Fetal Biophysical Profile*****	1	1	*	*	
Maternal Cervical Length	1	1	*	*	
Electives: (6)					Required competencies per semester:
1.		1	*	*	8 – second year summer semester
2.		1	*	*	14 – second year fall semester
3.		1	*	*	13 – second year spring semester
4.		1	*	*	Please see attached sheet for explanations of procedures with two or more (*)
5.		1	*	*	
6.		1	*	*	

Pelvic TA Uterus**	**Transabdominal Uterus includes the following images: Vagina/Cervix/Uterus; Posterior and anterior cul-de-sac
Pelvic TA Ov/Adn***	***Transabdominal OV/Adn includes the following images: Adnexa, including ovaries and fallopian tubes
Pelvic TV Uterus**	**Transvaginal Uterus includes the following images: Vagina/Cervix/Uterus; Posterior and anterior cul-de-sac
Pelvic TV Ov/Adn***	***Transvaginal OV/Adn includes the following images: Adnexa, including ovaries and fallopian tubes
Sonographic Guided Procedure****	****Sonographic Guided Procedure includes one of the following: Biopsy, Thoracentesis, Paracentesis, Fine Needle Aspiration, Needle Localization, Thrombin Injection; which must be performed with US guidance
OB 1st Trimester*****	*****OB 1st Trimester includes the following images: Gestational sac, Embryonic pole, Yolk sac, Fetal cardiac activity, Placenta, Uterus, Cervix, Adnexa, Pelvic spaces
OB 2nd Trimester*****	*****OB 2nd Trimester includes the following images: Intracranial anatomy, Face, Thoracic cavity, Abdomen, Abdominal wall, Spine, Extremities, Amniotic fluid, Placenta, Umbilical Cord, Maternal adnexa
OB 2nd/3rd Trimester Fetal Heart*****	***** 2nd Trimester Fetal Heart comp includes: Fetal Cardiac Activity, Position and Size, 4 chamber view, LVOT, RVOT, 3 Vessel View, & 3 Vessel Trachea View
OB 3rd Trimester*****	*****OB 3rd Trimester includes the following images: Intracranial anatomy, Face, Thoracic cavity, Abdomen, Abdominal wall, Spine, Extremities, Amniotic fluid, Placenta, Umbilical Cord, Maternal adnexa
Fetal Biophysical Profile*****	*****Fetal Biophysical Profile includes the following images: Body movement, Muscle tone, Breathing movement and Amniotic fluid volume.

Elective Exam Options	Required 50% Practice Exams	Required 75% Practice Exams	Required Comp Normal	Required Comp Abnormal	Elective Exam Options	Required 50% Practice Exams	Required 75% Practice Exams	Required Comp Normal	Required Comp Abnormal
Procedures					Gynecology				
Aspiration		1	*	*	Sonohysterogram		1	*	*
Biopsy		1	*	*	Obstetrics				
Needle Localization		1	*	*	Amniocentesis		1	*	*
Thrombin Injection		1	*	*	Nuchal Translucency		1	*	*
Parcentesis		1	*	*	AFI		1		
Thoracentesis		1	*	*					
					Pediatric/ Neonatal Studies				
Abdomen					Head		1	*	*
Adrenals		1	*	*	Hips		1	*	*
Appendix		1	*	*	Intussusception		1	*	*
FAST or Ascites		1	*	*	Pylorus		1	*	*
GI tract		1	*	*	Spine		1	*	*
Hernia		1	*	*	Superficial Structures				
Liver Surface		1	*	*	Abdominal wall		1	*	*
Transrectal Prostate		1	*	*	Foreign body		1	*	*
Vascular Studies					Lymph nodes		1	*	*
ABI		1	*	*	Hernia		1	*	*
Arterial extremity		1	*	*	Musculoskeletal		1	*	*
Carotid		1	*	*	Superficial masses		1	*	*
Hepatic		1	*	*					
Main Portal Vein		1	*	*	Cardiac Studies				
Mesenteric		1	*	*	Echocardiogram	1	2	*	*
Post catheter complication		1	*	*	TEE	1	2	*	*
Renal Doppler (Renal Artery Stenosis)		1	*	*	Miscellaneous				
Venous extremity		1	*	*	Transplant	1	2	*	*
Venous mapping		1	*	*					

Clinical Information Guidelines for Competencies

First Semester	Second Semester	First Clinical Site	Second Clinical Site	Third Clinical Site
Fall Junior Year	Spring Junior Year	Summer Senior Year	Fall Senior Year	Spring Senior Year
Obtaining lab competency <i>only</i>	Obtaining lab competency <i>only</i>	Recording clinical experience. Obtaining clinical competencies in the following: Aorta Bladder Biliary System IVC Kidneys Liver Pancreas Spleen Pleural Space OB 1 st trimester OB 2 nd trimester OB 2 nd / 3 rd Fetal Heart OB 3 rd trimester Biophysical Profile Maternal Cervical Length Scrotum Thyroid Transabdominal adnexa/ovaries Transabdominal uterus Transvaginal adnexa/uterus Transvaginal ovaries <i>Students may also demonstrate lab competency in the clinical setting during this and future rotations</i>	Obtaining clinical competencies	Obtaining clinical competencies
		<i>Eight</i> clinical competencies required this semester	<i>Fourteen</i> clinical competencies required this semester	<i>Thirteen</i> clinical competencies required this semester

Clinical Competency Evaluation

Clinical instructors and registered supervising sonographers may document that a student has performed any required examination according to the site specific protocol and additionally meeting all minimal program requirements by completing the proper item in the student's device. Providing a signature for an examination verifies the student performed the examination at a competent level.

Preparation:

1. Readied exam room
2. Arranged equipment and supplies
3. Assessed requisition
4. Collected previous history/prior exam information

Patient Care:

5. Obtained two patient identifiers
6. Acquired patient history
7. Explained procedure
8. Provided proper patient instructions

Performance:

9. Selected correct transducer and exam preset
10. Annotated properly
11. Correct measurements/ Caliper Placements were applicable
12. Correct depth
13. Correct gain
14. Correct focus
15. Doppler techniques where applicable
16. Performed a systematic and thorough evaluation
17. Optimized images throughout exam
18. Displayed critical thinking
19. Adapted to meet patient needs
20. Assisted patient upon exam completion
21. Followed Standard Precautions
22. Completed exam paperwork
23. Adheres to Principles of ALARA to limit patient exposure during exam
24. Ergonomics
25. Finalize examination for permanent storage
26. Documents findings for Interpreting Physician
27. Follows appropriate process for documenting critical findings

Professionalism:

28. Maintained patient confidentiality/privacy
29. Demonstrated a positive attitude
30. Receptive to feedback
31. Exhibited appropriate interaction
32. Demonstrates appropriate verbal and written communication skills

Image Analysis:

33. Stated image orientation
34. Identified proper anatomy
35. Differentiated echogenicity
36. Indicated normal dimensions
37. Identified and detailed any abnormalities
38. Evaluated for image optimization needs
39. Recommended improvements

CLINICAL ROTATION

The following is a list of the clinical rotation assignments. The Clinical Coordinator, student, and clinical faculty members will work toward the completion of rotations. The Program Director has the authority to make changes as necessary.

Students are scheduled for a 24 hour week. A clinical day will be eight hours. Clinical days are typically three days a week. Those days may be on Mondays, Tuesdays, Wednesdays, Thursdays, Fridays, or weekends depending on the needs of the clinical site and/or the student. The scheduled hours may be first or second shift. Summer Semester clinical days will be three days a week. Days over five hours include a 30 minute lunch and two 15 minute breaks.

Junior Year

Fall Semester M, T, W, R, F	Scan Lab 15 weeks	60 hours
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Spring Semester M, T, W, R, F	Scan Lab 15 weeks	90 hours
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TOTAL SONOGRAPHY HOURS JUNIOR YEAR ***150 hours**

Senior Year

**Summer Semester M, T, W, R, F, or weekend	Clinical 8 weeks	192 hours
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Fall Semester M, T, W, R, F, or weekend	Clinical 15 weeks	360 hours
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Spring Semester M, T, W, R, F, or weekend	Clinical 15 weeks	360 hours
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TOTAL SONOGRAPHY HOURS SENIOR YEAR ***912 hours**

* The clinical numbers for rotations are approximate.

** Summer schedule may change based on number of students enrolled.

CLINICAL SITES

Avita Bucyrus Community Hospital, 629 N Sandusky Ave., Bucyrus, Ohio 44820
Avita Galion Community Hospital, 269 Portland Way S., Galion, Ohio 44833
Avita Ontario Hospital, 715 Richland Mall, Mansfield, Ohio 44906
Central Ohio Primary Care, 6096 E. Main St. Ste. #109, Reynoldsburg, Ohio 43068
Dublin Methodist Hospital, 7500 Hospital Drive, Dublin, Oh 43016
Grady Memorial Hospital. 561 W. Central Ave., Delaware, Oh 43015
Marion Medical Campus, 1050 Delaware Ave., Marion, Ohio 43302
Marion General Hospital, 1000 Mc Kinley Park Dr., Marion, Ohio 43302
Marion Women's Health Center. 960 S. Prospect St., Marion, Oh 43302
Mary Rutan Hospital, 205 Palmer Ave., Bellefontaine, Ohio 43311
MedCentral Mansfield Hospital, 335 Glessner Ave., Mansfield, OH 44903
Memorial Hospital of Union County, 500 London Ave., Marysville, Ohio 43040
Mercy Health Findlay OB/Gyn, 100 E. Main Cross St., STE. 201, Findlay, Ohio 45840
Morrow County Hospital, 651 W. Marion Rd., Mt. Gilead, Ohio 43338
Ohio Health OB/Gyn Physicians, 460 W. Central Ave. Ste # D, Delaware, Ohio 43015
Ohio Health Maternal Fetal Medicine, 3535 Olentangy River Rd., Columbus, OH 43214
Ohio State Wexner Medical Centre, 6515 Pullman Dr., Lewis Center, OH 43035
Riverside Methodist Hospital, 3535 Olentangy River Rd., Columbus, OH 43214
Westerville Medical Campus, 300 Polaris Pkwy, Westerville, Ohio 43082

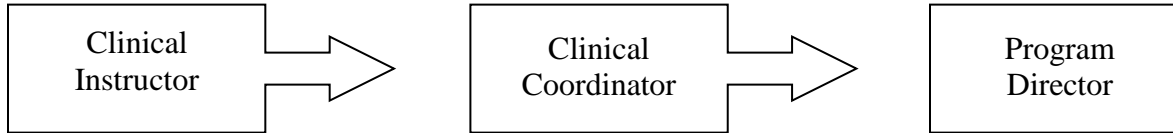
***It is important to realize that you may be traveling a substantial distance to your assigned clinical site.**

CLINICAL INSTRUCTORS

Avita Ontario Hospital	JoAnna O'Leary
Avita Bucyrus Community Hospital	Megan Colleen
Avita Galion Community Hospital	Mary Ramey
Central Ohio Primary Care	Melissa Coplan
Dublin Methodist Hospital	Rebecca Cavanaugh
Grady Memorial Hospital	William Vornholt
Marion Medical Campus	Charlee Assenheimer
Marion General Hospital	Vanessa Lambert
Marion Women's Health Center	Logan Carey
Mary Rutan Hospital	Melissa Ward
MedCentral Mansfield	Emily Isengard
Memorial Hospital of Union County	Jessica Titus
Mercy Health Findlay OB/Gyn	Bethany Green
Morrow County Hospital	Trisha Shipman
Ohio Health OB/Gyn Physicians	Caitlin McClung
Ohio Health Maternal Fetal Medicine	Sarah Courtney
Ohio State Wexner Medical Centre	Sean Dugan
Riverside Methodist Hospital	Amy Bidlack/Ashley Streby
Westerville Medical Campus	Shay Corder

CHAIN OF COMMAND

If you experience a troublesome situation in a clinical site, please use the following chain of command for resolving the conflict.



CLINICAL GRADE DESCRIPTION

The following categories will comprise a student's clinical grade for a semester and will be outlined on the syllabus for their class:

1. **Semester Evaluation**

Only the rated categories found on the semester evaluation form will be used to calculate a student's total points in the category. This is completed by the Clinical Coordinator.

2. **Lab Practicum and Clinical Competency:**

Junior Year:

Mandatory successful completion of midterm and final practicums.

Senior Year:

Students begin senior year with 25 points.

Two points will be deducted for each required competency that is not obtained per semester.

Deductions will be carried over for entire senior year.

3. **Professionalism:**

The total points for the category are 20. Items within this category include following dress code, demonstrating appropriate interactions, being prepared for class/clinicals, maintaining a positive attitude, etc.

Each infraction of policies and procedures outlined in the School of Sonography Student Handbook or Marion Technical College policies and procedures will receive a deduction of one point from this category. Appropriate interactions involve all people the student comes into contact with in both clinical and didactic courses. Students are expected to conduct themselves in a professional manner with faculty/ instructors/patients in class and in the clinical setting. Questions and concerns are addressed with appropriate personnel in a constructive manner. Inappropriate comments, statements and gossip will not be tolerated and will have consequences, and points will be deducted from this category.

The points in this category will reset each semester.

4. **Clinical test: See syllabus**

5. **Forms/assignments:**

Late work will not be accepted. Student will not receive points for late work.

6. **Clinical Instructor/Staff Evaluations:**

If the student is attending clinical, there will be two evaluations completed each semester by the Clinical Instructor. Additionally, an evaluation will be completed after each OB rotation and that score will be factored into the mid-term evaluation grade for the clinical course. Each evaluation is worth up to 48 points.

7. **Attendance:**

Each absence and tardy will receive a deduction of one point from this category. This category starts over each semester. Points may also be deducted if student is absent for Image Analysis Class or student meeting.

8. **Clinical Notebook:**

Each time notebook is checked and is not up-to-date, or each time student does not have notebook in lab or in clinical, one point will be deducted from this category. This category starts over each semester.

IMPORTANT FORMS, POLICIES AND PROCEDURES



*Marion Technical College
Diagnostic Medical Sonography
Program*
**Voluntary Consent
for Sonography Lab Scanning**

Instructions: Please read this form carefully. You will have an opportunity for discussion with a credentialed sonographer regarding the biological effects of ultrasound at diagnostic levels. Please provide a signature at the end of this form if you choose to participate as a mock patient.

Name _____ Date _____

Phone _____ Email _____

I have been informed of the biological effects possible by exposure to diagnostic ultrasound known to date. This includes:

- possible heating of tissue.
- possible break down at cellular level.

While the above effects could occur in any subject, the primary concern is for students in the first 10 weeks of gestation—the embryonic period.

I understand that all attempts will be made to minimize my exposure based on ALARA standards (As Low as Reasonable Achievable). Please visit this website for additional information about sonography and its safety. <http://www.aium.org/patient/aboutExam/obstetrics.asp>

I understand that during the scanning procedure other students, male or female, may be in attendance and directly observing my procedure, and that my skin will be exposed. My privacy and modesty will be maintained as much as reasonably possible considering the type of exam performed.

I understand that direct supervision may be provided by program faculty who are credentialed sonographers and the exam performed is for student practice only. No diagnostic information will be deemed from the scan. I acknowledge that program faculty are not trained medical physicians and will not be able to determine a problem or discuss findings with me. **In the event of any abnormal findings, faculty will refer me to my physician.** This scanning session is for educational purposes only and will not be evaluated by a trained medical physician. Volunteers are made aware of safety, infection control, as well the exam that will be performed.

