



Diagnostic Medical Sonography Program Handbook

*All students and faculty are expected to abide by the policies found in the CNHP Handbook. The handbook is located on the CNHP website at <https://www.usi.edu/health/about-the-college/handbook-for-college-of-nursing-and-health-professions>

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PREFACE

Welcome to the University of Southern Indiana (USI) Diagnostic Medical Sonography (DMS) program. The program faculty at USI and personnel of each clinical affiliate congratulate you on your acceptance into the program and wish you success.

This handbook has been written to provide you with essential information about the program and inform you of the many policies and procedures that affect students. Although great care has been taken to provide all the information students need to know, this handbook is not the only source of information. As a student at USI, you are subject to all policies, procedures, rules, and regulations established by the University. All students should review the current University Bulletin and become familiar with its content. In addition, the ' : 51 > 5E ? ° ; 01 ; 2 Conduct, Student Rights and Responsibilities, and registration schedules for each semester contain valuable information. Information concerning various university services can be obtained by contacting appropriate offices on campus. All students should also read the ° ; 81 31 ; 2Z A > 5 3 - : 0 / 1 - 84 " > 21??5 : ? / - : 0 . ; ; 7 2 A : 0 ; : @ 41 / ; 81 31 ? C 1. < - 31 - @ <https://www.usi.edu/health/about-the-college/handbook-for-college-of-nursing-and-health-professions>.

Please read this handbook / ; 9 < 8 @ 1 E - ? - 8 ? 4 0 1 : @ - > 1 > 1 = A 5 1 0 @ 7 : ; C @ 4 1 < > 3 > 9 ?

HANDBOOK ACKNOWLEDGEMENT

I am aware that the USI DMS student handbook is only accessible in electronic format.

I am aware that the College of Nursing and Health Professions (CNHP) handbook is located online at <https://www.usi.edu/health/about-the-college/handbook-for-college-of-nursing-and-health-professions>.

I have read the contents of the DMS handbook, the CNHP handbook and recognize that as a DMS student, I am responsible for compliance with the established policies and procedures of both the DMS program handbook AND the CNHP handbook.

I will utilize both the DMS student handbook and the CNHP handbook as a guide and personal reference throughout the program.

I understand as policies and procedures are modified the handbooks will be revised and available in electronic format.

I further understand that the program chair and/or clinical coordinator are responsible for answering any questions I have concerning program policies and procedures.

I agree to read the handbooks during the first week of each semester throughout my tenure in the DMS program.

PROGRAM OVERVIEW

PROGRAM DESCRIPTION

The DMS program prepares individuals to function effectively in the modern health care system as entry-level sonographers. It is a 48-month full-time education program containing a prescribed sequence of concurrent academic and clinical courses.

Core curriculum and professional course requirements are included in the program. Core curriculum provides an essential base of knowledge and understanding that supports the professional aspects of the program. Professional courses provide the technical knowledge and skills necessary for competent and effective patient care.

Upon successful completion of the program, students are awarded a Bachelor of Science in Diagnostic Medical Sonography. Graduates are eligible to apply for examinations administered by the American Registry for Diagnostic Medical Sonography (ARDMS).

PROGRAM PHILOSOPHY

Education is a process through which one may acquire knowledge, skills, values, experiences, and an appreciation for learning. It serves not just to prepare individuals for careers and greater financial security, but also to enrich each person and foster good citizenship. The DMS program seeks to provide its students with all the benefits of education by integrating core curriculum with professional course requirements. The program strives to produce graduates who have the capability to enter a career in DMS with confidence and competence to continue their education in pursuit of higher levels of development.

