

TACOMA COMMUNITY COLLEGE

Diagnostic Medical Sonography Program Policy and Procedure Manual



2018-2020 Edition

**Tacoma Community College
Diagnostic Medical Sonography Program
Professional Standards Student Handbook
Policy and Procedure Manual**

A student entering the profession of Diagnostic Medical Sonography must understand that they are entering a field of medicine that requires a high level of professionalism, integrity, compassion and attentiveness. Professional behavior, appearance, and methods of communication must meet certain standards in order to ensure quality imaging and patient care. These standards have been developed by the college, clinical affiliates and the accrediting body. These standards are required for successful completion of this program.

I understand the following:

- ❖ There is a limit to the number of hours a student may be absent from the clinical site. Any absences in excess of the allowable amount will result in a loss of policy and procedure points.
- ❖ Failure to notify clinical site and TCC faculty regarding anticipated tardiness/absences will result in a loss of policy and procedure points.
- ❖ Clinical time missed cannot be made up for credit but for educational experience.
- ❖ Clinical site rotation assignments are based DMS program/ accreditation requirements and student academic needs.
- ❖ The clinical site may be 2 or more hours from campus each way.
- ❖ Clinical hours may be either day shift, evening shift or a combination of both. The clinical hours are determined based on clinical instructor availability and student academic needs.
- ❖ Immunization records must be completed when due or will result in forfeiting clinical placement and dismissal from the program.
- ❖ There is a dress code policy that includes grooming, clothing, hairstyle and color, jewelry, etc.
- ❖ Clinical paperwork and documentation must be completed and submitted on time or will result in a loss of points.
- ❖ For a complete listing refer to the program's Policy and Procedure Manual.

By signing the Professional Standards form you are indicating that you have received and are responsible for reading and understanding the requirements of the program as outlined in the Student Handbook/Policy and Procedure Manual and agree to abide by these standards and policies.

Student Signature

Date

DMS Faculty Signature

Date

**Tacoma Community College
Diagnostic Medical Sonography Program
Laboratory Waiver**

My signature below verifies that I have had the following information explained to me, and was given the opportunity to ask any questions I wished:

As a Tacoma Community College sonography student, I understand that acceptance into the sonography program may include volunteering to be scanned by another student in the DMS laboratory. I understand that the Diagnostic Medical Sonography program faculty will also be performing/assisting the sonographic examination for demonstration purposes to improve comprehension of the course material. In addition, I understand that other sonography students will be present in the sonography laboratory. Also, due to the nature of the exam, I understand this may entail touching of the chest/breast, back, abdomen, pelvis, extremities, and neck areas. The laboratory will maintain professional decorum, exposing only necessary areas to be scanned, wearing gloves, and using clean linen.

I understand that no diagnostic information is being obtained for medical diagnoses. I recognize the possibility that pathology may be found. If noted, the instructor may inform me to contact my personal physician. I recognize that because this scan is being performed for training purposes, there is a possibility that existing pathology may not be noted due to the focus of the lesson. With this I understand that I will not hold Tacoma Community College, the Diagnostic Medical Sonography program, or its employees, liable for such actions.

Biological Effects

Ultrasound uses nonionizing energy and does not possess the effects found with ionizing energy such as radiation from x-rays. Although the *possibility* exists that biological effects may occur with diagnostic medical sonography, the AIUM statement on clinical safety states that within the diagnostic imaging intensity levels, no harmful effects have been known to occur since its use for medical diagnoses in the 1960s on patients or its operators.

I have been given an opportunity to ask questions and I have the right to refuse or stop the practice session at any time with no penalty to my academic progress, grades or evaluation.

I agree to volunteer as a lab model

I do not agree to volunteer as a lab model

Signature of student

Date

Signature of lab instructor

Date

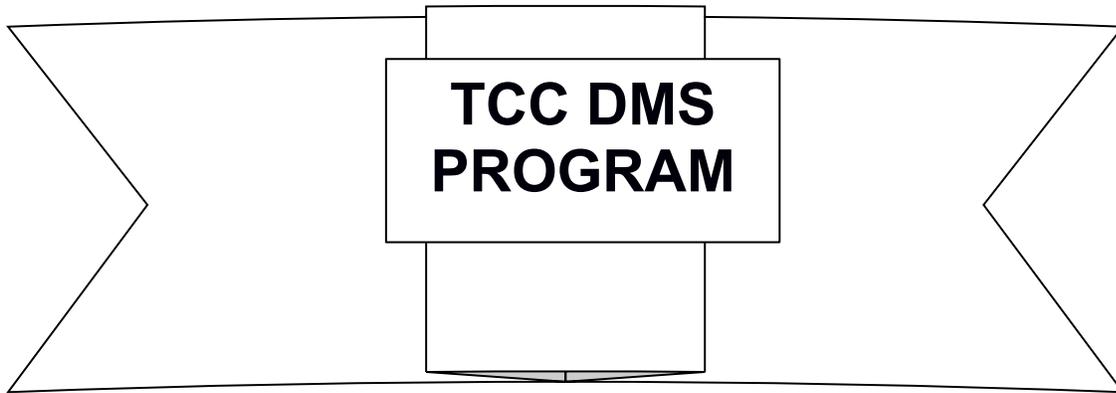
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Section 1



General Principles and Policies

Description of the Profession

The profession of diagnostic medical sonography includes general sonography, cardiac sonography, vascular technology, and various subspecialties. The profession requires judgment and the ability to provide appropriate health care services. Sonographers are highly skilled professionals qualified by education to provide patient services using diagnostic techniques under the supervision of a licensed doctor of medicine or osteopathy. The sonographer may provide this service in a variety of medical settings where the physician is responsible for the use and interpretation of appropriate procedures. Sonographers assist physicians in gathering data necessary to reach diagnostic decisions.

The general sonographer is able to perform the following:

- Obtain, review, and integrate pertinent patient history and supporting clinical data to facilitate optimum diagnostic results.
- Perform appropriate procedures and record anatomic, pathologic, and/or physiologic data for interpretation by a physician.
- Record, analyze, and process diagnostic data and other pertinent observations made during the procedure for presentation to the interpreting physician.
- Exercise discretion and judgment in the performance of sonographic and/or other non-invasive diagnostic services.
- Demonstrate appropriate communication skills with patients and colleagues.
- Act in a professional and ethical manner.
- Provide patient education related to medical ultrasound and promote principles of good health.

Code of Ethics for the Profession of Diagnostic Medical Sonography

Preamble:

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

Objectives:

To create and encourage an environment where professional and ethical issues are discussed and addressed. To help the individual practitioner identify ethical issues. To provide guidelines for individual practitioners regarding ethical behavior

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

- A. Provide information to the patient about purpose, risks, and benefits of the ultrasound procedure and respond to the patient's questions and concerns.
- B. Respect the patient's autonomy and the right to refuse the procedure.
- C. Recognize the patient's individuality and provide care in a non-judgmental and non-discriminatory manner.
- D. Promote the privacy, dignity, and comfort of the patient (relatives and significant others) by thoroughly explaining procedures protocols and implementing proper draping techniques.
- E. Protect the confidentiality of acquired patient information.
- F. Strive to ensure patient safety.

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

- A. Obtain appropriate ultrasound education and clinical skills to ensure competence.
- B. Achieve and maintain specialty specific ultrasound credentials. Ultrasound credentials must be awarded by a national sonography credentialing body recognized by the Society of Diagnostic Medical Sonography (SDMS) Board of Directors.
- C. Uphold professional standards by adhering to defined technical protocols and diagnostic criteria established by peer review.
- D. Acknowledge personal and legal limits, practice within the defined scope of practice, and assume responsibility for his/her actions.
- E. Maintain continued competence through continuing education and/or recertification.
- F. Perform only medically indicated studies, ordered by a physician or their designated health care provider.
- G. Protect patients and/or study subjects by adhering to oversight and approval of investigational procedures, including documented informed consent.
- H. Refrain from the use of any substances that may alter judgment or skill and thereby compromise patient care.
- I. Be accountable and participate in regular assessment and review of equipment, procedures, protocols, and results.

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

- A. Be truthful and promote appropriate and timely communications with patients, colleagues, and the public.
- B. Respect the rights of patients, colleagues, the public and yourself.
- C. Avoid conflicts of interest and situations that exploit others or misrepresent information.
- D. Accurately represents his/her level of competence, education, and certification.
- E. Promote equitable care.
- F. Collaborate with professional colleagues to create an environment that promotes communication and respect.
- G. Recognize that well-intentioned healthcare providers can find themselves in ethical dilemmas; communicate and collaborate with other s in resolving ethical practice. Report deviations from the SDMS Code of Ethics for the Profession of Diagnostic Medical Sonography to supervisors, so that they may be addressed according to local policy and procedures.
- H. Engage in ethical billing practices.
- I. Engage only in legal arrangements in the medical industry.

SDMS
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 Plano, Texas

Scope of Practice

Preamble:

The purpose of this document is to define the Scope of Practice for Diagnostic Ultrasound Professionals and to specify their roles as members of the health care team, acting in the best

interest of the patient. This scope of practice is a “living” document that will evolve as the technology expands.

Definition of the Profession:

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

Scope of Practice of the Profession:

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

Diagnostic Ultrasound Professionals:

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

1 An example of credential: RDMS (registered diagnostic medical sonographer), RDCS (registered diagnostic cardiac sonographer), RVT (registered vascular sonographer); awarded by the American Registry of Diagnostic Medical Sonographers, a certifying body with NCCA Category “A” membership.

2 Credentials should be awarded by an agency certified by the National Commissions for Certifying Agencies (NCCA).

Endorsed by:

Society of Diagnostic Medical Sonography, Copyright 1993-2000

American Institute of Ultrasound in Medicine, Society of Diagnostic Medical Sonography

American Society of Echocardiography* Dallas, Texas USA

Canadian Society of Diagnostic Medical Sonographers

All Rights Reserved Worldwide Society of Vascular Technology

*Qualified endorsement

Mission Statement

The mission of the Diagnostic Medical Sonography Program at Tacoma Community College is to provide comprehensive instruction designed to respond to the dynamic and evolving nature of sonography and the healthcare field. This program emphasizes critical thinking skills, compassionate and quality patient care, as well as promotes professional interactions with patients, staff, and physicians.

Philosophy

The Diagnostic Medical Sonography Program at Tacoma Community College was created to address a recognized need in the community. As such, the surrounding healthcare community has played an integral role in shaping the program. Area sonographers, physicians, and healthcare administrators helped write and review curriculum and provided resources such as equipment and clinical education sites. As a result of this commitment, the program has a responsibility to provide competent sonographers for this community.

