

Diagnostic Medical Sonography Program

Rochester Institute of Technology



Policies and Procedures

The Policies and Procedures Handbook is provided to help guide and educate students about the policies, rules, responsibilities, and regulations of the Rochester Institute of Technology Diagnostic Medical Sonography Program. Students should familiarize themselves with it before beginning class work.

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Obtaining the skills to practice medical ultrasound is a complex process. A carefully planned course of study has been developed to offer a balance of didactic and practical knowledge. Many opportunities, in the form of evaluations, are provided for measurement of progress by both faculty and students. In addition to a fully staffed Academic Support Center with a mission to **assist** and **empower** students to achieve academic success, individual instruction may be provided in certain instances. Every effort is made to provide a complete learning environment. Even though the Program provides a variety of experiences, learning situations, and tools, the single greatest factor, **motivation**, is essentially up to the student.

This Policies and Procedures Handbook is to be the student's guide for completion of the Diagnostic Medical Sonography Program at RIT. If students are in doubt about the intent or content of any of the following material or if they do not find the information they need, it is their responsibility to initiate a discussion with the program director/faculty. Ultimately it is the student's responsibility to seek out answers to any questions or concerns regarding the following material. Students must not hesitate to call on the Program Director, the Clinical/Concentration Coordinator or program faculty for any questions or situations which may arise. This Handbook may be periodically updated or amended. Should this occur, students will be notified. **Students will be required to read this Handbook and sign a statement form verifying that fact. The student's signature will serve as proof that student has read, understand and agree to abide by the guidelines presented herein. This statement form can be found on the back page of this Handbook and must be signed and returned to the program director or clinical/concentration coordinator no later than the second week of fall classes.**

Program Faculty

The student must direct all questions related to didactic work and clinical experience to the Program Director and/or to the Clinical/Concentration Coordinator. Students must keep the addresses (email and phone numbers) on the next page close at hand. Students should contact the Program Director or the Clinical/Concentration Coordinator immediately should any problems or questions arise. Contents presented in this Handbook are in accordance with the Rochester Institute of Technology Bulletin and Policies & Procedures. Additional information can be found on program's (<https://www.rit.edu/healthsciences/undergraduate-programs/diagnostic-medical-sonography>) and RIT's (rit.edu) websites.

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The faculty and staff of the Diagnostic Medical Sonography Program welcome each student and wish him/her well in his/her studies. We will do our best to help each student accomplish his/her goals. Students are our top PRIORITY.

The following reflects the mission of the Rochester Institute of Technology and the Diagnostic Medical Sonography Program:

Mission of the Rochester Institute of Technology

Mission

Through a unique blend of curricular, experiential, and research programs delivered within a student-centric culture, Rochester Institute of Technology prepares its students for successful careers in a global society.

Vision

RIT will be a great world university whose academic portfolio, research agenda, and educational model align with the shifting needs of a complex planet.

Strategic Plan

Read the Greatness Through Difference: 2015-2025 Strategic Plan.

https://www.rit.edu/president/strategicplan2025/pdfs/strategic_plan.pdf

Values

- Student Centeredness: Exhibits behavior, performs duties of position, and/or makes decisions that demonstrate and/or support the importance of students as the primary constituency of the university and/or contributes directly to student success.
- Professional Development and Scholarship: Takes actions to continuously advance and/or improve in one's academic or professional discipline; as an individual contributor; as a team member; and/or as an organizational leader.
- Integrity and Ethics: Does what it takes to deliver on commitments made to the department, college, or division and to constituency groups. Builds personal trust and relationships inside and outside the university by doing what one says he or she will do when it is promised.
- Respect, Diversity and Pluralism: Provides a high level of service to fellow members of the RIT community. Treats every person with dignity. Demonstrates inclusion by incorporating diverse perspectives to plan, conduct, and/or evaluate the work of the organization, department, college, or division.
- Innovation and Flexibility: Provides and/or encourages new ideas that could make the department, college, or division an even better organization. Open to, and adapts well to change.
- Teamwork and Collaboration: Contributes to the efforts of the department, division, or college as a team player. Works well with others outside the department to accomplish cross-college or division goals and objectives.

The Educational Goals of RIT

Consistent with its vision and mission, RIT has the following goals:

1. To inspire students to high standards of excellence in their professional, scholarly, and creative endeavors.
2. To provide students with the appropriate knowledge and skills, this will enable them to become competent professionals in their fields.
3. To develop in students a basic understanding of the scientific and technological framework in which modern societies function.
4. To familiarize students with the various modes of inquiry which are necessary for understanding and appreciating the universe of which we are a part of.
5. To develop in students the understanding and sensitivity necessary for experiencing the aesthetic dimensions of life and work, and for appreciating other cultures.
6. To develop a capacity for critical and informed thinking, in judging and evaluating moral and societal issues.
7. To bring about opportunities for students to explore a variety of work environments in their chosen professional fields.
8. To develop in students the capacity to use all available resources for self-learning, problem solving, and personal growth.
9. To enable students to acquire skills and interests that will lead to a fuller enjoyment of their leisure and avocational activities.
10. To help students communicate effectively by developing both expressive and receptive language skills to an appropriate level of competency.
11. To develop an appropriate level of mathematical literacy and competency, in students.
12. To develop an appropriate level of computer literacy and competency, in students.

Mission Statement of the College of Health Sciences & Technology

The College of Health Sciences and Technology will be the center for both clinically-related and biomedical research-based innovative, flexible programs to meet both present and future needs of the health care system. As a community of dedicated faculty and staff, it is committed to diversity and student centeredness with the intention to deliver high quality education consistent with the mission of the Institute of Health Sciences and RIT. Building on a foundation of liberal arts and basic sciences, students will gain advanced knowledge in theoretical science and practical applications in experiential learning environments. These experiences will prepare students to serve humanity as practitioners, scientists, and leaders through their contribution to, and the provision of, high quality patient care, healthcare service, and/or applied translational biomedical research.

Mission Statement of the Diagnostic Medical Sonography Program

The Diagnostic Medical Sonography Program combines a strong science education, practical experience, and liberal arts education to prepare individuals for careers in Diagnostic Medical Sonography and related fields or graduate study. Curricula provide individuals an opportunity to make significant contributions to the society, in general, and to the profession, in particular.

The mission statement of the College of Health Sciences and Technology mentioned above also reflects the spirit of the Program's values as well as the commitment of the individuals involved in the implementation of the Program.

Diagnostic Medical Sonography Program Objectives

Upon completion of the Diagnostic Medical Sonography Program, the candidate will be expected:

1. To demonstrate a working knowledge of hospital functions in general, and the ultrasound department in particular, to include: basic skills, emergency care, patient-technologist relationships, and professionalism.
2. To describe and utilize routine procedures performed in Diagnostic Medical Sonography.
3. To demonstrate proficiency and fluency in the use of medical terminology, especially those pertaining to ultrasound.
4. To be skilled in the operation of ultrasound instrumentation and laboratory equipment under guidance from professional staff
5. To be capable of scheduling and performing the daily workload of Cardiac, OB/GYN, abdominal, and small parts, to include Doppler procedures.
6. To evaluate new procedures where necessary.
7. To distinguish between normal and abnormal sonographic appearance of different anatomical structures.
8. To create high quality diagnostic scans.
9. To identify and understand important features of disease processes including: Pathophysiology, signs and symptoms, significant laboratory data, diagnostic techniques, prognosis, and treatment.
10. To demonstrate an understanding of the humanistic and ethical considerations of medical care.

11. To demonstrate the ability to maintain quality control of the ultrasound equipment.
12. To be familiar with the biological effects of ultrasound and be aware of the acoustic output levels produced by the equipment they use.
13. To demonstrate the ability to explain Doppler principles and techniques, especially those pertaining to Abdominal, peripheral arterial and venous systems and Echocardiography.
14. To have the necessary knowledge and skills to achieve success on the American Registry of Diagnostic Medical Sonographers examinations.
15. To be successful in a career as a Registered Diagnostic Medical Sonographer or Registered Diagnostic Cardiac Sonographer.
16. To be capable of obtaining, reviewing and integrating patient data to produce high quality, diagnostic images and results.

Diagnostic Medical Sonography Program Objectives and Outcomes

Upon completion of the Diagnostic Medical Sonography Program, the candidate will be expected to:

- Demonstrate a working knowledge of hospital functions in general, and the ultrasound department in particular, to include: basic skills, emergency care, patient-technologist relationships, and professionalism.
- Describe and utilize routine procedures performed in Diagnostic Medical Sonography.
- Demonstrate proficiency and fluency in the use of medical terminology, especially those pertaining to ultrasound.
- Be skilled in the operation of ultrasound instrumentation and laboratory equipment under guidance from professional staff.
- Be capable of scheduling and performing the daily workload of OB/GYN, abdominal, small part or cardiac, to include Doppler procedures/examinations.
- Evaluate new procedures where necessary.
- Distinguish between normal and abnormal sonographic appearance of different anatomical structures.
- Create high quality diagnostic scans.
- Identify and understand important features of disease processes including: Pathophysiology, signs and symptoms, significant laboratory data, diagnostic techniques, prognosis, and treatment.
- Demonstrate an understanding of the humanistic and ethical considerations of medical care.
- Demonstrate the ability to maintain quality control of the ultrasound equipment.
- Be familiar with the biological effects of ultrasound and be aware of the acoustic output levels produced by the equipment they use.
- Demonstrate the ability to explain Doppler principles and techniques, especially those pertaining to peripheral arterial and venous systems or of the heart.
- Have the necessary knowledge and skills to achieve success on the American Registry of Diagnostic Medical Sonography examinations.
- Be successful in a career as a Registered Diagnostic Medical Sonographer or Registered Diagnostic Cardiac Sonography.
- Demonstrate the ability to follow Occupational Safety and Health Administration (OSHA) standards in clinical practice.
- Maintain CPR certification during the clinical component of the student's education.

- Demonstrate professional integrity, honesty, dependability, respect for self and others, compassion, and an ability to protect patient confidentiality and trust at all times.
- Demonstrate commitment to the ideals of life-long learning, professional excellence, teamwork, and tolerance for diversity and community service.
- Recognize and comply with the accepted standards within the Health Insurance Portability and Accountability (HIPAA) Act.

SDMS CODE OF ETHICS

The Society of Diagnostic Medical Sonography has published a Code of Ethics for the Diagnostic Medical Sonographers. As future sonographers it is important to be familiar with the professional Code of Ethics prior to assuming the sonographer responsibilities in the real world. The RIT Diagnostic Medical Sonography Program has adopted this Code of Ethics. It is your responsibility to familiarize yourself with the Code of Ethics before entering your clinical rotations.

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

- To create and encourage an environment where professional and ethical issues are discussed and addressed.
- To help the individual diagnostic medical sonographer identify ethical issues.
- 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 recredentialing.
- 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.

TECHNICAL STANDARDS

All students in the Diagnostic Medical Sonography Program must possess the intellectual ability to learn, integrate, analyze, and synthesize data. They must have functional use of the senses of vision, hearing, and equilibrium. Students must have motor function capabilities to meet the demands of Diagnostic Medical Sonography education and the demands of patient care.

The Diagnostic Medical Sonography student must possess the following capabilities and skills listed below:

Observation: The ability to observe is required for demonstrations, visual presentations in lectures and laboratories, laboratory evidence and microbiological cultures, microscopic studies of microorganisms and tissue in normal and pathologic states. The ability to discriminate among blacks, grays, and whites, and various color combinations that indicate blood flow on both display devices and recorded images (film and paper) is required for scan interpretation. A student must be able to observe patients accurately and completely, both at a distance and closely.

Communications: A Diagnostic Medical Sonography student must be able to communicate effectively via speech, reading, and writing. He/she should be able to hear and observe clinical staff and patients in order to elicit information, perceive nonverbal communications, describe changes in mood, activity and posture, and recognize and respond to an emergency or urgent situation. In addition to patient and clinical staff communication, the student must be able to communicate orally and in writing with physicians and other health care professionals.

Motor: An ultrasound student should possess the ability for gross and fine motor function, manual dexterity, and physical strength to:

- Apply general care & emergency treatment to patients
- Help lift patients who may be unable to move themselves from wheelchairs or beds to the examination table and vice versa (up to 10-25 patients per day)
- Lift and move objects (50 pounds or more routinely)
- Manipulate ultrasound equipment, computers, and peripherals
- Distinguish audible sounds

- Adequately view sonograms, including color distinctions
- Work standing on his/her feet 80% of the time
- Have full use of both, hands, wrists and shoulders involving the coordination of muscular movements, equilibrium, and sensation.

