



CENTRAL OHIO TECHNICAL COLLEGE

DEPARTMENT OF HEALTH SCIENCES

**DIAGNOSTIC MEDICAL
SONOGRAPHY
PROGRAM**

POLICIES & PROCEDURES

STUDENT HANDBOOK

The Program Faculty and College reserve the right to make changes to assure the quality, quantity, and effectiveness of education

Revised 11/03/2025

SECTION I

Overview of DMS Profession

Description of the Sonography Profession

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

Scope of Practice of the Profession

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

The diagnostic medical sonographer functions as a delegated agent of the physician and does not practice independently. Diagnostic medical sonographers are committed to enhanced patient care and continuous quality improvement that increases knowledge and technical competence. Diagnostic medical sonographers use independent, professional and ethical judgment, and critical thinking to safely perform diagnostic sonographic procedures.

Credentialing Agencies

Overview of the ARDMS

The American Registry of Diagnostic Medical Sonographers (ARDMS) is an independent, nonprofit organization in operation to administer examinations and award credentials in a variety of areas including diagnostic medical sonography, diagnostic cardiac sonography, and vascular technology. Upon program completion, COTC graduates are eligible to earn the following ARDMS credentials:

Abd-E/OBGYN Major:	RDMS	Registered Diagnostic Medical Sonographer
Cardiovascular Major:	RDCS	Registered Diagnostic Cardiac Sonographer
	RVT	Registered Vascular Technologist
	RVS	Registered Vascular Specialist
	RCS	Registered Cardiac Sonographer

Credentials awarded by the ARDMS are widely accepted, nationally and in several countries outside of the U.S. The only means of obtaining an ARDMS credential is by examination. Eligible individuals are accepted as candidates and are then required to pass two comprehensive examinations: (1) a Sonographic principles and instrumentation examination and (2) at least one

corresponding specialty examination - to earn a sonography credential. This structure allows for assessment of these two equally important components of the credential. A candidate is not entitled to use a credential offered by the ARDMS until officially notified that the credential has been earned. The DMS program at COTC is CAAHEP accredited. CAAHEP accreditation allows graduates to sit the ARDMS examinations. Application to the ARDMS is independent of graduation requirements and students are responsible for submission of ARDMS required documentation.

ARDMS Credentials

Required Examinations for the RDMS, RDCS, and RVT Credentials		
Physical Principles/ Instrumentation Exam	Specialty Examination(s) Options	Credential
Sonographic Physics & Instrumentation (SPI)	Abdomen (AB) Obstetrics/Gynecology (OB/GYN) Fetal Echocardiography (FE) Breast (BR) Musculoskeletal (MSK)	Registered Diagnostic Medical Sonographer (RDMS)
	Adult Echocardiography (AE) Pediatric Echocardiography (PE) Fetal Echocardiography (FE)	Registered Diagnostic Cardiac Sonographer (RDCS)
	Vascular Technology (VT)	Registered Vascular Technologist (RVT)

Candidates must complete both the SPI and the specialty area examination components within five years (regardless of the sequence in which the examinations are taken). Candidates who do not complete their credential within the five-year time frame must retake the examination they had previously passed. This policy does not apply to registrants seeking additional specialties within the same credential area.

ARDMS Examinations

The Sonographic Physics & Instrumentation examination and the specialty examinations for the RDMS, RDCS and RVT contains multiple-choice and interactive questions. Candidates who are unsuccessful in passing an examination, may reapply, completing a new application, to take the examination again. When reapplying, candidates may begin a new eligibility period 60 days from the previous examination date. Current policies do not limit the number of attempts to pass examinations.

CCI Examinations

Cardiovascular Credentialing International is an alternative credentialing agency for cardiovascular sonographers. CCI is an independent not-for-profit corporation established for the purpose of administering credentialing examinations as an independent credentialing agency. Upon program completion, COTC graduates are eligible to earn the following CCI credentials:

- RCS: Registered Cardiac Sonographer
- RVS: Registered Vascular Specialist

Professional Organizations

Several professional organizations for Diagnostic Medical Sonographers exist. All actively work for the advancement of the profession and for continued recognition of quality patient care. Students are encouraged to become active members in professional societies. Popular organizations include:

National Organizations:

The Society of Diagnostic Medical Sonography (SDMS)
www.sdms.org

The American Institute of Ultrasound in Medicine (AIUM)
www.aium.org

The Society of Vascular Ultrasound (SVU) www.svu.org

The American Society of Echocardiographers (ASE)
www.asecho.org

Technical Standards

Technical standards are defined as the student's ability to accomplish the essential requirements of employment in the Sonography profession or participation in a DMS program. Technical standards for the DMS program include all nonacademic criteria and must be based on tasks performed by a sonographer. They also provide students with an understanding of physical demands required by the program and the profession. This is a requirement of the Commission on Accreditation of Allied Health Education Programs (CAAHEP). All students in the DMS program must possess the following abilities to successfully attain the skills needed to practice in the sonography profession.

Students may be removed from the program if it is determined through objective skill assessment that the student is unable to meet these essential abilities (even with reasonable accommodations).

Communication Ability

1. Sufficient hearing to assess patient needs and identify equipment signals.
2. Sufficient vocalization skills to instruct a patient relative to sonographic maneuvers and obtain a health history.
3. Communicate effectively, verbally and nonverbally, with patients and other healthcare professionals to explain procedures, give instructions, and give and obtain information.
4. Understand verbal instructions and patient needs.
5. Hear, understand, and react quickly to verbal instructions and patient needs, including but not exclusive to hearing codes, alarms and patient calls

Visual Acuity

1. Identify 16 shades of gray from the gray scale provided.
2. Distinguish between the colors of green, blue, black, red and yellow on the color bar provided.
3. Sufficient vision to observe patients, manipulate sonographic equipment, and evaluate image quality.
4. View and evaluate recorded images for the purpose of identifying proper protocol, procedural sequencing, technical qualities and identification of pathophysiology.

Physical Ability

1. Sufficient gross motor coordination to exert up to 20 pounds of force occasionally, 10 pounds of force frequently, and/or a negligible amount of force constantly to move objects.
2. Sufficient fine motor coordination to hold simultaneously a transducer and input data on a sonographic control panel.
3. Work standing on his/her feet 80% of the time.
4. Use both hands, wrists, and shoulders to maintain prolonged arm positions necessary for scanning and perform fine motor skills.
5. Lift more than 50 pounds routinely.
6. Transport, move, and/or lift patients from a wheelchair or stretcher to the examination table or patient bed, and physically assist patients into proper positions for examination.
7. Push, pull, bend and stoop routinely to move and adjust sonographic equipment and perform studies.
8. Use senses (vision, hearing, and touch) to adequately view sonograms, including color distinctions; distinguish audible sounds; perform eye/hand coordination skills required in sonographic examinations; and recognize changes in patient's condition and needs.
9. Work in a semi-darkened room for prolonged periods of time.
10. Be physically capable of carrying out all assigned duties of a sonographer and deliver patient care.

Environmental Requirements

The work involves risks or discomforts that require special safety precautions, working with sharps (needles, razor blades, scalpels, etc.), chemicals and infectious disease. Employees may be required to use protective clothing or gear such as masks, goggles, and gloves.

Intellectual Requirements

1. Organize and accurately perform the individual steps in a sonographic procedure in the proper sequence according to established standards.
2. Follow directions effectively and work closely with members of the healthcare community.
3. Apply problem-solving skills to help optimize patient care and produce the best diagnostic information possible.
4. Essential judgment skills to include: the ability to identify, assess, and comprehend conditions surrounding patient situations for the purpose of problem solving and coming to appropriate conclusions and/or courses of action.
5. Essential neurological functions to include: the ability to use the senses of seeing, hearing, touch, and smell to make correct judgments regarding patient conditions for the purpose of demonstrating competence in the practice of Sonography and patient care. Behaviors that demonstrate essential neurological functions include, but are not limited to, observation, listening, understanding relationships, writing, and psychomotor abilities.
6. Essential intellectual/conceptual skills to include: the ability to measure, calculate, analyze, synthesize, and evaluate to engage competently in the safe practice of Sonography.

Emotional Requirements

1. Provide physical and emotional support to the patient during sonographic procedures.
2. Interact compassionately and effectively with the sick and/or the injured.
3. Handle stressful situations related to technical and procedural standards and patient care situations.
4. Adapt to changing environments and be able to prioritize tasks.
5. Project an image of professionalism.
6. Demonstrate a high level of compassion for others, a motivation to serve, integrity, and a consciousness of social values.
7. Interact positively with people from all levels of society and all ethnic and religious backgrounds.
8. Essential emotional coping skills to include: the ability to demonstrate the mental health necessary to safely engage in the practice of Sonography as determined by professional standards of practice.

SECTION II

Overview DMS Program

Central Ohio Technical College Mission Statement

The mission of Central Ohio Technical College is to meet the technical education and training needs of students and employers in the area.

Students enrolled in the Central Ohio Technical College Diagnostic Medical Sonography Program will be responsible for observing College rules and regulations as stated in the COTC student handbook available on the COTC web site. All Sonography students are urged to become familiar with the Sonography Program, the policies, procedures, and academic requirements. Failure to do so will not exempt or excuse the student from full compliance.

Statement of Commitment

Central Ohio Technical College affirms its dedication to educating students through free, open, and rigorous intellectual inquiry in pursuit of truth. The college is committed to equipping students with the intellectual skills necessary to form their own informed conclusions. COTC upholds the rights to free speech and lawful assembly without requiring, favoring, disfavoring, or prohibiting such expression. We strive to create a community dedicated to an ethic of civil and free inquiry, which respects the autonomy of each member, supports individual capacities for growth, and tolerates the differences in opinion that naturally occur in a public higher education community. The college treats all members of its community as individuals, holding them to equal standards and ensuring equality of opportunity regardless of race, ethnicity, religion, sex, sexual orientation, gender identity, or gender expression.

DMS Program Mission Statement

To provide quality education in the field of diagnostic medical sonography, prepare students as entry-level sonographers with a high degree of skill, and to develop student professionalism through training and mentorship.

DMS Program Accreditation

The Diagnostic Medical Sonography Program at Central Ohio Technical College is accredited by the Commission on Accreditation of Allied Health Education Programs (www.caahep.org) upon the recommendation of The Joint Review Committee on Education in Diagnostic Medical Sonography.

The program is rigorously evaluated by external agencies utilizing specific professional criteria in order to maintain accreditation status. Moreover, faculty and administration constantly assess and identify trends and plan potential advances for the programs and their enhancement. A dedicated DMS Advisory Committee of community health care and education leaders offer input on the quality, effectiveness, and development of the programs. Student data from courses is a

vital component in the assessment process. Student representatives are welcome participants at standing program committees.