By signing this consent form, I agree to release the Diagnostic Medical Sonography Program and Marion Technical College, and its faculty members and instructors, for any liability, loss, damage, suit or judgment that may occur as a result of my participation in the Diagnostic Medical Sonography Program.

****DMS Students ONLY** By checking and initialing the following box, it indicates my desire to not participate as a mock patient during sonography labs. My decision to not participate will not adversely affect my grade, as a sonography student.** _____

I understand I have the right to withdraw consent to be scanned at any time and my choice to do so will not adversely affect my grade as a sonography student. _____

Signature _____ Date _____

Witness Signature _____ Date _____

**MARION TECHNICAL COLLEGE
HEALTH**

Date Issued: 09/21

SUBJECT: Use of Human Volunteers/Non-Program Volunteers

POLICY:

Diagnostic Medical Sonography commonly use student/non-program volunteers during hands on lab scanning to practice sonography procedures and scanning technique. The volunteers provide a valuable resource tool for the improvement of clinical scanning skills which simulates the clinical environment. All scan lab volunteers are required to sign a consent form prior to scanning. Volunteers are made aware of incidental finding policy, ALARA, safety, infection control, as well the exam that will be performed.

ACKNOWLEDGEMENT:

Director's Signature

Date

I attest that I have reviewed this policy:

Student's Signature

Date

V/HD/Third Party Requirement Acknowledgement
September 9, 2021

Marion Technical College

Diagnostic Medical Sonography

Program Competency Requirements

Student:

c/o

Last Revised:

Mandatory Patient Care	Date or Course Completed
CPR	DMS 1010
Monitoring level of consciousness & respiration	DMS 1010
O ₂ monitoring	DMS 1010
Standard precautions	DMS 1010
Verification of informed consent	DMS 1010
Vital Signs (temperature, pulse, respiration, blood pressure)	DMS 1010
Mandatory Equipment Care	Date or Course Completed
Clean and disinfect transducer	DMS 1020
QA Phantom	DMS 1051
Prepare transducer for intracavitary use	DMS 1201
Mandatory Scanning Techniques	Date or Course Completed
Harmonics	DMS 1051/
Doppler	DMS 1051/
M-mode	DMS 1051/
Color	DMS 1051/

Mandatory Clinical Sonographic Examinations	LAB Date Completed	Summer		Fall		Spring	
		Normal	Abnrml	Normal	Abnrml	Normal	Abnrml
Abdomen							
Liver							
Biliary Tree							
Pancreas							
Spleen							
Kidneys							
Bladder							
IVC							
Aorta							
Pleural Space							
Sonographic Guided Procedure							
Superficial Structures		Normal	Abnrml	Normal	Abnrml	Normal	Abnrml
Thyroid							
Scrotum/ Testis							
Gynecology Transabdominal		Normal	Abnrml	Normal	Abnrml	Normal	Abnrml
Uterus (Pelvic)							
Adnexa (Incl. Ovaries)							
Gynecology Transvaginal		Normal	Abnrml	Normal	Abnrml	Normal	Abnrml
Uterus (Pelvic)							
Adnexa (Incl. Ovaries)							
Obstetrics		Normal	Abnrml	Normal	Abnrml	Normal	Abnrml
1st Trimester							
2nd Trimester							
2nd/3rd Trimester Fetal Heart							

3rd Trimester							
Maternal Cervical Length							
Biophysical Profile							

Elective Clinical Sonographic Examinations					
Abdomen					
Superficial Structures					
Obstetrics					
Elective Clinical Sonographic Examinations					

Vascular Studies					
Pediatric or Neonatal Studies					
Interventional Procedures					
Miscellaneous					
Clinical Coordinator:				Date:	
Program Director:				Date:	
Student :				Date:	

DMS Program Requirements					
Exam	Required 50% Practice Exams	Required 75% Practice Exams	Required Comp Normal	Required Comp Abnormal	
Mandatory: (29)					<p>Required 50% - The student must know the protocol for scanning the specific organ. The student must successfully complete 50% of the exam without assistance. The student may receive verbal and/or hands on assistance for finding the best window/approach and reminders of technical adjustments. The student must show forward progression for each subsequent 50% practice exam.</p> <p>Required 75% - The student must know the protocol for scanning the specific organ. The student must successfully complete 75% of the exam without assistance. Minimal reminders for fine tuning or technical factor adjustments may be given unless a very infrequent exam is being performed.</p> <p>Competency - In order to receive an exam competency, the student is not permitted to receive any verbal and/or hands on assistance, unless it is an infrequent or elective exam. It is expected that the student is scanning at an independent level for all normal exams and minimal assistance is needed for abnormal exams with pathology. Please note that a student MUST continue to perform at a competent level at the current site from which the competency is earned AND from each subsequent clinical site assignment.</p>
Aorta	2	2	*	*	
Bladder	2	2	*	*	
Biliary System	3	3	1	1	
IVC	2	2	*	*	
Liver	3	3	1	1	
Pancreas	3	3	*	*	
Pelvic TA Uterus**	3	3	*	*	
Pelvic TA Ov/Adn***	2	2	*	*	
Pelvic TV Uterus**	3	3	1	1	
Pelvic TV Ov/Adn***	3	3	1	1	
Renal	3	3	1	1	
Scrotal	3	3	1	1	
Spleen	2	2	*	*	
Thyroid	3	3	1	1	
Pleural Space	2	2	*	*	
Sonographic Guided Procedure****	2	2	*	*	Competency Normal - No pathological process
OB 1st Trimester*****	3	3	*	*	Competency Abnormal - Pathological process
OB 2nd Trimester*****	3	3	*	*	<p>Note-A competency may be revoked if the student is not scanning at a competent level. The student must continue to competently scan organs for which competencies have been earned at each clinical site and during each clinical semester. The Clinical Coordinator and/or Program Director make the final determination if a competency is maintained or revoked.</p>
OB 2nd/3rd Trimester Fetal	3	3	*	*	
OB 3rd Trimester*****	2	2	*	*	
Fetal Biophysical Profile*****	1	1	*	*	
Maternal Cervical Length	1	1	*	*	
Electives: (6)					Required competencies per semester:
1.		1	*	*	8 – second year summer semester
2.		1	*	*	14 – second year fall semester
3.		1	*	*	13 – second year spring semester
4.		1	*	*	Please see attached sheet for explanations of procedures with two or more (*)
5.		1	*	*	
6.		1	*	*	

Pelvic TA Uterus**	**Transabdominal Uterus includes the following images: Vagina/Cervix/Uterus; Posterior and anterior cul-de-sac
Pelvic TA Ov/Adn***	***Transabdominal OV/Adn includes the following images: Adnexa, including ovaries and fallopian tubes
Pelvic TV Uterus**	**Transvaginal Uterus includes the following images: Vagina/Cervix/Uterus; Posterior and anterior cul-de-sac
Pelvic TV Ov/Adn***	***Transvaginal OV/Adn includes the following images: Adnexa, including ovaries and fallopian tubes
Sonographic Guided Procedure****	****Sonographic Guided Procedure includes one of the following: Biopsy, Thoracentesis, Paracentesis, Fine Needle Aspiration, Needle Localization, Thrombin Injection; which must be performed with US guidance
OB 1st Trimester*****	*****OB 1st Trimester includes the following images: Gestational sac, Embryonic pole, Yolk sac, Fetal cardiac activity, Placenta, Uterus, Cervix, Adnexa, Pelvic spaces
OB 2nd Trimester*****	*****OB 2nd Trimester includes the following images: Intracranial anatomy, Face, Thoracic cavity, Abdomen, Abdominal wall, Spine, Extremities, Amniotic fluid, Placenta, Umbilical Cord, Maternal adnexa
OB 2nd/3rd Trimester Fetal Heart*****	***** 2nd Trimester Fetal Heart comp includes: Fetal Cardiac Activity, Position and Size, 4 chamber view, LVOT, RVOT, 3 Vessel View, & 3 Vessel Trachea View
OB 3rd Trimester*****	*****OB 3rd Trimester includes the following images: Intracranial anatomy, Face, Thoracic cavity, Abdomen, Abdominal wall, Spine, Extremities, Amniotic fluid, Placenta, Umbilical Cord, Maternal adnexa
Fetal Biophysical Profile*****	*****Fetal Biophysical Profile includes the following images: Body movement, Muscle tone, Breathing movement and Amniotic fluid volume.

Elective Exam Options	Required 50% Practice Exams	Required 75% Practice Exams	Required Comp Normal	Required Comp Abnormal	Elective Exam Options	Required 50% Practice Exams	Required 75% Practice Exams	Required Comp Normal	Required Comp Abnormal
Procedures					Gynecology				
Aspiration		1	*	*	Sonohysterogram		1	*	*
Biopsy		1	*	*	Obstetrics				
Needle Localization		1	*	*	Amniocentesis		1	*	*
Thrombin Injection		1	*	*	Nuchal Translucency		1	*	*
Parcentesis		1	*	*	AFI		1		
Thoracentesis		1	*	*					
					Pediatric/ Neonatal Studies				
Abdomen					Head		1	*	*
Adrenals		1	*	*	Hips		1	*	*
Appendix		1	*	*	Intussusception		1	*	*
FAST or Ascites		1	*	*	Pylorus		1	*	*
GI tract		1	*	*	Spine		1	*	*
Hernia		1	*	*	Superficial Structures				
Liver Surface		1	*	*	Breast		1	*	*
Transrectal Prostate		1	*	*	Abdominal wall		1	*	*
Vascular Studies					Foreign body		1	*	*
ABI		1	*	*	Lymph nodes		1	*	*
Arterial extremity		1	*	*	Hernia		1	*	*
Carotid		1	*	*	Musculoskeletal		1	*	*
Hepatic		1	*	*	Superficial masses				
Main Portal Vein		1	*	*	Cardiac Studies				
Mesenteric		1	*	*	Echocardiogram	1	2	*	*
Post catheter complication		1	*	*	TEE	1	2	*	*
Renal Doppler (Renal Artery Stenosis)		1	*	*	Miscellaneous				
Venous extremity		1	*	*	Transplant	1	2	*	*
Venous mapping		1	*	*					

CLINICAL I FINAL PRACTICAL EVALUATION

STUDENT: _____

LOCATION: _____

EVALUATOR: _____

MARION TECHNICAL COLLEGE
DIAGNOSTIC MEDICAL SONOGRAPHY

SCORING SYSTEM FOR THE STUDENT EVALUATION:

4.0—This attribute is done 100% of the time with no room for improvement for the level at which the student is at in the program. Student would rarely need any reminders. Words used to describe this attribute include: **Exemplary** or **Distinguished**. Please provide several examples to justify the exemplary or distinguished score.

3.8—This attribute is done 95% of the time with very minimal room for improvement for the level at which student is at in the program. Students would need no more than two reminders every month. Words used to describe performance of this attribute include: **Accomplished** and **Experienced**. Please provide examples of this accomplished or experienced scoring justification.

3.7—This attribute is done 93% of the time with little room for improvement for the level at which the student is at in the program. Students would need no more than two reminders every month on a couple categories. Words used to describe this attribute include: **Frequently** and **More Than Expected**. Give an example of when student did more than expected.

3.5-3.4—This attribute is done 88%-85% of the time. Student needs weekly reminders on advanced techniques. This is good and acceptable for level that student is in the program. Words to describe this attribute would be: **Most of the Time** and **Doing What is Expected**.

3.2-3.1—This attribute is done 80%-78% of the time. This is minimally acceptable for the level that the student is in the program with improvements recommended to accomplish more than minimal expectations of this attribute. Student needs weekly or daily reminders on advanced and basic techniques. Words to describe this scoring of an attribute would be: **Sometimes**, **Depends on the Situation**, **Much Improvement Needed** prior to completion of program. Examples would be appreciated on how student may improve this attribute.

3.0-2.8—This attribute is done 75%-70% of the time. This is poor performance of this attribute and improvement must be accomplished prior to graduating as a sonographer. Student requires continual reminders and often on the same topic. Words to describe justification of this attribute include: **Rarely**, **Only When Prompted**, **Does Not Seem to Know What is Expected**. Please provide examples of what improvement is expected to improve this attribute.

All categories denoted with the () are MANDATORY PASS categories for evaluation. Students MUST earn a score of 3.1 or higher in ALL of these categories in order to receive a passing score on this evaluation. Students who score lower than 3.1 in one or more of these categories will receive a failing score for this evaluation.

Performance/Personal Characteristics	Excellent		Very Good	Good		Adequate		Inadequate		Comments Any comments are appreciated but, please provide specific examples for: 1. Attributes where student received scores of Excellent or Very Good (4.0, 3.8, 3.7), 2. Attributes where student received scores of Inadequate (3.0, 2.8)
	4.0 100%	3.8 95%	3.7 93%	3.5 88%	3.4 85%	3.2 80%	3.1 78%	3.0 75%	2.8 70%	
1. PREPARATION (standard precautions, equipment care, transducer selection) ASSESSMENT (Introductions, explanations) & DEPENDABILITY : Is prepared for and completes practical within allotted time period. Prepares room, machine and properly prepares patients with necessary towels and positioning.	4.0	3.8	3.7	3.5	3.4	3.2	3.1	3.0	2.8	
2. PATIENT CARE, COMMUNICATION & PROFESSIONALISM : Introduces self properly and as a student. Obtains patient identifiers as required. Acquires detailed patient history. Provides explanation of procedure, answers questions and addresses concerns. Properly instructs patient during procedure. Demonstrates compassion and is attentive to patient needs. Shows no bias or discrimination. Maintains patient privacy and follows HIPAA. Displays proper interpersonal skills with patient. Conversation is of relevant topic and in an appropriate area. Displays respect and professionalism during interaction, including adherence to the professional code of ethics together with diversity and inclusion. Maintains positive attitude towards staff, other students, and policies of clinical site. Demonstrates appropriate oral and written communication skills as required. Receptive to suggestions and feedback. Demonstrates retention of previously learned material.	4.0	3.8	3.7	3.5	3.4	3.2	3.1	3.0	2.8	
3. **CORRECT LABELING	4.0	3.8	3.7	3.5	3.4	3.2	3.1	3.0	2.8	
4. **OPTIMIZATION; CORRECT DEPTH, FOCAL ZONE, OVER-ALL GAIN, TGC : Uses correct technical settings and proper annotations. Adjusts technical factors throughout exam to reduce artifacts and enhance image quality.	4.0	3.8	3.7	3.5	3.4	3.2	3.1	3.0	2.8	
5. **BEST CLEAR CAPTURE OF IMAGE QUALITY (NOT BLURRY)	4.0	3.8	3.7	3.5	3.4	3.2	3.1	3.0	2.8	
6. **CALIPER PLACEMENT : Accurately places calipers to measure largest dimensions of structure or pathology imaged.	4.0	3.8	3.7	3.5	3.4	3.2	3.1	3.0	2.8	
7. **POSITIONING : Utilizes appropriate patient position/ scan window in order to obtain highest quality image possible.	4.0	3.8	3.7	3.5	3.4	3.2	3.1	3.0	2.8	
8. **TRANSDUCER MANIPULATION : Uses correct technique to manipulate transducer. Demonstrates longest/shortest axis of structure with proper "heel/toe", "rocking", "angling" techniques.	4.0	3.8	3.7	3.5	3.4	3.2	3.1	3.0	2.8	
9. **IMAGE ACQUISITION : Accurately documents anatomy following a systematic and thorough protocol. Finalizes exam for permanent storage. Adheres to the principles of ALARA to minimize patient exposure throughout exam.	4.0	3.8	3.7	3.5	3.4	3.2	3.1	3.0	2.8	
10. **APPROPRIATE SCAN-THROUGH	4.0	3.8	3.7	3.5	3.4	3.2	3.1	3.0	2.8	
11. CRITICAL THINKING & ADAPTABILITY : Demonstrates critical thinking skills to enhance image quality and patient experience. Adapts to stressful or difficult situations without obvious display and fulfills duties without interference. Documents sonographic findings for interpreting physician. Follows appropriate process for documenting critical findings.	4.0	3.8	3.7	3.5	3.4	3.2	3.1	3.0	2.8	
12. ERGONOMICS : Assists patient using proper body mechanics. Attentive to body position and adjusts to reduce or eliminate body stress and prevent injury.	4.0	3.8	3.7	3.5	3.4	3.2	3.1	3.0	2.8	

Please provide an area for improvement:

EVALUATOR: _____

DATE: _____

TOTAL POINTS AND PERCENTAGE: _____

STUDENT'S SIGNATURE: _____

CLINICAL INSTRUCTOR EVALUATION

STUDENT: _____

LOCATION: _____

CLINICAL COORDINATOR: _____

MARION TECHNICAL COLLEGE
DIAGNOSTIC MEDICAL SONOGRAPHY
Fax 740-725-4007

SCORING SYSTEM FOR THE STUDENT EVALUATION:

4.0—This attribute is done **100%** of the time with no room for improvement for the level at which the student is at in the program. Student would rarely need any reminders. Words used to describe this attribute include: **Exemplary** or **Distinguished**. Please provide several examples to justify the exemplary or distinguished score.