The faculty of the DMS program and personnel of affiliated clinical education centers are committed to providing each student with a high quality and comprehensive learning experience. The curriculum has been carefully designed to meet this commitment. Ongoing program review and improvement processes ensure that educational standards do not

hours and a limited amount of clinical education in both vascular and adult cardiac specialties. In 2008, the vascular and adult cardiac concentrations were developed and the DMS program implemented the current course sequence used today where all DMS students study Abdominal-Extended and Obstetrics and Gynecology concentrations and either Vascular or Adult Cardiac concentrations. Initial programmatic accreditation was awarded by the Commission on Accreditation of Allied Health Education Programs (CAAHEP) to the Abdomen and Obstetrics and Gynecology concentrations in March 2009. In July 2011, the

Affective Domain

The student will:

- a. Practice independently as well as a team member.
- b. Promote professional behavior to all through integrity, ethical decision making, and communication.
- c. Practice quality techniques in the provision of care to all patients using evidence-based practices.
- d. Cultivate a professional work ethic through interprofessional collaboration.

II. Apply knowledge and skills to succeed on national certification exams.

The student will:

- a. Successfully complete mock certification exams.
- b. Pass three ARDMS certification exams within a one-year period of eligibility.

fff. Participate in activities to prepare for lifelong learning.

The student will:

- a. Participate in at least one continuing medical education event.
- b. Volunteer for a university or community event.

IV. Understand global trends and issues in healthcare that may have an impact on sonography practices.

The student will:

- a. Demonstrate the ability to locate and synthesize research to stay informed of current trends in sonography education and practice.

The North Central Association of Colleges and Secondary Schools accredits USI. USI is a member of the American Association of State Colleges and Universities and is on the approved list of the Association of American Universities. The University is accredited for ten years at the baccalaureate, master's and doctoral levels by [The Higher Learning Commission](#). Programs in accounting, art, business, chemistry, education, engineering, health professions, and social work are accredited by the appropriate professional organizations and state agencies. Accreditation reviews by regional and discipline-based organizations continue to be prime indicators of quality.

CURRICULUM

The DMS curriculum requires 31 hours of pre-DMS courses. The DMS course work and remaining core curriculum courses begin in the spring semester (January) and run continuously for 28 months concluding at the end of the spring semester (May). A total of 120 credit hours are required for degree completion. Eighty-one hours are professional courses (DMS, DVT, ECHO, RADT or HP/HA/IPH), and 39 credit hours are the University Core courses.

Core curriculum and DMS academic courses are taught on the USI campus or through USI distance education. The DMS clinical courses are conducted at affiliated clinical education centers. Core curriculum credits and DMS pre-requisite courses are open to all students and must be completed prior to formal admission to the program or transferred from accredited colleges or universities. Enrollment in DMS courses required for the DMS degree is limited to students admitted to the program.

specifies the total number of classroom, laboratory, and clinical contact hours required. The number of hours utilized per week for each course can be determined by dividing the total hours by the number of weeks in the semester. Combined class, lab, and clinical time commitments can be 36-40 hours per week for students following the published curriculum.

Most academic and clinical course hours are scheduled during the day, Monday through Friday. Core curriculum courses sometimes require late afternoon or evening attendance; however, some clinical education assignments may involve off-hour scheduling. To ensure a comprehensive clinical learning experience, students are exposed to all aspects of DMS. This includes rotations through all areas of the sonography department, surgery, and portable sonography. lths

method with supplemental materials available to students on Blackboard. A variety of audiovisual aids is used when appropriate to augment instruction. The instructor determines reading and other required assignments. The content of the academic course is broken into units of study and tests follow the completion of each unit. Comprehensive final examinations are also given. The sonographic lab practice courses (DMS 316, 326, 336, DVT 398, 423, ECHO 398, 423) are designed to facilitate student development of scanning skills by observing instructor demonstrations and practicing procedures studied in the classroom. Proficiency evaluations are conducted in the lab to document satisfactory achievement.

