

PARIS JUNIOR COLLEGE

**DIAGNOSTIC MEDICAL
SONOGRAPHY**



**POLICIES & PROCEDURES
STUDENT HANDBOOK
2024-2025**

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



Paris Junior College
Diagnostic Medical Sonography
Student Handbook
2024-2025

This handbook is designed to guide you through the policies and procedures of the Diagnostic Medical Sonography Program. Your review of the Handbook is part of your orientation to the Sonography Program. You will be held responsible for all of the contents; therefore, it should always be readily available for reference.

Directions:

1. Read the Student Handbook.
2. Request clarification, amplification or verification as needed.
3. Sign the required forms during the first week of class

Paris Junior College give equal consideration of all applicants for admission without regard to race, creed, color, national origin, sex, age, marital status or physical handicap.

FOREWORD

Congratulations on being accepted to the field of Health Science and the career of Sonography. The goal of the Diagnostic Medical Sonography Program at Paris Junior College is to prepare competent entry-level general sonographers in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains for the **Abdominal Sonography-Extended** concentration.

All students are treated with respect and dignity. Paris Junior College does not discriminate based on race, color, religion, age, sex, national origin, disability, or veteran status.

The purpose of this handbook is to outline the topics that are of interest to students enrolled in the program. The Diagnostic Medical Sonography Program prepares students to earn an Associate of Applied Science in Diagnostic Medical Sonography through rigorous classroom and clinical instruction. The duration of the program is 5 semesters. In order to complete this degree, the student must complete the requirements described in the college catalog.

Provided within this handbook are general guidelines for the program. More specific policies may be found in the current Paris Junior College Catalog, the Paris Junior College Student Handbook, and policies determined by the respective accreditation bodies. In the absence of a specific policy, the program director and/or college administration will decide various issues based on the following guidelines (but not limited to):

- a. Preservation of academic standards
- b. Present and future integrity of the program
- c. The ability of the program to fulfill its goals and objectives

The program may enact new policies or procedures deemed necessary to maintain the above guidelines at any time. Therefore, the material in the handbook is subject to change without prior written notice. However, once changes are made they will be provided in writing via dragon email and or Blackboard announcements.

Diagnostic Medical Sonography

Student Handbook

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Bookstore	903-782-0344
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DIAGNOSTIC MEDICAL SONOGRAPHY

Section I

GENERAL INFORMATION

Accreditation and Organizations

College Accreditation

Paris Junior College is accredited by the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) to award associate degrees. Questions about the accreditation of Paris Junior College may be directed in writing to the Southern Association of Colleges and Schools Commission on Colleges at 1866 Southern Lane, Decatur, GA 30033-4097, by calling (404) 679-4500, or by using information available on SACSCOC's website (www.sacscoc.org).

Program Accreditation

As this is a new program, application for program accreditation has recently been submitted with site visit date and results pending.

Credentialing Organizations

American Registry of Radiologic Technologists (ARRT) www.arrt.org

American Registry for Diagnostic Medical Sonography (ARDMS) www.ardms.org

The Paris Junior College Diagnostic Medical Sonography program is not currently accredited. Graduates of the program can earn their Sonography credential through the American Registry of Radiologic Technologists (ARRT) or American Registry for Diagnostic Medical Sonography (ARDMS). Without programmatic accreditation, graduates must first pass the ARRT Sonography credentialing exam before becoming eligible to attempt an ARDMS specialty exam. A student may be eligible immediately upon graduation if they meet one of the ARDMS examination prerequisites.

<https://assets-us-01.kc-usercontent.com/406ac8c6-58e8-00b3-e3c1-0c312965deb2/9d7ce23e-db1f-4e3c-9775-5e8cd0042e0c/Sonography%20Examination%20Content%20Specifications%202024.pdf>

<https://www.ardms.org/wp-content/uploads/pdf/ARDMS-General-Prerequisites.pdf>

Professional Organizations

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

National Organizations:

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

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



College

Your classes at Paris Junior College provide you the very best educational opportunities possible. They have been very carefully planned and designed. Each class fulfills specific requirements or goals established by Paris Junior College, The Texas Higher Education Coordinating Board, the various instructional programs on campus, and your instructors. By meeting these requirements, your classes offer you a chance to obtain the educational objectives of your choice.

Paris Junior College's Vision, Mission, and Goals

Vision

To be the educational provider of choice for the region.

Mission

Paris Junior College is a comprehensive community college serving the region's educational and training needs while strengthening the economic, social and cultural life of our diverse community.

Strategic Goals

1. Maintain a high standard of excellence in education.
2. Increase workforce training in program offerings and in number of students.
3. Offering open access and equal opportunity for all qualified students.
4. Providing service to the community and opportunity for lifelong learning.
5. Creating an environment in which development of human potential is the highest priority.

Paris Junior College Diagnostic Medical Sonography Program

Program Mission Statement

Paris Junior College's Diagnostic Medical Sonography Program is to provide quality education and develop professional entry level skilled sonographers in the field of diagnostic medical sonography, and assist them in understanding the importance of their role on the allied health care team as they contribute to total patient care.

Program Goals

To prepare competent entry-level sonographers in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains for the **Abdominal Sonography-Extended** concentration.

Educational Outcomes

Graduates of the Paris Junior College Diagnostic Medical Sonography Program earn an Associate of Applied Science (AAS) in Diagnostic Medical Sonography and are then eligible to take the sonography credentialing exam given by the American Registry of Radiologic Technologists (ARRT).

The anticipated goals and educational outcomes of the associate degree in Diagnostic Medical Sonography include:

1. To prepare graduates with demonstrated competence in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains of diagnostic medical sonography practice as performed by diagnostic medical sonographers.
2. Manage patient care utilizing resources within the healthcare setting.
3. Work as a member of the healthcare team in a wide variety of clinical settings to evaluate and document sonographic findings.
4. Assume the role of the member of the profession of Diagnostic Medical Sonography within its legal and ethical framework (refer to SDMS Code of Ethics for the Profession of Diagnostic Medical Sonography)

Student Learning Outcomes

1. Demonstrate knowledge and application of ergonomic techniques.
2. Demonstrate knowledge and application of types and methods of infection control.
3. Demonstrate knowledge and application of patient care.
4. Demonstrate knowledge of the roles and responsibilities of healthcare professions to effectively communicate and collaborate in the healthcare environment.
5. Demonstrate knowledge of medical ethics and law.
6. Demonstrate knowledge of medical and sonographic terminology.
7. Obtain, evaluate, document, and communicate relevant information related to sonographic examinations.
8. Identify and evaluate anatomic structures.
9. Demonstrate knowledge of disease processes with application to sonographic and Doppler patterns.
10. Demonstrate knowledge and application of image production and optimization.
11. Demonstrate knowledge and application of biological effects.
12. Demonstrate knowledge of a quality control and improvement program.

13. Demonstrate awareness of resources for professional development.
14. Demonstrate achievement of clinical competency through the performance of the requirements to provide quality patient care and optimal examination outcome.

PROGRAM OUTCOMES

1. Qualified applicants will be admitted according to the admissions policy each spring.
2. The attrition rate of the Diagnostic Medical Sonography program will not exceed 30%.
3. At least 75% of graduates will be employed in the field of diagnostic medical sonography or continuing their education within 6 months of graduation.
4. Graduates will maintain at least a 60% pass rate on ARRT and/or ARDMS exams.
5. At least 50% of returned Graduate Surveys will express overall satisfaction with their program with a composite score of 3 or greater on a 5-point scale.
6. At least 50% of Employer Surveys will express overall satisfaction with Paris Junior College graduates as their employees with a composite score of 3 or greater on a 5-point scale.
7. The graduates of the Diagnostic Medical Sonography Program will be encouraged to continue lifelong learning and professional development activities as measured by maintaining their credentials, attending continuing education seminars, and pursuing higher academic degrees.

GOALS AND OBJECTIVES

The goal of this Program is to educate and develop skilled technologists in the field of Diagnostic Medical Sonography and to assist them in understanding the importance of their role on the allied health care team as they contribute to total patient care. The total program consists of a plan to prepare the potential technologists in a five-semester sequence to obtain an Associate in Applied Science degree. Upon successful completion of the program, the students are eligible to apply for the ARRT Sonography examination, once student successfully passes ARRT exam or has one year of work experience student can attempt the American Registry for Diagnostic Medical Sonographers (ARDMS) exam.

A balanced curriculum of general didactic and Clinical courses offers the student an opportunity for cultural development, as well as occupational competence. Clinical sites include major hospitals, affiliates and clinics. Clinical sites will be assigned by the department chair and faculty.

The following specific objectives have been adopted by the Paris Junior College Diagnostic Medical Sonography Program

1. Demonstration of practical application in the professional and technical aspects of patient care related to medical sonography.
2. Skills in demonstrating respect for interpersonal relationships, including moral and ethical responsibilities to increase effective communication and empathy for the patient.
3. Provision for an understanding of the goals, philosophies and organization of the sonography and affiliate diagnostic sonography departments; and an appreciation of the career in medical sonography through knowledge of medical history, as well as the evolution of sonographic technology and its professional organizations.

4. Proficiency in comprehending the principles of the various modalities of imaging available to the profession. Recognizing the common factors in the production of a sonographic image regardless of the imaging system used.
5. Ability to maintain and/or troubleshoot malfunctions in processing systems, evaluate sonograms for the presence of artifacts and correct or compensate for the cause.
6. Proficiency in applying the principles of structure and function within the human body. Comprehensive study of physiology of various systems. Ability to correlate the anatomy from a sectional standpoint.
7. Ability to comprehend medical terminology, follow directions, and communicate effectively with others.
8. An understanding of disease entities and their influence on sonographic techniques, enabling the student to produce optimum diagnostic sonograms and ensure effective care to the patient.
9. Familiarization with routine sonographic procedures and supplementary techniques such as radiology, conventional tomography, computerized axial tomography, angiography, nuclear medicine, radiation therapy, and magnetic resonance imaging.
10. Assure that both Clinical and didactic education relate to practice needs, prepare competent and humane sonographers, and foster mutual appreciation and collaboration among the health professions.
11. Competence in cardiopulmonary resuscitation.
12. To prepare competent entry-level general sonographers in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains

SCANS Skills Competencies

The Secretary's Commission on Achieving Necessary Skills

Statement of Workplace and Foundation Competencies

Paris Junior College is determined to prepare you with the knowledge and skills you need to succeed in today's dynamic work environment. Towards this end, the following workplace competencies and foundation skills have been designed into the curriculum for this course:

Common Workplace Competencies

Manage Resources:	Time/Money/Materials/Space/Staff
Exhibit Interpersonal Skills:	Work on teams/Teach others/Serve customers/Lead work teams/Negotiate with others
Work with Information:	Acquire & evaluate data/Interpret & communicate data
Apply Systems Knowledge:	Work within social systems/Work within technological systems/Work within organizational systems/Monitor & correct system performance/Design & improve systems
Use Technology:	Select equipment and tools

Foundation Skills

Demonstrate Basic Skills:	Arithmetic & Mathematics/Speaking/Listening
Demonstrate Thinking Skills:	Creative thinking/Decision making/Problem solving/Thinking logically
Exhibit Personal Qualities:	Self-esteem/Self-management/Integrity

In response to concerns expressed by employers regarding students' readiness in critical thinking, information analysis, logical argumentation, and teamwork, the Secretary of the United States Department of Labor has mandated the integration of these essential skills and specific competencies into all program curricula.

Employment opportunities will increasingly rely on individuals who are adept at applying their knowledge effectively. High-paying, unskilled positions are becoming scarce. It is essential for today's workforce to possess foundational skills and competencies relevant to the workplace.

You will be expected to engage in critical thinking, logical reasoning, and evaluation throughout this program. The Diagnostic Medical Sonography Program emphasizes comprehensive understanding over simple memorization techniques. The curriculum is structured to help you develop the skills outlined in the accompanying documents. The program faculty is committed to upholding the highest educational standards for your learning experience.

The professional diagnostic medical sonographer generally performs the following:

1. Obtains, reviews, and integrates pertinent patient history and support clinical data to facilitate optimum diagnostic results.
2. Performs appropriate procedures and records anatomic, pathologic, and/or physiological data for interpretation by a physician.
3. Records, analyzes, and processes diagnostic data and other pertinent observations made during the procedure for presentation to the interpreting physician.
4. Exercises discretion and judgment in the performance of sonographic and/or related

diagnostic services.

5. Demonstrates appropriate communication skills with patients and colleagues.
Acts in a professional and ethical manner.
6. Facilitates communication and education to elicit patient cooperation and understanding of expectations and responds to questions regarding the sonographic examination.

DISABILITY SUPPORT SERVICES/SPECIAL POPULATIONS

Services for students with disabilities are coordinated by the Counseling Advising & Counseling Center. The institution is committed to assisting qualified students as completely as possible. Services include the arrangement for accommodations and services to allow equal access to education opportunities for students with disabilities.

The college will make reasonable accommodations for qualified students with documented disabilities who have been admitted to the college and have requested accommodations. Students may request services by providing appropriate documentation of a disability and completing a Request for Accommodations form.

To provide appropriate planning and scheduling, students should submit requests for most accommodations at least two weeks before accommodations are needed. However, for scheduling interpreters, available modified equipment, enlarged textbooks, scribes, or electronic books, students must make the request six weeks in advance of the need.

Students with disabilities are encouraged to contact a counselor or advisor from the Advising & Counseling Center by calling 903.782.0426 (Paris Campus), 903.454.9333 (Greenville Center), or 903.885.1232 (Sulphur Springs Center) to arrange an appointment to begin the process.

STUDENT SERVICES

Paris Junior College offers the student a wide variety of special services to make his college experiences worthwhile and rewarding. The faculty and staff are personally involved and feel responsibility, along with the students, for student success or failure. This philosophy of accountability places much emphasis on each individual (faculty and student) and challenges him to do his/her best toward giving students their moral right – the right to have the best education possible. (Excerpt from the Paris Junior College Calendar and Student Handbook)

The following is a list of student services available at Paris Junior College. Further information may be found in the Paris Junior College Student Handbook.

- Housing (phone 903-782-0433)
- Food Service / Meal Plans (phone 903-782-0232)
- Bookstore (phone 903-782-0344)
- Campus Parking / Campus Police / Security (phone 903-782-0399)
- Business Office (phone 903-782-0232)
- Student Insurance
- Learning Center (phone 903-782-0415)
- Learning Skills (phone 903-782-0414)
- Continuing Education (phone 903-782-0447)
- Emergency Medical Services (Dial 9-911)

- Financial Aid (phone 903-782-0429)
- Student Development Center (phone 903-782-0426)
 - o Counseling
 - o Career Planning
 - o Testing Services
 - o Services for Students with Disabilities
 - o Peer Mentoring / Tutoring
 - o Transfer Services / International Student Advising/Admissions
- Student Life, Activities and Recreation Room (phone 903-782-0402)

LIBRARY SERVICES:

The PJC library located in the Rheudasil Learning Center on the main campus.

TUITION:

The tuition for the program will follow the Paris Junior College schedule and is due at the beginning of each semester. The refund schedule is listed in the PJC Student Handbook and the PJC catalog.

