

# 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.

<b>I.</b>	<b>MISSION STATEMENTS.....</b>	<b>6</b>
<b>I-A.</b>	<b>MISSION AND STRATEGIC PLAN OF THE ROCHESTER INSTITUTE OF TECHNOLOGY .....</b>	<b>6</b>
	<i>RIT Non Discrimination Statement.....</i>	<i>6</i>
<b>I-B.</b>	<b>MISSION STATEMENT OF THE COLLEGE OF HEALTH SCIENCES &amp; TECHNOLOGY .....</b>	<b>8</b>
<b>I-C.</b>	<b>MISSION STATEMENT OF THE DIAGNOSTIC MEDICAL SONOGRAPHY PROGRAM .....</b>	<b>8</b>
<b>I-D.</b>	<b>PROGRAM ACCREDITATION .....</b>	<b>9</b>
<b>I-E.</b>	<b>UNIVERSITY ACCREDITATION .....</b>	<b>10</b>
<b>I-F.</b>	<b>CODE OF ETHICS FOR THE PROFESSION OF DIAGNOSTIC MEDICAL SONOGRAPHY .....</b>	<b>10</b>
<b>I-G.</b>	<b>SONOGRAPHY SAFETY/PROTECTION GUIDELINES.....</b>	<b>13</b>
<b>I-H.</b>	<b>PROGRAM STANDARDS .....</b>	<b>15</b>
<b>II.</b>	<b>ACADEMIC POLICY .....</b>	<b>16</b>
<b>II-A.</b>	<b>LEARNING DISABILITIES .....</b>	<b>17</b>
<b>II-B.</b>	<b>GRADING POLICY.....</b>	<b>17</b>
<b>II-C.</b>	<b>EXAMINATIONS .....</b>	<b>17</b>
<b>II-D.</b>	<b>EXAMINATION REVIEW .....</b>	<b>18</b>
<b>II-E.</b>	<b>RETAKES .....</b>	<b>18</b>
<b>II-F.</b>	<b>PHYSICS BOARD .....</b>	<b>18</b>
<b>II-G.</b>	<b>ACADEMIC DISHONESTY.....</b>	<b>18</b>
<b>II-H.</b>	<b>ACADEMIC ADVISING/COUNSELING.....</b>	<b>19</b>
<b>II-I.</b>	<b>ACADEMIC GRIEVANCE.....</b>	<b>19</b>
<b>II-J.</b>	<b>DEGREE REQUIREMENTS .....</b>	<b>20</b>
	<i>Bachelor of Science, Abdominal Sonography-Extended, OBGYN (Abdominal-Extended Sonography and OBGYN Sonography).....</i>	<i>20</i>
	<i>Certificate Option (Abdominal Sonography-Extended and OBGYN Sonography or Adult Cardiac Sonography).....</i>	<i>21</i>
<b>II-K.</b>	<b>PROGRAM PROGRESSION.....</b>	<b>21</b>
<b>II-L.</b>	<b>PRE-CLINICAL DIDACTIC AND LABORATORY PERFORMANCE POLICY .....</b>	<b>22</b>
<b>III.</b>	<b>CLINICAL POLICY .....</b>	<b>26</b>
<b>III-A.</b>	<b>PREREQUISITES FOR ENTRANCE TO THE CLINICAL ROTATIONS.....</b>	<b>26</b>
<b>III-B.</b>	<b>CLINICAL ROTATIONS/ INTERNSHIP .....</b>	<b>26</b>
<b>III-C.</b>	<b>EVALUATION OF CLINICAL ROTATIONS' WORK.....</b>	<b>32</b>
<b>III-D.</b>	<b>CLINICAL PAPERWORK.....</b>	<b>332</b>
<b>III-E.</b>	<b>STUDENT CLINICAL EVALUATION .....</b>	<b>333</b>
<b>III-F.</b>	<b>SELF-APPRAISALS .....</b>	<b>344</b>
<b>III-G.</b>	<b>CLINICAL ABSENCES.....</b>	<b>344</b>
<b>III-H.</b>	<b>CLINICAL RECORDS.....</b>	<b>344</b>
	• <i>Logs.....</i>	<i>344</i>
	• <i>Case Studies.....</i>	<i>355</i>
<b>III-I.</b>	<b>ROTATION SITE VISITS.....</b>	<b>366</b>
<b>IV.</b>	<b>GENERAL POLICY .....</b>	<b>377</b>
<b>IV-A.</b>	<b>GENERAL EXPECTATIONS.....</b>	<b>377</b>
<b>IV-B.</b>	<b>ATTENDANCE RECORDS.....</b>	<b>388</b>
	<i>Tardiness .....</i>	<i>388</i>
	<i>Sick days.....</i>	<i>38</i>
	<i>Snow days.....</i>	<i>399</i>
	<i>Conferences.....</i>	<i>399</i>
	<i>Recharge Days.....</i>	<i>399</i>
	<i>Board Days .....</i>	<i>40</i>
	<i>Interview days .....</i>	<i>40</i>
	<i>Bereavement/funeral leave.....</i>	<i>40</i>

<i>Jury duty</i> .....	40
<i>Court dates</i> .....	40
<b>IV-C. UNIVERSITY WRITING POLICY</b> .....	41
<b>IV-D. EMPLOYMENT</b> .....	411
<b>IV-E. HEALTH CARE</b> .....	411
<b>IV-F. LIABILITY INSURANCE</b> .....	455
<b>IV-G. JOB PLACEMENT</b> .....	455
<b>IV-H. CRIMINAL BACKGROUND CHECKS DRUG SCREENINGS</b> .....	455
<b>IV-I. LIBRARY POLICY</b> .....	466
<b>IV-J. MAIL FOLDERS</b> .....	466
<b>IV-K. PREGNANCY</b> .....	466
<b>IV-L. MILITARY DEPLOYMENT/RESERVE TIME</b> .....	477
<b>IV-M. HIPAA</b> .....	477
<b>IV-N. SOCIAL MEDIA</b> .....	477
<b>IV-O. DRESS CODE</b> .....	488
<b>IV-P. TRAVEL POLICY</b> .....	499
<b>IV-Q. HOUSING ACCOMODATIONS</b> .....	50
<b>IV-R. COMPUTER POLICY</b> .....	51
<b>IV-S. ANNUAL EXPENSES AND FINANCIAL AID</b> .....	51
<b>IV-T. LEAVE OF ABSENCE</b> .....	511
<b>IV-U. LECTURE SERIES/RECALL DAYS</b> .....	522
<b>IV-V. PROFESSIONALISM</b> .....	522
<b>IV-W. CONFIDENTIAL INFORMATION</b> .....	533
<b>IV-X. GRADUATION CLASS PICTURE</b> .....	544

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 policies and 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 and specific programmatic requirements and policies are applied and described herein. Furthermore, information can be found on program's (<https://www.rit.edu/healthsciences/undergraduate-programs/diagnostic-medical-sonography>) and RIT's ([www.rit.edu](http://www.rit.edu)) websites.