Sonographic procedure courses (DMS 315, 323, 324, 332, DVT 401, 402, 421, ECHO 401, 402, 421)

DMS 316

Textbook of Diagnostic Medical Sonography by Sandra L. Hagen-Ansert, Volumes I and II (most current edition)

Sonography: Introduction to Normal Structure and Function by Reva Arnez Curry & Betty Bates Tempkin (most current edition)

DMS 321

Understanding Ultrasound Physics by Sidney Edelman (most current edition)

DMS 323

Textbook of Diagnostic Medical Sonography by Sandra L. Hagen-Ansert, Volumes I and II (most current edition)

DMS 324

Textbook of Diagnostic Medical Sonography by Sandra L. Hagen-Ansert, Volumes I and II (most current edition)

Sonography: Introduction to Normal Structure and Function by Reva Arnez Curry & Betty Bates Tempkin (most current edition)

DMS 326

Textbook of Diagnostic Medical Sonography by Sandra L. Hagen-Ansert, Volumes I and II (most current edition)

Sonography: Introduction to Normal Structure and Function by Reva Arnez Curry & Betty Bates Tempkin (most current edition)

DMS 327

No textbooks required

DMS 331

Understanding Ultrasound Physics by Sidney Edelman (most current edition)

DMS 332

Textbook of Diagnostic Medical Sonography by Sandra L. Hagen-Ansert, Volumes I and II (most current edition)

Sonography: Introduction to Normal Structure and Function by Reva Arnez Curry & Betty Bates Tempkin (most current edition)

DMS 333

No textbooks required

DMS 336

Textbook of Diagnostic Medical Sonography by Sandra L. Hagen-Ansert, Volumes I and II (most current edition)

DMS 337

No textbooks required

DMS 347

No textbooks required

DMS 436

No textbooks required

DVT 398

Techniques in Noninvasive Vascular Diagnosis: An Encyclopedia of Vascular Testing by
Robert J. Daigle (most current edition)

Echocardiography from - % : ; 3> <41>?" 1>?<1/ @B1 &41 ž ; @. ; ; 7. E%A? -: Ł5 3
DeWitt (most current edition)

Echocardiography from - % : ; 3> <41>?" 1>?<1/ @B1 &41) ; >7. ; ; 7. E%A? -: Ł5 3
DeWitt (most current edition)

ECHO 421:

A Practical Guide to Fetal Echocardiography by Abuhamad and Chaoui (most current edition)

ECHO 423

Echocardiography from - % : ; 3> <41>?" 1>?<1/ @B1 &41 ž ; @. ; ; 7. E%A? -: Ł5 3
DeWitt (most current edition)

Echocardiography from - % : ; 3> <41>?" 1>?<1/ @B1 &41) ; >7. ; ; 7. E%A? -: Ł5 3
DeWitt (most current edition)

ECHO 426

No books required

ECHO 437

No books required

ACADEMIC ADVISING

The program chair and faculty serve as academic advisors to all students who have been admitted to the DMS program. While those who are completing core curriculum coursework prior to admission have access to program faculty, this group of students is advised by a central advising center located in the CNHP. The main purpose of an academic advisor is to assist students in selecting appropriate courses. The advisor also monitors student progress and assists with academic problems. Students can meet with an advisor during regular office hours or by appointment.

ACADEMIC FEES AND PROGRAM EXPENSES

The number of academic credits required each semester for the program is specified by the DMS curriculum. The cost of tuition is determined by multiplying the number of credit hours by the current tuition rate. Tuition is a combined contingent, student service and instructional facilities fee. The combined contingent and academic facilities fees are used to help meet the cost of instruction, construction and maintenance of buildings, and library and laboratory resources. The student services fee provides student programs and other selected personal and cultural development activities. Other fees such as laboratory, late registration, change of schedule, transportation/parking, distance education, university services, student activity fee, and medical malpractice are special fees paid in addition to tuition fees. For a complete listing and description of fees and expenses, the student is directed to the current University Bulletin or can be found on the Office of Bursar's website: <https://www.usi.edu/bursar/tuition-fees>. It is noted that published charges are subject to change by action of the Board of Trustees. Students may inquire as to current rates at registration.

