



Southwest University

1414 Geronimo Dr.
El Paso, TX 79925
(915)778-4001

Diagnostic Medical Sonographer Program

Clinical Education Handbook

Students, Clinical Instructors, and Clinical Coordinators

2017-2018

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Section 1

Introduction

To assure effective clinical education in the DMS Program at Southwest University, each student, Clinical Instructor, and Clinical Coordinator participating in clinical education must have a full understanding of his/her responsibilities and the considerations involved.

This handbook is designed to provide students, Clinical Instructors, and Clinical Coordinators with information regarding the expectations and policies and procedures relevant to clinical education. It is meant to assist all of these individuals as they work together to provide/receive appropriate, effective clinical experience to assure students make progress toward the goal of becoming competent sonographers.

This Handbook may not be considered a complete statement of all policies at Southwest University or the Ultrasonography Program. Additional information is provided in the Southwest University Catalog and the Student Program Handbook.

This Handbook may be amended at the discretion of the Ultrasonography Program or Southwest University. Students will be provided with written notification of any changes. You are encouraged to keep any notifications of change with the Handbook.

Mission

The mission of Southwest University at El Paso is to provide exceptional career and technical training, promote intellectual growth, critical examination and informed understanding through general education and a commitment to educational excellence strengthened by quality instruction, a positive learning environment and the integration of emerging technologies to enable students to achieve their potential, participate in new employment opportunities and continue to be lifelong learners.

The Diagnostic Medical Sonography program of Southwest University at El Paso is committed to excellence in education demonstrated by providing a comprehensive entry-level education program to students through quality didactic and clinical instruction in the general learning concentration of sonography. The program supports the vision, values, and mission of Southwest University at El Paso by striving to be the premier Diagnostic Medical Sonography training program in our community. In combination, the seven program components ensure the adequacy of a well-rounded program through classes in didactic theory, application and practice of skill sets in the laboratory environment, and integration of didactic theory and acquisition of performance objectives in the clinical setting, bringing as a culmination for the student, the opportunity to obtain the abdomen and OB/GYN certifications.

Consistent with the mission of Southwest University, the faculty of the College of Imaging Sciences is committed to prepare competent entry level general sonographers in the cognitive (knowledge), psychomotor (skills) and affective (behavior) learning domains.

Goals

The goals of the Southwest University Ultrasonography program are:

- Goal #1:** Graduates will be clinically competent.
- Goal #2:** Graduates will be effective problem solvers.
- Goal #3:** Graduates will communicate effectively.
- Goal #4:** Graduates will be professional.
- Goal #5:** The program will be effective in its instructional efforts.

Clinical Education

Clinical education is an integral part of the professional education of ultrasonographers. The Program's mission could not be achieved without it. During clinical education, students will apply the knowledge and skills acquired through classroom and laboratory study on campus in medical settings where they have the opportunity to work with actual patients under the supervision of qualified professionals. Through this well supervised "hands-on" experience, students develop competence and prepare to assume professional responsibility.

During clinical assignments it is important for students to remember that a DMS Department is a service department. It exists to provide service to patients, medical staff, and the community. When students participate in clinical education in any of the Program's recognized facilities, they assume all of the responsibilities of a health care professional. Practicing procedure and patient care skills to gain competence and proficiency is important, but students will also be providing service to patients. Improving knowledge and skill are important components of clinical education, but significant attention will also be given to demonstration of professional attitude, professional conduct, appropriate and effective interpersonal skills, and responsibility and dependability.

While at an assigned facility, students are first students of Southwest University and secondly guests of that particular clinical education setting. Students are expected to follow the rules and protocols of Southwest University and of the assigned facility unless they conflict with Southwest University or Program policy.

Faculty and Administration

The faculty and administration are here to support students' efforts to become competent ultra-sonographers and to help them achieve high levels of success.

| | |
|----------------------|--|
| President | Ben Arriola |
| School Director | Marisol Gutierrez |
| Academic Dean | Jeremy Burciaga MPA |
| Academic Associate | Javier A Gutierrez MD |
| DMS Program Director | Vidal Garcia MD, ARDMS (AB, OB/GYN), RVT |

Clinical Education Settings

Southwest University maintains affiliations with hospitals and clinics in the greater El Paso, Texas. These affiliates serve as Clinical Education Settings where students gain clinical experience under the supervision of qualified professionals. The ultrasonography program, at its discretion, makes the specific clinical assignments for each student. Southwest University may consider student and facility preferences in the assignment of students to clinical education settings, but the Southwest University does not guarantee that these preferences will be met. Enrollment in the Program signifies the student's agreement that he or she will attend the clinical education settings assigned by the Southwest University for the hours and times assigned by the program.

Clinical Education Settings affiliated with Southwest University's DMS Program are subject to change. At the time of this publication, the following settings were recognized Clinical Education Settings.

