DIAGNOSTIC MEDICAL SONOGRAPHY

Student Handbook

19th Edition
I. STUDENT HANDBOOK PREFACE ______________________________________________________ 5

II. MONTGOMERY COLLEGE LEADERSHIP ____________________________________________ 6
   A. FACULTY DIRECTORY ___________________________________________________________ 6

III. DESCRIPTION OF THE PROFESSION ____________________________________________ 7

IV. PROGRAM PHILOSOPHY AND GOALS _____________________________________________ 8

V. ACCREDITATION __________________________________________________________________ 9

VI. MONTGOMERY COLLEGE POLICIES ________________________________________________ 10
   A. COLLEGE ACADEMIC SUPPORT SERVICES AND POLICIES ____________________________ 10
   B. ACADEMIC CALENDAR ___________________________________________________________ 10
   C. ADA INFORMATION AND COMPLIANCE _____________________________________________ 10
   D. MONTGOMERY COLLEGE ALERT SYSTEM ___________________________________________ 10
   E. COMBAT TO COLLEGE ___________________________________________________________ 10
   F. COUNSELING & ADVISING _______________________________________________________ 10
   G. DISABILITY SUPPORT SERVICES _________________________________________________ 11
   H. AUDIT POLICY __________________________________________________________________ 11
   I. SAFETY, SECURITY, & EMERGENCY OPERATIONS PLAN ________________________________ 11
   J. SEXUAL HARASSMENT OR DISCRIMINATION _________________________________________ 11
   K. MC STUDENT CODE OF CONDUCT ________________________________________________ 11
   L. APPLICATION FOR GRADUATION _________________________________________________ 11
   M. APPEALING A GRADE _____________________________________________________________ 11
   N. COMPLAINTS-GRIEVANCE POLICY ________________________________________________ 12
   O. INFORMAL GRIEVANCE PROCEDURE ______________________________________________ 12
   P. FORMAL GRIEVANCE PROCEDURE ________________________________________________ 12
   Q. COURSE WITHDRAWAL __________________________________________________________ 13
   R. FORMS FOR GRADUATION, INVOLUNTARY WITHDRAWAL, APPEALS ___________________ 13
   S. ACADEMIC RESTRICTIONS ______________________________________________________ 13
   T. LEARNING CENTERS AND ACADEMIC SUPPORT CENTERS ____________________________ 13
   U. ONLINE LEARNING ORIENTATION _________________________________________________ 14
   V. LIBRARY ______________________________________________________________________ 14
   W. MEDICAL LEARNING CENTER ______________________________________________________ 14
   X. MATH SCIENCE LEARNING CENTER ______________________________________________ 14
   Y. SCIENCE LEARNING CENTER _____________________________________________________ 14
   Z. WRITING, READING, AND LANGUAGE (WRL) CENTER __________________________________ 14

VII. DMS PROGRAM POLICIES _________________________________________________________ 15
   A. EVALUATION ___________________________________________________________________ 15
   B. PROGRAM REQUIREMENTS ______________________________________________________ 15
   C. PROFESSIONALISM POLICY _________________________________________________________________________________________________ 16
   D. PROGRESSION REQUIREMENTS ___________________________________________________ 16
   E. READMISSION / RE-ENROLLMENT POLICY __________________________________________ 17
   F. ATTENDANCE POLICIES _________________________________________________________ 17
   G. CLINICAL ABSENCES ____________________________________________________________ 18
   H. INCLEMENT WEATHER POLICY ____________________________________________________ 18
   I. ATTENDANCE AT EDUCATIONAL MEETINGS _________________________________________ 19
   J. ACADEMIC HONESTY _____________________________________________________________ 19
   K. CLASSROOM CONDUCT _________________________________________________________ 19

MC DMS faculty retain the right to modify content of this handbook as deemed necessary.  

Website: www.montgomerycollege.edu/dms
Location: TP/SS Campus - HS, Room 435
Department Phone: 240-567 5563
<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>L.</strong></td>
<td><strong>ONLINE CLASSROOM &amp; LAB BEHAVIOR</strong></td>
</tr>
<tr>
<td><strong>M.</strong></td>
<td><strong>DMS GRADING &amp; EXAMINATION POLICIES</strong></td>
</tr>
<tr>
<td><strong>N.</strong></td>
<td><strong>ACADEMIC SANCTIONS</strong></td>
</tr>
<tr>
<td><strong>O.</strong></td>
<td><strong>DISPUTED GRADE POLICY</strong></td>
</tr>
<tr>
<td><strong>P.</strong></td>
<td><strong>E-CHEATING</strong></td>
</tr>
<tr>
<td><strong>Q.</strong></td>
<td><strong>PLAGIARISM</strong></td>
</tr>
<tr>
<td><strong>R.</strong></td>
<td><strong>DISCIPLINARY ACTION POLICY</strong></td>
</tr>
<tr>
<td><strong>S.</strong></td>
<td><strong>ACADEMIC/CLINICAL PROBATION</strong></td>
</tr>
<tr>
<td><strong>T.</strong></td>
<td><strong>DISMISSAL FROM THE PROGRAM</strong></td>
</tr>
<tr>
<td><strong>U.</strong></td>
<td><strong>DMS SKILLS ENHANCEMENT LAB</strong></td>
</tr>
<tr>
<td><strong>V.</strong></td>
<td><strong>VOLUNTEER SCANNING POLICY ON CAMPUS IN DMS LAB</strong></td>
</tr>
<tr>
<td><strong>W.</strong></td>
<td><strong>MASS CASUALTY/ACTIVE SHOOTER OR LOCK DOWN SITUATION</strong></td>
</tr>
<tr>
<td><strong>X.</strong></td>
<td><strong>PROFESSIONAL ACTIVITIES AND ORGANIZATIONS</strong></td>
</tr>
<tr>
<td><strong>Y.</strong></td>
<td><strong>ADVISORY BOARD COMMITTEE</strong></td>
</tr>
<tr>
<td><strong>Z.</strong></td>
<td><strong>ANNUAL DMS AWARD FOR EXCELLENCE</strong></td>
</tr>
<tr>
<td><strong>AA.</strong></td>
<td><strong>DMS INDEPENDENT STUDY (SONO 200)</strong></td>
</tr>
<tr>
<td><strong>BB.</strong></td>
<td><strong>LIABILITY (MALPRACTICE) INSURANCE</strong></td>
</tr>
<tr>
<td><strong>CC.</strong></td>
<td><strong>HEALTH AND ACCIDENT INSURANCE</strong></td>
</tr>
<tr>
<td><strong>DD.</strong></td>
<td><strong>PHYSICAL AND HEALTH POLICIES</strong></td>
</tr>
<tr>
<td><strong>EE.</strong></td>
<td><strong>LATEX ALLERGY PRECAUTIONS</strong></td>
</tr>
<tr>
<td><strong>FF.</strong></td>
<td><strong>HEALTH SCIENCES PROGRAM PREGNANCY DISCLOSURE PROCEDURE</strong></td>
</tr>
<tr>
<td><strong>GG.</strong></td>
<td><strong>OPTIONS AFTER DISCLOSURE OF PREGNANCY</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>VIII.</th>
<th><strong>DIDACTIC EDUCATION</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A.</strong></td>
<td><strong>EDUCATIONAL OBJECTIVES</strong></td>
</tr>
<tr>
<td><strong>B.</strong></td>
<td><strong>LEARNING COMPETENCIES COMMON TO ALL CONCENTRATIONS</strong></td>
</tr>
<tr>
<td><strong>C.</strong></td>
<td><strong>HYBRID ONLINE LEARNING</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>IX.</th>
<th><strong>DMS CLINICAL POLICIES</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A.</strong></td>
<td><strong>COMPETENCY BASED CLINICAL EDUCATION</strong></td>
</tr>
<tr>
<td><strong>B.</strong></td>
<td><strong>CLINICAL EDUCATION ELIGIBILITY</strong></td>
</tr>
<tr>
<td><strong>C.</strong></td>
<td><strong>CPR CERTIFICATION</strong></td>
</tr>
<tr>
<td><strong>D.</strong></td>
<td><strong>CRIMINAL BACKGROUND CHECK &amp; DRUG TESTING</strong></td>
</tr>
<tr>
<td><strong>E.</strong></td>
<td><strong>CLINICAL EDUCATION OBJECTIVES</strong></td>
</tr>
<tr>
<td><strong>F.</strong></td>
<td><strong>CLINICAL PRACTICES AND POLICIES</strong></td>
</tr>
<tr>
<td><strong>G.</strong></td>
<td><strong>POLICY GOVERNING CLINICAL EDUCATION SCHEDULING</strong></td>
</tr>
<tr>
<td><strong>H.</strong></td>
<td><strong>ROLE OF CLINICAL COORDINATOR/CLINICAL FACULTY</strong></td>
</tr>
<tr>
<td><strong>I.</strong></td>
<td><strong>CLINICAL ROTATIONS</strong></td>
</tr>
<tr>
<td><strong>J.</strong></td>
<td><strong>STUDENT ASSIGNMENT TO CLINICAL AFFILIATE</strong></td>
</tr>
<tr>
<td><strong>K.</strong></td>
<td><strong>CLINICAL ASSIGNMENT TO CURRENT AFFILIATE OF STUDENT EMPLOYMENT</strong></td>
</tr>
<tr>
<td><strong>L.</strong></td>
<td><strong>CRITERIA FOR SELECTION OF CLINICAL ROTATION SITE</strong></td>
</tr>
<tr>
<td><strong>M.</strong></td>
<td><strong>CLINICAL ROTATION SELECTION PROCESS</strong></td>
</tr>
<tr>
<td><strong>N.</strong></td>
<td><strong>CLINICAL EDUCATION SCHEDULE POLICIES</strong></td>
</tr>
<tr>
<td><strong>O.</strong></td>
<td><strong>CLINICAL TRANSPORTATION AND PARKING POLICY</strong></td>
</tr>
<tr>
<td><strong>P.</strong></td>
<td><strong>PRE- AND POST- SCANNING ASSESSMENT</strong></td>
</tr>
<tr>
<td><strong>Q.</strong></td>
<td><strong>SCANNING POLICY AT CLINICAL</strong></td>
</tr>
<tr>
<td><strong>R.</strong></td>
<td><strong>GUIDELINES FOR CLINICAL SUPERVISION OF DMS STUDENTS</strong></td>
</tr>
<tr>
<td><strong>S.</strong></td>
<td><strong>PERSONAL APPEARANCE AND UNIFORM POLICY</strong></td>
</tr>
<tr>
<td><strong>T.</strong></td>
<td><strong>CLINICAL ACCOUNTABILITY</strong></td>
</tr>
</tbody>
</table>
MC DMS faculty retain the right to modify content of this handbook as deemed necessary.
I. Student Handbook Preface

The primary objective of this Student Handbook is to provide a ready reference manual for students in Diagnostic Medical Sonography. As such, this handbook does not replace the Policies and Procedures Manual, the Student Code of Conduct, the College Catalog or other Official College documents. These College documents are available for reference at the college website at http://montgomerycollege.edu.