The program is based on the philosophy that sonography is learned through active, hands-on participation. This approach allows the students to gain a firm understanding of the theoretical knowledge as well as basic scanning skill before applying this knowledge & skill clinically. The ultimate goal of the program is to support student academic challenges, encourage autonomous learning and to prepare outstanding entry-level staff sonographers. Students graduating from this program will also be prepared to take the American Registry of Diagnostic Medical Sonographers examinations in Abdomen, Obstetrical and Gynecology, and Scientific Principals and Instrumentation.

Program Goals

The Program will:

1. To prepare competent, entry-level general sonographers in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains.
2. Utilize support services provided by the college to assist in overall course/program retention rate.
3. Provide a curriculum designed to meet requirements of professional bodies.
4. Prepare students to take the ARDMS examinations appropriate for a general concentration program.
5. Track success of graduates in obtaining employment as sonographers upon successful completion of program.
6. Survey graduates and employers within one year of graduation for input on DMS program strengths and areas for improvement.
7. Provide educational opportunities for re-careering and professional renewal consistent with the mission of the college.
8. Evaluate the appropriateness of the curriculum against the changing environment and assess progress towards achieving its goal.

Program Learning Outcomes

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

1. Demonstrate the required technical and critical thinking skills to perform as an ARDMS-certified entry-level sonographer, providing accurate and efficient general diagnostic sonographic examinations/procedures.
2. Obtain, review and integrate pertinent patient history and supporting clinical information/data to optimize diagnostic results.

3. Record sonographic diagnostic, pathologic and/or physiologic information for interpretation by a physician.
4. Interact effectively, professionally and ethically in oral and written communications with patients their families, physicians, and other health care professionals adhering to the recognized SDMS scope of practice.
5. Provide basic patient care and comfort, anticipating and responding to patient needs.
6. Provide patient education related to medical ultrasound and promote principles of good health.

Technical Statement

The following statements identify the physical, mental, and emotional capabilities appropriate to the profession of Diagnostic Medical Sonography and the students enrolled in the clinical phase of the Diagnostic Medical Sonography Program. These guidelines are considered the standard for employer position description.

A. Physical Requirements

The Diagnostic Medical Sonographer must possess sufficient strength, motor coordination and manual dexterity to:

7. Work standing on his/her feet 80% of the time.
8. Use both hands, wrists, and shoulders to maintain prolonged arm positions necessary for scanning and perform fine motor skills.
9. Lift more than 50 pounds routinely.
10. 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.
11. Push, pull, bend and stoop routinely to move and adjust sonographic equipment and perform studies.
12. Use senses (vision, hearing, touch) to adequately view sonograms, including color distinctions; distinguish audible sounds; perform eye/hand coordination skills required in sonographic examinations; and recognize changes in patients' condition and needs.
13. Work in a semi-darkened room for prolonged periods of time.
14. Be physically capable of carrying out all assigned duties.

B. Mental and Intellectual Requirements

The Diagnostic Medical Sonographer must be able to:

1. Communicate effectively, verbally and non-verbally, with patients and other healthcare professionals to explain procedures, give instructions, and give and obtain information.
2. Organize and accurately perform the individual steps in a sonographic procedure in the proper sequence according to established standards.

3. Understand and react quickly to verbal instructions and patient needs.
4. Follow directions effectively and work closely with members of the health care community.
5. View and evaluate recorded images for the purpose of identifying proper protocol, procedural sequencing, technical qualities and identification of pathophysiology.
6. Apply problem solving skills to help optimize patient care and produce the best diagnostic information possible.

C. Emotional Requirements

The Diagnostic Medical Sonographer must be able to:

1. Provide physical and emotional support to the patient during sonographic procedures.
2. Interact compassionately and effectively with the sick and/or 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

Program and Graduate Evaluations

Throughout the course of the DMS program, students will be asked to participate in the evaluation process of program faculty, curriculum and clinical affiliates. The January following graduation, DMS program graduates will be mailed a graduate survey to assess the overall effectiveness of the education they received while in the DMS program at TCC. Employers of TCC DMS graduates will also receive a survey designed to give feedback on program effectiveness in preparing entry-level sonographers.

Governance Policies

In an effort to promote excellence in the professional and ethical conduct of students, and to provide the highest quality medical care for patients, the following policies are in effect for students in the Diagnostic Medical Sonography Program at Tacoma Community College.

Students are required to comply with all school regulations as outlined in the online TCC Student Policy and Procedure Manual. Students are required to behave in a manner that will reflect their most honorable attributes as well as those of the school and profession of Diagnostic Medical Sonography. **Failure to adhere to the policies of the Diagnostic Medical Sonography program may be grounds for immediate dismissal from the program.**

Conduct and Policies Standards

Rules and regulations are to be adhered to by all students (not limited to the following). Students are expected to behave in a professional and ethical manner at all times and shall not engage in:

1. Mistreatment of patients in any manner (physical, verbal, etc.), including abandonment.
2. Excessive absenteeism or tardiness. This includes failure to notify the clinical instructor, clinical coordinator and/or program chair of any absence or lateness.
3. Loitering on clinical affiliate premises outside of the assigned clinical experience or presence within the assigned clinical affiliate but beyond program-approved (scheduled) hours.
4. Misuse of confidential information, falsification of information, records and/or reports.
5. Exhibition of insubordination.
6. Exhibition of degenerate and indecent behavior.
7. Damage or destruction (misuse, etc.) to institutional property (etc.), including defamation of character (patient, fellow student, clinical instructor, staff, administration, clinical coordination, program chair, et al.).
8. Unauthorized use or possession of clinical affiliate and/or non-personal property.
9. Creation of, or contribution to, unsanitary conditions on clinical affiliate grounds, including diagnostic (exam) areas, record keeping areas, and washrooms, dining area, etc.
10. Intimidation or coercion of another student or employee through physical, verbal and /or psychological (implied etc.) threats.
11. Soliciting or gambling on clinical affiliate grounds.
12. Smoking or narcotic usage while on clinical affiliate grounds and/or reporting to the clinical affiliation while under the influence of drugs and/or alcohol.
13. Possession of a weapon of any kind while on hospital premises or clinical affiliate grounds.
14. Excessive talking, laughing or other disturbing behaviors including the adornment of strong and annoying perfumes, colognes, etc.
15. Failure to report any accident or injury involving student(s), patient(s), clinical affiliate employee(s), etc.
16. Abandonment of the assigned clinical affiliate site (i.e. no permission from immediate supervisor to leave).
17. Sleeping, unauthorized "resting" or cigarette breaks while on clinical affiliate grounds.
18. Failure to show interest or provide assistance at the clinical affiliate site.
19. Non-compliance with the dress requirement specified in this manual.
20. Unauthorized use of any communication devices within the clinical affiliate premises. (cell phones should not be carried on your person during clinical activities. Please store them and use them during approved breaks only).

* Student sonographers share equal responsibility with the faculty and staff sonographers in the welfare of patients. Teamwork is especially vital to give the patient the best possible diagnostic sonography service.

NOTE: The clinical education centers reserve the right to refuse to provide clinical education to any student involved in any activity not considered professional or conducive to proper patient care.

Students dismissed from the clinical site for the above mentioned activities/behavior may also be dismissed from the program.

Students are required to follow the same rules and policies as the employed sonographers while at the clinical affiliate site(s).

Students do not have the right to refuse academic or clinical assignments by the Program Director or the Clinical Coordinator. Any student refusing an academic or clinical assignment will be immediately dismissed from the program.

Program Requirements

The following criteria must be adhered to in all Diagnostic Medical Sonography courses in order to receive a satisfactory clinical evaluation. Failure to meet these criteria may be identified by any DMS program faculty member, either in or out of the clinical facility, and will subject the student to immediate and appropriate disciplinary consequences.

Each student will:

1. Adhere to all college policies, including the TCC Student Code of Conduct. (This can be accessed online:
<http://www.tacomacc.edu/resourcesforstudents/studentpolicies/codeofstudentrightsandresponsibilities/>)
2. Adhere to the student role, as outlined by clinical affiliate contracts.
3. Adhere to the SDMS Code of Ethics for sonographers.
4. Dress appropriately in accordance with the DMS Dress Code (included in the DMS student policy and procedure manual) and/or the assigned clinical affiliate.
5. Adheres to HIPAA guidelines.
6. Demonstrate respect for patient privacy and individual rights as outlined in the Patient's Bill of Rights.
7. Deliver optimum care in a non-discriminatory manner.
8. Demonstrate an ability to communicate accurately in (Standard American) English.
9. Document all services provided using proper (Standard American) English (verbal and written).
10. Report immediately any errors of omission/commission to the proper authorities.
11. Adhere to OSHA regulations while in attendance at the clinical affiliate.
12. Demonstrate physical, cognitive, and psychological competence.
13. Demonstrate a caring, empathetic, and non-selfish attitude.
14. Show respect for clinical affiliate staff and avoid the use of words or body language that could be construed as derogatory.
15. Be physically able to perform patient care procedures and equipment usage required by the clinical site.
16. Utilize the Internet and/or sonography websites to search for information pertaining to sonography.
17. Have reliable means to transport oneself to and from any clinical affiliate site.
18. Inform the proper authorities whenever unable to attend/complete clinical assignment(s).

Sexual Harassment

Tacoma Community College defines sexual harassment as "unwelcome sexual advances, requests for sexual favors, or other verbal or physical conduct of a sexual nature." TCC's Sexual Harassment Policy is designed to protect students, faculty, and staff. Sexual harassment includes, but is not limited to, subtle or overt pressure for dates or sexual activity, inappropriate or offensive personal remarks of a sexual nature, sexually demeaning comments, sexual graffiti, or offensive illustrations of a sexual nature. Deliberate and unwelcome touching, pinching, and patting are other examples of sexual harassment.

1. All TCC DMS Program employees and students, whether management or non-management, are expected to refrain from any behavior or conduct which could be interpreted as sexual harassment toward any other employee, student, patient, or visitor.
2. Management and supervisory personnel take prompt, corrective action whenever they become aware of sexual harassment in the workplace.
3. If a student is the offender, corrective action will include termination of said student from the DMS program.
4. All incidences of sexual harassment shall be reported to the Program Director, Clinical Coordinator, Instructor, and/or Clinical Site Instructor immediately.

Attendance Policies

General Attendance Information

1. Attendance is required for all academic, laboratory and clinical courses.
2. Any request for emergency leave will be directed to the Program Director. The request may be made verbally, but must also be made in writing.
3. If the College President suspends college operations due to inclement weather, classes on campus may be canceled. See the Severe Weather policy. **Students attending clinical are expected to report to the clinical site if the facility is open and employees are expected to be there. It is the student's responsibility to check on the facility's policy regarding inclement weather.**
4. If college or building operations are suspended due to "acts of God" (i.e. earthquake, power outage) classes on campus will be canceled. **Students attending clinical will report to clinical as scheduled if the facility is open and operational.**
5. Attendance is based on the academic and clinical calendar. The student will be advised of time off for non-instructional days, i.e. holidays.
6. All students must meet clinical rotation hourly investment. When a student is going to be absent from his or her assigned clinical site, the student must first notify the clinical site instructor, followed by immediate communications to the Clinical Coordinator and/or Program Director.