### **Program Director**

Hamad Ghazle, Ed.D, RDMS, RVT  
Rochester Institute of Technology  
Diagnostic Medical Sonography Program  
153 Lomb Memorial Drive  
Rochester, NY 14623-5603  
Telephone: (585) 475-2241  
Fax: (585) 475-2160  
Office 78-1698  
Email: [hhscl@rit.edu](mailto:hhscl@rit.edu)

**Clinical Coordinator/Lecturer**

Jodie Crowley, BS, RDMS, RVT  
Rochester Institute of Technology  
Diagnostic Medical Sonography Program  
153 Lomb Memorial Drive  
Rochester, NY 14623-5603  
Telephone: (585) 475-6958  
Fax: (585) 475-2160  
Office 78-1697  
Email: [jccscl@rit.edu](mailto:jccscl@rit.edu)

**Clinical Coordinator/Lecturer**

Courtney Stevens, BS, RDMS, RDCS  
Rochester Institute of Technology  
Diagnostic Medical Sonography Program  
153 Lomb Memorial Drive  
Rochester, NY 14623-5603  
Telephone: (585) 475-7742  
Fax: (585) 475-2160  
Office 78-1696  
Email: [cnsscl@rit.edu](mailto:cnsscl@rit.edu)

**Concentration Coordinator/Senior Lecturer**

BethRae King, MS, ACS, RDCS, FASE  
Rochester Institute of Technology  
Diagnostic Medical Sonography Program  
153 Lomb Memorial Drive  
Rochester, NY 14623-5603  
Telephone: (585) 475-7903  
Fax: (585) 475-2160  
Office 78-1695  
Email: [brkscl@rit.edu](mailto:brkscl@rit.edu)

**Senior Staff Assistant**

Lisa Whitley, BS  
Rochester Institute of Technology  
Diagnostic Medical Sonography Program  
153 Lomb Memorial Drive  
Rochester, NY 14623-5603  
Telephone: (585) 475-4363  
Fax: (585) 475-2160  
Office 78-1690  
Email: [llwscl@rit.edu](mailto:llwscl@rit.edu)

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:

## **I. MISSION STATEMENTS**

### **I-a. MISSION AND STRATEGIC PLAN OF THE ROCHESTER INSTITUTE OF TECHNOLOGY**

#### **Mission**

We shape the future and improve the world through creativity and innovation. As an engaged, intellectually curious, and socially conscious community, we leverage the power of technology, the arts, and design for the greater good.

#### **Strategic Plan**

Read the Greatness Through Difference: 2018-2025 Strategic Plan.

<https://www.rit.edu/strategicplan/>

#### **RIT Non Discrimination Statement**

RIT does not discriminate. RIT promotes and values diversity within its workforce and provides equal opportunity to all qualified individuals regardless of race, color, creed, age, marital status, sex, gender, religion, sexual orientation, gender identity, gender expression, national origin, veteran status, or disability.

The Title IX Coordinator has overall responsibility for the university's institutional compliance with Title IX. Any person with a concern about the university's handling of a particular matter related to sex or gender-based discrimination or harassment should contact:

Stacy DeRooy  
Director of Title IX and Clery Compliance  
Title IX Coordinator  
171 Lomb Memorial Drive  
Rochester, NY 14623  
585-475-7158  
[Stacy.DeRooy@rit.edu](mailto:Stacy.DeRooy@rit.edu)  
[www.rit.edu/titleix](http://www.rit.edu/titleix)

Any person may report sex discrimination, including sexual harassment, in person, by mail, by telephone, or by electronic mail, using the contact information listed for the Title IX Coordinator, or by any other means that results in the Title IX Coordinator receiving the person's verbal or written report. Reports may be made regardless whether the person reporting is the alleged victim of any conduct that could constitute sex or gender-based discrimination or harassment. Reports may be made

at any time (including during non-business hours) by calling the telephone number noted above, by electronic mail, by mail to the office address listed for the Title IX Coordinator, or by filing [a report on line](#) with RIT's Title IX Office.

The U.S. Department of Education, Office for Civil Rights (OCR) is a federal agency responsible for ensuring compliance with Title IX. OCR may be contacted at 400 Maryland Avenue, SW, Washington, DC 20202-1100, (800) 421-3481.

### **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.

## **I-b. MISSION STATEMENT OF THE COLLEGE OF HEALTH SCIENCES & TECHNOLOGY**

RIT's College of Health Sciences and Technology is poised to transform the quality, safety, and affordability of health care. By combining technology and medicine, the college seeks to educate 21st century healthcare professionals, develop new patient-focused programs and systems, effectively assess community needs, and develop and apply innovative healthcare delivery practice.

## **I-c. 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.

### **Program Goals and Objectives**

The Diagnostic Medical Sonography Program's goals are to prepare competent entry-level sonographers in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains for the following concentrations:

- a. Abdominal Sonography – Extended
- b. Obstetrics and Gynecology Sonography
- c. Adult Cardiac Sonography

### **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 sonography, Abdominal-Extended sonography, or adult cardiac sonography, 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 Sonographer.
- 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 Act. (HIPAA)
- Recognize the value of membership in professional organizations.
- Maintain an understanding of the new developments, advances and changes in the ultrasound profession.

#### **I-d. PROGRAM ACCREDITATION**

The Abdomen-Extended, Obstetrics and Gynecology, and Adult Cardiac DMS Program at Rochester Institute of Technology is accredited by the Commission on Accreditation of Allied Health Education Programs ([www.caahep.org](http://www.caahep.org)) upon the recommendation of the Joint Review on Education in Diagnostic Medical Sonography (JRC-DMS).

#### **Commission on Accreditation of Allied Health Education Programs (CAAHEP)**

9355 – 113th St. N, #7709

Seminole, FL 33775

Phone: 727-210-2350

[www.caahep.org](http://www.caahep.org)

## **JRC-DMS**

6021 University Blvd., Suite 500

Ellicott City, MD 21043

443-973-3251

[www.jrcdms.org](http://www.jrcdms.org)

## **I-e. UNIVERSITY ACCREDITATION**

RIT is accredited by the [Middle States Commission on Higher Education \(MSCHE\)](http://www.msche.edu).

