

A Catholic hospital sponsored by The Sisters of Charity of St. Augustine

School of Diagnostic Medical Sonography Policy & Procedure Manual

### Policies of Cleveland Clinic Mercy Hospital School of Diagnostic Medical Sonography

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#### RELEVENT CLEVELAND CLINIC POLICIES- found here:

http://portals.ccf.org/alliedhealthed/Document-Library-Guidelines-and-Procedures

Criminal Records Background check policy
Disability Accommodation in Education Policy

Disability Accommodation in Education Folicy

Equal Employment Opportunity/Workforce Diversity and Inclusion

**Identification Badges Policy** 

**General Information Security Policy** 

Non-Discrimination, Harassment or Retaliation Policy

Non-Employee Bloodborne Pathogen Exposure Standard Operating Procedure

Non-Employee Visitation and Onboarding Standard Operating Procedure

**Non-Smoking Policy** 

Parking Services - Parking Enforcement Standard Operating Procedure

**Professional Conduct Policy** 

Social Media Use Policy

Student Anti-Hazing Policy

STUDENT APPEAL PROCESS

STUDENT GRIEVANCE PROCEDURE

**Student Immunization Policy** 

Telephone and Cellular Phone Use Policy

Weapons and Contraband Policy

Office of Educational Equity

EduEquity@ccf.org

216-317-6494

Main Campus, JJS4-618

Mail Code JJ40

Title IX Office

TitleIX@ccf.org

216-317-6494

Main Campus, JJS4-618

Mail Code JJ40

#### **Cleveland Clinic Mission**

Caring for life, researching for health, educating those who serve.

### **Cleveland Clinic Vision**

Our vision for Cleveland Clinic is to be the best place for care anywhere and the best place to work in healthcare.



# Mission Statement of Cleveland Clinic Mercy Hospital, School of Diagnostic Medical Sonography

The School of Diagnostic Medical Sonography at Cleveland Clinic Mercy Hospital strives to prepare the student for an entry-level position in the field of Ultrasound as a Sonographer. The graduating student is eligible to apply for the exam given by the American Registry of Diagnostic Medical Sonography. The school strives to prepare competent entry-level abdominal, OB and gyn sonographers in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains. The school strives to ensure that our graduates are prepared to assume responsible positions on the healthcare team and continue Christ's healing ministry by providing quality, compassionate, affordable and accessible care for the whole person.

#### **Program Goals & Objectives**

- 1. Prepare competent entry-level abdominal, obstetric and gynecologic sonographers in cognitive (knowledge), psychomotor (skills) and affective (behavior) learning domains.
- 2. Upon graduation the student shall be able to:
  - 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 diagnostic services;
  - Demonstrate appropriate communication skills with patients and colleagues;
  - Act in a professional and ethical manner
  - Facilitate communication and education to elicit patient cooperation and understanding of expectations, and responds to questions regarding sonographic examination.
    - Adapted from CAAHEP Standards & Guidelines 2020

### **Technical Standards for Sonography Students**

#### Skills:

- Organizational
- Verbal
- Interpersonal
- Customer Relations
- Mathematical
- Analytical
- Read/Comprehend written instructions
- Ability to receive and respond to instructions in clinical settings

#### Mental and Emotional Requirements:

- Manage stress appropriately
- Make decisions under pressure
- Handle multiple priorities
- Work in areas that are confined and/or crowded

#### **Physical Requirements:**

**MEDIUM WORK:** Exert up to 50-lbs. force occasionally, and/or up to 20 lbs. frequently, and/or up to 10 lbs. constantly

- Ability to perform work in a stationary position for extended periods
- Ability to travel through the hospital system
- Ability to perform repetitive tasks/motions
- Ability to distinguish colors
- Ability to detect anatomy and pathology on the ultrasound screen
- Ability to respond to alarms, telephone, normal speaking voice
- Ability to operate sonography equipment

#### ACCREDITATION AND SPONSORSHIP

The School of Diagnostic Medical Sonography is sponsored by:
Cleveland Clinic Mercy Hospital
1320 MERCY DRIVE, NW
CANTON, OHIO 44708

Bruce Stefancik, CRA, RT(R)
Administrative Director of Radiology
330-489-1070

Cleveland Clinic Mercy Hospital is Joint Commission accredited

The Joint Commission One Renaissance Blvd. Oakbrook Terrace, IL 60181 Phone: 630-792-5000

Web site www isinteemmission

Web site: www.jointcommission.org

Christine Gialousis, M.Ed., RT (R) (M) (CT) (MR), MRSO (MRSC<sup>TM</sup>)
Program Director of the School of Radiography
Cleveland Clinic Mercy Hospital

School of Radiography is JRC-ERT accredited

JRCERT
20 N. Wacker Drive, Suite 900
Chicago, IL 60606-2901
Web site: www.JRCERT.org

Susan Bielanski, BS, RDMS
Program Director of the School of Diagnostic Medical Sonography

The Ultrasound Department is <u>ACR accredited</u>

ACR

1891 Preston White Drive Reston, VA 20191-4397 Phone- (703) 648-8900 Web site: www.acr.org

The School of Diagnostic Medical Sonography is **CAAHEP** accredited

CAAHEP

9355 - 113th St. N, #7709 Seminole, FL 33775 P:727-210-2350 F:727-210-2354

E: mail@caahep.org
Web site- www.caahep.org

#### SPONSOR'S RESPONSIBILITIES

The following goals have been set out by management of Cleveland Clinic Mercy Hospital and approved by the Board of Trustees as a guide to orderly growth, development, and improvement of health services provided by Cleveland Clinic Mercy Hospital.

The goals exist because of our belief and commitment to the concept that Cleveland Clinic Mercy Hospital exists to insure a healthier community both in body and mind. This concept encompasses a responsibility to require the students and faculty to be of good moral character and use sound judgment and professional ethics in all facets of their work while attending this institution. Furthermore, students and faculty must realize that their behavior outside of this hospital will also reflect the values of this hospital and the school.

Cleveland Clinic Mercy Hospital shall develop, operate, manage, and conduct medical education programs; including, but not limited to, undergraduate and post-graduate programs for students and physicians.

## DESCRIPTION OF PROFESSION From CAAHEP Standards & Guidelines 2020

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

The diagnostic medical sonographer functions as a delegated agent of the physician and does not practice independently.

Diagnostic medical sonographers are committed to enhanced patient care and continuous quality improvement that increases knowledge and technical competence. Diagnostic medical sonographers use independent, professional and ethical judgment, and critical thinking to safely perform diagnostic sonographic procedures.

The sonographer is generally 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 diagnostic services;
- Demonstrate appropriate communication skills with patients and colleagues;
- Act in a professional and ethical manner
- Facilitate communication and education to elicit patient cooperation and understanding of expectations, and responds to questions regarding sonographic examination.

#### PROGRAM DESCRIPTION

The School of Diagnostic Medical Sonography at Cleveland Clinic Mercy Hospital offers a 12-month, CAAHEP accredited program which qualifies the graduate, to apply for the ARDMS abdomen and ob/gyn examinations.

Full time enrollment consists of up to forty (40) hours per week attendance. Students attend 7:00am-3:30pm Monday through Friday. This includes both classroom and clinical experience. Part time enrollment and distance education are not available.

#### PROGRAM ORGANIZATION

The School of Diagnostic Medical Sonography at Cleveland Clinic Mercy Hospital is directed in consultation with the Medical Director. The Program Director has line authority from and accountability to the Radiology Department through the Administrative Director, Radiology Services and The Radiology Schools Manager.

An Advisory Committee is organized for the purpose of establishing policies and giving general direction. The Committee insures that all persons involved in and affected by the program are fairly represented in all major decisions.

#### **GENERAL INSTRUCTIONAL FACILITIES**

All instructional facilities for the School of Diagnostic Medical Sonography are on the campus of Cleveland Clinic Mercy Hospital. The students are not required to commute to other locations for any portion of their classroom instruction.

#### **CLASSROOM**

The MRI conference room is used for most classes. Other conference rooms are located throughout the hospital and may be used occasionally. All rooms seat 10 students easily.

#### **OFFICES**

The Program Director's office is located within the Ultrasound Department. Other faculty not having private offices can use the Program Director's office for their own planning, research, counseling, etc. as needed.

#### **CLINICAL FACILITIES**

The School of Diagnostic Medical Sonography uses the facilities of the Ultrasound Department at Cleveland Clinic Mercy Hospital. The Department equipment consists of Acuson Sequoia units.

Quality Assurance is performed on all equipment on a regular basis by staff, service technicians and the medical physicist.

#### LABORATORY FACILITIES

General Ultrasound rooms in the department are used by students and faculty to conduct experiments and to practice ultrasound procedures. The students are provided with scan lab experience for most exams before they attempt them in the Ultrasound Department on patients.

#### LIBRARY FACILITIES

The technical library for the School of Diagnostic Medical Sonography is located in the Program Director's Office. There are also books for reference kept in the Ultrasound department.

Students and staff may borrow books from the Medical Library as well. The Medical Library keeps Ultrasound resources on reference and in circulation. The Medical Library is accessible by badge swipe system 24-hours a day, 7 days a week. There are several computers available there with internet access.

Students may also take advantage of "Ohio Link" through the medical library in order to obtain texts and other resources that may not be available in our own Medical Library.

POLICY:			POLICY NUMBER:
Competency-based Criteria			3.111
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:
NOV. 1, 1999	May, 2000 Oct., 2000	Advisory Committee	S.Black, R.D.M.S.

Minimum acceptable levels of performance have been established for clinical education. These address both quantitative and qualitative standards.

#### QUANTITATIVE:

Minimum numbers and types of procedures are required for each quarterly grading period. Completion of these competencies is necessary to receive a passing grade. The student must successfully complete a minimum of 2 similar, "practice" exams with the clinical instructor, program director or their designee prior to receiving a competency in an exam.

All failed competency forms must be turned in to the program director. After 3 failed attempts at competency, the student will be given additional lab instruction/clinical assistance before another attempt for that competency can be made. Two additional "signed practices" must be documented prior to re- attempting that exam for a competency.

#### QUALITATIVE:

Minimum acceptable performance standards for procedures have been established. In order to be considered competent in performing the procedure, the student must receive an 80% or higher grade. This is the minimum acceptable standard.