Del Sol
Del Sol (Vascular Center)
Las Palmas Medical Center
University Medical Center
Hospital of Providence (East)
Providence
Desert Imaging **-Lee Trevino**
 -Joe Battle
 -Castellano
 -Gateway East

Section 2

Clinical Information

Introduction

At Southwest University, clinical education follows successful completion of nine terms of instruction in Sonography classrooms and labs on campus. The student has mastered considerable knowledge of the field prior to clinical education. Clinical education focuses on the new challenge of applying this knowledge in actual practice. The student begins by observing and assisting a sonographer in the performance of duties. As the student gains experience, he or she moves from passive observation to assisting the sonographer in sonography examinations. As additional experience is acquired, the student begins to perform examinations under direct supervision. The student next progresses to documentation of competency on certain procedures, which can then be performed under indirect supervision. The rate at which the student progresses is dependent upon the ability of the student to comprehend and perform the various assigned tasks and the support and encouragement provided by the Clinical Instructor and affiliate staff.

Clinical Plan

Students are assigned to clinical education settings in a manner that assures that students of average or better accomplishment, initiative, and confidence will be able to achieve all of the required competencies and all clinical program requirements within the hours that comprise clinical education courses. All students **MUST** complete any specific clinical site modules prior to entering into the clinical setting. Students will be assigned to at least two different sites with different patient populations, procedures, equipment, and working environments. To be successful, the student must adapt to the type of environment to which he/she has been assigned.

The student must be aware of the differences in equipment between school laboratory and clinical sites. Students must have the knowledge that all equipment have the same basic settings but with different distributions. For example, newer equipment may have specific settings for specific studies which may make it easier/faster to manipulate, which does not discard the student from forgetting the physical principles of ultrasound.

(Translation: The site will not be adapting its procedures and expectations to accommodate the student.)

It is the student's responsibility to become familiar with and abide by all the rules and regulations set forth by the clinical sites

The Clinical Coordinator is responsible for monitoring each student's competency achievement to assure that each student is assigned to clinical education settings that together will give the student the opportunity to achieve all needed competencies. Each term the Clinical Coordinator will assign individual students to specific clinical education settings based on

matching the students' remaining educational needs with the settings' opportunities. Achievement of competencies by each student is monitored throughout each term and if it becomes apparent that a student is unexpectedly not being provided appropriate opportunities (e.g., due to a lower than expected procedure volume) at a given setting the student will be reassigned, unless adjustments at the setting can remedy the problem.

By enrolling in the Program, students have agreed that they will accept assignment to any clinical site made by the program. While student considerations are taken into account, there is no guarantee students will be placed at a site or sites of their choice. Students may have to drive up to 100 miles or more to their respective clinical site each day.

The student will not be placed at a clinical site that they have any affiliation this includes being employed by the facility in any way shape or form. This includes any employment or volunteering duties of immediate family or any relatives regardless of relationship.

Clinical faculty will rule on all situations that arise from the above circumstances. All faculty rulings are final.

The student can be removed from a clinical site if they are not performing, meeting goals, any academic misconduct, and unprofessional behavior or meeting any standards set forth by the site.

If a student is removed from a clinical site for any reason, the student will receive a failing grade and be removed from the program.

Every student must complete a required 900 hours of scheduled clinical education to qualify for graduation from the Diagnostic Medical Sonography Program.

Students are responsible for their own transportation to and from clinical sites. To be prompt, students must have reliable transportation and knowledge of how to reach the clinical site and the assigned area within each particular clinical site.

Every effort is made to inform students of their assigned site at least two weeks in advance of the beginning of the term; whenever possible students will receive their assignments four weeks in advance. However, because unforeseen changes in personnel or other changes at clinical education settings are beyond the control of the Program, this is not always possible.

It is required for all enroll DMS students to take the abdomen (AB) and obstetrics and gynecology (OB/GYN) examination tests essential to Sonography Professionals. The (AB) test has to be schedule in the beginning of the term that corresponds to Clinical Practicum II 260, in order to be taken during the term that corresponds to Clinical Practicum IV 280 term, and, (OB/GYN) test has to be schedule by the end of Clinical Practicum IV 280 term.

Any student that fails to attempt the Abdomen (AB) examination test and/or to schedule the (OB/GYN) examination test will not be granted a degree from Southwest University at El Paso, until such criteria is accomplished.

Clinical Education Schedules

Each student assigned to a clinical education setting will have a weekly schedule approved in advance by the Clinical Coordinator and/or the Clinical instructor. This schedule will provide starting and ending times for each day of the week and will total not more than forty hours per week.

Students are given the same amount of time for coffee and lunch breaks as staff sonographers at the institution. All students must take regular lunch breaks.

Any deviation from the approved schedule must be approved in advance. This includes any change in starting or ending times and change in days of the week. Assigned clinical hours may not exceed 40 hours per week. Students will be credited with only actual hours of attendance that are pre-approved.

If a student attends hours that are not pre-approved, those hours will not be recorded toward satisfying course requirements. It is also important to note that a student who attends hours that are not pre-approved is not covered by professional liability insurance.

Every effort will be made to give students advance notice of changes in required schedules occasioned by changes in staffing or circumstances at the clinical education setting. Clinical schedules will not be changed to accommodate student work schedules or to accommodate other personal situations of the student.