## **I-f. CODE OF ETHICS FOR THE PROFESSION OF DIAGNOSTIC MEDICAL SONOGRAPHY**

The Society of Diagnostic Medical Sonography (SDMS) 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. Students are expected to be aware of, follow and adhere to the SDMS Code of Ethics. Any student who violates this Code of Ethics will be subject to disciplinary action referral to the University's Student Code of Conduct, or dismissal from the program.

### **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.

### **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 competency.
- 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 <https://www.credentialingexcellence.org/Accreditation/Earn-Accreditation/NCCA>) or the International Organization for Standardization (ISO); <http://www.iso.org/home.html>.
- 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 (<https://www.sdms.org/about/who-we-are/scope-of-practice>), and assume responsibility for his/her actions.
- E. Maintain continued competency through lifelong learning, which includes continuing education, acquisition of specialty specific credentials and re-credentialing.
- 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.

## **Program 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 skills:**

- 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.

### **Communication skills:**

- Students must be able to communicate effectively via speech, reading, and writing.
- Students 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 skills:**

- Students 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 (including pushing and pulling) 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 skills:**

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

**Behavioral and Social Attributes:**

- Students 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.
- Students must be able to develop mature, sensitive, and effective relationships with patients and colleagues.
- Students must be able to tolerate physical and emotional stress and continue to function effectively.
- Students must possess qualities of adaptability, flexibility, and be able to function in the face of uncertainty.
- Students must accept constructive feedback/criticism from others and implement changes pertaining to the feedback provided.
- Students must have a high level of compassion for others, motivation to serve, integrity, and a consciousness of social values.
- Students must possess sufficient interpersonal skills to interact positively with people from all levels of society, and all ethnic and religious backgrounds.

While the above-mentioned abilities are required for the successful completion of program competencies, which are a component of the successful completion of the degree and certificate program requirements, it is highly important to note that the completion of program requirements does not guarantee eligibility to sit for the American Registry of Diagnostic Medical Sonography (ARDMS) examinations. Eligibility for taking the ARDMS examination(s) requires candidates to possess a good moral character. Conviction of misdemeanor or felony, suspension from the Program or University or guilty finding from the University's Academic Dishonesty Committee may indicate a lack of good moral character for ARDMS purposes. For more information regarding the eligibility to sit for ARDMS examination(s), a student may visit <https://www.ardms.org/>.

The Diagnostic Medical Sonography Program encourages individuals with disabilities to apply. Individuals who may not meet one or more of the expectations presented in the Technical Standards are encouraged to communicate with the Program Director for further information. Moreover, the individual will be evaluated by the RIT Admissions Office and the Program Director to determine if reasonable accommodations can be made to ensure successful program requirement completion.

**I-g. SONOGRAPHY SAFETY/PROTECTION GUIDELINES****AIUM statement on bioeffects****Safety in Training and Research**

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 clinical use and Safety of Diagnostic Medical Sonography**

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 experimental mammalian systems at diagnostically relevant exposures, but the clinical relevance of such effects is either not significant or is not yet known. Increased outputs and time of exposure can increase the likelihood of bioeffects. Ultrasound should be used only by qualified health professionals to provide medical benefit to the patient. Ultrasound exposures during examinations should be as low as reasonably achievable (ALARA).

### **As low as reasonably achievable (ALARA) principle**

The potential benefits and risks of each examination should be considered. The as low as reasonably achievable (ALARA) principle should be observed when adjusting controls that affect the acoustic output and by considering both the transducer dwell time and overall scanning time. Practicing ALARA requires that users do all of the following:

1. Apply correct examination presets if built into the diagnostic ultrasound device. The review of manufacturer default presets for appropriateness is encouraged.
2. Adjust the power to the lowest available setting that provides diagnostic-quality images. If appropriate, reduce power at the end of each examination so the next user will start with the lowest acoustic output setting.
3. Monitor the mechanical index (MI) and thermal index (TI). Know the recommended upper limit of the MI, TI, and related duration limitations for the type of examination being performed.
4. Move/lift the transducer when stationary imaging is not necessary to reduce the dwell time on a particular anatomic structure. When possible, avoid fields of view that include sensitive tissues such as the eye, gas-filled tissues (lung and intestines), and fetal calcified structures (skull and spine).
5. Minimize the overall scanning time to that needed to obtain the required diagnostic information.

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.

### **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 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.



## I-h. PROGRAM 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, veteran's 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 via social and non-social media. 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.
- M. The student must attend all classes and labs. If a student misses two (2) classes or one lab without the prior approval from the faculty member, one letter grade will be deducted from the appropriate course. Being late or leaving early more than twice, without the permission from the faculty member, will reduce the final grade by one letter grade. The program recognizes that an occasional absence may be unavoidable; this does not excuse the student from meeting the requirements of the course. The student is responsible for material covered and assignments given on the day of the absence. Again, the student must inform the faculty member prior to the absence.
- N. The student shall not (tape) record any lecture without the prior permission of the faculty member. The faculty member has the right to refuse the student's request to (tape) record a lecture. If a student is provided the permission to (tape) record a lecture, the (taped) recorded lecture is the property of the faculty member. (Tape) recorders must be within full view and not concealed. Students shall not reproduce or otherwise transmit any taped/recorded material without the faculty member's written permission. Students must not (tape) record any test reviews, case presentations, audio-visual materials, programmatic meetings, or any other form of programmatic communication.

In addition to program specific policies, the student shall abide with university policies, including, but not limited to, Code of Ethical Conduct and Compliance (the "Code"), university's [Core Values](#), [Honor Code](#), [Diversity Statement](#), [Commitment to Environmental Sustainability](#), etc.

## II. 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 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 semester, at the minimum.
- 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 is not guaranteed and 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_1.html)

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

## **II-a. 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/staff 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 University 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/disabilityservices/>.

## **II-b. 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 university 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 University with added stipulations.

## **II-c. 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 didactic time. A student must consult with the Program Faculty to obtain approval. **No exceptions.**

**For further information regarding tests/examinations, refer to the Academic Dishonesty Policy.**

## **II-d. EXAMINATION REVIEW**

Students may review examinations in the Program Faculty offices at a time that is agreed upon by both the student and Program Faculty. Original tests will not be available for review.