TITLE:			POLICY NUMBER:
Required Clinical Competencies & Lab Assessments			3.112
EFFECTIVE DATE:  November, 1999	REVISED:  May, 2000  April 2008  April 2009  October 2015  May 2016  Feb 2021	AUTHORIZED BY: Advisory Committee	PREPARED BY: S. Bielanski, BS, RDMS

During the 12-month education, the student must prove to be competent in performing the some of the following procedures and have knowledge of the following equipment:

Achilles tendon\*

Aorta Equipment Comps:

Liver

Gallbladder/biliary Sequoia
Pancreas Doppler
Renals 3D\*

Spleen Pelvis

Transvaginal

Breast Bladder

Abdomen Limited
Abdomen Complete

OB 1<sup>st</sup>, 2<sup>nd</sup> and 3<sup>rd</sup> trimester

**Biophysical profiles** 

Thorax Thyroid Testicle

Abdomen Doppler

Knee

GI/Appendix\*

Lesions

Biopsy/Needle procedure

3D imaging

ARFI

**Pylorus** 

Renal Doppler\*

Mesenteric Doppler\*

Non-cardiac chest

<sup>\*=</sup>lab assessment

TITLE:			POLICY NUMBER:
Competency & L	ab Assessment time limi	t policy	3.113
EFFECTIVE DATE:	REVISED: October 2015	AUTHORIZED BY:	PREPARED BY:
October 4, 2010	May 2016 Feb 2021	Advisory Committee	S. Bielanski, BS, RDMS

In order to ensure that patients receive care in a timely manner and that students are given an adequate amount of time to complete a competency exam, a time limit will be placed on the competency.

The student will be given 50% of time over the appointment time.

For exams scheduled as a 30-minute appointment, the student will be given 45 minutes of scan time to complete the competency.

For 60 minute exams the student will be given 90 minutes to complete the competency.

If the student does NOT complete the exam in the allotted time, it will be considered an automatic failure.

#### 30 minute exams include:

gallbladder	liver	pancreas	spleen	renals
aorta	pelvis	transvaginal	BPP	thyroid
testicles	breast	knee	lesion/mass	fetal position
OB targeted	ARFI	1 <sup>st</sup> trimester OB	ABD limited/RU	Q
Bladder	GI/Appendix	non-cardiac chest		

#### 60 minute exams include:

Fetal Age (2 <sup>nd</sup> ar	id 3 <sup>rd</sup> trimester OB)	ABD complete	ABD Doppler
Renal Doppler	Mesenteric Doppler		

Biopsy/Needle Procedure competencies have no time limit, as it is mainly dependent upon the Radiologist and patient condition.

TITLE:			POLICY NUMBER:
Proof of Competency in Performing Procedures			3.12
EFFECTIVE DATE:			PREPARED BY:
November 1999	May 2000 r 1999 April 2008 Advisory Committee		S.Black R.D.M.S.

Under no circumstances will any student be permitted to perform any procedure without immediate supervision prior to being evaluated for competency for that procedure. Competency checks will be performed by a registered staff sonographer or the Program Director. Any competencies given by a "registry ready" sonographer must be performed under supervision of, checked and undersigned by the program director.

Competencies and lab assessments may only be performed during normally scheduled clinical hours. (No afternoons or weekends)

A list shall be posted in the Department indicating all procedures for which a student has been competency checked. This list will be updated on an ongoing basis by the Program Director.

SCHOOL OF DIAGNOSTIC MEDICAL SONOGRAPHY POLICY			
TITLE:			POLICY NUMBER:
Overtime Compe	ensation		3.130
EFFECTIVE DATE:	REVISED: Sept. 2002	AUTHORIZED BY: Advisory Committee	PREPARED BY:
November 1999	May 2000	Advisory committee	S. Black R.D.M.S.
be reviewed on a regular Compensatory/Overting scheduled classes. Compersonal business.  Compensatory time will denial will be based on	vill be documented on the lar basis and the student me time may not be used in pensatory time may be all be granted at the discretices #4.230, #4.231, #4.2	will be advised as to hid to obtain early gradual applied toward sick ting tetion of the Program Dacademic standing, sick	s/her available time.  tion or to miss ne, professional days or  irector. Permission or a time, and class

TITLE:			POLICY NUMBER:
Scheduling - Total Time Allowed			3.131
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:
November,1999	May 2000	Advisory Committee	S. Black R.D.M.S.
(40) hours per week. averaging of variable had not been depicted as a variable had not been depicted a	ours a student spends in This will include classroom ours or weeks will be pent care, a student will be me compensation must be der a different ruling. Ple	m instruction and clinic rmitted. e permitted to remain p be taken according to P	past the normal shift olicy #3.130.

TITLE:  Clinical Rotation Schedules			POLICY NUMBER: 3.132
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:
November, 1999	Feb 2021	Advisory Committee	S. Bielanski, BS, RDMS

The clinical rotation schedules are posted in advance. Every effort is made to assure that all students will have equal opportunity to experience all possible clinical learning situations.

\*NOTE: No changes will be made in the rotation schedule without permission from the Program Director, Clinical Coordinator or designate.

Students that have completed all required clinical competencies for the current quarter may request a rotation through another area for educational purposes. These areas include, but are not limited to:

-radiologist - vascular lab - cardiac lab -ultrasound off-site -radiology - MRI -CT - nuclear medicine - mammography -specials - radiation therapy -ultrasound off-shifts

The program director will coordinate with other areas to schedule the student's rotation and will inform the student of the scheduled time. Allowed time length of each rotation will be based on the student's clinical performance and the educational value of the rotation. Every effort will be made to accommodate reasonable requests.

TITLE:			POLICY NUMBER: 3.133	
Daily Shift Assignments				
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:	
November, 1999		Advisory Committee	S. Black, R.D.M.S.	
Students will be scheduled forty (40) hours a week. This will include weekdays only and will encompass both clinical time and classes.  **NOTE: No changes will be made in the schedule without permission from faculty of the School.				

TITLE:			POLICY NUMBER: 3.14
Distribution of Clinica	l Experience		
EFFECTIVE DATE:  November 1999	REVISED: January 2006 October 2015 Feb 2021	AUTHORIZED BY:  Advisory Committee	PREPARED BY: S. Bielanski, R.D.M.S.

Clinical assignments include the following approximates for types of clinical experience and are subject to change based on student needs:

Abdomen 44.6% Obstetrical/GYN 35.9% Superficial Structures 19.2% MSK 0.3%

TITLE:			POLICY NUMBER:
Validation of Clinical Competency Requirements		3.15	
EFFECTIVE DATE: November, 1999	REVISED: Feb. 2021	AUTHORIZED BY: Advisory Committee	PREPARED BY: S. Bielanski, R.D.M.S.

The required clinical competencies listed in Policy #3.122 will be reviewed annually by the Program Director and appropriate faculty. The following criteria should be used in updating clinical requirements:

- -Availability of Procedures in Ultrasound Department
- -Availability of Clinical Assignments for each Student
- -Difficulty Level of Required Procedures
- -Time Constraints of Training Process
- -Requirements of Potential Employees
- -CAAHEP standards and guidelines

\*NOTE: The Program Director is responsible for conducting external validation studies of the Program and reporting to the advisory committee. The program director may seek advice from other personnel either internally or externally.

TITLE:			POLICY NUMBER:
Clinical Supervisio	n		3.2
EFFECTIVE DATE: November, 1999	REVISED: May 2000 April 2008 Feb 2021 May 24,2023	AUTHORIZED BY: Advisory Committee	PREPARED BY: S. Bielanski, BS, RDMS

A Registered Sonographer shall be present on the premises in the Ultrasound Department at all times for assistance when students are performing exams. This includes exams for which the student has proved competent.

Students must have a Sonographer present when performing an exam for which competency has not been proven.

In order for students to gain confidence and independence, the students may perform a procedure without the sonographer constantly in the room if all of the following exists:

- (1) Student has proven competent to perform exam
- (2) The student is performing a 3<sup>rd</sup> or 4<sup>th</sup> quarter exam
- (3) The registered sonographer is in the room for patient identification prior to beginning the exam.
- (4) A registered sonographer reviews exam/rescans before patient is dismissed and is immediately available if the student requires assistance.

TITLE:  Clinical Coordinator			POLICY NUMBER: 3.3
EFFECTIVE DATE: November, 1999	REVISED: Feb 2021	AUTHORIZED BY: Advisory Committee	PREPARED BY: S. Bielanski, BS, RDMS
	or, School of Diagnostic Nating student performan		

			POLICY NUMBER: 3.41
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:
November, 1999		Advisory Committee	S. Black, R.D.M.S.
	s enrolled in the Prograi		

TITLE:		POLICY NUMBER:	
Attrition Rate			3.42
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:
November, 1999	Feb 2021	Advisory Committee	S. Bielanski, BS, RDMS
on a regular basis to he	will be responsible for coelp identify reasons for a within the Department	ttrition. The Program D	Director also may seek

TITLE:			POLICY NUMBER: 4.11
Didactic Curriculum -	Content		
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:
November, 1999		Advisory Committee	S. Black, R.D.M.S.
	ed for all updated course and members of the fact	<del>-</del>	s. This file is open for
_	shall keep copies of all te o authorized faculty for		ions in a locked file.

TITLE:			POLICY NUMBER: 4.21	
Class Attendance				
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:	
November, 1999	May 2000	Advisory Committee	S. Black, R.D.M.S.	
All scheduled classes m	nust be attended.			
illness. Any exams not	onsibility to arrange for r made up within two day y be made with the Prog	ys of the student's retu		
Classes missed due to u	unexcused absences can	not be made up.		