DMS Program Chain of Command

A chain of command has been instituted to provide students with a supervisor to whom they may ask questions or report problems. Program concerns are to be directed to DMS faculty members, the Clinical Coordinator, and ultimately, to the Program Director. If indicated, only after following the chain of command, concerns should be directed to the Dean of Technical Studies.

Program Goals

To prepare competent entry-level sonographers in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains for the following concentration(s) it offers:

- Abdominal sonography - Extended
- Adult cardiac sonography
- Obstetrics and gynecology sonography
- Vascular sonography

Program Learning Objectives

Upon successful completion of the Diagnostic Medical Sonography Program, the student should be able to:

1. Demonstrate knowledge and application of ergonomic techniques.
2. Demonstrate knowledge and application of types and methods of infection control.
3. Demonstrate knowledge and application of patient care.
4. Demonstrate knowledge of the roles and responsibilities of healthcare professions to effectively communicate and collaborate in the healthcare environment.
5. Demonstrate knowledge of medical ethics and law.
6. Demonstrate knowledge of medical and sonographic terminology.
7. Obtain, evaluate, document, and communicate relevant information related to sonographic examinations.
8. Identify and evaluate anatomic structures.
9. Demonstrate knowledge of disease processes with application to sonographic and Doppler patterns.
10. Demonstrate knowledge and application of image production and optimization.
11. Demonstrate knowledge and application of biological effects.
12. Demonstrate knowledge of a quality control and improvement program.
13. Demonstrate awareness of resources for professional development.
14. Demonstrate achievement of clinical competency through the performance of the requirements to provide quality patient care and optimal examination outcome

Adult Cardiac Learning Objectives

1. Identify anatomy, anatomic variants, and sonographic appearances of normal cardiac structures.
2. Demonstrate knowledge of normal and cardiovascular physiology and hemodynamics.
3. Demonstrate knowledge of mechanisms of disease, cardiovascular pathophysiology,

and hemodynamics, sonographic technique, measurements, quantitative principles, and Doppler patterns in both the normal heart and with cardiac disease.

4. Demonstrate knowledge of the indications, utility, limitations, and technical procedures for related echocardiographic studies.
5. Demonstrate knowledge, application, and proficiency in the use of quantitation principles applied to echocardiographic images and flow data.
6. Awareness of scanning protocol and modification(s) based on the sonographic findings and the differential diagnoses.
7. Demonstrate proficiency in technique and application of Quantitative principles applied to echocardiographic images and flow data, Stress echocardiography – exercise, Stress echocardiography – pharmacologic, Transthoracic enhanced echocardiogram
8. Demonstrate achievement of clinical competency through the performance of adult cardiac sonography, according to practice parameters established by national professional organizations and the protocol of the clinical affiliate. Clinical competencies must include all competencies listed in the CAAHEP JRC-DMS standards.

Vascular Learning Objectives

1. Demonstrate knowledge of anatomy and anatomic variants of the cardiovascular system.
2. Demonstrate knowledge of normal and abnormal peripheral vascular physiology and hemodynamics.
3. Demonstrate knowledge of mechanisms of vascular diseases, vascular pathophysiology, and hemodynamic effects.
4. Demonstrate knowledge of sonographic appearances, sonographic techniques, measurements, and Doppler flow characteristics in both normal and abnormal vascular structures.
5. Demonstrate knowledge of physiologic vascular testing principles and techniques.
6. Demonstrate knowledge and application in the use of quantitative principles applied to vascular testing.
7. Demonstrate knowledge in ultrasound-guided procedures.
8. Demonstrate knowledge of the role of ultrasound for evaluation of vascular surgical procedures or interventions, including a role in planning, intra-procedural guidance/technical evaluation, and/or post-procedure assessment.
9. Evaluate scanning protocol and modification(s) based on patient-specific factors.
10. Demonstrate knowledge and application of quality assurance and statistical tests used in a vascular laboratory.
11. Demonstrate proficiency in the technique of:
 - Intracranial cerebrovascular
 - Upper extremity and digital arterial physiologic testing
 - Upper extremity arterial duplex
 - Palmar arch
 - Lower extremity and digital arterial physiologic testing
 - Lower extremity exercise testing
 - Vessel mapping

- Visceral vascular
12. Demonstrate achievement of clinical competency through the performance of sonographic examinations of the vascular system according to practice parameters established by national professional organizations and the protocol of the clinical affiliates. Clinical competencies must include all competencies listed in the CAAHEP JRC-DMS standards

Abdomen-Extended / General Learning Objectives

1. Identify anatomy, relational anatomy, anatomic variants, and sonographic appearances of normal anatomical structures.
2. Demonstrate knowledge of the physiology, pathophysiology, sonographic technique, measurements, sonographic appearances, and Doppler patterns, where applicable, in both normal and abnormal structures.
3. Demonstrate knowledge in sonographic guided procedures.
4. Evaluate scanning protocol and modification(s) based on the sonographic findings and the differential diagnoses.
5. Document proficiency in the scanning technique and application for abdominal vascular
6. Doppler assessment & Gastrointestinal tract assessment
7. Demonstrate achievement of clinical competency through the performance of sonographic examinations of the abdomen and superficial structures, according to practice parameters established by national professional organizations and the protocol
8. of the clinical affiliate. Clinical competencies must include all competencies listed in the CAAHEP JRC-DMS standards.

Obstetrics & Gynecology Learning Objectives

1. Identify anatomy, anatomic variants, and sonographic appearances of normal structures of the female pelvis.
2. Identify anatomy, anatomic variants, and sonographic appearances of normal maternal, embryonic, and fetal anatomic structures during the first, second, and third trimesters.
3. Demonstrate knowledge of pathology, physiology, pathophysiology, sonographic technique, measurements, sonographic appearances, and Doppler patterns in gynecologic disease processes.
4. Demonstrate knowledge of pathology, physiology, pathophysiology, sonographic technique, sonographic appearance, measurements, and Doppler patterns in obstetric abnormalities.
5. Demonstrate knowledge and understanding of the role of the sonographer in performing interventional/invasive/advanced procedures.
6. Evaluate scanning protocol and modification(s) based on the sonographic findings and the differential diagnoses.
7. Demonstrate achievement of clinical competency through the performance of sonographic examinations of the gravid and non-gravid pelvis with both transabdominal and endocavitary transducers, and Doppler/M-mode display modes,

according to practice parameters established by national professional organizations and the protocol of the clinical affiliate. Clinical competencies must include all competencies listed in the CAAHEP JRC-DMS standards

DMS Program Philosophy

Policies of the Programs are guidelines to promote students' successful completion, to meet requirements of external review agencies and affiliate institutions and to ensure equitable treatment of students.

Sonography involves providing diagnostic services with consideration for human dignity and the uniqueness of man. The faculty believes that sonography education is concerned with the total system in which it operates. The program of learning should take place in institutions of higher education and that the curriculum should reflect a balance between sonography and general education.

Sonography education focuses on the scientific process of problem solving based on the knowledge and understanding of human behavior, communications, basic science, and sonography in a health care setting. Learning is the intellectual process by which changes are brought about in an individual's response to his environment. Learning occurs in a climate which encourages a spirit of inquiry, offers a cooperative feeling and integrity to the learner, and provides for on-going evaluation. Learning is facilitated when personal goals are sought, material is relevant to the learner and presented in a manner which is comprehensible. When these principles of learning are utilized, the faculty believes that education is a dynamic process in which faculty act as facilitators and resource persons thereby assisting students to assume responsibility for self-direction.

As a member of the health team, the graduate functions as a sonographer performing sonographic procedures with a high degree of skill. The graduate has a responsibility to belong to professional organizations and participate in educational activities. Benefits derived from these activities should be shared with colleagues to enhance the effectiveness of health care.

The DMS faculty views each student as a unique person with special talents, abilities, needs, and goals. To facilitate teaching and learning, the faculty functions as sonography experts and as nurturers of students. The faculty continuously endeavors to provide an environment that assists students to realize their full potential. Using a student-centered approach, the program will prepare graduates with the knowledge, skills and attitudes necessary to continuously improve the quality and safety of the healthcare systems in which they work.

Rigor of the DMS Program

The DMS program is one of the most rigorous programs in the College, demanding determination, stamina, personal planning, and time devoted to study. Preparation for both theory and clinical activities requires fulltime effort. Therefore, students are encouraged to reduce employment to a minimum to maintain the education focus. Clinical days and hours will vary

each semester. Flexibility of time as well as reliable personal transportation is required.

Time management is a key to student success. Each student is responsible for meeting program requirements, including availability for assigned clinical experience, which may occur on day, evening, night, weekday, and weekend hours. Therefore, flexible work scheduling and childcare arrangements are essential. Clinical courses, (i.e., those involving clinical experience), require additional study time beyond the actual scheduled classroom and clinical hours.

Health science courses and the DMS curriculum include graphic and sensitive images of the human body and anatomy for educational purposes. Respect for the human body and maturity is expected at all times. All patients, including those depicted in textbooks, videos, images, lectures, or lab experiences deserve to be treated with dignity and an acknowledgment of their value as individuals. Graphic images, videos, and diagrams of exposed human anatomy is essential to learning all body systems and all functions.

Program Acceptance

Acceptance guidelines have been established by the Diagnostic Medical Sonography (DMS) Program. All enrolling students should become familiar with the admission regulations and requirements.

Admission is limited based on clinical site capacity. Acceptance into the DMS Program is valid only for the semester and year specified on the DMS application. Acceptance is based on quantitative metrics. Quantitative metrics include GPA and score on Entrance Examinations.

The selection process is completely "anonymous", meaning the applicant's name, gender, age, or other personal information is not provided to the selection committee. Applicants are assigned an applicant number and are ranked by highest GPA and entrance exam scores.

Selected students are required to complete observation hours in the DMS lab, drug screening, and background checks. Details and directions are provided at DMS new student orientation.

Applicants that have a positive drug screening will be denied and will be dismissed from the program.

Applicants that have a record on their background check will be required to meet with the Dean to determine candidacy and eligibility to continue in the program.

Students with Prior Enrollment in a DMS Program or with DMS Transfer Credits

Students accepted into the DMS program with Diagnostic Medical Sonography Program transfer credits from another educational institution:

- Must designate their prior enrollment in a sonography program on their COTC & DMS

application during the enrollment process.