## **II-e. RETAKES**

All tests with a score below 80% must be retaken, no exceptions. Retakes must be performed by a set deadline scheduled by Program Faculty. If the retake has met the program standards of 80% or higher, then up to 5 additional points will be awarded to the original test grade, not to exceed 80%. For example, if the original test grade is a 76% the student would receive an 80%. If the first retake attempt does not meet program requirements, the student must retake the exam, however, the use of their book and notes is now permitted. If exam is not passed on its first retake, then it will be retaken every day consecutively until passed. If retake is not successfully passed by the determined deadline, the student must meet with faculty to discuss further consequences. No additional points will be added for retakes after the first attempt.

## **II-f. 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, unless an exemption is approved by Program Faculty. All details and preparation for this examination will be added by the Program Faculty. *No exceptions.*

## **II-g. 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 Integrity Committee of the College, and may face academic suspension or dismissal from the Program and the University. The student has the right to appeal any disciplinary action as described in section D17.0 "Academic Conduct and Appeals Procedures," the D8.0 Student Academic Integrity policy and D18.0 "RIT Student Conduct Process" of the University Policies and Procedures Manual.

## **II-h. 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 Advising (<http://www.nacada.ksu.edu>)

The Program has a professional academic advisor 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 her office, where the student can swing by and get assistance without an appointment. The academic advisor for the Program is Chelsea Church. Her email is [ckciao@rit.edu](mailto:ckciao@rit.edu) , phone number is 585-475-6223, and she is located in CBT-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 University Advising, students may visit:  
<https://www.rit.edu/academicaffairs/advising/>

The Clinical Instructor and the Staff Sonographers evaluate students at each clinical site. Written or electronic 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 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/>

## **II-i. 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 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>

## II-j. DEGREE REQUIREMENTS

### **Bachelor of Science, Abdominal Sonography-Extended, OBGYN (Abdominal-Extended Sonography and OBGYN Sonography)**

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 University.
- The student must have successfully completed a minimum of 125 semester credit hours, with a minimum of 59 taken in residence at the University 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/facilities/hale-andrews-student-life-center-slc>. 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/studentlife/year-one-programs>
- 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 demonstrated consistent safety, ethics, professionalism, and satisfactory punctuality and participation in classes, clinical internship and laboratories.
- The student must have successfully completed the Health Form/Update and CPR prior to the start of the clinical rotations/internship.
- The student must have successfully completed the clinical internship and all associated requirements.
- The student must provide the Program post-graduation contact information prior to graduation.

### **Certificate Option (Abdominal Sonography-Extended and OBGYN Sonography or Adult Cardiac Sonography)**

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 University.
- The student must have successfully completed a minimum of 53 (Abdominal Sonography-Extended, OBGYN Sonography) or 42 (Adult Cardiac Sonography) 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 University 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 and CPR prior to the start of the clinical rotations/internship.
- The student must have successfully demonstrated consistent safety, ethics, professionalism, and satisfactory punctuality and participation in classes, clinical internship and laboratories.
- The student must have successfully completed the clinical internship and all associated requirements, including clinical competencies.
- The student must provide the Program post-graduation contact information prior to graduation.

### **II-k. 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 degree and from 1st to 2nd in the certificate options of the Diagnostic Medical Sonography education is a major transition as students 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. Attendance at this meeting is mandatory. 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.

## II-L. PRE-CLINICAL DIDACTIC AND LABORATORY PERFORMANCE POLICY

The grading policy for the pre-clinical proficiencies are course-specific; are at the discretion of the course instructor; and outlined on a course-by-course basis in the course syllabi.

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 proficiency 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, (With the exception of the retake policy).**

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.

### **Pre-clinical proficiency 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 proficiencies. Each pre-clinical proficiency must be passed. The Clinical/Concentration Coordinator and laboratory instructors will meet with students informally and formally once a semester and/or as needed and discuss the student's progress and provide appropriate recommendations.

At the end of each semester, the students will also have their scanning and technical skills evaluated through the performance of a complete pre-clinical proficiency. A pre-clinical proficiency evaluation/rubric will be provided to students at the beginning of the appropriate semester. These evaluations are graded and discussed with the students.

If the student fails to pass **all** the pre-proficiency examinations including the final pre-clinical complete proficiency, he/she will be given one more chance to correct the problem. More details can be seen under **Evaluation** of Pre-Clinical Proficiencies (Practical examinations).

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

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. Students must demonstrate the necessary skills and techniques in order to advance into the clinical phase of the program. These minimal skills could include, but not limited to:

- 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
Annotation	Image storage
Depth	Spectral Waveforms
Focal zone	Zoom/magnification
Overall gain	Color Doppler
TGC	Power Doppler
Multi Hertz	Harmonics
Compound imaging	Hemodynamics of blood flow
Acoustic artifacts	Other

- Scanning Techniques

Many different scanning techniques are taught during the course of the scanning laboratories of the 3<sup>rd</sup> 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 abdomen, small parts, vascular, OB/GYN studies and optional 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 3<sup>rd</sup> year for BS degree 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 observing, reviewing and evaluating students during and after the performance of ultrasound examinations.

- **Clinical Write Up of Diagnostic Information**  
It is the goal of this program to produce compassionate, well-rounded, and well-educated sonographers who will play an integral role in the diagnostic process. In order to do this, it is necessary that students 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-Extended
  - 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 pre-clinical proficiencies 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.
  
- **Ergonomics Techniques**  
This aspect of the profession is highly crucial, integral and important. Student must demonstrate knowledge and application of the ergonomics techniques.
  
- **Safety and Infection Control**  
The student must demonstrate knowledge and application of types and methods of safety and infection control.
  
- **Medical and Sonographic Terminology**  
The student must demonstrate knowledge of medical and sonographic terminology.
  
- **Biological Effects and ALARA Principle**  
The student must demonstrate knowledge and application of biological effects, including ALARA principle.
  
- **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 students 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 images. 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 Proficiencies/Practical Examinations**

Requirements for Pre-Clinical Proficiencies/Practical 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 proficiency/practical 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 proficiency 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 proficiencies (practical examinations) in the allotted time.
- Be able to demonstrate knowledge and application of the ergonomics techniques.
- Be able to demonstrate knowledge and application of types and methods of safety and infection control.
- Be able to demonstrate knowledge of medical and sonographic terminology.
- Be able to demonstrate knowledge and application of biological effects, including ALARA principle.
- A grade of a “B” or higher is needed to successfully pass the pre-clinical proficiencies examination.