Additional costs incurred by students during the program are for textbooks, uniforms, personal identification nameplates, and purchase of online clinical education management

system (Trajecsys). Students will also be required to complete pre-program clinical obligations (drug screening, national criminal background checks, and various immunizations), which is done through an online management company (CastleBranch) for a fee. Textbooks required for each course are available in the University Bookstore at the beginning of each semester. Uniforms may be purchased anywhere provided they meet the requirements established by the DMS program (see Uniforms). Nameplates are available for a minimal fee from the University Bookstore/Eagles Access. Fees associated with the Program and not found on the Admissions webpage are (subject to change):

Clinical management system (Trajecsys): \$150 onetime fee in Fall semester
Castle Branch: \$130 onetime fee prior to starting professional courses

from applying to the requirements of a particular degree program and is subject to review by the department chair of the student's major.

The University does have various established articulation agreements with community or junior colleges in Illinois and Kentucky and one in Indiana:

- Illinois: Black Hawk College, Carl Sandburg College, City Colleges of Chicago (Harold Washington College, Harry S Truman College, Kennedy-King College,

WEATHER/EMERGENCY CLOSING

University functions are rarely cancelled due to weather or emergencies. Even in severe weather heavy snowfall, ice storms, and extreme cold @1 A: 51-52 ? -/-019 5 <3 3> 9?

; >35 ?1DA-8 >5: @5: ; >B1@>: ?@A? &45 <; 5/E 5 5 -//; >0-: /1 C 54 @1' : 51>5E ?
Student Rights and Responsibilities policy on discrimination.

PROCEDURE: Recruitment, admissions, and all other ongoing operations of the DMS program are conducted in accordance with this policy. Nondiscrimination is supported institutionally by USI and its clinical affiliates.

Any student who believes s/he is being discriminated against or harassed should bring the complaint first to the immediate attention of the program chair. If the complaint is not satisfactorily resolved at the program level, the student may discuss the matter with the Dean of the CNHP, a counselor in the Counseling Center, or with the Affirmative Action Officer. Following this action, the student may discuss the matter with the Dean of Students or the Vice President for Academic Affairs. If no resolution is found through informal methods, the

PROGRAM ADMISSION

POLICY: An Admissions Committee shall select qualified applicants for admission to the DMS program based on academic achievement, academic preparation, and personal qualifications.

disabilities to determine whether there are ways that we can assist the student toward completion of the tasks.

Motor Skills

Ability to independently manipulate and guide weights up to 50 pounds

Ability to move about freely and maneuver in small spaces

Tolerate regular changes of physical position, both stationary and mobile, for extended (8-12-hour shift) periods of time

Possess skills to independently handle and operate a range of items, devices, or equipment

Maintain a stable physical position

Agility to respond in an emergency situation

Communication Skills

Process, comprehend and communicate information effectively, clearly, in a timely manner, in the English language, and with individuals from various social, emotional,

course, laboratory course, or clinical education course is not eligible to reapply to the DMS program at USI.

VACATIONS/HOLIDAYS

POLICY: Students are granted holidays and time off in accordance with the university calendar. The program will not grant vacations or clinical schedule changes for purposes of vacations during times when classes or clinical are scheduled.

PROCEDURE: Student holidays are indicated on the official university calendar each year. On holidays, no academic or clinical classes are conducted. Academic classes will follow the university calendar and will begin the first day of each semester and end with the last day of the final week of the semester. No clinical education is scheduled during final examination weeks of the fall and spring semesters unless makeup time is required. Students should schedule vacation time for only the scheduled breaks between semesters. The program will not grant vacation leaves or give excused absences for student vacations (including weddings, honeymoons, etc.) while didactic or clinical courses are in session. If a student elects not to attend academic or clinical classes all program policies (attendance, testing, etc.) will be followed.

BEREAVEMENT

POLICY: Students may be granted a limited excused absence for bereavement. Students granted an excused absence for bereavement shall be responsible for all academic content (lectures, quizzes, exams, laboratory competencies) and clinical time requirements missed during the absence. Clinical time may be subject to make-up if the student has used the two allotted personal days.