All students at Montgomery College are subject to the rules and regulations in the current College catalog, the Student Handbook, the Student Code of Conduct, and the College Policy and Procedure Manual. In addition to these rules and regulations, there are policies, procedures, and guidelines that are specific to DMS students.

This handbook deals specifically with the policies and procedures for the DMS Program and serves to assist DMS students toward successful completion of their course of study. Each student has the responsibility to read thoroughly and review this handbook regularly and to understand its contents.

The Faculty reserves the right to modify, change, or delete any or all of these policies and procedures, in whole or in part.
II. Montgomery College Leadership

President
Dr. DeRionne P. Pollard
Vice President Provost (TP-SS Campus)
Dr. Bradley Stewart
Interim Dean of Health Sciences
Dr. Monique Davis

A. Faculty Directory
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III. Description of the Profession

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

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 Diagnostic Medical Sonographer generally performs the following:
1. Obtain, review and integrate pertinent patient history and supporting clinical data to facilitate optimum diagnostic results.

2. Perform appropriate procedures and record anatomical, pathological, and/or physiological data for interpretation by a physician.

3. Record, analyze and process diagnostic data and other pertinent observations made during the procedure for presentation to the interpreting physician.

4. Exercise discretion and judgment in the performance of sonographic and/or other diagnostic services.

5. Demonstrate communication skills with patients and colleagues.

6. Act in a professional and ethical manner.

7. Facilitate communication and education to elicit patient cooperation and understand of expectations and responds to questions regarding the sonographer examination.

IV. Program Philosophy and Goals

The philosophy and goals of the program interface with those of Montgomery College itself. The Program of Diagnostic Medical Sonography shares these goals, promoted by the college in its support of professionalism and academic excellence and the provision of qualified faculty. We offer a carefully designed academic environment, opportunities for on and off-campus reinforcement of lecture material (including clinical practicum) as well as other opportunities for professional and personal growth and development.

Any student who completely meets these standards (covered on the succeeding pages) and who is eligible for graduation should be able to function within a clinical setting as an entry level diagnostic medical sonographer.

Humanistic attitudes such as empathy, compassion and trust are fostered in both the didactic and clinical areas. The faculty believes that humanistic qualities are of key importance in any allied health profession. Through the cultivating of interpersonal relationships with patients and fellow health-care professionals, self-awareness and self-actualization may be enhanced.

The faculty constructs behavioral and performance goals throughout the program to produce graduates who are highly proficient and competent in the art and science of sonography. Students will become knowledgeable in the theoretical foundation of their profession and
become capable of functioning in a variety of clinical settings, which utilize the latest state-of-the-art imaging equipment and modalities.

As in any learning experience, Diagnostic Medical Sonography Program faculty will play the role of facilitator to the student. A competency-based program in which the didactic and clinical instruction is closely correlated will help students develop into professionals who are proficient in the art of problem solving. The faculty guides and directs the students in discovering the role that they must play by assisting them to actively participate and become responsible for their learning process in order for them to become proficient as practicing sonographers.

Finally, the program faculty feels that certification by the American Registry of Diagnostic Medical Sonographers is the “gold standard” for certification and should be an immediate goal of every graduate of this program. This certification plays a pivotal role in creating employment opportunities as well as other opportunities to contribute to the profession. The DMS Program encourages its graduates to complete their board requirements and take their exams within six months after graduation. Beyond this period, anyone who has completed the program and has not taken the board exams are advised to re-enroll or to form study circles to equip themselves with the necessary tools to pass the board exams. Graduates should be willing to share their knowledge with fellow sonographers, future and current students, and other allied health workers. Continuing education will enable these emerging sonographers to assume higher levels of responsibility in their employment setting, thereby creating opportunities for advancement up the corporate ladder.

The goal of the DMS Program is to:

- To prepare competent entry-level adult cardiac sonographers in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains; and/or

- To prepare competent entry-level general sonographers in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains; and/or

- To prepare competent entry-level vascular sonographers in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains

V. Accreditation

Montgomery College is accredited by the Middle States Association of Colleges and Secondary Schools, and the Program of Diagnostic Medical Sonography is accredited by the Commission on Accreditation of Allied Health Educational Programs (CAAHEP).

The Program of Diagnostic Medical Sonography is designed to meet or exceed the standards set by CAAHEP. Any student who completely meets these standards (covered on the succeeding pages) and who is eligible for graduation should be able to function within a clinical setting as an entry level diagnostic medical sonographer.
VI. Montgomery College Policies

A. College Academic Support Services and Policies

Links to support services are found in the Student Affairs Division on the MC website: http://cms.montgomerycollege.edu/edu/secondary5.aspx?urlid=55

In addition to DMS program course requirements and objectives, Montgomery College has information on its web site (see link below) to assist you in having a successful experience both inside and outside of the classroom. It is important that you read and understand this information.

The link below provides information and other resources to areas that pertain to the following: student behavior (student code of conduct), student e-mail, the tobacco free policy, withdraw and refund dates, disability support services, veteran services, how to access information on delayed openings and closings, how to register for the Montgomery College alert System, and finally, how closings and delays can impact your classes. As rules and regulations, change they will be updated and you will be able to access them through the link. By accepting your seat in the DMS program, you are indicating that you acknowledge and accept these policies. http://cms.montgomerycollege.edu/mcsyllabus/

B. Academic Calendar

Dates and deadlines related to admissions, registration, financial aid, payment, advising, and more. Includes dates for Spring break, midterm exams, semester start dates, etc. http://www.montgomerycollege.edu/admissions-registration/dates-and-deadlines.html

C. ADA Information and Compliance

Information for MC students with disabilities and the Americans with Disabilities Act. http://cms.montgomerycollege.edu/accessibility@mc/

D. Montgomery College ALERT System

Sign up for Alert Montgomery the official emergency communications service for Montgomery County, MD. During a major crisis, emergency or severe weather event, Montgomery County officials can send event updates, warnings and instructions directly to you on any of your devices. https://member.everbridge.net/index/1332612387832009#/login

E. Combat to College

If you are a military service member, veteran or dependent transitioning into college. http://www.montgomerycollege.edu/combat2college

F. Counseling & Advising
Academic advising and short-term counseling. https://www.montgomerycollege.edu/counseling-and-advising/

G. Disability Support Services

If you are requesting a reasonable accommodation related to a disability. Any student who needs an accommodation due to a disability should contact the instructor. In order to receive accommodations, a letter from Disability Support Services (G-SA172; R–CB122; or TP/SS–ST 122) will be needed. Any student who may need assistance in the event of an emergency evacuation must identify to the Disability Support Services Office; guidelines for emergency evacuations for individuals with disabilities are found at: www.montgomerycollege.edu/dss Anyone who has a documented disability, which may require special accommodations, should notify the instructor no later than the second-class meeting.

H. Audit Policy

The Audit Policy is stated in the Academic Requirements section of the Montgomery College Catalog and online at: http://catalog.montgomerycollege.edu/content.php?catoid=2&navoid=138

I. Safety, Security, & Emergency Operations Plan


J. Sexual Harassment or Discrimination

Office of Equity and Diversity http://cms.montgomerycollege.edu/TitleIX/. 

K. MC Student Code of Conduct

If you have questions regarding behavioral expectations. http://cms.montgomerycollege.edu/WorkArea/DAsset.aspx?id=35945

L. Application for Graduation

Students must complete the Graduation Application online. Student’s failure to complete this process may delay graduation due to student ineligibility. Students are responsible for confirming completion of their graduation check. In order to qualify as a candidate for the degree of Associate of Applied Science in Diagnostic Medical Sonography all degree requirements must be met. https://www.montgomerycollege.edu/_documents/admissions-registration/graduation-application.pdf

M. Appealing a Grade
If you do not agree with a grade you received on any course assignment, lab assignment, discussion topic, case study, quiz or exam you have one week to contest that grade from the date the grade was posted. If you wish to appeal the final grade in any course, you must follow the MC Guide to Dispute a Final Course Grade.

http://cms.montgomerycollege.edu/WorkArea/DAsset.aspx?id=12377

N. Complaints-Grievance Policy

Montgomery College is committed to equal opportunity that assures access, equity, and diversity.

Montgomery College prohibits discrimination against any person on the basis of age, color, citizenship status, current or former military status, disability, gender, gender identity and expression, genetic information, national origin, marital status, race, religion, sex, or sexual orientation. The College is committed to providing an environment in which all persons are provided the opportunity for employment and/or participation in academic programs, and other College activities free from any form of harassment as prohibited by federal regulations and state laws. Any college student who believes that he or she has been subjected to discrimination on the basis of disability, or has been denied access or accommodations required by law shall have the right to invoke the Grievance Procedure.

O. Informal Grievance Procedure

Students are encouraged to discuss disability-related concerns with their DSS Counselor first. The DSS office will attempt to resolve issues by assisting the student in discussing concerns with the faculty member, department, or program. If a satisfactory resolution is not reached by this process, the student may contact the Director of ADA Compliance, Christopher Moy 240-567-5412; Christopher.moy@montgomerycollege.edu, for further remedy. The formal Grievance process may be initiated at any time.

P. Formal Grievance Procedure

Any student or employee may file a discrimination complaint with the Director of Employee Relations, Diversity, and Inclusion (ERDI) when he or she believes a discriminatory violation has occurred. A formal discrimination complaint must be in writing on the EEO Complaint Form and include all pertinent information concerning the individual's complaint. All complaints will be subject to a comprehensive investigation. A discrimination complaint must be filed within 180 calendar days after the date the alleged violation occurred. If the discriminatory behavior is or has been continuous, the complainant should consult the Director of ERDI immediately.
More detailed information concerning the complaint procedures is available in the offices of the Dean of Student Services on all three campuses and the **Office of Employee Relations, Diversity, and Inclusion.** The complete text of the Board of Trustees - Montgomery College, Equal Opportunity and Non-Discrimination Policy - Section 31006 is located at: **Equal Opportunity and Non-Discrimination Policy (PDF, )**

Students may also report incidents to the Department of Education’s Office of Civil Rights: U.S. Department of Education Office for Civil Rights 800-421-3481; **OCR@ed.gov**

Q. **Course Withdrawal**

The attendance policy published in the current Montgomery College catalog/Student Handbook is the policy that is followed for the DMS program. Each student is expected to attend all classes and clinical days. If a student does not attend a scheduled class/clinical, it is, his/her responsibility to obtain the information/experience missed and make up the work. Students are responsible for withdrawing from a course if they no longer wish to be enrolled. These policies are found in the Montgomery College Catalog and online at: **http://catalog.montgomerycollege.edu/**

It is the student’s responsibility to drop a course. Non-attendance of classes or failure to pay does not constitute official withdrawal.