**Students must have a minimum of 80% to successfully pass the pre-clinical proficiency (practical) examinations. If a student fails to maintain an 80% on any proficiency /practical the student will need to perform a make-up proficiency /practical, to ensure adequate proficiency in the designated material. The make-up proficiency /practical will be given at an assigned time specified by Program Faculty. The initial failed proficiency /practical score will be the numerical value, which will be used in the final grade calculation unless specified otherwise by the Program Faculty.**

The grading policy for the pre-clinical proficiencies are course-specific; are at the discretion of the course instructor; and outlined on a course-by-course basis in the course syllabi.

If a student fails (<80%) the make-up proficiency, 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 proficiencies 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.

### III. CLINICAL POLICY

#### III-a. 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 not be guaranteed. Students may be required to re-apply to the program and re-admission may not be guaranteed. Students must consult with the Program Director to discuss their cases.
- Completion of Pre-Clinical Rotation Requirements & Health Form Update - Every student must have a **Certificate of Health Statement** form on file in the Program office prior to beginning of the 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 at the end of pre-clinical year 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. Clinical sites may require specific vaccinations and/or immunizations at any time. Once students are assigned to clinical sites and sites require vaccinations, immunizations, and clinically-related documentation, students must comply with the clinical site requirements to be able to start their clinical internships. Additionally, once the students are assigned to clinical sites, the program is NOT obligated to find new clinical sites which do not require such documentation, vaccinations, immunizations, etc. No student will be permitted to enter the clinical rotations without this in place. Refusal to meet the program and clinical requirements may lead to the dismissal of the student from the program.
- Pre-clinical Practical/Proficiency Evaluations -as stated previously, these examinations must be successfully completed in order to continue into the clinical rotations/internship phase.

#### III-b. 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 their choice.

### **Internship Assignment**

At the end of the fall semester of the pre-clinical year, each student who met the program requirements and is expected to continue in the program will be required to complete the survey to prioritize the region of choice for the clinical internship. The Clinical/Concentration Coordinator will provide the survey link or form by the last day of classes.

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. Additionally, students may have split clinical assignments during the same clinical rotation. For example, a student may spend 3 days in one clinical site and the other two days at a different clinical site. This will ensure that all students have the necessary clinical experience. Internship region ranking by students is only for program faculty information and it will not be a means for placement of students in such regions. **All rotation assignments are at the discretion of the program faculty and are subject to change without any prior notice.** Students will be notified about the situation and a new clinical site will be reassigned. The reassignment of clinical sites may lead to interruption of the clinical experience. Students are required to make-up the missed clinical time to ensure adequate clinical time and experience received.

**Under no circumstances will the student contact any clinical site without direct permission from the program.** Contact information for clinical site will be provided during the August recall of the clinical year with instructions for contacting the site before the start of the student's rotation.

### **Biography Statement**

In the spring of the student's pre-clinical year, students will be required to write a short introductory biography about themselves to be shared with their assigned clinical rotation sites. This is just a way for students to introduce themselves before the commencement of clinical rotations. The Program Faculty will work with students to ensure the biographies meet the program requirements. Students will be required to provide a picture to be included in the biography statement. In situations, the Program Faculty may help in taking students' pictures to be included on the biography statement.

### **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 with explanation will be made within 30 business days upon receipt of the petition.
- If the student is not happy with the decision, the student must write the Program Director within 5 business days 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 within 10 business days

- 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 10 business days 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 10 business days. 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 5 business days 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. The Dean of the College of Health Sciences & Technology (prior to moving to the Dean, the student must inform the program director about their intention to connect with the Dean).

### **Clinical Recording Keeping System – Trajecsys**

Clinical rotation record keeping is accomplished using Trajecsys. There is a one-time fee for the student. Currently, it is \$100 but the amount may vary dependent on the rotation length, year and the system.

### **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' competency 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** electronic signatures via Trajecsyst from staff sonographers credentialed in the specialty for that competency area (or certified clinical instructor) indicating their competency 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 information will be completed by the student in their patient logs.

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

- Obtain and review each clinical competency that is to be performed with the Clinical Instructor (or designated sonographer) from the Student Sonographer Handbook
- Determine in advance which patient is to be scanned after being discussed with the sonographers or 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 machine.
- 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

- 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%. Students must repeat each failed competency and time will be determined in collaboration with program faculty and clinical instructors.
- 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 an “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 performance and grading

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. Below is a list of specific items, which are usually covered during the clinical internship:

- Attendance
- Clinical and instructional objectives
- Examinations
- Student-self evaluations
- Internship paper
- Clinical competencies
- Poster project
- Attendance records
- Log sheets
- Case studies
- Clinical Instructor/staff sonographer(s) evaluation(s)
- Other items as specified in the Student Sonographer Handbook and by Program Faculty

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.

### **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. The Program does not guarantee arrangement for minor rotations. The Program is not obligated to provide these minor rotations.

### **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. Students are guests at the clinical sites. The clinical sites have the right to remove students at any time. When students are removed from the clinical sites, the clinical experience may be interrupted and any time lost must be made up by the student. Removal from clinical sites due to violation of program and/or clinical site policies may lead to student dismissal from the program. Students must 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 local and regional 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. The Program is not obligated to find clinical sites based on student's preferences. 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, food, etc. are the student's responsibility during this clinical year. Students are not reimbursed for expenses incurred during their time on clinical education.

- Interning students are considered full-time students during this clinical internship year and are responsible for tuition costs and other financial responsibilities.
- 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
  - Demonstrate an understanding of responsibilities, expectations, and capabilities in all clinical settings and activities

- Know limitations and adhere to guidelines of clinical practice of the Diagnostic Medical Sonography in all clinical settings and activities
- Develop professional and cooperative working relationships with other healthcare professionals
- Maintain OSHA standards of blood borne pathogens and infection control
- Maintain standards of the Health Insurance Portability and Accountability Act (HIPAA) in all clinical settings and activities.
- In addition to program policies, students must adhere to the policies and regulations of the assigned clinical site. Clinical sites reserve the right to suspend students' clinical experience if students violate their policies and regulations. Students who fail to comply with clinical sites policies and regulations may be subject to dismissal from the program.

### III-c. 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 competency.
- Guide the Clinical Instructor, the Program Director and the Clinical/Concentration Coordinator in assessing the students' performance during the particular semester of study.

The clinical progress, competency, and attainment of these objectives will be monitored and checked by the Clinical Instructor, 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 may 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 series schedule, when applicable.

All written and online assignments must be submitted **ON TIME!** For each week, that an assignment is submitted late, students will be penalized by one letter grade unless otherwise specified by the program faculty. Examinations must be taken and submitted at the designated time and as specified by the Program Faculty.