TITLE:			POLICY NUMBER:
Computation of Grades		4.220	
EFFECTIVE DATE:	REVISED: Feb 2021	AUTHORIZED BY:	PREPARED BY:
November, 1999		Advisory Committee	S. Bielanski, BS, RDMS

Grades are computed on a quarterly basis for each course based upon the following grading system:

```
A (4.0) = Excellent (100%-93%)
B (3.0) = Good (92%-84%)
C (2.0) = Average (83%-75%)
D (1.0) = Poor (74%-69%)
F (0.0) = Failing (68% & below)
I incomplete
```

### **GPA Grading Legend**

A = 4.0	C+ = 2.3
A - = 3.7	C = 2.0
B+ = 3.3	C- = 1.7
B = 3.0	D+ = 1.3
B- = 2.7	D = 1.0

TITLE:			POLICY NUMBER: 4.211
Incomplete Credit			
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:
November, 1999		Advisory Committee	S. Black, R.D.M.S.
completed on time.	y be given at the instruc	tor's discretion if cours	

TITLE:			POLICY NUMBER:
Transfer Credit			4.222
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:
November, 1999	Advisory Committee	S. Black, R.D.M.S.	
To maintain the Program standards of excellence both clinically and academically, transfer credits will not be accepted for courses included in the curriculum for the sonography school.			
No student will be granted "advanced placement".			
No credit is given for work experience.			
*Prerequisites degrees and classes will accepted from appropriately accredited institutions.			

TITLE:				POLICY NUMBER:
Credit Hours				4.223
EFFECTIVE DATE: November, 1999	REVISED: March 2021		AUTHORIZED BY: Advisory Committee	PREPARED BY: S. Bielanski, BS, RDMS
Credit hours are assigne	ed to each co	ourse based	upon the following g	ruidelines:
1.0 credit	= 12 cloc	:k/contact h	nours	
1.0 credit		ical clock h		
Below are the course c	redits requir	ed to comp	olete the program:	
FIRST QUARTER-		Contact Hour	rs Credit Hour	s
July —October Introduction to Ultra	sound	22	1.5	
Abdomen	Souria	58	4.5	
Sectional Anatomy		57.5	4.5	
Lab		32	-	
Clinical I		310.5	4.0	
SECOND QUARTER- October- December				
Gyn/OB 1		28.5	2.0	
Obstetric 2/3		72.5	6.0	
Lab		24	-	
Clinical II		355	4.5	
THIRD QUARTER- January- March				
Suporficial Structures		37	2.0	
Superficial Structures Ultrasound Physics	•	37 75	3.0 6.0	
Lab		12	-	
Registry Review (phy	sics portion)	26	4 <sup>th</sup> quarter	grade
Clinical III		330	4.0	
FOURTH QUARTER- April - June				
Pediatric and Miscell	aneous	50.5	4.0	
	Abd & OB/Gyn)	72 (+physics		
Lab		10	-	
Clinical IV TOTAL		347.5 <b>1920</b>	4.5 <b>54.5</b>	
Course schedule may be subjec	t to change.	1320	<del></del>	

TITLE: Scholastic Standing			POLICY NUMBER: 4.230
EFFECTIVE DATE: November, 1999	REVISED:	AUTHORIZED BY:  Advisory Committee	PREPARED BY: S. Black, R.D.M.S.

Scholastic standing shall be defined by the following criteria:

- (1) Good Standing: The student is progressing in a satisfactory manner, maintaining at least a 2.0 cumulative GPA, and a passing grade for each class offered.
- (2) Academic Probation: The student is not performing satisfactorily.
  - (a) Failure to maintain a 2.0 GPA
  - (b) Failure to pass any course in the curriculum, including clinical
- (3) Disciplinary Probation: The student exhibits unacceptable behavior patterns. Refer to Student Conduct Policy #7.6.

TITLE:			POLICY NUMBER:
Clinical Grades			4.231
<b>EFFECTIVE DATE:</b> November, 1999	REVISED: June 12, 2001 Feb 2021	AUTHORIZED BY:  Advisory Committee	PREPARED BY:  S. Bielanski, BS, RDMS

The student is expected to complete the required competencies and lab assessments by the end of the clinical quarter. Satisfactory levels of clinical performance must be maintained throughout the four (4) quarters to remain in good standing.

Clinical grade is computed as an average of all pass and failed clinical competencies and lab assessments +/- any merits or demerits for that quarter.

The clinical grade is based on the merit/demerit system (policy #7.6). the clinical grading scale is as follows:

100- 93%- A 92-84%- B 83-75%- C 74-69%- D Below 68%- F

Clinical performance is reviewed quarterly. Any student performing below minimum standards shall be placed on probation. Refer to Policy #4.230, Section (2).

TITLE:			POLICY NUMBER: 4.232
Course Failure			202
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:
November, 1999		Advisory Committee	S. Black, R.D.M.S.
In the event a student	fails a course, either clin	ical or didactic, the foll	owing will occur:
	aced on probation for th arter, all courses must be		

TITLE:	POLICY NUMBER:		
Academic or Clinical Probation			4.24
EFFECTIVE DATE:	REVISED: May 2000	AUTHORIZED BY:	PREPARED BY:
November, 1999	Feb 2021	Advisory Committee	S. Bielanski, BS, RDMS

Any student not maintaining at least the minimum acceptable grade average in both didactic and or in the clinical will be placed on probation.

Probationary period is defined as three (3) months in length. At the end of the probation, the student will be re-evaluated to determine whether sufficient progress has been made to prevent dismissal.

Any student having more than one probationary period during training will be automatically terminated.

Probationary status at the end of the fourth quarter will disqualify a student from graduating/graduating on time.

The Advisory Committee reserves the right to place any student on probation who does not meet requirements of the hospital either didactically or clinically.

Minimum acceptable course grade is a C. although D's are given they are considered unsatisfactory and will lead to probationary status.

roller						
TITLE:			POLICY NUMBER: 4.3			
Class Schedules						
EFFECTIVE DATE: November, 1999	REVISED: October 2015 Feb 2021	AUTHORIZED BY: Advisory Committee	PREPARED BY: S. Bielanski, BS, RDMS			
students at orientation	ule shall be planned in a .les will be posted at lea					
Clinical rotation scriedt	nes will be posted at lea	st one month in advant	e.			
•	les for tests and assignm e student's responsibilit	_				
	eduled on weekends, events requesting days off what the Instructor.		=			

TITLE:	POLICY NUMBER:		
Graduation Requirements			4.4
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:
	April 2008	Advisory	S. Bielanski, BS, RDMS
November, 1999	Mar 2005	Committee	
	Feb 2021		

In order to be eligible for graduation, the student must

- Satisfactorily complete all clinical requirements (Policy #3.112)
- Maintain a satisfactory GPA clinically (Policy #4.231)
- Maintain a satisfactory GPA didactically (Policy #4.232)
- 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 diagnostic services;
- Demonstrate appropriate communication skills with patients and colleagues;
- Act in a professional and ethical manner
- Facilitates communication and education to elicit patient cooperation and understanding of expectations and responds to questions regarding sonographic examination.
- Demonstrate an understanding of ultrasound physics and can identify and correct the causes of artifacts
- Complete 12 months of clinical and didactic education
- Complete all make up time over 40 hours
- Have all costs to the program paid in full

TITLE:			POLICY NUMBER: 5.11
Budget Process			
EFFECTIVE DATE: Nov. 1999	REVISED: Feb 2021	AUTHORIZED BY: Advisory Committee	PREPARED BY: S. Bielanski, BS, RDMS
through the regular bu	the School of Diagnostic dget process of the hosp eds to the Radiology Adn	   Medical Sonography sh   Dital. The Program Dire	

TITLE:				POLICY NUMBER:	
Fees to	Students			5.22	
EFFECTIVE DATE		REVISED: April 2008	AUTHORIZED BY:	PREPARED BY:	
Nov. 19	99		Advisory Committee	S. Black, R.D.M.S.	
Student fees	shall incl	ude the following:			
(a)	Applica	tion fee (Policy #7.21)			
(b)	Tuition	(Policy #7.22)			

POLICY:	POLICY NUMBER:		
Collection of Tuition	on		5.23
EFFECTIVE DATE: Nov. 1999	REVISED: February 2004 October 2015	AUTHORIZED BY: Advisory Committee	PREPARED BY: S. Black, R.D.M.S.

The collection of tuition shall be as follows:

- (1) Upon acceptance, the student must pay a \$100.00 of the tuition which is **non-refundable**.
- (2) \$800.00 is due the first day of class.
- (3) The remainder of the tuition is to be paid prior to graduation if the student is making payments. (see policy 7.22)

Sonography School Tuition: \$14,000.00

- Tuition due upon acceptance (non-refundable) \$100.00
- Tuition due on first day of classes \$800.00 Remaining Tuition= \$13,100.00

#### **Payment Options:**

Per Quarter	Monthly
\$3275.00	\$1091.67

Special arrangements can be made with the Program Director in the event of hardship.

All tuition must be paid in full prior to graduation in order to receive the diploma and approval for registration with the ARDMS.

TITLE:			POLICY NUMBER:
Advertising Mater	ials - Guidelines		5.31
EFFECTIVE DATE: November, 1999	REVISED: October 2015	AUTHORIZED BY:  Advisory Committee	PREPARED BY: S. Black, R.D.M.S.
	r advertising materials note fairly and accurately state to fair and realistic.		

TITLE:			POLICY NUMBER: 5.32		
Advertising Materials	- Approval				
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:		
November, 1999	October 2015 Feb 2021	Advisory Committee	S. Bielanski, BS, RDMS		
All materials must be a	ipproved by the Advisory	y Committee prior to pu	ublication.		
After approval, the mar	terials shall be submitted and posting.	d through regular hosp	ital channels for		

TITLE:			POLICY NUMBER:
Student Status vs Employee Status			5.41
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:
November 1999		Advisory Committee	Susan Black, R.D.M.S.
	mployed in the Departm lents be counted on as p und in Radiology.		

TITLE:	POLICY NUMBER;		
Program Director - Qualifications			6.11
<b>EFFECTIVE DATE:</b> November, 1999	REVISED: April 2008 October 2015 Feb 2021	AUTHORIZED BY: Advisory Committee	PREPARED BY: Susan Bielanski, BS, RDMS

The Program Director shall be registered in ABD and OB/Gyn Ultrasound by the American Registry of Diagnostic Medical Sonographers a have a minimum of two years of clinical experience as a registered sonographer. The Program Director shall be a full time employee of the Department of Radiology at Cleveland Clinic Mercy Hospital and have a minimum of a Bachelor Degree.

#### According to CAAHEP standards the program director must:

- 1) possess a minimum of a Baccalaureate degree;
- 2) possess the appropriate credential(s) specific to one or more of the concentration(s) offered;
- 3) have documented experience in supervision, instruction, evaluation, student guidance and in educational theories and techniques; and
- 4) have a minimum of two years of clinical experience as a registered sonographer in the professional sonography field.