R. **Forms for Graduation, Involuntary Withdrawal, Appeals**

http://cms.montgomerycollege.edu/edu/department2.aspx?id=10072

S. **Academic Restrictions**

Details of Montgomery College academic restrictions are published in the college catalog. Restrictions, which apply specifically to the Diagnostic Medical Sonography Program, include, but are not limited to, the following. Students will not be allowed to continue under the following conditions:

1. DMS course grade falls below a “C” in Didactic courses or below a “B” in Clinical courses.

2. Inappropriate (unprofessional, unethical, unsafe, etc.) behavior or conduct of a student is reported at any time while at an assigned clinical affiliate or while on campus.

3. Placement on Academic Restriction.

4. Expulsion from clinical site.

T. **Learning Centers and Academic Support Centers**
If you are a student who would benefit from tutoring and/or support in reading, writing languages, mathematics, Science, and Technology.  
http://cms.montgomerycollege.edu/learningcenters/

Office of E-Learning, Innovation, and Teaching Excellence (ELITE)

The Office of E-Learning, Innovation, and Teaching Excellence (ELITE) provides comprehensive services that empower students with skills that are essential to success in distance education or technology-enhanced courses. http://cms.montgomerycollege.edu/distance/

U. Online Learning Orientation

Students can access the online orientation to get a better understanding of how online learning works at Montgomery College. http://cms.montgomerycollege.edu/distance/before/osorientation/

V. Library

In print and online resources available through MC. http://cms.montgomerycollege.edu/libraries

W. Medical Learning Center

The Medical Learning Center has state of the art computers, books, videos and a comfortable environment for students to learn. All students must present MC Student ID card to use materials in the Medical Learning Center. http://www.montgomerycollege.edu/Departments/medlearnp/

X. Math Science Learning Center

The Math Science Learning Center provides a supportive environment outside the classroom where you can work at your own pace. We are here to assist you in being a successful student. http://cms.montgomerycollege.edu/edu/department.aspx?id=10848

Y. Science Learning Center

The Science Learning Center (SLC) is located in the Science North Building, Room 101, on the Takoma Park Campus. We provide educational services and assistance for students enrolled in biology and physical science courses. Included in these services are staff and student assistants who help you with your questions about material in those courses. The SLC also provides access to 40 internet-connected computers. The SLC staff directs students to online resources, and provides supplemental software, physical models, microscopes, and slides that support course material. The SLC functions as a supportive environment where students can receive academic assistance, study independently, or collaborate with fellow students to understand and master science coursework. http://cms.montgomerycollege.edu/edu/department.aspx?id=24413

Z. Writing, Reading, and Language (WRL) Center
The WRL Center serves as a resource to students, faculty, and staff and provides support services to students in all classes that require reading, writing, speech, American English pronunciation, and the Arabic, French, and Spanish languages. Services provided are in the forms of on-to-one and group tutoring, specialized workshops as well as access to instructional technology, the Microsoft Office software suite, WEPA print services, and various resources assigned by faculty. [http://cms.montgomerycollege.edu/EDU/Department.aspx?id=5293](http://cms.montgomerycollege.edu/EDU/Department.aspx?id=5293)

VII. DMS Program Policies

A. Evaluation

Throughout the course of the DMS Program, students will be asked to participate in the evaluation process of program faculty, curriculum and clinical rotations.

B. Program Requirements

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

Each student will:

1. Adhere to all college policies, including the DMS and MC Student Code of Conduct.
2. Adhere to the student role, as outlined by clinical affiliates.
3. Adhere to the SDMS Code of Ethics for sonographers.
4. Dress appropriately in accordance with the DMS Uniform Code (included in DMS Student Handbook) and/or the assigned clinical affiliate.
5. Follow HIPPA guidelines, regarding patient confidentiality, at all times.
6. Demonstrate respect for patient privacy and individual rights as outlined in the Patient’s Bill of Rights.
7. Deliver optimum patient care in a non-discriminatory manner.
8. Document all services provided using proper (Standard American) English (verbal and written).
9. Report immediately, any errors of omission to the program director.
10. Adhere to OSHA regulations.
11. Demonstrate an ability to communicate accurately in (Standard American) English.
12. Demonstrate physical, cognitive and psychological competence.
13. Demonstrate a caring, empathetic and non-selfish attitude with proper consideration for individual’s age, sex, culture, religion and beliefs.
14. Show respect for individuals and avoid the use of words or body language that could be construed as derogatory.
15. Physically able to perform ultrasound.
16. Utilize the internet or websites to search for information pertaining to ultrasound.
17. Have reliable means to transportation.
18. Inform the concentration clinical coordinator and clinical instructor(s) whenever unable to attend/complete clinical assignment.
19. Comply annual requirements to obtain criminal background checks and toxicology tests, administered by a third party vendor.
20. Provide necessary documentation of vaccinations and physical as required by the clinical affiliates.
21. Provide proof that in person BLS-CPR training for the health care professional has been completed and is current throughout the program.
22. Meet all prerequisite requirements for clinical and didactic courses.
23. Demonstrate successful attainment of ARDMS (or equivalent) prerequisite, SPI and Concentration Specialty exam requirement, for progression in the program.

C. **Professionalism Policy**

As participants in a professional education program, DMS students shall conduct themselves in a professional manner at all times.

Academic professionalism includes respect for the faculty and rights of all students, prompt attendance for classes, labs, seminars, and clinicals and avoidance of any behavior which disrupts or interferes with academic proceedings. Professionalism also requires adherence to ethical principles.

All DMS students share the same goal: to graduate as knowledgeable and competent entry level sonographers. Each individual receives the similar educational opportunities, but must reach the goal in their own way and allow others to do the same. When problems are encountered, they are dealt with on an individual basis. It is important for students to realize that the program is not a competition.

Students are expected to contact their clinical instructor and clinical faculty to report absences and/or late arrivals before they occur. In the event of the need to immediately speak to a Clinical Faculty, the DMS Administrative Assistant should be called at (240) 567-5563.

D. **Progression Requirements**

The Diagnostic Medical Sonography curriculum is dependent upon proper sequencing of courses. The general education courses in the DMS curriculum are to be completed prior to the DMS program. SONO courses must also be completed in the appropriate sequence. It is the responsibility of each student to meet all pre and co-requisite courses and third-party requirements. A student will be denied registration and administratively dropped from a course if pre and co-requisite requirements have not been met.
The student is to meet with their designated faculty advisor to plan a course of study for each year while in attendance at Montgomery College. Any student who is unable to satisfactorily meet curriculum requirements will not progress in the DMS curriculum. Any student who withdraws from the DMS Program, regardless of the reason, will be subject to readmission criteria as set by the Diagnostic Medical Sonography program. Meeting previously established criteria, however, does not guarantee automatic re-entry.

Students are required to submit proof from ARDMS of their results and successful completion of the SPI Physics board exam prior to the start of their second year of study in the program. Progression in the DMS program is dependent on the successful completion of the ARDMS SPI exam. Students are required to sit for all eligible concentration specialty exam(s) and submit proof from the ARDMS of their results prior to graduation.

E. Readmission / Re-Enrollment Policy

Any student whose academic work has been interrupted for one or more semesters must reapply for admission to the program. Because DMS is a competency-based program, students must complete clinical and didactic coursework in the designated sequenced order. Any student who has withdrawn from the program for an acceptable reason (i.e. military deployment, medical leave, etc.) or has not successfully completed the program will need to reapply within a one-year time frame otherwise will have to repeat the DMS SONO courses from the beginning of the sequence (some exceptions may apply determined on an individual basis).

A student who has withdrawn from the DMS program will be allowed to apply for readmission to the program. Any student who has withdrawn from the DMS program and who has not maintained good academic standing is allowed to reapply for admission to the program only once. Students who have been dismissed from the DMS program for academic dishonesty or any other disciplinary reason are not eligible to reapply for admission to the DMS program.

Students who have failed a DMS course more than twice will not be eligible to continue (progress) in the program or reapply to the DMS program.

F. Attendance Policies

Attendance and punctuality are expected and directly correlate with successful course completion. In case of an illness or emergency that causes an absence, contact the Course instructor via email.

Students are expected to attend all class sessions except in cases of emergency (e.g. illness, death in the immediate family), the observation of a major religious holiday (the observance of which
requires restrictions on daily activity), or when participating in official Montgomery College functions. Students are not permitted to attend clinical rotation when the college is closed.

In cases involving excessive absences from the course, the student may be administratively withdrawn from the course. An excessive absence is defined as one more absence than the number of classes per week during a fall or spring semester; the number of absences is prorated for accelerated sessions. Refer to Montgomery College policy related to attendance (Academic Regulation 9.823).

G. Clinical Absences

All students must meet the required clinical hours. When a student will be absent from his/her assigned clinical site, the student must first notify the Clinical Instructor, followed by immediate communications to the Clinical Faculty and Clinical Coordinator. All absences from clinical must be made up as soon possible or within two weeks whichever is soonest. Students who have not completed their clinical hours within the clinical rotation period will not be allowed to advance to the next clinical course or in the case of the final clinical course; they will not be approved for graduation. In the event of a delay in graduation, successfully completed board exams completed are revoked by the ARDMS. The student will be responsible to reapply, purchase and successfully complete the concentration specialty board exams.

Each student has the responsibility of recording in Trajecsys, the daily time and case log of studies participated in at their assigned clinical site. The reported hours are submitted via the Trajecsys Clinical Tracking System and approved by the Clinical Instructors and reviewed by the Clinical Coordinator/Clinical Faculty.

Students are cautioned, however, to record their time logs and case logs correctly in Trajecsys and under no circumstances should a student record information (time, etc.) falsely. If there is any misrepresentation of hourly clinical investment, such action would constitute falsification of records and all appropriate disciplinary action will be taken.

H. Inclement Weather Policy

In the event that Montgomery College should be declared closed due to inclement weather conditions such as snow, sleet, ice, or any other emergency, an announcement will be made as early as possible on area radio stations and the MC website. If an announcement concerning any (Montgomery College) closing is not made before a student must leave for the college or the assigned clinical affiliate, the student must exercise his or her best judgment in making an attendance decision. This policy shall apply to day (clinical training, etc.), as well as evening classes and all students are expected to follow through with the appropriate phone calls to program faculty (clinical instructor, course instructor, clinical coordinator and program
coordination, etc.) indicating any potential lateness or absence. Finally, when the college has announced an official closing due to inclement weather, students are not required to report to their classes nor are they required to report to their clinical affiliates. Such missed hours will not affect the total hours, provided the schedule for clinical requirements is met.

Note: An announcement of “Montgomery County Public Schools” closing does not include “Montgomery College.” Instead, and at all times, students are requested to listen for a specific “Montgomery College” announcement of closing.

I. Attendance at Educational Meetings

Students may be granted permission to attend educational meetings upon approval. All expenses are the responsibility of the student. Attendance at educational meetings is not counted as clinical hours unless specified by the Program or Clinical Coordinator. Be advised that travel to and from education meetings is done at the students’ expense and recognize that Montgomery College is not responsible for the students’ safety and well-being.