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

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



### **III-d. CLINICAL PAPERWORK**

**Clinical paperwork** is REQUIRED for meeting the program, university, accreditation, and national certifying examination organizations requirements. The Program Faculty has to review and ensure that all of the paperwork is correct, timely and properly logged and archived.

Clinical paperwork submission is accounted in the final grade of each clinical course.

Students are expected to submit their complete clinical paperwork by the date and time they are due and as specified in the lecture series schedule for each month. **NO EXCEPTIONS.** If the clinical paperwork is not complete and not submitted on the due date, and without an agreed extension, the Program Faculty will start deducting the appropriate percentages from the clinical paperwork grade of the clinical course. If the paperwork for a designated month is not complete and not received by the due date, there will be a deduction of 1% for each day it is late. If the clinical paperwork is not complete and 3 days or more late/overdue, a 0% will be awarded for that specific month.

In the event of an emergency that prevents the timely submission of the clinical paperwork, students must communicate with the Program Faculty. No penalty will be assigned if an extension is granted by the Program Faculty. Extensions will not be granted if requests are made on the due date.

### **III-e. STUDENT CLINICAL EVALUATION**

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 competency level, the student may also be evaluated during 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 students. This will provide the student and Program Faculty with a written record of the student's progress and competency. 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 by the Program Faculty. 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 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 submitted to the RIT Clinical/Concentration Coordinator through Trajecs.

***No Evaluations = No Graduation!***

### III-f. SELF-APPRAISALS

The students will be required to complete and submit a self-appraisal form using Trajecsyst before their return to RIT for the lecture series. 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 submit any self-appraisal forms will result in a course grade of "F."

### III-g. CLINICAL ABSENCES

Students must be punctual and on time at all times. 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. The student **MUST** also notify the Clinical/Concentration Coordinator immediately. Students must complete a Time Exception in Trajecsyst when absent from Clinical. The note area of the Time Exception must be filled out with the following information:

- rotation location
- hours missed
- reason for absence

If at all possible notifications should be made to the Clinical/Concentration Coordinator via email at least one day in advance. For pre-determined absences, the student must communicate with clinical staff about his/her absence. It is unacceptable to leave a voice message.

If the student is absent from clinical because of an illness, a snow day, or for personal reasons, this should be marked on Trajecsyst's Time Exception as "ILLNESS", "PERSONAL" or "SNOW DAY" and confirmed by the Clinical Instructor. Both the Program Faculty and the Clinical Instructor must approve the Time Exception in Trajecsyst.

Clinical absence days need to be made-up if the student exceeds three (3) absences. Students must complete the Clinical Make-Up form in Trajecsyst.

### III-h. 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. **Logs** will be completed using Trajecsyst. Make sure all required forms and documentation are submitted on time. Failure to complete and submit clinical paperwork on time will result in a reduction of the clinical grade. **No Medical Records numbers are allowed on forms or any patient identifiers.** 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.

- **Logs**

The logs must be completed daily. 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 logs 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 or MRN's should be included to protect patient confidentiality. The student also should make note of interesting cases in the "Ultrasound Findings."

The student must make sure the following items are included when completing the logs:

- Patient information including age and gender.
- Patient history and current symptoms including lab values and explanatory notes.
- Type of exam ordered.
- Exam Indication. Why are physicians requesting the ultrasound examination? What are they trying to evaluate, 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.

***Students are required to complete the logs with no exceptions. Students must ensure the logs are accurate and concise, and submitted daily. Any submitted incomplete logs will lead to lowering the clinical course(s) grade(s) by one letter grade. Logs will be kept in the student's permanent records.***

***No Logs = No Graduation!***

- **Case Studies**

Students are ***required*** to present and/or submit case studies throughout their clinical rotations. The Case Studies are usually due when the rest of the required clinical paperwork is due unless specified by the Program Faculty. Students must keep track of interesting cases or utilize the clinical sites' teaching files for their case studies. Students do not have to be personally involved with the cases that they present, however they will be responsible for knowing about the anatomy/pathology and any other pertinent information in the case study that they present. 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: **Student last name, first name and topic**. Failure to label the file correctly will result in a reduced grade. It is the student's responsibility to make sure that he/she is able to obtain digital copies of the needed images and/or clips in a timely manner. Failure to have images/clips in the PowerPoint will result in a reduced grade. Nowadays, clinical sites have digital archiving systems. It is the student's responsibility to ask their clinical instructors/sonographers how to download these images or clips from the machine(s) or the digital archiving system to a USB or CD. If this cannot be accomplished and the clinical site(s) only have films available, it is required that the student contacts the Clinical/Concentration Coordinator to make proper arrangements. Again, all case study presentations must be in a PowerPoint format and failure to submit a case study in such a format will result in an "F" grade

for the assignment. All forms (clinical case study grading form and presentation form) must be filled out and accompany every case study the student submits. For more information, students must refer to the case study section in the Student Handbook. Students must show respect towards their peers while they are presenting. No notes, cell phones, electronics, etc., are to be out during case presentations. Failure to do so will result in a decreased letter grade. ***As a health care professional, the student plays a vital role in protecting the privacy and security of patient information. Students must follow HIPAA standards and guidelines as they develop and design their case study PowerPoint presentations. If any HIPAA regulations are breeched, the case study PowerPoint presentation will be returned for making the proper adjustments and a reduction of grade will be applied.***

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

- Exam Ordered/Indication
- Patient's History (age, sex, race, medical conditions)
- Physical findings (symptoms, etc.)
- Laboratory data & relevant previous exams
- Clinical impression
- Surgery/biopsy/interventional procedures/outcomes
- Ultrasound findings (pertinent to final diagnosis)
- Differential diagnosis (how they are differentiated from pathology)
- Discussion of pathology (definition/prevalence/incidence)
  - o Etiology and risk factors
  - o Clinical signs/symptoms
  - o Disease progression/staging
  - o Treatments/outcomes
  - o Short & long term prognosis with & without treatment
- Sonography
  - o Normal sonographic features of the organ
  - o Typical abnormal sonographic features and any atypical sonographic features (compare and contrast to previous cases, if appropriate)
  - o Sonographic appearance as the disease progresses
  - o Validity and/or reliability of sonography in comparison to other imaging methods
- Scanning techniques employed with rationale
- Discussion of current techniques and interpretations as obtained from at least three current articles or chapters in books. Students must site their references. Students must refer to the JDMS reference guidelines for paper writing and development writing in the Student Handbook for more information. Students must use a minimum of three references. No internet sources are to be used. However, a journal article found online is acceptable. If any image, graph, or table is used, the source must also be cited. This does not count toward the three required sources. These may come from internet sources, but only the image.