3.8—This attribute is done **95%** of the time with very minimal room for improvement for the level at which student is at in the program. Students would need no more than two reminders every month. Words used to describe performance of this attribute include: **Accomplished** and **Experienced**. Please provide examples of this accomplished or experienced scoring justification.

3.7—This attribute is done **93%** of the time with little room for improvement for the level at which the student is at in the program. Students would need no more than two reminders every month on a couple categories. Words used to describe this attribute include: **Frequently** and **More Than Expected**. Give an example of when student did more than expected.

3.5-3.4—This attribute is done **88%-85%** of the time. Student needs weekly reminders on advanced techniques. This is good and acceptable for level that student is in the program. Words to describe this attribute would be: **Most of the Time** and **Doing What is Expected**.

3.2-3.1—This attribute is done **80%-78%** of the time. This is minimally acceptable for the level that the student is in the program with improvements recommended to accomplish more than minimal expectations of this attribute. Student needs weekly or daily reminders on advanced and basic techniques. Words to describe this scoring of an attribute would be: **Sometimes, Depends on the Situation, Much Improvement Needed** prior to completion of program. Examples would be appreciated on how student may improve this attribute.

3.0-2.8—This attribute is done **75%-70%** of the time. This is poor performance of this attribute and improvement must be accomplished prior to graduating as a sonographer. Student requires continual reminders and often on the same topic. Words to describe justification of this attribute include: **Rarely, Only When Prompted, Does Not Seem to Know What is Expected**. Please provide examples of what improvement is expected to improve this attribute.

Performance/Personal Characteristics	Excellent 4.0 3.8 100% 95%	Very Good 3.7 93%	Good 3.5 3.4 88% 85%	Adequate 3.2 3.1 80% 78%	Inadequate 3.0 2.8 75% 70%	Comments: Any comments are appreciated but, please provide specific examples for: 1. Attributes where student received scores of Excellent or Very Good (4.0, 3.8, 3.7), 2. Attributes where student received scores of Inadequate (3.0, 2.8)
1. PREPARATION (standard precautions, equipment care, transducer selection) ASSESSMENT (Introductions, explanations) & DEPENDABILITY : Is prepared for and completes practical within allotted time period. Prepares room, machine and properly prepares patient with necessary towels and positioning.	4.0 3.8	3.7	3.5 3.4	3.2 3.1	3.0 2.8	
2. PATIENT CARE, COMMUNICATION & PROFESSIONALISM : Introduces self properly and as a student. Obtains patient identifiers as required. Acquires detailed patient history. Provides explanation of procedure; answers questions and addresses concerns. Properly instructs patient during procedure. Demonstrates compassion and is sensitive to patient needs. Shows no bias or discrimination. Maintains patient privacy and follows HIPAA. Displays proper interpersonal skills with patient. Conversation is of relevant topic and in an appropriate area. Displays respect and professionalism during interaction, including adherence to the professional code of ethics together with diversity and inclusion. Maintains positive attitude towards staff, other students, and policies of clinical site. Demonstrates appropriate oral and written communication skills as required. Receptive to suggestions and feedback. Demonstrates retention of previously learned material.	4.0 3.8	3.7	3.5 3.4	3.2 3.1	3.0 2.8	
3. **CORRECT LABELING	4.0 3.8	3.7	3.5 3.4	3.2 3.1	3.0 2.8	
4. **OPTIMIZATION; CORRECT DEPTH, FOCAL ZONE, OVER-ALL GAIN, TGC : Uses correct technical settings and proper annotations. Adjusts technical factors throughout exam to reduce artifacts and enhance image quality.	4.0 3.8	3.7	3.5 3.4	3.2 3.1	3.0 2.8	
5. **BEST CLEAR CAPTURE OF IMAGE QUALITY (NOT BLURRY)	4.0 3.8	3.7	3.5 3.4	3.2 3.1	3.0 2.8	
6. **CALIPER PLACEMENT : Accurately places calipers to measure largest dimensions of structure or pathology imaged.	4.0 3.8	3.7	3.5 3.4	3.2 3.1	3.0 2.8	
7. **POSITIONING : Utilizes appropriate patient position/ scan window in order to obtain highest quality image possible.	4.0 3.8	3.7	3.5 3.4	3.2 3.1	3.0 2.8	
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Please provide an area for improvement:

CLINICAL INSTRUCTOR: _____

DATE: _____

TOTAL POINTS AND PERCENTAGE: _____

STUDENT'S SIGNATURE: _____

CLINICAL COORDINATOR EVALUATION

STUDENT: _____

LOCATION: _____

CLINICAL COORDINATOR: _____

Note: The results of this evaluation have been discussed with the Clinical Instructor at this clinical site.

CLINICAL INSTRUCTOR: _____

Date : _____

MARION TECHNICAL COLLEGE
DIAGNOSTIC MEDICAL SONOGRAPHY

SCORING SYSTEM FOR THE STUDENT EVALUATION:

4.0—This attribute is done 100% of the time with no room for improvement for the level at which the student is at in the program. Student would rarely need any reminders. Words used to describe this attribute include: **Exemplary or Distinguished**. Please provide several examples to justify the exemplary or distinguished score.

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	4.0 100%	3.8 95%		3.5 88%	3.4 85%	3.2 80%	3.1 78%	3.0 75%	2.8 70%	
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Please provide an area for improvement:

CLINICAL COORDINATOR: _____

DATE: _____

TOTAL POINTS AND PERCENTAGE: _____

STUDENT'S SIGNATURE: _____

Marion Technical College
Diagnostic Medical Sonography
Equipment Manipulation Form

Student _____
Date _____
Machine _____

MAIN OBJECTIVE: The student will demonstrate functioning knowledge of Sonographic Equipment. The student must locate and explain the function of the items listed below.

INSTRUCTIONS: Indicate the student's performance by checking the appropriate box for each objective. A "NO" will result in failure. After coaching, the student will be able reattempt to demonstrate competency at a later date until successful.

The student is able to:

- | | | |
|--|-----------|----------|
| 1. Turn equipment on & off. | Yes _____ | No _____ |
| 2. Demonstrate and explain the use of acoustic power output. | Yes _____ | No _____ |
| 3. Identify each transducer and its application | Yes _____ | No _____ |
| 4. Connect/disconnect a transducer. | Yes _____ | No _____ |
| 5. Properly enter patient data/ID. | Yes _____ | No _____ |
| 6. Demonstrate the proper use of application pre-sets. | Yes _____ | No _____ |
| 7. Demonstrate the use of annotations. | Yes _____ | No _____ |
| 8. Select, manipulate and explain depth. | Yes _____ | No _____ |
| 9. Select, manipulate and explain gain | Yes _____ | No _____ |
| 10. Select, manipulate and explain focus. | Yes _____ | No _____ |
| 11 Select, manipulate and explain TGC. | Yes _____ | No _____ |
| 12. Demonstrate how to use the freeze & print controls. | Yes _____ | No _____ |
| 13. Demonstrate the use of calipers. | Yes _____ | No _____ |
| 14. Enter information into a calculation package. | Yes _____ | No _____ |
| 15. Demonstrate and explain cine-loop. | Yes _____ | No _____ |
| 16. Enter information into a calculation package. | Yes _____ | No _____ |
| 17. Demonstrate and explain cine-loop. | Yes _____ | No _____ |
| 17. Demonstrate the use of dual screen capabilities. | Yes _____ | No _____ |
| 18. Demonstrate expanded field of view imaging. | Yes _____ | No _____ |

- | | | |
|---|----------|---------|
| 19. Demonstrate the use of zoom. | Yes_____ | No_____ |
| 20. Demonstrate orientation/invert controls (right/left/up/down). | Yes_____ | No_____ |
| 21. Demonstrate & describe the use of tissue optimization & harmonics. | Yes_____ | No_____ |
| 22. Demonstrate pre/post-processing curves/maps for gray scale & color. | Yes_____ | No_____ |
| 23. Demonstrate the use of color/Doppler/power controls. | Yes_____ | No_____ |
| 24. Demonstrate how to review images from an earlier exam. | Yes_____ | No_____ |
| 25. Demonstrate how to store and save images to a flash drive. | Yes_____ | No_____ |

Supervising Sonographer _____ Date _____

I have read this evaluation and had the opportunity to discuss it with my instructor.

Student _____ Date _____

Marion Technical College
Diagnostic Medical Sonography
Student Evaluation of the Clinical Instructor

	4	3	2	1
1) The instructor demonstrated up-to-date knowledge in their clinical practice.				
2) The instructor was approachable and professional.				
3) The instructor was available for assistance in the clinical setting and provided direct or indirect supervision for all exams.				
4) The instructor effectively communicated the clinical site expectations to the student.				
5) The instructor interacted well with the patients/staff at the clinical site.				
6) The instructor supported the clinical objectives for the program.				
7) The instructor treated me fairly.				
8) The instructor was willing to assist me with clinical concerns.				
9) The instructor kept me informed of clinical concerns.				
10) I had a meaningful clinical experience at this clinical site.				

4 = Completely Agree 3 = Mostly Agree 2 = Occasionally Agree 1 = Disagree

Comments:

DEPARTMENTAL POLICIES, REGULATIONS, AND PROCEDURES

POLICY: Progress Alert

A student who is not making satisfactory progress towards meeting end of quarter expectations will be notified of his/her status by being placed on progress alert. Progress Alert is a formal written indicator of a need for improvement in clinical performance.

PROCEDURE:

1. DISCIPLINARY ACTION

First violation will result in a verbal reminder with written documentation.
Second violation will result in a written warning.

Examples of Violations will include:

Failure to comply with Marion Technical College Diagnostic Medical Sonography policies as outlined in the student handbook.

Failure to comply with clinical site policies that apply to students.

2. PROBATION

Student will be placed on probationary period and given written guidelines for improvement.

Examples of Violations will include:

Unsafe behavior in the clinical setting that might prove injurious to self, patients, staff or visitors.

Failure to report an incident in the clinical setting.

Leaving the assigned area without permission of program official.

Failure to return to assigned clinical area after authorized leave.

Failure to develop the necessary attributes of a professional.

Is involved in activity of a disruptive nature in the clinical setting.

3. DISMISSAL

Violation for Dismissal from the Program will include:

Three disciplinary actions acquired by the student for the same offense.

Violation of the MTC College Code as outlined in the student handbook.

ATTENDANCE

An essential of the program is for the student to develop a good work ethic. This includes not only a willingness to help patients, but being a dependable employee in the future.

You are expected to attend all scheduled classes. If you must miss a class on a rare occasion, you are advised to notify the instructor in advance and inquire about make-up assignments.

Students must fulfill attendance requirements for the clinical component. One day is equivalent to eight hours. A maximum of one day absence in clinical is permitted without penalty and with no required make-up. A maximum of two absences in clinical can be accommodated by successfully completing a rescheduled clinical assignment. Clinical assignments must be made up to fulfill clinical requirements. More than two absences per semester will result in an unsatisfactory clinical grade. Failure to complete make-up clinical assignment will result in an unsatisfactory clinical grade. The student who is ill or under the influence of drugs or alcohol will be considered unsafe, sent home, and counted absent if the incident occurs on a day in which the student has a clinical assignment.

Students are expected to be at their assigned clinical area at the scheduled time. In the case of an illness or emergency, the student must notify the clinical instructor or supervising technologist AND the clinical coordinator, at least one half hour, prior to scheduled time of arrival. **Failure of clinical notification may result in disciplinary action.**

Make-up time is arranged through the clinical coordinator. Students do not schedule make up time without approval from the clinical coordinator.

In the event that the clinical coordinator is unavailable, the student will report to the program director.

If an unforeseen situation occurs, such as the student requiring a surgical procedure, exceptions may be made for the student to fulfill their clinical assignment. This is by approval of the program director.

Sick days will be counted for illness. Court date or jury duty will not count as an absence. Doctor's appointments or any appointment cannot be made during clinical time. Student must make arrangements with clinical instructor to make up missed clinical time.

TARDINESS

Tardiness is defined as a late arrival or more than five minutes after the scheduled clinical time. Tardiness in excess of one hour is considered a half-day absence. Three tardy incidences in one semester will be counted as one day's absence. Students should be ready to perform at the designated start time.

One point from the attendance category of the overall course grade will be deducted for each day of absence and each incidence of tardiness.

Three days of absence may result in dismissal from the program.

Tardy and Absence Make-up time Requirements:

- <5 minutes = tardy without make-up required**
- >5 minutes = tardy with one hour make-up required**
- > 1 hour = four hour make-up required**
- > 4 hours = one day make-up required**

REGISTRY INFORMATION

Student sonographers have two registry options available to them, as follows.

ARDMS Examination Fees – exam cost included in lab fees.

- The ARDMS SPI examination fee is currently \$225
- Each ARDMS specialty examination for the RDMS, RDCS and RVT credentials is currently \$250

ARRT Examination Fees

- The ARRT examination fee is currently \$225

Students are eligible to take the physics registry exam after successful completion of DMS 1051 Sonography Principles and Instrumentation and/or attending a physics registry review seminar.

Students are required to attempt SPI physics registry exam prior to the end of summer semester. If unsuccessful, students must re-take DMS 1051 during fall semester. Students must reattempt and pass SPI exam prior to the beginning of their final spring semester. Students who fail to pass SPI registry are not able to continue in the program.

Students must sit for specialty registry examinations, abdomen and obstetrics/gynecologic, prior to graduation. Eligibility to sit for specialty exams begin 60 days prior to graduation. Students must sit for abdomen exam in April and OB/GYN in May prior to graduation.