TITLE:  Program Director - Responsibilities			POLICY NUMBER: 6.12
EFFECTIVE DATE: REVISED: AUTHORIZED BY: November, 1999 Feb 2021 Advisory Committee		PREPARED BY: Susan Bielanski, BS, RDMS	

There shall be a specific job description for the Program Director designating primary responsibilities to and for the School of Diagnostic Medical Sonography. The job responsibilities shall include, but not be limited to:

- Structure and daily operation of the program
- the organization, administration, periodic review and evaluation, continued development and effectiveness of program curricula
- maintaining and updating school records and student records required by law
- developing class schedules and clinical rotations
- assisting in student selection process
- developing overall curriculum and objectives
- coordinating faculty and instructional resources
- counseling students
- academic teaching responsibilities
- regularly performing student reviews
- chairs the Advisory Committee

# SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY

TITLE:			POLICY NUMBER: 6.13
Change of Program Director			0.13
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:
November, 1999		Advisory Committee	Susan Black, R.D.M.S.
immediately. Upon no submitted within thirty	he Program Director, no tification, the curriculum (30) days. If the new ca am and progress shall be	n vitae of the new Prog andidate is not selected	ram Director will be within this timeframe,

TITLE:		POLICY NUMBER:			
Medical Adviso	or Qualifications		6.21		
<b>EFFECTIVE DATE:</b> November, 1999	REVISED: Feb 2021	AUTHORIZED BY: Advisory Committee	PREPARED BY: Susan Bielanski, BS, RDMS		
	The Medical Advisor shall be the Chairman of the Ultrasound Section of Radiology at Cleveland Clinic Mercy Hospital or a board certified member of the radiology medical staff at Cleveland Clinic Mercy Hospital.				
	be a licensed physician, certif erience and knowledge in dia		· ·		

POLICY				
TITLE:		1	POLICY NUMBER:	
			6.22	
Medical Advisor	- Responsibilities			
EFFECTIVE DATE: November, 1999	<b>REVISED:</b> 2/6/04 Feb 2021	AUTHORIZED BY: Advisory Committee	PREPARED BY: Susan Bielanski, BS, RDMS	
and objectives of to provide guidance so meet current and a perform, when need to be responsible for first day of classes	gram Director in the deve	onents of the didactic and standards all duties all student health record	nd clinical curriculum	

	POL	-ICY			
TITLE:			DATE:		
Change of Medical Advisor			6.23		
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:		
November 1999	May 2000	Advisory Committee	S. Black R.D.M.S.		
If the Medical Advisor is cha submit curriculum vitae of	anged, the Program Director the new Medical Advisor with Program Director shall notify	shall notify the JRCDMS. Th	e Program Director shall able candidate is not found		

TITLE:			POLICY NUMBER:
Clinical Coordinator - Qualifications			6.31
EFFECTIVE DATE:	REVISED: October 2015	AUTHORIZED BY:	PREPARED BY: Susan Bielanski, BS,
November 1999	Feb 2021	Advisory Committee	RDMS

The Clinical Coordinator shall be registered by the American Registry of Diagnostic Medical Sonographers in at least Abdomen and OB/Gyn. The Clinical Coordinator shall be an employee of the Radiology Department at Cleveland Clinic Mercy Hospital and work under the director of the Program Director.

#### According to CAAHEP standards the clinical coordinator must:

- 1)possess an academic degree no lower than an Associate degree and at least equal to that for which the graduates are being prepared;
- 2) possess the appropriate credential(s) specific to the concentration(s) that s/he coordinates;
- 3) have documented experience in supervision, instruction, evaluation, student guidance and in educational theories and techniques; and
- 4) have a minimum of two years of clinical experience as a registered sonographer in the professional sonography field.

TITLE:			POLICY NUMBER:
Clinical Coordinator - Responsibilities			6.32
<b>EFFECTIVE DATE:</b> November, 1999	REVISED: Feb 2021	AUTHORIZED BY: Advisory Committee	PREPARED BY: Susan Bielanski, BS, RDMS

There shall be a specific job description of the Clinical Coordinator detailing responsibilities to the School of Diagnostic Medical Sonography. The job responsibilities may include any or all of the following:

- be responsible for coordinating clinical education with didactic education as assigned by the program director
- -evaluate and ensure the effectiveness of clinical experiences for the concentration(s) students are enrolled in
- provide clinical instruction and document the evaluation and progression of clinical performance leading to clinical competence.
- -assists students with identifying weaknesses and correcting their clinical performance
- -demonstrates and instructs alternative methods of obtaining scans due to patient condition
- -assists with development of clinical rotation
- -serves as voting member on the Advisory Committee
- -assists with development of clinical evaluation tools
- -maintains clinical records in good order as prescribed by the JRC-DMS
- -has limited academic teaching responsibilities

TITLE:			POLICY NUMBER: 6.41	
Faculty Qualifications				
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:	
November, 1999		Advisory Committee	S. Black, R.D.M.S.	
	ulty shall be registered s ertifications to teach ass		sts, nurses, or hold	
	hall demonstrate an abil y #6.44 Faculty Responsi		each assigned course	

TITLE: Appointment of Faculty		<b>POLICY NUMBER:</b> 6.42	
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:
November, 1999	Feb 2021	Advisory Committee	Susan Bielanski, BS, RDMS

The Program Director shall see that all areas of the curriculum have qualified instructors to instruct the courses. The Program Director is free to use discretion in recruiting Medical Center personnel both within and outside the Department of Radiology.

The Program Director shall have the primary responsibility for selection of faculty. Financial commitments and resources outside the hospital must have administrative approval except in such cases involving sales or manufacturing representatives providing educational programs as part of their service to the Department of Radiology.

roller			
TITLE:			POLICY NUMBER: 6.43
Faculty Review and Evaluations			
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:
November, 1999	October 2015 Feb 2021	Advisory Committee	Susan Bielanski, BS, RDMS
input from the student Committee and/or the	be reviewed by the Prog body using evaluation in annual JRCDMS student and the Medical Advisor d.	nstruments as approve evaluation form.	d by the Advisory

TITLE:			POLICY NUMBER:
Faculty - Responsibilities			6.44
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:
November 1999		Advisory Committee	S. Black R.D.M.S.
	e responsible for providing qu , and objectives should be use to the Program Director.		
Each member of the faculty -curriculum vitae -course outline -course objectives -evaluation tools	y is responsible for maintainir	ng current copies of the follo	wing:

TITLE:			POLICY NUMBER: 6.45
Faculty - Instructional Loads			
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:
November, 1999		Advisory Committee	Susan Black, R.D.M.S.
administrative, technic	I not be so heavy as to pal or medical duties. Facents shall normally be lin	culty members with pri	mary care

POLICY				
TITLE:				
tion		6.50		
REVISED:	AUTHORIZED BY:	PREPARED BY:		
	Advisory Committee	Susan Black, R.D.M.S.		
		nstructional staff is		
	ion  REVISED: equires continuing education	REVISED: AUTHORIZED BY:		

TITLE:		POLICY NUMBER:	
Advisory Committee Composition		6.511	
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:
November 1999	April 2008 November 2017 Feb 2021	Advisory Committee	S. Bielanski R.D.M.S.

The Advisory Committee for the School of Diagnostic Medical Sonography shall have the following representation:

#### Program:

Medical Advisor Program Director Clinical Coordinator

#### Administration:

Administrative Director, Radiology services or representative

#### Department:

Staff Sonographer/former graduate

#### Student member:

Student Liaison

#### Public:

Public member

TITLE:			POLICY NUMBER:
Appointment of Student Liaison			6.512
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:
November, 1999		Advisory Committee	Susan Black, R.D.M.S.
body each year. The A	embers of the Advisory Conditions of the Advisory Committee shall on shall be based primarier formance.	reserve the right to ob	ject to nominees

TITLE:			POLICY NUMBER:
Advisory Committe	ee Functions		6.513
EFFECTIVE DATE:	REVISED: November 2017	AUTHORIZED BY:	PREPARED BY:
November 1999		Advisory Committee	S. Bielanski R.D.M.S.

The Advisory Committee for the School of Diagnostic Medical Sonography shall have the authority and responsibility to oversee the following activities concerning the School:

- a. Make and approve policy changes
- b. Make and approve organizational changes
- c. Approve all faculty appointments
- d. Review faculty effectiveness
- e. Approve all changes in curriculum
- f. Make appointments to other committees
- g. Define functions and set guidelines for other committees
- h. Review student progress in the Program
- i. Make changes in student status based on performance as needed

#### SCHOOL OF DIAGNSOTIC MEDICAL SONOGRAPHY

POLICY				
TITLE:			POLICY NUMBER:	
Admissions Comm	ittee Composition and Functi	ons	6.511	
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:	
November 1999	April 2008 November 2017	Advisory Committee	S. Bielanski R.D.M.S.	
The Admissions Committee	for the School of Diagnostic	Medical Sonography shall b	e comprised of at least:	
<ul> <li>- Program Director</li> <li>- Administrative Director, Radiology services or representative</li> <li>- Staff Sonographer</li> </ul>				
The admissions committee will be responsible for selection of the upcoming class of students.				

TITLE:			POLICY NUMBER:
Curriculum Committee Composition			6.531
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:
November, 1999	May 2000 Feb 2021	Advisory Committee	Susan Bielanski, BS, RDMS

The Curriculum Committee for the School of Diagnostic Medical Sonography shall be comprised of the following:

- ♦ Medical Advisor
- ♦ Staff Sonographer
- ♦ Program director
- ♦ Graduate Sonographer (if available)

TITLE: Curriculum Committee Functions			<b>POLICY NUMBER:</b> 6.532
EFFECTIVE DATE:	REVISED: April 2008	AUTHORIZED BY:	PREPARED BY:
November, 1999	·	Advisory Committee	Susan Black, R.D.M.S.