### **III-i. 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 clinical internship. Students will not be notified, about a site visit in advance. 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.

## IV. GENERAL POLICY

### IV-a. 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 ultrasound 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. when appropriate)
- 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 personally involved in procedures which 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.)
- Demonstrating a behavior that is focused on learning and being a productive and professional team member.

Students are expected and required to adhere to the clinical site policies and procedures; and participate in every aspect of the department's operation. No matter what the duty, it will help the student to understand the "Big Picture" of Sonography. Again, **students must realize that they are guests in the clinical sites.** The clinical sites have the right to remove students at any time.

#### 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. *FOR EXAMPLE:* If a student has not completed any of the pre-requisite courses for the clinical internship, the student will not be permitted to proceed to the following year.

#### 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. No student is allowed to be at the clinical site without the ID badge.

### **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 sonography topics. The Diagnostic Medical Sonography Program is quite fortunate to have the expertise and the time commitment of these individuals. Students must be prompt, courteous, and attentive during these presentations. Students must fill out an evaluation for each guest lecturer's presentation.

## **IV-b. ATTENDANCE RECORDS**

The student must report promptly to the department each day as defined by program requirements. He/she must be at his/her site at least 15 minutes prior to the scheduled start time. The student is obligated to record his/her daily attendance through Trajecsyz.

An accurate attendance record for absences during each rotation must be confirmed by the Clinical Instructor and then returned to the Clinical/Concentration Coordinator on specified dates and times.

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 any days missed. This may be done at the end of the internship year or assigned school vacation times. All clinical make up time must be preapproved by the Clinical Instructor, and Program Faculty before the time is made up. If missed days are not made up on a timely fashion, student graduation may be delayed. 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!***

### **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.** Persistence of tardiness behavior may result in probation, suspension and/or dismissal from the Program and removal from the clinical site.

### **Sick days**

The student has a total of **three (3) sick/personal days** for the 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 or others. 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 THE STUDENT HAS 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. If make up time is not done in a timely fashion, graduation may be delayed. The student does NOT have vacation time to use during the clinical internship. Interning students will not have the university holidays off. The clinical internship is an intensive time to learn the skills and techniques that will be needed to be successful in this profession. The student must contact the clinical site, the Clinical/Concentration Coordinator and complete a Time Exception in Trajecsyst noting “sick” or “personal day” as the reason for the absence. 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. The student must contact the clinical site, the Clinical/Concentration Coordinator and complete a Time Exception in Trajecsyst noting “snow day” as the reason for the absence. 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 is 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 also complete a Time Exception in Trajecsyst noting “conference” as the reason for the absence.

### **Recharge Days**

During the spring semester of the internship/clinical year, the student may need to have a time to rest and recharge. There are specific days that have been built into the academic calendar to reflect this time during the spring semester of the internship/clinical year. This time will NOT count as personal day(s). It can be used to make up missed clinical time, work on school

activities or just as a day to relax. If the student chooses to use this time as make up time, then the student must also complete a Clinical Make-Up form in Trajecsys.

### **Board Days**

During the spring semester of the internship/clinical year, the student may have a ½ day to take each of their board exams. The board days do not count towards the three (3) personal days that the student is allotted. Students must obtain prior permission from the program. Failure to obtain prior permission from the program will result in the time being recorded as personal days. In this case, the student must also complete a Time Exception in Trajecsys noting “board” as the reason for the absence.

### **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 a Time Exception in Trajecsys noting “interview” as the reason for the absence.

### **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. In this case, the student must complete a Time Exception in Trajecsys noting “bereavement” as the reason for the absence.

### **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 from serving. 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. In this case, the student must complete a Time Exception in Trajecsys noting “jury duty” as the reason for the absence. 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. In this case, the student must complete a Time Exception in Trajecsys noting “court day” as the reason for the absence. 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.

#### **IV-c. UNIVERSITY 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;
- 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

#### **IV-d. 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 (not in sonography) 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.

#### **IV-e. 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, the Program Faculty 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 Center 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 Statement 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 (Chickenpox) 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 **middle of July**, as outlined to the students in the spring prior to their clinical year. 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. Clinical sites may require specific vaccinations, immunizations or health documents. Students must have those requirements completed in order to start their rotations at those clinical sites. The Program is not obligated to find alternative sites which do not have such requirements. If a student refuses to comply with program and clinical site requirements, he/she will be dismissed from the program.

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

### **Safety regulations and laboratory requirements**

It is the responsibility 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.

Students are required to wear masks at all times in labs, classrooms and other RIT facilities. Students must abide by the university's safety regulations. No Exceptions.

**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.
- Wear masks and possibly face shields as needed.

- 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; Remove 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.
- 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 will do their best to assist in this process as they can but they will not furnish any diagnosis.

### **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. If a clinical site requires this vaccine, the student must comply; otherwise, the student will be dismissed from the program. 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, Rubeola, Mumps, Varicella, Tetanus/Diphtheria, as well as the season Influenza vaccination for that specific flu season.

If a clinical site has special immunization requirements, the Clinical/Concentration Coordinator will inform the student about such requirement(s). The student must provide the special immunization(s) and at the student's cost. 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 from the program.

### **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/communicable diseases**

A student should not attend clinical sites and ultrasound scanning labs if he/she has been exposed to an acute communicable disease or has a chronic communicable disease where the disease can be transmitted. Students must provide medical evidence that he/she no longer has the disease; no longer in the infectious stage of an acute disease; or has a communicable disease with little risk of transmission when proper and reasonable precautions are applied. Students should be aware of, and adhere to, the policies and measures that the University, Program and clinical sites use to protect students, faculty, staff, 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 involved whether they have a communicable disease or not. ***All students must not participate in the evaluation or care of patients with known communicable diseases. All students must consult with their clinical instructors at all times regarding patients with communicable diseases and obtain proper advisement and counseling.***

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.

Students who have a communicable disease and are permitted to attend classes/scanning may be required to do so under strict and specified conditions. Failure to adhere to these conditions will result in dismissing students from classes/labs. Students with communicable diseases who are not permitted to attend classes/scanning labs will be provided with reasonable didactic instruction. Due to the lack of comparable instructional methods for scanning labs experiences, students must make up the time missed. The make-up time must be coordinated with the Program Director and/or the Clinical/Concentration Coordinator.

Students' medical information is strictly confidential. Information will not be shared with others except with the Program Faculty who have a legitimate educational reason to know the student(s) identity and medical condition(s) and/or as required by the Public Health Laws of New York State or in the case of a serious emergency. Students' immunization records and Certificates of Health Statement Forms are required to be submitted to clinical sites prior to the start of the clinical internships. Students are required to sign the Personal Information Release Consent Form allowing the program to share the information with the assigned clinical site(s).