ROOM AND BOARD:

Each student must provide his/her own lodging and meals. The hospitals have a cafeteria which is open to students and meals may be purchased there when the student is assigned to Clinical.

TRANSPORTATION:

Students are responsible for their own transportation and are expected to be in class and the assigned Clinical areas at the times scheduled.

STUDENT HEALTH SERVICES:

Each student is responsible for his/her own medical care. Student Health Services are available in by posted hours. If the student needs to make an appointment with a private physician or dentist, it must be scheduled so that it does not conflict with a scheduled class or Clinical assignment. The students are not allowed to discuss their personal medical problems with physicians while in the clinical area.

CPR CERTIFICATION:

Students must hold a current (within two years) cardiopulmonary resuscitation card in Health Care Provider while enrolled in the Sonography program. These cards will be checked by the clinical instructor at the beginning of each calendar year.

PREGNANCY:

Pregnant students, for their own and their baby's protection, should inform the department chair immediately upon learning of the pregnancy so that she may be counseled. The student **will** provide a written statement from her physician stating that the student may participate in all sonographic procedures. If the physician will not release the student, she must withdraw from the program.

As soon as the pregnancy is reported to the department chair, the pregnant student will be required to begin 'banking' clinical hours so that she may have a maximum of four (4) weeks of absences from clinical education after the birth of her baby.

She will attend classes on campus two (2) weeks post-partum and begin clinical education four (4)

weeks post-partum. A letter from her physician allowing this will be required. The student may return earlier if her physician consents.

The program will make any reasonable arrangements with the student regarding the extended absence period as it will with any major illness or disability, it is the student's responsibility to address any physical illnesses to the department chair.

(Please sign Pregnancy Agreement in Section IV)

COMMUNICABLE DISEASE POLICY:

All students will receive instructional material on communicable diseases to include AIDS and Hepatitis B Viruses in the Departmental Functions course. All students will have a TB skin test, or an appropriate test, upon entering the program.

When a student is identified as being infected with any Bloodborne Pathogens of the following communicable diseases the following steps are to be taken to ensure the health of the PJC community and the patients with whom the student would be in contact. This policy is also designated to protect the student who is infected. The list below is not necessarily all inclusive. Hepatitis B, leprosy, measles, mumps, rubella, meningitis, tuberculosis, typhoid, chicken pox, shingles, poliomyelitis, venereal disease.

1. The student must notify the department chair in writing the disease contracted and his or her physician's name and phone number. The student will not attend classes or clinical education.
2. The department chair or clinical coordinator will contact the Health Services staff of Paris Junior College.
3. The Health Services staff will confer with appropriate public health officials or literature for guidance as to protocol concerning the disease report and report to the department chair.
4. The department chair will contact the student as to when the student may return to campus or clinical education. The department chair will adhere to public health guidelines dictated by the Health Service Director
5. The student will supply the department chair documentation from a physician stating that he or she may return to campus and or clinical education.

INTRODUCTION and STANDARDS

These student policies are developed by the Diagnostic Medical Sonography Program to maintain an environment conducive to learning, as well as for student progress. Each student is expected to read and comply with these policies so that high standards of education and student activity may be achieved. If the student does not meet the standards stated within this handbook, dismissal will occur.

Education Requirements:

Regular Eligibility: Candidates must have successfully completed prerequisites and core curriculum with a C or better. Applicants are selected by a point system.

Core Curriculum Requirements:

The Southern Association of Colleges and Schools and the Texas Higher Education Coordinating Board affirm Paris Junior College's long-standing commitment in offering broad based general education core courses. Each course specifically addresses the following core curriculum competencies:

Reading:

Students should be able to:

Identify and comprehend the main subordinate ideas in a written work.

Draw reasonable conclusions from information found in various sources and defend one's conclusions rationally.

Writing:

Students should be able to:

Use the English language grammatically, clearly, precisely, and economically.

Mathematics:

Students should be able to:

Perform, with accuracy, the computations of addition, subtraction, multiplication, and division.

Critical Thinking:

Students should be able to:

Organize and analyze ideas and data using logical methods.

Scholastic Honesty:

The value of an academic degree depends on the absolute integrity of the work done by the student. It is imperative that all students maintain high standards of individual honor in their scholastic work (along with clinical experiences). Thus, scholastic honesty depends upon integrity, honor, self-responsibility and accountability for one's actions and work. Additionally, honesty includes student reporting as a necessary component. The recognition and reporting of scholastic dishonesty to the appropriate individual (instructor, department chair, clinical instructor) is the responsibility of each student.

Scholastic /Academic Dishonesty:

Scholastic dishonesty includes but is not limited to (1) cheating, any act that gains or attempts to gain an unfair advantage in an academic setting; (2) plagiarism, using someone else's words or ideas without referencing the source; (3) collusion, unauthorized cooperation between individuals that results (or potentially results) in giving an unfair advantage in an academic setting; (4) falsifying academic records; (5) discussing the contents of an examination with another student or in hearing range of another student who will take the examination; (6) or any act designed to give or take unfair advantage of a student; (7) misrepresenting fact to the College or College official. **Any student who is scholastically dishonest is subject to discipline.**

A student discovered by the instructor in the act of scholastic dishonesty will be counseled by the instructor and or department chair and could be dismissed from the program. Upon dismissal the student will receive an 'F' in **all** DMS courses and are ineligible for readmission into the DMS program.

Unethical Practice and Unprofessional Conduct:

Upon enrolling in the DMS Program, the student assumes an obligation to conduct academic affairs in a manner compatible with the standards of academic honesty (abstain from cheating, plagiarism, falsifying documents, unprofessional conduct, breach of confidentiality, etc.) established by the College and clinical affiliates. If the student neglects or ignores this obligation, it is understood that the student will be subject to disciplinary action up to and including dismissal. Students will sign one copy of this Honor Code and return to the department chair. This copy will be placed in the student's file.

Length of the Program:

The Diagnostic Medical Sonography Program at Paris Junior College spans twenty-two months and includes four semesters, following acceptance into the program.

Completion of all prerequisite courses is mandatory prior to acceptance into the program. A new cohort will start each Spring semester, followed by consecutive semesters, including Summer Long, Fall, and Spring. It has an integrated simple to complex design with 60 semester hours. All Diagnostic Medical Sonography didactic courses are conducted exclusively on the Paris campus, in accordance to a regular schedule.

Curriculum Overview

Prerequisites-18 SCH

MATH 1314	College Algebra
BIOL 2401	Anatomy & Physiology I
BIOL 2402	Anatomy & Physiology II
PHYS 1405	Elementary Physics I
ENGL 1301	Composition I

FRIST YEAR

First Semester-Spring 12 SCH

DMSO 1110	Introduction to Sonography
DMSO 1260	Clinical I
DMSO 1302	Basic Ultrasound Physics
DMSO 1341	Abdominopelvic Sonography
*PSYC 2314	Lifespan Growth & Development

Second Semester-Summer-14 SCH

DMSO 2305	Sonography of Obstetrics/Gynecology
DMSO 1261	Clinical II
DMSO 2351	Doppler Physics
DMSO 2353	Sonography of Superficial Structures
*MUSI 1306	Music Appreciation

Third Semester-Fall-12 SCH

DMSO 2362	Clinical III
DMSO 1342	Intermediate Ultrasound Physics
DMSO 2342	Sonography of High-Risk Obstetrics
DMSO 2341	Sonography of Abdominopelvic Pathology

SECOND YEAR

Fourth Semester-Spring-4 SCH

DMSO 2366	Clinical
DMSO 2130	Advanced Ultrasound and Review

Prerequisite Course Descriptions

BIOL 2401, BIOL 2402, ENGL 1301, Creative Arts, Social Behavioral, Science course, catalog descriptions are in the Paris Junior College Catalog.

The following are the core course descriptions and outcomes.

FIRST YEAR

1ST Semester-SPRING

DMSO 1110 Introduction to Sonography

Course Description:

An introduction to the profession of sonography and the role of the sonographer. Emphasis on medical terminology, ethical/legal aspects, written and verbal communication, and professional issues relating to registry, accreditation, professional organizations and history of the profession.

Learning Outcomes:

Describe the historical development of ultrasound; list related professional organizations; identify registry and lab accreditation requirements and process; discuss clinical practice guidelines for sonographers; and explain medical, legal, and ethical aspects of the profession.

DMSO 1260 Clinical -Diagnostic Medical Sonography/Sonographer and Ultrasound Technician

Course Description:

A health-related work-based learning experience that enables the student to apply specialized occupational theory, skills, and concepts. Direct supervision is provided by the clinical professional.

Learning Outcomes:

As outlined in the learning plan, apply the theory, concepts, and skills involving specialized materials, tools, equipment, procedures, regulations, laws, and interactions within and among political, economic, environmental, social, and legal systems associated with the occupation and the business/industry; and will demonstrate legal and ethical behavior, safety practices, interpersonal and teamwork skills, and appropriate written and verbal communication skills using the terminology of the occupation and the business/industry.

DMSO 1302 Basic Ultrasound Physics

Course Description:

Basic acoustical physics and acoustical waves in human tissue. Emphasis on ultrasound transmission in soft tissues, attenuation of sound energy, parameters affecting sound transmission, and resolution of sound beams.

Learning Outcomes:

Describe the interaction of sound and soft tissues; explain sound production and propagation; and summarize the basic principles and techniques of ultrasound.

DMSO 1341 Abdominopelvic Sonography

Course Description:

Normal anatomy and physiology of abdominal and pelvic cavities as related to scanning techniques, transducer selection, and scanning protocols.

Learning Outcomes:

Identify the sonographic appearances of normal abdominal and pelvic structures; explain physiology of abdominal and pelvic organs; and describe the appropriate scanning techniques according to standard protocol guidelines.

2nd Semester-SUMMER

DMSO 2305 Sonography of Obstetrics/Gynecology

Course Description:

Detailed study of the pelvis and obstetrics/gynecology as related to scanning techniques, patient history and laboratory data, transducer selection, and scanning protocols.

Learning Outcomes:

Identify the sonographic appearances of normal and abnormal female pelvis; identify normal and abnormal obstetrical findings; demonstrate appropriate scanning techniques using standard protocols; and evaluate patient history and laboratory data as it relates to sonography.

DMSO 1261 Clinical- Diagnostic Medical Sonography/Sonographer and Ultrasound Technician

Course Description:

A health-related work-based learning experience that enables the student to apply specialized occupational theory, skills, and concepts. Direct supervision is provided by the clinical professional.

Learning Outcomes:

As outlined in the learning plan, apply the theory, concepts, and skills involving specialized materials, tools, equipment, procedures, regulations, laws, and interactions within and among political, economic, environmental, social, and legal systems associated with the occupation and the business/industry; and will demonstrate legal and ethical behavior, safety practices, interpersonal and teamwork skills, and appropriate written and verbal communication skills using the terminology of the occupation and the business/industry.

DMSO 2351 Doppler Physics

Course Description:

Doppler and hemodynamic principles relating to arterial and venous imaging and testing.

Learning Outcomes:

Describe Doppler and hemodynamic principles and actions; identify instrument options and transducer selection; interpret methods of Doppler flow analysis; differentiate common image artifacts; and describe potential bioeffects.

DMSO 2353 Sonography of Superficial Structures**Course Description:**

Detailed study of normal and pathological superficial structures as related to scanning techniques, patient history and laboratory data, transducer selection, and scanning protocols.

Learning Outcomes:

Identify sonographic appearance of normal and abnormal superficial structures; identify appropriate scanning technique using standard protocol guidelines; and evaluate patient history and laboratory data as it relates to sonography.

3rd Semester-FALL**DMSO 2362 Clinical-Diagnostic Medical Sonography/Sonographer and Ultrasound Technician****Course Description:**

A health-related work-based learning experience that enables the student to apply specialized occupational theory, skills, and concepts. Direct supervision is provided by the clinical professional.

Learning Outcomes:

As outlined in the learning plan, apply the theory, concepts, and skills involving specialized materials, tools, equipment, procedures, regulations, laws, and interactions within and among political, economic, environmental, social, and legal systems associated with the occupation and the business/industry; and will demonstrate legal and ethical behavior, safety practices, interpersonal and teamwork skills, and appropriate written and verbal communication skills using the terminology of the occupation and the business/industry.

DMSO 1342 Intermediate Ultrasound Physics**Course Description:**

Continuation of Basic Ultrasound Physics. Includes interaction of ultrasound with tissues, mechanics of ultrasound production and display, various transducer designs and construction, quality assurance, bioeffects, and image artifacts. May introduce methods of Doppler flow analysis.

Learning Outcomes:

Describe pulse-echo principles and actions; identify instrument options and transducer selection; identify common image artifacts; and describe potential bioeffects.

DMSO 2342 Sonography of High-Risk Obstetrics**Course Description:**

Maternal disease and fetal abnormalities. Includes scanning techniques, patient history and laboratory data, transducer selection, and scanning protocols.

Learning Outcomes:

Identify and differentiate normal and abnormal fetal and maternal structures; demonstrate pertinent measurement techniques and scanning techniques using standard protocols; evaluate patient history and laboratory data as it relates to ultrasound; and select appropriate transducer for area of interest.

DMSO 2341 Sonography of Abdominopelvic Pathology**Course Description:**

Pathologies and disease states of the abdomen and pelvis as related to scanning techniques, patient history and laboratory data, transducer selection, and scanning protocols.

Learning Outcomes:

Identify abnormal abdominal and pelvic structures; identify scanning techniques using standard protocol guidelines; and evaluate patient history and laboratory data as it relates to abdominopelvic sonography.

SECOND YEAR**4th Semester-SPRING****DMSO 2366 Clinical (or Field Experience)- Diagnostic Medical Sonography/Sonographer and Ultrasound Technician****Course Description:**

Practical, general workplace training supported by an individualized learning plan developed by the employer, college, and student.

Learning Outcomes:

As outlined in the learning plan, apply the theory, concepts, and skills involving specialized materials, tools, equipment, procedures, regulations, laws, and interactions within and among political, economic, environmental, social, and legal systems associated with the occupation and the business/industry; and will demonstrate legal and ethical behavior, safety practices,

interpersonal and teamwork skills, and appropriate written and verbal communication skills using the terminology of the occupation and the business/industry.

DMSO 2130 Advanced Ultrasound and Review

Course Description:

Preparation for medical sonography credentialing exams. Advanced medical sonography topics such as professional development and evolving sonographic applications and practices.

Learning Outcomes:

End-of-Course Outcomes: Apply problem solving and critical thinking skills in the context of professional transition; and demonstrate registry preparedness.

Admission Criteria

Application Requirements to the Diagnostic Medical Sonography Program

1. Application and current admission to Paris Junior College
2. Submission of complete application materials to the Health Occupations Office during the designated filing period.
3. Completion of the 18 credit hours of Diagnostic Medical Sonography Prerequisite Courses with a minimum grade point average of 3.0.
4. Texas Success Initiative (TSI) exemption status or proof that TSI criteria has been met.
5. Proof of Paris Junior College acceptance.
6. HESI A2 scores must have a score of 70 or above in Reading and Math sections.
7. Job shadow documentation-not required but recommended.