Leaves of Absences for Medical and Pregnancy

Medical or Personal Leave

For any number of reasons a student may request a leave of absence from the program when they hope to return at a future date. This policy is also applicable to students that have incurred an illness, injury, condition or disability that would temporarily prevent them from performing the essential functions of the didactic, lab and/or clinical education component. In the event of such, all reasonable efforts will be made to meet the student's limitations or restrictions. However, if the student is unable to participate for a period extending beyond ten didactic class days or eighty clinical hours, a Leave of Absence may be granted providing certain criteria are met.

Pregnancy Leave

Pregnant students wishing to continue within the program must meet the physical, mental, intellectual and emotional requirements as previously stated. A leave of absence must be requested if absences exceed ten didactic days or eighty clinical hours.

Process for Initiating a Leave of Absence

1. The Leave of Absence must be requested in writing to the Program Director/Clinical Coordinator. For medical Leaves of Absence, this letter must include documentation on letterhead from the student's physician stating the student is temporarily unable to actively participate in the didactic/lab/clinical education component of the program.
2. The student must be making satisfactory academic, clinical and professional progress at the time of request.
3. The student must return within four quarters of the requested Leave of Absence for didactic/lab and clinical courses, starting at the first quarter not completed.
4. If the leave is requested during the clinical portion of the program, the student must:
 - a. Successfully pass a comprehensive written exam to verify didactic knowledge prior to re-enrollment.
 - b. Successfully pass a sonographic scan evaluation by the Program Director and/or the Clinical Coordinator prior to re-enrollment.

These exams must be completed during the quarter prior to re-entry. Upon successful completion of both written and scanning exams, the student will be placed in the appropriate clinical or didactic courses. Note- that may mean a lower level clinical course than the student would have progressed to prior to the Leave of Absence. Students failing one or both of the re-entry exams will be dismissed from the program and are ineligible for readmission. Additionally, students currently enrolled in the program have priority in clinical site assignments over students returning from a leave of absence and clinical site availability is not guaranteed.

There is a higher retention rate when the student audits the classes the preceding quarter to aid in the transition back into the program. There are also higher success rates when the clinical courses are completed in sequence and are uninterrupted.

The Program Director will grant Leaves of Absence in writing and will include an expected date of re-entry. The student must respond with a letter of acknowledgement of the expected re-entry date within two weeks of receipt date. Any re-entry exams and/or scan evaluations must be scheduled and completed prior to the stated re-entry date at the initiative of the student.

This policy is enacted for the purpose of:

1. Ensuring that all students meet the required clinical education objectives so that student competency achievement and registry exam eligibility can be documented.
2. Ensuring that the student's didactic education is closely coordinated with the clinical component thereby providing the student with the highest quality educational experience and learning environment.

3. Affording students who have made satisfactory academic, clinical and professional progress in the program an option for completing their education after a leave of absence.

Severe Weather – Campus Closure

In the event of severe weather, there are several easy ways for TCC students to determine if the college will be open and/or if they should report to class. Students may call **566-5000** and a recorded message will give the caller up-to-date information on the status of College operations. You can also visit the college's web site at www.tacomacc.edu and a message will be posted on the home page only if the college is closed.

Information will be available by 6:15 a.m. on those days of partial or total closure; therefore, students can call before they leave home for class. **IF THERE IS NO RECORDING REGARDING CLOSURE, YOU SHOULD ASSUME THAT THE COLLEGE IS OPERATING AS USUAL.**

Announcements regarding the college's operational status will be made available to area radio and television stations (noted below) if the College is to be closed. You can hear announcements on many stations because we are using the computerized Public Schools Emergency Communication System (PSECS).

Attendance at Education Meetings

Students may be granted time off to attend educational meetings deemed educationally worthwhile by the Program Director. All expenses, including transportation, are the responsibility of the student. Attendance at education meetings are not counted as clinical hours unless specified by the Program Director or Clinical Coordinator. TCC is not responsible for the students' safety and well-being.

Students with Special Needs

All students are responsible for meeting the requirements of the program, but the way they meet these requirements may vary. If you need specific auxiliary aids or services due to a disability, please contact the Access Services office in Building 18 (253-566-5328). They will require you to present formal, written documentation of your disability from an appropriate professional. When this step has been completed, arrangements will be made for you to receive reasonable auxiliary aids or services on campus. The instructor must receive the written documentation for the specific accommodation at least 24 hours in advance of the activity in question. A student must request and provide the appropriate documentation for every course, each quarter while in the DMS program.

Student Substance Abuse

General Policy Statement

All students are expected to perform their clinical activities efficiently and safely without the influence of drugs or alcohol.

The following actions/conditions are prohibited:

1. Deficient clinical performance due to use of drugs and/or alcohol.
2. Reporting for a clinical session under the influence of drugs and/or alcohol.

3. Possessing any illegal narcotic, hallucinogen, stimulant, sedative or similar drug while on clinical time.
4. Removing any drug from the institution or patient supply for any reason.

All students have a responsibility to notify their instructor(s) if they are taking any medications that may interfere with their academic and clinical performance.

Purpose:

To protect the welfare of patients, students, instructors, Tacoma Community College, and Clinical affiliate facilities and to ensure compliancy with clinical affiliate regulations.

Diagnostic Medical Sonography Program Disciplinary Process

Program Warnings & Disciplinary Actions

Failure to adhere to academic standards or clinical policies of conduct, as outlined in program guidelines or policy and procedure manual will result in disciplinary action. Disciplinary matters not covered by this program policy will be dealt with according to college policy, Washington State Law, or TCC Student Code of Conduct. Program warnings and disciplinary actions are as follows:

1. Progress Report
 - a. A progress report may be given at mid quarter for students making unsatisfactory progress in any didactic lab or clinical course and at risk of failing. The progress report will be documented in the student program record.
 - b. The progress report will be discussed with the student and performance expectations will be specified.
 - c. Improvement must be made by end of quarter. If the student has not met the performance expectations by the end of the quarter, the student will receive an "E" for the course and immediate dismissal from the program.
 - d. A minimum of a C grade is required in each course in order to proceed to the next quarter. A student may appeal a failing grade which leads to dismissal from the program.
2. Program Probation
 - a. Students may be placed on program probation as part of the disciplinary process.
 - b. Program probation involves a period of time with performance expectations specified in a contract, during which the student's performance in either the didactic or clinical setting will be closely monitored. If the student has not met the performance expectations by the end of the probationary period, the student will be dismissed from the program.
 - c. If a student's academic GPA drops below 2.0 for any given term, the student will be placed on academic probation and counseled. If, after the following term, the student's GPA is again below 2.0 the student will be dismissed from the program.
 - d. Should a student who has previously been on probation who, in any future quarter earns/receives a GPA below 2.0 he/she will automatically be dismissed from the program.
3. Program Suspension

- a. The student may be suspended from the clinical site or from classes for investigatory purposes following an alleged breach of program policies. Notice of this suspension may be oral, but will be confirmed in writing.
- b. Suspension from attendance at the clinical affiliate for any reason will be reported to the Program Director and/or Clinical Coordinator and the student in writing. This suspension from the clinical affiliate does not necessarily exclude the student from attending classes at the college.
- c. Temporary suspension from a clinical education site may be imposed as a disciplinary measure for failure to meet proper Standards of Conduct.
- d. Program suspension from the clinical site may result in the inability of the student to complete the course objectives, and possibly the program, and may be grounds for dismissal.
- e. The Dean of Business and Professional Services and/or the Vice President of Student Affairs will review all suspensions.
- f. Time lost due to suspension will be counted as days absent.
- g. The student will be officially notified in writing regarding the suspension and actions to be taken.

4. Program Dismissal

Students will be notified in writing of their dismissal from the program. Students may be dismissed from the program for any of the following reasons:

- a. Failure to pass a required didactic or clinical course with a grade "C" or better in one attempt. If the student fails a didactic or lab class, the student may apply for readmission to the program to attempt to pass the failed didactic or lab course the next time it is offered and continue in the program. If the student fails any didactic or clinical course after readmission, the student will be dismissed from the program and will not be eligible for re-entry.

Students failing a clinical course must pass a written didactic knowledge assessment and undergo a sonographic scan evaluation by the Program Director or Clinical Coordinator prior to being readmitted to the program. The student will be placed in the appropriate clinical or didactic course, if clinical site/class space allows and will continue sequentially through the program. Please note, students failing a clinical course may be readmitted to the didactic portion of the program before returning to clinicals. If the student fails either the didactic or scanning assessment, they will not be eligible for readmission. Students failing a second clinical course will be dismissed from the program and will not be eligible for re-entry.

- b. Failure to maintain a GPA greater than 2.0 following probation for low GPA.
- c. Violating academic honesty policies.
- d. Failure to register for a given quarter during the appropriate time frame as established by the college.
- e. Failure to complete insurance and immunization requirements.
- f. Disclosure of confidential information. (HIPPA violation)
- g. Suspension or termination from any clinical site.
- h. Falsification of records.
- i. Repetitive tardiness and/or excessive absences (see attendance policy).
- j. Violation of Program Standards. (Breach of institutional, departmental, or programmatic policies, procedures, rules, and regulations)
- k. Insubordination. (verbal and/or physical)

- l. The conviction and distribution of, or possession of, illegal drugs or controlled substances.
- m. Reporting to class or clinical assignments under the influence of alcohol or narcotics.
- n. Possession of a firearm while on institutional grounds.
- o. Failure to accomplish clinical assignments and objectives. (Neglect of clinical education responsibilities – absences, sleeping, etc.)
- p. Critical incident (**Please see full description under Clinical Evaluation , part “e”)
- q. Theft of college or clinical education site property. (Malicious destruction or theft of patient, visitor, employee, or institutional property.)
- r. Malicious damage to laboratory equipment.

Only the college can dismiss a student from the DMS program. Students can not be dismissed from the program by the clinical affiliate or the affiliate personnel. Clinical affiliates do reserve the right, however, to expel or reject any student whose behavior is judged to be unacceptable at their institution. Depending on the reason for this situation, the student may be placed in an alternate site if space is available, or may be dismissed from the program.

5. Program Appeals Procedure

If the student disagrees with the disciplinary action, the student has the right to appeal that decision. Appeal of disciplinary actions will be in the following sequence:

- a. The student must present a written, signed appeal outlining the complaint and proposed resolution to the Program Director within five (5) instructional days following the disciplinary action. The Program Director must respond in writing within five (5) instructional days after receipt of the complaint.
- b. If the student is unsatisfied with the outcome, the student must then follow the established grievance procedure of Tacoma Community College as outlined in the TCC Student Code of Conduct.