### **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](http://www.latexallergyresources.org)

Center for Disease Control: <https://www.cdc.gov/niosh/docs/97-135/>

### **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 University'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. Any time missed, must be made up.

For more details on RIT smoking policy, the student may visit:

<https://www-staging.rit.edu/academicaffairs/policiesmanual/c160>

## **IV-f. 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.

## **IV-g. 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.

## **IV-h. CRIMINAL BACKGROUND CHECKS DRUG SCREENINGS**

Some of clinical 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](http://www.ardms.org)

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

#### **IV-i. 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>

#### **IV-j. 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.

#### **IV-k. 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 not be guaranteed. Students may need to reapply to the program. 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.

#### **IV-l. 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.

#### **IV-m. HIPAA**

All students must follow HIPAA guidelines, regarding patient confidentiality, at all times.

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 University. Student liability insurance provided by the University 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/studenthealth/confidentiality>

#### **IV-n. SOCIAL MEDIA**

Social media (Facebook, Twitter, emails, MySpace, Snapchat, Instagram, etc.) are readily available in today's society and has become an integral tool for medical societies, hospitals, and advocacy groups. Some of these forums are being utilized for interaction between healthcare providers and patients. It is imperative that sonography students recognize that the maintenance of confidentiality and overall professionalism while engaging in these technologies is critical to maintaining patient privacy and respect. Clinical sites may have specific guidelines to be followed by employees using social media. Students of the Diagnostic Medical Sonography program are NOT permitted under any circumstances to post or discuss any clinical experience or information regarding their experience with the clinical site, its personnel, or its patients on any social media. Any student posting clinical experiences to social media sites will not only be subject to disciplinary action but also be in jeopardy of probation, suspension, and/or dismissal



from the Program and removal from the clinical site. Such violation may result in a delay of students completing their program requirements and may result in further disciplinary action.

Realizing that the Internet and other social media technologies are fun and can be used to engage, teach, and connect, as well as even disperse correct, vetted health information, they also present risks and carry responsibilities. Students must exercise the upmost professional courtesy and respect to their fellow classmates, Program Faculty and staff, including adjunct faculty, teachers, preceptors, and patients, while engaging in these modalities. Inappropriate postings that may include discriminatory remarks, harassment, and threats of violence or similar inappropriate or unlawful conduct will not be tolerated. Unprofessional conduct, with reference to any technology or action, will not be tolerated in the Diagnostic Medical Sonography Program or at RIT and may subject students to disciplinary action up to and including dismissal from the program.

#### **IV-o. 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.

### **Piercing/Hair Color**

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 visible 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.

### **IV-p. 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 University 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 New York 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.

#### **IV-q. 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>

#### **IV-r. COMPUTER POLICY**

It is required that students purchase **their own laptop computer with the latest version of Microsoft Office, a large memory capacity with an HDMI or VGA connection and/or appropriate adaptor(s). Students must have access to network connection during the academic and clinical phases of the Program.** Chromebook, Tablets and the like may not have the necessary storage, software or connectivity to be able to be used for the required projects for this program. If you have questions, or are in doubt, please contact the Program Faculty for assistance before purchasing. This will allow for transmission of papers/coursework 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 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 dedicated 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>

#### **IV-s. 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>
- SDMS and/or AIUM Membership(s)
  - **SDMS**  
With the support of the Program Faculty, students will pay approximately \$45 student membership by junior year of the BS degree or first year of the certificate programs. Students will pay \$80 for the first year after graduation (50% discount). This amount may change and be determined by the SDMS organization.
  - **AIUM**  
With the support of the Program Faculty, students will pay approximately \$25 student membership by junior year of the BS degree or first year of the certificate programs. Students will pay \$75 for the first year after graduation (50% discount). This amount may change and be determined by the AIUM organization.
- Simulation License Package  
This is a one-time cost of \$500. This amount may change and be determined by the providing organization. The program regarding acquiring this package will notify students.
- Clinical Recording Keeping System  
There is a one-time fee. Currently, it is \$100 but the amount may vary dependent on the rotation length, year and the system.
- Poster Project  
Students are required to print the poster at the students' expense. Estimated cost is dependent on the place of service and may be between \$40 - \$60. The cost is subject to change.
- Other  
This may include attendance at national, state or local sonography conference. This is not required. The cost varies.

#### **IV-t. 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.

#### **IV-u. 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. Students should be prepared for a full day of events. It is imperative that interning 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.

#### **IV-v. 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. If issues around professionalism arise, the student will be removed from the clinical setting until such time that an action plan is put in place for an effective return to the clinical setting. Any and all time that is missed, the student will be required to make it up. Students may also be dismissed from the program if violation(s) of professionalism, including the SDMS Code of Ethics, occur.

#### **Cell phone**

Cell phones or smart watches are not to be used to make calls or to text while in the clinical site or in class. Cell phones or smart watches MUST be on silent/vibrate and put away when entering the ultrasound department at the clinical site or in class. If the cell phone or smart watch rings during class or in the clinical setting, the student will be penalized by deducting points from the course(s) grade(s) and/or student may be asked to leave class or clinical site. If asked to leave clinical site, the student will be required to make up the lost clinical time. If needed, the cell phone or smart watch can ONLY be used during break/lunch time. Cell phones or smart watches use is accepted ONLY in emergency

situations. In cases where the Program Faculty and staff needs to contact the student, they will call the clinical site. It is highly recommended that the student provides the clinical site's telephone number to family members or friends to be contacted in emergency situations.

### **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 that 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 that could raise serious questions concerning a student's status as a health professional in training. The following, however, are examples of behavior that 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, clinical affiliate personnel, employees, students, hospital visitors, or patients; violation of any established rules and regulations of RIT or any affiliated institution. Furthermore, the following behaviors and actions, even though is not exhaustive, are considered unprofessional and strictly prohibited:

- Chewing gum
- The use of any form of electronic devices during class or at clinical site, including making personal phone calls. Students may make personal calls during scheduled breaks or with prior permission from the Clinical Instructor
- Smoking in non-smoking areas
- Use or display of vulgar, abusive, and/or offensive language or gestures
- Emotional outbursts
- Accessing the internet is not allowed at the clinical site for personal use

### **IV-w. 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 Personal Information Release Consent Form. This allows the program to release the student's Certificate of Health Statement Form and Immunization record to the assigned potential clinical site(s).

#### **IV-x. 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).