- Failure to disclose prior enrollment in a DMS program will result in revocation of admission to the DMS program at COTC.
- If selected into the program, the student **MUST** provide a recommendation letter from the Program Director of the previous DMS program, mailed directly from the college/university to the attention of the COTC Diagnostic Medical Sonography Program Director. The letter must include:
 - Dates of enrollment
 - List of DMS courses completed
 - A statement of clinical performance
 - A positive recommendation for future success in the program & profession.
- Students unable to provide this required documentation prior to the beginning of the program, will forfeit their seat in the DMS program.
- Transfer credits for DMS courses completed at other institutions will not be accepted. All DMS courses must be repeated at COTC.

Accepted Students 1st day

All selected/accepted students into the DMS Program must attend the DMS New Student Orientation and be in attendance on the first day of class fall semester. Students who do not attend orientation and/or the first day of class will automatically forfeit their seat in the DMS program and will be unenrolled from DMS program courses unless prior notification/arrangements have been made with the Program Director.

Recording lectures/Classroom activities

Students who wish to record lectures must obtain the instructor's permission and must turn recorders off when requested and during breaks.

Requirements for advancement

- All course prerequisites must be met before admission to a course.
- A grade of "C" (defined as 75%) or better is required for all DMS courses.
- A student may repeat each DMS course only once, and only with permission by the Program Director
- A student must adhere to all policies and procedures of the program and the College in order to be eligible for graduation.
- All program clinical competencies and proficiencies must be achieved in order to complete the sonography program and graduate.

Special Enrollment for Non-Program Students, Cross-Training & Course Audits

COTC offers an option for registered sonographers to enroll in some DMS courses without being enrolled in the selective DMS program. Sonographers interested in taking a DMS course(s) either as a “refresher” or who would like to cross-train into a different sonography specialty, must hold an active RDMS, RVT or RDCS credential with the American Registry of Diagnostic Medical Sonographers (ARDMS) or CCI, must be employed as a sonographer at the time of enrollment and/or have the permission of the Program Director. Non-COTC alumni may be required to meet with the Program Director prior to enrollment. Non-Program students have the choice to either “AUDIT” courses or receive “CREDIT” for the course(s). Non-program students may not register for clinical courses. Only students enrolled in the selective DMS-BAS CV/GEN program may register for clinical courses due to compliance with clinical affiliation agreements and CAAHEP/JRC-DMS accreditation standards.

SECTION III

Scan Labs

SCAN LAB & EQUIPMENT USAGE POLICIES

The Diagnostic Medical Sonography program is a "hands-on" technology program - students learn by doing the required skills in campus lab and clinical settings. The sonography curriculum includes hands-on scanning experience in a lab setting. In the scan lab courses, students practice performing sonographic examinations on mock patients, other students, and volunteers. Sonography students take turns being the scanner and being the "mock patient" and participation as a scanner is mandatory. In the Diagnostic Medical Sonography Program, you will be asked to have noninvasive ultrasound examinations performed on you in a lab setting, under direct supervision of DMS faculty. If you are unable or unwilling to be a "mock patient" for any reason, please meet with the Program Director and accommodations will be arranged. You may opt out of being a patient at any time with no grade penalty. Please be advised that females will be asked to wear a tank-top and shorts and males will be asked to wear shorts but no shirt during the scan lab courses to allow for scanning access. If you are unable to meet the clothing requirements due to religious beliefs, please meet with the Program Director and accommodations will be arranged.

In both the scan lab and the clinical setting, students may **not discriminate** or opt out in regards to scanning patients or mock patients. Students must be able to perform ultrasound examinations on all human beings regardless of the patient's body habitus, gender, sex, age, race, ethnicity, or beliefs.

ADVANCING IN DMS LAB COURSES:

To receive a passing grade in a DMS Scan Lab course, the student must earn a passing grade of at least 75% AND must receive a passing grade of at least 75% on ALL lab scan proficiency examinations /scanning assessments. A minimal level of competency/proficiency is required for the student to continue in the program and to the next level/subsequent semesters of scan lab courses as scan lab curriculum builds upon previously learned techniques and is cumulative. If a student fails a lab scanning proficiency examination/scanning assessment, the original grade for the assessment will be recorded in the course grade book, however the student will be provided ONE second attempt to pass the competency examination. If the student fails to demonstrate the minimum proficiency/competency (grade of at least 75%) on the second attempt, the student will not be allowed to advance and will receive a failing grade in the scan lab course.

LAB POLICIES:

1. The ultrasound machines may only be used when instructed and under direct supervision of DMS faculty. Unauthorized usage or misuse will result in dismissal from the DMS program.
2. Beds and equipment must be wiped down after each lab session.
3. Gel bottles must be refilled after each lab session.
4. Dirty laundry, gloves, papers must be picked up after each lab session.
5. No food or beverages are allowed near the lab equipment.
6. No profanity or unprofessional conduct will be tolerated.
7. **DMS Equipment Care and Incident Policy**
All equipment malfunctions, probe drops, or potential probe damage must be reported immediately. An incident report must be completed so the probe and/or equipment can be inspected to ensure safety and functionality.
Careless, reckless, or repeated accidental damage to DMS equipment will not be tolerated. The following steps will be enforced regarding probe incidents:
 1. **First incident** – Incident documented, equipment inspected.
 2. **Second incident** – Incident documented, equipment inspected.
Student will be placed on a Performance Improvement Plan (PIP).
 3. **Third incident** – Incident documented, equipment inspected.
Student will receive a Final Written Warning.
 4. **Fourth incident** – Student will be dismissed from the DMS program for improper equipment handling/lab incompetence.

NOTICE

No student or “mock patient” may be scanned for longer than the allotted time for each skills assessment. Disability accommodations, if any, and including increased testing time, do not apply to scanning assessments or in the clinical environment. Transducer pressure, patient positioning, breathing techniques, and repeated compression/vascular compression may result in patient discomfort and there is a potential for bodily harm. In addition, repeated and excessive breath holding/deep inspiration ultimately degrades the quality of abdominal examinations.

- CAAHEP Standard C.3.f states that students must:
Demonstrate knowledge and understanding of the interaction between ultrasound and tissue and the probability of biological effects in clinical examinations, including the generally accepted maximum safe exposure levels and the **ALARA** principle (As Low As Reasonably Achievable).

EXCESSIVE PRESSURE -or- PATIENT HARM

Diagnostic imaging often requires the sonographer/student sonographer to push and apply pressure with the ultrasound transducer. When excessive, repeated force or pressure is identified by faculty, or if there is a complaint from a “mock patient”, the student will be corrected and counseled on appropriate scanning techniques. After verbal and/or written notification of the concern, if the student’s scanning ability fails to improve or if the student continues to apply

excessive, inappropriate pressure to the point that patient comfort and safety is compromised, or there is a potential for bodily harm, the student may be dismissed from the program

Incidental Findings during Student or Volunteer Sonograms

Program and non-program models and volunteers are the cornerstone of ultrasound training as it provides the essential skills needed for the student to become a competent, entry-level sonographer. In addition to practicing on each other, volunteers and models may improve student skills, offering different body habitus that mimics real-life clinical scenarios. Volunteers and models must sign consent prior to being scanned. In the event of discovering incidental pathologic findings, the finding will be documented and the DMS faculty member will inform the volunteer as well as the Program Director. The examinations completed in the educational setting are not “diagnostic”, therefore, the medical director for the program will be notified of incidental findings and the physician will provide guidance for follow up and diagnostic testing.

Disinfection Policy for DMS LAB

Adequate transducer preparation is mandatory to protect from potential infection. The level of preparation depends on the type of examination performed. Preparation of external transducers between patients requires a low-level disinfection (LLD) process. Preparation of internal transducers between patients requires routine mandatory high-level disinfection (HLD) and the use of a high-quality single-use transducer cover during each examination. Users should consult a transducer’s manufacturer instructions for disinfecting devices.

Gloves:

- All students must wear gloves when scanning

Gel Bottles:

- Avoid direct contact between the gel container dispensing tip and any persons or instrumentation, including the ultrasound transducer.

Low-Level Disinfection for Transducers

Transducer Care:

- Excess gel should be wiped off the transducers with a towel
- Use appropriate disinfectant wipe on transducer (Gray-Top Wipes)
- Allow disinfectant solution to completely dry before using the transducer

High-Level Disinfection for Transducers

High-Level Disinfection (HLD) destroys or removes all microorganisms from medical equipment, with the exception of some bacterial spores. According to Centers for Disease Control and Prevention (CDC) guidelines, endocavity probes are categorized as semi-critical

items. As tools in frequent contact with mucous membranes or non-intact skin, semi-critical items require high-level disinfection using approved chemical disinfectants.

Before performing HLD, check the probe's manufacturer recommendations for the types of cleaning products you should use. At COTC, MetriCide 14-day (a Glutaraldehyde 2.6% product) is used.

COTC DMS LAB Endocavity Transducer Cleaning & Disinfection Procedure

- 1) **Wear gloves**
- 2) **Remove** probe cover and dispose of it appropriately.
- 3) **Clean** the probe. Cleaning is the removal of bulk gel or debris from the probe manually using an approved transducer disinfectant wipe. Using a new disinfectant wipe, clean the probe handle and cord. Cleaning is essential before HLD because inorganic and organic material that remains on the surfaces of instruments interfere with the effectiveness of disinfection.
- 4) **Check** the date of 1st use on the MetriCide solution before use.
- 5) **Soak** the transducer. **MetriCide 14 Day Sterilizing and Disinfecting Solution** is a 2.6% buffered glutaraldehyde that can be used and reused as a sterilant and high-level disinfectant for up to 14 days. The transducer must be soaked for **45 minutes**.
- 6) **Rinse** the transducer for a minimum of 1 minute in cold water.
- 7) **Dry** the transducer with a towel and allow it to completely dry before storage
- 8) **Storage**—Suitable options for transducer storage include storage covers, boxes, or cabinets. Proper storage reduces the risk of re-contamination of the transducer from environmental contaminants or accidental contamination during storage.
- 9) **Remove gloves, dispose, and wash hands**
- 10) **Document** all reprocessing details to ensure traceability including, but not limited to:
 - Transducer model
 - Reprocessing personnel identification
 - Chemical indicator/test strip results
 - Soaking time
 - Date/time
 - Patient identification

SECTION IV

CPR, Health & Immunizations, Background Checks

CPR (Cardiopulmonary Resuscitation)

Students will be learning in the clinical environment and performing sonographic procedures on patients who are in critical condition or have sustained life-threatening injuries. Knowledge of resuscitation techniques is imperative. Therefore, Central Ohio Technical College requires that all sonography students be certified in CPR for healthcare providers. Proof of such certification is required prior to the first clinical experience though the remainder of the DMS program.