Readmission

1. Any student who has failed one DMS didactic or lab course, or withdrawn from the program may apply for readmission to the program. Students receiving and “E” due to violating academic honesty policies will not be allowed to reapply to the program. It is **highly recommended** that the student enroll in DMS courses the quarter prior to re-enrollment to assist in overall success. A faculty member can advise the student as to which courses would be best. Readmission is always dependent upon space availability.
2. Any student who has failed a didactic course after taking the course a second time will not be readmitted to the program.
3. Any student who has failed any two DMS courses within the same quarter shall not be readmitted into the program.
4. Any student who has failed a clinical course may be eligible for readmission to the program after taking and passing didactic and scanning assessment to verify didactic knowledge and evaluate technical ability. Re-entry will begin with the appropriate clinical or didactic course and the student will be expected to progress through the program courses sequentially. This allows the greatest opportunity for student/program success.
5. Students dismissed from the program for violating the program policies and procedures (cheating, falsifying documents, etc), will not be allowed to reapply to the program.
6. Students dismissed for failure to comply with insurance and immunization requirements may reapply to the program once they are compliant.

7. Students who have been dismissed from the College for disciplinary reasons are subject to conditions for readmission to the college before readmission to the DMS program.

Applying for Readmission

1. The student requesting readmission to the DMS program must submit a formal letter to the Program Director expressing an interest in re-enrollment for a specific quarter. This letter must be typed, dated, and signed by the student.
2. The student reapplying to the program must complete the online application within the appropriate time frame (April - July 1).
3. In addition to completing the online application, the student must include an academic statement. The statement shall include: 1) the explanation for the original withdrawal or failing grade, and 2) the solution to resolve the cause(s) of withdrawal or unsatisfactory grade.
4. Readmission to the DMS program will be considered on the basis of space availability.
5. Readmission to the clinical portion of the DMS program will be contingent on satisfactorily passing the re-entry didactic & scan exams. ("C" or better)
6. The Program Director will respond in writing to all petitions for readmission to the DMS program.
7. Students who are denied readmission due to lack of space may apply the following year.
8. If the DMS course work is older than one year, a petition for readmission will be considered only if the circumstance for the delay is well documented.
9. Students can be readmitted to the program only once. If a student drops out or fails to maintain good academic standing after readmission, they will not be considered for readmission again.

Withdrawals

A program withdrawal must be requested if a student feels that he/she can no longer continue in the program, for any number of reasons, and will not be returning within the allowed time period following a withdrawal. The withdrawal must be put in writing to the Program Director. If the student chooses to return to the program after the one-year period, he/she must reapply to the program and be accepted. The student will need to start from the beginning of the program at this time. Before taking any such action, students considering withdrawal are strongly advised to discuss their plans with the Program Director. Refer to the college Catalog for tuition refund information.

Transfer Students

Students who wish to transfer into the DMS program at TCC from a DMS program that is similar in nature and rigor at another institution must complete the online application and be admitted. No preference will be given to students transferring from a DMS program outside of TCC.

Advising and Counseling

Once enrolled in the DMS Program, DMS faculty will advise all students. It is suggested that students acquaint themselves with their advisors and seek guidance on all academic matters. The DMS faculty will continue to provide advising for the duration of each student's training. Faculty office hours are listed on the current quarter syllabi for each faculty member or otherwise appointments can be made.

Students in the program will receive regular advising to assess their progression as well as review his or her grades with faculty, the Clinical Coordinator, and/or the Program Director. The students will be advised at mid-term and at the end of each quarter if deemed necessary. At that time student status

with regard to academic standings, clinical performance, professional demeanor, and attendance will be discussed and documented. The advising goal of the DMS faculty is to facilitate student success in their DMS courses (curriculum). Any student demonstrating difficulty in meeting the guidelines and objectives of any particular DMS course should meet with the appropriate authority for that course (course instructor, clinical instructor, clinical coordinator, program chair).

The Program Director is always available to students on a formal or informal basis.

TCC offers qualified staff to provide students with counseling. This staff provides services such as academic counseling, testing, advising, and financial and personal counseling. Minimal counseling needs may otherwise be met through discussions, suggestions and recommendations to the appropriate (TCC) resources by DMS faculty. Documentation of any counseling sessions will be left at the discretion of the DMS program faculty. (Students are strongly encouraged to use campus resources to meet their needs and to consult frequently with both clinical and classroom faculties regarding any deficiencies so as to minimize any future complications.)

Falsification of Records

Falsification of any program records will result in an “E” for the course and dismissal from the program following student due process.

Examples of falsification of records may include, but are not limited to:

1. Improper documentation of clinical education hours attended.
2. Improper or false documentation in a patient’s medical chart.
3. Improper documentation of completed performance evaluation.
4. Falsifying a clinical site instructor’s signature on clinical education paperwork.
5. Improper documentation of clinical exam log form.

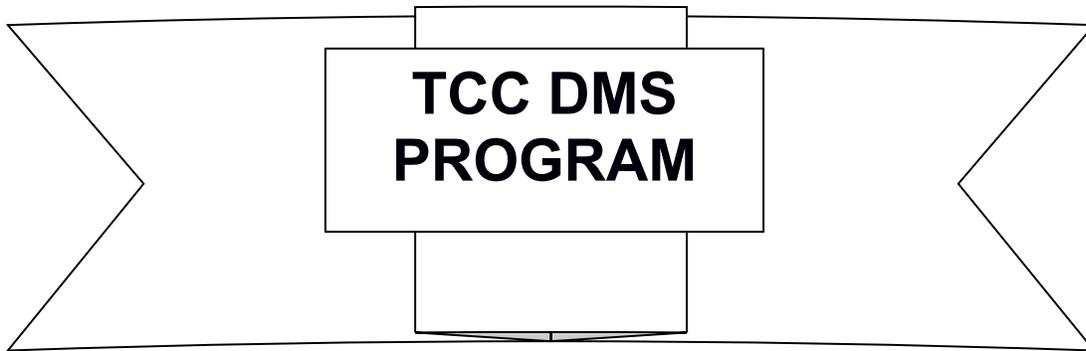
Professional Activities and Organizations

The DMS Program encourages student participation in professional endeavors (activities, contests, organizations, etc). These activities enhance learning and retention of applicable information. In view of this, it is recommended that each student become familiar and involved with a professional ultrasound society during their Diagnostic Medical Sonography training. Related professional organizations include, but are not limited to, the following:

1. American Institute of Ultrasound in Medicine (AIUM)
2. Society of Diagnostic Medical Sonography (SDMS)
3. Society of Vascular Ultrasound (SVU)

For assistance on how to obtain membership information from any of the above organizations, you may contact the TCC DMS Program Director or Clinical Coordinator.

Section 2



Academic Principles and Policies

Academic Professionalism

As participants in a professional education program, DMS students shall conduct themselves in a professional manner during all classes, labs, seminars, and clinical rotations. Academic professionalism includes respect for the faculty and rights of other students, prompt attendance for all classes, labs, seminars, and clinical rotations and avoidance of any behavior which disrupts or interferes with academic proceedings. Professionalism also requires adherence to ethical principles such as not cheating on tests, not degrading the characters of others or spreading malicious gossip.

Students are expected to call their instructor's office to report absences or late arrivals before they occur. Faculty phone extensions are listed on each syllabus. In the event of the need to immediately speak to an instructor, the DMS secretary should be called at (253) 566-5179.

Administration of Instruction

***Program Director**

The Program Director is under the general direction of the Vice President of Academic and Student Affairs. He/She is also under the immediate supervision of the Dean of Business and Professional Services. The Program Director has the total responsibility for the structure as well as the daily operation of the program, including organization, administration, periodic review and evaluation, continued development, instruction, clinical education and general effectiveness.

***Clinical Education Coordinator**

The Clinical Coordinator is given the responsibility for assisting in the organization, supervision, and coordination of the clinical education courses in each of the affiliated clinical sites. This responsibility includes assisting in establishing procedures, guidelines, and manuals for the clinical education

component of the curriculum, serving as a liaison between the academic and clinical faculty, maintaining communications between the affiliates and the college, assisting the clinical site instructors as needed, and integrating and relating the curriculum objectives for the clinical portions of the program to make the educational experience as relevant and coordinated as possible. He/She is also available to advise and counsel students regarding their clinical experience.

***Part-time Instructors/Clinical Liaisons**

In addition to the Program Director and Clinical Coordinator, TCC's DMS Program employs part-time instructors/ clinical liaisons. These faculty members instruct students in several didactic courses and assist in the laboratory setting. They also may provide support in the clinical setting with clinical site visits.

Clinical Site Instructor

The clinical site instructors are the supervising sonographers that you are assigned to at your clinical education site. The clinical site instructor also participates in the clinical education experience by observing students in the local affiliates, doing clinical evaluations and performance assessments, teaching the student about the equipment and the examinations to be performed, and being available to advise and counsel students. There is usually no compensation to the clinical sites or the sonographers who volunteer their time and expertise to assist in your education, other than your thanks so please be sure to give them your thanks!

* Comprehensive job description is available through the Health, Justice and Human Services office 19-70.

Faculty Expectations for Student Performance

To assist in your success during your time in the Diagnostic Medical Sonography Program, the following recommendations have been provided as expectations of student behavior:

At the college, the student is expected to:

1. Adhere to all college and departmental policies/procedures.
2. Be on time for class sessions.
3. Complete all assignments for all courses according to the date and time scheduled.
4. Take examinations on the day and time scheduled.
5. Be prepared to participate in class by preparing assignments and answering objectives prior to the class.
6. Maintain a consistent pattern of professional and ethical behavior by:
 - a. Completing your own work on tests and written exams.
 - b. Not writing assignments for other students.
 - c. Consulting with the instructor of record regarding any material in the course that is misunderstood.

Academic Standards

Since sonography is a profession in which less than adequate performance may cause patients to suffer harm, standards must be maintained which are high enough to ensure the effectiveness and competency of our graduates. These standards have been developed by the college, clinical affiliates

and the accrediting body. Accordingly, the program grading system is somewhat different compared to other TCC courses.

The course grade is determined by a point system. The criteria for grade determination will be based on the following: EXACT points need to be achieved to earn the grades below; **points are NOT rounded up**. You need exactly 79% to pass.

The DMS Program number and letter grading system is as follows:

Number Grade	Letter Grade
97 - 100%	A
94 - 96	A-
91 - 93	B+
88 - 90	B
85 - 87	B-
82 - 84	C+
79 - 81	C
Below "C" will not progress within the DMS program	

Students must maintain a minimum of "C" in all DMS courses and maintain an overall grade point average of 2.0 to be considered in good standing in the program and eligible to advance to the next quarter. Students not meeting all above criteria will not be permitted to progress within the program. See program dismissal and readmission sections for complete information.