Intellectual: Conceptual, integrative, and quantitative abilities are required. Problem-solving is a critical skill demanded of sonographers and this requires all these abilities. The student must also be able to comprehend multi-dimensional relationships and the spatial relationships of anatomic structures.

Behavioral and Social Attributes: A student must be emotionally healthy. The student must be able to use his/her intellectual ability and exercise good judgment, to complete all responsibilities attendant to obtaining a quality ultrasound study and providing care to patients.

A student must be able to develop mature, sensitive, and effective relationships with patients and colleagues. An ultrasound student must be able to tolerate physical and emotional stress and continue to function effectively. A student must possess qualities of adaptability, flexibility, and be able to function in the face of uncertainty. He/she must have a high level of compassion for others, motivation to serve, integrity, and a consciousness of social values. A candidate must possess sufficient interpersonal skills to interact positively with people from all levels of society, and all ethnic and religious backgrounds.

DIAGNOSTIC MEDICAL SONOGRAPHY PROGRAM

Sonography Safety/Protection Guidelines and Acknowledgement Form

Sonography students are required to be aware of safety standards and guidelines when working in the scanning laboratory on campus or at any of the clinical affiliates. This form is evidence that all Diagnostic Medical Sonography students enrolled in the Rochester Institute of Technology Diagnostic Medical Sonography Program are aware of protective measures for themselves, patients, family members and any other staff. The American Institute of Ultrasound in Medicine guidelines are as follows:

AIUM STATEMENT ON BIOEFFECTS

Safety in Training and Research

Approved March 19, 2007

Diagnostic ultrasound has been in use since the late 1950s. There are no confirmed adverse biological effects on patients resulting from this usage. Although no hazard has been identified that would preclude the prudent and conservative use of diagnostic ultrasound in education and research, experience from normal diagnostic practice may or may not be relevant to extended exposure times and altered exposure conditions. It is therefore considered appropriate to make the following recommendation:

When examinations are carried out for purposes of training or research, the subject should be informed of the anticipated exposure conditions and how these compare with normal diagnostic practice.

Prudent Use and Clinical Safety

Approved March 19, 2007

Diagnostic ultrasound has been in use since the late 1950s. Given its known benefits and recognized efficacy for medical diagnosis, including use during human pregnancy, the American Institute of Ultrasound in Medicine herein addresses the clinical safety of such use:

No independently confirmed adverse effects caused by exposure from present diagnostic ultrasound instruments have been reported in human patients in the absence of contrast agents. Biological effects (such as localized pulmonary bleeding) have been reported in mammalian systems at diagnostically relevant exposures but the clinical significance of such effects is not yet known. Ultrasound should be used by qualified health professionals to provide medical benefit to the patient.

As Low As Reasonably Achievable (ALARA) Principle

Approved March 16, 2008

The potential benefits and risks of each examination should be considered. The ALARA (As Low As Reasonably Achievable) Principle should be observed when adjusting controls that affect the acoustical output and by considering transducer dwell times. Further details on ALARA may be found in the AIUM publication "Medical Ultrasound Safety."

1. Immediately notify Program Director, Clinical Coordinator, faculty, and/or clinical instructor if there are any problems with any sonography equipment.

Always use ALARA (As low as reasonably achievable) standards when performing sonography.

I have read the Sonography Safety guidelines. I understand its content and agree to abide by the guidelines set forth during my enrollment at RIT.

LEARNING DISABILITIES

The Diagnostic Medical Sonography Program is committed to providing equal access to programs, services and physical facilities to students with disabilities. We strive to foster an environment where all students are welcomed, valued and respected. A student is required to notify program faculty if he/she has been diagnosed and documented with a disability. The program is willing to meet any reasonable request for accommodation. The program will follow the policies set forth by the Institute and through its Disability Services Office (DSO). However, the responsibility remains with the student to provide relevant and recent written documentation from the DSO, that such a disability exists, as well as all recommendations by the DSO for helping the student. For more information, the student may visit <https://www.rit.edu/studentaffairs/disabilityservices/faqs.php>.

ACADEMIC STANDARDS

Students enrolled in the Diagnostic Medical Sonography Program are expected to conduct themselves in an appropriate fashion at all times. The criteria for evaluating appropriate performance include, but are not limited to, demonstrating professional competencies and skills; adhering to the Diagnostic Medical Sonography Program's policies and procedures; displaying sensitivities to patient and to community needs; demonstrating ability to relate to peers, instructors, and other members of the health care team; maintaining regular and punctual attendance in classes or in all professional settings; and maintaining acceptable physical appearance. These requirements for performance have been established to protect the rights of patients and communities, to foster the team concept in the delivery of health care, and to create a productive educational environment. Should a student be unable or unwilling to demonstrate these, he/she will be in violation of the program academic standards.

Violation of any of these standards may be cause for dismissal from the program. Therefore, compliance with the following academic standards is essential:

- A. All program materials, documents and images are copyrighted and protected. It is illegal for students to share this information with others inside, or outside, of the college.
- B. The student shall assume as his/her primary responsibility for the health and safety of the patient.
- C. If there is any question or complaint concerning an assignment during a clinical activity, the student should discuss the problems with the individual assigned to supervise them, the preceptor or the program Clinical/Concentration Coordinator or Program Director. For further details, students must follow the Grievance policy in this Handbook and the academic policies at <https://www.rit.edu/academicaffairs/policies manual/policies/student>.
- D. The student shall state truthfully and accurately his/her student status in interactions with patients, health professionals, and other individuals.
- E. The student shall deliver needed health care service to patients without regard to race, age, sex, creed, sexual orientation, disability or health, marital status, veterans status, socioeconomic status, political persuasion, or national origin.
- F. The student shall have ongoing communication with his/her clinical instructor as assigned, to safeguard and enhance the care of the patient and to ensure the development of his/her clinical and technical skills. ***Students are not to assume primary or sole responsibility for patient care.*** No student shall see, complete an examination, or discharge any patient without discussing the patient with the responsible clinical instructor or staff sonographer.
- G. The student shall conduct his/her self in a professional manner relating to patients, faculty, and professional staff. The student furthermore shall refuse to participate in, or conceal any, illegal or unethical practice or procedures.
- H. The student shall hold all privileged patient information in confidence, following HIPAA guidelines, unless they are required to release such information by law or the release of such information becomes necessary to protect the welfare of the patient or the community.
- I. The student shall perform only those procedures authorized by the clinical sites, service, preceptors, and the Program.
- J. The student shall not display obstructive, inappropriate, or disruptive behaviors towards another student, faculty member, clinical staff member, or especially, a patient. In particular the student must be appropriately responsive to the requests of their instructors, faculty, and patient population.
- K. The student shall observe the specific rules and regulations of the clinical site as well.
- L. The student shall observe the SDMS Code of Ethics for the Diagnostic Medical Sonography Profession as stated in earlier sections.

ACADEMIC POLICY

The Diagnostic Medical Sonography Program Academic Policies & Procedures strictly adhere to that of the Rochester Institute of Technology Educational Policies and Procedures Manual in conjunction with the RIT Undergraduate Bulletin with the following clarifications and stipulations:

- Any student whose term or cumulative grade point average (see [D5.0-Grades](#), section G) falls below a 2.50 (between C and B– average) will be placed on probation.

- Any student who is on probation according to above and who is not removed from probation in the two succeeding terms (including summer session) in which credit is attempted will be suspended from program RIT for a period of one calendar year.
- Any student who has been placed on probation after having been removed from probation and whose cumulative grade point average is below 2.50 will be suspended.
- Any student who has been placed on probation after having been removed from probation and whose cumulative grade point average is 2.50 or above will be granted one term to be removed from probation before suspension from program and RIT.
- Any student whose term grade point average falls below 1.00 will be suspended from RIT for a period of one calendar year.
- Students who have been readmitted to program after having been suspended and then qualify for probation will be suspended from RIT.
- A suspended student cannot enroll in any credit or non-credit course at the university while on suspension.
- A suspended student may appeal a suspension decision. When a student is suspended from the program, he/she will receive a letter from the program director, providing the details about steps that can be taken to amend or appeal the situation. The Program allows for only **one** appeal during the entire student's enrollment time in the program. **NO EXCEPTIONS.**
- A suspended student will be required to satisfy specific academic conditions set forth by the program in order to be considered for readmission to the Program.
- A suspension may be waived upon written appeal to the program director. Final suspension waiver requires the program director and the Dean (or designee) approval.

A student may apply to the Office of Admissions for re-admission at the end of his/her suspension. Re-admission to the Diagnostic Medical Sonography Program must be approved by the Dean of the College of Health Sciences and Technology and the Diagnostic Medical Sonography Program Director and on the basis of space availability.

-Students who are denied readmission due to lack of space may apply the following year without any guarantees for readmission.

- If a student drops out or fails to maintain good academic standing after readmission, he/she will not be considered for readmission again.

For more information on the RIT Academic Policy, students may visit:
http://www.rit.edu/academicaffairs/policiesmanual/sectionD/D5_1.html

<http://www.rit.edu/academicaffairs/policiesmanual/sectionD/D5.html>

ACADEMIC DISHONESTY

The Rochester Institute of Technology does not condone any form of academic dishonesty. Any act of improperly representing another person's work as one's own is construed as an act of academic dishonesty. These acts include, but are not limited to, plagiarism in any form or use of information and materials not authorized by the instructor during an examination, fabrication or other forms of

academic dishonesty which corrupt the learning process and demean the educational environment for all students.

The serious nature of this event is deemed extremely consequential within the Diagnostic Medical Sonography Program. Cheating and/or academic misconduct will not be tolerated in the Program. Sharing or disseminating protected materials, such as unpublished exams, written papers or assignments, C-print, taking pictures of tests, or verbally sharing exam material in the form of questions, answers, or content is considered a violation of academic policy and the Honor Code. Any act of Academic Dishonesty will incur the following consequences. After notifying and presenting the student with evidence of such misconduct, the instructor has the full prerogative to assign a lower grade, including an “F” for the offense itself or for the entire course. If after careful review of the evidence, the instructor decides that the student’s actions are indeed misconduct and warrant a penalty, the instructor will add a letter to the student’s file with a copy sent to the student, Program Director and the Dean documenting the offense. Depending on the seriousness of the offense, the student may also be brought before the Academic Conduct Committee of the College, and may face academic suspension or dismissal from the Program and the Institute. The student has the right to appeal any disciplinary action as described in section D17.0 “Academic Conduct and Appeals Procedures” and D18.0 “RIT Student Conduct Process” of the Institute Policies and Procedures Manual.

ACADEMIC ADVISING/COUNSELING

“Academic advising is integral to fulfilling the teaching and learning mission of higher education. Through academic advising, students learn to become members of their higher education community, to think critically about their roles and responsibilities as students, and to prepare to be educated citizens of a democratic society and a global community. Academic advising engages students beyond their own world views, while acknowledging their individual characteristics, values, and motivations as they enter, move through, and exit the institution.”- The National Academic Advisors Association (<http://www.nacada.ksu.edu/Clearinghouse/AdvisingIssues/Concept-advising-introduction.htm>)

The Program has a professional academic advisor (Mr. Gary Cole) who is available to assist students, as well as to mentor and monitor students throughout their stay at RIT. A professional academic advisor is assigned to each and every student in the program. The academic advisor holds walk in hours during the week in his office, where the student can swing by and get assistance without an appointment. If the student prefers an individual appointment, he/she can make one in advance by phone at 585-475-6223, by emailing at gary.cole@rit.edu or by stopping by his office located in CBT-Building 75-1182.

Students must meet with the academic advisor before registering for classes. Each semester this will help students avoid any unnecessary course work and/or delay completion of the program. For more information on the Institute Advising, students may visit: <https://www.rit.edu/academicaffairs/advising/>

The Clinical Instructor and the Staff Sonographers evaluate students at each clinical site. Written evaluations are completed by the Staff Sonographers and Clinical Instructors and reviewed by the Clinical/Concentration Coordinator and Program Director. The Program Director and/or the Clinical/Concentration Coordinator will counsel students individually. Strengths, weaknesses, and ways to improve will be identified and discussed with the student.