J. Academic Honesty

Successful students always make sure that their work is original. This is important because the instructor must be able to gauge what the student has learned and that the material has been mastered. Each student is expected to perform his/her own academic work. This includes all didactic and clinical course work. Plagiarism and other forms of academic dishonesty, including giving or receiving help on any graded didactic/clinical work, misrepresenting someone else’s work as your own, as well as representing a compilation of patient data/images/findings as a single exam submission, are considered serious academic infractions.

Students are personally responsible for understanding the various forms of academic dishonesty as they are explained in the "Student Code of Conduct" and the DMS Student Handbook. Ignorance of any requirement for academic honesty will not constitute an excuse from disciplinary proceedings.

Any form of academic dishonesty on work is grounds failure of the course and dismissal from the program. Should you be dismissed from the program for academic dishonesty you will not be eligible to reapply to the DMS program.

K. Classroom Conduct

Academic dishonesty is strictly prohibited. Examples of academic dishonesty are: cheating on exams, copying another’s work or allowing your work to be copied; plagiarism: presenting the work of another as your own in a paper, exam, or other assignment.
Students do not have the right to interfere with the freedom of the faculty to teach or the rights of students to learn. All students are expected to be respectful and considerate in the classroom. This includes turning off cell phones, avoiding argumentative or disruptive behavior or dominating the classroom discussion. Students are expected to refrain from disrupting the class by such behaviors as whispering, or otherwise distracting the instructor and students. All students should be familiar with the Montgomery College Student Code of Conduct. This document specifies standards of student behavior, including disciplinary procedures and appeal procedures. The full 15-page document is available on the college website.

L. Online Classroom & Lab Behavior

Every student is expected to behave in ways, which promote a teaching and learning atmosphere. Students have the right to learn, however, they do not have the right to interfere with the freedom of the faculty to teach or the rights of other students to learn. It is expected that all students will be treated respectfully in return for respectful behavior.

All online and in-lab discussions should be carried out in a way that keeps the classroom environment respectful of the rights of others. Students are expected to conduct themselves in ways that create an open and safe learning and teaching environment that is free from such things as violence, intimidation, and harassment. Please make sure that you obtain and read a copy of the current Student Handbook that contains the Student Code of Conduct.

M. DMS Grading & Examination Policies

Sonography is a profession in which less than adequate performance may cause patients to suffer real harm, hence standards must be maintained and aimed to be high enough to insure the effectiveness and competency of our graduates. The DMS Program number and letter-grading system is as follows:

Students receiving a grade below a 78% in a didactic course must repeat the course satisfactorily before proceeding to the next semester in the DMS Program. Students receiving a grade below an 86% in a clinical course must repeat the course satisfactorily before proceeding to the next semester in the DMS Program.

And

Each Scanning Lab Assignment and Clinical Competency must meet the minimum benchmark (see scanning lab rubric grading criteria) to demonstrate scanning competency with a minimum grade of 86%. Successful completion of ALL Scanning Lab Assignments or Clinical Competencies is required for completion of the course.

And

Students receiving a grade below a 78% on a midterm and/or final exam are required to
remediate the exam (See Remediation Policy in course syllabus). Failure to remediate a midterm or final exam with a grade below a 78% will lead to the unsuccessful completion of this course.

Students receiving a grade below an 86% on a clinical scan exam are required to remediate the scan exam (See Remediation Policy) Failure to remediate a scan exam with a grade below an 86% will lead to the unsuccessful completion of this course.

And

All graded work is due before the final week of the semester. Work not completed by this due date will be recorded as a zero. All coursework must be completed prior to sitting for the Final Exam in didactic courses and before sitting for the scan exam in clinical courses.

Provided (Below) is the grading scale used in this course and for all Didactic courses in the DMS Program. Course grades are not rounded up.

<table>
<thead>
<tr>
<th>Grade Range</th>
<th>Letter Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>100-93%</td>
<td>A</td>
</tr>
<tr>
<td>86-92%</td>
<td>B</td>
</tr>
<tr>
<td>78-85%</td>
<td>C</td>
</tr>
<tr>
<td>77%-below</td>
<td>F</td>
</tr>
</tbody>
</table>

Provided (Below) is the grading scale used in this course and for all Clinical courses in the DMS Program. Course grades are not rounded up.

<table>
<thead>
<tr>
<th>Grade Range</th>
<th>Letter Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>100-93%</td>
<td>A</td>
</tr>
<tr>
<td>86-92%</td>
<td>B</td>
</tr>
<tr>
<td>85%-below</td>
<td>F</td>
</tr>
</tbody>
</table>

The passing grade for clinical courses is 86 or above. Students must maintain a minimum grade of “C” in all Diagnostic Medical Sonography Didactic courses, a minimum grade of “B” in Clinical courses, and maintain an overall grade point average of 2.0 to be considered in good standing in the program and eligible to advance to the next semester. In all clinical courses, the student, at the end of the course, must pass a scan exam with a grade of 86 or higher. Students not meeting all above criteria will not be permitted to continue taking DMS courses. Since DMS courses usually are offered once a year, students who fail can continue with their general education courses in the curriculum and may apply for readmission into the program the following year. (Refer to Readmission Policy).

N. Academic Sanctions

Faculty members may impose sanctions, as directed by the Dean of Student Services for violations of academic ethics and misconduct in the clinical areas.
O. Disputed Grade Policy

Students are responsible for following the instructions in the Policies and Procedures Manual for the College, Academic Regulations, 9.44 Disputed Grades.

P. e-Cheating

Examples of e-Cheating include, but are not limited to:

1. Sharing or copying answers through the use of personal digital media, such as cell phones, text messaging, instant messaging, iPods or other personal media devices, flash drives, e-cheating discussion forums, email, etc. during an assignment or test.

2. Using an internet browser or search engine during an online test to find answers or any other test-related information. Online tests are currently accessed through Blackboard Learning Platform, and any attempt to access the internet or other resources outside of the testing screen while undergoing assessment process will be considered cheating.

3. Sharing or copying admittance passwords from online tests in order to access the test from anywhere other than the Medical Testing Center, or to distribute test materials to other students, is also considered cheating.

4. Sharing, borrowing, or copying answers or answer keys from assignments or tests from a previous semester/class to use during an assignment or test from the current semester.

5. Using lecture notes or other unauthorized materials to provide answers during the tests.

6. During online assignments or testing through the Medical Testing Center, textbooks, notebooks, backpacks, purses, or any type of personal digital media devices will NOT be allowed into the testing room. Failure to comply is considered cheating.

7. Unauthorized electronic entries to the evaluation survey administration management of the clinical tracking system.
Q. **Plagiarism**

Unauthorized duplication or collaboration of any graded work (exams, laboratory exercises, assignments, projects, etc.) in any way or form (verbal, visual, physical, etc.) shall constitute plagiarism as each student is expected to submit or present his or her original work, except in instances where group work is permitted. Duplication of images or films not taken by the student themselves, but submitted as an original work will be considered as plagiarism. Student exams and lab exercises are considered Program property and will be kept in the students’ permanent folder. Students have access to them for review, but are not permitted to copy the exams and the exercises in any format.

Good academic work is based on originality. Plagiarism is dishonest and will not be tolerated in an academic setting. The consequences of plagiarizing are detailed in the *MC Student Handbook*. In short, when such misconduct is established as having occurred, the student faces possible disciplinary actions ranging from admonition to dismissal, along with any grade penalty the instructor might impose.

The *MC Student Handbook* statement concerning cheating and academic dishonesty also applies to the online and computerized components of all DMS courses. The DMS faculty has ZERO tolerance for academic dishonesty in any aspect of the educational process.

R. **Disciplinary Action Policy**

Students who violate policy or procedure established by the College shall be subject to disciplinary action. [https://www.montgomerycollege.edu/search/?q=student+disciplinary+](https://www.montgomerycollege.edu/search/?q=student+disciplinary+)

S. **Academic/Clinical Probation**

Academic and/or Clinical probation may be warranted when the student is not making satisfactory academic or clinical progress. Students, who fail to achieve established academic or clinical standards will not qualify to progress in the program.

T. **Dismissal from the Program**

Dismissal can occur for any of the following reasons:

1. Failure to maintain academic or clinical standards (Academic & Clinical Standards policies).
2. Breach of institutional, departmental or programmatic policies, procedures, rules and regulations.
3. Possession or distribution of illegal drugs or controlled substances.
4. Malicious destruction or theft of patient, visitor, employee, or institutional property.
5. Reporting to class, lab or clinicals under the influence of alcohol, illegal drugs or controlled substances.
6. Possession of a weapon while on institutional grounds.
7. Academic or clinical dishonesty.
8. Falsification of records or documentation.
9. Absence without permission or proper explanation.
11. Lack of ability, integrity, ethics, or proficiency.
12. Insubordination
13. Dereliction of clinical duty (such as HIPAA violation).

All disciplinary actions are subject to due process. Students should refer to the Due Process policy in the MC Student Handbook for procedural specifics and time frames for appealing disciplinary decisions.

U. DMS Skills Enhancement Lab

The DMS Skills Enhancement Lab provides students an opportunity to attend optional lab to scan one another or provide their own models to scan. A published schedule of Skills Enhancement lab dates and times are provided on the clinical wiki http://mcdmsclinical.pbworks.com/.

V. Volunteer Scanning Policy on Campus in DMS Lab

1. DMS faculty and Staff are not permitted to volunteer to be scanned.
2. Volunteers scanned in the lab do not count as graded competencies.
3. Scanning volunteers and students are subject to laboratory guidelines and safety requirements.
4. Transvaginal/Breast/Scrotal scanning requires a chaperone in lab.
5. All Obstetric (OB) scan volunteers are scheduled through the DMS Administrative Assistant. All volunteers must complete required paperwork, read, and sign the Scan Waiver Forms prior to being scanned. Each volunteer will be pre-scanned by the supervising DMS faculty. OB scan volunteers need to have at least one complete unremarkable OB sonogram performed by their OB/Gyn Doctor prior to volunteering to be a scan volunteer.

W. Mass Casualty/Active Shooter or Lock Down Situation
In the event that a mass casualty or a lockdown situation arises at the clinical site, a student is advised to report immediately to the supervising sonographer or the Head of the Department. In case of a mass casualty situation, if the student’s presence is not required, the student should take whatever action that will least put him or her in danger and go home. However, if the student’s presence at the site is mandatory (i.e. site is under quarantine), the student is responsible for following the clinical site’s directives and will leave only as soon as deemed safe. In the case of a Lock Down situation, the student must adhere to the security measures and policies of the affiliated site.