Students must pass the midterm or final exam or both exams in each didactic course. Failing both exams will result in a grade of "E" for the course regardless of the overall point total. Students must pass the midterm or final image evaluation or both evaluations in each lab and clinical course. Failing both evaluations will result in a grade of "E" for the course regardless of the overall point total.

Didactic Educational Objectives

With classroom education, students will receive instruction in such areas as the physics of diagnostic ultrasound, scanning techniques, cross-sectional anatomy, and physiology and pathophysiology of specific human body systems imaged with sonography. Additionally, each student will accomplish demonstration, recognition, and interpretation of normal and abnormal sonographic patterns in each organ system. Knowledge gained in the classroom setting is directly related to clinical training and will need to be retained in order to draw and maximize direct parallels with the clinical experience. Refer to individual course syllabi for further, specific course objectives.

Diagnostic Medical Sonography Curriculum

<u>Course</u>	<u>Credits</u>
<u>First Quarter (Fall)</u>	
Sonography Lab I.....DMS 101.....	2
Ultrasound Cross-Sectional Anatomy.....DMS 105.....	5
Abdominal Sonography.....DMS 120.....	3

Pathophysiology I.....	DMS 110.....	3
Ultrasound Physics and Instrumentation I.....	DMS 130.....	3
Orientation to Diagnostic Medical Sonography.....	DMS 175	2
(Early Fall start class)		

Second Quarter (Winter)

Sonography Lab II.....	DMS 102.....	3
Small Parts Sonography	DMS 121.....	3
Obstetrics and Gynecology 1	DMS 122.....	3
Pathophysiology II.....	DMS 111	3
Ultrasound Physics and Instrumentation II.....	DMS 131.....	3

Third Quarter (Spring)

Sonography Lab III.....	DMS 103.....	2
Obstetrics and Gynecology II	DMS 123.....	5
Introduction to Clinical I.....	DMS 150.....	2
Patient Care/Scope of Practice.....	DMS 140.....	2
Advanced Sonography.....	DMS 125.....	2

Fourth Quarter (Summer)

Ultrasound Clinical II	DMS 151	10
Ultrasound Seminar and Critique I	DMS 160	2
“Bridge” Clinical.....	DMS 299.....	3

Fifth Quarter (Fall)

Ultrasound Clinical III	DMS 250.....	13
Ultrasound Seminar and Critique II	DMS 260.....	2

Sixth Quarter (Winter)

Ultrasound Clinical IV	DMS 251.....	13
Ultrasound Seminar and Critique III	DMS 261.....	2

Seventh Quarter (Spring)

Ultrasound Clinical V	DMS 252.....	13
Ultrasound Registry Review Seminar	DMS 270.....	2

Total Credits..... 104 to complete program requirements

Campus Resources and Student Services

For a complete listing of Campus Resources and Student Services, please refer to “Student Services” on the TCC home page.

Student Affairs

Advisory Committee Representative

A student representative shall be selected from each class to serve on the Diagnostic Medical Sonography Advisory Committee.

The DMS Advisory Committee consists of individuals from various aspects of the field (doctors, administrators, sonographers, faculty, students, etc.) who share an interest in the advancement and development of the DMS Program. Advisory meetings are held at least once a quarter. The business of the committee is to review ongoing program operations and provide recommendations for change or improvement. Since any change in the Program eventually affects the students, student representation at these meetings is important.

Class Representative

Each class will elect two class representatives that will represent them on the Student Council. These students are the class liaisons for policy changes and/or problems.

TCC DMS Club

In the 2003 – 04 school year the TCC DMS Club was formed. Students admitted into the DMS program are highly encouraged to actively participate and govern this club. Funds are available by request each year for attendance at local, regional, and national conferences and for fellowship activities. In addition, the club has sponsored Continuing Medical Education seminars for area sonographers as a way of thanking them for their participation in the clinical education portion of the program.

Graduation

All students who are expecting to graduate must submit an Application for Associate of Applied Science Degree to the Records Office at the beginning of the quarter in which their graduation will take place. (Usually spring quarter) The application procedure consists of a comprehensive review of the student's record to ensure that all requirements for graduation have been completed. Application forms for graduation may be obtained from the Records Office or the Program Chair. Students' failure to complete this process may delay graduation due to student ineligibility. Students are responsible for confirming completion of their degree application.

In order to qualify as a candidate for the degree of Associate of Applied Science in Diagnostic Medical Sonography all degree requirements must be met.

TCC Academic Dishonesty

Academic dishonesty is inconsistent with the values and mission of Tacoma Community College. Students at TCC are expected to be honest and forthright in their academic endeavors. Cheating, plagiarism, fabrication or other forms of academic dishonesty corrupt the learning process and demean the educational environment for all students. Students committing academic dishonesty will receive an "E" for the course and immediate dismissal from the program.

Academic dishonesty is a violation of Tacoma Community College Chapter 132V-120 WAC: Code of Student Rights and Responsibilities:

WAC 132V-120-050 (11) Cheating, plagiarism or tending to a faculty member any work product that the student fraudulently represents to the faculty member as the student's work for the purpose of fulfilling or partially fulfilling any assignment or task required by the faculty member as part of the student's program of instruction (see Tacoma Community College Administrative Procedure for Academic Dishonesty...)

(You may access the entire Code of Student Rights and Responsibilities at:
<http://www.tacomacc.edu/resourcesforstudents/studentpolicies/codeofstudentrightsandresponsibilities/>
)

The purpose of this document is to:

1. Define academic dishonesty, and
2. Provide a process for implementing penalties when academic dishonesty occurs.

Definitions of academic dishonesty include, but are not limited to:

Cheating: Cheating is an act of deception by which a student misrepresents that he or she mastered information on an academic exercise.

Plagiarism: Plagiarism is the inclusion of someone else's words, ideas or data as one's own work. When a student submits work for credit that includes the words, ideas or data of others, the source of that information must be acknowledged through complete, accurate, and specific references and, if verbatim statements are included, through quotation marks.

Fabrications: Fabrication is the intentional use of invented information or the falsification of research or other findings with the intent to deceive.

Academic Misconduct: Academic misconduct is the intentional violation of college policies (e.g. tampering with grades, taking part in obtaining or distributing any part of an exam prior to the scheduled testing time). Examples include selling or giving away test answers and changing or altering a grade on a test or in a grade book.

Student Finances

The financial aid office is located in Building 14. If you are unable to afford the cost of your education, the staff of this office will help you obtain loans, grants, and scholarships. Short term, interest-free loans are occasionally available to help with unplanned expenses. Several DMS scholarships are given each year; check with the financial aid office as to the appropriate times to fill out forms for these and other scholarships. Specific scholarships DMS students may qualify for are the Allenmore Foundation Scholarship and the Ben Cheney Foundation Scholarship.

Student Health

1. Insurance

Medical/Accident Insurance

All clinical education centers are requiring that some form of medical insurance must cover the student to attend clinical. Privately vended, low-cost accident insurance is available through TCC. Because you are not a paid employee, by law the clinical sites are not obligated for injuries occurring during student activities.

Liability (malpractice) Insurance

TCC students assigned to clinical sites are automatically charged a lab fee which covers liability insurance providing they work within the boundaries for which they are trained. The student may purchase additional coverage.

Other Insurance

TCC students may be assigned to clinical facilities on Federal or Military reservations. Proof of automobile insurance is required to enter these premises. It is the student's responsibility to purchase car insurance if they are assigned clinical placement in one of these facilities.

2. Accidents

Any accident occurring on campus should be reported to the instructor and the Program Director immediately. Accidents occurring at the clinical site shall be reported to the Clinical Coordinator/Clinical Instructor and the site instructor. A written report of the incident shall be given to the clinical coordinator. This not only includes accidents involving the student, but patients, supplies and equipment. Honesty and promptness in reporting are most important.

3. HIV Infected Students

There is no evidence that health care personnel infected with HIV virus have transmitted this infection to patients while performing their routine job responsibilities. Precautions to prevent transmission of HIV infection from possibly infected students to patients are necessary. However, these recommendations should apply to all students, not just those identified as having HIV infection.

- a. All students should perform adequate hand washing before and after patient contact.
- b. All students should wear gloves for direct contact with mucous membranes or non-intact skin of all patients.
- c. Students who have exudative lesions or weeping dermatitis should refrain from direct patient care and from handling patient care equipment until condition resolves.
- d. Students infected with HIV who perform invasive patient care procedure should double glove.
- e. Students infected with HIV should be counseled about the potential risk associated with taking care of patients with transmissible infections. The student's personal physician should determine whether the individual can safely perform patient care duties and may suggest changes in program.
- f. If a patient is exposed to blood or body fluids of a student with HIV infection, the patient should be informed of the incident. The student will abide by the hospital and/or clinical policies in effect in this situation.

Tacoma Community College will comply with AIDS Omnibus legislation, which requires AIDS education of health professionals.

4. Immunizations/Health Clearance

In order to complete the required clinical rotations, students need to provide the following additional documentation **upon acceptance into the program**. However, students will be responsible to provide documentation to a third-party provider. Students failing to complete the immunization requirements will forfeit their clinical placement and be dismissed from the program.

- **Health Clearance** – Documentation of current immunizations for:
 - **NOTE-** Students must maintain immunization/ health clearances for the duration of the program.
- **TB test** -TB Skin Test
- 2-step TB Test, if not tested in the last 12 months (to be repeated during the second program year)
- New + TB results→ F/U by healthcare provider (chest X-ray & symptoms check), may also need to complete health questionnaire for facilities
- History of + TB results→ provide proof of chest X-ray (lifetime, except if symptomatic) and submit negative symptom check past 12 months.

- If no proof of + TB Test available, then re-test with 2-step TB Test.
- History of BCG vaccination→ test with 2-Step TB Test
- **Hepatitis B**
- Proof of immunity by vaccination or titer.
- Negative titer→ must repeat vaccine series. Student will be allowed in clinical during repeat series.
- Considered a non-responder to vaccination after 2 complete vaccine series and titer negative.
- **MMR (Measles, Mumps, Rubella)**
- Proof of vaccination (2 doses) or proof of rubella, rubella, and mumps immunity by titer.
- **Varicella (Chicken Pox)**
- Proof of vaccination or proof of immunity by titer.
- If born after 1994, student must have proof of 2 doses of varicella vaccination.
- **Tetanus**
- Vaccination within last 10 years.
- Tdap required if immunized after 6/1/07.
- **Flu vaccine**
- Proof of vaccination
- **Current CPR** - Healthcare professional level
- **AIDS Education Certificate** – seven (7) hour course (early start)
- **Insurance:** Personal Health/Accident and Vehicle
- **Proof of Health Insurance** – Required by clinical sites.