PROFESSIONAL ORGANIZATION INFORMATION

Students are strongly encouraged to become members of the Society for Diagnostic Medical Sonography (SDMS). Student membership cost is \$45.00. There are numerous grants offered for students through the SDMS. If you are experiencing financial hardship, please see the program director or clinical coordinator to discuss options.

It is highly recommended that students attend a registry review seminar prior to graduation.

OHIO MEDICAL ULTRASOUND SOCIETY

Students are highly encouraged to register for the annual meeting held in the spring. Students are also highly encouraged to participate in the student presentation and quiz bowl sections of the meeting.

Additional information for registry, membership, and accreditation procedures can be found on the following websites:

American Institute of Ultrasound in Medicine
www.aium.org

American Registry for Diagnostic Medical Sonography

www.ardms.org

The American Registry of Radiologic Technologists

www.arrt.org

Commission on Accreditation of Allied Health Education Programs

www.caahep.org

Joint Review Committee on Education in Diagnostic Medical Sonography

www.jrcdms.org

Society of Diagnostic Medical Sonography

www.sdms.org

**Clinical courses also require mandatory participation in fundraising opportunities that are conducted to offset the costs of seminars, receptions, and memberships. Students are also required to participate in a group project.

**MARION TECHNICAL COLLEGE
MEDICAL IMAGING PROGRAMS**

DEPARTMENTAL POLICIES, REGULATIONS, AND PROCEDURES

Date Issued: 11-2020

POLICY # _____

SUBJECT: Safety Net Protocol

PURPOSE: *To ensure that students who earn the minimum passing grade of “C” on objective exams are competent in the material covered and prepared to move forward in the curriculum.*

SUMMARY: *Students who earn a “C” on an objective examination (83-75%), while earning a passing grade, will be required to satisfactorily complete the safety net protocol. Students are not permitted to sit for the subsequent examination if the safety net protocol is not completed to the instructor’s satisfaction.*

1. A student earning a “C” grade on any objective examination (including lab practicals as these are objective exam formats) will be notified by the instructor that they must complete a safety net over the material covered on that examination.
2. Safety net is designed for that particular student based on the information they missed on the examination. Item analysis and content analysis will be looked at by the instructor for development.
3. The identified student will then complete an assignment over the examination material to improve mastery. This assignment may be in the form of a quiz, written essays, or any other format deemed appropriate by the instructor that matches with the learning objectives of the material in question.
4. Once provided, the student has to satisfactorily complete this safety net assignment within 2 weeks.
5. Course instructor is responsible to deem the assignment satisfactorily completed.
6. Any student who does not complete the safety net assignment will not be permitted to take the subsequent examination .
7. Should disagreement exist between the student and instructor on the determination of a satisfactory completion, the program director will make a final decision.

I acknowledge that I have read and understand —Safety Net Protocol—and have had an opportunity to ask questions.

Student Signature

Date

**MARION TECHNICAL COLLEGE
MEDICAL IMAGING PROGRAMS**

DEPARTMENTAL POLICIES, REGULATIONS, AND PROCEDURES

Date Issued: 10/2014

POLICY # _____

SUBJECT: NATIONAL REGISTRY

POLICY: COMPLETION OF ARDMS NATIONAL REGISTRY PRIOR TO GRADUATION

Students must attempt SPI physics registry exam prior to the end of summer semester. If unsuccessful, students must re take DMS 1051 during fall semester. Students must reattempt and pass SPI exam prior to the beginning of their final spring semester. Students who fail to pass SPI registry are not able to continue in the program. Students are eligible to take the physics registry exam after successful completion of DMS 1051 Sonography Principles and Instrumentation and/or attending a physics registry review seminar.

Students must sit for specialty registry examinations, abdomen and obstetrics/gynecologic, prior to graduation. Eligibility to sit for specialty exams begin 60 days prior to graduation. Students must sit for abdomen exam in April and OB/GYN in May prior to graduation.

Successful completion of any ARDMS registry exam will grant the student an automatic 100% on their clinical final. Students are still required to take the final exam, but their grade will be recorded as a 100%.

Violation of this policy will result in failure of the program.

Director's Signature

Date

Debra/Jessica: Policy and Procedure Manual/National Registry
April 2014/Jan 2022

**MARION TECHNICAL COLLEGE
DIAGNOSTIC MEDICAL SONOGRAPHY**

DEPARTMENTAL POLICIES, REGULATIONS, AND PROCEDURES

Date Issued: 1-12-12

POLICY # _____

SUBJECT: Pregnancy Policy

POLICY:

It is the School of Diagnostic Medical Sonography responsibility to protect, as much as possible, the fetus of any pregnant student. In the event that a student becomes pregnant while enrolled in the program, the student is encouraged to notify the Program Director.

PROCEDURE:

1. The student will be given the opportunity to declare the pregnancy. If the student declares the pregnancy, it must be done in writing. The student need not declare her pregnancy if she so chooses. The pregnant student may revoke the declaration of pregnancy at any time. The student may elect to complete the program without any modifications of her clinical and didactic requirements. The student has the option for written withdrawal of declaration.
2. The written declaration of pregnancy must include an estimated date of conception. If medically deemed necessary, the conception date will be used to determine the accumulated dose to the embryo/fetus that may have received prior to declaration of pregnancy.
3. Once the declaration of pregnancy has been made in writing, if medically necessary a review of the individual's exposure history must be made. The student's clinical assignments will be reviewed. Adjustments will be made in the clinical assignments if needed during the pregnancy.
4. If the student is unable to complete course objectives due to pregnancy, the student may discontinue and request readmission to the program in writing. An incomplete due to pregnancy will be addressed on a case by case basis.
5. Students are instructed on the hazards of radiation and its effects during pregnancy. Students are encouraged to follow ALARA standards.

I have read the pregnancy policy and understand the content. I have been given the opportunity to discuss the policy and have my questions answered.

Student Signature: _____ Date: _____

Program Director Signature: _____ Date: _____

Debra/Jessica: Policy and Procedure Manual/Pregnancy Policy
January 2012

**Marion Technical College
Diagnostic Medical Sonography
Pregnancy Release Form**

_____ is a patient under my health care.
(Please print name)

She is expected to deliver on _____. During her pregnancy, the following restriction(s) are necessary.

(Please check any restriction(s) that may apply.)

- _____ 1) There are no restrictions.
- _____ 2) Lift no more than _____ pounds.
- _____ 3) Should be present not more than _____ hours (at one time) in the clinical setting.
- _____ 4) Other, please specify. _____
- _____ 5) Is there a type of patient for whom the student should not provide care? e.g.
 - _____ a) Patient with cytomegalovirus (CMV)
 - _____ b) Patient receiving chemotherapy, radioactive seeding or radioactive implants.
 - _____ c) Patient with childhood diseases: (Please circle): Measles, rubella, chicken pox, mumps,other (Please specify): _____
- _____ d) Any other type of patient for whom the student should not provide care?

ADDITIONAL COMMENTS:

Physician's Signature

Date

(Please print name)

(Phone No.)

After obtaining this form, one copy must be returned within three (3) weeks to the Sonography Program Office and one copy given to your Clinical Education Coordinator. Additionally, it must be updated every semester by the first week of clinical education. If at any time the student's condition changes, an updated release form must be obtained.

**MARION TECHNICAL COLLEGE
MEDICAL IMAGING PROGRAMS**

DEPARTMENTAL POLICIES, REGULATIONS, AND PROCEDURES

Date Issued: 12/2014

POLICY # _____

SUBJECT: Laboratory Practical Examination Grading and Progression Policy

POLICY: LABORATORY PRACTICUM GRADING AND PROGRESSION

Students are required to take two practical exams fall and spring semesters of their junior year and complete a final practical exam. The first two practical examinations of each semester will require the student to obtain six high quality diagnostic images within a twenty minute time frame. The practical examinations are graded as pass/fail.

The final practical examination during fall semester requires the students to perform a complete abdominal sonographic examination according to the issued protocol. The final practical exam during spring semester requires the students to perform a transabdominal pelvic and thyroid sonographic examination according to the issued protocols. These examinations are graded as pass/fail and used to complete the student's performance evaluation.

Students must complete the practical examination with a score of 85% or above on the first attempt. If a student fails a practical examination, the student may repeat it one time after participating in an additional open lab. The student must pass a repeated practical examination with a minimum score of 90%.

Students must successfully complete all required laboratory practical examinations per semester or they will be withdrawn from the program.

Director's Signature

Date

Debra/Jessica: Policy and Procedure Manual/Laboratory Practical Examination
December 2014

**MARION TECHNICAL COLLEGE
DIAGNOSTIC MEDICAL SONOGRAPHY EDUCATION**

DEPARTMENTAL POLICIES, REGULATIONS, AND PROCEDURES

Date Issued: 6-12

POLICY # _____

SUBJECT: Completion of Student Clinical Evaluations

POLICY:

The Clinical Coordinator will provide a schedule to each clinical faculty member regarding dates and times the students will be rotating through their area.

Upon the student's completion of a clinical rotation, the designated clinical instructor is responsible for the student's training and must submit a completed clinical evaluation within seven days to the clinical coordinator or program director. The areas included within these guidelines are:

- Abdomen/Pelvis Sonography Studies
- Superficial Structures Sonography Studies
- Gynecology Sonography Studies
- Obstetrics Sonography Studies
- Interventional Sonography Studies
- Professionalism
- Retention
- Communication
- Performance
- Patient Care
- Quality Control

Completed evaluations are included in the student's clinical grade. It is highly encouraged that each clinical faculty member review clinical evaluations with the students.

**MARION TECHNICAL COLLEGE
DIAGNOSTIC MEDICAL SONOGRAPHY EDUCATION**

DEPARTMENTAL POLICIES, REGULATIONS, AND PROCEDURES

SUBJECT: Communication Devices/Cell Phone/Smart Watch Usage Policy

POLICY:

All personal communication devices, including cell phones/Smart Watch, must be set to vibrate or off while in classrooms, labs, and participating in other class-related activities, unless use of such a device is specified in the official course syllabus. Infractions will result in warnings and, eventually, grade-related penalties and or dismissal from the classroom. Exceptions must be approved in writing by the instructor.

Additionally, all personal communication devices, including cell phones/Smart Watch, must be deactivated (turned completely off) during exams, quizzes, or other evaluations. Any student found to be using a communication device during an exam will be given a grade of zero for the exam.

While at clinical sites, all personal communication devices, including cell phones and smart watches must be left in your bookbag. You may check your phone during your break. No videos or pictures can be taken inside or outside the clinical facility. Students are unable to post any part of the clinical experience on social media platforms such as Facebook, TikTok, Instagram, Snapchat, etc. No personal posts should include clinical badges or student badges/nametags. Cell phones may not be out in hallways or patient rooms. Cell phones can only be out in breakroom/lunch rooms. Violators will be asked to leave clinic. This will count as an absence and you will have to make up the clinical hours missed. In the event that HIPPA is violated, disciplinary action can be taken up to dismissal from the program.

**MARION TECHNICAL COLLEGE
MEDICAL IMAGING PROGRAMS**

DEPARTMENTAL POLICIES, REGULATIONS, AND PROCEDURES

Date Issued: 12/2014

POLICY # _____

SUBJECT: ALTERNATE STUDENT ACCEPTANCE POLICY

POLICY: ALTERNATE STUDENT ACCEPTANCE

The Diagnostic Medical Sonography Program will accept four alternate students in addition to the accepted program students each year. Alternate students will be selected using the program's admission scoring system and notified of ranking status. Applicants have the choice to accept alternate status or reapply the following calendar year. These alternate students will be required to meet the same standards as program accepted students. Selected alternates are eligible to complete the entire first year of program courses.

In the event that a program student does not continue in the program for any reason, the first alternate will be accepted into the program. Remaining alternates will keep their current ranking. There is no guarantee that alternate students will be moved into program accepted status.

If alternate students successfully complete the first year of program courses and do not get moved to accepted status they will be awarded five points for each program course successfully completed toward the following years admission scoring.

Alternates that are awarded these points and accepted as program students the following year will be required to take a DMS 2990 course in the spring semester. This course will be a review course designed to allow the students to regain the skills they developed during their alternate student status.

Director's Signature

Date

Debra/Jessica: Policy and Procedure Manual/Alternate Student Acceptance
December 2014

MARION TECHNICAL COLLEGE HEALTH

SUBJECT: **SUBSTANCE ABUSE**

PURPOSE: To maintain an environment that ensures the provision of safe, high quality patient care and is supportive to the well-being of all students.

POLICY:

Students are prohibited from possessing, using or consuming, and/or being under the influence illegal drugs or alcoholic beverages on college premises and affiliated training sites.

The legal use of medications or drugs prescribed by a licensed practitioner is permitted provided that such use does not adversely affect the student's performance or endanger the health/safety of others. Students are required to notify their instructor of any drugs taken that may impair class and/or professional practice performance. Note: While the State of Ohio legalized the use of marijuana for medical purposes, with the approval/prescription of a licensed medical professional, the use of marijuana is still considered illegal by the federal government. As MTC is a recipient of federal Title IV funds for student financial aid, we cannot allow the use, distribution, and possession of medical marijuana on our campus. This extends to marijuana in any form, including edibles, or CBD oils that contain more than 0.0% THC. Students are also expected to follow affiliate training site drug/alcohol policies and procedures. Students taking medication who may appear impaired or unsafe may be asked to leave the campus laboratory/classroom or affiliated training site. The student who has been asked to leave will meet with the Director of their Health Program before being allowed to return to class or the affiliated training site.

Positive drug or alcohol screenings as a result of routine random and/or periodic drug screens required throughout the program will result in removal from the classroom or affiliated training site, an unsatisfactory grade for the course and immediate dismissal from the program.

Positive drug screenings will be considered to contain the presence of at least one unacceptable substance and positive alcohol screenings will be considered at or above the established industry standard threshold limit. Confirmation tests are performed on all positive test results.

A student who refuses to comply with the substance abuse policy/procedure will be subject to dismissal from the program. A student dismissed from a program may request readmission based upon current admission policies and will be encouraged to seek treatment and/or counseling. In addition, students will be subject to random and/or periodic screenings during the program. Payment of all testing, treatment, and counseling will be the sole responsibility of the student.

PROCEDURE:

Classroom

When a student's condition/behavior suggests impairment, the instructor will immediately validate their perceptions/suspicions with another faculty/staff member.

- Privately discuss your concerns with the student and question his/her use of any alcohol, prescription or illegal substances. Document your conversation with the student.
- Arrange for the student to be seen immediately or as soon as feasibly possible (within 8 hours of initial suspicion) by an approved facility selected by Marion Technical College for additional assessment and documentation. Faculty will transport student or arrange transportation to and from the approved facility. Marion Technical College will incur the initial cost of testing.
- Student must authorize (consent) to release test results to MTC per normal reporting procedures.
- If the student refuses evaluation/assessment or fails to cooperate, he or she will be considered "positive" and removed from the classroom. Security will be available upon request of the instructor. The faculty will assist the student in securing safe transportation.
- The student will be referred to the faculty/program director prior to the next scheduled class day. Final decision regarding student's status/discipline will be made by the Program Director based upon input from the faculty.
- Positive alcohol screens or drug screens in a laboratory class due to illegal substances will result in removal of the student from the course due to safety concerns, an unsatisfactory grade in the course, and dismissal from the program. Final decision regarding student's status/discipline will be based upon input from the Program Director in consultation with the Dean of Technical and Professional Programs.