#### Duties:

- 1. Review existing curriculum, goals, objectives and determine validity with regards to:
  - a. Registry exam results
  - b. Graduate capabilities/weaknesses
- 2. Develop changes needed in the curriculum based on:
  - a. Registry results
  - b. ARDMS registry outlines
  - c. Graduate capabilities
  - d. JRCDMS criteria
- 3. Give approval to all curriculum and objectives prior to submission to the Advisory Committee

TITLE: Non-discrimination Policy			POLICY NUMBER: 7.11
EFFECTIVE DATE: November, 1999	<b>REVISED:</b> Nov. 2017 Feb 2021, Feb. 2022	AUTHORIZED BY: Advisory Committee	PREPARED BY: Susan Bielanski, BS,RDMS

Selection of students to the program shall be based on the applicant's ability, preparation, attitude, interest and personal qualities indicating potential to successfully meet the terminal goals of the program.

Cleveland Clinic is committed to providing a working and learning environment in which all individuals are treated with respect and dignity. It is the policy of Cleveland Clinic to ensure that the working and learning environment is free from discrimination or harassment on the basis of race, color, religion, gender, sexual orientation, gender identity, pregnancy, marital status, age, national origin, disability, military status, citizenship, genetic information, or any other characteristic protected by federal, state, or local law. Cleveland Clinic prohibits any such discrimination, harassment, and/or retaliation.

Any participant in a Cleveland Clinic educational program, including any student, trainee or employee, who may have been subject to discrimination on the basis of a protected characteristic is encouraged to make a report.

Reports of discrimination on the basis of sex, gender, sexual orientation, gender identity or gender expression may be made to the Title IX Coordinator. Please visit the <u>Title IX Internet Site</u> for additional information and/or send an email to TitleIX@ccf.org

Reports of discrimination on the basis of a disability, may be made to the Section 504 Coordinator, Main Campus NA31.

Reports of discrimination on the basis of any other protected characteristic may be made to the Office of Educational Equity at EduEquity@ccf.org.

In addition, Cleveland Clinic shall provide reasonable accommodations to any qualified student with a disability in order for the student to have equal access to their program. Students needing a reasonable accommodation in order to apply to or participate in the program should contact the program director as early as possible.

#### **Diversity Statement**

The Center for Health Professions Education and Cleveland Clinic are committed to valuing all people through our organization, regardless of background or culture. A diverse and inclusive environment for students and staff and culturally appropriate care for our patients, are essential to fulfilling our vision to be the best place for care anywhere and the best place to work in healthcare. We welcome students from diverse backgrounds and cultures.

TITLE: Student Anti-Hazing policy		POLICY NUMBER: 7.112	
EFFECTIVE DATE: Feb. 2022	REVISED:	AUTHORIZED BY: Advisory Committee	PREPARED BY:  Susan Bielanski, BS, RDMS

**Purpose**: The purpose of this policy is to prohibit student hazing and to provide for penalties in compliance with applicable state law.

**Policy Statement**: Cleveland Clinic is committed to maintaining a safe, healthy and efficient working and learning environment for its students, trainees, employees, patients and visitors. Consistent with the spirit and intent of this commitment, Cleveland Clinic prohibits hazing as defined in this policy.

**Definitions**: Cleveland Clinic United States locations: Includes the main campus, Avon, Euclid, Fairview, Hillcrest, Lutheran, Marymount, Medina, South Pointe, Children's Hospital for Rehabilitation, Cleveland Clinic Florida, Cleveland Clinic Hospital (Weston), Coral Springs Ambulatory Surgery Center, and all Family Health Centers, Physician practice sites, Nevada practice sites, Emergency Departments, Express Care Centers, Urgent Care Centers and Ambulatory Surgical Centers reporting to these facilities.

Cleveland Clinic Premises: All Cleveland Clinic buildings, other buildings where Cleveland Clinic employees work, parking garages, parking lots or other open areas owned or under control of Cleveland Clinic, in any Cleveland Clinic vehicle, or at any other location while on Cleveland Clinic business.

**Affiliate School**: An educational institution with which Cleveland Clinic has an affiliation agreement through which enrolled students of the institution participate in Cleveland Clinic's educational programs or activities.

Affiliate Student: An affiliate student is a participant in a Cleveland Clinic educational program or activity who is enrolled in an affiliate school.

**Educational Program or Activity**: Any program or activity offered at Cleveland Clinic or by Cleveland Clinic employees in the scope of their duties that is educational in nature beyond on the-job training, general interest, or routine continuing education programs. Factors in determining whether a program or activity is educational include whether it is structured through a particular course of study; whether participants earn academic credit toward a degree or certificate, or qualify to sit for professional exams; or whether a program provides instructors, exams or other evaluation process. Educational programs and activities include, without limitation, degree- or certificate-granting programs offered by Cleveland Clinic and affiliated colleges and universities; clinical rotations for degree- or certificate-granting programs; medical and other residency programs; research and medical fellowships; internships; and educational programs offered to middle school, high school, college and university students.

**Hazing**: Doing any act or coercing another, including the victim, to do any act of initiation into any student or other organization or any act to continue or reinstate membership in or affiliation with any student or other organization that causes or creates a substantial risk of causing mental or physical harm to any person, including coercing another to consume alcohol or a drug of abuse.

**Program Leadership**: For the purposes of this policy, refers to the administrators of a student's educational experience or program. Program leadership includes program directors, education coordinators, preceptors and other Cleveland Clinic employees with the authority to address misconduct in a program/educational experience.

Student: For the purposes of this policy, a student is a person enrolled in a Cleveland Clinic educational program or activity who is not employed by Cleveland Clinic. The term "student" includes affiliate students and trainees who are not employed by Cleveland Clinic.

#### **Policy Implementation**

**Scope**: This policy applies to students as that term is defined in this policy. This policy applies to conduct that takes place on or off Cleveland Clinic premises and that involves two or more people who are affiliated with the Educational Program or Activity. Hazing directed toward or by individuals other than students falls under the

Professional Conduct Policy.

**Procedure**: Individuals who become aware of any student engaged in hazing shall report the conduct to the student's program leadership. The student's program leadership shall investigate the report, as appropriate, in accordance with the disciplinary process for the program. Where the hazing conduct may constitute a crime, program leadership shall report it to the appropriate law enforcement agency.

**Violation of Policy**: Any student who is found to be in violation of this policy is subject to disciplinary action up to and including dismissal from their program/educational experience. A student may be suspended from participation in their program/educational experience pending the outcome of an investigation. An affiliate student's program leadership will inform an affiliate school of any actions taken under this policy.

**Programs of Education, Prevention, Treatment and Support**: Cleveland Clinic shall make anti-hazing education available to students, administrators, faculty members and other caregivers.

Regulatory Requirement/References: Ohio Revised Code Section 3345.19, Anti-hazing policy.

Oversight and Responsibility: Education Institute is responsible to review, revise, update, and operationalize this policy to maintain compliance with regulatory or other requirements. It is the responsibility of each hospital, institute, department, educational program and activity and discipline to implement the policy and to draft and operationalize related procedures to the policy if applicable.

#### **Other Background Information**

Issuing Office: Education Institute Approved by: Dr. James K. Stoller, Chairman, Education Institute

Reviewed by: Susan Hastings, Esq., Deputy Chief Legal Officer

TITLE:			POLICY NUMBER:
Criteria for Admission			7.12
<b>EFFECTIVE DATE:</b> November, 1999	REVISED: May 2000, 2/4/04, Jan.2006, April 2008, July 2009, August 2010 March 2013 May 2023	AUTHORIZED BY: Advisory Committee	PREPARED BY:  Susan Bielanski, BS R.D.M.S.

The following shall be used for determining the acceptability of a candidate for admission to the Program:

Applicant must be a graduate of a 2-year AMA Allied health education program that is patient care related **OR** a 4-year Bachelors Degree with:

- GPA of at least 2.5
- Current BLS certification
- Satisfactory completion of the following prerequisites:

General Physics Communicating skills /College Composition Medical Terminology Human Disease Algebra 101, or higher level college Math Human Anatomy and Physiology Human Anatomy and Physiology II (or Human Structure & Function or Human Biology)

Meeting application requirements does not guarantee admission into the program.

TITLE:			POLICY NUMBER:
Application for Ad	mission		7.13
<b>EFFECTIVE DATE:</b> November, 1999	REVISED:  May 2000, 2/4/04  April 2008  May 2023	AUTHORIZED BY: Advisory Committee	PREPARED BY:  Susan Bielanski, BS, R.D.M.S.

The following materials must be received by the School before an application can be considered:

- Completed application form
- Transcripts from colleges attended
- Two completed recommendation forms
- \$25.00 non-refundable application fee
- BLS certification
- Degree or certificate of graduation from a 2-year Allied Health Education program OR 4-year
   Bachelors Degree

Completed applications must be submitted by April 1 along with the \$25.00 application fee.

One class of students will be admitted in July of each year.

TITLE:			POLICY NUMBER:
Interview and Acc	eptance Procedure		7.15
EFFECTIVE DATE: November, 1999	REVISED: April 2008 Jan. 2005 Sept. 2002 May 2000 May 2023	AUTHORIZED BY:  Advisory Committee	PREPARED BY:  Susan Bielanski, BS, R.D.M.S.

All applicants interviewed for admission will be informed of the Committee's decision to accept or deny admission.

Interview scores are based on two portions.

- <u>Application score</u> (based on courses taken, grades, degree and healthcare experience)
- <u>Panel Interview</u> (based on average score of panel members on a set of predetermined questions, which are the same for all applicants, asked in the same order for all applicants.

All applicants not meeting requirements shall be notified by telephone or letter.

Final class selection will be made by approximately April 30<sup>th</sup> of each year.

TITLE: Pre-entrance Medical Examination			POLICY NUMBER: 7.16
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY: Advisory Committee	PREPARED BY:
November, 1999	April 2016		Susan Black, R.D.M.S.

Accepted students are required to have a physical examination prior to commencement of training. The student's physician must sign the health history sheet as well as the technical standards form to ensure the student is fit for clinical duties. The student is required to submit evidence of immunizations.

- A. Health requirements to be completed PRIOR to hospital clinical experience:
  - 1. Health history (including childhood disease history) questionnaire
  - 2. Immunizations:

Tetanus. Although protective for 10 years, tetanus immunization must afford you protection throughout your affiliation.

 Tetanus/Diphtheria/Pertussis immunization is STRONGLY RECOMMENDED.