It is the student's responsibility to keep certification current for the duration of their education. In the event that CPR certification expires during the program, the student will be unable to return to their assigned clinical facility until CPR certification has been renewed. Any absences occurring due to CPR recertification will be subject to grade penalty as outlined in the course syllabus. CPR certification must be approved by the American Heart Association. Upon completion of the CPR course, present your card to the Clinical Coordinator so it may be entered in your record.

The following guidelines have been adopted by Central Ohio Technical College relative to instituting CPR:

1. Whenever possible, the affiliate staff should make the decision to begin CPR on a patient.
2. In the event of a cardiac and/or respiratory arrest, the student will be responsible for:
 - a. calling for help
 - b. placing the patient in a supine position (lowering side rails if in bed)
 - c. opening the airway
3. If help does not arrive within one minute, the student will call again for assistance.
4. CPR may be initiated based upon the student's current knowledge of this patient.

Health Assessment

Students are required to submit a personal health assessment form to the Program Director upon enrollment in the DMS program. These forms will be kept confidential. The student must inform the DMS Program Director of any disability, change in health status and/or therapy which may affect ability to safely perform the role of student sonographer. The student may be required to provide a written release from their physician, verifying that they may perform without limitations. All enrolled DMS students must be able to demonstrate the Technical Standards.

Drug Screening & Alcohol/Drug Policy

Students will be required to complete a drug screening prior to beginning the DMS program and during the program. Students will be notified of required testing due dates randomly. After the drug screening completion dates are announced, the student must complete the screening within the designated timeframe. Failing to complete the assigned testing during the announced time period is insubordination and therefore subject to dismissal from the program. A positive drug screening will result in immediate dismissal from the DMS program without the option for re-admission. COTC reserves the right to repeat drug screening at any time while students are enrolled in the DMS Program. Drug screenings may be requested randomly or by clinical affiliate request. Drug screening are at the student's expense.

- Even though recreational marijuana use is legal in Ohio, it is still illegal from a federal perspective.
- The use of marijuana and/or illicit drugs is not permitted in all healthcare facilities
- All clinical affiliates/partners require a NEGATIVE drug screening
- All DMS students must have a NEGATIVE drug screening throughout the duration of your enrollment in the DMS Program

The Central Ohio Technical College Diagnostic Medical Sonography Program policy prohibits all students from unlawful manufacture, distribution, dispensing, possession, or use of alcohol or controlled substance while on the grounds of the clinical affiliates or the college campus. Reporting for class or clinicals while under the influence of alcohol, prescription or illegal drugs, or narcotics, or other chemical, or in a physical condition making it unsafe to practice clinically or participate as a student is unacceptable. This policy is in conjunction with an effort of the affiliates and the college to provide a safe and healthy classroom and clinical environment. The abuse of drugs or alcohol is unsafe for faculty, students, and patients.

If any student demonstrates an impaired ability to perform his/her job duties, is suspected of alcohol or drug abuse, or is suspected of violating this policy, he/she will be immediately removed from the classroom or clinical area. The student will be required to immediately submit to a drug and/or alcohol screening to be completed. If any detectable level of drugs is discovered, the student will be dismissed from the DMS program. The drug screening examination may be requested by either program faculty, program administration, or the affiliate clinical instructor.

Immunizations

Students admitted into the DMS program must comply with immunization and other health requirements before the first day of assigned clinical rotations and/or by the assigned deadline. Students are expected to remain in compliance throughout enrolled.

COTC is **contractually obligated** to comply with the policies of our partner clinical affiliates. Therefore, to protect students, patients, and colleagues, students are required to provide evidence of adequate immunity to the following diseases. This list is subject to change – students will be promptly notified of any changes.

TB Testing

- TB testing is required by the State of Ohio
- A 2-step Mantoux test or TB blood test is required.
- The student must comply with annual TB testing during the time they are enrolled in the DMS program. DMS students are expected to complete an annual 1-Step TB test prior to their TB due date (within 30 days of the anniversary date of 2-Step test). Failure to comply will be subject to grade penalty as outlined in the course syllabus.
- Written evidence must be provided.
- If there is a history of a positive TB skin test, a chest x-ray report showing no evidence of active disease is required. This student will also complete a TB screening questionnaire upon admission, and annually during the time they are enrolled in the DMS program. The student is to report promptly any symptoms suggesting tuberculosis.
- Students who have received a TB vaccination, must show documentation of TB vaccination and may be required to undergo a chest x-ray showing no evidence of active disease.

Tetanus

- A tetanus/diphtheria (Tdap) booster is required if 10 years have elapsed since the last booster.
- The *CDC Advisory Committee on Immunization Practices* recommends that all healthcare personnel (HCP), regardless of age, should receive a single dose of Tdap as soon as feasible if they have not previously received Tdap and regardless of the time since last Tdap dose.

Measles, Mumps and Rubella

- Student must provide written evidence of the required **two** vaccines; OR Provide written documentation of titer results.

Varicella

- Student must provide self-report of history of varicella disease (chickenpox); OR
- If unknown or no history of disease, student must provide results of varicella titer; OR Provide written documentation of two (2) varicella vaccines given no less than one month apart.

Hepatitis B

- Provide written evidence from the healthcare provider indicating the three dates you have received the vaccine series; OR
- Provide evidence the student has started the series and has had at least the first injection in the 3 series by the first day of clinicals; OR Provide written documentation of titer results.

Flu Vaccination

- Student must provide written evidence of having received the seasonal flu vaccine within the past 12 months, AND
- Student will maintain compliance with annual seasonal flu vaccine requirement by the assigned

deadline

- Failure to comply will be subject to grade penalty as outlined in the course syllabus

Pertussis (Whooping Cough)

- Students must provide written evidence of having received the pertussis vaccination.

Immunizations Records

The immunization forms must be completed by a physician or nurse. All documentation must be complete and all required immunizations must be current. Students must keep a set of all personal health information.

Important notice to Students in Clinical: Students are not permitted to attend clinicals until all required health information is provided and all required immunization and other health requirements are completed. Each clinical day that is missed due to non-compliance with immunization requirements will be subject to grade penalty as outlined in the course syllabus.

Important notice to Students in Intro to Sonography: Students must have all required health information and all required immunization completed by the posted due dates in the course syllabus. Final health/immunization paperwork is worth 30% of the overall course grade. No late submissions will be accepted.

Latex Allergies

Students who are identified as having possible latex allergy must be medically evaluated about potential risk and will be advised to consider another field since latex is prevalent in the healthcare environment. Students with confirmed latex allergy continue in the program at their own risk. The College assumes no responsibility for exposures and possible resulting student health problems.

Immunization Waivers

Medical Waivers:

A student may receive a waiver on health grounds if he or she presents a written statement from a licensed physician indicating that immunization against any or all of the diseases for which immunization is required is medically contraindicated, detrimental to, or not in the best interest of the student. Specific reasons should be noted, such as allergy to components of the vaccine. The physician's statement shall document whether the contraindication is permanent or temporary, and if temporary, provide assurance that the student will receive immunization(s) at the first reasonable opportunity. (For example, rubella vaccine should not be given to pregnant women.) If the student fails to complete the immunizations and provide evidence of same, the student will not be permitted to enter or remain in the program.

Religious Waivers:

If the student objects to any immunization due to religious beliefs, he or she must submit a signed written statement stating that they have chosen not to be immunized because he or she is an adherent to a religion the teachings of which are opposed to such immunizations.

Acceptance of Risk:

Students who are unwilling or unable to comply with the immunization policy of the DMS program must understand that some clinical agencies prohibit the presence of unvaccinated students at their facility. The program will not make special accommodations for unvaccinated students. Therefore, failure to complete the health requirements puts the student at risk of program dismissal.

Physical Examinations

A physical examination, performed at the student's expense, may be required.

Chronic Hepatitis B Infection

Applicants with chronic hepatitis B infection are eligible for admission to Allied Health Programs, and shall not be denied admission based solely on their hepatitis B status. This is in compliance with the Americans with Disabilities Act of 1990 (ADA), Section 504 of the Rehabilitation Act of 1973 (Section 504), and Title VI of the Civil Rights Act of 1964 (Title VI).

Federal civil rights laws broadly prohibit discrimination on the basis of disability. However, those laws do not require schools of higher education to permit an individual with a disability to participate in particular activities if doing so would pose a direct threat to the health or safety of others. All students with chronic hepatitis B infection who are applying to a Nursing or Allied Health program will be evaluated on an individual basis to determine if there is a direct threat to the health or safety of others.

The Centers for Disease Control (CDC) provides the following recommendations for the management of students who have hepatitis B – recommendations with which COTC will comply:

Chronic hepatitis B infection should not preclude the study or practice of Nursing or Allied Health professions. Pre-notification to patients of the hepatitis B status of the clinician should be discouraged. Nursing and Allied Health students who do not perform exposure-prone invasive procedures should not be subject to any restrictions of their activities or studies. Standard precautions should be rigorously adhered to in all health-care settings. All student health records shall remain confidential. Questions or concerns about any student's health status shall be referred to the Dean of Technical Studies for review.

Criminal Records & Background Checks

Students must notify the Program Director of any arrests, regardless of adjudication, that occur after acceptance and enrollment in a program. This notice must be given **within five (5) working days**. Failure to notify the appropriate individuals shall be grounds for denial of admission to or

permanent dismissal from a health science program.

Students convicted of a felony are not eligible for entrance to the DMS Program. The program complies with the criminal records check laws in Ohio specific to healthcare workers. All students applying to the program must submit to fingerprinting in order to verify history regarding any previous offenses. This is a requirement of our affiliate health care agencies.

SECTION V

Clinical Education

Clinical Goals

Sonography students at Central Ohio Technical College will complete 5 clinical rotations to:

- 1.0 Acquire proficiency in a wide variety of diagnostic sonography procedures by applying classroom theory to the actual practice of technical skills on specified levels of competency.
- 2.0 Develop and practice professional work habits and appropriate interpersonal relationships with patients and other members of the health care team.

Pre-Practicum / Pre-Clinical Performance Evaluation

Prior to initial clinical placement, all students must undergo a pre-practicum/pre-clinical performance evaluation with the clinical coordinator and the program director. This serves as a counseling and coaching opportunity to facilitate clinical success.

Clinical Instructor Supervision of Students

The clinical instructor must use his/her discretion regarding the degree of supervision required by each student and clinical situation.

Direct supervision involves the supervisor being physically present, immediately available to provide guidance, and observing the activity or person being supervised throughout the examination.