The program faculty and staff understand that university life can be one of excitement and self-discovery. At the same time, it can generate academic, emotional, personal, social, and even financial concerns. Although not uncommon, at times these concerns can make it difficult to succeed or function while at the university. Counseling is an excellent way to address such issues, to learn more about yourself and others, to develop new life skills, and to explore and gain insight, understanding and acceptance. Information regarding the counseling services at RIT can be seen at:

<https://www.rit.edu/studentaffairs/counseling/>

ACADEMIC GRIEVANCE

The College of Health Sciences and Technology has developed definite procedures that are to be followed either in case a student believes that a faculty member has improperly evaluated his/her work or has infringed upon his/her academic freedom, or in case any member of the academic community believes that a particular student has performed an act of academic or behavioral dishonesty or misconduct. Any student who feels that they have not been treated properly in any way needs to attempt to correct the situation with the individual(s) directly involved first. It is sincerely hoped that students will never be involved in this procedure; but if students are, the Program Director or the Vice Dean of the College of Health Sciences and Technology will familiarize students with the specifics of this policy. See Rochester Institute of Technology for details & procedures which can be found on the website <https://www.rit.edu/academicaffairs/policiesmanual/d180>

INSTITUTE WRITING POLICY

Students in the Diagnostic Medical Sonography Program must demonstrate that they have the writing skills needed for successful entry into medicine. Writing requirements must be completed prior to graduation. Students are expected to have writing proficiency in the following tasks: using appropriate English grammar and construction, organization, and scientific/medical language.

Requirements are listed below:

- Standard Test of Written English (waived if transferring English Composition);
- English Composition course (GLLC 220);
- Scientific or Medical Abstract (Formal Case Study Presentations);
- Preparing a personal resume (C.V.) with a letter of inquiry;
- Laboratory Report (Biology or chemistry labs, etc.);
- Scientific Paper (Ultrasound Research Seminar Paper);
- Computer Literacy (MEDI 130 or transferred)

DEGREE REQUIREMENTS

Bachelor of Science

Candidates for the Bachelor of Science degree in Diagnostic Medical Sonography of the College of Health Sciences and Technology must satisfy the following requirements:

- The student must have made full payment or satisfactory adjustment of all financial obligations to the Institute.
- The student must have successfully completed a minimum of 125 semester credit hours, with a minimum of 59 taken in residence at the Institute in the College of Health Sciences and Technology.
- The student must have a cumulative program grade point average of at least **2.50**.

- The student must have successfully completed a minimum of two Wellness classes if entering as a first; or if entering as a transfer student, the number of wellness courses must be successfully completed or transferred into the program; or, the student must qualify for one of the exceptions to the physical education policy as described in the RIT Official Bulletin. The program will **determine** and make decisions regarding transfer of health, wellness or activity courses. For more information and special circumstances, students may contact the Student Life Center representative at the Hale-Andrews Student Life Center, HAC/1212, telephone 475-2620 or visit <https://www.rit.edu/studentaffairs/criw/wellnessgradrequirements.php>.
- The student must have completed the YearOne course. The YearOne class serves as an interdisciplinary catalyst for first-year students to access campus resources, services and opportunities that promote self-knowledge, leadership development, social responsibility and life skills awareness and application. YearOne is also designed to challenge and encourage first-year students to get to know one another, build friendships and help them become an integral part of the campus community. For more information, the student may visit <https://www.rit.edu/studentaffairs/asc/YearOne-overview.php>
- The student must have successfully completed the writing requirement as described by the Institute and the Diagnostic Medical Sonography Program. For more information, the student may visit <http://www.rit.edu/programs/undergraduate-graduation-requirements>.
- The student must have successfully completed all of the liberal arts requirement in addition to the writing requirement. For more information, the student may visit <http://www.rit.edu/programs/undergraduate-graduation-requirements>
- The student must have successfully completed the specific course requirements, or equivalents, as described in the Diagnostic Medical Sonography Program curriculum.
- The student must have successfully completed the Health Form/Update and CPR prior to the start of the clinical rotations/internship.

Certificate Option (General and Cardiac)

Candidates for the Certificate in Diagnostic Medical Sonography of the College of Health Sciences and Technology must satisfy the following requirements:

- The student must have made full payments or satisfactory adjustment of all financial obligations to the Institute.
- The student must have successfully completed a minimum of 53 (General) or 42 (Cardiac) semester credit hours.
- The student must have a cumulative program grade point average of at least **2.50**.
- The student must have successfully completed the writing requirement as described by the Institute and the Diagnostic Medical Sonography Program. For more information, the student may visit <http://www.rit.edu/programs/undergraduate-graduation-requirements>.
- The student must have successfully completed the specific course requirements, or equivalents, as described in the Diagnostic medical Sonography Program curriculum.
- The student must have successfully completed the Health Form/Update prior to the start of the clinical rotations/internship.

PRE-CLINICAL PRACTICAL/COMPETENCY EXAMINATIONS

The practical portion of this program is much different than the written portion. There are skills that must be proficiently learned in the ultrasound scanning laboratories before students are entitled to enter

the clinical rotation stage of the Diagnostic Medical Sonography program. These skills will be practiced during the fall and spring semesters of the Ultrasound Scanning laboratories by performing pre-clinical competencies. Each pre-clinical competency must be passed. The Clinical/Concentration Coordinator and laboratory instructors will meet with students informally and formally once a semester and discuss the student's progress and provide appropriate recommendations.

At the end of each semester, the students will also have their practical skills evaluated through the performance of a complete pre-clinical competency. A pre-clinical competency evaluation (provided to students in the beginning of each semester) will be used. These evaluations are graded and discussed with the students.

If the student fails to pass **all** the pre-competencies including the final pre-clinical complete competency, he/she will be given one more chance to correct the problem. More details can be seen in the following pages under **Evaluation** of Pre-Clinical Competencies Examinations.

Failure to pass or meet the minimum required skills needed to enter the clinical stage of the program will result in the student not being allowed to continue in the program and into their clinical rotation stage.

Evaluation of the skills necessary in order to be permitted into the clinical rotation stage of the Diagnostic Medical Sonography Program:

- Understanding of the knobology of the ultrasound machine. This could include, but not limited to:

| | |
|--------------|---------------------|
| Name field | M-mode |
| Applications | Calculation package |
| Transducer | Biopsy Guide |
| Freeze | Persistence |
| Cine | Log Compression |
| Print | Postprocessing |
| Measurements | Preprocessing |
| Text | Spectral Waveforms |
| Depth | Spectral Waveforms |
| Focal zone | Zoom/magnification |
| Overall gain | Color Doppler |
| TGC | Power Doppler |
| Multi Hertz | Other |

- Scanning Techniques

Many different scanning techniques are taught during the course of the scanning laboratories of the 3rd year for the BS degree and 1st year of the certificate programs. These techniques are found in the Ultrasound Scanning Principles and Protocols textbook, required for the General studies and option for the Cardiac studies, as well handouts that are given throughout the year. These techniques include, but are not limited to:

Transducer selection
Application selection

Patient preparation
Patient positioning
Breathing techniques
Scanning windows

- Understanding and Memorization of Basic Scanning Protocols.
These are the basics that are used to complete the examinations that are taught during the 3rd year for BS students and 1st year of the certificate in the ultrasound scanning laboratories. These protocols must be recalled, stated, and followed by the student during the scanning sessions and examinations. They must be in a logical sequence that is easily followed by a sonography instructor or Clinical/Concentration Coordinator who is watching, reviewing, or observing the scanning by a student or testing the student.
- Clinical Write Up of Diagnostic Information
It is the goal of this program to produce compassionate, well-rounded sonographers who will play an integral role in the diagnostic process. In order to do this, it is necessary that candidates for the clinical rotations understand both the scanning skills necessary to produce diagnostic quality images and being able to utilize proper sonographic reporting methodology. This includes, but it is not limited to:
Abdomen
Small Parts
OB/GYN
Vascular (when necessary)
Cardiac
- Patient Care and Interaction
This aspect of the profession is highly crucial, integral and important. Student must demonstrate a caring, empathetic and non-selfish attitude. Undoubtedly, patient care and interaction encompass many facets. The tasks that are focused on during the preclinical competencies are as follow:
 - Ability to obtain accurate medical history which is relevant to the exam being performed
 - Ability to communicate effectively and efficiently
 - Ability to report medical findings to appropriate medical staff in a logical, professional manner
 - Ability to assist the patient in the necessary areas to get on and off the examining table, properly dressed or undressed (as needed) and meet their non ultrasound related needs, such as toiletry, etc.
- Cross-Sectional Relational Anatomy
This is an area where the classroom knowledge must be brought over into the clinical setting and used to obtain diagnostic quality images. It will be necessary for all candidates to be able to relate the textbook work and knowledge that they have learned in various (cross-sectional) anatomy classrooms into the actual scanning of the patient. The student will be required to scan patients chosen by instructors and to be able to

identify the anatomy seen on the images, both in real time or on a still image. They must be able to describe what they are looking at using accurate ultrasound terminology (which will be provided to every student as a part of the fall semester, or any time there after upon request from the Clinical/Concentration Coordinator or Program Director).

Evaluation of Pre-Clinical Competencies Examinations

Requirements for Pre-Clinical Competency Examinations:

- Be able to demonstrate appropriate relational and structural anatomy in a logical order, including all of the required images that are stated on the competency sheet and the protocols provided by the instructor.
- Be able to set up the machine and get it ready to perform the examination (i.e. correct transducer frequency, application, and name field)
- Be able to apply proper scanning and imaging techniques (Depth, Focus, Overall Gain, and TGC) to obtain diagnostic quality images.
- Be able to correctly label the required images and answer any questions related to the competency and the organ in question.
- Be able to appropriately interact with the person (patient) during the exam. This includes breathing techniques and verbal cues needed to have the patient in the optimal position for the exam. (These techniques are stated in the Scanning Protocols and Principles textbook and must be memorized for the General Studies).
- Be able to complete clinical competencies in the allotted time.
- A grade of a “**B**” or higher is needed to successfully pass the pre-clinical competency examination.

The grading policy for the pre-clinical competencies examinations, is as follows:

- A = Above 95%
- A- = 90-94%
- B+ = 87-89%
- B = 83-86%
- B- = 80-82%
- C+ = 77-79%
- C = 73-76%
- C- = 70-72%
- D = 60-69%
- F = Below 60%

Students must have a minimum of 80% to successfully pass the pre-clinical competency. If a student fails to maintain an 80% on any competency the student will need to perform a make-up competency, to ensure adequate competency in the designated material. The make-up competency will be given at an assigned time specified by program faculty. The initial failed competency score will be the numerical value which will be used in the final grade calculation.

If a student fails (<80%) the make-up competency, the student will appear before the program faculty to discuss specific academic and clinical options. If it is determined that the student should not

continue in the Program, the student will be offered a change of program into any RIT Program for which he/she is qualified and/or accepted.

If a student fails (<80%) two or more competencies in a particular area, the student will appear before the program faculty to discuss specific academic options. If it is determined that the student should not continue in the program, the student will be offered a change of program into any RIT program for which he/she is qualified and/or accepted.

GRADING POLICY

The grading policy for most courses in the first two years is at the discretion of the instructor. RIT uses a +/- grading system upon which the program and institute cumulative grade point averages are based and this can be seen by visiting: <http://www.rit.edu/academicaffairs/policiesmanual/sectionD/D5.html>. The Diagnostic Medical Sonography Program adheres to the grading policy of the Institute with added stipulations.

PRE-CLINICAL

Didactic

The grading policy for Scanning laboratories examinations and other related ultrasound courses is as follows:

- A = Above 95%
- A- = 90-94%
- B+ = 87-89%
- B = 83-86%
- B- = 80-82%
- C+ = 77-79%
- C = 73-76%
- C- = 70-72%
- D = 60-69%
- F = Below 60%

Students must have a minimum of 80% to successfully complete the courses. If a student fails to maintain 80% on any examination the student will need to take a make-up examination and as determined by course instructor, to ensure adequate competency in the designated material. The make-up examination will be given at an assigned time specified by program faculty. **The initial failed examination score will be the numerical value which will be used in the final grade calculation.**

If a student fails (<80%) the make-up examination, the student will appear before the program faculty to discuss specific academic options. If it is determined that the student should not continue in the Program, the student will be offered a change of program into any RIT Program for which he/she is qualified and/or accepted.

If a student fails (<80%) two or more examinations in a particular course, the student will appear before the program faculty to discuss specific academic options. If it is determined that the student should not continue in the program, the student will be offered a change of program into any RIT program for which he/she is qualified and/or accepted.

CLINICAL ROTATIONS/INTERNSHIP

Moreover, the internship performance is shown by a letter grade on the college transcript. Grades are based on several items, with each item having a specific point value. These items, which are listed below, cover both the didactic and clinical aspects of the internship.

DIDACTIC

Attendance
Examinations
Internship paper
Poster Project
Clinical imaging practicum
Pre-clinical competencies

CLINICAL

Clinical and instructional objectives
Student-self evaluations
Clinical competencies
Attendance records
Log sheets
Tally sheets
Case studies
Clinical Instructor evaluation

The final overall grade for each course is based on percentage of total points.