PROCEDURE: Students who suffer the loss of a close family member (parent, spouse, child, brother, sister, mother or father-in-law, or other member of the family residing in the immediate household) may request an excused absence for bereavement by contacting the program chair and clinical coordinator. Immediately upon notification, three consecutive days of academic and/or clinical time will be excused. If the loss involves other members of the family (grandparents, uncles, aunts, nieces, nephews, and in-law relatives) a one-day excused absence is granted. Any outstanding academic assignments, tests, and clinical time must be rectified during the semester missed. Students requiring an extension of absence should contact the program chair.

JURY DUTY/WITNESS

POLICY: Students shall be allowed didactic and clinical absences for jury duty or witness. All academic content and clinical requirements missed during the absence must be fulfilled prior to the assignment of a final course grade.

PROCEDURE: Immediately upon receipt of notice of jury duty or subpoena to serve as a witness, the student must inform the program director and clinical coordinator. The student must provide a copy of the official notification of jury duty service or subpoena. Depending on the length of time involved, clinical activity missed, and requirements specified for successful completion of the affected course, makeup of clinical time may be necessary. All academic

assignments and missed tests must be made up. In court cases where a student appears as a plaintiff or defendant for personal matters, the student can receive an excused absence if documentation of the court appearance is provided. A student attending court as a plaintiff or defendant for personal matters must make up missed time.

SHORT TERM LEAVE OF ABSENCE

PROCEDURE: The student will follow established program application guidelines as outlined in the Admission Policy. In order to meet ARDMS examination eligibility guidelines of continuous academic and clinical course work, a student who is readmitted must repeat all previously attempted DMS, DVT or ECHO professional course work regardless of grade.

PROGRAM COMPLETION TIME

POLICY: The total time that is allowed for successful completion of the DMS curriculum should not exceed 40 consecutive months.

PROCEDURE: Students start the DMS program at the beginning of the Spring semester following acceptance into the program. Students following the established curriculum are expected to finish the program as scheduled in 28 months. When students take extended leave of absence, blixended

comment. A random selection is used to determine the representative and alternate. If both representatives become unable to serve, the selection process may be repeated as necessary.

DISCIPLINARY ACTIONS

POLICY: Students who violate established policy or procedure of the program, university, or clinical affiliate shall be subject to disciplinary action.

PROCEDURE: Disciplinary action involves the utilization of written notice or dismissal from the program. Each infraction is progressive. In addition, every written notification and subsequent program. Each disciplinary action written notice will result in a five percent deduction of the associated final course grade. The following outlines the sequence in which disciplinary action will be utilized.

1. First infraction-student receives a disciplinary action written notice.
2. Second infraction-student receives a disciplinary action written notice and a Performance Improvement Plan (PIP).
3. Third infraction-student receives a disciplinary action written notice and may be dismissed from the program.

A student who commits a major infraction of institutional, facility, or departmental policy and procedure of such magnitude that causes an immediate physical injury or results in placing another individual in immediate emotional jeopardy shall be immediately removed from all clinical assignments until such time as the incident can be reviewed by the DMS Disciplinary Committee and a decision of resolution or dismissal can be made.

In addition, a student suspected of academic dishonesty, Scope of Practice violation, or HIPAA violation may be removed from the clinical assignment until the incident can be reviewed by the DMS Disciplinary Committee and a decision of resolution or dismissal can be made.

DMS Disciplinary Committee & Program Dismissal Action

Dismissal actions will be implemented upon recommendation of the Disciplinary Committee. The Disciplinary Committee is comprised of the DMS Program Chair, DMS Clinical Coordinator, DMS faculty members and a chair from another clinical program in the USI CNHP. In addition, if the violation involves clinical education, the Clinical Instructor and/or a representative of the imaging department administration may participate on the committee.

The Disciplinary Committee conducts a hearing to determine the proper course of action. The student is given written advanced notice of the date and time of the hearing. The hearing is /; : OA/@OC 54; >C 54; A@@1 ?@A01: @? <- >5/5- 5: A counselor from the USI Counseling ° 1: @>9 -E - 8; -//; 9 <-: E @1 ?@A01: @ @@1 ?@A01: @? >1=A1?@Afterward, the student is 5 2 >9 10 5 C >5 3; 2@1 /; 9 9 5@1 ? >1/; 9 9 1: 0- 5: ?-: 0 >1?A8@: @<> 3>9 -/5: If DMS program dismissal action is recommended, the student is required to withdraw immediately from all DMS courses. Any student dismissed from the DMS program will not be eligible to apply for readmission to the USI DMS program at any time.