Children on Campus

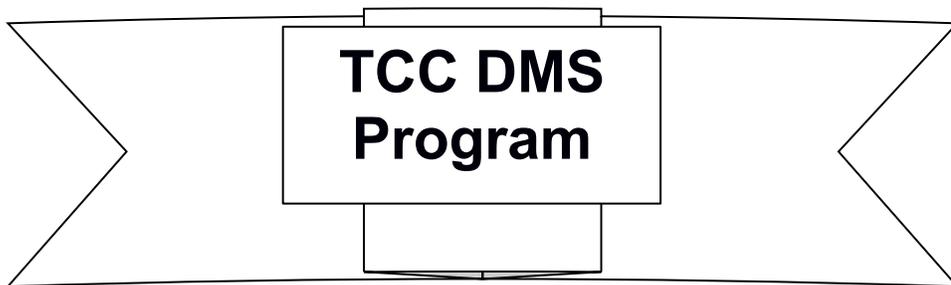
Children are welcome in most areas of Tacoma Community College and its off-campus centers. To protect children and to preserve the quality of the learning environment for all students, the college asks that adults observe the following guidelines when bringing children to the college:

- Children must be closely supervised at all times by a responsible adult except when enrolled in special programs or classes.
- Children may be allowed in classrooms at the instructor's discretion. Some course materials discussed are not appropriate for children. The instructor has the right to refrain from permitting children in the classroom. Please check with instructors before bringing children to class.

The following areas contain specific hazards to children (chemicals and equipment), or require a quiet learning atmosphere for students. For these reasons, please do not bring children into:

- ✓ Science laboratories
- ✓ Computer laboratories
- ✓ Laboratories in Building 19 (Office Occupations, Allied Health, and Administration of Justice)
- ✓ Art studios

Section 3



Clinical Principles and Policies

Clinical Environment

The Beginning Clinical Student

Compared to the learning activities conducted on campus in the classroom setting, the learning activities in the clinical setting are frequently much less structured. You must take a more active and responsible role in pursuing learning opportunities. The didactic and lab courses are designed to minimize the transition between the classroom and the clinic. You will be performing many of the same activities in the clinical setting, but have the added elements of dealing with real patients, clinical instructors and the responsibility of functioning within an imaging department.

The clinical experience begins with students observing the activities of the sonography department. This may include scheduling, evaluating prior imaging, communicating with imaging employees and physicians. As you move through the clinical quarters, your involvement and independence will increase. You will begin greeting patients, maintaining exam room cleanliness, beginning examinations and post scanning, familiarize yourself with common pathologies and integrate within the department. As you complete the final quarters of your clinical rotations, you will be independently performing exams, advanced patient care techniques, communicating your finding to reading radiologists and enacting the role of a sonographer within an imaging department.

Clinical Conduct Policies and Standards

A good work ethic is based on common sense. Make your clinical experience a positive transition into your new chosen profession. Be mindful that the clinical site is a showplace for your work ethic, attitude, initiative, and the technical skills. Adhere to department policies regarding dress code, tardiness, absenteeism, and patients' rights. Be aware of the chain of command and your place in it. Show courtesy and respect to all those within the facility. Strive to become a valuable member of the Medical Imaging team. Success is the light at the end of the tunnel.

1. Student sonographers are expected to treat their patients with kindness, courtesy, and respect. When you get your patient from the waiting area, introduce yourself and try to establish

rapport. Once the patient is in the examination room, keep the door closed and make sure that undressed patients are properly gowned or covered up. Patients in the clinical site are to be addressed based on the policy of the clinical site. Some require surnames only; some may use first names only. Learn the policy at your site. No patient should be referred to as an ultrasound or sonographic examination. Professional behavior is not limited to your contact with patients. It is reflected in your attitude, and in the way you communicate with physicians, supervisors, and coworkers. Typical examples of non-professional behavior are:

- a. Gossip
- b. Discussion of clinical information with patients' relatives
- c. Smoking or chewing gum in patient areas
- d. Discussions pertaining to work in elevators or other public areas
- e. Discussions that are not meant for the ears of patients or relatives within their hearing distance
- f. Any form of sexual harassment with a patient, coworker, fellow student or faculty member
- g. Speaking derogatorily regarding staff or fellow students, using slanderous or malicious statements

Discussion of your personal life while on duty is unprofessional and time consuming in a busy sonography department. The sonographers may seem interested at the time but it is in your best interest to leave private affairs at home.

2. Medical histories and other matters concerning patients are confidential. Unauthorized possession, use, copying, reading of records, or disclosure of information contained in such records is forbidden.
3. There are specific policies that govern telephone conversations. Therefore, only personnel who have been properly oriented will answer the phone. Personal phone calls will not be made or received during business hours except for emergencies. Personal calls may be made or received during break times.
4. Cell phones must not be carried on your person and must only be used during designated breaks. Your clinical instructors may use their cell phones but you are not an employee and are required to comply with the policies and procedures within this manual.
5. Theft or removal of hospital or clinical property or property of employees or patients will not be tolerated. Proper care of all equipment and machinery is expected. If unfamiliar with the operation of a piece of equipment, ask for assistance.
6. Smoking or utilizing smokeless tobacco (chewing tobacco) while on clinical duty is not professional and will not be tolerated. The only exception will be during breaks, done in a designated place.
7. Do not leave the clinical area during scheduled hours without obtaining prior consent of the clinical site instructor.
8. Each hospital/office has set procedures for billing and other paperwork. Refer all questions to the proper personnel rather than trying to guess the answers incorrectly.
9. Students are expected to assist with the responsibilities of maintaining departmental cleanliness, supplies, and room organization.
10. Transportation to and from clinical sites is the responsibility of each student and prior arrangements are to be made so that you arrive on time. It is also the students' responsibility to provide their own transportation for any field trips unless program personnel make other arrangements.
11. The primary function of the clinical site is patient care. Under no circumstances should the presence of students alter the quality of patient care. It is your responsibility to:

- a. Follow the administrative policies established by the radiology/sonography department and the hospital.
- b. Check the posted rotation schedule and report to your assigned work center on time.
- c. Ask for advice when indicated. Do not experiment with the patients.
- d. See that all paperwork required by the program for the site to fill out is done so in a timely manner. Failure to have paperwork completed on time will result in the loss of policy and procedure points.

Clinical Attendance

Attendance

Please refer to the current course syllabi for rules and regulations regarding clinical attendance and absences.

Student Senate Meetings

A first year DMS student will represent the DMS club at Senate meetings.

Clinical Attendance Information

1. When a student will be absent it is his/her responsibility to notify the clinical site 1-hour **PRIOR** to expected time of arrival. It is also necessary to notify the Clinical Coordinator/Program Director, which may be done by leaving a message on his/her voice mail prior to 8:00 am. An email confirming the absence must also be sent to the Program Director and/or Clinical Coordinator. Not notifying the Clinical Coordinator/Program Director or the clinical site will be counted as an unexcused absence that will be deducted from the total hours of absence allowed.
2. Tardiness is not acceptable. Tardiness is any failure to be in the clinical site work area in proper attire, ready to care for patients at the assigned time. Two clinical tardies during the same quarter will be counted as a clinical absence.
3. Make-up time due to an absence may be allowed on a case-by-case basis and must be requested orally or in writing no more than 5 days after the absence. If the request is made orally, you must obtain signed documentation of the conversation from the Program Director or Clinical Coordinator. The make-up day must be completed within the same quarter as the absence and must be completed on a day that is agreeable to the faculty and the clinical site.
4. Paid work time at any clinical site cannot be substituted for assigned clinical experience. The student must complete all assigned clinical time before being eligible for paid work. Clinical evaluations/performance assessments cannot be performed during paid work time.
5. Appointments should be scheduled outside of clinical and classroom times if at all possible. In the event an appointment needs to be made during clinical time prior arrangements must be made with the Clinical Coordinator/Program Director and the clinical site. The exchange time will also need approval by the clinical site instructor.

It is the responsibility of each student to keep attendance records at their assigned clinical site. These records should accurately reflect clinical hours invested by the currently enrolled student as well as reflect time deviations that account for holidays, sick days, etc. The Clinical Site Visitor will review them at their discretion during site visits. If there is any misrepresentation of hourly clinical investment, this would constitute falsification of records and all appropriate disciplinary action will be taken against the individual(s) responsible for such misconduct. On the day the Clinical Site Visitor is scheduled to visit the student at his/her site, the student should remain at the site within the assigned schedule. Any change in schedule must be related to the Clinical Site Visitor. If you are not at the site

for the clinical visit and have not notified the Clinical Site Visitor of your absence, you will lose Policy & Procedure points from your final grade.

Clinical Education Schedules

1. Clinical rotations
 - a. The length and nature of clinical rotations will be determined solely by the College.
 - b. The College will determine the total number of clinical hours required of each student for each rotation and/or academic quarter.
 - c. In cases of inclement weather, the student is required to attend clinical at the discretion of the clinical instructor and/or clinical site policy.
 - d. In the event that the number of DMS students exceeds the number of available clinical sites, students will be ranked by overall program GPA and assigned sites based on their standing. Students not placed in sites will have the opportunity to continue their clinical experience on the TCC campus until a site is available.
2. Scheduling
 - a. The clinical site instructor at each institution sets starting time for clinical education centers. A clinical shift is eight to ten hours usually between 7:30 AM and 12AM, and may include variable hours.
 - b. Day to day scheduling and room or sonographer assignments will be made by the clinical site instructor at each clinical education center as best meets the educational needs of students and the requirements of the clinical site.
 - c. The clinical site instructor may not schedule students for holidays or scheduled days off according to the College.
 - d. All changes in clinical schedules must be cleared with the clinical site instructor at the appropriate institution in advance and with the clinical coordinator at the college also in advance.
 - e. Clinical schedules will not be changed to accommodate student work schedules.
 - f. Students should be allowed the same time off for coffee and lunch breaks as staff sonographers in the institution.

Student Assignment to Clinical Affiliate

The DMS program faculty shall retain complete jurisdiction over the assignment of a student to a clinical site. Under no circumstances shall any student be allowed to report to a diagnostic laboratory for purposes of official TCC DMS clinical training between quarters and/or without proper compliance to the program requirements or without the prior consent of his/her Clinical Coordinator and/or Program Director. Recognizing however, the role that the TCC DMS program plays in the facilitation of each student's education, legitimate factors, which can affect each student's success, will be considered. These legitimate factors consist of, but are not limited to, the following conditions:

- a. Diagnostic lab availability
- b. Complementary nature of clinical affiliate to student's technical, interpersonal, etc. qualities/characteristics.
- c. Rotational fairness to fellow students
- d. Overall compatibility of student/mentor/site/affiliate
- e. Exposure of student to inpatient and outpatient experience
- f. Variety in clinical instructorship and case volume handled by the site
- g. Student exposure to a variety of equipment
- h. Student's technical ability as indicated by their acoustic physics grades, cross-sectional anatomy grades, lab performance, etc.