- A student dismissed from a program may request readmission based upon current admission policies and will be encouraged to seek treatment and/or counseling. In addition, student will be subject to periodic screenings during the program. Payment of all testing, treatment, and counseling will be the sole responsibility of the student.
- If impairment behaviors are observed, the procedures of the College Policy #420 Student Disciplinary Action will be enforced.

Professional Practice Experience

When a student's condition/behavior suggests impairment is present, the professional practice supervisor will immediately validate their perceptions/suspicions with another healthcare employee. The MTC Program Director/Clinical Coordinator must also be notified.

- Privately discuss your concerns with the student and question his/her use of any prescription or illegal substances or alcohol. Document your conversation with the student.
- Arrange for the student to be accompanied and seen by the Emergency Room/Occupational Health for additional assessment and documentation. Marion Technical College will incur the initial cost of drug/alcohol testing.
- Student must authorize (consent) to release test results to MTC per normal reporting procedures.
- If the student refuses evaluation/assessment, he or she will be considered "positive" and removed from the affiliated training site. Security can be obtained upon the request of the professional practice supervisor. The professional practice supervisor and/or clinical coordinator will assist the student in securing safe transportation.
- The student will be referred to the program director prior to the next scheduled professional practice day. Final decision regarding student's status/discipline will be based upon input from the Program Director in consultation with the Dean of Technical and Professional Programs.
- Positive alcohol screens or drug screens (due to illegal substances) in the professional practice experience will result in removal of the student from the professional practice experience due to safety concerns, an unsatisfactory grade in the course, and dismissal from the program.
- A student dismissed from a professional practice experience will not be allowed the opportunity to substitute another course for the professional practice.
- A student dismissed from a program may request readmission based upon current admission policies and will be encouraged to seek treatment and/or counseling. In addition, student will be subject to random and/or periodic screenings during the program. Payment of all testing, treatment, and counseling will be the sole responsibility of the student.

Authorization
Debbie Stark, MBA, BS
Dean of Technical and Professional Programs

Approved 4.15.16;
Revised 4.25.19; 7.14.20
Revised 7.22.21
Health Directors: Health P&P Substance Abuse Policy

**MARION TECHNICAL COLLEGE
HEALTH PROGRAMS SUBSTANCE ABUSE AWARENESS**

While the State of Ohio legalized the use and possession of marijuana for medical purposes, the use or possession of marijuana is still considered illegal by the federal government.

As a recipient of federal funds, Marion Technical College (MTC) cannot allow the use, distribution, or possession of medical marijuana on campus, while conducting business of MTC, or as part of any MTC activity, including off-campus activities.

The prohibition of the use, distribution, or possession of medical marijuana also extends to marijuana in any form, including edibles, or CBD oils that contain more than 0.0% of THC. Students in the Diagnostic Medical Sonography, Medical Assisting, Medical Laboratory Technology, Nursing, Occupational Therapy Assistant, Physical Therapy Assistant, Radiography, and Surgical Technician Programs are required to submit to an initial drug screen upon admission with possible random drug testing throughout the duration of their program.

Students in those programs are also expected to follow affiliate training site drug/alcohol policies and procedures. Please refer to the MTC policy **Drug Screening for Professional Practice Experience** for further information.

Failure to pass a drug screen, including as a result of marijuana use, will forfeit clinical placement and result in dismissal from your health program.

I hereby acknowledge that I have been informed of and understand MTC's prohibition of the use, possession, or distribution of marijuana and the consequences for failing to pass a drug screen test.

Student Signature

Date

Student Printed Name

Student ID Number

Witness Signature

References:

MTC College Policy APP Substance Abuse and Prevention
MTC Health Policy and Procedure Drug Screening for Professional Practice Experience 5.3.19
MTC Health Policy and Procedure Substance Abuse 4.25.19

**MARION TECHNICAL COLLEGE
HEALTH**

SUBJECT: STUDENT CODE OF EXPECTED CONDUCT WITH CORRECTIVE ACTION

PURPOSES: To identify inappropriate student conduct associated with the Health programs and to define the process for appropriate student corrective action as a result of misconduct.

Policy:

Expected Conduct:

Students enrolled in a Health Program are expected to behave responsibly and behave in a manner compatible with the philosophy and objectives of the Program and Marion Technical College. The Health programs recognize responsibility to the healthcare professions they represent and to the consumers of health care. Therefore any action by a Health student that is considered unprofessional or unsafe shall be deemed cause for disciplinary action and/or dismissal.

Health students of Marion Technical College are expected to:

- *Exercise good judgment in all aspects of personal behavior recognizing they represent a MTC Health program.*
- *Demonstrate personal integrity and honesty at all times in completing classroom assignments and examinations, carrying out clinicals, practicums or professional practice experiences, and in their interactions with others.*
- *Refrain from acts they know or, under the circumstances, have reason to know will impair their integrity or the integrity of Marion Technical College.*
- Respect the rules and regulations of the Program within the classroom and laboratory as outlined in the Student Handbook and course syllabus.
- Respect the rules and regulations of the affiliated training site presented to the students during the training site's orientation process.

Policy Statements:

Student disciplinary action, ranging from a written warning/learning contract/progress alert, to program dismissal, will be taken for violations of the following expected student conduct while participating in a Health program, which may include, but are not limited to:

1. Professionalism. A student shall demonstrate appropriate professional conduct and represent the profession effectively while attending MTC. A student is expected to demonstrate: effective communication and interpersonal skills, accountability for actions and outcomes, appropriate dress and demeanor, hygiene, respect for fellow students, instructors, patients and their visitors, and/or site professionals, and behavior that preserves the safety of others. Professionalism must be exhibited while in a Health program and is often evaluated by the instructor within a course as part of the preparation for clinical,

- practicum, or professional practice experiences. The instructor will specify evaluation policies and expected behaviors within the course syllabus.
2. Academic Dishonesty. A student shall not engage in academic misconduct which includes but is not limited to plagiarism, violation of course rules, cheating, falsification of any laboratory or medical results, or assisting another to cheat according to MTC Policy #521. Engaging in academic dishonesty may result in immediate dismissal from a Health program.
 3. Sexual Harassment. A student shall not engage in any communication or behavior that may be construed as sexual harassment or creates a “hostile working environment” according to Rule 3357:10-1-45 Title IX: Sex/Gender-Based Harassment, Discrimination, and Sexual Misconduct.
 4. Patient Care. When providing patient care, a student shall:
 - a. report and/or document the care provided by the student for the patient, and the patient’s response to that care.
 - b. accurately and timely report to the appropriate supervisor errors that occur while providing patient care.
 - c. not falsify any record or any other document prepared or utilized in the course of, or in conjunction with the clinical, practicum or professional practice experience.
 - d. promote a safe environment for each patient and their guests.
 - e. delineate, establish, and maintain professional boundaries with each patient and their guests.
 - f. provide privacy during examination or treatment.
 - g. treat each patient with courtesy, respect, and with full recognition of dignity and individuality.
 - h. not engage in behavior that causes or may cause physical, verbal, mental or emotional abuse/harm to any patient.
 - i. not misappropriate a patient’s property or engage in behavior to seek or obtain personal gain at the patient’s expense. All patients are presumed incapable of giving free, full, or informed consent to the unethical behaviors by the student.
 - j. not engage in conduct or verbal behavior with a patient and their guests that may be interpreted as sexual or sexually demeaning. All patients are presumed incapable of giving free, full, or informed consent to sexual activity with the student.
 5. Confidentiality. The student must abide by the HIPAA rules of privacy and the “Agreement to Respect Confidentiality, Privacy, and Security”. A student shall not share confidential information with anyone except another healthcare provider that has a “need to know” the information to provide proper health care for that patient or to conduct business within the health care setting.
 6. Substance Abuse. Students are prohibited from possessing, using or consuming illegal drugs or alcoholic beverages on college premises and affiliated training sites in accordance with the student code of conduct. Students are prohibited from reporting to class and affiliated training sites under the influence of alcoholic beverages, illegal drugs, or medication which impairs or makes the student unsafe. Students taking medication who may appear impaired/unsafe may be asked to leave the campus laboratory/classroom/clinical, practicum, or professional practice experience. Please also refer to the Health Substance Abuse Policy for further information.
 7. Health students are expected to refrain from:
 - a. Acts which disrupt or interfere with the orderly operation of instruction and other academic activities.

- b. Behavior that causes, or can reasonably be expected to cause, physical and/or mental harm to a person.
- c. Physical or verbal threats against or intimidation of any person that results in limiting his/her access to all aspects of life.
- d. Refusing to comply with the directions of College officials, instructors, administrators, or staff acting in the performance of their duties and clinicals site staff.
- e. Refusing to appear or giving false statements when one is asked to present evidence or respond to an investigation involving the conduct code.
- f. Intentionally or recklessly interfering with normal College activities or emergency services.
- g. The unauthorized or improper use of College property, facilities, equipment, keys, identification cards, documents, records, or resources, including misuse of electronic resources and equipment.
- h. Violations of criminal law that occur on College premises or in connection with College functions, that affect members of the College community, or that impair the College reputation.
- i. Violations of any other College-wide policies or campus regulations governing student conduct, including orders issued pursuant to a declared state of emergency.

CORRECTIVE ACTION:

Inconsiderate or irresponsible behavioral patterns will be treated as a serious matter by Marion Technical College's Health programs. The Program reserves the right to eliminate any step in the case of any infraction based on the severity of the infraction, such as immediate harm to others. Disciplinary actions are entered in the student's confidential personal file. The student receives written notice of action taken that is recorded in the personal file.

Violation of confidentiality will result in disciplinary action that may include removal from the affiliated training site, a failing grade in the course, and immediate dismissal from the program.

The following sanctions represent the Health corrective actions:

Written Warning/Progress Alert/Learning Contract– A written notice to the student offender that the student has violated the Health Student Code of Conduct, and/or MTC Student Code of Conduct and that further violations will result in more severe disciplinary action. The Program Director in accordance with AP 420 Student Disciplinary Action (in consultation with the Interim Associate Deans of Health and the Student Conduct Officer) will decide on the terms of the progress alert/learning contract. The student will be informed of the problem area and the necessary corrective actions. The student will be evaluated according to the conditions of the progress alert/learning contract. Failure of the student to abide by the terms of the alert/contract or to correct the identified problems will result in failure of the class/clinical, Practicum or professional practice experience and dismissal from the program.

Dismissal from the program: The Program Director (in consultation with the Interim Deans of Health and Student Conduct Officer) will make the final decision on dismissal from a Health program.

The MTC policy on AP 440 Student Complaints, as stated in the Health Program's Student Handbook, will provide due process for the student. This policy can also be found in the MTC Student Handbook or on the college website.

A student dismissed from a clinical, practicum or professional practice experience receives a failing grade and is dismissed from the program. The student will not be allowed the opportunity to substitute another course for the professional practice experience.

A student dismissed from a program may request a readmission petition in accordance with current requirements. Readmission to the program is based upon seat availability, past scholastic performance, professional practice performance, and any other program specific criteria. Performance will include behavioral objectives which address cognitive, psychomotor and affective domains.

Authorization

Chad Hensel. P.T., D.P.T., MHS, C.S.C.S.

Associate Dean of Health

Authorization

Debra Myers, M.ED, RT, RVT, RDMS, RDCS

Associate Dean of Health

Revised & Approved 4.25.19

Reviewed 8.5.20; 4.29.21; 5.2.22

Health Directors: Health P&P Student Conduct Policy

**MARION TECHNICAL COLLEGE
DIAGNOSTIC MEDICAL SONOGRAPHY EDUCATION**

DEPARTMENTAL POLICIES, REGULATIONS, AND PROCEDURES

Date Issued: 3-1-01, 7-09

POLICY # _____

SUBJECT: Acknowledgement and Understanding of Confidential Information

POLICY:

Confidential information includes, but is not limited to, patient information, on-line data, medical records, passwords, and access codes and key cards to computer systems. Confidential information includes information heard and obtained from others.

I am enrolled in the Diagnostic Medical Sonography Program at Marion Technical College and I:

1. Understand that I have a professional responsibility to protect the client's right to privacy.
2. Will not access confidential information without authorization from my clinical instructor or preceptor.
3. Will not disclose any confidential information to any unauthorized person.
4. Will not make copies, or allow others to make copies, of printed client reports, documents, or on-line data in my possession.
5. Recognize that unauthorized disclosure of confidential information is totally prohibited.
6. Recognize that the disclosure of or sharing of passwords, access codes, key cards assigned to me is prohibited, and that I am accountable for them and for any improper access to information gained with these privileges.
7. Will immediately notify my clinical instructor or clinical coordinator if I have a reason to believe that the confidentiality of my access privilege has been broken.
8. Agree to use caution if being overheard by others and will not discuss any confidential information in public areas, including hallways, elevators, and the cafeteria.
9. Understand that if I violate any of the above statements, the following disciplinary action will be taken:

First Violation:	A verbal warning with written documentation
Second Violation:	A verbal warning with written documentation
Third Violation:	Clinical probation
Fourth Violation:	Dismissal from the program

Signature

SS #

Date

Director's Signature

Date

Debra/Jessica: Policy and Procedure Manual/Acknowledgement and Understanding of Confidential Information
June 2012

**MARION TECHNICAL COLLEGE
MEDICAL IMAGING PROGRAMS**

DEPARTMENTAL POLICIES, REGULATIONS, AND PROCEDURES

Date Issued: 12/2014

POLICY # _____

SUBJECT: INCIDENTAL FINDINGS OF PATHOLOGY POLICY

POLICY: INCIDENTAL FINDINGS OF PATHOLOGY

All volunteer patients, to include students and employees, must read and sign a scanning consent form prior to being a sonography patient for any person in association with the Diagnostic Medical Sonography Program at Marion Technical College.

In the event that pathology is incidentally found, the volunteer will be notified only that there has been an abnormal finding and referred to their physician. You may print or save a couple images for the volunteer to take to their physician. No diagnosis or opinions should be offered.

The Program Director should also be notified as soon as possible.

Director's Signature

Date

Debra/Jessica: Policy and Procedure Manual/Incidental Findings
December 2014

**MARION TECHNICAL COLLEGE
MEDICAL IMAGING PROGRAMS**

DEPARTMENTAL POLICIES, REGULATIONS, AND PROCEDURES

Date Issued: 4-2014

POLICY # _____

SUBJECT: Campus Dress Code

POLICY: CAMPUS DRESS CODE POLICY

Students must wear attire that is professional and considered business casual. Clothing options include program polo and T-shirts, clinical scrubs, and business attire. Jeans are permitted but must not have holes or fraying visible. Shorts and skirts must be of an appropriate length; fingertip level when standing with arms straight is considered appropriate.

It is unacceptable for the student to wear sweats, tank tops, crop tops, or halters.

Hair must be clean and out of the face. Facial hair must be neat and trimmed. Good personal hygiene must be maintained.

Light or natural nail polish is permitted. Long fingernails are not permitted; nails must be no more than 1/8th inch past the fingertip.

Each violation of this policy will result in a one point deduction from the professionalism category of course grade. Subsequent violations may result in additional disciplinary action.