Indirect supervision involves the supervisor overseeing an activity without constant physical presence, often being immediately available close by or generally directing the work from a distance, with less direct involvement.

Progression:

During the early stages of clinical education, it is expected that the student be directly supervised by the clinical instructor. As the student's skill and competency increases, a greater level of scanning independence occurs, and the student may be indirectly supervised by the clinical instructor.

Direct Supervision:

- **Physical Presence:** The supervisor is in the same location and often the same room as the

person or activity being supervised.

- Immediate Availability: The supervisor is readily accessible to provide immediate assistance, direction, and feedback.
- Continuous Oversight: The supervisor observes the activity as it is happening and oversees all parts of the process.
- Example: The clinical instructor is physically present in the room with a student performing an ultrasound examination, guiding them step-by-step.

Indirect Supervision:

- Varied Presence: The supervisor is not necessarily in the same location but is still available and responsible for the overall outcome.
- Availability: The supervisor may be reachable in a separate room, via facility communication device (Vocera) or phone.
- General Oversight: The supervisor provides overall direction and control, rather than constant, step-by-step guidance.
- Example: A clinical instructor acting as a facilitator and evaluator for an independent scanning exam where they evaluate the quality of images, post-scan, or review findings rather than providing guidance but not directing every step.

Responsibilities: The Student:

- Will work closely with a REGISTERED sonographer in the department.
- Is responsible for consulting with that sonographer in planning and completing each procedure/examination.
- May scan selected patients with the approval of the sonographer/clinical instructor.
- Is responsible for consulting the clinical instructor when technically difficult patients or pathology is encountered.
- Has the responsibility to ask for guidance when needed.

Responsibilities: The Sonographer/Clinical Instructor:

- Is ultimately responsible for the procedure and all phases of the student's involvement with that procedure.
- May delegate a list of patients to the student.
- Must be present in the room or department area and readily available to assist the student when needed.
- Will assess the patient and direct the student in the management of the procedure in relation to the student's skill and competence.
- Will review the study and either approve images or repeat the examination as needed.
- Will review the technical impressions with the student.

Clinical Objectives

Students must complete approximately 950 hours of clinical education during the program.

Summer Session Clinical Rotation

- Summer Clinical: Clinical I = One clinical rotation
- 12 weeks (may be less with holiday/campus closures)
- 2 days per week (9.5 hours) = 19 hours per week = 228 Total Clinical Hours

Fall Semester Clinical Rotation

- Fall Clinical: Clinical II = Two clinical rotations
- 7 weeks/7 weeks
- 3 days per week (8.5 hours) = 25.5 hours per week = 357 Total Clinical Hours

During these clinical rotations, the student is expected to continue to build upon foundational scanning skills acquired in previous lab and clinical rotations. By completion of this clinical experience, the student should have earned the majority of all 50% practice examinations and some 75% practice examinations and competencies.

Spring Semester Clinical Rotation

- Spring Clinical: Clinical III = Two clinical rotations
- 7 weeks/7 weeks
- 3 days per week (8.5 hours) = 25.5 hours per week = 357 Total Clinical Hours

During these final semester clinical rotations, the student is expected to refine scanning skills acquired in previous lab and clinical rotations. By the completion of this clinical experience, the student must have completed all clinical objectives and obtained all required competencies.

Clinical Assignments

Students enrolled in the Central Ohio Technical College Diagnostic Medical Sonography Program are scheduled and rotated through the various clinical affiliations by the program faculty in consultation and agreement with the clinical affiliates. Assignments are made based on student clinical needs and site availability. While student drive to the clinical site is a concern, the student's drive time is not a factor in the decision. Distance to clinical facilities is based on the distance to the facility from **COTC Newark Campus**, travel to some clinical facilities may be up to **1½ hours one way**. Special requests **will not** be accepted. Students may not solicit or attempt to arrange clinical rotations without the permission of the clinical

coordinator. Clinical placements are non-negotiable. Students are assigned during 1st shift hours primarily; however, 2nd shift clinical rotations may be available or assigned.

Travel Expenses

Travel to the clinical education center is the responsibility of each student. A student may not have the opportunity to rotate through the closest facility. Students must realize the potential exists for extended travel to/from clinical sites (up to 1 ½ hours one way) simply due to the number of students selected by the program. Parking fees and/or facility fees may be associated with clinical assignments. Parking fees and facility fees are the responsibility of each student.

Clinical Orientations

Many facilities require students to complete a mandatory orientation prior to the clinical rotation. Students are required to comply with orientation processes for each facility as directed by the Clinical Coordinator. While some facilities require only paperwork orientation, other facilities required computer-based orientation or face-to-face orientation sessions. Be advised that students may be asked to complete their orientation prior to their first day of the clinical rotation, which may be during an academic break.

- Students must complete clinical orientations, including any associated paperwork and online training by the deadline set by the Clinical Coordinator.
- Students must complete health / immunization requirements by the deadline set by the Clinical Coordinator.
- Students must contact their clinical site prior to beginning the clinical rotation by the deadline set by the Clinical Coordinator.

Lunches/Breaks

Students may purchase meals in the facility cafeteria at employee rates. To receive this benefit, uniforms with appropriate name tags must be worn. Lunch schedules will be assigned at the discretion of the clinical supervisor. Students will be given a **one-half** hour lunch break.

Health Insurance

Each student is responsible for any needed emergency care, medical supervision of chronic conditions, and costs involved. Neither Central Ohio Technical College nor the clinical affiliates assume responsibility for medical expenses that may be charged to you for incidents occurring during your clinical experience. Therefore, you are urged to purchase personal health insurance. If you already have a policy, check the details of the coverage. If an injury occurs while the student is participating in clinical education, the emergency room facilities will be made available to him/her. However, the student will be billed for services rendered.

Malpractice Insurance

Due to direct patient contact, it is mandatory that students have professional liability insurance. This coverage is arranged by the college, currently at no cost to the student.

Communicable Diseases

Sonography is a health care field and occasional contact with patients having communicable disease is likely. Students are expected to become knowledgeable of infection control procedures and take appropriate precautions and follow recommended steps. Students may at any time and for any procedure or duty, elect to wear disposable gloves. This is especially recommended if the student has exudative lesions or weeping dermatitis. Gloves must be changed between each patient and hands washed.

Standard Precautions

All blood and body fluids are considered potentially infectious and are treated as if known to be infectious for HIV, HBV, and other blood borne pathogens.

- Contaminated sharps shall not be bent, recapped, or removed. Shearing or breaking of contaminated needles is prohibited.
- Contaminated sharps must be placed in appropriate container as soon as possible.
- Eating, drinking, smoking, applying cosmetics or lip balm, and handling contact lenses are prohibited in the work area where there is a likelihood of occupational exposure.

When exposure is possible, personal protective equipment shall be used. Personal protective equipment includes:

- Gloves shall be worn when it can be reasonably anticipated that the individual may have hand contact with blood, other potentially infectious materials, mucous membranes, and non-intact skin, when performing vascular access procedures, and when touching contaminated items or surfaces.
- Masks, eye protection, and face shields shall be worn whenever splashes, spray, splatter, or droplets of blood or other potentially infectious materials may be generated and eye, nose, or mouth contamination can be reasonably anticipated.
- Gowns, aprons, and other protective body clothing shall be worn in occupational exposure situations and will depend upon the task and the degree of exposure anticipated.
- Surgical caps or hoods and shoe covers shall be worn in instances when gross contamination can be reasonably anticipated.
- Wash hands immediately after removal of gloves or other personal protective equipment.

Exposure Guidelines

If exposed to blood from a needle stick or blood or body fluid comes in contact with mucous membranes or an open wound during an externship the student should:

- Cleanse the area with soap and water and flush mucous membranes with water **immediately.**

- Report the incident **immediately** to the site or clinical instructor.
- The student should call his or her primary care practitioner or other health provider **within 15 minutes of exposure** to seek triage and treatment from that primary care provider.
- The site or clinical instructor and student must notify the department supervisor at the clinical agency.
- The student must complete an incident report for the clinical agency.
- The Program Director will assist the student to complete a college student accident report.
- The Clinical Site supervisor must inform the source patient of the incident and encourage the patient to have testing after consent is obtained. The exposed individual should be tested for HIV antibodies within 10 days.
- The Center for Disease Control recommends if the source patient is negative there is no need for follow up.
- If the source patient is UNKNOWN or positive then repeat tests should be conducted in 6 weeks, 3 months, 6 months, and 12 months following exposure or follow the protocol recommended by the clinical facility. Neither the college nor the clinical affiliate assumes responsibility for the cost of the testing procedures.
- The Clinical Instructor and/or Program Director are to document the exposure accident and provide copies for the student file.

Occurrence Reporting

An occurrence is a variance in events not consistent with desired operation or care of a patient. All occurrences/incidents which occur during clinical assignment resulting in patient, hospital personnel or personal injury and/or damage to equipment must be reported immediately to the clinical instructor and/or Program Director. In addition, a hospital **occurrence/incident report must be filed with program and hospital officials**. Students are responsible for complying with all safety procedures. Incidents will be reviewed and appropriate action will be determined by program faculty.

Patient Identification

Always check identification bands on all in-house and emergency patients to ensure proper identification. This should be done at the following times: when transporting a patient from his/her room to the department; when bringing a patient into the sonography room; and before the examination begins.

When summoning an outpatient from a waiting or dressing area, ask them to state their name. Do not ask "are you Mrs. Smith?" Too often patients will answer yes, thinking they will get finished faster. Always correlate both first and last names of individuals with the examination order.