Admission Selection Criteria and Assigned Points

Point criteria

Possible points

1. **Prerequisite courses** (20)
All prerequisite courses must be completed with a grade of “C” or better. GPA of 3.5 for prerequisites is recommended. Points are awarded for each course completed.

A= 4 points, B=2 points, C=1 point

Prerequisite courses

BIOL 2401

BIOL 2402

ENGL 1301

MATH 1314

PHYS 1405 (or approved substitute)

2. **GPA-Prerequisite courses** (4)
2.50-2.99 = 1 point
3.0-3.49 = 2 points
3.5-4.0 = 4 points
3. **Points awarded for highest previous degree** (6)
Master = 6 points, Bachelor = 4 points, Associate = 2 points
4. **Points for prior medical work experience with patient care** (5)
Proof of experience is required: 1 point per year of experience with a maximum of 5 points allowed
5. **HESI A2 Assessment test scores** (5)
Points are awarded based on the average scores from the Reading, Math, A&P, Grammar, and Vocabulary sections. Only applications that demonstrate a score of 70 or above in the Reading and Math sections will be considered. This exam can be taken more than once. This requirement is waived for previous degrees awarded by Regionally accredited institutions with maximum points awarded.
100-90 = 5 points 89-80 = 3 points 79-70 = 2 points
6. **Job Shadow-RECOMMENDED not required**
 - **Job Shadow documentation** (5)
 - **Job Shadow interview questions and candidates' responses.** (5)
7. **Personal Interview** (50)
Only applicants for the top 150 percent of available cohort *seats that have the highest points will be selected for an interview. Interviews will be scored and applicants will be contacted via e-mail.
**Number selected is subject to change*
8. **Final ranking process**
 - Number of points based on these sections:
 - o Pre-req courses (maximum of 20 points can be obtained)
 - o Prerequisite GPA (maximum of 4 points can be obtained)
 - o Highest degree earned (maximum of 6 points can be obtained)

- o Work experience (maximum of 5 points can be obtained)
- o Average of HESI-A2 scores (maximum of 5 points can be obtained)
- o Job shadow forms (maximum of 5 points can be obtained)
- Personal interview Score (maximum of 50 points can be obtained)

The applications with the highest cumulative points will be accepted each Fall semester. Alternates will be accepted on a stand-by basis. The number of selected applicants is subject to change with each cohort.

STUDENT WITHDRAWAL:

A student may withdrawal from a Diagnostic Medical Sonography course by using the procedure outlined in the Paris Junior College Catalog following counsel with his/her instructors and the Program Coordinator of the Program. After withdrawing from a Diagnostic Medical Sonography course, a student must reapply for admission to the Diagnostic Medical Sonography Program in order to enroll in any subsequent Diagnostic Medical Sonography course. (See Readmission Policy) The student must initiate the withdrawal procedure with the instructor prior to the withdrawal date or a grade of "F" will be recorded for the total semester hours of the dropped Diagnostic Medical Sonography course(s).

The Paris Junior College Program in Diagnostic Medical Sonography reserves the right to request, at any time, the withdrawal or initiate the recommendation of dismissal of any student whose health, conduct, professionalism, clinical performance, patient care skills and scholastic records indicate that it would be inadvisable for the student to continue with the program.

READMISSION POLICY:

Students may be admitted to the program a total of two (2) times. No student may be re-admitted to the program after a two-year period. Student who has withdrawn or been dismissed must pass a readmittance exam that includes content covered at point of departure. Exam score must be 80% or higher to be readmitted. Student must start program from beginning if re-admission is beyond two years or Readmittance Exam score is below 80%. A student, who is dismissed, depending upon the severity of the occurrence, may not be re-admitted. The Admission Committee will review past performance as criteria for readmission.

Students who have dropped from the program because of personal reasons may be readmitted the following year into the term in which the students dropped after the DMS faculty agrees to re-admittance, if they were passing at that time and if there is an opening in the program. (If one DMSO class is dropped, all DMSO classes should be dropped.)

A student who was dropped by the program (or by choice) due to failing grades within the first year **must reenter the program from the beginning.** This ensures the student gets the foundation needed to be successfully, failure in the first year indicates a disconnect with content retention. Since each course builds upon previous content, without having an understanding of the first year content it would be impossible to continue the second year. Students on probation at the time of withdrawal or dismissal are ineligible to reapply to the DMS program. If the student is in the second year at the time of dismissal, and SPI registered, the student must take a readmittance exam that includes all content covered unto the point they left the program and pass with an 80% or higher to gain entrance back into the program in the following year (if there is an opening).

Upon readmission, the student will complete the program under student policies and curriculum in effect the year of readmission. The student must submit a letter to the program director stating intentions to re-enter and meet the September 30 application deadline.

The following criteria must be met for re-admission:

1. Submit a written request to the Program Director by June 1st of that year.
2. Meet current DMS admission requirements.
3. Provide current transcripts and or other articles necessary to document accomplishments of requirements for readmission.

TRANSFER POLICY:

Students wishing to transfer into the PJC DMS program from another college will be considered on an individual basis. PJC graduation requires 15 semester hours completed successfully at the institution.

GRADING POLICY AND PROCEDURE

THEORY GRADES:

A percentage grade will be given on the composite of written assignments, quizzes, classroom examinations, final examinations, attendance, and special projects.

A percentage grade for the course will be based on the following scale:

- A 89.5 - 100
- B 80.5 – 89.4
- C 74.5 – 80.4
- F 0.00 – 74.4

GRADING:

A minimum grade of 75% must be maintained on all required academic Diagnostic Medical Sonography courses. **The passing minimum grade is 75%.** The grading scale will be used for all DMSO academic courses, according to each course syllabus. Clinical DMSO courses are graded differently. See Clinical – Grading and Course Syllabi.

Failure of any DMSO course while in the program will lead to dismissal from the program.

If a student makes a 75% or less on any daily lab grade, the student must review the scan within that week and initial all areas of incompetency. During this review time, if a student needs an instructor to clarify the grade, it is the responsibility of the student to approach any DMS instructor. A daily lab grade of 75% or less for 2 consecutive days will result in probation, suspension and/or dismissal.

The student is required to be present for all scheduled exams. If an exam is missed, the student will be required to contact the instructor prior to exam of absence, and schedule the make-up exam. The exam must be taken by or upon the first class day upon his/her return to class. The make-up exam

may be an alternative exam. The student must have the exam completed by the next scheduled class meeting time for that class.

If **all** students have taken the test on the scheduled date, the test review may be performed immediately after the test; however, finalized test grades may not be available until the next class meeting day. Grades will **not** be given over the telephone, text message, or electronic mail.

Daily grades/pop quizzes may be given at any time during the class periods, and may consist of take-home assignments or study guides. The daily grade/pop quizzes will be related to classroom content. No makeup daily grade/pop quiz will be given to a student who is absent or tardy when a daily grade/pop quiz is given. A student who misses a daily grade/pop quiz will receive a grade of zero (0) for that daily grade/pop quiz.

A student may withdraw with a "W" in any Sonography course if prior to the drop date.

INCOMPLETE OR "X" GRADES:

Should a student receive an incomplete or "X" grade in a Diagnostic Medical Sonography course or a concurrent support course, and this "X" is not removed by the end of two weeks into the next semester, he/she may not continue in the Diagnostic Medical Sonography Program.

STUDENT CONFERENCES AND EVALUATIONS:

Student conferences and evaluations will be held at least twice during any major grading period (or more if a situation warrants). It is at this time that the student will be told of his/her area of concerns and strong points. There will be a complete set of records and data kept on each student. Both the counselor and the student will sign all conferences and evaluations.

ACADEMIC COUNSELING SERVICES:

Either the student or the instructor, or both, may initiate conferences regarding learning and/or progress in a course. Sometimes concerns or problems of a personal nature interfere with student learning. When these problems occur, the student should initiate, or be encouraged to initiate, counseling. Such academic counseling is considered a crucial part of the learning experience. The student development center (903-782-0426) is staffed with professional counselors who are available to assist students. (See Paris Junior College Calendar/Handbook)

UNSATISFACTORY PROGRESS IN A COURSE CONTRACT FOR IMPROVEMENT:

Students who have unsatisfactory classroom/clinical performance will have a student conference scheduled, be given written notification and a plan for improvement (remediation) will be completed. If the student does not show improvement, the probation status will be implemented.

Clinical performance needing improvement or clinical performance that is unsatisfactory will be specified in the documentation. If the student does not show improvement, the probation status will be implemented. A student may be placed on probation at the faculty team's decision without preliminary remediation.

PROBATIONARY STATS:

Probationary criteria will be written in the form of behavioral/clinical objectives and recorded in the document entitled "Report of Unsatisfactory Progress/Probation Form. A time frame for review of status will be specified. The terms of probation will be discussed with the student and validated by the signatures of the course instructor and the student.

At the end of the specified term of probation, the student's status is reviewed by the program faculty. This review will be recorded on the document entitled, "Report of Status Review" . If the probation criteria has been met, the student's probation is lifted. Failure to meet probationary criteria may result in failure of the course at the faculty team's decision. Probation will be contained within each course.

DISMISSAL:

Any student may be dismissed from the program without a probationary period if the student shows gross negligence, unsafe care, lack of personal or professional integrity, breach of patient confidentiality, education requirements subversion, or commits a criminal act.

"Unsafe care" is defined as any act of omission or commission which places the client(s) in jeopardy of negative changes in health status.

Personal integrity as well as concern for the welfare of patients are personal attributes that are absolutely essential for those entering the Diagnostic Medical Sonography profession. Actions taken and attitudes expressed while in the student role are considered indicative of behaviors to be expected of the graduate. The student will be given the opportunity to discuss the incident(s) with the course team faculty.

GROUND FOR IMMEDIATE DISMISSAL FROM PROGRAM:

A student may be subject to immediate dismissal from the DMS Program and failure of the course in the following situations or at the discretion of the Program Officials:

- a. Failure to maintain patient safety resulting in injury to the patient.
- b. A medication error which results in injury to the patient.
- c. The practice of academic dishonesty such as academic requirements subversion, cheating on preparation for clinical, and on tests or written assignments (both parties), making false entries in a record. (ex: clocking In/Out clinical outside of the designated area or using an unapproved device such as personal cell phones, computers, iPad, etc., changing clinical schedule, asking for competencies not performed.)
- d. The use of alcohol, illegal drugs, or misuse of prescription or any other drugs during school activities or on school property, or reporting to class/clinical under the influence of alcohol or illegal drugs.
- e. Appropriating, in connection with the practice of Diagnostic Medical Sonography, medication, supplies, equipment, or personal items of the patient/client, employer, or any other person or entity. (This includes accepting remuneration, gifts, etc.)
- f. Performing any required Direct Supervision exam unsupervised, including all repeats and all levels of competencies.
- g. Not following the appropriate absentee protocol such as not calling in to the clinical site before the scheduled shift, not notifying the instructor with required

information, not logging time appropriately in Trajecsyst, being a “no call, no show” to clinicals, class, or to instructor.

- h. Abuse of utilizing time exceptions in Trajecsyst. Students should always clock in and out in the designated area. Time exceptions are tracked and abuse of this policy will be determined by the Program Officials.

Procedure for Dismissal:

- STEP 1. Dismissal from the program will be initiated by the faculty and program coordinator with prior notification of the Dean of Health Occupations. If the Dean is absent, the Vice President of Workforce Education must be notified prior to dismissal.
- STEP 2. The program coordinator and instructor will meet with the student to inform him/her that they are initiating the procedure. If the program coordinator is the instructor, another faculty member will be present.
- STEP 3. If the student wishes to contest this decision, he/she must file a Request of Grievance Conference with the Program Coordinator.

GRIEVANCE PROCEDURE

ACADEMIC GRIEVANCES:

Note: Students may not be allowed to continue in class or clinical rotation until the dispute or grievance is resolved.

Problems of an individual or of a personal nature should be handled in the following ways: A student may formally express dissatisfaction with his/her progress in the Diagnostic Medical Sonography Program. All disputes should be resolved at the lowest level possible (i.e., the instructor and student). Recognizing that this is not always possible, the following procedure has been adopted as policy for resolving grade and course progress disputes. The steps have been defined to facilitate resolution at the lowest level and in that interest; the order of steps will at no time be violated. The grievance procedure must be initiated within two (2) working days of the incident by which time the student must initiate a "Request of Grievance Conference" with the program coordinator or Dean of Health Occupations if the team leader is not available.

- STEP 1. The student should request an appointment to discuss the case with the faculty and the program coordinator. If a satisfactory decision still has not been reached, the student may request to meet with the Dean of the Health Occupations within five (5) working days.
- STEP 2. If resolution of the grievance has not been reached under the guidance of the Dean within five (5) working days, the student may request an appointment with representative members of the faculty-as-a-whole within five (5) working days. The faculty vote will be taken by ballot and tallied by the Director and a PJC non-Diagnostic Medical Sonography faculty/staff member. Failure will require a two-thirds majority vote of the faculty. The conference will be recorded on tape and on a Grievance Conference Report form, a copy of which goes to the student and the

original placed in the Confidential File.

STEP 3. If resolution of the grievance has not been reached under the guidance of the Dean within five (5) working days, the student may request an appointment within five (5) working days with the Vice President of Workforce Education to present his/her case.

STEP 4. Continue with the current Paris Junior College Student Handbook: Student Rights and Responsibilities: Student Complaints/ Academic Appeals Procedure beginning with **Level Two****(Please refer to PJC Student Handbook for complete process:

Student Rights and Responsibilities, Student Complaints/Academic Appeals (FLD) PJC Exclusions

This policy shall not apply to:

1. Complaints alleging discrimination or harassment based on race, color, gender, national origin, disability or religion. [See FDE]
2. Complaints concerning retaliation relating to discrimination and harassment. [See FDE]
3. Complaints concerning disciplinary decisions. [See FMA]
4. Complaints concerning a commissioned peace officer who is an employee of the College District.

Purpose

The purpose of this policy is to secure at the first possible level prompt and equitable resolution of student complaints.

Representation

The student may be represented at any level of complaint. If the complaint involves a problem with an instructor, the student shall discuss the matter with the instructor before requesting a conference with the Vice President at Level One.

Level One

A student who has a complaint shall request a conference with the Vice President within 15 calendar days of the date the student first knew, or with reasonable diligence should have known, of the decision or action giving rise to the complaint or grievance;

Level Two If the outcome of the conference with the department chairman is not to the student's satisfaction, the student shall have 15 calendar days to request a conference with the Vice President of Academic Services or appropriate designee, who shall schedule and hold a conference. Prior to or at the conference, the student shall submit a written complaint that includes a statement of the complaint and any evidence in its support, the solution sought, the student's signature, and the date of the conference with the department chairman.

Level Three

If the outcome of the conference with the Vice President is not to the student's satisfaction, the student shall have 15 calendar days to request a conference with the Vice President of Student Services or appropriate designee, who shall schedule and hold a conference. Prior to or at the conference, the student shall submit the written statements required at Level Two and the date of the conference with the Vice President of Instruction. If the conflict concerning an academic issue still exists, the Director of Student Life shall convene an ad hoc appeals committee and shall act as chairperson. Two Deans not directly involved in the conflict situation shall sit on the committee along with all instructors of the student and a student chosen from a panel of at least ten students

selected by student government council. The committee shall hear all parties involved in the conflict, and following the deliberations of the committee, the chairperson shall forward the finding and decisions of the appeals committee in writing to the College President. After review of these findings, the College President shall furnish the student with a written communication identifying the administrative position of the College District.