A = Above 95%
A- = 90-94%
B+ = 87-89%
B = 83-86%
B- = 80-82%
C+ = 77-79%
C = 73-76%
C- = 70-72%
D = 60-69%
F = Below 60%

A student must maintain a “**B**” average or better to be able to continue his/her clinical rotation/internship. Students will not graduate or receive a certificate unless they satisfactorily complete and submit the required assignments for each rotation. The ultimate responsibility for assigning grades for both didactic and clinical work lies with the Program Director and/or program faculty.

Clinical Rotations/Internship Competencies

Clinical rotation competencies are used as a guide to familiarize students with routine procedures in medical ultrasound that would be performed by entry-level sonographers. The competencies give students the opportunity to learn and master ultrasound procedures through technical and practical experience. They also measure students’ proficiencies in performing routine ultrasound examinations. The student’s discretion and his/her level of confidence determine the date of each clinical competency. The Clinical Instructor may also help students to determine whether they are ready to attempt a particular clinical competency.

Before taking any specific clinical competency examination, students should complete the instructional objectives that pertain to a specific examination or part of the body. Students must also demonstrate adequate knowledge and ability to perform routine clinical procedures with minimal

supervision. Students must obtain **two** signatures from staff sonographers (or clinical instructor) indicating their proficiency in performing all aspects of a designated procedure. Upon completion of these objectives, the clinical instructor, or a staff sonographer designated by the clinical instructor, will individually test students using the clinical competency checklist/evaluation.

Clinical Competency Format

Each clinical competency examination is divided into the following sections:

- Pre-examination Section
- Patient Care and Preparation Section
- Technical Performance Section
- Imaging Section
- Post Scanning Section
- Case Presentation to the Radiologist/Cardiologist/Clinical Instructor/or staff sonographer

Each of the six sections consists of a list of duties necessary to perform and images to obtain for an adequate ultrasound examination. The Clinical Instructor must sign off on the final clinical competency. Each item of the final competency should be checked off, and any non-applicable items should be marked as so. Clinical competency checklists/evaluations, including the patient clinical history form, should be returned to the Clinical/Concentration Coordinator or Program Director when students return to campus for the next lecture series and at the designated time.

Prior to performing a particular clinical competency for the final signature students must:

Obtain and review the clinical competency that is to be performed with the Clinical Instructor (or designated sonographer) from the Student Sonography Handbook which will be purchased at the RIT bookstore **prior** to the clinical rotations/internship.

Determine in advance which patient is to be scanned after being discussed with the sonographers or the Clinical Instructor.

Fill out the Clinical Competency Cover Sheet for that particular exam.

Give the form to the Clinical Instructor.

Reasons why a Clinical Instructor may stop the competency examination immediately are the following:

Entering the incorrect patient information onto the ultrasound screen.

The inability or failure to recognize pathology.

Scanning the wrong patient.

Causing harm to the patient, or the patient is at risk and the exam needs to be completed immediately.

As a member of the health care profession, Students must understand that patient care is their first priority. Therefore, if the Clinical Instructor notices that students are committing mistakes during the competency that could be dangerous to the patient, he/she has the authority to stop the competency examination and take over the procedure. Consequently, students will need to repeat it.

Grading Clinical Rotation/Internship Competencies

Please note the clinical rotation competencies are different from the pre-clinical competencies which are graded differently. The grading policy for the pre-clinical course and practical/competency examinations are previously stated under Grading policy (Evaluation of Pre-clinical competencies).

Points are assigned to every statement according to its level of difficulty and emphasis given in the ultrasound laboratory. A competency examination grade of 80% or better is necessary to pass and move to the next competency. A make-up competency examination **must** be taken if the examination grade falls below an 80%. Make-up or repeat competency examinations must be scheduled within one to four days after the initial examination and at the convenience of the Clinical Instructor.

Students will be penalized by one letter grade (for every repeat competency examination). For example, the first trial will start with a grade of "A". If students fail, the second trial will start with a "A-" as the highest grade instead of "A" and so forth. If students fail the same clinical competency for three times, and do not show any improvement after proper instruction, students will not be able to graduate or move on into the second clinical rotation.

CLINICAL ROTATIONS/ INTERNSHIP

RIT has many clinical sites representing a wide variety of ultrasound experiences. Several of these sites are located some distance from the main campus of RIT. The program CANNOT assure that students will be assigned to a clinical site within the immediate Rochester area or any other place of your choice.

CLINICAL ROTATION/ INTERNSHIP ASSIGNMENT

Toward the end of the third (3rd) year of study, each student who is expected to continue in the program will be asked to prioritize, in writing, the region of choice for the clinical internship. The Clinical/Concentration Coordinator will provide the required form, no later than the last two weeks of the spring semester.

Internship regions will be listed with the student asked to rank from one to three (one being the most desirable) the region of choice. A typical internship consists of a rotation between two clinical sites with a possible "visit" to a special interest center, all within the same geographic region. In some extraordinary circumstances the student will be required to rotate between two geographic regions to facilitate their clinical experience. **PLACEMENT IN THE LOCATION A STUDENT HAS REQUESTED CANNOT BE GUARANTEED.** In addition a rotation assignment may be changed due to unexpected circumstances at the clinical sites. Students will be notified about the situation and a new clinical site will be reassigned.

PETITION FOR CHANGE OF INTERNSHIP ROTATION ASSIGNMENT

- If a student is assigned to an internship that he/she feels is unfair and would like to challenge the decision, he/she must submit, in writing, a petition requesting the change to the Clinical/Concentration Coordinator. Reason(s) should be well documented and presented clearly.
- The Clinical/Concentration Coordinator will consider the petition and a final decision will be made within 30 working days upon receipt of the petition. A decision with explanation will be mailed to the student within 7 working days of the decision.
- If the student is not happy with the decision, the student must write the Program Director within a week from the receipt of the decision from the Clinical/Concentration Coordinator. The letter must be

a concise statement of particulars and includes how, in the student's opinion, program policies or procedures were violated.

- The Program Director will discuss the letter jointly or individually with the student and Clinical/Concentration Coordinator to determine if the issue/petition can be resolved. If the issue can be resolved, the Program Director will provide a written statement to the student with a copy to the Clinical/Concentration Coordinator.
- If the issue/petition cannot be resolved, the Program Director will notify the student with her/his right to request in writing that her/his petition be reviewed by the Dean within two weeks from the date of the discussion with the Program Director.
- Upon receipt of the student's request (by the Program Director) to move the process to be reviewed by the Dean, the Program Director will immediately inform the Dean about the request, providing copies of the student's petition request, Clinical/Concentration Coordinator's response to the petition and the student's written request to advance the petition to the Dean.
- If the student does not file a written request to advance the petition to the Dean within the prescribed time, the request/petition will cease.
- The Dean will be provided with all the necessary documentation for review and will schedule a meeting with all parties involved within 2 weeks. The student will be allowed to present her/his case (15 minutes maximum) and the Dean will be allowed to ask questions of all parties involved.
- Within a week after the meeting, the Dean, in consultation with the Program Director, will provide the final decision to the student, in writing through the Program Director.
- If any of the time limits are not met by the student, the petition will automatically be dropped. Time extensions must be requested in writing by the student through the Program Director.
- All program decisions are final.

In summary, if the student feels that he/she has not been treated properly in any way, the student needs to attempt to correct the situation with the individual(s) directly involved first. If satisfaction is not obtained, the case should be presented, in writing, to the following, **in order**:

1. The Clinical/Concentration Coordinator for all clinical related incidents
2. The Program Director for all academic/clinical related incidents
3. Dean, College of Health Sciences & Technology

SPECIAL INTEREST MINOR ROTATIONS

During the second rotation, one or two week experiences in a vascular or specialty clinic may be arranged. The Program faculty will work closely with all parties to make this happen but there is NO guarantee. These are subject to the approval of the student's clinical site, the Clinical/Concentration Coordinator and Program Director. Minor rotation sites are subject to availability at the time of request. Arrangements for lodging are the responsibility of the student. Arrangement for minor rotations are not guaranteed by the Program.

GENERAL EXPECTATIONS

The internship is the integration of classroom and clinical experience. A great deal of planning has gone into creating a learning environment that will allow students to obtain the high level skills required for sonography. Seldom does a department perform only one type of exam, but offers a variety of services. Students are encouraged to show a high level of initiative by doing such things as:

- Asking questions and exploring (visit other departments such as CT, Special Procedures, MRI, Surgery, and Pathology; utilize the in-house library, etc.)

- Requesting to scan and/or assist as often as possible (within the student's capabilities as perceived by the Clinical Instructor and staff sonographers)
- **Not leaving patients unattended while the examination is in progress. Students must not leave the workplace while procedures are in progress unless specific arrangements are made.**
- Assisting in routine office duties (logging-in patients, filing, maintaining the pathology file, etc.)
- Maintaining the lab at a high degree of readiness (changing sheets, cleaning, stocking shelves, running diagnostics on equipment, etc.)

Further specific behaviors are cited in the syllabus of each course. In general, students are expected and required to participate in every aspect of the department's operation. No matter what the duty, it will probably help the student to understand the "Big Picture" of Sonography. **Students must realize that they are guests in the clinical sites.** The clinical sites have the right to remove students at any time.

EMPLOYMENT

Students may **NOT** be employed during hours that are concurrent with either clinical or classroom education. The Program requires full dedication to its course and clinical work. It is the desire of all faculty and staff in the Program that all students are successful and the learning process is not compromised. Students **WILL NOT** be excused from any academic classes or clinical work for personal work purposes. The student may work outside RIT hours and/or in conjunction with financial aid activities within published guidelines.

The Program faculty and staff recognize that clinical sites may offer students a per-diem or part-time employment. Students **CANNOT** accept any offers. The student must disclose and discuss the offer opportunity with the Clinical/Concentration Coordinator and Program Director to obtain approval and permission to accept offer. The Program Director and Clinical/Concentration Coordinator will discuss the employment opportunity with the student's clinical instructor(s) and the employer prior to decision-making.

If the offer is found to be unacceptable and conflicts with the program and Institute policies and procedures, interference with scheduled clinical time, assigned academic courses schedules, and class attendance, interference with activities which occur during the course of everyday academic and clinical life and/or conflict with the JRCDS Accreditation requirement, the students will not be permitted to work.

If the offer is found to be acceptable, the Clinical/Concentration Coordinator and Program Director will discuss with the student and the employer the approval and all the steps needed to ensure all parties are satisfied. If hired, the employer assumes all responsibilities of the employee as well as the student will assume all liability for his/her actions, activities and welfare while performing employment responsibilities.

HEALTH CARE

RIT requires all students to maintain health insurance coverage as long as they are enrolled. Students may obtain coverage through RIT or provide their own personal coverage. One of the most important

things students can do before coming to RIT is to check their insurance policy and make sure they are adequately covered while at RIT. Especially if the student's home is outside the upstate New York area, we advise that students check for "out of network" coverage and requirements. Information on the specific benefits under RIT's policy may be provided by visiting the Student Health Office located in the August Building (#23), by calling them at 585-475-2255 or visiting their website at <https://www.rit.edu/studentaffairs/studenthealth/>.

During clinical rotations, all medical needs and emergent care should be administered according to the students health care providers set guidelines. Students are responsible for knowing and adhering to their health care provider's policies and administrative procedures.

Every student must have a Certificate of Health Statement form (Physical exam) on file in the Program Director's and/or Clinical/Concentration Coordinator's office before beginning his or her clinical rotation. This form will be provided by the Clinical/Concentration Coordinator and must be completed by a qualified physician. This Health Status Form must indicate that the student does not have any condition(s) that endanger(s) his/her own health, the health and well-being of other students, patients, and hospital staff. The student must have proof of being immune from Rubella, Rubeola, Mumps, Varicella and have a negative TB test(s). Blood work will need to be done to prove immunity where it is necessary. If the TB test(s) should be positive, a chest x-ray must be taken and show that students are not currently infectious. If students are NOT immune to Rubella, Rubeola, Mumps or Varicella, action must be taken before students are allowed to start their clinical internship. Certificate of Health Statement forms must be submitted to the Clinical/Concentration Coordinator by the first day of August. Some clinical sites may require additional health forms to be completed. The Clinical/Concentration Coordinator will work with students and the clinical sites to get the forms completed. It is the student's responsibility to get all of the forms completed and returned on specified time(s) to the Clinical/Concentration Coordinator.

No student will be allowed to begin his or her clinical internship without the completed Certificate of Health Statement form.