Patient Bill of Rights

1. The patient has the right to considerate and respectful care.

2. The patient has the right to obtain from his physician complete current information concerning his diagnosis, treatment, and prognosis in terms that patient can be reasonably expected to understand. When it is not medically advisable to give such information to the patient, the information should be made available to an appropriate person in his behalf. He has the right to know, by name, the physician responsible for his care.
3. The patient has the right to receive from his physician information necessary to give informed consent prior to the start of any procedure and/or treatment. Except in emergencies, such information for informed consent should include, but not necessarily be limited to, the specific procedure and/or treatment, the medically significant risks involved, and the probable duration of incapacitation. Where medically significant alternatives for care or treatment exist, or when the patient requests information concerning medical alternatives, the patient has the right to such information. The patient also has the right to know the name of the person responsible for the procedures and/or treatment.
4. The patient has the right to refuse treatment to the extent permitted by law and to be informed of the medical consequences of his action.
5. The patient has the right to every consideration of his privacy concerning his own medical care program. Case discussion, consultation, examination, and treatment are confidential and should be conducted discreetly. Those not directly involved in his care must have the permission of the patient to be present.
6. The patient has the right to expect that all communications and records pertaining to his care should be treated as confidential.
7. The patient has the right to expect that within its capacity, a hospital must make reasonable response to the request of a patient for services. The hospital must provide evaluation, service, and/or referral as indicated by the urgency of the case. When medically permissible, a patient may be transferred to another facility only after he has received complete information and explanation concerning the needs for and alternatives to such a transfer. The institution to which the patient is to be transferred must first have accepted the patient for treatment.
8. The patient has the right to obtain information as to any relationship of his hospital to other health care and educational institutions insofar as his care is concerned. The patient has the right to obtain information as to the existence of any professional relationships among individuals, by name, who are treating him.
9. The patient has the right to be advised if the hospital proposes to engage in or perform human experimentation affecting his care or treatment. The patient has the right to refuse to participate in such research projects.
10. The patient has the right to expect reasonable continuity of care. He has the right to know in

advance what appointment times and physicians are available and where. The patient has the right to expect that the hospital will provide a mechanism whereby he is informed by his physician or a delegate of the physician of the patient's continuing health care requirements following discharge.

11. The patient has the right to examine and receive an explanation of his bill, regardless of source of payment.
12. The patient has the right to know what hospital rules and regulations apply to his conduct as a patient

Patient Confidentiality

Students must remain in compliance with all HIPAA guidelines. All hospital and patient records are confidential in nature. Do not discuss a patient, his illness or his private affairs with anyone, publicly or privately. Students are expected to maintain confidentiality in a professional manner. Breach of this confidentiality will subject the student to dismissal from the program. **Electronic devices are not allowed in patient care areas while on Clinical Assignment. It is a HIPAA violation to carry personal electronic devices in patient care areas.**

Duty to disclose relationships

Students should not have any relationship with the client/patient other than that of a health practitioner. If there is a relationship, that relationship must be disclosed immediately. A student must guard against all conflict of interest and shall not accept gratuities for preferential consideration of the patient.

Patient Modesty

The modesty of the patient must be respected at all times. Dignity should be upheld. Patients should receive ample gowns, robes, blankets to cover their body and protect their privacy.

Exam Log Sheets

Each student is required to complete exam case log sheets recording the clinical examinations observed or performed. It is the student's responsibility to maintain an accurate and current record. All completed forms will be submitted to faculty at the end of each clinical rotation.

Clinical Evaluation

Each student will be visited and evaluated by their clinical instructor at the clinical education site. Clinical evaluations will account for a significant portion of your clinical grade. A student must receive a grade of 75% or higher on the clinical evaluation(s) each semester to continue in the DMS Program. It is the student's responsibility to familiarize themselves with the criteria in each evaluation. The evaluation is submitted to the Clinical Coordinator. It is the student's

responsibility to be sure this has been completed and submitted on time.

Clinical Grading

Clinical evaluation grades must be 75% or greater in order to achieve a passing grade for the clinical course. Students receiving less than 75% on a clinical evaluation will be permitted to continue in the clinical environment and will be dismissed from the DMS Program.

CLINICAL HOURS, COMPETENCIES & PROFICIENCIES

Students will receive a non-passing clinical grade and will not be eligible for program completion/graduation if:

- The student fails to attend all the regularly scheduled clinical assignments and/or make up any missed clinical hours. Students must complete the required program clinical hours.
- The student fails to complete the required clinical competencies, proficiencies, clinical objectives prior to the end of the final clinical rotation.

TIME SHEET & ATTENDANCE

- Student are NEVER permitted to ASK to leave clinicals early unless illness/injury renders the student unable to continue as a student sonographer.
- In the event of illness/injury and the student leaves early, all missed clinical times must be made up (see Absentee Form).
- In the event that the clinical facility has to close early or the clinical instructor will not be on site (ie: day off or illness) the student is permitted to leave early.
- If the clinical site OFFERS to the student that they could go home early, the student may only leave if all of the following conditions are met:
 - There are no more patients on the schedule for the day
 - There are no other medical examinations or procedures that can be observed (must ask)
 - All laundry and supplies have been fully stocked and exam rooms cleaned
 - The student must ask if there are case studies or interesting pathology that can be reviewed.
 - Student must ask the clinical site if there is ANYTHING else that can be done to help out before leaving (ie. cleaning/stocking/assisting)
 - If there is nothing else to be done, the student is permitted to leave early as instructed.

Religious Accommodations for Students

COTC is committed to students' freedom to practice their sincerely held religious beliefs. The College has adopted the College Policy 4.5.10 Religious Accommodations for Students, which complies with the Testing Your Faith Act, Ohio Revised Code 3345.026. Students are given up to three days of absences per term for activities or holidays conducted under the auspices of a religious denomination, church, or other religious or spiritual organization. The religious belief or practice must severely affect your ability to take an exam or complete an academic requirement on the due date. To receive reasonable alternative accommodations, students must submit their written request, including requested dates for alternative

accommodations, within 14 calendar days of the first day of class. An instructor shall schedule a time and date for an alternative accommodation (i.e., examination, etc.), which may be before or after the time and date the examination or other academic requirement was originally scheduled without penalty or academic harm to the student. Alternative accommodations are not retroactive. No academic penalty will be imposed for an absence under this policy. These requests for alternative accommodations will be kept confidential. For further questions or information about this Policy, please refer to College Policy 4.5.10 Religious Accommodations for Students or contact the Provost, Dr. Gregory Ferenchak, Ferenchak.7@mail.cotc.edu, 740.755.7827, Hopewell Hall, room 56

SECTION VI

Clinical Competencies & Proficiencies

Three-Tiered Competency System

As a requirement through the JRC-DMS in accrediting Sonography programs, a competency-based clinical system must be maintained in order for students to become proficient in performing sonographic procedures.

The DMS Program's three-level or tiered competency system was introduced to aid in tracking student progress and attempt to standardize competency achievement. Students will be attaining competency at advancing levels throughout the clinical experience. This type of a tiered competency system allows students to develop confidence and skill advancement.

Once achieving a basic knowledge of an examination protocol and basic scanning skills, the student may attempt a **Level I Practice Examination**. Successful completion of a Level I Practice Exam requires the student to perform 50% of the examination. It also requires the student to produce diagnostic quality imaging for that portion of the exam.

The student may attempt a **Level II Practice Exam** when successfully completing 75% of the examination. Again, the imaging will need to meet the diagnostic quality criteria for successful completion. A specific number of Level I and Level II Practice exams are required for each type of sonographic procedure. *A student may not advance to Level II until all Level I practice exams are completed for that procedure.*

Once all practice exams have been achieved, the student may attempt to earn clinical competency. A **Clinical Competency** is a scanning examination that must be performed on a real patient in the clinical setting. The Clinical Competency requires the student to perform the entire procedure from beginning to end with little to no assistance.

A **Proficiency** is a scanning examination that can be performed in either the clinical setting or lab setting. A proficiency can be performed on a real patient in the clinical environment, or on a mock patient in a simulated environment. A proficiency requires the student to perform the entire procedure from beginning to end with little to no assistance.

Competency and Practice Exam Log

The Competency and Practice Exam Log Form defines the number of Level I and Level II practice exams needed for each procedure prior to obtaining the clinical competency or proficiency. All completed practice exams and competency forms are to be submitted to the Clinical Coordinator.

Program Completion & Credentialing Examination Eligibility

General (Abdominal Ext OB/GYN) Major DMS Students:

- All required competencies must be satisfactorily completed prior to graduation.
- General students who obtain the required competencies will receive the clinical verification to take the RDMS (AB) and (OB) ARDMS specialty examinations.

Cardiovascular Major DMS Students:

- All competencies must be satisfactorily completed prior to graduation.
- Cardiovascular students who obtain the required competencies will receive the clinical verification to take the RDCS & RVT ARDMS specialty examinations and the RCS & RVS CCI specialty examinations.

Removal of Competency

In the event that a student is observed to not be competent in a procedure that he/she had previously performed satisfactorily as a competency, the competency in question must be repeated after proper documentation is provided to the program faculty.

1. The observer must document in writing those tasks in the sonographic examination which were deemed performed incompetent by the student in question.
2. The observer must present the documentation to the student in a counseling session and allow the student to read and sign the document. Such a signature only indicates that the student is aware of the reasons for the proposed change in competency status of the procedure.
3. The observer shall forward the document to the Clinical Coordinator for consideration.
4. The Clinical Coordinator shall discuss the issue with the observer and the student.
5. After consultation with the Program Director and other program faculty, the Clinical Coordinator shall make a decision and write the recommendation to the student in question and the observer.
6. Should the student be deemed acting in an incompetent manner, the previously earned clinical competency will be deemed void, and the student must re-earn / demonstrate clinical competency.

Specialty Clinical Rotation Selection Process

Throughout the program, students may apply to be chosen for a dedicated obstetrical, pediatric, or breast clinical internship with additional, specialized training in maternal-fetal medicine & 2nd & 3rd trimester obstetrical, breast, vascular, neurology, urology, pediatric sonography or pediatric echocardiography. To be eligible for a breast rotation, the student must have completed the Breast Techniques Scan Lab course with a grade of “C” or better.

Specialty Clinical Rotation Selection Criteria:

- The selection criteria and process will be based on overall clinical performance during the previous clinical rotations and the total number of clinical competencies & practice examinations.
- The number of students selected is based solely on clinical site availability, so the number of students selected will vary and is not guaranteed.
- If the number of eligible students applying exceeds the number of available clinical sites, selection will be based on PROGRAM GPA, with students with the highest GPA seated first.

SECTION VII

Program & Clinical Policies

Essential Behaviors and Attributes

In the classroom, lab, and clinicals, the student will demonstrate the following attributes:

1. Initiative

- Be involved in cases in order to learn from the experiences.
- Utilize newly learned or routine skills without waiting for directions.

2. Dependability

- Complete assigned tasks in a timely manner.
- Report for shifts and after breaks on time.
- Follow the routine procedures and protocols of the clinical facility.

3. Empathy

- Demonstrate awareness of any physical distress the patient may have.
- Anticipate the patient's concerns regarding their condition or the examination.

4. Interest

- Ask relevant questions which are appropriate for the level of training, at the appropriate time and place.
- Focus attention on the procedures.

5. Integrity

- Be honest and accountable in all interactions with clinical staff & maintain the confidentiality of patient information.
- Act in a professional manner.

6. Effective Communication

- Maintain a professional level of conversation with patients during procedures.
- Present yourself to patients and staff in a poised and confident manner.
- Ensure that essential messages, STAT REPORTS, etc. are delivered on time.