Director's Signature

Date

Debra/Jessica: Policy and Procedure Manual/Campus Dress Code
April 2014

**MARION TECHNICAL COLLEGE
DIAGNOSTIC MEDICAL SONOGRAPHY EDUCATION**

DEPARTMENTAL POLICIES, REGULATIONS, AND PROCEDURES

Date Issued: 6-12

POLICY # _____

SUBJECT: Clinical Dress Code

POLICY: CLINICAL DRESS CODE POLICY

Students must wear a uniform in the clinical setting. Students are required to wear gray scrub tops with black scrub pants. Black trim is allowed on gray scrub top. Only solid white, gray, or black T-shirts are permitted to be worn under scrub top. When wearing uniform pants, students must wear black, gray, or white socks. Solid black or white leather shoes with matching shoestrings must be worn. Make-up must be in moderation. The student can wear small earrings. Two piercings per ear is allowed. Other visible body piercing is prohibited in the clinical setting. Long fingernails are not permitted. Nails must be no more the 1/8th inch past the tip of the finger. Light colored nail polish is permitted. Artificial nails are not permitted. Additional jewelry allowed is two rings and a watch.

Students scheduled in surgery must wear surgery attire as provided by the hospital according to the site policy.

Students will wear name badge with name showing.

Hair must be clean and out of the face. Facial hair must be neat and trimmed. Good personal hygiene must be maintained.

Tattoos must be covered at all times.

It is unacceptable for the student to wear shorts, jeans, sweats, tank tops, crop tops, halters, unclean clothes or shoes in the clinical setting.

Director's Signature

Date

Debra/Jessica: Policy and Procedure Manual/Clinical Dress Code
June 2012

**MARION TECHNICAL COLLEGE
MEDICAL IMAGING PROGRAMS**

DEPARTMENTAL POLICIES, REGULATIONS, AND PROCEDURES

Date Issued: 07/2021

POLICY # _____

SUBJECT: Clocking In/Out for Labs and Clinicals

POLICY: Clocking In/Out for Labs and Clinicals

Students are required to clock in and clock out daily using the clinical tracking system each day they are scheduled for labs and/or clinicals. Students must be physically in the designated DMS Lab or Ultrasound Department of the site where they are scheduled to perform their clinical hours.

It is unacceptable for any student to clock in or out in any unspecified location (i.e. parking lot, off premises, etc.).

This policy is in accordance with the JRCDSMS standard 5A-3, Fair Practices, Publications, and Disclosures.

Each violation of this policy will result the student failing to earn the designated weekly point(s) in the professionalism category of clinical course grade. Subsequent violations may result in additional disciplinary action.

Director's Signature

Date

Debra/Jessica: Policy and Procedure Manual/Clocking in/out for labs and clinicals
July 2021

**MARION TECHNICAL COLLEGE
MEDICAL IMAGING PROGRAMS**

DEPARTMENTAL POLICIES, REGULATIONS, AND PROCEDURES

Date Issued: 07/2021

POLICY # _____

SUBJECT: COVID-19 Contingency Plan for Clinical Education

POLICY: COVID-19 Contingency Plan for Clinical Education

The MTC DMS Program will follow the guidelines established by the institution that all clinical rotations for students would proceed as usual under guidance from the sponsoring partner institutions. Students should abide by the rules of the rotation site. Students can refuse to go to any site, but the student must be informed that they cannot get credit for activity that they do not complete. Thus, if they choose not to participate in a clinical rotation, they will get an “Incomplete” grade and must complete the activities/assignments as defined by the course director prior to receiving a final grade.

If the situation becomes more critical and clinical education be suspended for the entire cohort, the DMS Program has the responsibility to ensure that we meet the accreditation standards and our graduates are prepared to enter the workforce as entry-level professionals in the discipline.

For this reason, the MTC DMS Program will closely follow the all accommodations and provided clarifications from our accrediting agency (JRCDS) as to how students and programs can meet the standards for accreditation during this unprecedented situation.

Current recommendations dictate that the following circumstances will be implemented:

1. A reduction in the number of clinical hours may be acceptable provided the student has obtained all mandatory and electives competencies prior to the suspension of clinical rotations.
2. The length of the academic program may be extended for those students who do not meet the minimum standards or who have outstanding competencies.
3. In order to qualify for graduation, all students will obtain all mandatory and elective competencies as set forth by the program standards

Director's Signature

Date

Debra/Jessica: Policy and Procedure Manual/ COVID-19 Contingency Plan for Clinical Education
July 2021

**MARION TECHNICAL COLLEGE
MEDICAL IMAGING PROGRAMS**

DEPARTMENTAL POLICIES, REGULATIONS, AND PROCEDURES

Date Issued: 07/2021

POLICY # _____

SUBJECT: Documentation of Daily Exam Logs

POLICY:

Students are required to maintain documentation of clinical experience by logging every organ for every exam in the clinical tracking system daily, regardless of their participation level (i.e. observed, pre/post scanned, scanned 50%, scanned 75%, scanned 100%).

Failure to document clinical experience in the clinical tracking system each week will be considered a violation of this policy.

Each violation of this policy will result the student failing to earn the designated weekly point(s) in the professionalism category of clinical course grade. Subsequent violations may result in additional disciplinary action.

Director's Signature

Date

Debra/Jessica: Policy and Procedure Manual/ Documentation of Daily Exam Logs
July 2021

**MARION TECHNICAL COLLEGE
MEDICAL IMAGING PROGRAMS**

DEPARTMENTAL POLICIES, REGULATIONS, AND PROCEDURES

Date Issued: 07/2021

POLICY # _____

SUBJECT: Working While Performing Clinical Hours

POLICY: Working While Performing Clinical Hours

No paid employment hours will count toward a student's required clinical time. Students are not permitted to perform clinical hours while receiving compensation from their employer.

Students may not be substituted for staff at a clinical site.

It is unacceptable for any student to receive compensation while performing clinical hours.

This policy is in accordance with the JRCDS standard 5C-3, Fair Practices, Safeguards.

Director's Signature

Date

Debra/Jessica: Policy and Procedure Manual/Working while performing clinical hours
July 2021

**MARION TECHNICAL COLLEGE
DIAGNOSTIC MEDICAL SONOGRAPHY EDUCATION
DEPARTMENTAL POLICIES, REGULATIONS, AND PROCEDURES**

Date Issued: 08/21

POLICY # _____

SUBJECT: Third Party Clinical Requirements

POLICY:

Experience in a clinical setting is an integral component of educating students in Marion Tech's Nursing and Allied Health programs*. As a condition of these programs, set forth by their respective accrediting bodies, students must complete clinical placement prior to successful completion of their program. Marion Tech has entered into required agreements with health care facilities and providers to serve as clinical placement sites for Marion Tech students. As always, and defined in these agreements, Marion Tech students are required to adhere to the policies and procedures set forth by clinical placement sites. Marion Tech does not set the requirements for the clinical site, we are only making you aware of these third-party requirements. A student must comply with the clinical requirements, including vaccinations. If a student does not meet all clinical requirements, including getting the vaccines a clinical site has deemed mandatory, the student may disqualify themselves from the Nursing and Allied Health programs at Marion Tech.

Director's Signature

Date

Debra/Jessica: Policy and Procedure Manual/Clinical Summary Policy
August 2021

**MARION TECHNICAL COLLEGE
DIAGNOSTIC MEDICAL SONOGRAPHY EDUCATION
DEPARTMENTAL POLICIES, REGULATIONS, AND PROCEDURES**

Date Issued: June 2012

POLICY # _____

SUBJECT: Direct and Indirect Supervision

POLICY:

In the clinical setting the students will be under direct supervision of a sonographer until competency testing has been documented. Students may only perform procedures with indirect supervision after competency has been documented.

Direct supervision is defined as:

1. A qualified sonographer reviews the request for examination in relation to student achievement.
2. A qualified sonographer evaluates the condition of the patient in relation to the student's knowledge.
3. A qualified sonographer is present during the conduction of the examination.
4. A qualified sonographer reviews and approves the ultrasound images.

Indirect supervision is defined as:

Supervision provided by a qualified sonographer that is immediately available to assist student regardless of the level of student achievement.

Students may perform procedures with indirect supervision when competency has been documented. Direct supervision is mandatory on all surgery and portable imaging procedures even if competency has been demonstrated.

Students evaluate adherence to the policy on the Student Evaluation of Clinical Instructor and Site. If a student indicates proper procedures of direct supervision are not being upheld, the following process will occur.

1. Meeting between student and clinical coordinator regarding breach of policy.
2. If necessary, clinical coordinator meets with clinical site; including, but not limited to, clinical instructor and clinical staff; other clinical administrative staff may be included.

If a clinical site reports a student is noncompliant of the policy, the following process will occur:

First Offense: Verbal Warning
Second Offense: Documented Warning
Third Offense: Probation
Fourth Offense: Dismissal

Director's Signature

Date

Debra/Jessica: Policy and Procedure Manual/Direct Supervision
May 2014

**MARION TECHNICAL COLLEGE
DIAGNOSTIC MEDICAL SONOGRAPHY EDUCATION
DEPARTMENTAL POLICIES, REGULATIONS, AND PROCEDURES**

Date Issued: June 2012

POLICY # _____

SUBJECT: Patient Requesting Sonographer vs. Student

POLICY:

In the event a patient states that he requests a sonographer to perform his or her ultrasound examination to a student, the student will relay this request to the supervisor or designee. At the permission of the patient, the student may assist the sonographer during the procedure.

With the patient's and student's best interest in mind, the student may be removed from the examination at the discretion of the supervisor.

Director's Signature

Date

Debra/Jessica: Policy and Procedure Manual/Patient Requesting Technologist vs. Student
June 2012

**MARION TECHNICAL COLLEGE
MEDICAL IMAGING PROGRAMS**

DEPARTMENTAL POLICIES, REGULATIONS, AND PROCEDURES

Date Issued: 12/2014

POLICY # _____

SUBJECT: COMPETENCY REQUIREMENTS POLICY

POLICY: **COMPETENCY REQUIREMENTS**

The Diagnostic Medical Sonography Program requires students to perform a minimum number of specific exams each semester. Images acquired during the exams must meet a certain standard which corresponds to the student's level of experience. All required competencies must be obtained prior to the student's graduation.

If a student does not meet the minimum number during summer or fall semester, the exams are added to the following semester requirements. If this occurs during spring semester, the student will be required to extend their time in clinic until the requirements are met. Student clinical placement may also be changed to ensure the student has the opportunity to achieve the requirements.

In the event that a student not meets the expectations due to not performing at the expected level, the student will receive two point deduction per exam per semester not obtained. The remaining number will be added to the following semester requirements during summer and fall semester. If this occurs during spring semester, the student will be required to extend their time in clinic until the requirements are met.

Technically difficult and pathologic exams that were performed at a competent level may be used as a normal exam. Technically difficult and pathologic exams number requirements may also be exchanged at the discretion of the Clinical Coordinator or Program Director.

Director's Signature

Date

Debra/Jessica: Policy and Procedure Manual/Competency Requirements
December 2014

**MARION TECHNICAL COLLEGE
MEDICAL IMAGING PROGRAMS**

DEPARTMENTAL POLICIES, REGULATIONS, AND PROCEDURES

Date Issued: 4-2014

POLICY # _____

SUBJECT: Attendance

POLICY: CLASSROOM ATTENDANCE POLICY

Attendance and participation at lectures is consistent with academic success, therefore students are expected to attend all lectures. Instructors may give unannounced quizzes which may not be made up if the student is absent for any reason. In order for a student to make up a scheduled test, the instructor must be notified prior to the class time. Arrangements to make-up the test must also be made at that time. The test must be made up on the date of the student's return. The instructor may provide an alternative test as a make-up, i.e., essay exam in place of a multiple choice.

Episodes of tardiness, leaving early, or not attending class are all violations of this policy. Students are expected to be prepared to start class at the assigned time, not walking in the door at the assigned time. If the student is tardy, homework will not be accepted. The instructor reserves the right to lock the door at the start of each class; you may not be permitted entry.

Each violation of this policy will result in a one point deduction from the professionalism category of course grade. Subsequent violations may result in additional disciplinary action.

Director's Signature

Date

Debra/Jessica: Policy and Procedure Manual/Attendance
April 2014

**MARION TECHNICAL COLLEGE
HEALTH
POLICY AND PROCEDURE**

SUBJECT: Use of Social Networking Sites

1. PURPOSES/OBJECTIVES:

- a. The Allied Health Departments recognize that social networking websites and applications, such as Facebook, Twitter, Myspace, or blogs are an important means of communication. The use of technology can be a valuable search tool for allied health students and faculty when used appropriately.
- b. The expectation is that these resources will not be used in patient care areas, but will be utilized in classrooms or conference rooms under the supervision and guidance of the course and clinical instructors.

2. DEFINITIONS:

- a. **Blog:** A blog is a website maintained by an individual or organization with regular entries of commentary, descriptions of events, or other materials such as graphics or video. Blogs may provide commentary or news on a particular subject; others function as more personal on-line diaries.
- b. **Social Media:** For the purposes of this Policy “Social Media” is an on-line social structure made up of individuals or organizations that are tied by one or more specific types of interdependency, such as values, visions, ideas, financial exchange, friendship, business operations, professional exchange, etc. Social Media sites operate on many levels, from families up to the level of nations, and play a critical role in determining the way information is exchanged, problems are solved, organizations are run, and the degree to which individuals succeed in achieving their goals. Examples of Social Media sites include, but are not limited to Facebook, Myspace, LinkedIn, Twitter, or other similar sites.
- c. **Workforce:** Under HIPAA, the workforce is defined to include employees, medical staff members, volunteers, trainees, and other persons whose conduct, in the performance of work for a covered entity, is under the direct control of such entity, whether or not they are paid by the covered entity.

POLICY STATEMENTS:

1. The use of technology can create potential liability for the student, faculty, and the college. Posting certain information is illegal, and violation of existing statutes and administrative regulations may expose the offender to criminal and civil liability. The following actions are **strictly forbidden:**
 - a. Posting or communicating any patient-related information or information which may potentially identify a particular patient. Removal of the patient’s name does not solve this problem – inclusion of gender, age, race, diagnosis, etc. may still allow the reader to recognize the identity of a specific individual. Violations of this requirement may result in disciplinary action up to and including dismissal from the program, as well as other liability for violation of HIPAA. Students should never publicly make comments about the care of a specific patient, including online. Even acknowledging the care of a patient is an unacceptable disclosure of patient identifying information. Disclosing confidential patient information in an inappropriate manner is a federal offense under HIPAA. The penalties include significant fines and/or criminal penalties. We take violations of patient privacy very seriously and will always take corrective action when aware of such a violation.

- b. No posting or communicating private academic information of another allied health student, including but not limited to grades, narrative evaluations, or adverse academic actions.
2. The following actions are **strongly discouraged**. Violations of these guidelines are considered unprofessional behavior and may be the basis for disciplinary action:
 - a. Display of vulgar language
 - b. Display of language or photographs that imply disrespect for any individual or group because of age, race, gender, ethnicity, or sexual orientation.
 - c. Posting of potentially inflammatory or unflattering material regarding a fellow student, faculty member, or administration.
3. Any allied health student or faculty member who is aware of the use of social networking sites for any of the above prohibited purposes is required to report the misuse. Failure to report is a violation of the college's Conduct Code, Item F, and may result in disciplinary action up to and including dismissal from the program.
4. When using social networking websites, students and faculty are strongly encouraged to use a personal e-mail address as their primary means of communication rather than their mtc.edu address. Students and faculty are expected to maintain professional standards of behavior at all times.