HEPATITIS B VACCINE

The majority of clinical sites require that students have the Hepatitis B vaccine prior to starting clinical rotations at their site. Although the Diagnostic Medical Sonography Program cannot mandate each student to obtain this valuable vaccination, it is VERY strongly recommended. This vaccine is given in a series of three sequential injections over a period of six months. It is recommended that students obtain this vaccine at the start of the third year of the program, if not before, to ensure adequate protection while involved in patient care. The student is responsible for the cost of this vaccination.

IMMUNIZATIONS

It is required that students have blood drawn (a titer) for their proof of immunization before they are allowed to begin their clinical internship. *Some* of the clinical sites have different requirements than others, and the student's site placement will dictate which immunizations he/she must have, if any, which are above and beyond what RIT requires. There is a minimum requirement of: Rubella, Rubelola, Mumps, Varicella, Tentanus/Diphtheria, as well as the season Influenza vaccination for that specific flu season. This may not be able to be completed before the start of the rotation if the flu

vaccine is not available, but students will be updated with each season's hospital and state requirements as they become available.

If a clinical site requires special immunization requirement, the Clinical/Concentration Coordinator will inform the student about such requirement. The clinical site has the authority to deny clinical training at their facility if requirements are not met. Additionally, the refusal to obtain such additional immunizations will hinder the student's progress and may lead to student dismissal.

ACCIDENTS WHILE ON DUTY

Students, who are injured or exposed to blood, bodily fluids, a contaminated needle, or no matter how minor an injury may seem, must immediately report the incidence to their Clinical Instructor and the Program Director and/or Clinical/Concentration Coordinator. Students must complete an incident report on the injury depending on the policies of each clinical site. A copy of the report must be sent to the Clinical/Concentration Coordinator and/or the Program Director. Students must familiarize themselves with the rules and policies regarding incident reports at the clinical site which are attended. Students are responsible for all the costs incurred as a result of injury.

INFECTIOUS DISEASES

Students should be aware of, and adhere to, the policies and measures that the clinical sites use to protect both patients and hospital staff from communicable diseases. Universal precautions should be used for all cases with a risk of exposure to a communicable disease. Students must respect and protect all patients whether they have a communicable disease or not. *All students must be under a sonographer's supervision when performing examinations on patients at risk for, or with known communicable diseases.*

Students, who are exposed to communicable diseases must immediately report the incidence to their Clinical Instructor and the Program Director and/or the Clinical/Concentration Coordinator. Students must follow the communicable disease policy at the clinical site and take all appropriate measures.

JOB PLACEMENT

The Rochester Institute of Technology does not state or imply that graduation from the bachelor or certificate options in the Diagnostic Medical Sonography Program will ensure students will find a job in the field of Diagnostic Medical Sonography. It is the student's responsibility to seek out employment for himself/herself. Sonography job openings received by Program faculty will be communicated to students via email.

LIABILITY INSURANCE

Each student entering the internship portion of the Program is automatically insured by RIT for liability. During the summer before internship, the Program Faculty submits a list of those students who have been approved for internship to the appropriate RIT officials. There is no additional charge made to students for this coverage at this time.

CRIMINAL BACKGROUND CHECKS DRUG SCREENINGS

Some of our sites may require a criminal background check and/or drug screening before students are allowed to do their internship with them. It is *the student's* responsibility to acquire (pay for) the

criminal background check and drug screening before they are allowed to start their internship at that site, if it is required. Once known, the Program Director and /or the Clinical/Concentration Coordinator will inform the student about the need for the criminal background check and the drug screening and the verifications needed since this may vary among clinical sites.

If the background check and/or drug screening reveal(s) any negative results that could be grounds for denying future or continuing clinical placement, the Clinical/Concentration Coordinator or Program Director will notify the student for his/her inability to gain clinical experience and may prevent continuation in the Program due to the inability to meet Program objectives and guidelines.

If the student believes that the information contained in the criminal background check and/or drug screening is (are) inaccurate and wishes to contest the validity of the information, the Program will honor that and will wait for 30 days and will consult with the appropriate RIT officials before a final decision is made.

Note: Students may be denied to take their certification examinations offered by the American Registry of Diagnostic Medical Sonographers (ARDMS) based on violations and sanctions. The student is highly encouraged to review the ARDMS policy regarding the examination sanctions and violations and the pre-application determination of eligibility for ARDMS certification: criminal matters at www.ardms.org

Again, payment of all required criminal background check and drug screening will be the sole responsibility of the student.

SUBSTANCE ABUSE

Substance abuse of any type, such as drugs or alcohol, will not be tolerated during any part of this Program. Possession of, or partaking in, any such substance during the didactic or clinical phase of this Program will be grounds for dismissal from the Diagnostic Medical Sonography Program. Students are urged to review the Institute's D18.1 Alcohol and Other Drugs Policy at <https://www.rit.edu/academicaffairs/policiesmanual/d181> The Program adheres to this policy as well as to the SDMS "Code of Ethics" contained in the SDMS Standards of Ethics.

SMOKING

Students are **NOT** to smoke at any time during clinical hours, except in designated areas assigned by the clinical site. Students are expected to comply with the sites' smoking policies and rules. If these restrictions are ignored, students will be removed from the affiliate, with appropriate hours deducted from the clinical time.

For more details on RIT smoking policy, the student may visit: <https://www-staging.rit.edu/academicaffairs/policiesmanual/c160>

LIBRARY POLICY

Students must abide by the policies and rules of the RIT Wallace Memorial Library (WML) regarding the use of their facility. No special privileges are given to students on internship at a distance from RIT. Therefore, any fines that are accrued must be paid.

Students are encouraged to use the library facilities at the clinical site when the patient load is light. Students must obtain permission from the Clinical Instructor in order to use the library. Students are not allowed to take time out of their clinical training to utilize the library for completing assignments or studying for examinations. The affiliate library is only used when there are no patients in the clinic or authorized and approved by clinical instructor.

Students are encouraged to review the use of the RIT Wallace library at <http://library.rit.edu/use>

MAIL FOLDERS

All general handouts and other information for Program students will be placed in the mail folders outside the Ultrasound Scanning Suite on the first floor of SLA or Building # 78. Each student in the Program has a separate folder. Students are expected to check their mail folders frequently.

PREGNANCY

With confirmation of pregnancy by an accepted medical practice, students must notify the Clinical/Concentration Coordinator and/or Program Director in writing immediately. Students will be allowed to continue in the program only if a letter from a qualified obstetrician states that no danger exists for student and/or the child while performing internship duties. Additionally, maternal pregnancy leave time which must be approved by Program Director, must be made up.

The clinical site utilized prior to the leave is NOT guaranteed upon the return from the maternity leave. If students must leave the program for an extended time which exceeds the agreed upon maternity leave time and for other reasons, a position for internship will be provided on a space available basis upon petition for re-entry. Additionally, a student may need to repeat already achieved competencies to ensure maintenance of competency.

In such situations, it is the student's responsibility to immediately communicate with the Clinical/Concentration Coordinator and/or the Program Director in order to devise a plan for the completion of the clinical requirements of the program.

BEREAVEMENT/FUNERAL LEAVE

Students will be granted for up to three working days of bereavement leave in the case of a death in their immediate family upon notification of the Clinical/Concentration Coordinator and/or the Program Director. "Immediate family" is defined as a student's spouse, parent, step-parent, mother-in-law, father-in-law, child, ward, custody child, foster child, brother, sister, step-brother, step-sister, brother-in-law, sister-in-law, son-in-law, daughter-in-law, grandparent, great-grandparent, grandchild, or great-grandchild.

Students who request bereavement leave for deceased individuals who are not listed above must obtain proper, advanced authorization from the Clinical/Concentration Coordinator and/or the Program Director. When granted, students must make up the missing/lost clinical time.

JURY DUTY

The Program recognizes the civic responsibility of its members, including students, to serve as jurors when so summoned. If a student who may be potentially absent from their clinical site due to jury duty will first attempt to reschedule or be dismissed during the length of the Program. If the student is

unsuccessful, the time missed must be made up and arranged with the Clinical/Concentration Coordinator and Program faculty. Students must notify the Clinical/Concentration Coordinator and/or Program Director as soon as possible of call for jury duty and the expected days of service. Students must keep the Clinical/Concentration Coordinator and/or Program Director informed of any changes in jury duty status of days of service. A proof of jury duty must be provided to the Clinical/Concentration Coordinator.

COURT DATES

Students who are called to testify in court, whether personal or as a witness, must notify the Clinical/Concentration Coordinator and/or Program Director as soon as possible of call for the testimony and the expected days of service. Students must keep the Clinical/Concentration Coordinator and/or Program Director informed of any changes in the status of day(s) of service. A proof of court appearance must be provided to the Clinical/Concentration Coordinator. The time missed must be made up and arranged with the Clinical/Concentration Coordinator and Program faculty.

MILITARY DEPLOYMENT/RESERVE TIME

Students who are called to active duty and in good standing in the Program will not be penalized. When called for active duty, students must notify the Clinical/Concentration Coordinator and/or the Program Director immediately in writing. Students must keep the Clinical/Concentration Coordinator and/or Program Director informed of any changes in the status of day(s) of deployment. A proof of deployment must be provided to the Clinical/Concentration Coordinator.

When verified, the Program Director will automatically implement a leave of absence for the student. The Program honors RIT's Student leave of absence policy. For more details on RIT's policy, students may visit <https://www.rit.edu/academicaffairs/policiesmanual/d021> . The time missed must be made up and arranged with the Clinical/Concentration Coordinator, Clinical Instructor(s) and/or the Program faculty.

HIPAA TRAINING

Students must complete a HIPAA training course before they begin their clinical rotations. The certificate of completion is to be submitted to the Clinical/Concentration Coordinator before the start of the clinical rotations. Some clinical sites may require additional documentation of HIPAA completion. This will be done at each clinical site's discretion.

According to the SDMS Code of Ethics, the sonographer must "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)." The Program acknowledges and adheres to this Code, the RIT Policies and Procedures, and information about confidentiality presented throughout this Handbook. Students are responsible for protecting all patients that they encounter in their clinical sites and prohibited from sharing or revealing confidential information to any third party. Students who fail to abide by this policy may be suspended or dismissed from the Program or the Institute. Student liability insurance provided by the Institute will not protect the student who violates this policy.

For more information on RIT confidentiality policies, student should visit:

<https://www.rit.edu/academicaffairs/policiesmanual/d150>

<https://www.rit.edu/studentaffairs/studenthealth/nsp.php>

<https://www.rit.edu/alumni/resources/confidentiality>

CHEMICAL SENSITIVITY AND LATEX ALLERGY

Students should be aware of the potential for exposure to chemicals and health hazards in the healthcare environment. Students with allergies and sensitivities need to be aware of the hazards within the areas where they will be training or studying. Students with allergies and sensitivities must discuss these issues with the Clinical/Concentration Coordinator, Program Director and/or Program faculty. Students must be aware that the elimination of these hazards might not be possible.

Students who have latex allergies must consult with their physicians regarding the precautions, symptoms, avoidance and any associated potential risks. Physician consults are at the expense of the student. The responsibility of understanding the risks associated with exposure to latex during clinical rotations, even when reasonable precautions are made, lies with the student who has the latex sensitivity.

More information on latex can be found at the following:

American Latex Allergy Association: www.latexallergyresources.org

Center for Disease Control: www.cdc.gov/niosh/latexalt.html

TARDINESS

Every attempt **MUST** be made to be on time every day. Students must notify their Clinical Instructors if tardiness will be more than 15 minutes. Unexcused tardiness in the Program will not be tolerated. The Clinical Instructors in conjunction with the RIT Program Faculty will monitor tardiness. ***Chronic tardiness (late more than 15 minutes for three or more times in one semester) will result in the entire course grade being lowered by one full letter grade for every three (3) offenses.*** Persistence of tardiness behavior may result in probation, suspension and/or dismissal from the Program and removal from the clinical site.

CELL PHONE

Cell phones **MUST** be on silent and put away when entering the ultrasound department at the clinical site. It is not allowed to use the cell phone during clinical time. If needed, the cell phone can **ONLY** be used during break/lunch time. **NO EXCEPTIONS.** Infractions of this policy will result in the need for the make-up of clinical time.

DRESS CODE

The following dress code is enforced to promote a professional and safe working environment. An overall neat and professional appearance should be maintained throughout the year. Students may be involved in some lifting, moving, and reaching around patients, therefore, comfort and mobility need to be a consideration when selecting a wardrobe. Unless otherwise specified by the clinical site, the dress code for students is as follows:

General: Lab Coats (white) must be worn with university nametags clearly displayed at all times. All clothing must be in good repair, conservative in nature, and professional in taste.