#### MMR Immunization (2 doses)

\* Laboratory evidence of immunity (screen or titer) for Measles, Mumps and Rubella can be substituted for immunization.

### Varicella Immunization (2 doses)

Laboratory evidence of Immunity (screen or titer) can be substituted for immunization

### Hepatitis B Vaccine

Hepatitis B IgG Antibody Titer or signed declination form assuming the risk of exposure

Influenza Vaccine – required of all students assigned to clinicals during flu season – normally November 1<sup>st</sup> thru April 1<sup>st</sup> yearly and is provided by the hospital.

A negative two-step Mantoux test (TB test), QuantiFERON®-TB Gold test, or T-Spot test within 1 year before the start date of the clinical rotation with annual updates while in the clinical portion of training. If positive reactor, a copy of chest X-ray (within one year) must be attached.

The medical reports are reviewed by the Medical Director of the School and placed in the student's file. Reports are retained in the student's permanent file.

Costs incurred to complete the requirements are the responsibility of the student.

\*Please also see attached Cleveland Clinic Student Immunization Policy: <a href="https://ccf.policytech.com/dotNet/documents/?docid=61072">https://ccf.policytech.com/dotNet/documents/?docid=61072</a>

TITLE:			Policy Number 7.161
Student/ Staff Scanning	g policy		
EFFECTIVE DATE: June 2000	REVISED: March 2021	AUTHORIZED BY: Advisory Committee	PREPARED BY: S. Bielanski, BS, RDMS

For educational purposes **only**, students shall be permitted to scan staff sonographers, radiologists and fellow students, provided the subject has volunteered.

All students must sign a waiver form prior to scanning others or being scanned. Under no circumstances should a student, sonographer or radiologist be coerced into volunteering. The scan subject shall volunteer of his or her own free will. A student's choice to volunteer or not shall not affect their grades or learning opportunities. Students are strictly prohibited from performing transvaginal, transrectal, breast or testicular scan on other students.

During student scan lab sessions all infection control guidelines must be followed at all times, including but not limited to hand washing, disinfection of probes and disinfection of equipment.

The students must understand that there is a possibility that pathology may be found during the educational exam, and must be aware that it would be in their best interest to contact their personal physician if something unusual is seen. The students must also realize that pathology may be present and may not be discovered during the educational practice sessions.

Students must understand that there is a risk of ultrasound bioeffects, but if ultrasound used properly, the risk is minimal. Students must be aware that even when used properly, the possibility of potential bioeffects still exists.

TITLE: Exposure to Infectious Disease			POLICY NUMBER: 7.1662
EFFECTIVE DATE:  December 1999	REVISED: April 2016 March 2020	AUTHORIZED BY:  Advisory Committee	PREPARED BY:  Susan Bielanski, BS, RDMS
School Medical Director wi For their safety and well-be contagious disease requiring situations will be evaluated Students of the Sonograph	rsonal physician for completic ill review the completed form eing sonography students shang the use of N95 masks such d on a case by case basis by the program shall follow the Clicable student health and explain the complete student health and ex	all not participate in exams as, but not limited to, COV he program director or clini eveland Clinic Mercy Hospi	edical exam. The Sonography g their clinical rotations.  on patients with an active //ID 19 and TB. Other ical coordinator/instructor

TITLE:			POLICY NUMBER:
Withdrawal from Program			7.17
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:
November, 1999		Advisory Committee	Susan Black, R.D.M.S.
Director and submit an notification to the facu termination because of	official letter of resignality will be dropped from	tion. Students exiting value that the p	olicy of voluntary

TITLE:			POLICY NUMBER:
Readmission to F	Program		7.18
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:
November, 1999	April 2016	Advisory Committee	Susan Black, R.D.M.S.
readmission. The stude for success or failure if	had a valid reason for went's past performance value readmission is granted.	will be evaluated to def No advanced placeme	termine the potential nt will be granted.

	101	LICI	
TITLE:			POLICY NUMBER:
Application Fee			7.21
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:
November, 1999		Advisory Committee	Susan Black, R.D.M.S.
	nust accompany the application	ı	

TITLE:			POLICY NUMBER:
Tuition			7.22
EFFECTIVE DATE: November, 1999	REVISED: June 12,2001 2/4/04 October 2015	AUTHORIZED BY:  Advisory Committee	PREPARED BY: S. Black, R.D.M.S.

Tuition for the course in Diagnostic Ultrasound may change and the prospective students will be informed.

\$100.00 of the tuition is payable by the candidate upon acceptance. The \$100.00 acceptance fee is non-refundable.

\$800 will be collected on the first day of class. The student is responsible for payment of the remaining tuition in lump sum or by monthly or quarterly payments. In the event of hardship, every effort will be made to arrange a special payment schedule.

The balance of the tuition is due prior to graduation and is a requirement of graduation.

If a student withdraws from the Program, tuition will be refunded as follows:

Student withdraws during the: 1st quarter- 25% of tuition is due. Refund amount in excess

 $2^{nd}$  quarter- 50% of tuition is due. Refund amount in excess  $3^{rd}$  quarter- 75% of tuition is due. Refund amount in excess  $4^{th}$  quarter- 100% of tuition is due. Refund amount in excess

The hospital reserves the right to change tuition after review on an annual basis.

TITLE:  Fees and Expenses			POLICY NUMBER: 7.23
EFFECTIVE DATE:	REVISED: March 2021	AUTHORIZED BY:	PREPARED BY:
November, 1999		Advisory Committee	S. Bielanski, BS, RDMS

Students shall be responsible for paying for the following:

- a. Uniforms to meet the dress code.
- b. Maintaining uniforms in accordance with the dress code.
- c. Textbooks.
- d. Notebooks, paper and other school supplies.
- e. Housing and living expenses.
- f. Registry Exams

TITLE:  Probationary Period for New Students		POLICY NUMBER: 7.25	
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:
November, 1999		Advisory Committee	Susan Black, R.D.M.S.

### POLICY:

Every effort is made by the School to carefully screen, select and place the proper candidate for each student position; however, proper placement can only be made by the use of a "trial" or probationary period. During this period, the student and the faculty will communicate on an ongoing basis to assure that continued long-term student status is in the best interest of both the School of Diagnostic Medical Sonography and the student.

### PROCEDURE:

#### 1. NEW STUDENTS

- A. The first month (30 days) of education shall be considered a probationary period.
- B. During the initial probationary period, a student may be subject to termination without notice. If at any point during this period it becomes clear that the student is not suited for the Program or if the faculty is convinced the student is not suited for the Program, either party can terminate the student status immediately.
- C. The student will be closely monitored during the probationary period to determine adjustment to Departmental routine and compliance with School policies. The Corrective Action policy will be enforced with students after the probationary period is completed.

	100	LICY	
TITLE:			POLICY NUMBER:
Pregnancy			7.321
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:
November, 1999		Advisory Committee	Susan Black, R.D.M.S.
Program Director of a susp Clinical restrictions will app Under no circumstances w	egally required to report her pected pregnancy.  oly to the student technologis ill a student be dismissed from the can be an extension in	st the same as they would to m training due to pregnance	o the Staff Sonographer.

SCHOOL OF DIAGNOSTIC MEDICAL SONOGRAPHY POLICY			
TITLE:			POLICY NUMBER:
Personal Time, Sic	ck Time		7.411
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:
November, 1999		Advisory Committee	Susan Black, R.D.M.S.
The student is allotted 5 days (40 hours) of personal time during the education period of 12 months.  * This time can be used for illness, personal appointments, doctor visits, etc.  * Any time used that is beyond the allotted 40 hours will be made up at the student's convenience.  Suspensions:  Any student suspended for either clinical infractions, academic infractions or both Is a standard three-day suspension. These three days must be extracted from the			
	tudent's vacation time.	ision. These three days must	be extracted from the

TITLE: Absence	and Tardiness		POLICY NUMBER:
			7.412
EFFECTIVE DATE:	REVISED: May, 2000	AUTHORIZED BY:	PREPARED BY:
November, 1999	•	Advisory Committee	Susan Black, R.D.M.S.

Absence and tardiness shall be classified under three (3) categories: Excused, unexcused and excused with permission.

Excused: An absence that is due to a valid reason satisfactory to the Program Director Example: Illness, jury duty, physician appointments, and military leave.

Unexcused: An absence that is not due to a valid reason satisfactory to the Program Director.

Example: Sleeping in, suspensions.

Absent with Permission: Absences arranged in advance with Program Director. These absences will not be counted toward the student's available sick time.

Examples: Funeral leave and attendance at professional meetings.

Suspensions: Any student suspended for either clinical infractions or academic infractions. It is a standard three day suspension. These three days must be extracted from the student's vacation time and are more severe than a normal absence.

## DIAGNOSTIC MEDICAL SONOGRAPHY POLICY

		-		
TITLE:			POLICY NUMBER:	
Reporting an Abse	ence		7.413	
EFFECTIVE DATE:	REVISED: March 2021	AUTHORIZED BY:	PREPARED BY:	
November, 1999		Advisory Committee	S. Bielanski, BS, RDMS	
When reporting an absence may also call or text the pro-	e, the student must notify pr ogram director.	ogram personnel by calling	<b>330-580-4740</b> . The student	
An absence of three (3) contermination.	nsecutive scheduled days wit	hout notification shall be co	onsidered voluntary	

<b>TITLE:</b> Excessive Absence and	Tardiness		POLICY NUMBER: 7.414
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:
January 11, 2010		Advisory Committee	S. Black, R.D.M.S.

Excessive absence and/or tardiness are grounds for disciplinary action. Excessive absence is defined as three (3) or more incidents within 30 days or five (5) or more incidents within 180days. Consecutive days missed for the same illness constitute one (1) incident.

If the student exceeds the allowable number of incidents within the time period, they will be referred to progressive corrective action. Please see policy # 7.61.