Level Four

If the outcome of the conference with the Vice President of Student Services or designee or the academic review committee and subsequent letter from the College President is not to the student's satisfaction, the student may submit to the College President a written request to place the matter on the agenda. The College President or designee shall inform the student of the date, time, and place of the meeting. The Board President shall establish a reasonable time limit for complaint presentations. The Board shall listen to the student's complaint and take whatever action it deems appropriate. The Board's consideration shall be based on the complaint records developed at the administrative reviews and no new evidence shall be received by the Board. Each side shall be entitled to make oral arguments based on the complaint record within the time restrictions established by the Board.

Closed Meeting

If the complaint involves complaints or charges about an employee, it will be heard by the Board in closed meeting unless the employee complained about requests it to be public.

Access to Confidential File

The CONFIDENTIAL FILE will be kept in the office of the Dean of Health Occupations. Access to the file will be controlled by the Dean and limited to the course faculty directly involved in the particular grievance, and the Vice President of Workforce Education. The procedures in this policy have been set up to assure confidentiality and a full hearing of the student's position.

SUSPENSION POLICY:

A student may be put on suspension (1-3 days) for repeated infractions of any rule. This may be because of behavior (including attitude), lack of initiative, poor performance, lack of self control, patient care negligence, excessive absences/tardy or any other incident in which the clinical site, lab or didactic instructor deems appropriate at that time. The student will be informed of the number of days of suspension. If the expected behaviors are not exhibited, dismissal from the program will occur.

Suspension may be used by the program:

- a. To remove the student from the clinical site in the event of a situation in which the clinical instructor deems that is the best, immediate course at that time. The clinical instructor will immediately inform the clinical coordinator or the department chair of the action. The clinical instructor will document the events and a copy will be put in the student's folder and a copy will go to the clinical coordinator.
- b. To give the student an opportunity to evaluate his/her career goals.

The clinical education time the student missed due to the suspension will not be made up. Class time missed due to the suspension will not be made up. For any tests or grades given during the suspension, the student will receive a grade of 'zero' (0) and will not be allowed to make up the missed work.

DISMISSAL POLICY:

1. I have read and understand all portions of the course syllabi, course schedules and the DMS Student Handbook. I agree to comply with all rules, regulations and requirements contained in the course syllabi and course schedules, and with any additional rules as communicated to me by the instructors during courses. I understand that I am responsible for knowing and following the rules of all clinical sites where I may have rotations during courses.
2. I can and will be dropped from the Program with a grade of **'F'** in any DMS course for:
 - a. breach of confidentiality or HIPPA guidelines.
 - b. stealing information or tangible goods.
 - c. misrepresenting any fact.
 - d. lying about any fact.
 - e. being barred (asked not to return) from **any** clinical site (see scope of practice).
 - f. failing to complete clinical/didactic/lab requirements on time.
 - g. behavior would pose a risk to self or others; potential safety risk during class or during any clinical rotation assignment.
 - h. representing that I hold a level of certification or licensure I do not hold.
 - I. practicing beyond the scope of clinical objectives (scope of practice).
 - j. committing a criminal act at any time while enrolled in the program.
 - k. failure to maintain current CPR certification.
 - l. failure to pass **any** of the DMSO curriculum courses; or failure to pass the clinical scanning final (**any** of the required scanning protocols)
 - m. disruption of classes (**demeanor**), making it difficult for other students to acquire the material presented. This can be observed by the faculty or reported by a fellow student.
 - n. willful damage to school, hospital, or private property.
 - o. documented evidence of lack of proper patient care.
 - p. leaving the clinical area without permission from an instructor.
 - q. failure to comply with uniform code at clinicals or in lab.
 - r. failure to follow radiation protection rules and regulations.
 - s. falsifying sign-in sheets/time sheets for self or another student, or any DMS documentation.
 - t. one incidence of being put on probation
 - u. cheating, lying, collaborating, plagiarizing or falsifying any documentation verbally or in print.
 - v. use of any form of abusing, disrespectful, threatening or harassing language and/or behavior to classmates, instructors, hospital personnel or patients.
 - w. unprofessional conduct at clinical site or in the classroom.
 - x. violating or failing to comply with any provision of the rules, regulations or policies set forth, or any policy stated in the 'DIAGNOSTIC MEDICAL SONOGRAPHY Student Handbook'.
 - y. failing to adhere to the Duties and Responsibilities listed in this handbook.
 - z. failure to pass lab skills "Check Offs" each semester.
3. I understand the following:
 - a. that I may contract a contagious disease, possibly a fatal one, through contact with patients.

- b. that it is mandatory that I practice infection control techniques that have been explained to me at the beginning of this course.
- c. that I may become physically injured by improper handling of patients and/or equipment.
- d. that I will be assigned to more than one Clinical Education site and will manage the possible added monetary and time costs or burdens that this may create.

Knowing all the above facts and with a thorough understanding of the risks involved in the training I am about to participate in, I hereby declare that I am willing to assume all risks involved with my training and that I do hereby assume all such risks, whatever they may be, and that if I become unwilling to assume all risks involved in my course of study, I will immediately inform my instructor of such unwillingness and will immediately withdraw from the course.

With full and complete knowledge and understanding of all statements contained in this document, and having asked for clarification of any parts that I might not have understood, so that I do have a clear and complete understanding of this document and what I am signing and agreeing to, I hereby promise and agree to hold harmless and indemnify, Paris Junior College, its faculty, staff, agents and employees, from any and all liability, payments, claims, costs, causes of action, judgments and Attorney's fees of whatsoever nature and howsoever arising (1) in any way in connection with my being a student at Paris Junior College and being enrolled in Diagnostic Medical Sonography Program courses, (2) from clinical site experiences in connection with the courses being taken, or (3) in any other way whatsoever. If I violate or fail to abide and conform in any way to the promises, representations and covenants set forth in this document, I agree that I may be dropped from all courses in the Diagnostic Medical Sonography Program in which I am enrolled, or that I may be given a failing grade in all courses, subject only to the rules of due process and to the procedures set forth in the Paris Junior College catalog and student handbook.

(Please sign the Dismissal Policy Agreement in Section IV)

DISCIPLINARY MEASURES:

In the event that a student is not performing in a responsible, professional manner, the following disciplinary measures will be taken for lesser offenses:

Serious offenses may result in immediate suspension:

1. Verbal warning - documented for future reference.
2. Written warning.
3. Conference with the department chair or clinical instructor; at this time, immediate suspension and/or dismissal from the program.

CHAIN OF COMMAND:**Clinical:**

Immediate Sonographer involved
Facility Clinical Instructor
Clinical Coordinator, PJC
Program Coordinator, PJC

Classroom Situation:

Course Instructor
Program Coordinator

Laboratory Situation:

Course Instructor
Program Coordinator

All situations, which are not resolved at the Department Chair level will then result in action from:

Dean of Health Occupations
Academic Grievances -- See Above

This order of events must be followed. People in each position on this chain will not discuss a problem with a student until an effort has been made at each level in secession in the chain. Most situations can be resolved best at the first level. If, after talking at the first level and no satisfaction or solution is found, the student is then free to go to the next level in an effort to resolve the issue.

FACULTY:

John Doan M.D. – Medical Director/Advisor
Ashley Flanagan, MS, RDMS, RVT – Program Coordinator/DMS
Tiana Reaves, RDMS – Clinical Coordinator/DMS
Julia Potts – Adjunct
Tate Power- Adjunct

CIVIL TREATMENT:

All students should expect to be treated fairly and without harassment or any form of intimidation or extortion while he/she is a Paris Junior College student. It is reasonable to expect instructors, classmates, co-workers and hospital personnel to stop offensive behavior when asked to do so without the fear of retaliation. The student's first line of defense is to ask the person to stop an offensive behavior (preferably and almost essential in the presence of a witness), document the event and report to your immediate supervisor, clinical instructor, instructor, department chair, etc. In all cases, the clinical coordinator and/or the department chair must be made aware of the situation. The faculty is always willing to listen to any concerns about this, perceived or actual.

MISCELLANEOUS INFORMATION WITNESSING FORMS:

Student, regardless of level, are NOT allowed to sign as a witness to the patient's signature on wills, consent forms, or other legal attachments.

RESPONSIBILITY FOR INFORMATION RETENTION:

The student is responsible for retaining all information, knowledge, theory and concepts presented in all DMSO and general educational classes in the program. It is essential that this requirement be met in order for the student to pass the ARRT and American Registry for Diagnostic Medical Sonography examination.

Self imposed standards of earning only the minimum 75% in program courses is not advised. It is very difficult to be proficient two years later if the student did not study and thoroughly understand the information. Studying for and passing a particular examination does not end the student's responsibility for knowing that information.

LABORATORY POLICIES AND PROCEDURES:

Students are expected to maintain the Sonography laboratory facilities on campus with as much care and order as expected in the actual clinical education settings. Since the maintenance and organization of the ultrasound room and equipment is the sonographer's responsibility in a clinical setting, students are expected to assume the maintenance and organization of the sonography lab in the educational setting. Open lab is an opportunity to enhance your scanning skills outside of the scheduled scanning lab.

Laboratory guidelines for operation and safety included the following:

1. Cell phones are prohibited in the lab.
2. NO FOOD or DRINKS are allowed in the Sonography lab.
3. A Volunteer Waiver Form must be completed & signed prior to any practice examination of a volunteer.
4. All volunteers must be in good health; individuals seeking medical care will not be accepted.
5. The volunteer must be informed that an impression/diagnosis will not be given.
6. The scanning session of a volunteer will be limited to only the time necessary to complete imaging of a simulated diagnostic procedure. Obstetric volunteers are not to be scanned in excess of one hour.
7. Students must have an instructor available before performing sonograms in the lab.
8. If a significant abnormal finding is discovered, it should be privately reported to an instructor, who in turn will follow the Incidental findings policy.
9. All accidents that occur in the lab must be reported immediately to the supervising faculty member.

10. In case of ultrasound equipment damage or operating failure, use of equipment should be discontinued immediately and reported to the supervising faculty member for further investigation and repair.
11. Careful, safe, ergonomic use of the ultrasound equipment and furniture must be followed.
12. Transducers and equipment must be cleaned after each patient is scanned and at the end of the lab session with the appropriate disinfectant.
13. All students are obligated to adhere to the infection control policy; repeated violations may result in disciplinary action, including formal documentation.

INFECTION CONTROL POLICY-ULTRASOUND LAB:

1. Purpose

To prevent infection and cross-contamination in the ultrasound lab, ensuring a safe environment for education and clinical practice.

2. Scope

Applies to all students, faculty, clinical educators, simulation participants, and support staff in the lab.

3. Responsibilities

Program Director/Faculty: Oversee and review policies.

Educators/Instructors: Enforce compliance.

Students: Follow all protocols.

Support Staff: Maintain cleanliness and supplies.

4. Hand Hygiene

Mandatory before/after patient or model contact, after glove use, and after touching shared surfaces.

Use alcohol-based rub if hands are clean.

Use soap and water if soiled or exposed to fluids.

5. PPE Requirements

Gloves: Single-use, required for all scans.

6. Equipment Disinfection

Probes:

Non-invasive: Clean and low-level disinfect after use.

Mannequins/Phantoms: Disinfect after each session.

Machines: Wipe controls and screens between users.

7. Gel Use

Disinfect tops of bottles after each use.

8. Environmental Cleaning

Disinfect beds, chairs, and surfaces after each use.

Deep clean lab daily.

9. Waste Management

Use designated bins for clinical waste.

No food or s allowed.

10. Health Requirements

Report illness symptoms; do not attend lab when sick.

FAIR PRACTICES:

The health and safety of patients, students, and faculty associated with the educational activities of the students must be adequately safeguarded.

Therefore, students scan each other during assigned on-campus labs. All students are required to

scan an individual for a daily lab grade. In the event you are not scanned by one of your lab peers on any given day, there will be no adverse effect on grade or evaluations by participation or non-participation. A scan model will be provided in the event you do not allow consent to be scanned.

POLICY ON THE USE OF HUMAN SUBJECTS FOR EDUCATIONAL PURPOSES:

Guest models (in lieu of patients) must be cleared by the Program Director and/or Clinical Coordinator prior to any student scanning.

1. Student and non-student volunteers for scanning models must sign a waiver (found in scan lab) indicating that they understand that although there is no indication that serious bioeffects have occurred because of exposure to acoustic energy that bioeffects do still exist but can be controlled with proper training. All current DMS students will practice the as low as reasonably achievable (ALARA) principle while performing exams on human subjects. DMS students should be mindful when adjusting controls that affect the acoustic output and by considering both the transducer dwell time and overall scanning time. Students will utilize correct examination presets, monitor mechanical and thermal indices, and move or lift the transducer during periods of non-imaging.
2. Any scanning performed by a student in the scan lab must be supervised by a PJC-DMS faculty member. Should any anomaly be identified during a scanning session with a model, proper referral will be made to the model's physician and should not be taken as a diagnosis. The model will not hold any student or DMS faculty member responsible for any missed pathology or identification of pathology that is not identified in any other medical examination. Please refer to the Incidental Findings Policy located in the DMS Student Handbook.
3. First trimester OB scans, endocavitary, and testicular exams will NOT be performed on any model for any reason in the on-campus scan lab. Students should utilize the available phantoms for practicing these exams in lab.
4. Prior to any second or third trimester OB exam being performed on a volunteer basis, OB patient must sign a release for each volunteer scan. This includes, but is not limited to, pregnant DMS students, non-DMS PJC students, and PJC faculty/staff members who volunteer as a model.
5. All DMS students will follow the guidelines identified in the Sonography Lab Infection Control Policy outlined in the DMS Student Handbook when performing scans on human subjects in the on-campus scan lab. All requests and signed waivers will be kept on file in the DMS faculty offices.

INCIDENTAL FINDINGS POLICY:

If a potential incidental finding is discovered in a scan lab model, the student must notify the laboratory instructor as soon as possible. The student should ask to speak privately with the laboratory instructor.

- If the nature of the incidental finding is a possible normal variant:
 1. The lab instructor will discuss the findings with the model privately.
 2. The model will be referred to their personal physician and asked if they want to continue in scan lab. If the model does not want to continue, the exam will be ended. If the model does want to continue, the exam will be continued.

- If the nature of the incidental finding is possibly clinically significant:
 1. The lab instructor will discuss the findings with the model privately.
 2. The model will be referred to their personal physician and asked if they want to continue in scan lab. If the model does not want to continue, the exam will be ended. If the model does want to continue, the exam will be continued.

- If the nature of the incidental finding is possibly life-threatening:
 1. The lab instructor will discuss the findings with the model privately.
 2. The model will be referred to emergency care (call 911). The exam will be ended



DIAGNOSTIC MEDICAL SONOGRAPHY

Section II

CLINICAL/CLINICAL INFORMATION

INTRODUCTION

These practicum and clinical course policies have been developed to assist Diagnostic Medical Sonography students understand the rules and regulations that will apply during their *Clinical* (this experience is commonly called “Clinical education” or “Clinicals”) assignments. Students should adjust their personal schedules and attitudes in order to comply with the standards set by the program faculty.