For the student's safety, long hair should be pulled back and kept out of the way. Fingernails

need to be kept short and neatly trimmed. Jewelry and rings should be conservative in nature and kept to minimum. This is for the patient and the student's safety. No loose or sharp objects should be worn. Scrubs are NOT permitted to be worn on a daily basis. There will be times when the hospital may require students to wear them (to go to the OR or into the unit), but this is the ONLY time they are acceptable.

Gentlemen must wear slacks (or chinos), dress shirts (tie optional), and dress shoes (comfortable dress shoes are recommended, sneakers only if approved by clinical affiliate). No tee shirts, denim pants, or blue jeans allowed. Strong or excessive cologne should be avoided. Beards and Mustaches must be neatly trimmed.

Ladies should adhere to business casual attire. Slacks, or skirts, with a modest blouse or shirt are recommended for best comfort. Skirt length should extend to or below the knees. No low cut blouses, low rise pants, miniskirts, denim pants, blue jeans, yoga pants or tee shirts are allowed. Sensible, comfortable shoes should be worn. High heels are not acceptable for safety reasons. Strong or excessive perfume should be avoided. Artificial nails or excessively long natural finger nails **must** also be avoided.

For the didactic courses students may wear any appropriate clothes. When inappropriate clinical or professional wardrobe or personal hygiene is identified by the clinical instructor or program faculty, students must correct it immediately. The Program will enforce the dress code policy to ensure the safety and professional standards of all parties.

Students who are found to be non-compliant and in violation of the policy will be:

- Privately notified by the Clinical/Concentration Coordinator or Program Director about the violation.
- Provided with specific requirements on how to correct the violation and be compliant.
- Given one warning and may be required to leave the clinical site.
- Asked to leave the clinical site and return immediately or the next day after correcting the violation.

If students receive more than one warning, their letter grade for the clinical course will be lowered by a letter grade and/or may be placed on probation, removed from the clinical site and/or suspended from the program.

BODY PIERCING

The Diagnostic Medical Sonography Program is committed to an environment which encourages, promotes and protects free inquiry and free expression. All students have the right to hold, express, defend and openly promote their ideas and opinions. The policy is intended to ensure that students meet the requirements set forth by clinical sites.

As stated in the Dress Code policy, students must dress in a professional manner while in the clinical setting. Clinical sites have special rules, regulations and policies regarding jewelry and body piercing. In order to provide clinical placement and allow the students to complete their clinical education requirement, the Program requires students to remove **all apparent non-earlobe piercings**. Some clinical sites may also limit the size and number of earrings. This will be determined on a site by site basis, and the student must adhere to these rules. Knowing that new piercings need some time to heal before removal, it is the recommendation of the Program to abstain from new piercings until the clinical rotations are completed.

Clinical sites may have regulations regarding hair color. Again, in order to provide clinical placement and complete the clinical education portion of the program, the student's hair color should be that which would be considered a natural color. Wild colors and shades of color are not permitted during the clinical rotations.

If students are found not adhering to the above guidelines they will be immediately removed from the clinical site until the problem is corrected. The Clinical Instructor, with the approval of the Program Director and/or the Clinical/Concentration Coordinator, reserves the right to send students out of the clinical site to change their attire. The appropriate hours will be deducted from their clinical time and have to be made up.

Note: The Program does not intend to restrict freedom of speech or any form of artistic or visual expression. It is the intention and the responsibility of the Program to ensure that all the regulations, rules, policies and guidelines set forth by the clinical facilities are met and applied to ensure successful completion of the program requirements by the students.

TRAVEL POLICY

It is the sole responsibility of the student to find transportation to and from their clinical site. If a student does not have a private mean of transportation and will be relying on public transportation, he/she must inform the Clinical/Concentration Coordinator and/or Program Director immediately. The student must be on time to his/her clinical site at all times. Lack of a car and the necessity to use public transportation do not constitute valid excuses for being late to a field experience. For more details, see the policy on Tardiness. While in their assigned clinical sites, students are responsible for any parking fees or fees associated with parking tickets or violations that are incurred.

Furthermore, the Diagnostic Medical Sonography Program has required RECALL DAYS on specific days each month during the clinical phase of the Program. Consequently, this requires the students to travel from RIT to the clinical site and vice versa. These expenses may include, but are not limited to: car expenses, gasoline, parking fees and permits, tolls, airfare and luggage fees, cab fares and public transportation fees. It is the responsibility of the student to make the necessary arrangements. The Program or the Institute is not responsible for any reimbursements or making arrangements for the students. The Program will provide the students with an annual master schedule for the recall days to allow them to plan in advance.

The Program has affiliation with some out-of-state clinical sites. Any student who wishes to do one of his/her clinical rotations at any of those clinical facilities will be required to submit a written consent indicating his/her responsibility for all expenses. All students who wish to pursue a clinical rotation site outside of NY will be individually counseled by the Clinical/Concentration Coordinator and/or the Program Director to make sure they are aware of all policies and rules regarding that. Students are responsible for their own insurance and liability when traveling to and from off campus affiliations.

HOUSING ACCOMODATIONS

Students are responsible for arranging their own housing accommodations and expenses while enrolled in the Program. They are also encouraged to share housing when possible.

This includes, but is not limited to, moving expenses, security deposits, rent, utilities, parking fees, internet connection and travel to and from campus at the designated times. The student fully takes the responsibility of all loss to personal property and/or damage (expenses) that may occur as a direct or indirect result of a move.

For more details on campus housing, the student may visit:

<https://www.rit.edu/fa/housing/content/residence-halls>

<https://www-staging.rit.edu/academicaffairs/policiesmanual/policies/student>

COMPUTER POLICY

It is required that students have **their own laptop computer with the latest version of Microsoft Office, a large memory capacity and high speed and/or access to a computer and to the internet during the academic and clinical phases of the Program.** This will allow for transmission of papers/coursework and clinical logs and to be readily communicated to the Clinical/Concentration Coordinator and/or instructors. Fax transmission may be utilized in cases agreed upon by all parties. Students must check their emails regularly and on a daily basis. Students are required to respond promptly to academic inquiries/requests from Program faculty and staff to ensure completion of tasks in a timely fashion. Students must notify the Clinical/Concentration Coordinator and/or Program Director about any change in email or electronic communication status.

Additionally, students must purchase a flash drive (USB) with high storage capacity for image/case study storage and other related materials.

For more information on the RIT computer use, the student may visit:

<https://www.rit.edu/academicaffairs/policiesmanual/c082-code-conduct-computer-use>

ANNUAL EXPENSES AND FINANCIAL AID

- Tuition & Fees
Visit: <https://www.rit.edu/fa/sfs/billing/tuitionandfees/1617>
- Textbooks
Textbooks are specified and listed in each course outline. Textbooks will be available in the RIT Barnes & Noble Bookstore prior to the start of each semester. Students are required to purchase all the sonography textbooks.
- Supplies & Uniforms
Supplies and/or additional course requirements may be required. Students are required to have their lab coats prior to the start of their clinical rotations.
- Campus Room & Board
Visit: https://www.rit.edu/fa/housing/content/housing-rates?academic_year=2016-2017
- SDMS Membership
With the support of the Program faculty, student will pay approximately \$45 student membership by junior year of the BS degree or first year of the certificate programs. This amount may change and be determined by the SDMS organization.
- Simulation License Package
This is a one-time cost of \$500.
- Other
This may include attendance at national, state or local sonography conference. This is not required. The cost varies.

ADJUNCT FACULTY AND GUEST LECTURERS

Adjunct Faculty and Guest Lecturers for the Diagnostic Medical Sonography Program are highly qualified physicians, sonographers, and other health care professionals who have been asked to lecture on specific topics. The Diagnostic Medical Sonography Program is quite fortunate to have the expertise and the time commitment of these individuals, so please be prompt, courteous, and attentive during their sessions. Students must fill out an evaluation for each guest lecturer's presentation.

CLINICAL ROTATIONS / INTERNSHIP

3rd year prep for Clinical Rotations

In the spring of the student's third year, they will be required to write a short introduction bio about themselves to their future clinical rotation site. No confidential information will be given to the clinical sites, this is just a way for you to introduce yourself before going, and break the ice a little. Students will be given an outline of information that is to be included, and their picture will be taken for it as well in the spring of their third year.

General Expectations for Clinical Rotations

The clinical rotations represent the integration and combination of the didactic and clinical phases of the Diagnostic Medical Sonography Program. A great deal of planning has gone into creating a learning environment that will allow the student to obtain the high level skills required for practice as a Diagnostic Medical Sonographer. The clinical sites (hospitals and office-practices) where students will be placed are busy places offering a variety of services. It is the responsibility of the student to explore and learn as much as possible during this very important year. Students will be assigned a clinical instructor for each rotation. In general, the student is expected to participate in each and every aspect of the department or office where students are assigned. Please remember that we are guests at the clinical site. They have the right to remove students at any time. Please alert the Program faculty immediately if there are any questions or concerns that may arise regarding responsibilities, duties, or other aspects of the rotation.

The RIT Diagnostic Medical Sonography Program is fortunate to have the support of the local and neighboring medical communities for providing clinical sites offering a wide array of clinical experiences. Program faculty provides rotation assignments for all students. The Program cannot assure the student assignment to a clinical site within the immediate Rochester area or other desired area. Several of these sites are located some distance from the RIT main campus. The Diagnostic Medical Sonography Program makes every attempt to assist the student in finding suitable housing. However, ultimately the responsibility for housing, travel, internet access, and food are the student's responsibility during this clinical year. Students are not reimbursed for expenses incurred during their time on clinical education.

Senior students are considered full time students during this clinical training year and are responsible for tuition costs. Students are not remunerated during their time on clinical education. Students on clinical rotations are expected to be prompt and exhibit timeliness in all clinical activities; to demonstrate an understanding of responsibilities, expectations, and capabilities in all clinical settings and activities; to know limitations and adhere to guidelines of clinical practice of the Diagnostic Medical Sonography in all clinical settings and activities; to develop professional and cooperative

working relationships with other healthcare professionals; to maintain OSHA standards of blood borne pathogens and infection control; and to maintain standards of the Health Insurance Portability and Accountability Act (HIPAA) in all clinical settings and activities.

PREREQUISITES FOR ENTRANCE TO THE CLINICAL ROTATIONS

- Grade Point Average - No student will be admitted to the clinical rotations without at least a 2.5 cumulative GPA.
- Course Completion - Before the student may enter clinical rotations, all course requirements for the first through the third years must be completed. No student will be allowed to enter the clinical rotations year without completing all previous requirements, unless authorized by the Program Director. It is the student's responsibility to assure completion of all Program/RIT requirements. If the student is unable to enter the clinical rotations for any reason, continuation the next year will be on a space available basis, as determined by the Program Director.
- Completion of Pre-Rotation Requirements & Health Form Update - Every student must have a **Certificate of Health Statement** form on file in the Program office prior to beginning clinical rotations. This update is meant to provide evidence, as possible, that the student is in no way endangering the health of themselves and/or others in the clinical affiliate before entering clinical rotations. **The Form will be provided to students before the end of the spring semester of the third year for the B.S. or first year for the certificate, by the program faculty.** Although the Diagnostic Medical Sonography Program cannot mandate that a student receive the Hepatitis B vaccine, it is **VERY STRONGLY RECOMMENDED** for the safety of the student. Other conditions may also apply for any given affiliate. No student will be permitted to enter the clinical rotations without this in place.
- Pre-clinical Practical/Competency Evaluations -as stated previously, these examinations must be successfully completed in order to continue into the clinical rotations/internship phase.

EVALUATION OF CLINICAL ROTATIONS' WORK

Clinical Evaluations and Grading

These following objectives will serve many purposes:

- Guide students through their clinical rotations.
- Used as a means to evaluate the student's clinical and didactic progress and proficiency.
- Guide the Clinical Instructor and the Program Director and the Clinical/Concentration Coordinator in assessing the students' performance during the particular semester of study.

The clinical progress, proficiency, and attainment of these objectives will be monitored and checked by the Clinical Instructor and the Program Director and the Clinical/Concentration Coordinator. In order to get some feedback regarding the student's didactic performance while students are in their clinical rotations, these objectives will also be used as assignments to be completed and submitted to the Program Director and/or Clinical/Concentration Coordinator in a timely fashion. Dates are posted along with topics in the lecture schedule.