Clinical Observation and Assistance

As the student begins clinical education, active participation is limited until the student has had the opportunity to observe some of these procedures. At that point the rate of progress is dependent upon the student's ability to perform the tasks assigned by the instructor or staff technologist in that area.

Supervision

ALL Sonography work performed by students must be done under the appropriate supervision of a qualified practitioner, i.e., an individual who holds certification and current registration as a sonographer from the American Registry of Diagnostic Medical Sonographer (ARDMS), American Registry of Radiologic Technologists (ARRT) or American Registry Sonography Tech (ARST). The following levels of supervision are required.

Direct Supervision

Prior to documentation of competency, direct supervision is required.

Direct supervision means that the qualified sonographer:

1. Reviews the request for the examination in relation to the student's achievement,
2. Evaluates the condition of the patient in relation to the student's achievement,
3. Is present during the performance of the examination, and
4. Reviews and approves the sonogram exam.

Indirect Supervision

After *documenting* competence in the performance of a specific sonography procedure, the student may perform that exam under indirect supervision.

Indirect supervision means that the qualified sonographer:

1. Reviews, evaluates and approves the examination, and
2. Is immediately available to assist the student.

Immediately available means the sonographer could hear the student ask/shout for help (electronic communication is not acceptable) and could interrupt his/her own work to go immediately to the aid of the student.

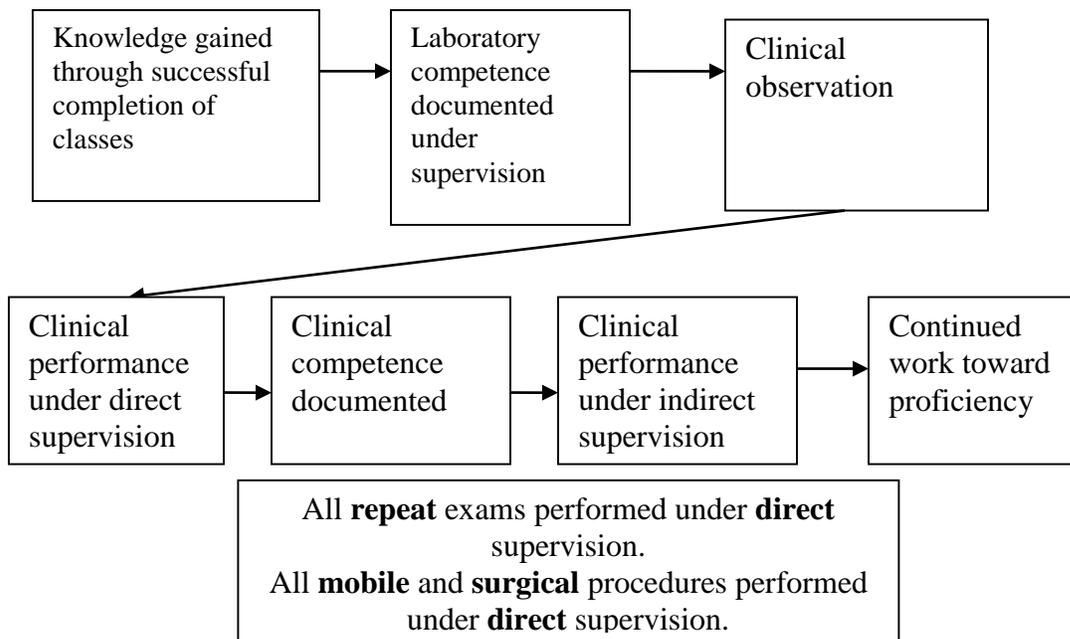
Repeat Sonography Exams

All repeat exams, regardless of the level of student achievement, must be performed under direct supervision.

Supervision requirements are important from a number of perspectives. First and foremost, they assure patient safety in procedures performed by students. Secondly, they are policy requirements of the program. Thirdly, they are required by the Program accreditor. Accordingly, any student who violates a supervision policy is subject to disciplinary action.

If students are requested by supervising personnel and/or a Clinical Instructor to perform a procedure contrary to the supervision policies, they should immediately report the situation to the appropriate Clinical Coordinator.

Clinical Educational Flow Chart



Key Personnel

Program Director

The Program Director is ultimately responsible for assuring that clinical education is appropriate and effective. Although you will not see the Program Director regularly at clinical sites, he works closely with the Clinical Coordinator to monitor clinical activities and student progress. Students should not hesitate to contact the Program Director if they believe there are issues not being addressed appropriately by the Clinical Coordinator.

Clinical Coordinator

The Clinical Coordinator may be a full time faculty member or part-time faculty member working in conjunction with the Program Director, who is responsible for overseeing the day to day effectiveness of clinical education. The Clinical Coordinator work together to assure that students receive similar experiences at the wide variety of clinical education settings and to confirm that appropriate University policies and procedures are consistently observed.

The Clinical Coordinator has assigned clinical education settings, which he or she visits on a weekly basis. During this visit, the Coordinator will meet with both the site's Clinical Instructor(s) and the assigned students to review student progress. At sites considerably distant from the campus, the Clinical Coordinator makes bi-weekly visits and otherwise monitors student progress by way of telephone calls and/or e-mail.