X. Professional Activities and Organizations

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

1. American Institute of Ultrasound in Medicine (AIUM)
2. American Society of Echocardiography (ASE)
3. Maryland Regional Vascular Society (MRVS)
4. Maryland Society of Diagnostic Medical Sonographers (MSDMS)
5. National Society of Cardiopulmonary Technologists (NCP)
6. Society of Diagnostic Medical Sonographers (SDMS)
7. Society of Vascular Technologists (SVT)

Y. Advisory Board Committee

The DMS Advisory Board Committee consists of community members that represent individuals from various aspects of the sonography field (physicians, hospital administrators, sonographers, faculty, students, college administrators and a public community member) who share an interest in the advancement and development of the DMS Program. Advisory meetings are held once a year. The business of the committee is to review ongoing program operations and provide recommendations for change or improvement.

Z. Annual DMS Award for Excellence

Registered students in their last spring semester of the DMS Program are eligible for a DMS Award for excellence which is given annually. The criteria for this award are as follows: The recipient must be selected by the DMS Faculty and demonstrates:

1. respect and ability to get along with peers, faculty, and clinical instructors;
2. maturity of judgment;
3. confidence in one’s ability to perform one’s function with care;
4. integrity of character;
5. genuine concern for others welfare; and,
6. willingness to be of service to the college, program and the community served.

AA. **DMS Independent Study (SONO 200)**

The SONO 200 Independent Study course serves as a refresher course and is a prerequisite course for students re-entering the program clinical and/or course sequence after withdrawing, stepping out, and/or failing a SONO course.

Through independent study, Sonography students may refresh clinical skills/techniques/procedures, conduct research, contribute to professional advancements and/or participate in case study critiques. Students will be assigned to a Diagnostic Medical Sonography faculty for guidance and supervision. Letter designators in the schedule of classes will distinguish the 1, 2, 3, and 4-credit offerings of SONO 200. The number of hours (1 credit hour = 30 hours) required to complete for SONO 200 will be determined on a case by case basis. (TP/SS only)

**PREREQUISITE:** Admission to the DMS program or permission of the department.

BB. **Liability (Malpractice) Insurance**

Each student will be held responsible for his or her actions while in contact with patients and at the assigned clinical affiliate(s). Montgomery College provides liability insurance for all DMS students in attendance at an approved clinical site during (Coordinator-assigned) clinical hours. All incidents/accidents *should be reported immediately to the Clinical Instructor as well as to the Clinical Coordinator. Affiliate and MCDMS Program incident/accident reports should be completed as thoroughly and accurately as possible and immediately submitted to the appropriate institutions (i.e. clinical affiliate and Montgomery College).

Students who choose to volunteer/log-in additional hours at a clinical site must have the written authorization of the clinical site instructor and clinical coordinator. The hours beyond college-designated scheduled clinical time that are not pre-approved will not be covered by the college insurance policy.

The DMS Program strongly recommends that each student acquires personal liability insurance for the duration of the program. Please contact the SDMS for more information on student malpractice insurance.

CC. **Health and Accident Insurance**
In the case of accident or illness, which occurs during school and/or MCDMS-approved clinical hours, the following policies will apply. If a student becomes ill or injured while at an assigned clinical affiliate, he or she should report this immediately to the Clinical Instructor and adhere to the particular institution’s protocol for handling illnesses, accidents, etc. Additionally, a Montgomery College DMS Program Incident Report should be completed and submitted to the Clinical Coordinator or Program Coordinator (fax number: 240-567-5561).

Each student is held responsible for ensuring that he or she is adequately covered for health as well as accidental occurrences while on clinical affiliate grounds, as students will be held liable for incurring any cost(s) for personal treatment, etc. To this end, it is advisable that students contact Health Maintenance Organizations, etc. as well as automobile and general liability insurance agents to arrange for the appropriate coverage.

Agreements between Montgomery College and cooperating clinical affiliates state the rules for the (appropriate) utilization of clinical facilities. These agreements do not require either the college or the facility to be held responsible for any expenses incurred by any student due to injury or damages sustained during their (Coordinator-approved) clinical training. Students are individually held responsible for such expenses and are therefore strongly urged to be covered by the proper insurance (health, liability, etc.).

DD. Physical and Health Policies

Following a student’s acceptance into the DMS Program, documentation of a complete physical examination (“health assessment”) performed by a board-certified physician must be submitted and approved to CastleBranch (third party vendor). This physical examination should include a complete blood count, urinalysis, PPD/TB (Mantoux) test (documentation of a TB “clearance” must be submitted for every academic year), MMR and other immunization(s) history as well as evidence of the Hepatitis B vaccine, Flu immunizations. Failure to complete and submit the health documentation to CastleBranch as specified at Students Orientation, will be grounds to forfeit student’s seat in the program, and the student will be unable to progress in the program.

During student training while at a (program-approved) clinical affiliate, a student may come in contact with disease-causing agents or microorganisms. It is therefore expected that all students exercise common sense and adhere to OSHA regulations in their delivery of service and care while in their healthcare setting. Known or strongly suspected cases of exposure to TB bacteria should be followed up immediately with the accurate completion of (affiliate and MCDMS) incident reports and appropriate follow-up visit(s) to a physician. Should a health or life-threatening incident or accident occur while on the physical premises of Montgomery College, Security Staff may ultimately be the ones who supervise transition to an acute care facility.

EE. Latex Allergy Precautions
WARNING – PEOPLE WHO ARE EXPOSED TO LATEX GLOVES AND OTHER PRODUCTS CONTAINING NATURAL RUBBER LATEX MAY DEVELOP ALLERGIC REACTIONS. TO AVOID SUCH REACTION, FOLLOW THESE STEPS:

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

Students with latex allergies are required to notify their Clinical Faculty/Clinical Instructor regarding their allergies. The student is responsible for avoiding latex products and for using alternative products which are available at the lab.

FF. Health Sciences Program Pregnancy Disclosure Procedure

Procedure Statement: A student who is, or becomes, pregnant is strongly encouraged to notify her course instructors or the Title IX Coordinator as soon as possible. By doing so, the student and instructors and the Title IX Coordinator can collaborate and develop an appropriate plan for the continuation of the student’s education in light of the unique nature of the College’s nursing and health sciences programs and their clinical requirements, as well as particular challenges the student may face while pregnant or when recovering from childbirth (e.g., missed classes, make-
up work, etc.). However, the choice to declare a pregnancy is voluntary, and a student is not required to disclose this information to the College.

Refer to Addendum A and B on pages 46 and 47.

GG. Options After Disclosure of Pregnancy

Once a student has voluntarily decided to disclose a pregnancy to the College, the student has several options, as described below. The instructor will set up an interactive meeting with the student and the Title IX Coordinator.

A student who has questions about the pregnancy disclosure procedure or who is concerned about its implementation should contact Christopher Moy, Director of ADA and Title IX Compliance; Christopher.moy@montgomerycollege.edu, 240-567-5412, 900 Hungerford Dr., Rockville, MD 20850, Mannakee Building, Rm # 150.
VIII. Didactic Education

A. Educational Objectives

With a combination of classroom education, lab, and distance learning education, students will receive instruction in such areas as the physics of diagnostic ultrasound, scanning techniques, cross-sectional anatomy, physiology and pathophysiology of human body systems. At the completion of each clinical rotation, the student must demonstrate by verbal, written and scanning performances, competency in the recognition, and interpretation of normal and abnormal sonographic patterns in organ systems. Knowledge gained in the classroom setting is directly related to clinical training and will need to be retained in order to draw and maximize direct parallels with the clinical experience. Refer to individual course syllabi for, specific course objectives.

B. Learning Competencies Common to All Concentrations

Knowledge gained in the clinical setting is directly related to didactic education and will need to be retained in order to draw and maximize direct parallels.

1. Demonstrate knowledge and application of ergonomic techniques
   - Industry standards and OSHA guidelines.
   - Types of work-related musculoskeletal injuries (MSI).
   - Best practices for prevention of MSI.

2. Demonstrate knowledge and application of types and methods of infection control.
   - Standard precautions relating to patient safety, isolation procedures, aseptic and sterile technique, equipment, environment, and personal safety.
   - Use and to dispose properly materials used in a surgical or non-surgical procedure that require ultrasound imaging.

3. Demonstrate knowledge and application of patient care.
   - Compliance with program and clinical education facility policies and procedures.
   - Compliance with clinical education facility policies and procedures with respect to Patient Bill of Rights and patient directives.
   - Knowledge of medical/legal implications of patient interaction/management.
   - Recognize life-threatening situations and ability to implement emergency care.
   - Formulate questions that would draw pertinent information from the patient.
   - Anticipate and be able to respond to the needs of the patient.
● Demonstrate interpersonal skills that build rapport and empathetic communications with patients and their families across socioeconomic, racial, and cultural boundaries.
● Provide patient-focused care with respect to for parent’s biological differences, diversity, and needs.
● Recognize differences in belief systems, values, languages, religions, and health practices that influence the medical care of culturally diverse populations. Provide compassionate treatment of patients and respect for their privacy and dignity.
● Build rapport, and employ active listening to communicate compassionately, effectively, and in culturally and emotionally appropriate ways, both verbally and in writing, with patients, their families and colleagues.
● Reporting and documentation of incidents and/or adverse reactions.

4. Demonstrate comprehension and application of medical ethics and law.

● Uphold a patient's right to privacy and adhere to HIPAA guidelines.
● Follow procedure and adhere to electronic documentation and transmission of medical records.
● Uphold risk management
● Acquire Informed consent.
● Documentation of clinical incidents.
● Adhere to professional scope of practice and clinical standards, and professional code of ethics.

5. Demonstrate comprehension and application of diagnostic medical sonography.

● Knowledge of sonographic procedures.
● Correlating diagnostic and imaging procedures.
● Recognition of sonographic appearances of normal and abnormal conditions.

6. Obtain, interpret, document and communicate relevant information related to examinations.

● Present documented images to a radiologist for evaluation.
● Clinical information and historical facts from the patient and the medical records, which may affect the diagnostic examination.
● Review results of previous studies relevant to the current case.
● Measure anatomy and distinguish when an organ has pathologic conditions.
● Examination findings that require immediate clinical response and notify the interpreting physician.
7. Demonstrate awareness of roles and responsibilities

● Demonstrate awareness of roles and responsibilities of healthcare professions to effectively communicate and collaborate in the healthcare environment.
● Utilize skills that support team development, conflict resolution and interprofessional communication and education.
● Communicate effectively with patients and other health care professionals.
● Work effectively as a member of a healthcare team.

8. Identify and evaluate anatomic structures.

● Knowledge of anatomy, physiology and pathophysiology.
● Normal sonographic appearances of tissue, muscles and skeletal structures.
● Differentiation of normal from abnormal sonographic findings.
● Demonstrate knowledge of clinical disease processes with application to sonographic and Doppler patterns.

9. Demonstrate knowledge, comprehension, and application of biological effects.

● Always follow ALARA principles when scanning.