Number of Incidents	Reason
1/2	Forgot Badge/ Forgot to clock in or out
1/2	Tardy
1/2	Home early after working at least 4 hours of shift
1/2	Not clocking in or out
1	Home early without working at least 4 hours of shift
1	Late without working at least 4 hours of shift
1	Call-off within procedure guidelines
1 1/2	Late call-off not within procedure guidelines
2	Failure to call-off or appear for shift

Other Related policies Make up time # 7.48 Class Attendance # 4.21

TITLE:			POLICY NUMBER:		
Return to School (	Certificate		7.422		
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:		
November, 1999		Advisory Committee	Susan Black, R.D.M.S.		
The student must obtain a note must certify fitness to	doctor's excuse to return to return to clinical rotation.	school after five (5) consecu	itive days of illness. The		
If the physician has indicate tasks that are beyond his/h	ed that the student must be ner physical capability.	on light duty, then the stude	ent will be excused from		
NOTE: The Program Dire consecutive days	ctor reserves the right to req of illness.	uest a physician's note from	a student after two (2)		

POLICY				
TITLE:			POLICY NUMBER:	
Time Cards			7.44	
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:	
November, 1999		Advisory Committee	Susan Black, R.D.M.S.	
will be edited to reflect the scheduled start time.  EARLY CLOCKING OUT  Clocking out early without  RECORDING OVERTIME	r to their scheduled start time scheduled start time. Also, to scheduled start time. Also, to scheduled start time and scheduled start time. Also, to scheduled start time.	they are not permitted to pe	erform exams prior to their	

	1 01	-101		
TITLE:	POLICY NUMBER:			
Leave of Absence			7.45	
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:	
November, 1999		Advisory Committee	Susan Black, R.D.M.S.	
A student may request a leave of absence for medical reasons if advised by his/her private physician. The maximum single granted amount of time will be thirty (30) days.				

TITLE:			POLICY NUMBER:
Make-Up Time			7.48
EFFECTIVE DATE:	REVISED: May 2000	AUTHORIZED BY:	PREPARED BY:
November, 1999	Way 2000	Advisory Committee	Susan Black, R.D.M.S.

The student must make up all hours exceeding 40 hours sick time during their training. If the student wishes to make up the time prior to graduation, he/she may volunteer for extra hours on day or evening shifts. The program director must approve all make up times and dates prior to the student completing it.

Student will NOT be allowed to attempt competencies during make up time after 3:30pm on weekdays or on weekends because the clinical instructor and program director are not available for supervision or review of the competency.

Suspensions have a different ruling. Please refer to policy 7.411. Suspensions are considered more severe and the days will be taken from the student's vacation time depending on the time of the occurrence.

The following provision is made for extended illness not habitual absenteeism:

An absence of thirty (30) days or more during the twelve (12) month training period will disqualify the student from graduating with the class. The student will be asked to complete an amount of time equivalent to the time missed in excess of the 40 hours sick time before the Program Director will sign for the registry application.

TITLE:  Vacations  REVISED: Jan. 2005  AUTHORIZED BY: Advisory Committee  Susan Black, R.D.M.S.  Students are given two (2) weeks vacation during the one-year Program scheduled one week at a time by the Program Director. The distribution will be as follows: Five days during December Five days for Spring Break  *Vacations may not be used to achieve early graduation.  *Vacations may be used to make up previous sick time used.  * Scheduling of vacation is at the discretion of the scheduler.					
November, 1999  Advisory Committee  Susan Black, R.D.M.S.  Students are given two (2) weeks vacation during the one-year Program scheduled one week at a time by the Program Director. The distribution will be as follows:  Five days during December Five days for Spring Break  *Vacations may not be used to achieve early graduation.  *Vacations may be used to make up previous sick time used.					
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Program Director. The distribution will be as follows:  Five days during December  Five days for Spring Break  *Vacations may not be used to achieve early graduation.  *Vacations may be used to make up previous sick time used.	November, 1999		Advisory Committee	Susan Black, R.D.M.S.	
*Vacations may be used to make up previous sick time used.	Students are given two (2) weeks vacation during the one-year Program scheduled one week at a time by the Program Director. The distribution will be as follows:  Five days during December				
		a to dome to carry Bradadio.			
* Scheduling of vacation is at the discretion of the scheduler.	*Vacations may be used to	make up previous sick time	used.		

TITLE:			POLICY NUMBER:
Discounts for Stud	lents/ Student Benefits		7.54
EFFECTIVE DATE: November 1999	REVISED: March 2021	AUTHORIZED BY: Advisory Committee	PREPARED BY: S. Bielanski, BS, RDMS

### **Discounts:**

Students are allowed the same discount on personal prescriptions and cafeteria purchases as the employees of the hospital (requires ID badge).

Availability of this benefit is subject to continuing approval of hospital Administration.

### Benefits:

Free flu shot
Free counseling through EAP
Free parking
Resume writing assistance

TITLE:			POLICY NUMBER:			
Academic Counseling			7.551			
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:			
November, 1999		Advisory Committee	Susan Black, R.D.M.S.			
	eir grades reviewed at the en nesses and progress will be ev		the Program Director. The			
Students are encouraged t classes.	o meet with individual instru	ctors to review progress any	time throughout the			
Clinical evaluations will be	reviewed with the students a	as soon as possible after they	are received.			

	101		
TITLE:			POLICY NUMBER:
Personal Counseli	ng		7.552
EFFECTIVE DATE:	REVISED: March 2021	AUTHORIZED BY:	PREPARED BY:
November, 1999	Walter 2021	Advisory Committee	S. Bielanski, BS, RDMS
Program Director or other  Students may also request The Program Director may with the student's perform	the services of the Employee refer the student when it be	e Assistance Program for he comes apparent that perso	lp with personal problems.

TITLE:			POLICY NUMBER:
Merit/Demerit Program			7.6
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:
November 5, 2001	March 2021	Advisory Committee	S. Bielanski, BS, RDMS

The demerit system was designed to assure that sonography students comply with program and hospital rules and objectives. Demerits can only be issued by the Program Director or the Clinical Instructor. Certain violations, as listed below, will warrant a verbal warning first. If the student violates a second, a demerit will be issued. Other violations, as listed below, will be an automatic demerit with no verbal warning. Any demerit given in a quarter will be a deduction of 2 points off the final clinical grade.

The merit system was designed to reward students for exceeding expectations required by the program. A merit is worth 2 hours of clinical time or plus 2 points on their clinical grade (if it will increase their letter grade). Merits may only be given by the Program Director or the Clinical Instructor.

A verbal warning will be issued first followed by a demerit for any further violations for the violations listed below:

1. Dress code violations

2. Neglecting room duties

3. Not participating in exams

4. Leaving clinical area without informing sonographer

5. Not turning in log sheets/clinic forms

5. Taking longer than allotted lunch times

6. Early departure or late return from class

7. Forgetting to clock in or out

8. Tardy

#### Automatic 2 point demerits:

1. Eating in non-designated areas

2. Not calling off prior to start time for illness

3. Not having images checked by staff

4. Not following professional standards or objectives

### 5. Not turning in failed competencies

6. Not wearing ID badge

#### **Merits** will be given for the following:

- 1. Perfect attendance in a quarter
- 2. Written thanks from a physician, staff member, or patient
- 3. Repeated exceptional competency evaluations, compliments from staff, observed acts of kindness
- 4. QI slip for an exceptional exam from a Radiologist

TITLE:			POLICY NUMBER:	
Progressive Corre	7.61			
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:	
November, 1999		Advisory Committee	Susan Black, R.D.M.S.	
<ol> <li>Verbal w</li> <li>Written v</li> <li>Suspensi</li> <li>Dismissa</li> </ol> The Program Director has a infraction. A student may be dismissed	warning on	to skip steps in the process serious violations at the di	scretion of the Advisory	

TITLE:			POLICY NUMBER:
Dress Code			7.62
EFFECTIVE DATE: November, 1999	REVISED: September 26,2001 April 2008 February 2016 October 2019	AUTHORIZED BY: Advisory Committee	PREPARED BY: Susan Bielanski, RDMS

Students are expected to dress professionally and conservatively. Good judgment in clothing is expected. Failure to adhere to the dress code may result in Progressive Corrective Action up to and including dismissal. The following is the School dress code:

<u>Hair</u>: Hair should be clean, well-groomed. If shoulder length or longer hair must be pulled back so

as not to fall on patients.

<u>Make-up</u>: Cosmetics must be soft or subdued colors, nail color must be neutral or moderate shades.

<u>Beards</u>: Beards or mustaches must be clean and trimmed, otherwise clean shaven.

<u>Cologne</u>: Cologne must be kept to a minimum. Excessive fragrance will not be permitted.

Jewelry: Jewelry will be limited for the safety of the employee and the patient. No visible body

piercings are permitted with the exception of earrings (see below)

Earrings: Earrings will be limited to two per ear. No hoop earrings are permitted.

Necklaces: Visible necklaces will not be permitted; however, they may be tucked into clothing.

<u>Bracelets</u>: Bracelets of any type are not permitted.

<u>Watches</u>: A wristwatch may be worn.

Rings: One ring may be worn on each hand.

Pins: Photo ID badges must be worn. Only one seasonal pin will be permitted.

<u>Tattoos:</u> No visible tattoos are permitted.

1 02:01					
TITLE:	s Code			POLICY NUMBER: 7.62	
EFFECTIVE DA November 19		REVISED: April 2021 October 2019 February 2016 April 2008 Sept.26,2001	AUTHORIZED BY: Advisory Committee	PREPARED BY: S. Bielanski, RDMS	
<u>Uniforms</u> :	Uniforms: Uniform scrub pants must be navy in color. Scrub tops and lab coats must be white with no designs. Under garments should be chosen so as not to be obvious under the scrubs. Jeans or sweat pants are not permitted. Skirts must be knee length or longer. Opaque white or navy hose will be worn with skirt. Socks over hose are not permitted.				
<u>Shoes</u> :		hite, black, dark blue or gray Bright colored shoes are not		es. Small bits of color are	
Students not purpose.	complying wi	th the dress code will be sen	t home to change. Sick time	hours will be used for this	

TITLE:	POLICY NUMBER:		
Conduct and Infractions			7.63
EFFECTIVE DATE:	REVISED: November 2010	AUTHORIZED BY: Advisory	PREPARED BY:

The student is expected to observe good standards of conduct and practice. The following violations will result in Progressive Corrective Action up to and including dismissal from the Program:

- a. Negligence or inconsiderate treatment of patients, visitors, or employees.
- b. Habitual absences or tardiness without cause.
- c. Absence of three consecutive days without notification.
- d. Willful destruction of property.
- e. Insubordination.
- f. Possession of, or drinking of, liquor or alcoholic beverages on hospital premises or while representing the hospital off site.
- g. Illegal use or possession of a controlled substance.
- h. Immoral, rude, or disorderly conduct.
- i. Sleeping or loitering while on duty.
- j. Willful violation of any hospital policies.
- k. Theft.
- I. Breech of confidential information.
- m. Cheating or plagiarism of any kind.
- n. Posting comments or images on social media taken at the hospital or while wearing your badge which are detrimental to the image and values of Cleveland Clinic Mercy Hospital (refer to hospital policy 102.147)
- 0. Other infractions not addressed by school policy but follow hospital policy.