This twenty-two month period in the life of the student will be very busy and demanding, but very rewarding. Success is expected and professionalism is required.

The student’s clinical experience will follow the same timeframe as the college’s semester schedule. If the college is closed, then the student is not allowed to attend clinical. The 1st year student’s clinical experience will consist of Spring 12 hours/week, Summer 16 hours/week, and Fall 16 hours/ week. The 2nd year student’s clinical experience will consist of Spring, 24 hours/week.

Clinical discussion is considered part of the required clinical experience. Students are responsible for clocking in and out, and under no circumstances may a student clock in or out for another student. **This is grounds for dismissal from the program.** If a student forgets to clock in or out, then the student must log a time exception in Trajecsyst. **Falsification of time records will be grounds for dismissal.** A 15 minute break may be taken twice a day as time permits. A lunch period will be provided and scheduled by the clinical instructor.

Clinical experience may be scheduled between the traditional hours of 7 am – 7 pm on Monday through Friday of the work week to assure equal educational opportunities for each student. Students are assigned to various clinical facilities. The student should be prepared to drive to any of the facilities during the course of the program. The clinical experience will allow each student to rotate facilities and gain experience from both the hospital and imaging center facilities. A student may be shifted from an assigned facility rotation to another facility’s rotation at any point in time to assure equal educational opportunity for each student. All schedules or clinical experience including changes will be non-discriminatory in nature and solely determined by the program. The facilities are not allowed to determine schedule rotations of students. A student will not be allowed in the facilities departments when not assigned to clinical experience, except when actually employed by the facility or a student is considered as a general public individual. All performances are supervised by a qualified practitioner during the student’s clinical experience.

A student is responsible for obtaining and maintaining current CPR certification, immunizations, and any other required medical screenings prior to entering any semester’s clinical experience or classroom course while a current student in the Diagnostic Medical Sonography program. Uniforms will consist of Black top and pants. A solid black shirt may be worn under the top. Black socks and predominantly black shoes should be worn. Documentation of the clinical experience is recorded in the Student Journal Book and logged in Trajecsyst. Instructors may be contacted through the Health Occupations Department Office (903-782-0734). Instructors will be accessible to students during assigned clinical experiences. It is the student's responsibility to seek instructor assistance when needed or in cases where the student is uncertain about his/her ability to perform a particular procedure. The instructor will be contacted during regular business hours (8am-5pm) in their office and 7am-8am and 5pm-7pm via cell phone.

RELEASE TO ATTEND CLASSES AFTER AN EXTENDED ILLNESS OR TRAUMA:

If a student is involved in an accident that requires medical attention, he/she must furnish the Program a release from the physician before returning to the Clinical site.

If the student has an extended illness, he/she must provide a statement from the physician concerning his or her capabilities to perform regular assignments. If this illness is deemed a contagious disease, a release must be provided before attending clinical education.

CLINICAL EDUCATION HOURS:

The Clinical education hours will be eight to twelve-clock hour shifts. No more than forty hours of Clinical and didactic education combined will be assigned per week. Clinical education hours will vary according to the class schedules.

Any unavoidable, necessary personal appointments that must be made during Clinical education assigned time will be discussed and scheduled **in advance** with the Clinical Instructor and PJC Faculty. This time must be made up when the Clinical Coordinator assigns the make-up time.

CLINICAL/LAB/CLASSROOM UNIFORM:

1. The uniform will be worn in the clinical/Clinical area as well as the Classroom. Uniform should always be clean, neat, wrinkle free, and in accordance with the health care facilities' dress code.
2. Complete uniform includes: black top and pants; a watch with a second hand, school identification badge. Appropriate shoes (predominantly black) will be discussed at clinical orientation.
 - a. Shoes should be clean, comfortable, closed back, conservative, and predominately black; no clogs. If tie shoes are desired, shoestrings must be clean - white not frayed.
 - b. Uniform tops will be always buttoned. Uniform tops for women and men should cover the hips and hang loosely.
 - c. Uniform skirts should be at least mid-knee and hang comfortably in a non-restrictive fashion.
 - d. Uniform pants should hang comfortably and loosely from the waist, covering the ankle and approximately one inch above the floor while standing.
 - e. If a shirt is worn under the scrub top, it must be solid black (short or long sleeve) and the length cannot be longer than the scrub top (must be tucked into scrub pants).
 - f. Lab jackets must be solid black only.
 - g. The uniform identification badge should be worn on the left side at collar level. Only the school identification badge may be worn. A badge holder may be worn. Your badge is part of your uniform and if you show up to any area without it you will immediately be dismissed with an absence for the day.
3. If a student's uniform is incomplete and does not meet the above standards, it is at the discretion of the instructor/coordinator to dismiss that student from the clinical experience resulting in a clinical absence.
4. Jewelry worn with the student uniform will be limited to only one ring (or wedding set). No necklaces, tongue rings, nose rings or bracelets shall be worn (clear spacers may be worn).

CLINICAL/CLINICAL APPEARANCE

The following should be observed when in uniform or lab coat.

1. Cleanliness and neat personal appearance are essential.
2. All Hair should be neat, clean, off the shoulder, pulled back, and worn in a conservative style (natural looking color) that doesn't hang in the face when head is leaning forward. Hair should be secured so that it doesn't present a hazard to asepsis. Men should be clean-shaven with sideburns not below the ear lobes. A neatly clipped mustache and/or beard will be allowed.
3. Fingernails: Nails must be clean and well groomed. Artificial nails or gel nails are not acceptable. Nails need to be short. Polish, if worn, must be neutral. This is in accordance with hospital policies.
4. A moderate, conservative amount of make-up may be worn.
5. Undergarments must be worn.
6. Use of perfumes, colognes, or scented lotions are not allowed.
7. Gum may not be chewed while students are in clinical or lab area.
8. Purses and other valuable items should not be brought into the hospital or clinical setting.
9. Students in uniform may smoke in designated employee smoking areas. Students must adhere to all agency policies regarding smoking.
10. When in uniform, all uniform guidelines apply.
11. Students must adhere to the facility code when the facility's code is more restrictive than the student dress code.

No Exceptions to the uniform. Failure to comply with the DMS uniform attire deems for dismissal from the program.

ELECTRONIC DEVICES:

Students are not allowed to have any electronic devices visible during clinical hours. This includes but not limited to cell phones, laptops, and tablets. In the event that an electronic device is witnessed by any clinical employee, dismissal will occur.

FACILITIES FOR CLINICAL EDUCATION:

Several hospitals in the Northeast Texas area serve as Clinical Clinical Affiliates for the sonography students. The placement of the student is the responsibility of the Department Chair and Faculty. Minor affiliates for special interest rotations will be assigned as appropriate for meeting the goals of the Program. All students will be rotated between clinical facilities to give equal educational opportunities for each student.

The clinical affiliate reserves the right to have students removed from their department if those students are not desirable or unacceptable according to the protocols and professional standards of that facility.

(Please sign the Clinical Travel Agreement in the application packet)

ATTENDANCE:

The DMS attendance policy supersedes all others that may have been in effect. In accordance with Administration Policies found in the Paris Junior College Catalog and Student Handbook concerning student attendance, the following specific attendance requirements will be enforced for the DMS program.

Full time attendance is expected. No "unexcused absences" are allowed. The student will be responsible for all the class work covered during any absence from class. The student is allowed the following absences:

<u>Semester</u>	<u>Didactic</u>	<u>Clinicals</u>
I	3 days	3 days
II	3 days	3 days
III	3 days	3 days
IV	3 days	3 days

Any absences must be made up. Times and clinical sites will be made by the program faculty and the clinical site. At no time will the student discuss make up time with the clinical facility until after the faculty at PJC has documented conversation with the clinical instructor.

In the event that a student finds it impossible to attend during the assigned time, a phone call (made by the student) to both the Clinical instructor and Clinical coordinator (or any DMS Faculty) is **mandatory**. Phone calls made to anyone or by anyone other than those designated above individuals are invalid. That call is to be made within **fifteen minutes** of the expected time of arrival. If the Clinical instructor is not available, the supervisor of the assigned shift is to be contacted.

If a student leaves early from lecture and does not stay for that afternoon lab, the student is counted absent for the full day. The student will receive a "zero" (0) in lab and unable to make-up that daily work.

Complete and prompt attendance is required. If the student misses a didactic class, it is the student's responsibility to contact the instructor **prior** to the class time. If the student does not contact the instructor before class, it will be up to the discretion of the instructor as to when and if the work required on that day will be allowed to be completed. A minimum of 10 points will be deducted from the daily work; again, this is at the discretion of the instructor. A student may be put on probation, suspension and/or dismissed for infraction of the above policy.

More than allowed absences or excessive tardies from either class or clinical may result in immediate suspension with recommendation of dismissal from the program.

One absence **not** preceded with a **valid** phone call (called a 'no call-no show') may result in the lowering of the Clinical grade for that semester by one letter grade. After one 'no call-no show', the student will be put on probation for the rest of the program for that infraction of the rules. After a second incidence of absence not preceded by a phone call, the student will not be allowed back into Clinical education class until a conference with the Clinical coordinator or Department Chair is conducted. This second incident will result in disciplinary action that can/ may result in recommendation for dismissal from the Program.

The student may be put on suspension with recommendation of dismissal from the Program if the student has more than the allowed per Clinical. Two (2) incidences of tardiness will count as one absence. The student is responsible for scheduling a counseling session with the Clinical instructor and completing an absence form.

No student will be allowed to Sign-in/Sign-out for another student. This will result in immediate dismissal.

EXTENDED ABSENCE:

If three consecutive clinical days are missed, documentation from a physician is required before returning to Clinical rotation.

There is no formal leave of absence policy in place due to the rigorous nature of the program's curriculum. However, in the case of extenuating circumstances, such situations will be addressed on a case-by-case basis as they arise.

ABSENCE DURING FINALS WEEK-CLINICAL:

There are to be no absences during finals week. If a student is absent due to an illness, this must be documented by a physician. All missed clinical hours must be made up.

All days missed at any clinical site, will be made up, at the discretion of the department chair and clinical coordinator.

INCLEMENT WEATHER:

Students scheduled for Clinical during inclement weather conditions (conditions which are officially designated by PJC as making travel hazardous) will not be expected to arrive at the clinical site. Clinical hours missed due to inclement weather will be expected to be made up. Closure of Paris Junior College due to weather conditions and announced by public media will be considered as notice to the Clinical instructor and affiliate that the students will not attend clinical education at the Clinical facility.

For students who attend clinical and/or live in areas other than Paris, the local school closure due to inclement weather will constitute a sanctioned day off from clinical, but a call to the clinical site, in this instance, is necessary. A call to both the Clinical Instructor and the Clinical coordinator (or DMS Faculty) is always required when an absence from a clinical education facility is due to inclement weather.

In the event of a clinical site closure due to inclement weather or any other reason that prevents student attendance, the student will not be required to make up the missed hours.

BANK TIME:

Students, **with prior permission** from the Department Chair or Clinical coordinator, will be allowed to 'bank' clinical time. This policy is designed exclusively for a projected, extended absence such as a baby's birth or an elective, but necessary surgical procedure. There must be a very real need in order to have permission to exercise this option.

CREDIT HOURS/PROFESSION EDUCATION MEETINGS:

Clinical/Clinical hour credit will be given to students attending educational meetings. Proper

documentation must be furnished to the clinical coordinator before this credit may apply. The clinical coordinator will notify the clinical affiliates of this credit. No more than twenty hours of credit will be given for an educational meeting.

BEREAVEMENT:

If a student has a death in the family, they must contact the department chair immediately. The student will be allowed 3 days bereavement for immediate family (parents, spouse, siblings, children). If it is NOT immediate family, the allowed days bereavement will be at the discretion of the department chair.

Bereavement makeup: clinical days missed for bereavement do not need to be made up. Tests, however, will need to be made up either on the next attended didactic class meeting, or at the end of the semester on test makeup day, according to the syllabus. This will be discussed and decided between the student and department chair.

MAKE UP TIME:

Absences from clinical must be made up, arranged and agreed upon make-up hours are subject to all rules set forth for regular clinical education hours. Make-up hours must be pre-arranged. The pre-arranged clinical make-up time that is not attended will count as an absence. That absence must be preceded by a valid phone call to BOTH clinical coordinator and clinical instructor. These arrangements will be made by the department chair and clinical coordinator.

If a student uses 'bank time' (meeting attendance) for an absence, the **time** may be used instead of having to make it up, **BUT** the absence is still counted as an absence. Using extra saved time does not mean the student will not be counted as absent. 'Bank Time' is primarily an emergency fund and for scheduled upcoming events such as a baby's birth or an extended child's illness (doctors documentation required).

TARDIES:

Any student who arrives 10 or more minutes late for clinical rotations, regardless of whether the instructor was notified or not, will earn a tardy for that day. Two incidences of tardies will count as one absence. An absence due to 2 tardies must be made up even if the student has no other absences. Eight hours of make-up time is required for 2 occurrences of tardiness.

HOLIDAYS AND VACATIONS:

Students are not required to attend clinical sessions during holidays that are recognized by Paris Junior College. Students will have a scheduled, vacation period during the summer. The dates will be assigned to each class as a group.

PUNCTUALITY:

Students are expected to attend lectures and laboratory sessions at the scheduled times. Clinical and Clinical education tardiness will be addressed under the appropriate section. If a student is not present for roll call, it is the student's responsibility to see the instructor after the lecture to change the "absence" to a "tardy". If a student acquires three (3) tardies, it will be counted as one (1) absence. If a student misses a scheduled quiz, it cannot be made up, and will result in a zero. Missing a scheduled examination can be made up but a different exam will be given. It is the student's responsibility to schedule a time with the instructor for a missed exam. For any

unscheduled, daily examination or quizzes that may be given during the tardy time, it is the instructor's decision whether a grade of "zero" is earned or a lowering of the overall grade. If the student is not in class at the scheduled time, the instructor has the right **not** to admit the student to the class until the next class break.

EXTENUATING CIRCUMSTANCE COMMITTEE:

Extenuating Circumstances Committee composed of student, student advocate if desired, one Diagnostic Medical Sonography faculty and/or course instructor faculty, PJC/staff person, program coordinator and/or Dean of Health Occupations.

1. Students missing any time after three (3) absences per semester must, upon return to college, make a request to the program coordinator or the Dean of Health Occupations, to meet with the Extenuating Circumstances Committee. The student must provide supporting evidence to validate the necessity of absence upon return to college. The student may request no more than two (2) extenuating absence meetings per semester. Any further absences will result in failure of the program, or withdrawal if prior to the drop date.
 - A. Preventable occurrences are generally not considered extenuating circumstances.
(ex: Traffic Tickets)
2. The faculty calling the meeting will write the minutes of the meeting, with copies for the student, program coordinator, and minutes notebook.
3. An extenuating circumstance may be recorded in writing without a face-to-face meeting with the student and members of the committee if all members agree on the circumstances presented by the faculty responsible for the meeting.
4. A physician's physical condition statement may be required to return to clinical.
5. A 2/3 majority vote of the committee will be required for the student request of extenuating circumstances to be granted.
6. When the decision is made by the committee to allow the student to continue, the committee may then review other absences or tardies to determine if a contingency plan should be formulated by the student to help prevent further time lost.
7. If the Extenuating Circumstance Committee does not agree to allow the student to continue, this will result in failure of the course or initiating withdrawal from course if before the withdrawal date.