10. Demonstrate knowledge, comprehension, and application of image production and optimization.

● Produce an ultrasound image of diagnostic quality.
● Knowledge of ultrasound physics.
● Properly identify Doppler waveforms and determine their significance.
● Accurately determine abnormal flow of hemodynamic significance.

11. Demonstrate performance through clinical competencies

● Assist a qualified sonographer or medical practitioner with ultrasound imaging and/or procedures.
● Use clinical tracking through Trajecsys.
● Use of proper ergonomics.
● Follow all safety and infection control procedures and policies.
● Obtain and apply clinical history.
● Successfully use oral and written communication skills.
● Demonstrate image optimization techniques.
● Act in a professional manner at all times.
● Document sonographic findings for communication with interpreting physician.
● Finalize examination for permanent storage.
C. Hybrid Online Learning

The DMS program at Montgomery College offers all its professional courses (SONO courses) via Blackboard platform. Our professional course of study uses online learning modules combined with face-to-face hands-on scanning labs. These online courses are designed to meet the national “best practices” standards established by Quality Matters [https://www.qualitymatters.org/]. To find out more about online education, please visit our Distance Education Department where you can find an orientation to online learning for Blackboard to better acquaint oneself with the hybrid education format of Montgomery College [https://www.montgomerycollege.edu/offices/elite/].

Hybrid learning is not a new concept. It has evolved through many stages - correspondence study, radio, television, teleconferencing, and on the Internet. There is no universal definition of distance learning but it typically has the following characteristics:

- Separation of learner from source of instruction
- Institutionally-based (offered by a school)
- Interactive communication (usually some form of telecommunication)

Most of the hybrid online learning courses at Montgomery College, including the DMS courses, are a combination of synchronous (face-to-face in the classroom/lab) and asynchronous learning (material posted on Blackboard). Asynchronous is defined as course material that is not delivered in real time and is delivered via Blackboard. Students sign on to a Montgomery College Blackboard where they access the syllabus and other course materials, participate in discussion forums, complete quizzes and tests, upload assignments and collaborate with the instructor and other students. In addition to course delivery through Blackboard, each SONO course has required face-to-face lecture/lab (on-campus) as part of the learning experience.

In addition to the Blackboard format, MCDMS students are introduced to online tools such as Wiki’s and the TrajeCSys Clinical Tracking System.
IX. DMS CLINICAL POLICIES

A. Competency Based Clinical Education

Competency based clinical education has been established for the students enrolled in the Diagnostic Medical Sonography program. It is designed to permit accurate assessment of the knowledge, skills, and attitudes of students in the clinical education component of the program. Evaluation of students’ clinical competencies must be completed by registered technologists under the direction of the Clinical Affiliate Supervisor.

All students must attend a minimum number of clinical training hours (see clinical syllabus). All students must complete clinical competencies in accordance with the requirement of their certification body.

B. Clinical Education Eligibility

To be assigned to a Clinical Affiliate, the student must meet the following requirements or obligations:

- Be a student in good academic standing in the Diagnostic Medical Sonography program.
- Maintain a cumulative grade point average of 2.5 or higher.
- Provide and maintain proof of certification in adult, child and infant cardiopulmonary resuscitation (BLS/CPR/AED for Healthcare Provider).
- Meet program specific technical standards - Appendix A.
- Complete all immunization requirements prior to commencing or resuming clinical courses. Failure to meet these health requirements will result in the delay of clinical practical or the failure of clinical courses.
- Comply with the requirements for influenza vaccination.
- Additional requirements may be needed.
- Students not in compliance are not permitted to attend classes or clinical

C. CPR Certification

Prior to the commencement of any clinical experience, each student will have to submit a copy of a current CPR course certification to CastleBranch. The CPR course should be comprehensive and designed specifically for Healthcare Providers in accordance with the Health Science Department requirements (BLS Provider through AHA). The documentation needs to be submitted through Castle Branch prior to the beginning of each clinical rotation. Online CPR training is NOT acceptable. Failure to keep current in this requirement may cause the student to be dismissed from the clinical affiliate’s facility.

D. Criminal Background Check & Drug Testing
Although the college does not require that the student undergo a criminal background check, the Health Science Programs do to ensure the safety of patients cared for by students. Students are required to complete the annual criminal background check and drug testing in sufficient time for it to be reviewed prior to starting clinical rotation. The annual background check and drug testing requirements are conducted by CastleBranch, a third-party administrator, independent of the college and specializing in background checks for healthcare workers. CastleBranch is approved by the Maryland Hospital Association and is required for all Montgomery College Health Science Students. Only CastleBranch testing will be accepted by the DMS program. The result of the CastleBranch testing will be relayed to authorized personnel of requesting affiliation prior to clinical assignments.

In addition, in order to qualify to be assigned to one’s first clinical site, the student MUST

1. Complete the annual CastleBranch Background check and Drug screening requirements.
2. Complete all health care requirements for DMS (CPR training, immunization titers, physical exam, technical standards, etc.)
3. Successfully complete SONO 101 (Introduction to DMS),
4. Enroll in SONO 105 (Acoustic Physics and Instrumentation Part I)
5. Enroll in SONO 204 (Introduction to Sectional Anatomy)
6. Successfully completed BIOL 212 and BIOL 213 (Human Anatomy and Physiology I and II)

Since the clinical sites are limited and the process of assigning students are made before the final grades are computed, DMS SONO midterm grades and up to date clinical requirements will be used as a basis for qualification for clinical placement to advance to the next level of clinical rotation.

E. Clinical Education Objectives

Clinical - Fall I

At the completion of the first clinical rotation, the student must demonstrate by verbal, written and scanning performances, competency with the following skills:

- Provide basic patient care and comfort.
- Maintain infection control and utilize universal precautions.
- Demonstrate and characterize the sonographic patterns of normal abdominal pelvic anatomy from ultrasound images using ultrasound terminology.

Clinical - Spring I
At the completion of the second clinical rotation, the student must demonstrate by verbal, written and scanning performances, competency with the following skills:

- Acquire basic sonographic exam skills, and relate these with didactic education through clinical observation and applied hands-on experience in the optional scan lab.
- Provide basic patient care and comfort.
- Maintain infection control and utilize universal precautions.
- Demonstrate knowledge and understanding of physiology, pathology, and pathophysiology.
- Demonstrate knowledge and understanding of human gross and sectional anatomy.

Clinical - Summer I

At the completion of the third clinical rotation, the student must demonstrate by verbal, written and scanning performances, competency with the concentration specialty skills (see clinical syllabus).

- Recognize and identify the sonographic appearance of normal anatomic structures, including anatomic variants and normal Doppler patterns:
- Recognize, identify, and appropriately document the abnormal sonographic of disease processes, pathology, and pathophysiology of the anatomy listed.
- Modify scanning protocols based on sonographic findings and differential diagnosis:
- History and physical examination related imaging, laboratory, and functional testing procedures
- Clinical differential diagnosis
- Role of ultrasound in patient management
- Recognize and identify sonographic patterns in clinical diseases
- Provide basic patient care and comfort
- Maintain infection control and utilize universal precautions

Clinical - Fall II

At the completion of the fourth clinical rotation, the student must demonstrate by verbal, written and scanning performances, competency with the following skills:

- Recognize significant clinical information and historical facts from the patient and the medical records, which may affect the diagnostic examination.
- Acquire proficiency in evaluating sonograms for image quality.
- Demonstrate knowledge and understanding of physiology, pathology, and pathophysiology.
- Effectively utilize instrumentation techniques to produce optimum diagnostic images of a more complex nature.
• Extend standard diagnostic testing protocol as required by patient history or initial findings.
• Perform within the scope of practice.
• Successfully complete all clinical competencies.

Clinical - Winter II

At the completion of the fifth clinical rotation, the student must demonstrate by verbal, written and scanning performances, competency with the following skills:

• Interact with the interpreting physician with oral or written summary of findings as permitted by clinical affiliate.
• Recognize significant clinical information and historical facts from the patient and the medical records, which may affect the diagnostic examination.
• Demonstrate proficiency in evaluating sonograms for image quality.
• Effectively utilize instrumentation techniques to produce optimum diagnostic images of a more complex nature.

Clinical - Spring II

At the completion of the sixth clinical rotation, the student must demonstrate by verbal, written and scanning performances, competency with the following skills:

• Recognize significant clinical information and historical facts from the patient and the medical records, which may affect the diagnostic examination. Identify life-threatening situations and implement emergency care as permitted by clinical affiliate.
• Review data from current and previous examinations to produce a written/oral summary of technical findings, including relevant interval changes, for the interpreting physician’s reference.
• Recognize examination findings that require immediate clinical response and notify the interpreting physician of such findings.
• Perform within the scope of practice.

F. Clinical Practices and Policies

1. Attendance at clinical practical is mandatory.
2. A student who does not demonstrate safe clinical practice will be in violation of clinical practices and policies.
3. A student who does not demonstrate professional behavior and professional practice is subject to review by the faculty.
4. Safe clinical or professional practice is defined in Appendix B: Adhering to the Patients’ Bill of Rights.
5. Performing clinical duties consistent with the professional Code of Ethics - Appendix C.

6. Adhering to the code of behavior/conduct outlined in the Diagnostic Medical Sonography program handbook.

7. Adhering to all clinical practices and policies of the clinical site and Diagnostic Medical Sonography program.

G. Policy Governing Clinical Education Scheduling

The purpose of the clinical assignment is to correlate didactic knowledge with practical skills and attitudes.

The total number of students assigned to any clinical site shall be determined by the Diagnostic Medical Sonography program and approved by program accreditation bodies. The student is subject to all rules and regulations of the clinical affiliate. The clinical affiliate reserves the right to suspend or terminate from the site a student who does not adhere to established policies of the program or the clinical affiliate. A student who does not maintain appropriate behavior may be suspended or dismissed immediately.

H. Role of Clinical Coordinator/Clinical Faculty

The role of the Clinical Coordinator and Clinical Faculty is that of a clinical facilitator, advisor, and evaluator. The Clinical Coordinator and Clinical Faculty combine college and clinical affiliate resources in order to transition students into their assigned clinical settings. Clinical grading criteria are established and implemented in direct consultation with the Program Coordinator, Clinical Faculty, and a pool of clinical instructors, alumni and current students.

In order to best service students, creative ways of combining affiliate offerings (patient volume, case variety, protocol variety, equipment variety, etc.) and student needs are often employed while simultaneously considering contractual limitations, student technical deficiencies, and student/affiliate compatibility. The Clinical Coordinator and Clinical Faculty will often times play the role of “adjunct” Clinical Instructor, as well as that of liaison between the student and the college or affiliate staff and the college or the affiliate staff and the college.

Clinical Coordinator and Clinical Faculty are responsible for the collection, evaluation, grading, and documentation of all clinical requirements. It is of utmost importance that clinical assignments are turned in according to the syllabus dates. Assignments turned in late will be assessed a penalty. Students are allowed and encouraged to seek assistance when preparing a clinical assignment, however, the final product turned in to the Clinical Coordinator must be the product of the student working independently.