The Clinical Coordinator considers the weekly reports on the student's progress from the Clinical Instructor and combines that information with the Clinical Coordinator's own observation to provide the student with ongoing guidance and direction. At the mid-term the Clinical Coordinator summarizes student progress to that point. In instances where the student's progress is below expectations, the Clinical Coordinator will provide written notice to the student of the area(s) requiring attention and improvement by the end of the term for the student to pass the course.

The Clinical Coordinator considers the weekly reports on the student's progress from the Clinical Instructor and combines that information with the Clinical Coordinator's own observation to provide the student with ongoing guidance and direction. At the term mid-term the Clinical Coordinator summarizes student progress to that point. In instances where the student's progress is below expectations, the Clinical Coordinator will provide written notice to the student of the area(s) requiring attention and improvement by the end of the term for the student to pass the course.

At the end of the term, the Clinical Coordinator evaluates the student's overall progress and assigns a grade for the course. The grade derivation is provided in the syllabus for the particular clinical course.

Any student who encounters difficulties during his/her clinical education experiences is encouraged to contact the Clinical Coordinator as soon as possible for advice and assistance. Clinical Coordinator is not able to address issues/concerns that have not been brought to his/her attention.

Clinical Instructor

In each recognized clinical education setting, one or more individuals are assigned to serve as the Clinical Instructor. This individual is a sonographer employed by the clinical education setting and is responsible for *general* supervision of the student during the assignment at that clinical education setting. Generally, these individuals are volunteers who are not compensated for the extra time and effort required of them as clinical instructors.

The Clinical Instructor monitors the student's assignments to specific responsibilities and tasks at the clinical education setting and provides evaluation of the performance of those tasks and responsibilities. The Clinical Instructor provides the Clinical Coordinator a weekly evaluation of the student's progress.

The Clinical Instructor signs the student's weekly time sheet, verifying that the sheet accurately reflects the student's hours of attendance. The Clinical Instructor documents any significant incidents involving the student so that the University may respond appropriately, particularly where the student's conduct raises disciplinary questions or brings into question the student's suitability to continue in the clinical education setting or in the profession.

The Clinical Instructor may attend periodic meetings, training sessions, or workshops to assure that Southwest University benefits from the Clinical Instructor's feedback about the

clinical education of students and to assure that the Clinical Instructor maintains an accurate understanding of the Program’s mission, goals, and policies and procedures regarding clinical education.

Section 3

Clinical Evaluation

Competency Based Education

The intent of competency-based education is to assure that students are able to perform specific DMS procedures competently. Instead of global evaluations of ability, each student is required to perform DMS procedures competently under the direct supervision of a qualified practitioner. Upon documentation of competency, the student is allowed to perform those procedures under indirect supervision and is expected to work toward increased proficiency with that exam.

Competency Evaluation

Each student is required to complete twenty-two (22) mandatory and five (5) of the sixteen (16) elective clinical competencies prior to graduation. Completion of these competencies is a requirement for certification by the American Registry of Radiologic Technologists.

Students are responsible for arranging for a qualified evaluator to be present during the competency evaluation. Clinical Instructors, Clinical Coordinator, or registered staff sonographers may observe the procedure and complete the evaluation of the student’s procedural skills during the examination.

To qualify for the certification examination administered by the ARDMS, or ARRT, students must demonstrate competence in all 22 procedures identified as mandatory (M) and, at least, 5 of the 16 elective procedures listed below.

DMS Clinical Competency Requirements

| Mandatory Sonographic Examinations | Elective Sonographic Evaluations |
|---|---|
| Abdomen | General |
| Liver | Breast |
| Gallbladder/biliary tract/CBD | Musculoskeletal |
| Pancreas | Adrenals |
| Spleen | Superficial Masses |
| Kidneys | Appendix |
| Bladder | Abdominal wall |

| | |
|--|-----------------------------------|
| Aorta | Prostate |
| IVC | Fetal biophysical profile |
| Main Portal Vein | Vascular |
| Vasculature (e.g. hepatic, renal, aortic branches) | Post catheterization complication |
| Superficial Structures | Venous extremity |
| Scrotum and testis | Carotid |
| Thyroid | Pediatric |
| Gynecology | Head |
| Uterus | Spine |
| Adnexa (including ovaries) | Hips |
| Obstetrics | Pyloric stenosis |
| First trimester | Intussusception |
| Second trimester | |
| Third trimester | |
| Non Cardiac Chest | |
| Biopsy | |
| Aspiration | |
| Drainage Procedures | |

Students must complete the competencies identified above demonstrating appropriate:

- Patient preparation, including evaluation of requisition or medical record, preparation of exam room, identification of patient, infection control procedures (i.e., standard precautions), patient assessment, and instruction concerning the procedure;
- Exam protocol, including patient positioning, sonographic technique, parameter selection, image display, image annotation and labeling, archiving, and documentation of procedure;
- And image evaluation, including image quality, optimal demonstration of anatomic region and pathology, and exam completeness.

Students must be evaluated while scanning actual patients. Simulation is not acceptable for final competence assessment.