PERSONAL APPEARANCE:

A patient forms an impression of the sonography department upon first sight of the personnel. It is important that the student's appearance be flawless and professional (see uniform code). Students reporting to the clinical education area dressed in other than the approved uniform will be asked to leave the area, an unexcused absence will occur, with recommendation of dismissal. Any time missed will be made up. The following basic guidelines have been established in accordance with typical hospital policies.

VISITING HOSPITALS WHEN NOT ASSIGNED TO CLINICAL EDUCATION:

Students will not be allowed in the sonography department of any affiliating hospital when not assigned to clinical education, except:

- By special permission of the PJC DMS Faculty
- When actually employed by the hospital's sonography department. (Clinical credit may not be applied nor may competencies be earned, proven or documented while employed)

Students will not visit with patients except with members of their own family or close personal friends; someone already known on a personal basis may be visited. Persons known on a student-patient relationship may not be visited except in a professional capacity.

PATIENT CARE INCIDENT REPORTS:

Should any patient care incident occur involving a student in the Diagnostic Medical Sonography Program, the Clinical instructor, assigned supervisor, Clinical coordinator or the department chair must be notified immediately. The standard risk management (incident) report must be made and submitted to the Clinical instructor and/or supervisor immediately. An incident report must be made and submitted to the Clinical instructor and program coordinator for review. Reports must be made in accordance with the policies of the affiliating clinical site. Existing hospital policy may be complied with regarding terminations (if the incident would normally lead to employee termination, it is possible that the clinical site would request that the student involved not return to that facility for clinical education assignments).

If a Clinical facility asks that a student be removed from that site, the student will be dismissed from the program

ACCIDENT OR INJURY TO THE STUDENT:

If the student is injured while in the hospital, the Clinical instructor and/or assigned supervisor, and the clinical coordinator or the department chair **MUST** be notified immediately. Accident insurance is automatically added to school charges when the student registers for clinical education classes. The student must file a copy of the accident report with PJC's purchasing department in order for the claim to be processed.

LIABILITY INSURANCE:

Professional liability insurance is automatically added to school charges when the student registers for clinical education classes.

IDENTIFICATION DISPLAY:

Students will wear a Paris Junior College-Diagnostic Medical Sonography Student identification name badge during clinical assignments. Students will not be allowed to enter the clinical area without proper identification. These identification badges will be purchased through PJC.

CONFIDENTIAL INFORMATION/HIPAA:

All hospital patient records are confidential in nature. Requests for information concerning a patient should be referred to the clinical instructor or designate. The students are expected to maintain absolute confidentiality of all data involving the patient and the clinical affiliate. All students will be HIPAA (Health Insurance Portability and Accountability Act) trained before the first day of clinicals.

(Please sign the Confidentiality Statement in Section IV)

PROBATION and DISSMISAL:

Refer to 'Probation' and 'Dismissal' in the General Section of this handbook.

SUPERVISION OF STUDENTS:

"Until students achieve the program's required competency in a given procedure, all clinical assignments should be carried out under the direct supervision of qualified sonographers."

A QUALIFIED SONOGRAPHER IS DEFINED: A sonographer possessing American Registry of Diagnostic Medical Sonography Certification or equivalent and active registration in the pertinent discipline with practice responsibilities in areas such as patient care, quality assurance or administration.

DIRECT SUPERVISION IS DEFINED:

Student supervision under the following parameters:

- (1) A qualified sonographer reviews the procedure in relation to the student's achievement.
- (2) A qualified sonographer evaluates the condition of the patient in relation to the student's knowledge.
- (3) A qualified sonographer is present during the performance of the procedure.
- (4) A qualified sonographer reviews and approves the procedure.
- (5) A qualified sonographer is present during student performance of any repeat of any unsatisfactory image.

INDIRECT SUPERVISION IS DEFINED:

That supervision provided by a qualified sonographer immediately available to assist students regardless of the level of student achievement. Immediately available is interpreted as the presence of a qualified sonographer adjacent to the room or location where a sonographic procedure is being performed. This availability applies to all areas where sonogram equipment is in use.

CLINICAL EVALUATION:

Clinical Evaluations will be made twice during each Clinical Rotation by the designated clinical instructor. These will be performed at mid semester and again at the end of the semester. A letter grade of 'C' will induce program intervention, along with probation recommended. A letter grade of 'F' will result in program intervention, suspension and or dismissal from the DMS program. Maximum of 95% will be highest grade achieved with each evaluation.

CLARIFICATION OF PROFICIENCY LAB SKILLS:

Proficiency Lab Skill Check-offs will be performed at the PJC Lab

Each semester the student is required to perform certain proficiency check offs. Each skill will be graded accordingly to the program protocol. Completing the lab skills does not mean that the student is competent in all procedures, as witnessed at clinical rotations. Completing the lab skills clearly states that the student has performed adequately in the DMS standards. See Lab Skills sheet in the Clinical Notebook for a description of lab skills/grading policy. Failure to pass any Lab Skills each semester (at any academic level) will result in a grade of "F" and dismissal will occur (see page 15).

ADDITIONAL COMMENTS:

Do not remove or hide unacceptable images. Disciplinary action will result from this behavior. This would constitute dishonesty and recommendation for dismissal from the program may result.

If a patient is assigned to you or your room, you are responsible for that patient until the patient has left the department or until you are given another patient for whom you are responsible.

Evaluations from technologists will be used as input for assessment of the student during final grade determination. Grade assignment will ultimately be the responsibility of the CLINICAL coordinator who will work VERY closely with the clinical instructor during this process.

A grade of 'F' may be submitted for the student if proper paper work is not submitted on schedule; ex: weekly procedure records, check off's, make up time, etc.

All lab skills, paper work, documentation, make up work, etc., are due on the date provided by the Diagnostic Medical Sonography Program Director. Work submitted after that date will not be counted toward that semester's clinical grade.

STANDARD FOR DRUG SCREENING AND BACKGROUND CHECKS:

Prescreening requirements have been implemented in the Diagnostic Medical Sonography Program at Paris Junior College. These requirements align with those mandated for employees, including background checks and drug screenings. The decision to extend these prescreening measures to clinical students and faculty is based on the principles of due diligence and competency assessment for all individuals who interact with patients or staff. This competency assessment encompasses not only technical skills but also an individual's criminal history and substance abuse records. This initiative ensures consistent adherence to Joint Commission standards related to human resource management. Additionally, there is increasing public demand for heightened diligence in response to national reports highlighting fatalities resulting from medical errors.

TIMING OF PRESCREENING REQUIREMENTS:

All drug screen tests and background checks must be conducted after admission to the clinical program. Verification of the satisfactory results must be received by the participating hospital prior to the student's clinical rotation start date. Drug screen and background checks will be honored by all hospitals for the duration of the student's enrollment in the clinical program if the participating student has not had a break in the enrollment at the college/school. A break in enrollment is defined as nonattendance of one full semester (Fall or Spring) or more. The above information must be verifiable through the college/school. Drug screen and background checks of faculty will be honored for the duration of the employment of the faculty member at the college/school.

RECIPROCITY:

Students need only meet these requirements prior to the start of the first clinical rotation.

1. Pre-Assignment Drug Screening

METHOD OF URINALYSIS:

An unobserved collection of urine should be collected at a facility that follows *Substance Abuse and Mental Health Services Administration* (SAMHSA) guidelines.

TYPE OF TEST:

Substance Abuse Panel 9 (“SAP 9”), with integrity checks for Creatinine and PH levels. Acceptable and unacceptable test ranges are listed below.

1.Pre-Assignment Drug Screen Panel with Ranges

Integrity Checks	Acceptable Range
CREATININE	.20 mg/dl
PH	4.5-9.0

Substance Abuse Panel	Initial Test Level	GC/MS Confirm Test Level
AMPHETAMINES	1000 ng/mL	500 ng/mL
BARBITURATES	300 ng/mL	200 ng/mL
BENZODIAZEPINES	300 ng/mL	200 ng/mL
COCAINE METABOLITES	300 ng/mL	150 ng/mL
MARIJUANA METABOLITES	50 ng/mL	15mg/mL
METHADONE	300 ng/mL	200 ng/mL
OPIATES	2000 ng/mL	2000 ng/mL
PHENCYCLIDINE	25ng/mL	25 ng/mL
PROPOXYPHENE	300 ng/mL	200 ng/mL

SAP 10 test results that fall outside any of the acceptable ranges are considered positive test results and are automatically sent for a separate confirmatory test by a Gas Chromatography Mass Spectrometry (GCMS) method. If the results remain positive, they are sent to a Medical Review Officer (MRO) who calls the student to determine if there is a valid prescription for the drug in question. If a valid prescription exists, the test result is deemed to be “negative” and acceptable.

The MRO is a medical doctor who specializes in the interpretation of drug screen results. Medical Review Officers do not make placement decisions; they simply pass along information regarding legal versus illegal drug use or consumption. Medical Review Officers are not required, but are beneficial in making placement decision. Medical Reviews are a separate cost since they entail a separate service. The cost of Medical Reviews varies from about \$25 to \$75 dollars per donor. It is important to note that although any physician could perform this service, only certified MRO’s are considered experts in this field.

An individual with a positive drug screen will not be allowed to attend any clinical agency/rotation for a minimum of 12 months. Prior to returning to the clinical affiliate rotation, a student must provide proof of a negative drug screen as verified by the college.

A clinical affiliate reserves the right to remove a student/faculty from the facility for suspicion of substance use or abuse (including alcohol.) The clinical affiliate will immediately notify the instructor/college to facilitate immediate removal of the student. In all instances, the clinical affiliate will provide written documentation of the student’s/faculty’s behavior(s) by two or more representatives to the Paris Junior College.

CRIMINAL BACKGROUND CHECK:

Criminal background checks should review a person’s criminal history seven (7) years back from the date of application. The check should include the cities and counties of all known residences. The following histories will disqualify an individual from consideration for the clinical rotation:

- Felony convictions,
- Misdemeanor convictions or felony deferred adjudications involving crimes against persons,
- Misdemeanor convictions related to moral turpitude,
- Felony deferred adjudications for the sale, possession, distribution, or transfer of narcotics or controlled substances,
- Registered sex offenders,

NOTES:

(1) All applicants to our Health programs must be able to pass a criminal background check that includes the provision of necessary documentation for the background check agency to make it reliable. Said documentation may include an authenticate social security card and positive identification such as a driver’s license and identification card.

Since good health is essential for the sonographer, the following policies have been adopted:

1. A physical examination, including lift form and labs are required prior to admission
2. Vaccines:

A. Tdap – (TETANUS/DIPHTHERIA and PERTUSSIS) (Immunization)

All students must have proof of a tetanus/diphtheria immunization within the last 10 years.

B. RUBELLA (Immunization or blood test)

All students must have proof of one dose of rubella vaccine administered on or after their 1st birthday or serologic confirmation of rubella immunity.

C. MEASLES (Immunization or blood test)

All students born after January 1, 1957 must have proof of two doses of measles vaccines administered on or after their 1st birthday at least 30 days apart or proof of serologic confirmation of measles immunity. At least one dose must be completed prior to patient contact.(Measles is also known as rubeola.)

D. MUMPS (Immunization or blood test) All students born after January 1, 1957 must have proof of one dose of mumps vaccine administered on or after their 1st birthday or proof of serologic confirmation of mumps immunity.

E. VARICELLA (Immunization, blood test) All students must have proof of two doses of varicella vaccine administered on or after their 1st birthday at least 30 days apart or proof of serologic confirmation of varicella immunity. (Varicella is also known as chickenpox)

F. HEPATITIS B (Immunization or blood test) All students must receive a complete series of three (3) hepatitis B vaccines or show serologic confirmation of immunity to hepatitis B prior to the start of direct patient care. If time is an issue, the Center for Disease Control (CDC) recommends an accelerated schedule with a first dose followed by a second dose in 4 weeks, and followed by the 3rd dose at least 4 months from the initial dose and eight weeks from the 2nd dose. Do not take the combination Hepatitis A & B immunizations because they cannot be given according to the accelerated schedule.

G. 2 step PPD TB test All students must provide documentation of TB testing. Acceptable documentation includes: a 2-step PPD test (explained as-2 negative tests in a 12 month time frame), Tspot or quantiFERON TB gold blood test, or a CXR documenting “no active tuberculin disease”. CXR must be within the last 3 years. TB testing is required annually and it is the student’s responsibility to maintain a current immunization status. Students that present with CXR documentation must complete the annual screening survey.

IF you have had a positive TB test, please provide a copy of your most recent chest xray.

PREGNANCY – Requirements for hepatitis B, varicella, measles, rubella and mumps vaccines are waived during pregnancy. Pregnancy is not a medical contraindication for administration of Tetanus/diphtheria toxoids, but it is best to consult your physician. *You will be required to submit a release from your obstetrician prior to beginning your clinical rotations.*

H. FLU VACCINE

1. Students are required to receive a flu vaccine annually while in school.
2. Vaccines must be completed by **October 31** each year and documentation submitted to the program coordinator.
3. 3 Paris Junior College and the affiliating agencies are not responsible for any accident, infectious contact, injury, illness or exacerbation of illness incurred by a student during

the time the student is enrolled in the DMS Program.

4. 4. The student who is concerned about exposure to infectious disease is advised to seek counseling from his/her private physician regarding risks and precautions appropriate for health care workers.
5. 5. Students with a noncontagious illness or injury may be admitted to, or choose to continue in health occupations courses. If so, the student must assume the risk that absenteeism or inability to perform duties related to learning objectives and health care delivery can result in the necessity of 40 discontinuing in the program. It is the student's responsibility to obtain and provide to the instructor continual written permission from the student's physician.
6. Students are to follow standard (Universal) precautions and practice preventive measures to maintain a health status.
7. Latex Warning: The use of latex/latex based products may exist in health care standard precautions and in environments such as, but not limited to, Health Science classrooms and training labs, hospitals, nursing care facilities, laboratories, clinical areas, and medical/dental offices. Individuals with latex sensitivity or allergies should seek expert advice from their health care provider so that they may receive information to make an informed decision regarding their exposure to latex in the health care field.
8. Needle Stick Policy: It is important to respond in a consistent manner after a student is exposed through a needle stick, or other "sharps" induced injury. The same protocol would apply if mucous membranes (eye or mouth) are exposed (splashed) to blood or other body fluids. If the exposure occurs during a campus lab experience, the student must notify the instructor immediately and a Paris Junior College "Incident Report" will be completed, with the original going to the Security Director and copies to the student and the Dean of Health Occupations. The student must contact his/her private physician or the Health Department within 48 hours. If the exposure occurs during a clinical experience, the student must report the exposure immediately and an agency incident report will be completed with the copies to the student and the Program Director. The protocol of the agency must then be followed, i.e., getting baseline Hepatitis, and HIV testing, with a provider at the student's own expense.