The Clinical Coordinator and Clinical Faculty conduct scheduled visits as required by the clinical course. Such visits document the student’s clinical progress at the site. The Clinical
Coordinator ensures that the student receives the number of visits warranted by the student’s clinical course level. In consultation with a Clinical Faculty Committee, the Clinical Coordinator evaluates and assigns the students to the next affiliated site.

I. Clinical Rotations

Any clinical components of the DMS Program, quite naturally, will differ from the traditional classroom experience as clinical experiences entail the operation of various modalities of diagnostic and diagnostic-related equipment in the delivery of care to actual (“real”) patients. Adherence to all established rules (MCDMS, affiliate, OSHA, Patient Bill of Rights, etc.) shall be required of all students in the delivery of care to patients, regardless as to race, gender, country of national origin, etc. (Please refer to the Student Conduct Policies above for more information on student responsibilities in clinical settings, etc.)

Clinical rotation requirements must be completed within the course deadline in order to enroll and advance to the next level.

J. Student Assignment to Clinical Affiliate

Refer to Criteria for Selection of Clinical Rotation Site.

The program does not provide accommodations for personal needs. Students should be aware that the DMS program is a full-time responsibility. The program should not be expected to work around the student’s schedule.

All students assigned to a clinical affiliate should refer to the corresponding course syllabus (SONO 261, 262, 263, 264, 265, 266, etc.) for specific hourly investment required as well as for guidelines as to how clinical performance (written assignments, conduct, etc.) will directly impact their final grade.

Each student must meet the specific requirements of each clinical site and evidence of meeting those requirements may be required on a case-by-case basis. Accordingly, students that do not promptly submit the required clinical documentation will forfeit the use of those sites.

K. Clinical Assignment to Current Affiliate of Student Employment

Students shall be treated as trainees who have no expectation of receiving compensation for clinical training or future employment from the Hospital. Students employed in a clinical affiliate will not be assigned at their place of employment for their clinical rotation assignment.

Any student employed in any capacity by and at the physical location of any MCDMS clinical affiliate must immediately notify program coordinator of this status to properly ensure the prevention of “role conflict.” Violation of this policy may result in disciplinary actions.
L. Criteria for Selection of Clinical Rotation Site

The criteria for selection of clinical rotation site for each student is based primarily on two main goals of a) providing the student with a balanced experience in a working environment that would enhance their scanning skills and b) providing the student with a well-rounded experience to a variety of medical cases. Certain specific goals, such as student’s ardent desire to work in a pediatric setting, are considered on a case-to-case basis. Students are expected to have the mobility to be assigned to any clinical site selected by the clinical faculty committee.

The DMS Clinical Coordinator is responsible for the assignment of students to clinical sites. Under no circumstances are students allowed to report to a clinical affiliate, for purpose of official MCDMS clinical training, neither without proper compliance to the program requirements nor without the prior consents of his/her Clinical Coordinator. However, recognizing the role that the MCDMS Program plays in the facilitation of each student’s success, the Clinical Coordinator weighs carefully some legitimate factors that are deemed to affect the student’s success and considers them in determining the student’s rotation site. Although the following are not all of the ones under consideration, these legitimate factors may help affect a change in the student’s prior clinical assignment:

M. Clinical Rotation Selection Process

A Clinical Faculty Committee composed of the Clinical Coordinator and the Clinical Faculty is responsible for assigning students to their clinical rotation. Student requests for specific rotation sites are not entertained. Clinical sites are assigned and not requested by students. Students do not negotiate their own clinical rotation assignment.

Before students are sent to the different clinical affiliates, the Clinical Instructors and Administrators of the sites are notified of the student’s name, the student’s level of training in the program, the clinical rotation period, and other such matters that comply with the agreement between the College and the Clinical Affiliate. In order to provide the sites with the information they need, all clinical requirements for the first rotation must be turned in by the deadlines indicated.

N. Clinical Education Schedule Policies

1. Compliance to clinical requirements is mandatory and is tracked. Failure to update requirements may lead to termination of clinical rotation.

2. Scheduling - Clinical rotation assignments are provided by the respective Concentration Clinical Coordinators.
a. Starting time for Clinical Education centers is set by the Clinical Instructor at each institution. A clinical shift is eight hours usually between the time of 7:30 AM and 6:00 p.m.
b. Day-to-day scheduling, scanning station or technologist assignments will be determined by the Clinical Instructor at each Clinical Affiliate.
c. The Clinical Instructor will not schedule students for holidays or scheduled College closings.
d. All changes in clinical schedules must be made in advance with the approval of the assigned Clinical Instructor and with the DMS Clinical Coordinator Faculty.
e. Clinical schedules will not be changed to accommodate student personal/work schedules.
f. Changes to schedule must be documented on the Clinical Schedule Change Form (found in Trajecsys) in a timely manner, and the clinical change form must be approved by the clinical instructor and clinical faculty and the completed form is submitted via blackboard course email.
g. Clinical schedules may be changed to accommodate required courses at the College when advance notice of at least 2 weeks is given the Clinical Coordinator.
h. Students should be allowed the same time off for coffee and lunch breaks as staff sonographers.
i. Student requests to work additional time beyond that required by the course must be accompanied by a written approval from the Clinical Instructor of the clinical affiliate where the student is assigned. A maximum of 40 hours a week of combined clinical/didactic hours may not be exceeded.

3. Reporting – Students are required to submit their course work in Blackboard and Trajecsys.
   a. Clinical hours are reported via the clinical tracking system (Trajecsys).
   b. Clinical evaluation of students is reported by the Clinical Instructors using Trajecsys.
   c. Clinical Faculty inform Clinical Instructors in advance of student schedules, requirements and deadlines. Students have the additional responsibility of reminding Clinical Instructors of deadlines for completion of their evaluations and graded work.

O. Clinical Transportation and Parking Policy

Students will provide their own transportation and will be responsible for any parking fees incurred.

P. Pre- and Post- Scanning Assessment
At all clinical levels, students are required to take a scan assessment/exam to demonstrate clinical proficiency to begin/proceed to the next level of training. Students are provided with a set time period to complete the scan exam. Guidelines for the scan exam will be announced one week prior to the exam. Any student who does not pass the scan exam with a minimum grade of 86% will be required to repeat the assessment exam.

Scan Assessment protocols are decided by the Clinical Faculty. Clinical assistance and protocol sheets are prohibited inside the scan station during an assessment exam.

If the repeat scan assessment exam is un成功fully completed a “remediation plan of action” is put into place to help address the students scanning progress.

Q. Scanning Policy at Clinical

Graded competencies must be performed on patients.

R. Guidelines for Clinical Supervision of DMS Students

This policy serves as a guide for students, Clinical Instructors and staff sonographers regarding student supervision. A DMS student may perform diagnostic imaging under either direct and indirect supervision from a properly credentialed clinical instructor.

Indirect supervision

The student will perform an imaging study with the assigned sonographer. The sonographer may not be present in the exam room; however, the sonographer is available to assist the student.

Direct supervision

The student performs an imaging study with an assigned supervising sonographer.

A student is never to perform a clinical examination without either the direct or the indirect supervision of their assigned clinical instructor.

A novice DMS student will always perform clinical examinations under direct supervision of their assigned clinical instructor. As the student improves his/her knowledge of ultrasound, anatomy, physiology, pathology, instrumentation, pathophysiology, and clinical competency the clinical instruction will progress to more indirect supervision to allow the student time to perfect their scanning skills, timing and to gain confidence. The clinical instructor will always be immediately available and is always responsible for the exam in progress.

S. Personal Appearance and Uniform Policy
The personal appearance and demeanor of each student shall reflect the highest standards of the individual, the college, as well as the profession, as they are indicative of individual interest and pride. Uniforms, which are required, shall be clean and pressed. Shoes shall be clean and white at all times. The DMS white lab coat and identification badge must be worn at all times while on affiliate grounds except in instances where the affiliate uniform policy is such that there is a requirement for visiting students to adhere strictly to the affiliate’s uniform policy (e.g. MC uniforms or scrubs provided by the affiliate).

Any student reporting to his or her assigned clinical affiliate in improper uniform or attire or with a soiled, unprofessional appearance, will be asked to excuse him/herself from affiliate premises until the infraction is rectified. (Any clinical time missed will have to be made up). Students are also expected to wear their Student ID and uniform at all times in the DMS lab and MC events.

The following provides additional information on the MCDMS uniform policies:

1. Uniforms are purchased through Meridys Uniform Company. https://meridys.com/
   a. Approved DMS uniforms with MC logo
   b. White DMS lab coat purchased from Meridys Uniform.
   c. Shoes worn must be white and enclosed.

2. Identification badge:
   a. Montgomery College student identification badges must be worn at all times, both on campus and at the clinical site.
   b. DMS Student Name Badges are purchased through Meridys.

3. Hair
   a. Females: Hair must be clean and neatly combed or braided. Long hair is considered inappropriate when it falls in front of the face or when it comes into contact with patient or with diagnostic or clerical (etc.) equipment. Long hair must be braided or tied back behind the neck.
   b. Males: Mustaches, beards and long hair must be clean, manageable, appropriately groomed (trimmed, etc.) and should never be unruly.

4. Accessories: Use of cosmetics should be discreet (including perfume, cologne, hair sprays, lotions, etc.) and kept to an absolute minimum. Fingernails should be kept at a reasonable length to allow proper operation of diagnostic (etc.) procedures. Fingernails should be clean and otherwise reflect adherence to OSHA frequent (interpatient, inter procedure, etc.) hand washing regulations. Permissible jewelry includes (conservative) watches, wedding bands, engagement rings and earrings.

T. Clinical Accountability
As the faculty believes that the physical and emotional welfare of (affiliate) patients takes the highest priority, any student who demonstrates clinically unsafe patient care practices, thereby jeopardizing patient welfare, may subsequently be dismissed from the program. Behavior, which jeopardizes or potentially jeopardizes the operations and management of the healthcare affiliate (physical or mental health problems, skill deficits, anxiety, substance/alcohol use, etc.), may also lead to dismissal from the program.

U. **Clinical Practice Guidelines**

1. All time log/case log data must be entered into the Trajecsys Clinical Tracking System by midnight of each clinical week.

2. Required totals of clinical hours.

<table>
<thead>
<tr>
<th></th>
<th>Clinical Hours Calculation</th>
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</thead>
<tbody>
<tr>
<td>1st year, Fall semester</td>
<td>15 weeks x 8 clinical hours per week = 120 clinical hours</td>
</tr>
<tr>
<td>1st year, Spring semester</td>
<td>15 weeks x 8 clinical hours per week = 120 clinical hours</td>
</tr>
<tr>
<td>2nd year, Summer semester</td>
<td>8 weeks x 30 clinical hours per week = 240 clinical hours</td>
</tr>
<tr>
<td>2nd year, Fall semester</td>
<td>15 weeks x 32 clinical hours per week = 480 clinical hours</td>
</tr>
<tr>
<td>2nd year, Winter semester</td>
<td>4 weeks x 30 clinical hours per week = 120 clinical hours</td>
</tr>
<tr>
<td>2nd year, Spring semester</td>
<td>15 weeks x 32 clinical hours per week = 480 clinical hours</td>
</tr>
</tbody>
</table>

Change of schedule and absences require proper authorization and documentation. Unauthorized and/or undocumented absences and/or changes in schedules will lead to a warning and eventually to dismissal from the program.