East. Information regarding fundraising can be found at: <https://www.usi.edu/campus-life/student-organizations/policiesforms/fundraising-sales-and-solicitation>.

CONFIDENTIALITY

POLICY: Students shall respect and uphold confidentiality of information relating to patients and computer information systems at all affiliated clinical education centers.

PROCEDURE: Prior to the start of clinical education, all students read and sign a *Confidentiality Statement* as well as a *Workforce Member Review of HIPAA Policies* document. This statement explains the importance of confidentiality and defines the standards to be observed by students. Each student must pass an exam on the Health Insurance Portability and Accountability Act (HIPAA).

SOCIAL MEDIA POLICY

The use of social media has grown exponentially in the last decade and continues to reshape how society communicates and shares information. Social media can have many positive uses in health care; it can be used to establish professional connections, share best practices in providing evidenced based care, and educate professionals and patients. However, confidentiality, whether done intentionally or not. Health professionals, including students in health profession disciplines, have a legal and ethical obligation to protect the privacy and improper disclosure of this information, in any form, violates state and federal law and may result in civil and criminal penalties. Health professionals, including students in health care confidentiality at all times.

Postings on social media sites must never be considered private, regardless of privacy settings. Any social media communication or post has the potential to become accessible to people outside of the intended audience and must be considered public. Once posted, the individual who posted the information has no control over how the information will be used. Students should never assume information is private or will not be shared with an unintended audience. Search engines can find posts, even when deleted, years after the original post. Never assume that deleted information is no longer available.

Students need to review the entire social media policy and sanctions found within the CHNP

[and book when the link is placed on the book](#)

recording or communication device, such as cellular telephone, Internet appliance, digital camera, audio recorder, or personal digital assistant will be considered cheating regardless of intent. Transmission of assessment material to other students, course faculty or posted on any platform will be considered cheating. Additionally, soliciting and receiving didactic program examination and/or assessment information that uses language that is substantially similar to that used in questions and/or answers on examinations or assessments from another student, whether requested or not; and/or having unauthorized possession of any portion of or information concerning a future, current, or previously administered program examinations or assessment; and/or possessing unauthorized materials; and/or conduct that in any way compromises the integrity of USI education requirements, including, but not limited to, didactic instruction, clinical experience and competency requirements; and/or sharing answers to examination or assessment activities; and/or submitting clinical procedures that were not performed will be considered cheating regardless of intent. Students receiving assessment information as described above that was not solicited and is not reported to program officials immediately are also subject to academic integrity sanctions for cheating.

For online testing, Blackboard can sometimes be interrupted for a variety of reasons resulting in a testing session being interrupted or ended completely. It is highly recommended that students utilize a wired internet connection for testing through Blackboard. All programs on

documentation to verify that the absence was valid. All excused absences must be approved by the course instructor. Each unexcused absence will result in a 2% deduction from the final course grade. Continued excessive tardiness/absences in any class could lead to disciplinary action. It is the student's responsibility to get notes and any pertinent course materials, check Blackboard, and see the instructor for any distributed class materials.

TEST ATTENDANCE/MAKE-UP

POLICY: Students shall be present on scheduled test days. Make-up tests may be a different form of the exam and shall be administered only to qualified absentees.

PROCEDURE: Although prompt attendance is expected on all class days, attendance on test days is essential. It is the student's responsibility to be aware of these dates, prepare for them, and be present. If ANY circumstance prevents a student from attending on a test day, the student is REQUIRED to call in and report the absence in advance.

Make-up tests are allowed under the following conditions:

1. The student MUST notify the course instructor in advance of the absence to qualify for make-up privileges.
2. Only one opportunity for make-up is permitted. If a student is not present for an assigned make-up, no further opportunities will be scheduled.
3. Make-up tests are scheduled at the convenience of the instructor.
4. Make-up tests are completed within one week of the originally scheduled date.