ALLOCATION OF COST:

Each clinical student must bear the cost of these requirements.

VERIFICATION OF COMPLIANCE & RECORDKEEPING:

The vendor will notify the College on all individuals who fail a criminal background check. Upon request, verification of the compliance with these standards will be sent to the designated representative of the clinical affiliate prior to the clinical rotation start date. Verification is accomplished by sending a letter from the appropriate department chair on letterhead stating that these standards have been met by the student/faculty, listing the student's/faculty's full name and clinical rotation start date. If more than one student is attending a clinical rotation, a comprehensive list with all the student/faculty names may be submitted.

It is the responsibility of Paris Junior College to inform these persons of requirements prior to enrollment in this curriculum. This will give students/faculty prior notice and an opportunity to

decline the clinical training/assignment before investing their time and money in the class or agreeing to employment. The student/faculty name and social security number will be the only information provided to the office of the Dean of the School of Nursing and Health Professions. This information will be filed in a secured area to ensure confidentiality. In the event that the student/faculty feels that an error has been made in the criminal background check, it is the responsibility of the student/faculty to contact the external vendor for a verification check.

MASTER LIST OF CLINICAL COMPETENCIES

Abdomen – extended
Mandatory Patient Care Procedures
BLS/CPR Certification
Vital Signs (blood pressure, pulse, respiration)
Monitoring level of consciousness and respiration
Standard Precautions
Sterile Technique
Verification of Informed consent
Gray Scale
Color Doppler
Power Doppler
Spectral Doppler
M-mode
Ergonomic Evaluation
Prepare transducer for intracavitary use
Clean and disinfect transducer
Abdomen
Abdomen Complete
Renal
Right Upper Quadrant
Gastrointestinal Tract (e.g., appendix)
Prostate
Limited Abdominal Examination
Aorta/IVC
Biliary System

Liver
Pancreas
Spleen
Kidneys
Bladder
Superficial Structures
Scrotum and testes
Breast and axilla
Superficial masses
Thyroid
Salivary glands (e.g., parotid)
Musculoskeletal
Non-cardiac chest (e.g., pleural space, lung)
Gynecology
Uterus
Adnexa (including ovaries)
Obstetrics
First Trimester
Second Trimester
Third Trimester
Fetal Biophysical Profile
Interventional Procedures
Biopsy
Aspiration
Drainage Procedures
Post catheterization complication
Vascular Procedures
Upper extremity venous doppler
Lower extremity venous doppler
Carotid doppler
Pediatric
Head
Spine
Hips
Pyloric Stenosis
Bowel (intussusception, appendix)



Section III

Duties and Responsibilities of the
Student Sonographer

DUTIES AND RESPONSIBILITIES OF A STUDENT SONOGRAPHER

1. Performs diagnostic sonographic procedures:
 - a. To ensure the accuracy of the patient's clinical history with procedure, assuring information is documented and available for use by a licensed practitioner.
 - b. Prepares patient for procedures; providing instructions to obtain desired results, gain cooperation, and minimize anxiety.
 - c. Selects and operates sonography equipment, image and/or associated accessories to successfully perform procedures.
 - d. Positions patient to best demonstrate anatomic area of interest, respecting patient ability and comfort.
 - e. Immobilizes patients as required for appropriate examination.
 - f. Determines proper sonographic technique.
 - g. Minimizes exposure to patient. ALARA
 - h. Evaluates sonograms or images for technical quality, assuring proper identification is recorded.
 - i. Assumes responsibility for provision of physical and psychological needs of patients during procedures.
 - j. Practices aseptic techniques as necessary.
 - k. Understands methods and is capable of assisting with venipunctures.
 - l. Verifies informed consent for, and assists a licensed practitioner with interventional procedures.
 - m. Initiates basic life support action when necessary.
2. Provides patient education.
3. Assists in maintaining records, respecting confidentiality and established policy.
4. Assumes responsibility for assigned area and report equipment malfunction.
5. Provides input for equipment purchase and supply decisions.
6. Provides practical instruction for students and/or other health care professionals.
7. Participates in the department's quality assurance and improvement plan. May be responsible for specific quality control duties in the assigned area.
8. May be responsible for control of inventory and purchase of supplies for the assigned area.
9. Maintains knowledge of and observes Universal precautions.
10. Understands and applies patient relations skills.
11. Pursues appropriate continuing education.

CONCLUSION:

The provisions of this Handbook are subject to change by the faculty of the Paris Junior College Diagnostic Medical Sonography Program upon agreement by the faculty and administrators of Paris Junior College. Any changes in policy will be presented in writing to the student at the time of the change.

The Paris Junior College Diagnostic Medical Sonography Program reserves the right to withdraw and change courses at any time, change fees, calendar, curriculum and other requirements affecting students. These changes will become effective whenever the proper authorities determine and apply to both prospective students and those already enrolled.

MILITARY DEPLOYMENT:

If a DMS student is deployed for active military duty after enrollment or acceptance into an AH&N program, a place will be reserved for the student in the next available class to Paris Junior College upon returning within one calendar year.

PARIS JUNIOR COLLEGE GIVES EQUAL CONSIDERATION TO ALL APPLICANTS FOR ADMISSION, EMPLOYMENT AND PARTICIPATION IN ITS PROGRAMS AND ACTIVITIES WITHOUT REGARD TO RACE, CREED, COLOR, NATIONAL ORIGIN, GENDER, AGE, MARITAL STATUS, DISABILITY, OR VETERAN STATUS.



Paris Junior College
DIAGNOSTIC MEDICAL SONOGRAPHY

Section IV

Agreements and Forms

PARIS JUNIOR COLLEGE
Diagnostic Medical Sonography
Student Profile

Last Name	First Name	Middle Name	Maiden Name
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Birth Date	PJC Apache Number	E-mail address
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Address While In School	Home Telephone	Cell Telephone
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Permanent Address	Home Telephone
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Employer (if applicable)	Work Telephone
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Last Name- Spouse	First Name	Middle Name	Cell Phone/Home
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Parent/Guardian Name	Address	Home Telephone	Work Telephone
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Friend -Name	Address	Home Telephone	Work Telephone
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1. Person to Contact in Case of Emergency	Home Telephone	Work Telephone
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2. Person to Contact in Case of Emergency	Home Telephone	Work Telephone
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PARIS JUNIOR COLLEGE DIAGNOSTIC MEDICAL SONOGRAPHY PROGRAM

DISMISSAL POLICY AGREEMENT

I, the undersigned, a student in the Diagnostic Medical Sonography Program (DMSO) at Paris Junior College, for and in consideration of the training I will receive from Paris Junior College, its faculty and staff, in consideration of my acceptance into the training program, and for other considerations to be received by me, hereby **promise and agree as follows:**

1. I have read and understand all portions of the course syllabi, course schedules and the DMS Student Handbook. I agree to comply with all rules, regulations and requirements contained in the course syllabi and course schedules, and with any additional rules as communicated to me by the instructors during courses. I understand that I am responsible for knowing and following the rules of all clinical sites where I may have rotations during courses.
2. I can be dropped from the Program with a grade of 'F' for:
 - a. breach of confidentiality or HIPAA guidelines.
 - b. stealing information or tangible goods.
 - c. misrepresenting any fact.
 - d. lying about any fact.
 - e. being barred (asked not to return, etc.) from **any** clinical site (scope of practice).
 - f. failing to complete clinical requirements on time.
 - g. being under the influence or in possession of alcohol or drugs during class or during any clinical rotation assignment.
 - h. representing that I hold a level of certification or licensure I do not hold.
 - i. practicing beyond the scope of clinical objectives.
 - j. committing a criminal act at any time while enrolled in program.
 - k. failure to maintain current CPR certification.
 - l. failure to pass **any** of the DMSO curriculum courses or failure to pass the clinical scanning final (**any** of the required scanning protocols).
 - m. disruption of classes (**demeanor**), making it difficult for other students to acquire the material presented. This can be observed by the faculty or reported by a fellow student.
 - n. willful damage to school, hospital, or private property.
 - o. documented evidence of lack of proper patient care.
 - p. leaving the clinical area without permission from an instructor.
 - q. failure to comply with uniform code.
 - r. failure to follow radiation protection rules and regulations.
 - s. falsifying sign-in sheets/time cards for self or another student or any DMS documentation.
 - t. one incidence of being put on probation
 - u. cheating, lying, collaborating, plagiarizing or falsifying any documentation verbally or in print.
 - v. use of any form of abusing, disrespectful, threatening or harassing language and/or behavior to classmates, faculty, instructors, hospital personnel or patients.
 - w. unprofessional conduct at clinical, lab or classroom.
 - x. violating or failing to comply with any provision of the rules, regulations or policies set forth, or any policy stated in the DMS Student Handbook.
 - y. failing to adhere to the Duties and Responsibilities listed in this handbook.

3. I understand the following:

- a. that I may contract a contagious disease, possibly a fatal one, through contact with patients.
- b. that it is mandatory that I practice infection control techniques that have been explained to me at the beginning of this course.
- c. that I may become physically injured by improper handling of patients and/or equipment.
- d. that I will be assigned to more than one Clinical Education site and will manage the possible added monetary and time costs or burdens that this may create.

Knowing all the above facts and with a thorough understanding of the risks involved in the training I am about to participate in, I hereby declare that I am willing to assume all risks involved with my training and that I do hereby assume all such risks, whatever they may be, and that if I become unwilling to assume all risks involved in my course of study, I will immediately inform my instructor of such unwillingness and will immediately withdraw from the course.

With full and complete knowledge and understanding of all statements contained in this document, and having asked for clarification of any parts that I might not have understood, so that I do have a clear and complete understanding of this document and what I am signing and agreeing to, I hereby promise and agree to hold harmless and indemnify, and DO HEREBY HOLD HARMLESS and indemnify Paris Junior College, its faculty, staff, agents and employees, from any and all liability, payments, claims, costs, causes of action, judgments and attorney's fees of whatsoever nature and howsoever arising (1) in any way in connection with my being a student at Paris Junior College and being enrolled in Diagnostic Medical Sonography Program courses, (2) from clinical site experiences in connection with the courses being taken, or (3) in any other way whatsoever. If I violate or fail to abide and conform in any way to the promises, representations and covenants set forth in this document, I agree that I may be dropped from all courses in the Diagnostic Medical Sonography Program in which I am enrolled, or that I may be given a failing grade in such courses, subject only to the rules of due process and to the procedures set forth in the Paris Junior College catalog and student handbook.

SIGNED AND AGREED TO THIS _____ DAY OF _____, 20____

Student Signature

Printed Name

Witness Signature

Printed Name

**PARIS JUNIOR COLLEGE
DIAGNOSTIC MEDICAL SONOGRAPHY PROGRAM
STUDENT CONFERENCE FORM**

Course: _____

Student Name: _____

Date: _____

Location of Conference: _____

Time: _____

Participants: _____

Reason(s) for Conference:

- _____ excessive absences and/or tardiness
- _____ attitudinal difficulties at clinical site and/or classroom
- _____ grades in the didactic (lecture course)
- _____ grades in the lab section
- _____ grades in the clinical section
- _____ unsafe performance in clinical/lab
- _____ electronic device policy
- _____ dress code policy
- _____ student-initiated conference
- _____ other: _____

Please complete the supporting documentation.

Policy or competency statement:

Identifying Trends:

Decision:

- _____ Contract for improvement (to be complete) and a review conference scheduled on _____
- _____ Probation to begin on _____. (Please fill out the probation form)
- _____ Withdrawal from program student initiated
- _____ Withdrawal from program faculty team initiated
- _____ Student may reapply to the program
- _____ Written warning
- _____ Verbal warning
- _____ Student-initiated conference
- _____ Other _____

Student Comments:

Date of Signatures _____

Student Signature

Faculty Signature

Department Chair or Coordinator's Signature

**PARIS JUNIOR COLLEGE HEALTH OCCUPATIONS
PATIENT CONFIDENTIALITY STATEMENT REGARDING
MEDICAL, BEHAVIORAL, FINANCIAL AND/OR BUSINESS RELATED INFORMATION**

Each agency to which Paris Junior College students are assigned respects the rights of each patient with regard to their confidentiality. As a student, I willingly agree to protect the rights of all patients and assure maintenance of their confidentiality. I shall not divulge patient or any other confidential information other than as required in the execution of the duties as a student. I will ensure that I do not discuss patient information in elevators, hallways or any other public or non-secure location. These stipulations also include hospital associates who are not directly involved with the care of said patient(s). Therefore, I assume full responsibility to ensure that what patient information is communicated is done so only to those individuals directly or indirectly involved in the care of the patient on a need to know basis.

It is my understanding, should I breach the confidentiality of any patient, past, present or future, for any reason, that I am subject to disciplinary action, up to and including termination from the Diagnostic Medical Sonography Program.

Student Signature

Date

.....

**PARIS JUNIOR COLLEGE
Diagnostic Medical Sonography
Compensation and Service Work Statement**

The CLINICAL Education is a planned learning experience for students and should not be regarded as strictly work experience. Students must not take the responsibility or the place of ‘qualified’ staff. However, after demonstrating competency, students may be permitted to perform procedures with appropriate supervision. There will be no compensation paid to students for these activities during Clinical Education hours.

I understand and agree to abide by this statement during my enrollment in the Paris Junior College Diagnostic Medical Sonography Program.

Student Signature

Date

PARIS JUNIOR COLLEGE
Diagnostic Medical Sonography
Communicable Disease Policy

All students will have a TB skin test, or an appropriate test, upon entering the program, **and** again in September of the sophomore year.

When a student is identified as being infected with any of the following communicable diseases, certain steps are to be taken to ensure the health of the Paris Junior College community and of the patients with whom the student would be in contact. This policy is also designated to protect the student who is infected. The list below is not necessary all inclusive.

Hepatitis B, leprosy, measles, mumps, rubella, meningitis, tuberculosis, typhoid, chicken pox, shingles, poliomyelitis, venereal disease.

I have read, I understand, and I agree to comply with the Communicable Disease policy as stated in the Paris Junior College Student Handbook.

Student Signature

Date

.....

PARIS JUNIOR COLLEGE
Diagnostic Medical Sonography
Bloodborne Pathogens

All students will receive instructional material on BLOODBORNE Pathology.

When a student is identified as being infected with any of the following blood borne pathogens, certain steps are to be taken to ensure the health of the Paris Junior College community and of the patients with whom the student would be in contact. This policy is also designated to protect the student who is infected. The list below is not necessarily all inclusive.

Hepatitis B and HIV Viruses.

I have read, I understand, and I agree to comply with the BLOODBORNE PATHOGENS policy as stated in the Paris Junior College Student Handbook.

Student Signature

Date

PARIS JUNIOR COLLEGE
Diagnostic Medical Sonography
Behavior Agreement

If the student is observed to be displaying behaviors* which are decidedly different from those behaviors normally displayed by that student or observed to be displaying behaviors not considered normal by usual standards, that student may be required to leave the clinical site and be barred from that particular site, inducing a dismissal.

*Behaviors may include, but are not limited to, such things as: slurred speech; impaired gait; repeated, poor judgement; alcohol on breath; negligent patient care; etc.