Note: No more than one competency will be granted for any one procedure.

Revoked Procedures

If during a term, a student does not demonstrate continued competency in performing any of the examinations for which the student has documented competency, the competency will be revoked for that procedure. If the competency was completed in that term, the grade for that competency will no longer be used in calculating the grade for the term. A student is expected to attempt to retest on a revoked competency at the earliest opportunity.

Affective Skills Evaluation

The competency based evaluation described above focuses primarily on the student's demonstration of the knowledge (cognitive) and skills (psychomotor) required of sonographer.

The third critically important area of development in the education of a sonographer is professional behavior or affective skills.

The DMS Program emphasizes and evaluates the following affective skills throughout the student's education:

- Attendance/punctuality – reporting to the assigned clinical site on time and being present for all assigned hours
- Responsibility – being accountable for one's actions
- Respect – being respectful to patients, peers, supervisors, faculty, and others
- Communication - communicating clearly and appropriately
- Initiative – seeing appropriate potential activities without prodding
- Cooperation – being a team player who works well with others and carries out directives from supervisors
- Judgment – seeking supervision when appropriate
- Attitude – having a positive attitude, expecting and seeking good outcomes

The Clinical Coordinator, using personal observation and reports from the Clinical Instructor and other professionals at the clinical education setting, evaluates each student as either “satisfactory” or “unsatisfactory” at the mid-point and the end of each term. Unsatisfactory ratings at the mid-point will result in a written warning to the student as to the deficiencies that must be corrected. Unsatisfactory ratings at the end of a term will result in the student failing the term.

Clinical Course Syllabi

The specific objectives and requirements for each clinical course are included in the course syllabus.

Grading

Southwest University at El Paso (SU) has established minimum standards of “satisfactory progress” for enrolled students. All students must meet SU Satisfactory Academic Progress requirements. The standards for determining progress at SU are described in the University Catalog.

Clinical Advisement

Weekly Progress Reports

These forms are used by the Clinical Coordinator to obtain information from both the Clinical Instructor and the student regarding student progress. The Clinical Coordinator discusses the contents of the report weekly with the student.

Mid-Term Evaluation

The Clinical Instructor completes a mid-term evaluation of each student. This evaluation is then used by the Clinical Coordinator as the basis of discussion with the student regarding strengths and areas for improvement. If the student is marked unsatisfactory in any area, an action plan will be developed to remedy the deficiency.

Final Term Evaluation

At the end of each term, the Clinical Instructor will complete an end-of-term evaluation. The Clinical Coordinator prepares a summary report of the student's progress and assigns the grade for the term.

Section 4

Clinical Protocols

Clinical Time/Records

Completion of the scheduled 900 clinical hours is a requirement for graduation from the Southwest University DMS program. Regular attendance is an essential expectation. Students are expected to report promptly for clinical education on all scheduled clinical days. Failure to do so is included in evaluating the student's progress in the affective domain (professionalism). Additionally, repeated absences, even if made up, can result in failure of the clinical course. No student should be absent from clinical education except in cases of illness and/or emergency.

All students are required to be present in their assigned areas for clinical education during the hours established by the Clinical Coordinator and Clinical Instructor. Students may not leave the Imaging department or clinical education setting without notifying the Clinical Instructor or the Clinical Instructor's designee.

The student must accurately record time of arrival and departure and actual hours of attendance on a time sheet provided by Southwest University through Trajecsys. The student must record this time through their smartphone, tablet or computer.

Any student who falsifies time records by reporting inaccurate hours or by forging signatures will be subject to discipline up to and including dismissal from the program, even for a first offense.

Absence from Clinical Education

In the event a student cannot attend clinical education, the student must call in to the Clinical Education Setting and speak to the Clinical Instructor or the Clinical Instructor's designee. The student must also call the Clinical Coordinator. These calls must be made not

later than 30 minutes after the designated start time. The reason for every absence from clinical education must be documented and will be considered by Southwest University in determining any action based on the absence. It is the student's responsibility to provide documentation for any absence. In the absence of documentation Southwest University will assume the absence was unnecessary and treat it as such in any disciplinary or grade actions. The Student will be allotted 2 days for personal/sick time. These days still must be made up due to the state requirements for completed clinical hours. If the student misses a 3rd day, the student will be removed from the clinical course and receive an F grade and have to sit out the remainder term.

With proper documentation, the following circumstances may be considered by Southwest University as mitigation for an absence:

- Funeral
- Jury duty
- Military duty
- Professional meetings
- Southwest University student activities
- Illness documented by a physician

Unmitigated Absences and Discipline

If a student is absent from a clinical assignment and does not provide proof of one of the mitigating circumstances set forth above, Southwest University will initiate the following corrective actions:

If the student misses a 3rd day, the student will be removed from the clinical course and receive an F grade and have to sit out the remainder term. The Clinical Coordinator will document and student will be required to meet with the Program Director.