3. Each practice and graded competency must be submitted **promptly and properly documented** according to the following:

   a. The clinical practice competency rubric is used to provide feedback on scan assignments completed during skills enhancement labs and/or at the assigned clinical site. Practice Competencies must meet All Competent/Approved Criteria.

   b. The clinical graded competency rubric is used to provide feedback by the Clinical Faculty on scan assignments completed at your assigned clinical site. The graded competency grades are used in the course grade calculations. A graded competency may only be turned in after a practice competency has been approved and all feedback provided is taken into consideration. For this reason, practice and graded competencies may not be turned in on the same day. All graded competencies must be evaluated by the supervising clinical instructor, via the Trajecsys Report System, and clinical faculty.

   c. Each practice/graded competency must be submitted in the corresponding Blackboard assignment drop box, the corresponding patient history form.
4. Practice competencies may be completed on patients or on volunteers. Graded competencies must be performed on patients at assigned clinical sites. Practice and graded competencies must be completed on the same patient from beginning to end. All practice competencies must be completed in the DMS lab or at college approved clinical site. Each Practice & Graded competency for the same type of exam must be performed on different patients. This is the same policy for lab assignments.

5. Patient’s privacy must always be protected on documents submitted. Anonymize the patient’s name from images, disc labels, the films, or any hard-copy images turned in for practice/graded competency.

6. Document all requested images; label all pictures appropriately; and remember to properly operate your field-of-view, focal zone, transducer selection and overall gains, etc.

7. The Clinical Instructor’s Evaluation must be completed via the Trajecsys Report System by the deadline set in the syllabus.

8. Post-clinical assessments/Scan Exams are conducted at the end of each clinical rotation.

9. Graduating students are expected to complete their required clinical hours prior to graduation.

All clinical requirements need to be satisfied before clearance for graduation is provided.
X. Addendum A: Continuation in Program after Disclosing Pregnancy

Acknowledgements

By signing this form, __________________ (“Student”) acknowledges the following:

- Has voluntarily disclosed her pregnancy to Montgomery College (the “College”) and intends to continue pursuing her degree in the College’s program.
- Understands there are other options available, including taking a leave of absence.
- Understands there are potential risks to her and/or her fetus by continuing in the program. The College has advised Student to consult with her doctor to discuss these potential risks.
- Assumes all responsibility related to these risks and any resulting losses or costs, including medical treatment and costs thereof.

Adjustments to Program

[In this section, describe any adjustments that have been discussed and will be implemented based on the student’s pregnancy. Note if there have been no adjustments implemented at the time of signature.]

A. ______________________________________________________________________

B. ______________________________________________________________________

C. The student may request additional modifications at any time by contacting the instructor and another interactive meeting will occur.

The College and Student do hereby agree to the above.

__________________________________________________________________________   _______________
Student                                                                 Date

__________________________________________________________________________   _______________
Faculty                                                                 Date
XI. Addendum B: Education Plan for Pregnancy Leave

Montgomery College (the “College”) and ___________________________ (“Student”) have agreed to the following conditions related to the Student’s leave of absence related to pregnancy. Student’s leave of absence is scheduled to begin on _________________.

Student is anticipating a return to school______________________. Student and the College acknowledge that Student may take a longer leave if it is deemed medically necessary by the student’s doctor, and the parties agree to meet and discuss this Education Plan if that occurs.

I. Academics [In this section, discuss where Student currently stands academically, what adjustments to her courses/degree concentration will be necessary because of the leave of absence, what classes she will be enrolled in upon return, etc.]

A. ______________________________________________________________________

B. ______________________________________________________________________

II. Financial Aid/Scholarships [In this section, discuss current financial aid/ scholarship/ funding situation and any implications from taking leave.]

A. ______________________________________________________________________

B. ______________________________________________________________________

III. Additional Matters [In this section, discuss any additional matters that are relevant to a particular situation. Among other things, consider including if a student must meet any specific requirements to be readmitted (e.g., Upon expiration of Student’s leave of absence her readmission is guaranteed, provided student … [insert specific reasonable requirements, as appropriate]).

A. Student agrees to contact clinical coordinator upon return in order to ensure a smooth transition back to school, two weeks in advance of students return.

___________________________________________________________________________
Student                                                                 Date

___________________________________________________________________________
Faculty                                                                     Date
XII. Appendix A: Code of Ethics for the Profession of Diagnostic Medical Sonography

Re-approved by SDMS Board of Directors, effective 02/08/2017
(Originally Approved by SDMS Board of Directors, December 6, 2006)

Preamble

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

Objectives

1. To create and encourage an environment where professional and ethical issues are discussed and addressed.
2. To help the individual diagnostic medical sonographer identify ethical issues.
3. To provide guidelines for individual diagnostic medical sonographers regarding ethical behavior.

Principles

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

1. Provide information to the patient about the purpose of the sonography procedure and respond to the patient's questions and concerns.
2. Respect the patient's autonomy and the right to refuse the procedure.
3. Recognize the patient's individuality and provide care in a non-judgmental and non-discriminatory manner.
4. Promote the privacy, dignity and comfort of the patient by thoroughly explaining the examination, patient positioning and implementing proper draping techniques.
5. Maintain confidentiality of acquired patient information, and follow national patient privacy regulations as required by the "Health Insurance Portability and Accountability Act of 1996 (HIPAA)."
6. Promote patient safety during the provision of sonography procedures and while the patient is in the care of the diagnostic medical sonographer.

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

A. Obtain appropriate diagnostic medical sonography education and clinical skills to ensure competence.
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 re-credentialing.
F. Perform medically indicated ultrasound studies, ordered by a licensed physician or their designated health care provider.
G. Protect patients and/or study subjects by adhering to oversight and approval of investigational procedures, including documented informed consent.
H. Refrain from the use of any substances that may alter judgment or skill and thereby compromise patient care.
I. Be accountable and participate in regular assessment and review of equipment, procedures, protocols, and results. This can be accomplished through facility accreditation.

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

We consider you a partner in your hospital care. When you are well informed, participate in treatment decisions, and communicate openly with your doctor and other health professionals, you help make your care as effective as possible. This hospital encourages respect for the personal preferences and values of each individual.

While you are a patient in the hospital, your rights include the following:

• You have the right to considerate and respectful care.
• You have the right to be well informed about your illness, possible treatments, and likely outcome and to discuss this information with your doctor. You have the right to know the names and roles of people treating you.
• You have the right to consent to or refuse a treatment, as permitted by law, throughout your hospital. If you refuse a recommended treatment, you will receive other needed and available care.
• You have the right to have an advance directive, such as a living will or health care proxy. These documents express your choices about your future care or name someone to decide if you cannot speak for yourself. If you have a written advance directive, you should provide a copy to your family, and your doctor.
• You have the right to privacy. The hospital, you doctor, and others caring for you will protect your privacy as much as possible.
• You have the right to expect that treatment records are confidential unless you have given permission to release information or reporting is required or permitted by law. When the hospital releases records to others, such as insurers, it emphasizes that the records are confidential.
• You have the right to review your medical records and to have the information explained except when restricted by law.
• You have the right to expect that the hospital will give you necessary health hospital services to the best of its ability. Treatment, referral, or transfer may be recommended. If transfer is recommended or requested, you will be informed of risks, benefits, and alternatives. You will not be transferred until the other institution agrees to accept you.
• You have the right to know if this hospital has relationships with outside parties that may influence you treatment and care. These relationships may be with educational institutions, other health care providers, or insurers.
• You have the right to consent or decline to take part in research affecting your care. If you choose not to take part, you will receive the most effective care the hospital otherwise provides.
• You have the right to be told of realistic care alternatives when hospital care is no longer appropriate.
• You have the right to know about hospital rules that affect you and your treatment and about charges and payment methods. You have the right to know about hospital resources, such as patient representatives or ethic committees that can help you resolve problems and questions about your hospital stay and care.
• You have responsibilities as a patient. You are responsible for providing information about your health, including past illnesses, hospital stays, and use of medicine. You are responsible for asking questions when you do not understand information or instructions. If you believe you can't follow through with your treatment, you are responsible for telling your doctor.
• This hospital works to provide care efficiently and fairly to all patients and the community. You and you visitors are responsible for being considerate of the needs of other patients, staff, and the
hospital. You are responsible for providing information for insurance and for working with the hospital to arrange payment, when needed.

- Your health depends not just on your hospital care but, in the long term, on the decisions you make in your daily life. You are responsible for recognizing the effect of life-style on your personal health.

- A hospital serves many purposes. Hospitals work to improve people's health; treat people with injury and disease; educate doctors, health professionals, patients, and community members; and improve understanding of health and disease. In carrying out these activities, this institution works to respect your values and dignity.
Appendix C
Technical Standards

The practice of Diagnostic Medical Sonography requires the following functional abilities with or without reasonable accommodations:

1. **VISUAL ACUITY**: Sufficient to assess and evaluate images distinguishing among black/white/multiple shades of grey tones; distinguish multiple color variations in hues, tone or brightness;

2. **HEARING**: Hear audible cues and warnings on imaging equipment and life support devices; distinguish slight audible Doppler signal variations;

3. **OLFACTORY**: Sufficient to assess patients and to implement the care plans that are developed from such assessments;

4. **TACTILE**: Utilize the sense of touch in order to provide patient care and to position patients for optimum sonographic procedures;

5. **STRENGTH AND MOTOR SKILLS**: Coordinate movements of equipment, such as portable machines, portable breathing apparatus, and/or other accessories;

6. **FINE MOTOR SKILLS**: Manipulate efficiently the movement of a transducer, including an endocavity probe, using one hand while simultaneously keying information with the other hand;

7. **PHYSICAL ENDURANCE**: Transport efficiently in and out of the ultrasound exam room any non-ambulatory patients who may arrive in wheelchairs or on stretchers; lift, move, and transport patients and/or any accessories needed to complete the task;

8. **ABILITY TO COMMUNICATE**: Give clear and understandable oral instructions, respond to patients’ inquiry, and/or report to healthcare personnel involved in the completion of the study;

9. **EMOTIONAL STABILITY**: Utilize interpersonal skills to handle patients with physical, mental, or emotional challenges;

10. **COGNITIVE ABILITY**: Utilize critical thinking skills to act and decide appropriately in matters of emergent needs; utilize the skills needed on when and how to perform procedures with "universal precautions".