Failure to complete a make-up test as specified above will result in the loss of ALL CREDIT for that test. If extraordinary circumstances make it impossible for a student to call and the absence can be justified in writing, a make-up may be arranged at the discretion of the instructor.

ACADEMIC GRADING

POLICY: All DMS academic and clinical course grades shall be determined according to a fixed percentage scale.

PROCEDURE: In each DMS academic and clinical course, students accumulate points during the semester through scores obtained on a variety of course requirements including but not limited to tests, quizzes, assignments, examination competencies, evaluations. The number of points achieved by each student is converted to a percentage of the total points possible for the course. Grades are assigned according to the following scale:

100-94%	A	84-82%	C+	74-70%	D
93-91%	B+	81-75%	C	69-0 %	F
90-85%	B				

In order to continue in the program, all DMS courses must be completed with at least C (75% or higher) level grades.

STUDENT SCAN LAB MODELS

POLICY: Student grades, evaluations, and program status are not affected by participation or non-participation as a scanning model in a laboratory setting.

PROPOSED PURPOSE: During the 2020-2021 academic year, currently enrolled DMS students (ECHO 398 and ECHO 423), currently enrolled DMS students have the option to participate as a scan lab model/volunteer for other DMS students. Participation as a scan lab model/volunteer for other DMS students. Participation as a scan lab model/volunteer for other DMS students.

The USI DMS majors will be required to purchase their official program uniforms. The uniforms must be red scrub pants and a red scrub top that can be purchased from any uniform store. Shoes must have a closed toe and heel. Athletic shoes (acceptable coloring regulated by individual clinical site) are appropriate. Leather shoes are strongly recommended. Solid color socks should be worn at all times. A plain red or white lab coat can be worn if USI student identification nameplate is placed on the lab coat and visible to patients, faculty, and staff. A black fleece jacket with the USI DMS logo may also be worn.

Inappropriate attire includes oversized or undersized uniforms, sleeveless, backless, or halter-tops or any top that exposes the midriff while bending, sitting, or lifting arms. Undergarments must not be visible but must be worn at all times. All attire must be clean, neat, free from pet hair, in good taste, and in good condition. If a student does not meet dress code, the student will be required to leave the cli4()4(n)4(ot)4(me)10(e)-3(t)5000nv-4().04 52(s)-G4(MS i3(facul)s.)-3(-3()4 ().)6(da(s

PROCEDURE: An appropriate professional appearance involves more than a clean uniform.

failing or refusal to work/communicate with classmates or clinical personnel, displaying rude or discourteous behavior, violating HIPAA, gambling, inappropriate use of technological devices, excessive absenteeism, abandonment of clinical assignment, inattention or carelessness of clinical responsibilities (including sleeping during clinical assignment) and other misconduct as deemed by program administration or clinical affiliates.

CLINICAL ATTENDANCE

so accommodations and absence allowances can be reviewed. When a student does not attend clinical and has utilized their two personal days (16 hours), third and subsequent absences will need to be made up on predetermined clinical makeup days (example: Spring Break, finals week, and holidays which the university is not holding classes but is still open).
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days when the university is closed. Students must obtain approval from the Clinical Coordinator as well as the Clinical Instructor at least 24 hours prior to each makeup day. Whenever possible, makeup hours are assigned in the same facility

FIT FOR WORK

POLICY: Students are considered fit-for-work when they are free from fatigue, stress, or adverse medical conditions. In addition, students are expected to be free from the effects of alcohol, illicit drugs, or prescribed medication that hinders performance. Being fit for work ensures the health, safety and welfare of the student, the patients they take care of and others.

PROCEDURE: The clear expectation is that all students will arrive for and return to clinical in a competent state and are not affected by drugs and/or alcohol during clinical practice. Drug and/or alcohol policies of the University are to be followed.