No Call – No Show Absence and Discipline

In the event that a student is absent from a clinical assignment and does not call the clinical site and the clinical coordinator, Southwest University will initiate the following corrective action due to the seriousness of the offense:

Tardiness

Punctuality is important, three tardies constitute an absence. Tardiness is defined as more than five minutes late or leaving more than five minutes early. Tardiness of one-half hour or more is considered an unmitigated absence. Excessive or unwarranted tardiness will be noted by the Clinical Coordinator and Clinical Instructor in evaluating the student's progress in the affective domain and may result in the student failing the clinical course regardless of the student's achievement otherwise.

Time

The registrar only recognizes and records time in 15 minute intervals. Please round your time to the nearest quarter hour.

Make-up Time

All absences from clinical education must be made up by the completion of the student's final term. If the student chooses to make up absences within the time allotted for the term by arranging approved hours during term breaks, then the student can progress normally to the next term or to graduation. If the student does not make up absences within the time frame of the term, the student may not be able to advance to the next term or to graduation. Southwest University will not "hold" a clinical education spot for a student whose absences have placed him or her off the anticipated schedule, and the opportunity to make up missed days and to move forward will be based on availability of an appropriate clinical placement without disruption to other students. Make-up time must be scheduled with the Clinical Coordinator and Clinical Instructor in advance, in writing, and may not be done without such approvals. As noted previously, **students attending the clinical education setting at times other than those approved by the Clinical Coordinator are not covered by professional liability insurance, and the time completed will not be counted. The student may face disciplinary action if he or she attempts to make-up time at a non-assigned clinical facility.**

Appearance

Students are expected to maintain a neat and professional appearance at all times. The image a student presents has a direct impact on how he/she is perceived as a student and as a professional. If the student's appearance is unacceptable at any time, the student will be directed to leave the clinical setting to correct the problem. Any time missed must be made up.

Uniform

When engaged in clinical education the student may wear the Southwest University or appropriate, approved scrub suits that meet the dress code of the facility. They must be clean and wrinkle-free. Footwear consists of shoes with nonskid soles and closed-toe leather or vinyl uppers. Students are not allowed to wear anything other than the approved scrubs, even if the employees of a site are allowed to observe events like casual Fridays.

Hygiene/Grooming

Good personal hygiene will be maintained at all times. Cosmetics, perfumes, hair and other hygiene products must be moderate and not offensive to patients or staff. Long fingernails and artificial fingernails are prohibited. Not allowed at all! Long hair, dreadlocks, afros, hair extensions, weaves etc. must be off the collar and pulled back. If this is not possible, the student will wear a surgical cap, no exceptions. Hair must be natural color or close proximity. Extreme

non-natural artificial colors are prohibited. Not allowed at all! Beards and mustaches must be kept neat and trimmed, no more than ¼ quarter inch in length. No exceptions.

Jewelry must be kept to a minimum for safety and to be consistent with professional appearance. Body piercing is prohibited for safety. Long and/or artificial fingernails are prohibited. Visible body piercing is prohibited only 1 pair of earrings is acceptable. Hoop or dangling earrings are not acceptable. Tattoos are not consistent with professional appearance and must be removed and/or covered at all times during clinical education courses.

Identification

The student must wear the Southwest University name badge at all times in the clinical setting. Students who do not have these will be sent home to get it and must make up any time missed.

Conduct

Students are expected to conduct themselves in a professional manner at all times during clinical education. As indicated in the introduction, students participating in clinical education experiences assume all of the responsibilities of a health care professional.

Language

Students are expected to use professional language at all times. Profane and/or abusive language or body language to any faculty or clinical staff will not be tolerated.

Substance Abuse and Drug Testing

Some clinical sites also require completion of criminal background checks prior to the beginning of an externship. The student is responsible for the costs of such checks. Refusing to undergo a background check or failing one is treated as a dismissal from a clinical site.

As indicated in Southwest University catalog, students may be required to submit to random drug screening, based on reasonable suspicion that the student is in violation of Southwest University Code of Conduct. Accordingly, random drug testing during clinical terms may be requested. Refusing, tampering or failing a drug test is treated as a dismissal from a clinical site.

The use of illicit drugs or intoxicants on campus or at any clinical education setting or entering Southwest University or clinical education setting under the influence of such is prohibited by the *Student Code of Conduct* contained in Southwest University Catalog and the student handbook. All problems should be reported to the Clinical Coordinator and Program Director. Any student in violation of this policy is subject to immediate disciplinary action, up to dismissal from the Program

Background Screening

Southwest University requires background screening prior to entering the DMS program. The student will be responsible for the cost of such testing. Students may not request placement at a site that does not require such screening. Failing a background screening test or tampering with the urine/blood sample, will result in denial to enter an externship site, and will be treated as a dismissal from the clinical site. Clinical placement cannot be guaranteed following a failed background screening. Please visit the following web site for further information. <http://www.swuniversitybackground.com>

Health Insurance Portability and Privacy Act

Students are reminded of the critical importance of the confidentiality of all patient information. No patient or any aspect of his/her care should be discussed outside of the clinical setting. Even a first offense related to violation of patient confidentiality will result in disciplinary action and can result in dismissal from the program.

Cell Phones

Students may not have cell phones in their possession in the Imaging Department. Students may use cell phones only when on breaks outside the imaging department. Emergency calls for a student should be directed to the imaging department.