7. Acceptance of Authority

- Recognize the hierarchy of the department and a student's position in it.
- Follow the rules and procedures as published in this Handbook.

8. Acceptance of Criticism

- Recognize that timely feedback is the first step towards mastery.
- Use criticism to modify techniques or behaviors as necessary and avoid defensive responses.

9. Good Judgment

- Gradually take on more responsibility and striving for self-reliance, BUT always recognizing when assistance is necessary **to ensure optimal patient care**

Attendance

All scheduled learning activities, classes, labs and clinicals, are essential. It is unacceptable to be absent from DMS classes and/or clinicals. Attendance at all class/course sessions is expected to promote success. Students who miss class for any reason are responsible for obtaining missed notes, handouts, and/or assignments. Therefore, Central Ohio Technical College supports the following attendance policy.

- Students will attend all clinical assignments as scheduled by the Clinical Coordinator in cooperation with the affiliate clinical instructor.
- Students may not ask the clinical facility to leave early or be dismissed early. Early dismissals must be initiated by the clinical instructor.
- Each student will have a time sheet provided for documentation of clinical attendance. The student is responsible for maintaining an accurate record. Falsification of time sheets is an integrity violation and will result in immediate course failure.
- During summer semester, a clinical day is defined as a **9 ½ hour day** which includes a ½ hour lunch break.
- During fall & spring semesters, a clinical day is defined as an **8 ½ hour day** which includes a ½ hour lunch break.
- If unavoidable circumstances result in tardiness or absence, students are required to notify the clinical facility at the affiliate and the program faculty as soon as possible. All tardiness and absenteeism must be made up prior to the end of the semester for the student to be considered for a passing grade. Failure to notify faculty of absence will result in a 5% reduction in the overall grade.
- An absentee form must be completed and submitted to the clinical coordinator the day you return to campus.
- Due to the limited availability of clinical sites for make-up rotations, a limited number of absences per semester are permitted. During Clinical Semesters, only (2) two absences are permitted. All absences must be made up by the end of the semester. COTC holidays are not permitted to be used as make up days or clinical hours. **For each additional day absent after 2 days, a 5% reduction in overall grade will be applied.**
- Habitual tardiness and/or absenteeism may result in dismissal from the Diagnostic Medical Sonography Program.
- Clinical / Class hours may not exceed 40 hours per week.

PHYSICAL REQUISITES & LEAVE OF ABSENCES

The performance of the tasks related to the Diagnostic Medical Sonography profession includes

potentially strenuous practical skills, including heavy lifting and carrying techniques. If any medical/health condition exists which may limit activities in the clinical setting (ie. casts, crutches, wheelchairs, surgical drainage tubes, oxygen tanks, surgical incisions) or other short-term condition that temporarily limits mobility, dexterity and/or acuity, the student may need to withdraw from the program or apply for a leave of absence until such condition is corrected. Clinical affiliates require that all health care workers be physically, mentally, and emotionally stable to provide care to clients. Administrators of these affiliate facilities have the authority to refuse students when the safety of their patients may be compromised.

Health / Medical Absences:

- Absences of three or more days for medical/health reasons will require a physician's statement & documentation.
- Any student that has experienced a health/mental alteration which has the potential to negatively impact the student's clinical performance or role as a student sonographer, will require physician documentation and clearance.

Applying for a Leave of Absence:

- The student must meet with the Program Director, and if enrolled in clinical courses, the Clinical Coordinator.
- The student must submit a formal letter from a licensed treatment provider that details the diagnosis, the reason for the leave, and the anticipated recovery time.
- Each leave of absence request will be evaluated based on individual factors, what semester the student is in the academic program and their specific health condition.
- After review of the documentation, the leave duration will be determined individually and a tentative academic plan will be developed and documented.
- The leave duration must not exceed one calendar year.
- A leave of absence may affect the student's financial aid, potentially impacting loan repayment, grace period or eligibility. The student should consult the financial aid office and their advisor to understand how the leave may affect their financial aid, enrollment status, and academic progress

Reinstatement: Returning from leave will require a request for readmission and may involve academic conditions or a review by the college regarding student capability to resume clinical assignment/lab/or classroom environment. Refer to the READMISSION policy. In addition to the readmission process, the student must submit a letter of release to return to the college or to clinicals.

Medical clearance: The student must provide a return-to-work release from a doctor that certifies they are cleared to perform their student sonographer job duties without restrictions.

Readmission

Re-admission to the Diagnostic Medical Sonography Program is determined by the DMS Re-admission Committee. Re-admission is not automatic or guaranteed. Students seeking re-admission must apply in writing and complete all necessary forms. Students must also adhere to the following:

- The student must submit a letter to the Program Director addressing the reason for the previous

failure or withdraw. It is the student's responsibility to demonstrate that the reason(s) for the previous failure/withdraw has been altered and that the student has a strong probability of successfully completing the program at this time.

- The student must have a minimum cumulative GPA at COTC of 2.00 to request re-admission.
- ***Due to the fact that all clinical competencies and clinical training verification expires within one year, some or all clinical courses must be repeated. All clinical competencies previously earned must be repeated.***
- If re-admitted, the student may have to repeat a drug screening and all immunizations, CPR, & TB must be up to date with documentation provided to the clinical coordinator.
- Students may apply only once for re-admission into the DMS Program, regardless of the major (general or cardiovascular).
- Students may only apply to be re-seated within one calendar year or leaving the program. Applicants requesting re-admission beyond one calendar year will have apply as a new student through the standard selective admission application process.
- Students dismissed due to didactic course failure or withdrawal may apply for re-admission depending on circumstance.
- Students dismissed from the program due to behavioral or unprofessional conduct are **not** eligible for re-admission.
- Students will be considered for re-admission based on available space, available clinical facility space, and previous didactic and clinical performance.
- Re-Admission into the DMS program is **not guaranteed**. Readmission is dependent on available “seats” in the DMS program. Clinical placements are limited with priority given to enrolled DMS students.
- The decision of the committee will be final.

Campus Closures & Weather Emergencies

If Newark COTC/OSU campus is closed due to severe weather, such as snow or ice, students are excused from clinical hours.

- If COTC/OSU campus is open, but you live in a county that is under a LEVEL 3 snow emergency-OR- have to drive through an area under a LEVEL 3 emergency, you do not have to go to clinicals and your hours will be excused.
- If COTC/OSU campus is closed, but you have already arrived at your clinical facility-OR- have already partially driven to your facility, you need to decide if it is safer for you to go to your clinical facility rather than turn around and return home. The clinical hours completed while COTC/OSU is closed can be "banked" if needed during the semester.
- If Newark COTC/OSU campus is closed due to a power outage, sewer/water problem, gas leak, etc. students are not excused from clinical hours.

Pregnancy Policy

The college supports the academic interests of students who are or may become pregnant. Students are not required to declare or undeclare a pregnancy. A student may choose to continue with her program during pregnancy with the understanding that she is expected to

satisfactorily meet the same standards of clinical and classroom performance as are all other students enrolled in the program. When necessary, reasonable adjustments & accommodations (such as a larger desk, frequent restroom breaks) will be provided upon request.

This decision to continue should be made in consultation with her physician. The student is required to provide a letter from her physician stating the expected due date and giving permission/release to attend clinicals without restrictions. This statement must indicate that the student is able to satisfactorily and safely perform in the clinical or classroom area without undue detriment to herself and/or the unborn fetus or baby. In doing so, she will not hold the program or COTC liable for any complications of her or the fetus during pregnancy, delivery, or thereafter.

If the student is enrolled in a clinical course, the student is advised to notify the clinical facility of the pregnancy in the event that an incident or health issue arises in the clinical environment

Without such medical assurances, the student may find it necessary to discontinue her program until said medical assurances have been received and accepted. The above policies do not mitigate the student's responsibility for maintaining her own wellbeing as well as that of responsible behavior with respect to the fetus or unborn child. If at any time the student believes she is medically unable to continue with class/clinical responsibilities, the student should notify the Program Director immediately. The student may always access her academic advisor or the college's Title IX Coordinator for questions or concerns about this policy. Link to COTC's Title IX Information: <https://www.cotc.edu/titleix>

If the student delivers while enrolled, prior to returning to the clinical environment, she must provide a letter from her physician stating that she is released without restrictions.

Professional Boundaries

Students enrolled in the DMS program must learn the importance of establishing and maintaining professional boundaries. In a student role, professional boundaries exist between the student and the instructor and between the student and the patient. Students unclear of proper behavior or of an appropriate response to a patient should consult the instructor for guidance.

Student and Faculty

Faculty and students will maintain a professional relationship:

- Students should not expect an instructor to act as personal counselor or therapist. Students should seek assistance from academic advisors and counselors at the college.
- Students should not ask or expect the instructor to join an individual, group, or class in any social situations while enrolled in the program.
- Students should not contact or expect relationships/communications/connections on social media sites while enrolled in the program.

Student and Patients

Students will maintain a professional provider-patient relationship:

- **Professional Boundaries:** Students providing care strive to inspire the confidence of patients. Students must treat all patients, as well as other health care providers, professionally. Patients can expect those providing care to act in their best interests and respect their dignity. The student should abstain from obtaining personal gain at the patient's expense and refrain from inappropriate involvement in the patient's personal relationships.
- **Boundary violations** can result when there is confusion between the needs of the student and those of the patient. Such violations are characterized by excessive personal disclosure by the student, secrecy or even a reversal of roles. Boundary violations can cause delayed distress for the patient, which may not be recognized or felt by the patient until harmful consequences occur.

Conduct: Use of Social Networking Sites

Students and faculty alike should keep in mind that even with privacy settings in place, information is still public and subject to disclosure after deletion. DMS students are held to the same professional, legal, and ethical standards as licensed professionals and must follow all policies and restrictions. Posting certain information is illegal, and violation of existing statutes and administrative regulations may expose the offender to criminal and civil liability. Students and faculty are expected to maintain professional standards of behavior at all times.

The following actions are strictly forbidden:

- You may not post or communicate any patient-related information or information which may potentially identify a particular patient or clinical facility. Removal of the patient's name does not solve this problem—inclusion of gender, age, race, diagnosis etc. may still allow the reader to recognize a specific individual. Violation of this requirement may result in disciplinary action up to and including dismissal from the program, as well as other liability for violation of HIPAA.
- You may not take photographs or videos in patient care areas or in the clinical environment.
- You may not post or communicate private academic information about another students, grades, evaluations, or adverse academic actions.