This policy shall also be applied in situations when a student is restricted in the performance of their regular duties due to personal injury, illness, or medical condition. Students after injury or illness may return to clinical when free from restrictions. Students that have been injured and seen by a physician can return to clinical practice upon submission of a signed *Statement of Medical Clearance* statement without major restrictions. Students should review the *Essential functions of a Diagnostic Medical Sonographer* policy to ensure they are able to perform the essential functions, with or without reasonable accommodation, when returning to clinical education.

CLINICAL EXAM LOGS

POLICY: All students shall maintain accurate and current clinical exam logs on the clinical management system, Trajecsys. Records indicating the number and type of diagnostic medical examinations performed by the student, the examination findings, the extent of student supervision, and the level of involvement of the student in scanning/performance must be maintained.

every exam observed, assisted, or performed at the clinical site detailing pathology present and supervising sonographer. Students may log exams during clinical time. Exams must be logged within 24 hours of the corresponding clinical day. Failure to keep accurate and current clinical exam logs will result in removal of the student from the clinical site until clinical exam logs are current (see Absence from Clinical Education) and issuance of a disciplinary action written notice on the second and subsequent infractions. Any missed clinical time may be subject to makeup.

LUNCHTIME ALLOWANCE

POLICY: Student lunch allowance shall be scheduled in accordance with departmental policy of the assigned affiliate.

PROCEDURE: Every eight-hour clinical day will include one thirty-minute lunch break. The actual time of day when lunch occurs will vary between affiliates. Students will not be denied lunchtime allowance.

their lunchtime in order to participate in or observe some procedure of interest. Students who fail to take lunchtime WILL NOT be allowed to leave early at the end of the day as compensation for passing on their lunchtime allowance.

CLINICAL EVALUATIONS

POLICY: Students shall be evaluated on overall clinical performance at least four times per semester.

PROCEDURE: A supervising sonographer evaluates students on overall performance. Over the course of a semester, evaluations/assessments may be obtained from different sonographers, not just the clinical instructor. These evaluations/assessments provide information that aids the clinical coordinator in determining appropriate ratings for the final clinical grade.

Students should consider the clinical evaluations/assessments constructive in nature, as they are intended to keep students continually aware of both strengths and weaknesses as perceived by supervising sonographers. These evaluations/assessments help the individual make necessary changes or improvements prior to semester or program completion.

DOCUMENTATION

- B. Achieve and maintain specialty specific sonography credentials. Sonography credentials must be awarded by a national sonography credentialing body that is accredited by a national organization which accredits credentialing bodies, i.e., the National Commission for Certifying Agencies (NCCA) or the International Organization for Standardization (ISO).
- C. Uphold professional standards by adhering to defined technical protocols and diagnostic criteria established by peer review.
- D. Acknowledge personal and legal limits, practice within the defined scope of practice, and assume responsibility for his/her actions.
- E. Maintain continued competence through lifelong learning, which includes continuing education, acquisition of specialty specific credentials and recredentialing.
- F. Perform medically indicated ultrasound studies, ordered by a licensed physician or their designated health care provider.
- G. Protect patients and/or study subjects by adhering to oversight and approval of investigational procedures, including documented informed consent.
- H. Refrain from the use of any substances that may alter judgment or skill and thereby compromise patient care.
- I. Be accountable and participate in regular assessment and review of equipment, procedures, protocols, and results. This can be accomplished through facility accreditation.

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

- A. Be truthful and promote appropriate communications with patients and colleagues.
- B. Respect the rights of patients, colleagues, and yourself.
- C. Avoid conflicts of interest and situations that exploit others or misrepresent information.
- D. Accurately represent his/her experience, education, and credentialing.
- E. Promote equitable access to care.
- F. Collaborate with professional colleagues to create an environment that promotes communication and respect.
- G. Communicate and collaborate with others to promote ethical practice.
- H. Engage in ethical billing practices.
- I. Engage only in legal arrangements in the medical industry.
- J. Report deviations from the Code of Ethics to institutional leadership for internal sanctions, local intervention and/or criminal prosecution. The Code of Ethics can serve as a valuable tool to develop local policies and procedures.