	FOI		
TITLE:			POLICY NUMBER:
Confidential Information			7.64
EFFECTIVE DATE:	<b>REVISED: 2/6/04</b> March 2021	AUTHORIZED BY:	PREPARED BY:
November, 1999		Advisory Committee	Susan Bielanski, BS, RDMS
patient. The responsible Whether on or off duty or any other condition.  HIPAA regulations will be Violation of this policy	in obligation to keep in o ility is assumed by every r, the student is to refrain be followed per hospital may subject the student presented for disclosing	y person in any capacity n from discussing a pat l policy. to immediate dismissa	in the hospital. ient's medical, social, al and may involve legal

TITLE:			POLICY NUMBER: 7.65
Program Policies-S	cope of Authority		
EFFECTIVE DATE:	REVISED: March 2021	AUTHORIZED BY:	PREPARED BY:
November 1999		Advisory Committee	S. Black R.D.M.S.
	agnostic Medical Sonography program. Cleveland Clinic M		

TITLE:	POLICY NUMBER:		
Appeals and Grievance Policy			7.7
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:
November, 1999	Sept. 2002	Advisory Committee	Susan Black, R.D.M.S.

**PURPOSE**: The Appeal Mechanism provides a thorough, timely and objective assessment and resolution of student concerns and assures that students are treated in a fair, reasonable and nondiscriminatory manner. An appeal can be any concern or complaint asserted by a student regarding interpretation, application or breach of any policy, practice or procedure.

**ELIGIBILITY**: This procedure is available to any student enrolled in a Cleveland Clinic enterprise internal health professions education program, who does not have any affiliation with a college/university.

**PROCEDURE**: The Cleveland Clinic desires to resolve student grievances, complaints and concerns in an, expeditious, fair, cordial and professional manner. A student may resolve a grievance by initiating the following steps:

Informal Process: The student is advised to discuss the grievance informally with the person who is the source of the grievance. If the parties resolve the grievance, it is deemed closed. If the grievance is not resolved at this level, the student may request an informal review by the program director. It is expected that most problems or complaints of concern to students will be discussed and resolved in a timely fashion informally between the student and the program director. If the response from the program director is unacceptable to the student, or if the program director is the basis of the complaint, the student may initiate the formal grievance procedure. The Medical Director, Health Professions Educational Partnerships, Center for Health Professions Education, will be notified immediately by the program director of an impending formal grievance.

**Formal Grievance Procedure:** The formal grievance procedure begins when a dated written complaint is submitted to the program director. The written complaint may be submitted via email. An appeal must be initiated within 5 business days of the date on which cause of the appeal is known. A copy of the appeal must be sent to the Center for Health Professions Education.

#### STEPS

- 1. The first step of appeal should involve discussion with the department director/ chairperson or the program's medical director if the program director is also department director. Every effort should be made to resolve the issue at this step of the process. The director/chairperson or program's medical director has 5 business days to respond to the student in writing following the initial appeal request by the student as to the decision rendered.
- 2. If the decision rendered at the first step is deemed unacceptable by the student, the second step of appeal should involve the system-wide Education Director/Manager for the discipline. If no Education Director/Manager has been appointed, the Medical Director, Health Professions Educational Partnerships, Center for Health Professions Education, should be notified. The Education Director/Manager or Director, Health Professions Educational Partnerships, has 5 business days to respond to the student in writing following notification of appeal as to the decision rendered.

- 3. If the decision rendered at the second step is deemed unacceptable by the student, the third step of the appeal involves the Health Professions' Education Council's Student Appeals Committee. The committee chairperson and one committee member will review each appeal. The decision and recommendations at this step are final. The Health Professions Education Council has 10 business days to respond to the student in writing following notification of appeal as to the decision rendered.
- 4. An appeal should be filed with the Center for Health Professions Education Office. The education office will assign someone to assist the student throughout the appeal process.
- 5. The student shall have the opportunity to appear in person before the reviewing party at each step of the appeal process. 6. Appeals at each step must be made in writing by the student within 10 business days after receipt of the reviewing party's response. Email is acceptable. The Center for Health Professions Education must be copied on all communications at each step of the appeals procedure. 7. The Human Resources and Legal Departments are available, in a consultative capacity, to the Program Director, Program's Medical Director, system-wide Education Coordinator, Medical Director, Health Professions Educational Partnerships or to the Chairman, Education Institute as it relates to the student's appeal.

Rev. 3/19/12, 6/20/13, 4/9/15, 5/16/22

TITLE:			POLICY NUMBER:
Post-Graduation Employment			7.8
EFFECTIVE DATE:	REVISED: Jan 2006	AUTHORIZED BY:	PREPARED BY:
November 1999	March 2021	Advisory Committee	S. Bielanski, BS, RDMS

If there is a position to be filled in the Department of Ultrasound, graduating students will be considered for the opening. Selection will be based upon scholastic and clinical performance during the one year of education. Graduating students seeking employment by the hospital should submit an application through the hospital's website.

The Department of Radiology and Cleveland Clinic Mercy Hospital do not guarantee graduating students employment.

The hospital employs only registered and registry ready Sonographers

If a graduating student is hired, it is as "Registry Ready". He/she is given one year to pass the Registry. If he/she fails to do so, he/she is automatically dismissed. If one exam of the registry has been passed, then the employee will be given a 3 month extension. If they are not registered by the deadline, they will be terminated.

The School does not have a formal placement service. All known available jobs are posted.

TITLE:			POLICY NUMBER:
Professional Days			7.81
EFFECTIVE DATE:  November, 1999	REVISED: March 2021	AUTHORIZED BY:  Advisory Committee	PREPARED BY:  Susan Bielanski, BS, RDMS
use only (job orientation, in Students attending continu be granted clinical hours en CME form or program as p Students taking an ARDMS	uing education meetings spor quivalent to the length of the	nsored by a professional sone meeting. The student will light granted the day off on the o	nography organization will be required to bring the day they are taking the

TITLE:			POLICY NUMBER:
Content of Permanent Student File		8.111	
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:
November 1999		Advisory Committee	S. Black R.D.M.S.

Permanent records shall be maintained for each student accepted into the Program. The School of Diagnostic Medical Sonography shall retain the following items for the student's permanent file:

- 1. Application for admission
- 2. Interviewing material or sheets
- 3. Prior Allied Health Program transcripts
- 4. Record of fees paid
- 5. Health records of the student
- 6. Attendance records and sheets
- 7. Transcripts from training
- 8. Counseling summaries
- 9. Anecdotal forms (if any)
- 10. Date of graduation
- 12. Student Rules Agreement Sheet

SCHOOL OF DIAGNOSTIC MEDICAL SONOGRAPHY POLICY				
TITLE: FERPA, Review of Student Files and Recommendations			POLICY NUMBER:	
TENFA, Neview of Student Files and Neconfillendations			8.121	
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:	
November, 1999		Advisory Committee	Susan Black, R.D.M.S.	
In accordance with the Federal Family Educational Rights & Privacy Act (FERPA) of 1974 and subsequent amendments, academic records cannot be released without the student's consent. All outstanding financial, academic or administrative obligations to the Cleveland Clinic (CCF) must be absolved before a transcript can be processed for release.				
Any student wishing to review his/her permanent file may do so by contacting the Program Director.				
Any student wishing to obtain information from his/her file; such as transcripts or				

the School of Diagnostic Medical Sonography office or on line:

http://author.portals.ccf.org/alliedhealthed/Document-Library#13529812189-request-forms

Student who would like a recommendation for employment must complete a "Student Request for a Letter of Recommendation or Verbal Reference" form: http://author.portals.ccf.org/Portals/38/Documents/Student%20Recommendation%20Request %20-%20fillable.pdf?ver=2022-02-09-123501-913

POLICY			
TITLE:			POLICY NUMBER: 8.21
Record of Curriculum	n - Maintenance		
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:
November, 1999		Advisory Committee	Susan Black, R.D.M.S.
The Program Director is responsible to maintain a complete copy of the curriculum to include:  A. Description of all courses  B. Course outlines for all courses  C. Course objectives for all courses			

SCHOOL OF DIAGNOSTIC MEDICAL SONOGRAPHY POLICY			
TITLE:			POLICY NUMBER: 8.22
Record of Curriculum	- Instructor's Duties		
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:
November, 1999		Advisory Committee	Susan Black, R.D.M.S.

TITLE: Student Handbook/Policy manual			POLICY NUMBER: 8.31
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:
November, 1999		Advisory Committee	Susan Black, R.D.M.S.

A Student Handbook/ policy manual shall be printed that will include:

- a. Attendance policies
- b. Conduct policies
- c. Dress codes
- d. Academic standards
- e. Graduation requirements
- f. Clinical performance standards
- g. Probationary policy
- h. Employment
- i. Student benefits

The Student Handbook will be reviewed the first week of School and the signed Student Rules Agreement will be placed in the student's permanent file.

SCHOOL OF RADIOLOGIC TECHNOLOGY POLICY				
TITLE:			POLICY NUMBER:	
Periodic Program Evaluation			9.10	
EFFECTIVE DATE:	REVISED:	AUTHORIZED BY:	PREPARED BY:	
November 1999	2/4/04 March 2011	Advisory Committee	S. Black RDMS	
Ongoing Program evaluation will be conducted with the following tools:  - Graduate surveysannually - Employer surveys- annually - Student surveys- 4 <sup>th</sup> quarter - Faculty survey- 4 <sup>th</sup> quarter - Attrition/graduation rates- annually - ARDMS registry results- annually				
The results will be used to gauge the effectiveness of the Program, highlight weaknesses in the Program and act as a mechanism of change for areas of weakness.				