Chris Gates
Dean of Allied Health

Carla/Deb: MS P&P Use of Social Networking Policy
June 25, 2012

**MARION TECHNICAL COLLEGE
MEDICAL IMAGING PROGRAMS**

DEPARTMENTAL POLICIES, REGULATIONS, AND PROCEDURES

Date Issued: 4-2014

POLICY # _____

SUBJECT: Student Mentorship Policy

POLICY: Student Mentorship Policy

The student mentorship policy is designed to assist a junior student to transition into the demanding requirements of the program. Difficult areas for new students typically include time management, coping with stress, maintaining professionalism, and study skills. This provides senior students experience in teamwork, interpersonal communication, and responsibility.

Senior students are expected to mentor a junior student. Mentoring duties include, answering programmatic questions, offering clinical advice, and being supportive and positive as needed.

Senior students should share contact information to their assigned underclassman. It is unacceptable to share specific homework, quiz, or test information. Other violations of this policy include offering negative feedback or comments of clinical sites, clinical staff, program faculty, and/or other aspects about the program.

Violations of cheating and plagiarism may also violate Marion Technical College policies, and may result in dismissal from the program. Each violation of this policy will result in a one point deduction from the professionalism category of clinical course grade. Subsequent violations may result in additional disciplinary action

Director's Signature

Date

Debra/Jessica: Policy and Procedure Manual/Attendance
April 2014

**MARION TECHNICAL COLLEGE
DIAGNOSTIC MEDICAL SONOGRAPHY EDUCATION**

DEPARTMENTAL POLICIES, REGULATIONS, AND PROCEDURES

Date Issued: June 2012

POLICY # _____

SUBJECT: Student Professional Liability Insurance

POLICY:

To act to protect the student while practicing in the clinical area.

PROCEDURE:

1. Students enrolled in any clinical course are required to purchase professional liability insurance. Contracts for the student clinical experience with outside agencies and institutions require this insurance coverage before a student is permitted to participate in a clinical experience.
2. Students enrolled in the clinical course pay a \$15 insurance premium. This charge is recorded under "Other Fees" on the student's quarterly fee statement. No refunds will be made for unexpired coverage due to drop-outs for any quarter.

Director's Signature

Date

Debra/Jessica: Policy and Procedure Manual/Student Professional Liability Insurance
July 2012

MARION TECHNICAL COLLEGE
DIAGNOSTIC MEDICAL SONOGRAPHY EDUCATION
DEPARTMENTAL POLICIES, REGULATIONS, AND PROCEDURES

Date Issued: June 2012

POLICY # _____

SUBJECT: Graduate Survey

POLICY:

Each student will complete a graduate survey on the final day of classes. The results will be tallied and used as a graduate survey outcome assessment.

An alumni survey from MTC or the Diagnostic Medical Sonography Department will be mailed to each graduate one year post graduation. The results of this survey will be compiled and used as an alumni survey outcome assessment.

Survey results are evaluated with communities of interest on an annual basis. This survey evaluation is an opportunity to assess the need to make changes in the program. The program director is responsible for implementing changes.

Director's Signature

Date

**MARION TECHNICAL COLLEGE
DIAGNOSTIC MEDICAL SONOGRAPHY EDUCATION**

DEPARTMENTAL POLICIES, REGULATIONS, AND PROCEDURES

Date Issued: June 2023

POLICY # _____

SUBJECT: Monitoring Student Medical/Physical Documentation

POLICY:

All sonography students are provided the published list of due dates of student's medical/physical information and are expected to be responsible in completing required medical documentation by due dates.

PROCEDURE:

1. All student medical/physical documentation will be submitted to the Clinical Coordinator
2. The Clinical Coordinator creates the master list for due dates of student medical/physical information.
3. The Clinical Coordinator will send monitor regarding due date of student medical/physical records.

**MARION TECHNICAL COLLEGE
DIAGNOSTIC MEDICAL SONOGRAPHY EDUCATION
DEPARTMENTAL POLICIES, REGULATIONS, AND PROCEDURES**

Date Issued: June 2012

POLICY # _____

SUBJECT: Retention of Sonography Students

POLICY:

To identify early those students that may be at risk of administrative withdrawal and implement strategies to retain them.

PROCEDURE:

1. Instructors are required to complete an **Academic Improvement Notice** form by the fourth week of the quarter, or at any time, during the quarter when a student is doing unsatisfactory work (grade of 76% or less). If the course is a self-paced or non-traditional course, an Academic Improvement Notice form will be completed when the student is behind schedule in skill mastery. (A note to instructors: please be as discreet as possible to avoid embarrassing the student).

The Academic Improvement Notice form is available in the **mailroom Forms Rack, Community Faculty Office, and also on the College Intranet and W: Drive, where it can be completed online and printed out.**

2. When completing the form, it is important to offer both a diagnosis of the unsatisfactory performance and a prescription for success. Please be specific by stating which course objectives have not been mastered, which homework has been missed, and what the student can do to improve.
3. Discretely **provide a copy** of the form to the student and **discuss** the listed reason(s) for his or her deficiency.
4. Return the original completed form to the program administrative assistant; provide a copy to the Director of Student Resource Center and a copy to the student.
5. It is highly recommended that the student make an appointment to see their Radiography academic advisor (if the instructor is not their advisor).
6. Advisors will refer the student to the Student Resource Center (SRC), Room 183 of the Technical Education Center, for academic tutoring or other special assistance if needed.
7. Refer the student to the Student Resource Center (SRC) Director, Room 183 of the Technical Education Center, if there are other non-class problems to discuss.

Director's Signature

Date

**MARION TECHNICAL COLLEGE
DIAGNOSTIC MEDICAL SONOGRAPHY EDUCATION
DEPARTMENTAL POLICIES, REGULATIONS, AND PROCEDURES**

Date Issued: 07-15

POLICY # _____

SUBJECT: Transducer and Equipment Usage Policy

POLICY: Transducer and Equipment Usage Policy

Only DMS students and DMS faculty are permitted to touch or operate the MTC ultrasound transducers and equipment. Under no circumstances is any person including patient volunteers or student or patient guests permitted to touch or utilize our transducers or equipment at any time. Any DMS student failing to follow these guidelines will result in disciplinary action.

Director's Signature

Date

Debra/Jessica: Policy and Procedure Manual/Clinical Dress Code
June 2012

**MARION TECHNICAL COLLEGE
DIAGNOSTIC MEDICAL SONOGRAPHY EDUCATION
DEPARTMENTAL POLICIES, REGULATIONS, AND PROCEDURES**

Date Issued: 07-2016

SUBJECT: Clinical Site Log Book Procedure.

POLICY:

Each clinical site shall have a log book provided by Marion Technical College.
The purpose of the log book is to record procedures completed by MTC Students.
Information that should be recorded in the log book.

1. Patient ID number
2. Procedure type
3. Date of procedure
4. % of procedure completed by student

Patient labels may be used if available.
Patient information should never leave the clinical site.
The Log Book should never leave the clinical site.

Failure to keep accurate and updated case logs will result in deductions of professionalism points and loss of points on clinical evaluations.

Confidential information includes, but is not limited to, patient information, accession numbers, on-line data, medical records, passwords, and access codes and key cards to computer systems. Confidential information includes information heard and obtained from others.

Please see Acknowledgement and Understanding of Confidential Information Policy.

Signature

SS #

Date

Director's Signature

Date

Debra/Jessica: Policy and Procedure Manual/Acknowledgement and Understanding of Confidential Information
June 2016

**MARION TECHNICAL COLLEGE
DIAGNOSTIC MEDICAL SONOGRAPHY EDUCATION**

DEPARTMENTAL POLICIES, REGULATIONS, AND PROCEDURES

Date Issued: 07-08-16

SUBJECT: Special Procedures Policy tubes, drains, and catheters.

POLICY:

Students are not permitted to insert, manipulate, or remove any type of tube, drain or catheter. A technologist must be present in the room during this type of procedure. If a student is competent in this type of procedure a technologist is required to manipulate or remove the tube, drain or catheter.

Signature

SS #

Date

Director's Signature

Date

Debra/Jessica: Policy and Procedure Manual/Acknowledgement and Understanding of Confidential Information
June 2012

**MARION TECHNICAL COLLEGE
MEDICAL IMAGING PROGRAMS**

SUBJECT: CLINICAL COORDINATOR CODE OF CONDUCT

PURPOSES: Identify appropriate Clinical Coordinator conduct associated with the Medical Imaging Programs.

Policy:

Expected Conduct:

Clinical Coordinators are expected to behave responsibly and behave in a manner compatible with the philosophy and objectives of the Radiography Program and Marion Technical College. The Program recognizes its responsibility to the healthcare professions it represents and to the consumers of health care. Therefore any action by a Clinical Coordinators considered unprofessional or unsafe conduct shall be deemed cause for disciplinary action.

Clinical Coordinators of Marion Technical College are expected to:

- **Exercise good judgment in all aspects of personal behavior recognizing they represent a MTC Allied Health Care program.**
- **Demonstrate personal integrity and honesty at all times in completing classroom assignments and examinations, carrying out clinical/practicum experiences, and in their interactions with others.**
- **Refrain from acts they know or, under the circumstances, have reason to know will impair their integrity or the integrity of Marion Technical College.**
- Respect the rules and regulations of the Radiography department within the classroom and laboratory as outlined in the Radiography Student Handbook and course syllabus.
- Respect the rules and regulations of the clinical/practicum site as outlined in the orientation process provided by the clinical/practicum site.
- Clinical Coordinators are representatives of Marion Technical College. Their role is to observe student's performing exams, not act as a staff technologist.
- Clinical Coordinators are unable to sign off on exams or access of medical health records of a patient.

Policy Statements:

1. Professionalism. A Clinical Coordinator shall demonstrate appropriate professional conduct and represent the profession effectively while attending MTC. A Clinical Coordinator is expected to demonstrate: effective communication and interpersonal skills, accountability for actions and outcomes, appropriate dress and demeanor, respect for students and instructors, and behavior that preserves the safety of others.

2. Confidentiality. The Clinical Coordinator must abide by the HIPAA rules of privacy and the "Agreement to Respect Confidentiality". A Clinical Coordinator shall not share confidential information with anyone except another healthcare provider that has a "need to know" the information to provide proper health care for that patient or to conduct business within the health care setting.

Authorization

Debra Myers, RT(R), RDMS, RDCS, RVT, BS, M.Ed
Director Medical Imaging Programs

Jessica/Deb: Clinical
Coordinator Conduct Policy December 18, 2015

**MARION TECHNICAL COLLEGE
DIAGNOSTIC MEDICAL SONOGRAPHY EDUCATION**

DEPARTMENTAL POLICIES, REGULATIONS, AND PROCEDURES

Date Issued: 01/28/2021

POLICY # _____

SUBJECT: Clinical Coordinator Evaluation of Students Exception/Contingency

POLICY: Clinical Coordinator Student Evaluation Exception/Contingency Policy

In the event that a clinical site prohibits the Clinical Coordinator from performing an on-site student evaluation, the Clinical Coordinator will request a case review via email. Whereby, the clinical site will choose one or more cases which adequately represent the student's abilities, remove all patient identifying information, and forward the images to the Clinical Coordinator for review and evaluation.

In the event that a case review is not feasible, the Clinical Instructor's Final semester evaluation score will be entered in the gradebook twice. Once for the Clinical Instructor Evaluation grade, and once for the Clinical Coordinator's evaluation score.

Student Signature

Date

Director's Signature

Date

Debra/Jessica: Policy and Procedure Manual/Advanced Placement of Students
January 28, 2021

**MARION TECHNICAL COLLEGE
DIAGNOSTIC MEDICAL SONOGRAPHY EDUCATION**

DEPARTMENTAL POLICIES, REGULATIONS, AND PROCEDURES

Date Issued: 11/16/2017

POLICY # _____

SUBJECT: Clinical Expectation & Student Responsibilities Policy

POLICY:

The following is a list of clinical expectations and student responsibilities required throughout the student's entire clinical education. This also includes laboratory scan times. Failure to adhere to this policy will result in progressive disciplinary action.

Clinical Expectations

1. Report to lead sonographer/clinical instructor on time at clinical site and record time of arrival and departure in HanDBase system.
2. Comply with the student dress code.
3. Wear proper name tag.
4. Refrain from sitting on counter tops, floors, and desks.
5. **Cell phones Smart Watches are prohibited during class and clinical assignments.**
6. Keep voice tone low so patients and visitors will not be disturbed.
7. Use equipment and supplies with concern for patient safety, operator safety, and cost containment.
8. Provide a neat, clean, and orderly work area.
9. Practice Standard Precautions.
10. Maintain a good rapport with students, staff, physicians, supervisors, instructors, patients, and visitors.
11. If there is a question or concern regarding clinical assignments, call the clinical coordinator or program director.
12. Demonstrate confidentiality concerning the patient's right to privacy.
13. Students should remain in their assigned area/room during their scheduled clinical hours. Students are to assist with and perform exams during clinical time. This includes, but is not limited to, preparing patients, performing scans, and reviewing images.
14. If rooms are clean and stocked, students may review notebooks/textbooks that are related to clinical knowledge.
15. Remain current with the applicable semester clinical competency completion schedule.
16. After competency testing, continue to produce quality scans.
17. Students are required to have clinical notebook with them during scheduled clinical hours. They must have pertinent information listed and organized in clinical notebook.
18. Clinical notebooks will be randomly checked by faculty.

Student Responsibilities

1. Learn with observation and hands-on experiences.
2. Set up the room for each scan, prior to bringing patient into room.
3. Review previous study prior to scanning, if applicable.
4. Assist with, or perform, all scans in the assigned room.
5. Instruct and speak to the patient professionally and confidently.
6. Input patient demographics; choose proper transducer and exam type.
7. Assist in dismissing the patients.
8. Review the scan with the sonographer and identify pertinent anatomy.
9. Prepare the room for the next patient.
10. Ask for assistance or information when necessary (not where the patient would overhear).
11. Become familiar with equipment, knobology, registration, and other areas of the hospital.
12. Participate in quality improvement activities.
13. When not scanning patients, the following activities are recommended:
 - a. Stock the room.
 - b. Clean the room and other equipment.
 - c. Update clinical notebook.
 - d. Practice scanning with another student.
 - e. Assist or observe in another room.
 - f. Assist in the office or with other related activities.
 - g. Review clinical information.
 - h. Review knobology and advanced machine features.
14. Record attendance properly and have sonographer verify through HanDBase system.

Director's Signature

Date

Debra/Jessica: Policy and Procedure Manual/Advanced Placement of Students
November 16, 2017

Scope of Practice and Clinical Standards for the Diagnostic Medical Sonographer

April 13, 2015



SCOPE OF PRACTICE REVISION PROCESS

In May 2013, representatives of sixteen organizations came together to begin the process of revising the existing Scope of Practice and Clinical Practice Standards. Thus began a process that engaged the participating organizations in an unrestricted dialogue about needed changes. The collaborative process and exchange of ideas has led to this document, which is reflective of the current community standard of care. The current participants recommend a similar collaborative process for future revisions that may be required as changes in ultrasound technologies and healthcare occur.

PARTICIPATING ORGANIZATIONS

The following organizations participated in the development of this document. Those organizations that have formally endorsed the document are identified with the “†” symbol. Supporting organizations are identified with the “*” symbol.