Smoking

Smoking and or smokeless tobacco products by students are not permitted in any of the clinical education settings. These sites are considered smoke-free environments. If the hospital tests for nicotine you may be subject to a laboratory test for nicotine. If it is the hospital policy and you break it, you will be dismissed from clinical and from the program. This is to include all smokeless tobacco as well.

Patient Visitation

Students may not visit friends or family who are patients during clinical hours. Visitation is restricted to non-clinical hours.

Section 5

Student Safety, Health, and Welfare

Introduction

The DMS Program takes seriously the safety and welfare of its students. Considerable classroom time is devoted to learning about safe practices as it relates to DMS, infection control,

patient care, and personal protection. Students are strongly encouraged to put this knowledge to effective use in the clinical setting, for the benefit of themselves, their patients, and the clinical education setting. **DMS students are encouraged not to leave the designated sonography premises, specifically, in areas of radiation, where exposure can be harmful.**

The following policies and procedures are part of the Program's efforts to assure student safety.

Pregnancy

Declaration of pregnancy is voluntary. However, no student will be considered pregnant and be offered continuation options unless the pregnancy has been declared using the Program's Declaration of Pregnancy form.

To declare pregnancy, the student must complete a Declaration of Pregnancy form and submit it to the Program Director. The declaration must be in writing and may be withdrawn at any time. If the declaration is not withdrawn, it is considered expired one year after submission.

The student will provide written notice of her choice of the following options with regard to program continuation:

Option 1

There will be no restrictions whatsoever as a result of declaring the pregnancy. The student will be expected to complete all academic and clinical requirements without modification.

Option 2

The student will continue in both classroom and/or clinical work as scheduled. However, the student will not participate in any procedures where radiation would be used. Pregnant students choosing this option are also restricted from procedures involving radium-implant patients.

Substitute clinical rotations will not be provided. All clinical rotations missed by the student must be made up at the end of the program. This may result in delayed program completion.

Option 3

The pregnant student may request a leave of absence not to exceed one year and either withdraw from or attempt to complete the courses in which she is currently enrolled. A place in the next class would be reserved for the student; the student would not be required to submit another application for admission.

Option 4

The pregnant student may request to withdraw from the Program for an indefinite period of time. If she wishes to re-enroll, she must submit an application for admission and compete for

admission to the Program. Any previous course work would be reevaluated at the time of readmission to assure competency has been maintained.



Pregnancy Declaration Form

I _____ declare my pregnancy and elect the following option

(circle one):

- Option 1** I request no modification whatsoever in my Program.

- Option 2** I request to not participate in any procedure where radiation would be used. I understand that I must complete the required competencies prior to graduation and that may include making up rotations in these areas.

- Option 3** I request a leave of absence, not to exceed one year. I intend to complete the course(s) in which I am currently enrolled.

- Option 4** I request a leave of absence, not to exceed one year. I will withdraw from the course(s) in which I am currently enrolled.

Student Signature: _____

Today's Date: _____

Estimated Date of Delivery: _____

Program Director Signature: _____

Personal Injury

If a student suffers a personal injury such as a fall or needle stick while at a clinical education setting, he/she should seek immediate treatment for the injury. After treatment the student should fill out an incident report from both the clinical site and the Program and submit it to the Clinical Coordinator as soon as possible. The student is responsible for payment of any costs incurred.

Health Services and Insurance

The student is strongly encouraged to have health insurance coverage. Some clinical sites require documentation of health insurance as a condition of placement.

Students in need of emergency medical care while at a Clinical Education Setting are treated as Southwest University appropriate and billed for services. Neither Southwest University nor any of the clinical education settings assume responsibility for medical expenses that may be incurred; students are personally responsible for the cost of such care.

Professional Liability Insurance

Southwest University provides professional liability insurance for students while engaged in pre-approved clinical learning activities. The cost of this insurance is covered in clinical education course fees. This insurance does not cover students who participate in clinical education without a pre-approved schedule or those who work in clinical settings outside of scheduled clinical education time.

Infection Control

Infectious disease continues to be a source of unnecessary morbidity in many clinical settings. Students are strongly advised to practice the skills learned in the classroom regarding infection control, particularly as it relates to handwashing. Students must also comply with the requirements of the assigned clinical site regarding infection control practices.

Immunizations

Before beginning clinical education, all students are responsible for showing proof of MMR and varicella immunity and a recent two step negative tuberculosis skin test or, if appropriate, follow-up care. If the student cannot provide assurance of immunity, the student must document MMR and varicella immunizations. Hepatitis B vaccination is strongly encouraged but not required; those declining Hepatitis B vaccination must sign a refusal of Hepatitis B immunization. Flu immunization may be required by a site if that is the case the student will need to be immunized. The student will not be placed into a new site if a flu shot is refused. The student always has an option to sit the term out and be placed in a new site. However, a seat or re-entry is not ever guaranteed.

Infectious Disease

Students with infectious disease, other than a common cold, may not attend clinical education. The student should inform the Clinical Coordinator and the Clinical Instructor immediately upon diagnosis.