- g. Clinical site assignment/rotation for each student may only be altered due to extenuating circumstances and will be based on clinical site availability or at the discretion of the clinical coordinator/program director. The program does not provide accommodations for personal needs. Students should be aware that the DMS program is a full-time responsibility. The program should not be expected to work around the student's schedule.
- h. In the event that the number of DMS students exceeds the number of available clinical sites, students will be ranked by overall program GPA and assigned sites based on their standing. Students not placed in sites will have the opportunity to continue their clinical experience on the TCC campus until a site is available.

All students assigned to a clinical affiliate should refer to the corresponding course syllabus for specific hourly investment required as well as guidelines as to how clinical performance (written assignments, conduct, etc) will directly impact their final grade.

Incidental Clinical Placement at Student's Employer

Any student employed in any capacity by and at the physical location of any TCC DMS clinical affiliate must immediately notify the Program Director of this status so as to properly ensure the prevention of "role conflict". Moreover, under no circumstances shall any student receive monetary compensation for the delivery of care during assigned (and TCC DMS approved) clinical hours.

Clinical Rotations

Students will not be transferred from one clinical site to another due to inability to get along with the site employees, clinical instructors or peers. There is to be no trading of clinical sites amongst students.

CLINICAL SHIFTS WILL NOT BE CHANGED DUE TO OUTSIDE WORK SCHEDULES.

Clinical rotation assignments are based on the type of experience the site offers in accordance with the needs of the student. All assignments are selected based on program requirements, student needs (i.e.: fulfillment of hospital or outpatient clinic rotations) and are not based on where the student lives.

Clinical Educational Objectives

At the completion of each clinical rotation, the student should be able to demonstrate by verbal, written and scanning performances, ability with the following skills, as appropriate to his/her level in the program:

1. Production of sonographic images of diagnostic quality.
2. Safe operation of emergency patient equipment.
3. Recognition of laboratory tests, their value and significance to the examination being performed.
4. Ability to keep accurate patient records.

5. Ability to peruse results of previous studies relevant to the current case.
6. Appropriate knowledge of sonographic procedures including ability to describe protocol for procedure being performed.
7. Appropriate knowledge of anatomy, physiology, and pathophysiology.
8. Ability to consistently recognize and document normal and abnormal anatomy.
9. Ability to discuss common artifacts/pitfalls of sonographic exam being performed.
10. Ability to formulate appropriate questions that would draw pertinent information from the patient.
11. A working knowledge of ultrasound physics.
12. Ability to communicate effectively in standard American English with patients and other health care professionals.
13. Ability to evaluate sonographic images for clinical information.
14. Knowledge of medical/legal implications of patient interaction/management.
15. Ability to work effectively as a member of a health care team.
16. Ability to present recorded sonographic images to a radiologist/physician for evaluation.
17. Ability to present case studies on interesting cases.
18. Ability to use the TCC resources including **approved** internet searches and/or textbooks to research certain case study topics.
19. Ability to properly identify common Doppler waveforms and determine their significance.
20. Ability to safely assist a qualified medical practitioner in surgical or non-surgical procedures that require sonographic imaging.
21. Ability to use and to safely dispose materials used in a surgical or non-surgical procedure that require sonographic imaging.

These skills may be assessed with one or more of the following:

Clinical evaluation, image evaluation, clinical assignments, performance assessments, scanning practical, and oral and written case study presentations.

Failure to demonstrate competency of the listed clinical educational objectives, may result in a failing grade for the course and dismissal from the program.

Clinical Supervision

Until a student achieves and documents technical skill in any given procedure, all clinical assignments shall be carried out under the personal supervision of qualified (i.e. certified) sonographers. The parameters of personal supervision are:

1. A qualified sonographer reviews the request for examination in relation to the student's achievement;
2. A qualified sonographer evaluates the condition of the patient in relation to the student's knowledge;
3. A qualified sonographer is present in the exam room during the conduct of the examination; and
4. A qualified sonographer reviews and approves the sonographic examination.

After demonstrating technical skill in supervised exams, students may perform procedures with direct supervision. Direct supervision is defined as that supervision provided by a qualified sonographer

available in the department to assist students as needed regardless of the level of student achievement.

A student is never to perform a clinical examination without either the personal or direct supervision of their assigned sonographer. All endocavity exams (i.e. transvaginal, transrectal) must be performed under personal or direct supervision from the staff sonographer.

For whatever reason, should a sudden lack of any supervision occur at a clinical education center the following policy will be followed:

1. If insufficient staff for proper student supervision should occur at any clinical education center, the student shall notify their assigned TCC Clinical Coordinator and/or Program Director at once.
2. The TCC Clinical Coordinator/Program Director will then attempt to contact one of the following:
 - a. The clinical instructor
 - b. The shift supervisor
 - c. An on duty staff sonographer
 - d. A department receptionist
3. The TCC Clinical Coordinator will verify the supervision capacity at the time with the individual contacted.
4. If it is determined that the diagnostic sonography shift is not adequately manned, the student(s) will be reassigned to an observational rotation for that day only.
5. This procedure shall be considered as a short-term solution.

Clinical Education & Evaluation

Clinical skills can be developed by following a systematic step-by-step approach. The following sequence of steps will generally produce outstanding sonographers:

1. Academic Preparation
2. Supervised hands-on scanning in lab
3. Observation of sonographic exams in clinical site
4. Assisting in sonographic exams in clinical site
5. Supervised Exam Performance in clinical site

Academic Preparation: Students complete this step on the TCC campus by studying and passing with a “C” or better the required didactic DMS classes.

Supervised scanning in lab: Scan labs are designed to complement didactic learning and allow development of the technical skills necessary to become a competent entry-level sonographer.

Observation: Initial activities in the clinical site will consist primarily of observing qualified sonographers performing general sonographic exams.

Assisting Qualified Sonographer: Students should begin as soon as possible or as soon as allowed in assisting the supervising sonographer in performing sonographic exams. Students should be able to begin studies and/or “post scan”. (Scanning after sonographer has completed the exam) shortly after beginning summer quarter. Be assertive – ask for scanning opportunities and/or take advantage of any scanning opportunity afforded you.

Supervised Exam Performance: As you develop confidence and technical skill, you should begin performing partial and/or complete examinations under the personal supervision of a qualified sonographer. He/she will observe you and step in whenever the need arises either due to difficulty or exam schedule constraints.

Performance Assessment: A certain number of successful assessments are required each quarter in order to progress to the next clinical course. Each one must be verified and signed by a sonographer credentialed in that sub-specialty. See clinical syllabus for specific information related to performance assessments.

Clinical Evaluation: The clinical grade will include DMS faculty observation of student's clinical performance as related to course expected outcomes and the clinical educational objectives listed in the Policy & Procedure manual. Students must successfully complete the didactic and lab courses before they can move to the clinical quarters. Students must pass each clinical course in order to move to the next clinical course.

The clinical courses are numerically graded.

- a. The student must successfully meet all clinical expected outcomes as outlined on the syllabi for each course.
- b. The student will be prepared for clinical experience as outlined in the Policy & Procedure manual.
 - 1) Adequate preparation includes:
 - Performance of safe sonographer practices at the appropriate level of competency.
 - Application of previously taught sonography skills and concepts.
 - Obtaining pertinent information on each patient for safe performance of appropriate exam.
 - 2) Any student not prepared for clinical may be dismissed from the clinical area for the day, and the day will be counted as an absence.
- c. The student will be prepared for participation in clinical conferences/site visits. This includes making sure clinical evaluation(s) are completed by your supervising sonographer(s)/clinical instructor by the time of your clinical site visit.
- d. For certain critical expected outcomes (objectives), which will be found below, each student, must **maintain safe practice** at all times in order to achieve a satisfactory grade. If not, then the student will receive a grade that is less than satisfactory for continuation in the program at the end of the quarter. The critical expected outcomes (objectives) are as follows:
 - Safely, accurately, and knowledgeably obtain diagnostic sonographic images
 - Maintain asepsis in all appropriate procedures with each clinical experience in which the student is involved with invasive procedures.
 - Maintain safe practice in patient care with each clinical experience.
 - Maintain the patient's right to privacy and confidentiality.
- e. A student who misses more than the allowed 32 hours of clinical experience in a given rotation (2 clinical quarters) may find it impossible to meet clinical objectives. A student who misses more than six days of clinical experience during the entire c

clinical portion of the DMS program may also find it impossible to meet clinical objectives. Such situations will be evaluated by the DMS faculty. The student may be required to withdraw or receive a failing grade.

- g. If unable to report for clinical, the student must follow directions given by the instructor for the particular clinical affiliate.
The instructor and clinical affiliate must be notified in advance if an absence is to occur. Failure to notify absences correctly will result in a loss of policy and procedure points and possible dismissal from the clinical site.
- h. Students will adhere to the clinical dress code outlined in the Policy & Procedure manual or to the dress code of their assigned clinical site.
- i. Tardiness (late arrival) and early departure from the clinical area are not acceptable and will be considered as an absence. The student's record will reflect missing the entire clinical day, except in cases of extenuating circumstances. Please contact your clinical site visitor for approval of any extenuating circumstances.
- j. The clinical instructor may choose to remove a student from the clinical area if that student is unable to perform safely.
- k. Documented dishonesty, chemical abuse, breach of patient confidentiality, inappropriate or bizarre behavior may result in failure in the DMS program
- n. If any clinical affiliate chooses to deny privileges to rotate through their facility due to the lack of any requirements, withdrawal from the DMS program will be required, or an unsatisfactory grade will be given.

Clinical Grading

Clinical grades are based on clinical progress evaluations, adherence to clinical policies and procedures, clinical assignments, performance assessments, sonographic image evaluations, and/or scanning practical. Refer to individual course syllabi for specific grade requirements in each clinical course.

All students are required to keep copies of their clinical paperwork in a notebook to document clinical progress. Clinical paperwork includes, but may not be limited to: Clinical Progress Evaluations, Sonographic Exam Performance Assessments, Attendance logs and Patient exam/scan time logs. Refer to individual course syllabi for specific paperwork requirements in each clinical course. Clinical paperwork will also be retained in the student's clinical file.

Grade Percentage	Letter Grade
97 - 100%	A
94 - 96	A-
91 - 93	B+
88 - 90	B
85 - 87	B-
82 - 84	C+
79 - 81	C Below "C" will not progress within Program

Dress Code

A Diagnostic Medical Sonographer administers to the physical and psychological welfare of patients; therefore, the student must present a well-groomed appearance with neatly cut hairstyles, evidence of acceptable hygienic practices and be willing to comply with the clinical affiliate grooming policy/dress code. Any student not adhering to this policy will be required to leave the affiliate and/or the program.

General Appearance

All students are expected to be neat and clean.