- American College of Radiology (ACR) *
- American Congress of Obstetricians and Gynecologists (ACOG) *
- American Institute of Ultrasound in Medicine (AIUM) *
- American Registry for Diagnostic Medical Sonography (ARDMS) *
- American Registry of Radiologic Technologists (ARRT) *
- American Society of Echocardiography (ASE) †
- American Society of Radiologic Technologists (ASRT) *
- Cardiovascular Credentialing International (CCI) †
- Joint Review Committee on Education in Diagnostic Medical Sonography (JRC-DMS) †
- Joint Review Committee on Education in Cardiovascular Technology (JRC-CVT) *
- Society of Diagnostic Medical Sonography (SDMS) †
- Society of Radiologists in Ultrasound (SRU) *
- Society for Maternal-Fetal Medicine (SMFM) †
- Society for Vascular Surgery (SVS) †
- Society for Vascular Ultrasound (SVU) †
- Sonography Canada (formerly the Canadian Society of Diagnostic Medical Sonography) *

OTHER SUPPORTING/ENDORISING ORGANIZATIONS

Other organizations that have formally endorsed the document are identified with the “†” symbol. Other supporting organizations are identified with the “*” symbol.

- American College of Phlebology *

Note: *Some organizations have internal policies that do not permit endorsement of external documents. “Supporting organization” denotes a more limited level of review and approval than endorsement and means the organization considers the clinical document to be of educational value, although it may not agree with every recommendation or statement in the document.*

Rev. 11/30/2015

LIMITATION AND SCOPE

Federal and state laws, accreditation standards, and lawful facility policies and procedures supersede these standards. A diagnostic medical sonographer, within the boundaries of all applicable legal requirements and restrictions, exercises individual thought, judgment, and discretion in the performance of an examination taking into account the facts of the individual case.

This document is intended to set forth the standards in major areas of the diagnostic medical sonographer's responsibilities. It does not cover all areas or topics that may present themselves in actual practice. In addition, technological changes or changes in medical practice may require modification of the standards.

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SCOPE OF PRACTICE AND CLINICAL STANDARDS FOR THE DIAGNOSTIC MEDICAL SONOGRAPHER

The purpose of this document is to define the scope of practice and clinical standards for diagnostic medical sonographers and describe their role as members of the healthcare team. Above all else, diagnostic medical sonographers act in the best interest of the patient.

DEFINITION OF THE PROFESSION

Diagnostic medical sonography is a multi-specialty profession comprised of abdominal sonography, breast sonography, cardiac sonography, obstetrics/gynecology sonography, pediatric sonography, phlebology sonography, vascular technology/sonography, and other emerging clinical areas. These diverse areas all use ultrasound as a primary technology in their daily work.

The diagnostic medical sonographer is an individual who provides patient care services using ultrasound and related diagnostic procedures. The diagnostic medical sonographer must be educationally prepared and clinically competent as a prerequisite to professional practice. Demonstration and maintenance of competency through certification by a nationally recognized sonography credentialing organization is the standard of practice in sonography, and maintenance of certification in all areas of practice is endorsed.

The diagnostic medical sonographer:

- Functions as a delegated agent of the physician; and
- Does not practice independently.

Diagnostic medical sonographers are committed to enhanced patient care and continuous quality improvement that increases knowledge and technical competence. Diagnostic medical sonographers use independent, professional, ethical judgment, and critical thinking to safely perform diagnostic sonographic procedures.

A fundamental approach to the safe use of diagnostic medical ultrasound is to apply elements of the *As Low As Reasonably Achievable* (“ALARA”) Principle including lowest output power and the shortest scan time consistent with acquiring the required diagnostic information. The diagnostic medical sonographer uses proper patient positioning, tools, devices, equipment adjustment, and ergonomically correct scanning techniques to promote patient comfort and prevent compromised data acquisition or musculoskeletal injury to the diagnostic medical sonographer.

DIAGNOSTIC MEDICAL SONOGRAPHER CERTIFICATION/CREDENTIALING

A diagnostic medical sonographer must be competent in any sonographic procedure they perform. Certification by a sonography credentialing organization that is accredited by National Commission of Certifying Agencies (NCCA) or the American National Standards Institute - International Organization for Standardization (ANSI – ISO) represents “standard of practice” in diagnostic sonography.

Despite the commonality of ultrasound technology across the field of sonography, the bodies of knowledge, technical skills, and competencies of sonographers in different areas of sonography specialization are markedly different. If performing procedures in any of the following primary areas of sonography specialization, a diagnostic medical sonographer must demonstrate competence in the specialty area(s) through appropriate education, training, and certification:

1. Abdominal Sonography
2. Obstetrical/Gynecological Sonography
3. Cardiac Sonography
4. Vascular Technology/Sonography

If the diagnostic medical sonographer specializes or regularly performs procedures in secondary area(s) of specialization (e.g., breast sonography, fetal cardiac sonography, musculoskeletal sonography, pediatric sonography, phlebology sonography, etc.), the diagnostic medical sonographer should demonstrate competence through certification in the area(s) of practice by a nationally recognized sonography credentialing organization. Employers and accrediting organizations should require maintenance of diagnostic medical sonographer certification in all areas of practice.

NOTE: Temporary or short-term situational exceptions to the certification standard of practice may be necessary (in accordance with applicable federal and state laws and facility policy). For example:

1. Students enrolled in an accredited educational program who are providing clinical services to patients under the direct supervision of an appropriately certified sonographer or other qualified healthcare provider;
2. Sonographers who are cross-training in a new sonography specialty area under the direct supervision of an appropriately certified sonographer or other qualified healthcare provider; and
3. Sonographers who are providing emergency assessment in an urgent care environment where an appropriately certified sonographer is not available in a timely manner.

DIAGNOSTIC MEDICAL SONOGRAPHY CLINICAL STANDARDS

Standards are designed to reflect behavior and performance levels expected in clinical practice for the diagnostic medical sonographer. These clinical standards set forth the principles that are common to all of the specialties within the larger category of the diagnostic sonography profession. Individual specialties or clinical areas may extend or refine, but not limit, these general principles according to their specific practice requirements.

SECTION 1

STANDARD – PATIENT INFORMATION ASSESSMENT AND EVALUATION:

- 1.1** Information regarding the patient's past and present health status is essential in providing appropriate diagnostic information. Therefore, pertinent data related to the diagnostic sonographic procedure should be collected and evaluated to determine its relevance to the examination. The diagnostic medical sonographer:
- 1.1.1 Verifies patient identification and that the requested examination correlates with the patient's clinical history and presentation. In the event that the requested examination does not correlate, either the supervising physician or the referring physician will be notified.
 - 1.1.2 In compliance with privacy and confidentiality standards, interviews the patient or their representative, and/or reviews the medical record to gather relevant information regarding the patient's medical history and current presenting indications for the study.
 - 1.1.3 Evaluates any contraindications, insufficient patient preparation, and the patient's inability or unwillingness to tolerate the examination and associated procedures.

STANDARD – PATIENT EDUCATION AND COMMUNICATION:

- 1.2** Effective communication and education are necessary to establish a positive relationship with the patient or the patient's representative, and to elicit patient cooperation and understanding of expectations. The diagnostic medical sonographer:
- 1.2.1 Communicates with the patient in a manner appropriate to the patient's ability to understand. Presents explanations and instructions in a manner that can be easily understood by the patient and other healthcare providers.
 - 1.2.2 Explains the examination and associated procedures to the patient and responds to patient questions and concerns.
 - 1.2.3 Refers specific diagnostic, treatment, or prognosis questions to the appropriate physician or healthcare professional.

STANDARD – ANALYSIS AND DETERMINATION OF PROTOCOL FOR THE DIAGNOSTIC EXAMINATION:

- 1.3** The most appropriate protocol seeks to optimize patient safety and comfort, diagnostic quality, and efficient use of resources, while achieving the diagnostic objective of the examination. The diagnostic medical sonographer:
- 1.3.1 Integrates medical history, previous studies, and current symptoms in determining the appropriate diagnostic protocol and tailoring the examination to the needs of the patient.
 - 1.3.2 Performs the examination under appropriate supervision, as defined by the procedure.
 - 1.3.3 Uses professional judgment to adapt the protocol and consults appropriate medical personnel, when necessary, to optimize examination results.
 - 1.3.4 Confers with the supervising physician, when appropriate, to determine if intravenous contrast is necessary to enhance image quality and obtain additional diagnostic information.
 - 1.3.5 With appropriate education and training, uses proper technique for intravenous line insertion and administers intravenous contrast according to facility protocol.

STANDARD – IMPLEMENTATION OF THE PROTOCOL:

- 1.4** Quality patient care is provided through the safe and accurate implementation of a deliberate protocol. The diagnostic medical sonographer:
- 1.4.1 Implements a protocol that falls within established procedures.
 - 1.4.2 Elicits the cooperation of the patient to carry out the protocol.
 - 1.4.3 Adapts the protocol according to the patient's disease process or condition.
 - 1.4.4 Adapts the protocol, as required, according to the physical circumstances under which the examination must be performed (e.g., operating room, sonography laboratory, patient's bedside, emergency room, etc.).
 - 1.4.5 Monitors the patient's physical and mental status.
 - 1.4.6 Adapts the protocol according to changes in the patient's clinical status during the examination.
 - 1.4.7 Administers first aid or provides life support in emergency situations.

- 1.4.8 Performs basic patient care tasks, as needed.
- 1.4.9 Recognizes sonographic characteristics of normal and abnormal tissues, structures, and blood flow; adapts protocol as appropriate to further assess findings; adjusts scanning technique to optimize image quality and diagnostic information.
- 1.4.10 Analyzes sonographic findings throughout the course of the examination so that a comprehensive examination is completed and sufficient data is provided to the supervising physician to direct patient management and render a final interpretation.
- 1.4.11 Performs measurements and calculations according to facility protocol.

STANDARD – EVALUATION OF THE DIAGNOSTIC EXAMINATION RESULTS:

- 1.5** Careful evaluation of examination results in the context of the protocol is important to determine whether the goals have been met. The diagnostic medical sonographer:
 - 1.5.1 Establishes that the examination, as performed, complies with applicable protocols and guidelines.
 - 1.5.2 Identifies and documents any limitations to the examination.
 - 1.5.3 Initiates additional scanning techniques or procedures (e.g., administering contrast agents) when indicated.
 - 1.5.4 Notifies supervising physician when immediate medical attention is necessary, based on examination findings and patient condition.

STANDARD – DOCUMENTATION:

- 1.6** Clear and precise documentation is necessary for continuity of care, accuracy of care, and quality assurance. The diagnostic medical sonographer:
 - 1.6.1 Provides timely, accurate, concise, and complete documentation.
 - 1.6.2 Provides an oral or written summary of findings to the supervising physician.

SECTION 2

STANDARD – IMPLEMENT QUALITY IMPROVEMENT PROGRAMS:

- 2.1** Participation in quality improvement programs is imperative. The diagnostic medical sonographer:
 - 2.1.1 Maintains a safe environment for patients and staff.

- 2.1.2 Performs quality improvement procedures to determine that equipment operates at optimal levels and to promote patient safety.
- 2.1.3 Participates in quality improvement programs that evaluate technical quality of images, completeness of examinations, and adherence to protocols.
- 2.1.4 Compares facility quality improvement standards to external metrics, such as accreditation criteria, evidence based literature, or accepted guidelines.

STANDARD - QUALITY OF CARE:

- 2.2 All patients expect and deserve optimal care. The diagnostic medical sonographer:
 - 2.2.1 Works in partnership with other healthcare professionals.
 - 2.2.2 Reports adverse events.

SECTION 3

STANDARD – SELF-ASSESSMENT:

- 3.1 Self-assessment is an essential component in professional growth and development. Self-assessment involves evaluation of personal performance, knowledge, and skills.
 - 3.1.1 Recognizes strengths and uses them to benefit patients, coworkers, and the profession.
 - 3.1.2 Recognizes weaknesses and limitations and performs procedures only after receiving appropriate education and supervised clinical experience in any deficient areas.

STANDARD – EDUCATION:

- 3.2 Advancements in medical science and technology occur very rapidly, requiring an on-going commitment to professional education. The diagnostic medical sonographer:
 - 3.2.1 Obtains and maintains appropriate professional certification/credential in areas of clinical practice.
 - 3.2.2 Recognizes and takes advantage of opportunities for educational and professional growth.

STANDARD – COLLABORATION:

- 3.3 Quality patient care is provided when all members of the healthcare team communicate and collaborate efficiently. The diagnostic medical sonographer:
 - 3.3.1 Promotes a positive and collaborative atmosphere with members of the healthcare team.

- 3.3.2 Communicates effectively with members of the healthcare team regarding the welfare of the patient.
- 3.3.3 Shares knowledge and expertise with colleagues, patients, students, and members of the healthcare team.

SECTION 4

STANDARD – ETHICS:

- 4.1 All decisions made and actions taken on behalf of the patient adhere to ethical standards. The diagnostic medical sonographer:
 - 4.1.1 Adheres to accepted professional ethical standards.
 - 4.1.2 Is accountable for professional judgments and decisions.
 - 4.1.3 Provides patient care with equal respect for all.
 - 4.1.4 Respects and promotes patient rights, provides patient care with respect for patient dignity and needs, and acts as a patient advocate.
 - 4.1.5 Does not perform sonographic procedures without a medical indication, except in educational activities.
 - 4.1.6 Adheres to this scope of practice and other related professional documents.

APPENDIX A. GLOSSARY

For purposes of this document, the following definition of terms applies:

ALARA: an acronym for *As Low As Reasonably Achievable*, the fundamental principle for the safe use of diagnostic medical ultrasound is to use the lowest output power and the shortest scan time consistent with acquiring the required diagnostic information.

Certification: Designates that an individual has demonstrated through successful completion of a specialty certification examination the requisite knowledge, skills, and competencies and met other requirements established by a sonography credentialing organization. Certification also is intended to measure or enhance continued competence through recertification or renewal requirements.

Credential: Means the recognition awarded to an individual who has met the initial (and continuing) knowledge, skills, and competencies requirements of a sonography credentialing organization.

Education: The process undertaken to gain knowledge of facts, principles, and concepts. Education encourages problem solving, critical thinking, and application of the facts, principles, and concepts learned.

Examination: One or more sonographic or related procedures performed to obtain diagnostic information that aids in the verification of health or identification of disease or abnormality.

Interpreting Physician: The physician (e.g., radiologist, cardiologist, gynecologist, obstetrician, vascular surgeon, etc.) who evaluates the results of the diagnostic examination and provides the final report of the findings that is included in the patient's medical record.

Procedure: A specific action or course of action to obtain specific diagnostic information; often associated with a reimbursement procedure code.

Protocol: A written, standardized series of steps that are used to acquire data when performing a diagnostic sonographic examination and its associated procedures.

Referring Physician: A physician who orders a diagnostic examination or refers the patient to a specialized facility for a diagnostic examination. In some clinical environments, the referring and supervising physician may be the same person.

Sonography Credentialing Organization: An organization that is accredited by National Commission of Certifying Agencies (NCCA) or the American National Standards Institute - International Organization for Standardization (ANSI – ISO) that awards sonography credentials upon successful completion of competency-based certification examination(s). Also known as a sonography “registry.”

Supervising Physician: A physician who provides overall medical direction of the sonographer but whose physical presence may not necessarily be required during the performance of a diagnostic examination. The supervising physician is available to review examination procedures and to offer direction and feedback. In some clinical environments, the supervising and interpreting physician may be the same person.

Training: The successful completion of didactic and clinical education necessary to properly perform a procedure in accordance with accepted practice standards. While closely related to education, training is undertaken to gain a specific skill.