All written and online assignments must be turned in **ON TIME!** For each week that an assignment is turned in late, students will be penalized by one letter grade. If homework is to be mailed, it **MUST**

be postmarked on or before the due date to be considered on time. If homework is not legible, it will be returned and a penalty of one letter grade will be assigned. Assignments do not have to be typed as long as they are legible. Online examinations must be taken and submitted at the designated time.

You must spend your clinical time performing ultrasound examinations and other patient related duties. If you are waiting for patients, you should spend the time reading, reviewing, and studying. First, you **MUST** receive permission from the Clinical Instructor to have use the idle time to study or if you need to have library time.

The final grade will be the average of the scores received on all objectives for each particular course.

Student Clinical Evaluations

Numerous evaluations will take place during the clinical rotations. Each evaluation, no matter what form, must be passed at the specified level of competency for continuation in the course.

The Clinical Instructor and Staff Sonographers will evaluate the student's clinical progress at each site of each rotation. Dependent on his/her clinical proficiency level, the student may also be evaluated each rotation by the Clinical/Concentration Coordinator by way of a scheduled patient examination selected by the Clinical/Concentration Coordinator during one of the clinical site visits.

Staff sonographers will be asked to complete and sign two evaluation forms for each clinical rotation. On a regular basis, the Clinical Instructor will also be asked to complete and sign an evaluation form and discuss it with you. This will provide the student and Program faculty with a written record of the student's progress and proficiency. This evaluation should be discussed with the student prior to signing and should include ways in which he/she can improve his/her performance. Evaluations must be submitted on the dates specified on the class schedule. The student should take the initiative and remind himself/herself and the Clinical Instructors when the evaluations are due. The dates are indicated in the lecture series schedules provided to the student by the Program faculty. Failure to complete and return any evaluation form will result in a course grade of "F."

The Clinical Instructor and Staff Sonographers should be aware that these evaluations **must** be returned to the RIT Clinical/Concentration Coordinator.

No Evaluations = No Graduation!

Self-Appraisals

The Students will be required to complete and submit a self-appraisal form on the first day of each lecture series to which they are assigned. The intention of this form is to have the student evaluate his/her own competency/comfort level in the clinical setting. The Program Director or Clinical/Concentration Coordinator will advise if the student have problems or concerns and suggestions will be made to make his/her clinical experience more meaningful, enjoyable and productive. Failure to complete and return any self-appraisal forms will result in a course grade of "F."

Attendance Records

The student must report promptly to the department each day and he/she must be at his/her site at least 15 minutes prior to your scheduled start time. Work hours are assigned by the hospital/clinic and should not be less than 35 hours/week, excluding lunch. Students are expected to spend eight working hours per day in clinical, unless *they* wish to spend more time in the ultrasound department.

An accurate weekly attendance record for absences during each rotation has to be signed by the Clinical Instructor and then returned to the Clinical/Concentration Coordinator.

In the event of an anticipated long-term absence (more than **six** days), the student must inform the Clinical Instructor and the Program faculty immediately, and in writing as stated in the Policies and Procedures Handbook. The student will be required to make up these days. This may be done at the end of the internship year or assigned school vacation times. The student should know that there are a minimum number of cases per specialty are required for registry eligibility. The Student is responsible for reminding the Clinical Instructor to fill out and sign the Attendance Sheet on a weekly basis. Failure to do that will result in an "F" grade.

No Attendance Records = No Graduation!

Clinical Absences

If the students should find that they are unable to attend or will be late to their clinical site, the student **MUST** communicate with the site within thirty minutes of the opening of the department, in a way agreed upon by the student and the clinical site. If at all possible, notifications should be made at least one day in advance. For pre-determined absences, the student must communicate with a person about his/her absence. It is highly discouraged to leave a voice message only to report an absence or time delay.

If the student is absent from clinical because of an illness, a snow day, or for personal reasons, this should be marked on the Attendance Notification Form as "ILLNESS", "PERSONAL" or "SNOW DAY" and signed by the Clinical Instructor. Both the Program Faculty and the Clinical Instructor must sign the Attendance Notification Form.

Clinical absence days need to be made-up if the student exceeds three (**3**) absences. The "Make-up Days" portion of the **Attendance Notification Form** must be completed for days that are made up, as well as a completion of the make-up day Tally Sheet.

All days scheduled for breaks and holidays will be as shown on the class schedule included in the Student Sonographer Handbook, which the student will buy before the start of their clinical internship.

Sick Days

The student has a total of **three (3) sick/personal days** for your entire two (2) semester internship. It is realized that on occasion the student simply needs a little time for himself/herself. It is not necessary for the student to be physically ill to use a sick/personal day. No physician note is required, unless the student is absent for two or more consecutive days because of an illness. In this situation, the student must obtain a note from their physician stating that he/she is able to

return to work, and present no danger to the patient. Exceeding the limit of sick days will result in make-up days, lowering of grade, or denial of graduation. Other sick day policies may be indicated in individual course syllabus. **ANY OTHER TIME TAKEN OFF FOR ANY REASON, INCLUDING RESEARCH OR STUDY TIME WILL BE COUNTED AS SICK OR PERSONAL TIME UNLESS YOU HAVE OBTAINED PRIOR CONSENT FROM EITHER THE PROGRAM DIRECTOR OR CLINICAL/CONCENTRATION COORDINATOR.** Any time missed beyond the three (3) allotted sick/personal days will have to be made up. Make up time may occur at the end of the year or after graduation. The student does NOT have vacation time to use during the clinical internship. This is an intensive time to learn the skills that will be needed to be successful in this profession. Failure to notify the clinical site and/or the Clinical/Concentration Coordinator within the 30 minutes before the start time may result in the need to make up the whole day.

Snow Days

RIT has rarely closed due to snow. If a snow emergency should exist for RIT, the University will announce that through its appropriate announcing mechanisms. If in doubt, call or check the RIT website. If the student is on internship, and the geographic region he/she is attending officially announces a **snow emergency** and/or it is dangerous for the student to attempt to reach the clinical site, a snow day will be recognized. If the student's coworkers are making it to work, he/she should be attempting it as well. There are many times when the weather is bad first thing in the morning, and then clears up within an hour or so once snow removal takes place. It is expected that the student will make every attempt to get to his/her clinical site, even if he/she will be an hour late. Please contact the clinical site, the Clinical/Concentration Coordinator and complete an Attendance Notification Form. A limit on snow days is not set, but if the program feels that the student is not making every attempt to make it to the clinical site, the Program Faculty may require that the student make up the time in order to graduate. Recognized time off for snow emergencies will not be counted against required program internship hours as long as Program requirements are met. It is the student's responsibility to make every reasonable effort to attend the clinical internship in snowy weather. **Improper use of snow days will result in one full letter grade reduction in each course involved**

Conferences

During the clinical year, the student may have the opportunity to attend one or more conferences related to the field of Diagnostic Medical Sonography. The student allowed **three (3) conference days** during the clinical internship. (Prior consent from the Clinical Instructor and the Program Faculty is required.) In this case, the student must complete the Attendance Notification Form.

Interview Days

No more than **two (2) interview days** may be taken for the 2 semester academic internship year. It is strongly suggested that the student saves this time for the last few months. Prior consent from the Clinical Instructor or Program Faculty is required. In this case, the student must complete the Attendance Notification Form.

Clinical Records

There are several records that should be kept and completed by the student to confirm clinical experience. They are the student's only proof that the student has been exposed to the proper

amount and level of clinical experience. Both the **Tally Sheet** and the **Log Sheets** can be found in the Sonography Student Handbook, which will be purchased before the start of the clinical year. A brief description of how to complete the Log and Tally sheets is listed below. Make sure all required forms and documentation are submitted on time. For every day after the due date that the forms are submitted will result in a reduction of one full letter grade for the course. Failure to complete and submit these forms on time will result in a reduction of the clinical grade. **No Medical Records numbers are allowed on forms.** The student must remind himself/herself of the HIPAA regulations at all times. Failure to complete and submit these forms will result in a grade of "F" for the course involved.

- Tally Sheet

These are due during the student's return for each lecture series to RIT, each month. It is recommended that the student fill these forms out at the end of each day at the clinical site. If the student falls behind, it can be very difficult to try and backtrack from the department records.

When completing the Tally Sheets, the student must write a number in the appropriate box, not tally marks; i.e., "4" rather than "/". Students must not use zeroes when they have not done a particular type of exam; simply they must leave the box blank.

"Other" is for the unusual cases. Students should write a description of the "other" exam done on the back of the Tally Sheet with the date the exam was done. Students must fill in the total of examinations on the sheet.

The Tally Sheets are required in order to prove to the accrediting/certifying organization the number of exams that the student was exposed to. The student also needs to be exposed to a certain number of exams to meet registry requirements. These forms are kept in the student's permanent records.

No Tally Sheets = No Graduation!

- Patient Log Sheets

Like the Tally Sheets, Patient Log Sheets are due during the student's return for each lecture series to RIT. Students must not type or use ink when filling these out. These must be legible; the student might need to make changes or corrections. The student should enter every patient he/she sees-- this means exams the student reviews, observes, assists, or solos. "Assist" means the student has actually had his/her hands on the transducer, not that the student took the linen off the bed. These log sheets prove that the student has had the patient contact, which he/she claim to have had, so they must have all of the identifying features needed to go to the files and pull the case. However, no names should be included to protect patient confidentiality. The student also should make note of interesting cases in the "Ultrasound Findings" column with an asterisk. The student make sure the following items are included when completing the Patient Log sheets:

- Patient information including age and gender.
- Patient history and current symptoms including lab values and explanatory notes.
- Type of exam ordered.

- Exam Indication. What are they trying to rule out, or determine from the examination?
- Follow-up information, if obtainable. (Pathology or surgery reports, further imaging like another ultrasound, CT or Mammography, patient prognosis or if they are being referred back to their personal physician for treatment)
- The student must mark the Soloed, Assisted, Observed, or Reviewed box for each patient.

The Log Sheets are required in order to prove to the accrediting body the type and history of the exams that the student was exposed to. Make sure these are accurate and concise. These forms are also kept in the student's permanent records. The student must make sure that their name is on EVERY page, or he/she may not receive credit.

No Log Sheets = No Graduation!

****There is a lot of monthly paperwork that will be turned in. Failure to have this paperwork neatly STAPLED together, with the student's name on it and turned in at the given time can lead to a reduction in the student's clinical grade.****

- Case Studies

The student is ***required*** to present or submit case studies throughout the clinical rotations. The Case Studies are usually due when the rest of the required paperwork is due unless specified by the Program faculty. The student must keep track of interesting cases or utilize the clinical sites teaching file for his/her case studies. The student does not have to be personally involved with the cases that he/she presents, however he/she will be responsible for knowing about the anatomy/pathology and any other pertinent information in the case study that he/she presents. Case study presentations should not be more than ten minutes in length. To protect patient confidentiality, the patient's name, medical record number, hospital name, and year must be **obscured or removed from the films/images**. The case studies must deal with different subject matter for each presentation.

Case studies ***must be in a PowerPoint Format***. The file name for each PowerPoint Presentation must be in the following format: **The student's last name, the student's first name and topic**. It is the student's responsibility to make sure that he/she is able to obtain digital copies of the needed films in a timely manner. Failure to submit a case in such a format will result in an "F" for the assignment. Many of the clinical sites are now filmless and the student can easily copy the needed images/video clips to a CD or a jump drive. If this is not the case and the student only has films available, it is required that the student contact the Clinical/Concentration Coordinator to make arrangements to have the images scanned on campus. Failure to have images/video clips in your PowerPoint will result in a reduced grade. Each case study must be accompanied by the Clinical Case Study Presentation and must be filled out and accompany every case study the student submits.

Information that ***must be included*** in each case study ***PowerPoint Presentation***:

- History (age, sex, race, medical conditions)
- Physical findings

- Laboratory data
- Clinical impression
- Ultrasound findings
- Differential diagnosis
- Follow-up information
- Discussion of pathology
- Scanning techniques employed with rationale
- References
- Discussion of current techniques and interpretations as obtained from at least three current articles or chapters in books. The student must site his/her references.
- ***Including any HIPAA information will require that the case be corrected and resubmitted, with a reduction of grade. The student may consult with the Clinical Case Study Grading Form to learn how he/she will be graded on his/her presentation.***

DELAY IN THE COURSE OF STUDY

If, for any reason, a student is unable to continue to the next year of study (including the clinical year), continuation in the Program will be at the discretion of the Program Faculty.

FOR EXAMPLE: If a student has not completed the pre-requisites for the fourth year of study (clinical rotations), the student may not be permitted to proceed to the following year.