In addition to the prohibitions listed above, the actions listed below are **strongly discouraged:**

- Display of language or photographs that imply disrespect for any individual or group because of age, race, gender, ethnicity, or sexual orientation.
- Do not make threatening, harassing, profane, obscene, sexually explicit, racially derogatory, homophobic or other offensive comments.
- Posting of potentially inflammatory or unflattering material regarding a fellow student, faculty member, or administration.

- It is a professional boundary violation to contact patients or former patients through social media.

Any student or faculty member who is aware of any of the prohibited uses is required to report the misuse. Failure to report is a violation of this policy as well as the college's Code of Student Conduct and may result in disciplinary action up to and including course failure and dismissal from the program.

Student Employment Policy

All students have the privilege to obtain any type of employment while enrolled in the Diagnostic Medical Sonography Program. It is recommended that students accepting employment allocate adequate time for academic responsibilities.

1. Students who accept employment at an affiliated clinical site cannot be scheduled as an employee during the same time as normally scheduled clinical assignments.
2. It is the responsibility of the student to avoid conflicts in scheduling. A student may not be paid or viewed as an employee while scheduled in the clinical area as a student. The student is responsible for assuring that this does not happen. A student who is working as an employee is not eligible for competency evaluations.
3. Also, currently employed sonographers who are completing their degree in diagnostic medical sonography at COTC may not be allowed to fulfill their clinical requirements at the department in which they are employed.
4. Violation of this policy constitutes non-compliance with program policies and will result in immediate dismissal from the program.

Uniforms and Appearance

The personal appearance and demeanor of the sonography students at Central Ohio Technical College reflect both the college and professional standards and are indicative of the student's interest and pride in their profession.

While on clinical assignment your attire will be clean and neatly presented. Your uniform will consist of royal blue scrubs, a COTC student patch, and primarily white shoes. Any student reporting to the clinical assignment in an improper uniform or attire, or in soiled or untidy attire will be sent home by the clinical instructor/supervisor and missed time must be made up. Remember, if you want to be treated as a professional, look professional. When in the clinical areas, all students shall observe the following guidelines:

1. All students will wear a name badge and COTC patch (to be purchased by the student).
2. Appropriate footwear, predominantly white, shall be worn, no bare legs.
3. Hair will be clean and neat at all times. Unnatural, bold hair colors are not permitted

4. If you choose to wear makeup, it must be discreetly applied.
5. Students must maintain personal hygiene. Perfumes and aftershave lotions will be used in moderation. There should be no discernible smoke odor.
6. Students are permitted to wear wedding, engagement or class rings, earrings and watches. No costume or oversized jewelry will be permitted. No visible body piercing other than earrings will be permitted.
7. No artificial nails or long natural nails will be permitted. It is recommended that natural nails be no longer than ¼ inch past the fingertip.
8. Tattoos should be covered whenever possible. If tattoos cannot be covered, clinical facilities have the right to dismiss students presenting with visible tattoos.
9. **Religious attire:** The DMS Program will grant student's reasonable requests for religious accommodation where doing so does not conflict with reasonably necessary Program goals. Upon request, the DMS Program will make reasonable efforts to accommodate students' attire that is related to their sincerely held religious beliefs. The student is obligated to make DMS Administration aware of the need for religious accommodation in advance of the need for the accommodation. The DMS Program may limit religious practices that put public safety, health, or the human rights of others at risk.
 - Students should be aware that clinical agencies may have their own dress code requirements with which we are obligated to comply. Failure to comply with agency policies may result in the student being unable to complete course requirements.
 - Students who wear a head scarf (such as a hijab) are asked to limit the scarf to a single color of black, white, or blue in the laboratory or clinical setting. Sequins or other items that are subject to detachment are prohibited.
 - Facial veils are prohibited in the laboratory or clinical setting.
- 10) Prior to initial clinical placement, near the end of the second scan lab course, students will be required to report to class in uniforms where clinical appearance will be evaluated and critiqued. Students will not be assigned to a clinical rotation until they have met this requirement.

General Clinical Guidelines

- Students may bring study material to the assigned clinical facility, however, study material must be stored such that the normal operation of the department is not interrupted.
- Students may not study when scanning or observation opportunities are available.
- Students are expected to demonstrate interest in keeping the department clean, supplies stocked, and clinical area prepared for next examination.
- Whenever situations arise in which students are unable to handle or have

questions/concerns, the student must seek advice before proceeding further.

UNPROFESSIONAL CONDUCT

**Unprofessional conduct impacts the academic performance of students and can have a direct impact on patient safety. The Diagnostic Medical Sonography Program of Central Ohio Technical College considers the following to be examples of unprofessional conduct. Students are expected to demonstrate professional behaviors at all times-- in the clinical, classroom, and lab setting. Students enrolled in the program shall comply with all policies and procedures of each clinical affiliate. The following lists are not all-inclusive.

UNACCEPTABLE UNPROFESSIONAL CONDUCT / POLICY VIOLATIONS

Students exhibiting the following unprofessional conduct will receive disciplinary action and may be dismissed from the Diagnostic Medical Sonography program

1. Declining or refusing an opportunity to scan or participate in an ultrasound examination or imaging procedure. Students must utilize every opportunity to scan provided by their clinical instructor.
2. Habitual or excessive tardiness and/or absenteeism from clinical.
3. Eating in areas not specifically designated for that purpose at the clinical facility.
4. Loitering in the sonography department at times not specified for clinical assignment.
5. Using a cell phone (including texting) during lab or when cell phone use is prohibited.
6. Unprofessional communication or conduct with a student, faculty member, instructor, or staff member in a COTC classroom or COTC lab.
7. Unprofessional communication such as vulgarity, profanity, sexually explicit, or derogatory language in the lab or COTC classroom.
8. Any communication on social networks or public expression of malcontent with the DMS Program, Program faculty or DMS student.
9. Insubordinate behavior or actions directed toward COTC faculty or staff members.
10. Providing help/assistance, advice or guidance during a scan lab assessment while serving as a mock patient.
11. Failure to complete clinical orientations, including any associated paperwork and online training by the deadline set by the Clinical Coordinator.
12. Failing to immediately report an equipment malfunction, a dropped probe, or potentially damaged probe to the DMS instructor or Program Director.
13. Failure to complete health & immunization requirements by the deadline set by the Clinical Coordinator.
14. Failing to contact the assigned clinical site prior to beginning the clinical rotation by the deadline set by the Clinical Coordinator.
15. Asking the clinical facility to leave early or be dismissed early.
16. Failure to maintain good hygiene. Clinical facilities have the right to dismiss students presenting with an offensive odor.
17. Receiving three Performance Improvement Plans while enrolled in the program.

STRICTLY FORBIDDEN UNPROFESSIONAL CONDUCT / POLICY VIOLATIONS

Students exhibiting the following strictly forbidden unprofessional conduct **will receive immediate disciplinary action that will result in dismissal from the Diagnostic Medical Sonography program.**

1. Possessing drugs or alcohol, engaging in their use, or attending under their influence at clinicals or on the COTC campus.
2. Sleeping on clinical assignment.
3. Refusing to accept clinical rotation assignments designated by the clinical instructor.
4. Engaging in theft of any article from the clinical affiliation or DMS lab.
5. Engaging in any immoral conduct or sexual misconduct while on clinical assignment or on COTC campus.
6. Breaching of patient confidentiality (HIPAA).
7. Falsification of attendance or clinical records of any kind.
8. Falsification of COTC admission documents or program application.
9. Acceptance of any type of gratuity from a patient or a patient's family while on clinical assignment.
10. Receiving competency evaluation while working as an employee.
11. Scheduling employment /receiving wages for work during clinical hours.
12. Smoking in areas where it is prohibited while on clinical assignment.
13. Unprofessional communication or conduct with a patient or in the presence of patient, with a clinical educator, or clinical site staff member while on clinical assignment
14. Any communication on social networks or public divulging of patient information, detailed clinical interactions or public expressions of malcontent with a specified clinical facility.
15. Unprofessional communication such as vulgarity, profanity, sexually explicit, or derogatory language in the clinical environment.
16. Insubordinate behavior or actions directed toward clinical instructors or clinical facility staff members.
17. Knowingly providing or receiving information during examinations such as course examinations; or the possession and/or use of unauthorized materials during or in preparation for those examinations. Academic misconduct may result in dismissal from the college, as well as the DMS program.
18. Receiving two clinical reports relating to the same type of sub-standard behavior or conduct that has already been documented in the student file.
19. Failure to notify clinical staff prior to leaving the assigned area/clinical facility or leaving the assigned clinical area/clinical facility without permission.
20. Performing practices which are unsafe to patients, personnel, other students, or self. Students are expected to demonstrate professional, safe behaviors at all times in the clinical, classroom, and lab setting. A student who demonstrates unsafe behavior(s) which may endanger self or others.
21. Leaving patients undergoing diagnostic procedures unattended.
22. Non-registered student sonographers may not overstep their role as a student by providing sonographic examination results or medical advice to a patient without direct clinical

instructor permission or instruction.

23. Failure to notify the Program Director of any arrests, regardless of adjudication, that occur after acceptance and enrollment in a program. This notice must be given within five (5) working days of the arrest.
24. Having an electronic device in a patient area. Electronic devices are not allowed in patient care areas while on Clinical Assignment. The program considers it is a HIPAA violation to carry personal electronic devices in patient care areas. Using a cell phone (including texting) during patient exams, or in an area at the clinical facility where cell phone use is prohibited. Cell phones may only be used during the designated lunch break and must be stored and concealed at all times during clinical hours.
25. Taking photographs or videos in patient care areas or in the clinical environment.
26. Repeated mishandling of DMS lab equipment and documented lab incompetence.
27. **Any** student behavioral/technical issues that results in the clinical site requesting student removal. If a clinical facility requests a student be removed, the student will be dismissed from the program.

** Reminder: Students dismissed from the DMS program due to unprofessional conduct are not eligible for re-admission/re-application into the DMS program.

Grievance Procedure

In the event of a course failure, the student has the right to use the College Grade Appeal Process. Students may also utilize College Grievance Procedures. Link to Grievance & Complaints: <https://www.cotc.edu/complaints-and-concerns>

Final Note

Central Ohio Technical College reserves the right to make changes without notice in the sonography curriculum, scheduling, and policies to preserve high standards and meet accreditation standards of the Diagnostic Medical Sonography Program.

All students must sign/date the following statement to be enrolled in the DMS program.

I, _____ have read the
(Print Name Above)

Diagnostic Medical Sonography Handbook, including the Unprofessional Conduct Guidelines,
and I have been given the opportunity to ask questions relating to conduct requirements.

I hereby agree to follow the policies as outlined in the DMS Handbook.

(Signature)

(Date)