- Students having hair longer than collar length shall tie it back. Beards shall be neatly trimmed.
- Perfumes, colognes, and aftershave are not allowed at some sites.
- Due to health regulations some type of sock must be worn with shoes, no bare feet. -Closed toe shoes must be worn.
- No dangling jewelry shall be worn. Only a small earring worn on the ear is allowed. No other body rings are to be worn, i.e. nose rings, brow rings, and lip or tongue studs.
- Some clinical affiliates do not allow artificial fingernails (silk or acrylics also).
- Current fashion trends may not be considered professional attire. Nontraditional hairstyles and/or colors are not acceptable. Please check with your site prior to wearing a questionable style.

Name Badge

Your name badge is considered part of your uniform and must be worn when you are on duty at your clinical site. This regulation is part of TCC's affiliate agreement with each clinical education center. A student not wearing their TCC or clinical affiliate name badge will be sent home to retrieve the name badge; time missed will be deducted from the clinical absences allowed. Name badges may be purchased at the TCC bookstore.

If any affiliate or any healthcare organization hires a student, that organization must provide proper identification for the employee. The employee identification is not to be worn during clinical hours, as it is a misrepresentation of the status of the student.

Uniform

There is no specific uniform for the DMS program at Tacoma Community College. Students may wear either; scrub pants and tops or a white lab coat over appropriate street clothes. Appropriate street clothes include: casual slacks, blouse or shirt; women may wear dresses or skirts that are just above the knee or longer, men may be required by clinical site to wear a tie. No denim clothing is allowed in clinical sites. Clothing must be neat and clean without holes. Closed toe, closed heel shoes are required. A comfortable, non-slip shoe is suggested; white tennis shoes are allowed if they are completely white and free of any colored adornments. Any student not following the dress code policy to lab or clinical will be dismissed and an absence issued. The dress code at the clinical site must be adhered to. Should there be differences between the DMS program dress code policy and the clinical site, follow the clinical site dress code policy during clinical hours. During lab, follow the TCC DMS policy.

AIDS/HIV Exposure

There is no evidence that the risk in caring for a patient infected with HIV is any greater than the risk in caring for another patient with blood-borne or sexually transmitted infections. Health care personnel will not be excused from caring for a patient with HIV/AIDS on their own request. Health care workers who may be immunosuppressed or have a clinical condition which may confer an increased risk should provide a written statement to that effect from their private physician.

Students may be required to care for patients who are unidentified carriers of HIV/AIDS or other infectious disease. Therefore, to minimize exposure to HIV and/or other blood or body secretion pathogens, students in the Allied Health Programs must follow the standard precautions as currently outlined by CDC when caring for ALL patients. Additionally, unidentified HIV/AIDS carriers may also exist among the group. The same standard precautions will be followed when performing laboratory procedures on campus. Program faculty, therefore, must inform students of the required standard precautions and of the necessity to follow those guidelines.

Pregnant health care workers are not known to be at greater risk of contracting HIV/AIDS infections than those who are not pregnant; however, if a health care worker develops HIV/AIDS infection during pregnancy the infant is at increased risk of infection resulting from perinatal transmission. Because of this risk, pregnant health care workers should be especially familiar with precautions for prevention of HIV/AIDS transmission and minimize their contact with patients known to have HIV/AIDS whenever possible.

If a student sustains parenteral or mucous membrane exposure during routine patient care, individual hospital or agency policy will determine patient testing. If the source person is seronegative and has no evidence of HIV infection, no follow-up is necessary. If the source person has been diagnosed as having HIV/AIDS, declines testing for the HIV virus or has a positive test, the student should be evaluated as soon as possible for evidence of HIV infection. If the test is seronegative, the student should be retested after six (6) weeks, three (3) months, six (6) months and twelve (12) months. All testing will be done at the student's own expense. During the follow-up period, the exposed individual will be referred to their private physician for appropriate counseling.

Chemical Sensitivity

Students should be aware of their potential exposure to many chemicals and health hazards in the health care environment. Students with allergies or sensitivities need to be aware of the hazards within the environment where they plan to study or work. Students also need to know that removal of these hazards may not be possible due to the type of activities typically carried out by these occupations. Policies and procedures for substances in campus labs will be posted in the lab with MSDS sheets of items specific to the lab. It is the student's responsibility to research hazards in the clinical setting if an allergy/sensitivity is a concern and to notify the instructor before the clinical rotation has begun.

Latex Allergy Precautions

WARNING – People who are exposed to latex gloves and other products containing natural rubber latex may develop allergic reactions. To avoid such reaction, follow these steps:

1. Use non-latex gloves for activities that are not likely to involve contact with infectious materials, such as food preparation, routine housekeeping, and maintenance.
2. When handling infectious materials use powder-free gloves to assure appropriate barrier protection.

3. When wearing latex gloves, do not use oil-based hand creams and lotions unless they have been shown to reduce latex-related problems.
4. Frequently clean areas contaminated with latex dust, which is produced when powdered latex gloves are removed. Be sure to clean the carpeting, upholstery, and ventilation ducts in these areas as well.
5. Frequently change the ventilation filters and the vacuum bags used in latex-contaminated areas.
6. Be alert to the symptoms of latex allergy: skin rashes; hives; flushing; itching; irritation of the eyes, nose, or throat; asthma; and, in severe reactions, the signs and symptoms of shock.
7. If you develop the symptoms of latex sensitivity (allergy), avoid direct contact with latex gloves and products until you can see a physician who can test you for a possible latex allergy.
8. If you have a latex allergy, consult your physician about the following precaution: avoiding contact with latex gloves and products; avoid areas where you might inhale the dust from the latex gloves worn by others; tell your manager and your health care providers (doctors, nurses, and dentists) that you have a latex allergy and wear a medical alert bracelet identifying you as having this allergy.

Transportation and Parking

All students shall provide their own independent transportation to and from the College and the assigned clinical affiliates.

In order to maintain good attendance, students must have a reliable form of independent transportation to and from the college and assigned clinical affiliates. Problems associated with transportation are often identified as a reason for absence or late arrival. Such problems are understandable on occasion, but if they occur frequently, they can severely affect a student's progress and standing in the program

Public transportation is an option, however, bus schedules or routes, if available, are not always convenient for class or clinical assignments. In addition, some clinical affiliates are not readily accessible to public transportation. Students must be prepared to accept assignments to any clinical affiliation site.

At each clinical affiliate, parking facilities and regulations will vary. The student is responsible for becoming familiar with the assigned institution's guidelines upon commencement of their clinical rotation. Under no circumstances will TCC be held responsible for transportation and/or parking fees incurred by any student.

Parking is available on TCC premises in several parking lots around campus. Upon admission to the college, a parking permit must be obtained from the parking counter and displayed properly. This permit enables the student to use the appropriate parking facilities.

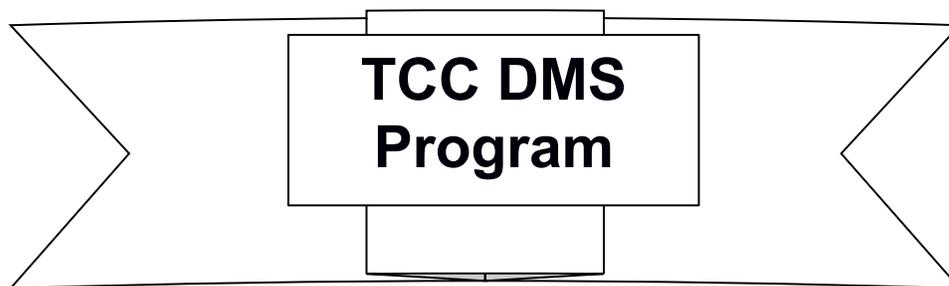
Clinical Affiliates

Each clinical affiliate has a sonographer who is designated as a clinical site instructor. The clinical instructor works with the DMS program Clinical Coordinator and/or the Program Director in coordinating your training. The student is expected to respond to a clinical instructor as he/she would with any other college instructor.

In many sites, the student will work with sonographers other than the designated clinical instructor for that site. Students are expected to be respectful and courteous to all staff members.

Clinical placements will occur on a rotational basis. Students will receive notification of placements on or before the end of the preceding quarter. Students are responsible for providing their own transportation to and from the clinical sites. **It is the responsibility of the student to contact the clinical site PRIOR to the first day to arrange details such as start times, where to park etc.**

Section 4



Laboratory Principles and Policies

Safety Regulations and Laboratory Requirements

Safety in the laboratory, like anywhere else, depends on reasonable caution and common sense. The special circumstances of the sonography laboratory, however, require a few additional rules.

1. Wear appropriate attire
 - a. Scrubs or street clothes with a white lab jacket must be worn to lab
 - b. In case of spills or shattering glass, clothing gives good protection to the skin. For this reason, wearing shorts or sandals in the lab is prohibited. A white, long sleeve lab coat is required during lab exercises.
 - c. Nametags are required.
2. Clean up your space.
 - a. Clean your tables before you go.
 - b. Take all your belongings and do not leave behind anything as there will be another group of students who will use the lab. Do not leave your books or notes.
 - c. The faculty is not responsible for any item lost in the room.
3. Sanitize and protect the equipment after every use.
 - a. Transducers must be sanitized after every use.
 - b. Wipe the transducer with the appropriate cleaning material after every scan.
 - c. Store the transducer properly and do not let it dangle or hang precipitously to prevent it from dropping on the floor. The crystals in the transducer are fragile and expensive; any hard jolt or shock may render it inoperative. **Make sure transducers cords are off the floor before moving equipment!**
4. Sign up on the Monitor Sheet & Laundry Assignment Sheet.
 - a. A monitor sheet/Laundry Assignment sheet is provided every quarter.

- b. The class monitor assigned for the day is responsible for checking the following:
 - ✓ Equipment is clean and sanitized
 - ✓ Transducers are stored properly
 - ✓ Bed sheets are unused
 - ✓ Gel bottles are filled and the supplies are stored properly, and
 - ✓ Lab is in order at the end of the class
- 5. Do not perform unauthorized experiments.
 - a. All lab exercises must be done with supervision of authorized faculty and staff.
 - b. Drape sheets are used to avoid spoiling the model's clothes.
 - c. Rubber gloves are worn for safety and protection.
- 6. **Do not use equipment without permission**
- 7. No eating, drinking, or smoking near equipment in Lab
 - a. Crumbs and food particles left on the table and on the floor invite unwanted pests that seek haven in the dark and warm casings of our equipment. They tend to feed on the wire insulations or coverings whenever their outside sources can not sustain them.
 - b. To prevent machine downtime due to these unwanted visitors, students are prohibited from bringing food or drink near the equipment in the lab.
- 8. Attendance is mandatory.
 - a. Tardiness is not accepted.
 - b. Refer to current course syllabus for rules on tardiness
 - c. Missed labs, for any reason, can not be made up. The student may request to practice lab information for the experience but no points will be awarded.
- 9. No audible cellular phones or pagers allowed in the lab.
- 10. No unauthorized people are allowed in the lab.

****NOTE:** Any additional lab requirements or regulations may be listed on individual course syllabi.