LEAVE OF ABSENCE

Under special circumstances the Diagnostic Medical Sonography Program may grant a student an official leave of absence for personal, medical, or academic reasons for a period of time not to exceed one calendar year. The student must submit this request in writing to the Program Director. If the leave of absence is approved, the Program Director provides written notification to the student including applicable beginning and ending dates and an academic agreement to the student. Decisions concerning matriculation dates and special conditions pertaining to these leaves are the decision of the Diagnostic Medical Sonography Program faculty. The student then needs to initiate the appropriate formal paperwork for a leave of absence from the Diagnostic Medical Sonography Program. When a leave of absence is taken, the student may need to repeat some of the courses completed prior to the leave of absence. Any student who is granted a leave of absence is subject to changing standards within the curriculum that may necessitate additional courses and/or additional time to complete the degree requirements. In all cases of leave of absence, the student is required to complete the full curriculum to graduate from the program.

LECTURE SERIES/RECALL DAYS

Once every month, students will return to the RIT campus for a 2-day, 3-day or 5-day intensive lectures and examination sessions and case presentations. Attendance at these classes is mandatory and tardiness is unacceptable. Any unexcused absence, as determined by the Program faculty, may be cause for repeating that current rotation, in its entirety, at the conclusion of the year. Students must be in the assigned room 10 minutes prior to the start of each lecture. Lecture series/Recall days will generally run from 9:00 am - 4:00 pm. Students should be prepared for a full day of events. It is imperative that senior students register for courses in the fall and spring semesters. Failure to do so may result in the student being pulled from the rotation and/or loss of financial aid.

ROTATION SITE VISITS

Students on clinical rotations will have site visits, performed by the Clinical/Concentration Coordinator and/or other members of the program faculty, on a frequent basis throughout the senior year. Students may or may not be notified, in advance, of the Site Visit date. It is the student's responsibility to be totally prepared for any Site Visit. This is important in ensuring quality time spent with program faculty during the site visitation. Students will be observed while scanning by the Clinical/Concentration Coordinator or program faculty. Students' performance will be evaluated based on the performance on clinical competencies/examinations and their involvement as a team member and professionalism as well.

UNPROFESSIONAL BEHAVIOR / CONDUCT

It is imperative that the Diagnostic Medical Sonography student uses great caution and diplomacy when dealing with patients, clinical instructor, and/or other healthcare personnel. A student who is, in the judgment of the clinical instructor, acting in an unprofessional manner will be immediately removed from that clinical site. The dismissed student is not to return to the clinical site until informed by the Program Director and/or Clinical/Concentration Coordinator to do so. The clinical instructor will notify the Clinical/Concentration Coordinator as to the nature of the students' behavior and reason(s) for dismissing the student from the clinical experience. If, after investigation, the Program Director determines that the student's behavior was inappropriate, the student will then appear before the Diagnostic Medical Sonography Program faculty. THE PROGRAM FACULTY has the authority to:

- * warn the student, and/or recommend any remedial activities, or have the student repeat the rotation satisfactorily at the conclusion of the year, prior to receipt of their degree
- * have the student dismissed from the Program.

A student may be dismissed from enrollment in the Diagnostic Medical Sonography Program if, in the opinion of the Program faculty & administration, his/her knowledge, character, or mental or physical fitness cast grave doubts upon his/her capabilities as a Diagnostic Medical Sonographer. Any student who exhibits personal characteristics which seem inappropriate to one seeking to become a Diagnostic Medical Sonographer will be considered for dismissal from the Program. It is not possible to enumerate all forms of inappropriate or unprofessional behavior which could raise serious questions concerning a student's status as a health professional in training. The following, however, are examples of behavior which could constitute a violation of such professional standards: conviction of a felony; placing a patient in needless jeopardy; unethical disclosure of privileged or confidential information; falsifying documentation or patient information; abusive or disrespectful conduct towards members of the faculty, administration or professional staff, employees, students, hospital visitors, or patients; violation of any established rules and regulations of RIT or any affiliated institution.

PHYSICS BOARD

All students will be required to sit for the National Certifying Physics (Sonography Physics and Instrumentation, SPI) examination prior to their graduation from the Program. It is required that all students take this examination no later than the first week of April of their internship year. All details and preparation for this examination will be added by the Program faculty. ***NO EXCEPTIONS.***

GRADUATION CLASS PICTURE

During the pinning ceremony, graduating students with their lab coats are required to participate in a graduation class picture. The program faculty will arrange with the students the time and location of the “photo shoot.” The class picture will be framed and posted in the appropriate program space in the SLA building (bldg.78).

EXAMINATIONS

All examinations (online or written) must be taken at the designated time. If special accommodations are needed to take the examinations, it must be arranged at a time outside the clinical and didactical time. A student must consult with the Program faculty and obtain approval.

NO EXCEPTIONS.

PROGRAM PROGRESSION

Matriculated students in the Diagnostic Medical Sonography Program must complete all academic requirements to progress onto the appropriate academic year. Once matriculated into a class year, students are permitted to take a limited number of courses at another institution during the summer, pending Diagnostic Medical Sonography Program Director approval. It is, however, important that students take core science courses at RIT to ensure a consistent educational experience. Students are not permitted to skip class years once matriculated in the Diagnostic Medical Sonography Program.

UPWARD PROGRESSION MEETINGS

Moving from the third (didactic) year to the fourth (clinical) year of the BS and from 1st to 2nd in the certificate options of the Diagnostic Medical Sonography education is a major transition as they embark on their year of clinical rotations. At the end of the third year (BS) or 1st year (certificate), all Diagnostic Medical Sonography students will meet with Program faculty. This interview/meeting is designed to provide students with personal insights, reflections, and thoughts regarding their professional development and overall professionalism as they have progressed through the program-to-date. The Program faculty will share student strengths and areas of improvement by which the student can expand upon during the clinical internship.

PROFESSIONALISM

Professionalism is a critical component of the Diagnostic Medical Sonography profession and is a characterization, which strongly embodies the educational process as well. Such personal character traits and attitudes are empathy, respect of patients, health care professionals, faculty, staff and rights of other students, honesty, friendliness, and fairness. Timely attendance to classes, meetings, academic advisement sessions, avoidance of any behavior which disrupts or interferes with academic proceedings are all expectations within the Program. Students are expected to represent themselves with courtesy and respect towards others and not spreading malicious gossip. In classes, on campus, and in clinical affiliates, students should actively participate and conduct themselves in a respectable, presentable, and well-groomed fashion. Professionalism also requires adherence to ethical principles addressed previously under the SDMS Code of Ethics.

STUDENT IDENTIFICATION

ALL Diagnostic Medical Sonography **STUDENTS MUST BE CLEARLY IDENTIFIED AS** Diagnostic Medical Sonography **STUDENTS DURING ALL CLINICAL EXPERIENCES.** The

Diagnostic Medical Sonography Program provides all interning students with student identification badges. Clinical sites may require students to wear their institution's identification badge as well as students' RIT identification badge. If an ID badge should become lost or stolen, immediate replacement of that badge is the student's responsibility. Replacement badges must be ordered through the Program faculty at the student's cost.

SAFETY REGULATIONS AND LABORATORY REQUIREMENTS

It is the of the RIT Environmental, Health & Safety Department to help ensure faculty, staff, and students have a safe and healthy working and learning environment in all RIT owned and operated laboratories. In order to accomplish this, the Diagnostic Medical Sonography Program require all of its students to make it their top priority to work safely at all times.

The goal of RIT's Laboratory and Chemical Hygiene Safety Program is to minimize the risk of exposure, injury/illness to students while working in laboratories by ensuring that they are provided with the appropriate information, support, and equipment needed to work safely.

Attitude: Awareness that the student's actions and attitude affect not only himself/herself, but others around as well.

- Students working in the sonography laboratory must adhere to the following:
- Wear appropriate attire.
- Clean up their space (Sanitize and protect equipment and stretchers after every use with the appropriate cleaning material; Store transducers properly and do not let them dangle or hang precipitously to prevent them from dropping on the floor; Removal belongings/books). The Program is not responsible for any loss of books or belongings.
- No audible cellular phones or pagers are allowed in the laboratory.
- No children or unauthorized people are allowed in the laboratory unless authorized and approved by Program faculty or staff.
- It is the responsibility of the students to report any broken, damaged or not working equipment to the Clinical/Concentration Coordinator or Program Director immediately.
- This facility is meant primarily as a training center, not a diagnostic lab. Any abnormalities or pathologies found will need to be followed up with the person's personal physician. The faculty and staff will do their best to assist in this process as they can.

CONFIDENTIAL INFORMATION

It is necessary to obtain, on a yearly basis, the student's consent to discuss academic concerns with parents and/or legal guardians. This form can be found at:

<https://www.rit.edu/healthsciences/sites/rit.edu.healthsciences/files/forms/ferpaconsentform.pdf>

It is the student's responsibility to print, sign and return it to the program faculty and staff before the end of the first week of classes every fall.

Likewise, it is the student's responsibility at the end of their pre-clinical phase to print, sign and return to the program faculty and staff the attached Personal Information Release Consent Form. This allows the program to release your Health form and Immunization record to potential clinical sites.

FERPA CONSENT TO RELEASE STUDENT INFORMATION

TO: _____
(Name of University Official and Department that will be releasing the educational records)

Please provide information from the educational records of _____ [Name of Student requesting the release of educational records] to:

_____ [Name(s) of person to whom the educational records will be released, and if appropriate the relationship to the student such as “parents” or “prospective employer” or “attorney”]

(Note: this Consent does not cover medical records held solely by Student Health Services or the Counseling Center – contact those offices for consent forms.)

The only type of information that is to be released under this consent is:

- _____ transcript
- _____ disciplinary records
- _____ recommendations for employment or admission to other schools
- _____ all records
- _____ other (specify) _____

The information is to be released for the following purpose:

- _____ family communications about university experience
- _____ employment
- _____ admission to an educational institution
- _____ other (specify) _____

I understand the information may be released orally or in the form of copies of written records, as preferred by the requester. I have a right to inspect any written records released pursuant to this Consent (except for parents’ financial records and certain letters of recommendation for which the student waived inspection rights). I understand I may revoke this Consent upon providing written notice to [Name of Person listed above as the University Official permitted to release the educational records]. I further understand that until this revocation is made, this consent shall remain in effect and my educational records will continue to be provided to [Name of Person listed above to whom the educational records will be released] for the specific purpose described above.

Name (print) _____

Signature _____

Student ID Number _____

Date _____

Sonography Safety/Protection Guidelines and Acknowledgement Statements

It is the objective of this form, to provide verification to the faculty and staff of the Diagnostic Medical Sonography Program at the Rochester Institute of Technology, that by signing below, the student agrees that he/she has read, and understands the **Sonography Safety/Protection Guidelines and Acknowledgement Statements**.

By signing this form, the student agrees to be bound by the terms of the Sonography Safety/Protection Guidelines and Acknowledgement Statements.

Student Signature

Dated

Print Name

Sign and returned to the program faculty no later than end of September 2018

Student Training Agreement

It is the objective of this form, to provide verification to the faculty and staff of the Diagnostic Medical Sonography Program at the Rochester Institute of Technology, that by signing below, the student agrees that he/she has read, and understands the policies, procedures, and guidelines set forth in the Student Policies and Procedures Handbook.

By signing this form, the student agrees to be bound by the terms of the policies and procedures that have been outlined in the provided handbook.

Student Signature

Dated

Print Name

Scanning Consent Form for Outside People

Please read the following statements regarding the use of ultrasound instrumentation in the laboratory. Sign the consent form only after you have read and understand the following statements.

I take full responsibility to make sure that the people who I bring into the scanning laboratory, who are not a part of the program, are aware of the following before I begin scanning them:

- I have been informed and understand that during the past twenty years there have been no known harmful effects caused by diagnostic ultrasound to either the patient or the operator. Should any deleterious effects be established in the future, I release the Rochester Institute of Technology and its faculty and staff of all liability.
- I understand that RIT's Diagnostic Medical Sonography Program faculty and staff are not physicians and/or legal diagnosticians. If pathology is discovered during scanning laboratories, I understand that it is my sole responsibility, and the person being scanned responsibility, to seek medical advice/treatment from the appropriate health care professional.
- I will not scan any women who are pregnant unless it has been discussed and approved by the Program Director or Clinical Coordinator of the Diagnostic Medical Sonography program. No pregnant woman is allowed to be scanned unless she has been medically cleared by her personal physician.
- I have had the opportunity to ask questions regarding the above procedures, which have been answered to my satisfaction.

Signature of Student _____ **Date** _____

Student Name (Please Print) _____

Diagnostic Medical Sonography Program
College of Health Science and Technology
Rochester Institute of Technology