Freedom from Harassment

The Program strives to provide an educational environment that is free from all forms of discrimination and conduct that can be considered harassing, coercive, or disruptive, including sexual harassment. This includes all clinical education settings. It expects all faculty and students to treat others with dignity, respect, courtesy, and honesty.

If a student believes he or she is being subjected to comments or conduct of a sexual nature, where the behavior tends to threaten, offend, or create a hostile environment, the student should immediately report such conduct to the Clinical Coordinator or Program Director. If the offense is perceived to be on the part of the Program Director or Clinical Coordinator, then the conduct should be reported to that individual's immediate supervisor.

Orientation

Each student will receive an orientation to the clinical site upon initial assignment. It is important for both the student and the site that this occurs as soon as possible. In the event of questions or concerns in regards to the information provided during orientation, the student must feel free to address any concern with the program director or clinical coordinator.

Incident Reporting

In the case of any unusual incident, it is important for the student to submit an incident report. Both the clinical setting's incident report form and Southwest University incident report form must be completed and appropriately submitted. Failure to complete and submit appropriate reporting forms is grounds for discipline, up to and including dismissal from the Program.

Section 6

Student Discipline

Introduction

Students are subject to the same disciplinary procedures during clinical education courses as during classroom instruction on campus. This handbook has specific rules for the students of the DMS program which have committed actions that need disciplinary actions, therefore is

independent from the SU students' handbook and disciplinary actions are not arguable intending to counteract one handbook with the other.

Dismissal from a Clinical Site

Although clinical affiliates or affiliate personnel cannot dismiss students from the Program, they do have the right to ask for removal from the site of a student if, in their opinion, the student is not performing up to his or her level of education, fails to act professionally, or is not reliably attending clinical education. If a student is asked to leave a clinical site prior to the end of a term, the Program cannot guarantee another placement that allows the student to successfully complete the term. The student may or may not receive another placement. The out-of-sequence student will be lowest in priority for clinical assignment. The student may receive an F for the clinical term, and the hours accumulated during the term will not count toward the graduation requirement. ***If a student is asked to leave more than one clinical site, the student will be dismissed from the Program.*** The student can be removed from a clinical site if they are not performing, meeting goals, any academic misconduct, unprofessional behavior or meeting any standards set forth by the site as stated above and on page 8 of this document.

If a student is removed from a clinical site for any reason, the student will have to wait a minimum of one term or more depending upon availability of a clinical site.

Being removed from a clinical site does not lead to automatic replacement it may lead to expulsion from the program.

Appendix A

SDMS Scope of Practice

Preamble:

The purpose of this document is to define the Scope of Practice for Diagnostic Ultrasound Professionals and to specify their roles as members of the health care team, acting in the best interest of the patient. This scope of practice is a "living" document that will evolve as the technology expands.

Definition of the Profession:

The Diagnostic Ultrasound Profession is a multi-specialty field comprised of Diagnostic Medical Sonography (with subspecialties in abdominal, neurologic, obstetrical/gynecologic and ophthalmic ultrasound), Diagnostic Cardiac Sonography (with subspecialties in adult and pediatric echocardiography), Vascular Technology, and other emerging fields. These diverse specialties are distinguished by their use of diagnostic medical ultrasound as a primary technology in their daily work. Certification¹ is considered the standard of practice in ultrasound. Individuals who are not yet certified should reference the Scope as a professional model and strive to become certified.

Scope of Practice of the Profession:

The Diagnostic Ultrasound Professional is an individual qualified by professional credentialing² and academic and clinical experience to provide diagnostic patient care services using ultrasound and related diagnostic procedures. The scope of practice of the Diagnostic Ultrasound Professional includes those procedures, acts and processes permitted by law, for which the individual has received education and clinical experience, and in which he/she has demonstrated competency.

Diagnostic Ultrasound Professionals:

- Perform patient assessments
- Acquire and analyze data obtained using ultrasound and related diagnostic technologies
- Provide a summary of findings to the physician to aid in patient diagnosis and management
- Use independent judgment and systematic problem solving methods to produce high quality diagnostic information and optimize patient care.

Appendix B

SDMS Code of Ethics

Approved by SDMS Board of Directors, December 6, 2006

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 sonographer identifies 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.

Appendix C

2018 Term Calendar

2018 Calendar

Six Week Modules

| | |
|-------------------|-------------------|
| 01/03/2018 | 02/14/2018 |
| 02/19/2018 | 04/02/2018 |
| 04/03/2018 | 05/14/2018 |
| 05/15/2018 | 06/25/2018 |
| 06/26/2018 | 08/07/2018 |
| 08/08/2018 | 09/20/2018 |
| 09/24/2018 | 11/02/2018 |
| 11/05/2018 | 12/20/2018 |

Acceptance of Responsibility

(Effective 2013)

I have received an electronic copy of the Southwest University Clinical Education Handbook.

I accept responsibility for *understanding* the policies and procedures set

forth and for *complying* with them throughout my enrollment in the Program.

(Failure to return this sheet will delay clinical placement.)

Student Name: (Please print) _____

Student Signature: _____

Date: _____