I have read, I understand, and I agree to comply with this policy as stated above.

Student Signature

Date

.....

PARIS JUNIOR COLLEGE
Diagnostic Medical Sonography
Student Pregnancy Policy Agreement

The Pregnancy Policy for Diagnostic Medical Sonography Students essentially states:

The student will immediately inform the Program of the pregnancy. The student will be counseled and must produce documentation from her doctor that she may continue in the Program. Arrangements will be made for her extended post-partum absence.

If the student does not inform the Program of her pregnancy, the above measures cannot be taken. These measures are for the benefit of the student and the baby. Without the student's cooperation, the approved usual and standard safety precautions cannot be implemented.

I have read the above and I understand that it is in my best interests to comply with the Diagnostic Medical Sonography Program's Pregnancy Policy.

Female Student Signature

Date

PARIS JUNIOR COLLEGE
Diagnostic Medical Sonography
Clinical Rotation Statement

Clinical Education is a planned learning experience for the student. Clinical Education rotation schedules are assigned by the Clinical Coordinator and/or the Program Director at Paris Junior College. It is the student's responsibility to make arrangements to attend Clinical Education sites, regardless of location.

The student is also expected to be punctual and in uniform at all scheduled Clinical Education sites, regardless of location or personal problems. (i.e. day care, car expenses, minor illnesses) There are few acceptable excuses for absence or tardiness at any of the assigned outlying Clinical Education sites. Failure to be on time and/or attend the assigned Clinical Education sites will result suspension with recommendation of dismissal from the Program.

I understand and agree to abide by this statement during my enrollment in the Paris Junior College Diagnostic Medical Sonography Program.

Student Signature

Date

PARIS JUNIOR COLLEGE
Diagnostic Medical Sonography
Student Handbook

HANDBOOK AGREEMENT

I have read the information contained in the Paris Junior College Diagnostic Medical Sonography Student Handbook and the Paris Junior College Student Handbook. I understand this information and agree to abide by the rules and regulations contained in these handbooks. I have been given the opportunity to clarify any information that I do not understand.

SIGNED AND AGREED TO THIS _____ DAY OF _____, 20____.

Student:

Signature	Printed Name	Date

Witness:

Signature	Printed Name	Date

PARIS JUNIOR COLLEGE
Diagnostic Medical Sonography
Student Handbook/Safeguards

FAIR PRACTICES

The health and safety of patients, students, and faculty associated with the educational activities of the students must be adequately safeguarded.

Therefore, students scan each other during assigned on-campus labs. All students are required to scan an individual for a daily lab grade. In the event you are not scanned by one of your lab peers on any given day, there will be no adverse effect on grade or evaluations by participation or non-participation. A scan model will be provided in this situation.

I have been given the opportunity to clarify any information that I do not understand.

SIGNED AND AGREED TO THIS _____ DAY OF _____, 20____.

Student:

Signature

Printed Name

Date

**ACKNOWLEDGEMENT REGARDING
COVID-19 VACCINE**

I am a student in a health sciences program (“Program”) at Paris Junior College (“PJC”). I understand that part of my Program and/or licensure requirements include Clinical Education experiences (“Clinical”).

I understand and acknowledge that some or all Clinical sites may require me to get certain vaccines, including but not limited to a vaccine(s) for COVID-19. Clinical sites are solely responsible for such requirements; these vaccination requirements or rules are not those of PJC and PJC has no control over same. Clinical experiences are very difficult to secure, and PJC is often not able to reassign students to another Clinical site. Further, PJC has no duty or obligation to reassign any student to another Clinical site due to a student’s failure to be vaccinated.

I understand that if I am unable to be placed in a Clinical setting due to lack of COVID-19 vaccination or any other Clinical requirement, my graduation in my Program may be delayed or prevented entirely. I understand that if I am not fully vaccinated by dates established and required by the Clinical site, I will be prevented from attending same and this may also affect my grade, attendance, and/or ability to continue in, pass, or graduate from my Program and my ability to be licensed. If I am seeking an exemption to the Clinical’s vaccination requirements, I understand this is solely my responsibility to get same exemption granted by dates established by the Clinical site.

I am entering the Program voluntarily, with a full understanding of the Clinical requirements, including the COVID-19 vaccination requirement.

Agreed and Acknowledged:

Student’s Printed Name

Student’s Signature

Date

**PARIS JUNIOR COLLEGE
DIAGNOSTIC MEDICAL SONOGRAPHY PROGRAM
STUDENT CONTRACT FOR IMPROVEMENT**

Course:_____

Student Name:_____

Date:_____

Policy or competency statement:

Identifying Trends:

Plan of Action:

Expected Outcomes:

Required Date of Completion_____

Date of Next Student/Faculty Conference_____

Student Comment(s):

Date of Signatures_____

Student Signature

Faculty Signature

Department Chair or Coordinator's Signature

**PARIS JUNIOR COLLEGE
DIAGNOSTIC MEDICAL SONOGRAPHY PROGRAM
REPORT OF UNSATISFACTORY PROGRESS (PROBATION FORM)**

Course:_____

Student Name:_____ **Date of Probation**_____

Reason for Probation:

Criteria for Removal of Probation:

Date Criteria must be met:_____ **Date of Next Student/Faculty Conference:**_____

Student Comments:

Date of Signatures:_____

Student Signature

Faculty Signature

Faculty Signature

Faculty Signature

Department Chair or Coordinator's Signature

PARIS JUNIOR COLLEGE
DIAGNOSTIC MEDICAL SONOGRAPHY PROGRAM
STUDENT-FACULTY AGREEMENT

The lives of patients are the responsibility of the Sonographer; therefore, the faculty will only recommend candidates for the Diagnostic Medical Sonography Certifying Exam who in the professional opinion of the faculty, have demonstrated responsible and professional attitudes, responsibilities, and techniques in the clinical setting which uphold the highest standards of the practice of the profession. Therefore, students enrolled in the Diagnostic Medical Sonography Program at Paris Junior College are evaluated throughout their training program, both on performance in the classroom, clinical and in laboratory experience.

If, at any time, a student is showing unsatisfactory performance as discussed in the student handbook, the student may be placed on probation by the faculty for a specified period of time, giving both student and instructors the opportunity to bring the student to a level of satisfactory competency. The student is to be notified of the probationary action in writing and in conference. The student, at the end of the probationary period will be given, in writing and in conference, the evaluation of the faculty.

On two-thirds vote of the faculty, a student may be dismissed from the program. Dismissal may be given in lieu of the probationary period or any time during the probationary period or on the completion of the probationary period. Consideration for readmission will be given by the faculty if so requested in writing by the dismissed student. Based on the evaluation of the student's actions since dismissal, and on two-thirds vote of the faculty, the student may be re-admitted on a probationary basis to the program at the beginning of the next entry training cycle for the student.

I have read the above statement, it has been explained to me, and I agree to its conditions. I have also read the Diagnostic Medical Sonography Student Handbook, understand these regulations, and agree to abide by them.

Date

Student's Signature

SUMMARY OF STANDARD PRECAUTIONS

1. Hands should be washed before and after patient contact and immediately if hands are contaminated with blood or other body fluids; hands also be washed after removing gloves.
2. Gloves should be worn when soiling of the hands with blood or body fluids is *likely*.
3. Masks should be worn when splashing or splattering of blood or other body fluids is *likely*. A mask alone does not offer adequate protection; masks should be worn in combination with protective eyewear.
4. Protective eyewear should be worn when splashing or splattering of blood or other body fluids is *likely*. Personal eyewear often offers adequate protection. Eyewear should always be worn in combination with a mask (see masks, above.)
5. Gowns should be worn if soiling of exposed skin or clothing is *likely*.
6. A private room is not usually needed; however, a patient requires a private room if his/her hygienic practices are poor or if the room environment is *likely* to be soiled with blood or body fluids.
7. Patients may receive regular food service on reusable dishes; no special precautions are indicated for meal service.
8. Sharp objects represent the greatest risk for exposures; contaminated needles and other disposable sharp objects should be handled carefully. Contaminated needles should never be bent, clipped, or recapped. Immediately after use, contaminated sharp objects should be discarded into a puncture resistant container designed for this purpose. Needle containers should never be overfilled; containers should be sealed and discarded when two-thirds to three-fourths full.
9. Contaminated equipment that is reusable should be cleaned of visible organic material, placed in an impervious container, and returned to central hospital supply for decontamination and reprocessing.
10. To minimize the risks for exchange of body fluids during resuscitation procedures, pocket masks or mechanical ventilation devices should be readily available in areas in which resuscitation procedures are *likely* to be needed.
11. Spills of blood or blood-containing body fluids should be cleaned up using the following procedure; first, put on gloves (and other barrier if indicated); second, wipe up excess material with disposable towels or other absorbent materials; third, clean up spill with soap and water; and fourth, disinfect contaminated surfaces with a dilute solution (1:100 for smooth surfaces, 1:10 for porous surfaces) of household bleach (sodium hypochlorite) and water. Diluted bleach solution should be no more than 24 hours old. Large spills or spills containing broken glass or sharp objects should be first covered with disposable towels; second, saturated with 1:10 bleach solution and allowed to stand for at least 10 minutes; and third, cleaned up as outlined above.
12. Students who have open lesions, dermatitis, etc., should not participate in direct patient care activities and should not directly handle contaminated equipment. Students who have these kinds of problems should be evaluated by the student's private physician to assess fitness for duty.
13. **Goggles, masks, and gloves are recommended as part of your dress code.**

I have read and understand the above precautions. I agree to comply with these precautions while I am attending school. This document remains in effect for the duration of the student's enrollment in the Radiology Technology Program

Date

Student

Basic Rights for All Patients

1. You have all the rights of a citizen of the State of Texas and the United States of America, including the right of *habeas corpus* (to ask a judge if it is legal for you to be kept in the hospital), property rights, guardianship rights, family rights, religious freedom, the right to register and vote, the right to sue and be sued, the right to sign contracts, and all the rights relating to licenses, permits, and privileges, and benefits under the law.
2. You have the right to be presumed mentally competent unless a court has ruled otherwise.
3. You have the right to a clean and humane environment in which you are protected from harm, have privacy with regard to personal needs, and are treated with respect and dignity.
4. You have the right to appropriate treatment in the least restrictive appropriate setting available. This is a setting that provides you with the highest likelihood for improvement and that is not more restrictive of your physical or social liberties than is necessary for the most effective treatment and for protection against any dangers which you might pose to yourself or others.
5. You have the right to be free from mistreatment, abuse, neglect, and exploitation.
6. You have the right to be told in advance of all estimated charges being made, the cost of services provided by the hospital, sources of the program's reimbursement, and any limitations on length of services known to the hospital. As part of this right, you should have access to a detailed bill of services, the name of an individual at the facility to contact for any billing questions, and information about billing arrangements and available options if insurance benefits are exhausted or denied.
7. You have the right to fair compensation for labor performed for the hospital in accordance with the Fair Labor Standards Act.
8. You have the right to be informed of those hospital rules and regulations concerning your conduct and course of treatment.

Personal Rights

Unless otherwise specified, these personal rights can only be limited by your doctor on an individual basis to the extent that the limitation is necessary to your welfare or to protect another person. The reasons for and duration of the limitation must be written in your medical record, signed, and dated by your doctor, and fully explained to you. The limit on your rights must be reviewed at least every seven days and if renewed, renewed in writing.

9. You have the right to talk and write to people outside the hospital. You have the right to have visitors in private, make private phone calls, send and receive sealed and uncensored mail. *In no case may your right to contact or be contacted by an attorney, the department, the courts, or the state attorney general be limited.* This right includes a prohibition on barriers to communication imposed by a hospital, such as:

- rigid and restrictive visiting hours;
- policies that restrict hospitalized mothers and fathers from visiting with their minor children;
- policies that restrict parents from visiting their hospitalized children;
- limited access to telephones; and

- failure to provide assistance to patients who wish to mail a letter.
10. You have the right to keep and use your personal possessions, including the right to wear your own clothing and religious or other symbolic items. You have the right to wear suitable clothing which is neat, clean, and well fitting.
 11. You have the right to have an opportunity for physical exercise and for going outdoors with or without supervision (as clinically indicated) at least daily. *A physician's order limiting this right must be reviewed and renewed at least every **three** days. The findings of the review must be written in your medical record.*
 12. You have the right to have access to appropriate areas of the hospital away from your living unit, with or without supervision (as clinical appropriate), at regular and frequent times.
 13. You have the right to religious freedom. However, no one can force you to attend or engage in any religious activity.
 14. You have the right to opportunities to socialize with persons of the opposite sex, with or without supervision, as your treatment team considers appropriate for you.
 15. You have the right to ask to be moved to another room if another person in your room is disturbing you. The hospital staff must pay attention to your request, and must give you an answer and a reason for the answer as soon as possible.
 16. You have the right to receive treatment of any physical problems which affect your treatment. You also have the right to receive treatment of any physical problem that develops while you are in the hospital. If your physician believes treatment of the physical problem is not required for your health, safety, or mental condition, you have the right to seek treatment outside the hospital at your own expense.
 17. You have the right to not be unnecessarily searched unless your physician believes there is a potential danger and orders a search. If you are required to remove any item of clothing, a staff member of the same sex must be present and the search must take place in a private place.

Confidentiality

18. You have the right to review the information contained in your medical record. If your doctor says you shouldn't see a part of your record, you have the right at your expense to have another doctor of your choice review that decision. The doctor must also reconsider the decision to restrict your right on a regular basis. The right extends to your parent or conservator if you are a minor (unless you have admitted yourself to services) and to your legal guardian if you have been declared by a court to be legally incompetent.
19. You have the right to have your records kept private and to be told about the conditions under which information about you can be disclosed without your permission, as well as how you can prevent any such disclosures.
20. You have the right to be informed of the current and future use of products of special observation and audiovisual techniques, such as one-way vision mirrors, tape recorders, television, movies, or photographs.

Consent

21. You have the right to refuse to take part in research without affecting your regular care.
22. You have the right to refuse any of the following:

- surgical procedures;
- electroconvulsive therapy (prohibited for minors under the age of 16);
- unusual medications;
- behavior therapy
- hazardous assessment procedures;
- audiovisual equipment; and
- other procedures for which your permission is required by law. *This right extends to your parent or conservator if you are a minor, or your legal guardian when applicable.*

23. You have the right to withdraw your permission at any time in matters to which you have previously consented.

Care and Treatment

24. You have the right to be transported to, from, and between private psychiatric hospitals in a way that protects your dignity and safety. You have the right not to be transported in a marked police or sheriff's car or accompanied by a uniformed officer unless other means are not available.

25. You have the right to a treatment plan for your stay in the hospital that is just for you. You have the right to take part in developing that plan, as well as the treatment plan for your care after you leave the hospital. *This right extends to your parent or conservator if you are a minor, or your legal guardian when applicable. You have the right to request that your parent/conservator or legal guardian take part in the development of the treatment plan. You have the right to request that any other person of your choosing, e.g., spouse, friend, relative, etc., take part in the development of the treatment plan. You have a right to expect that your request be reasonably considered and that you will be informed of the reasons for any denial of such a request. Staff must document in your medical record that the parent/guardian, conservator, or other person of your choice was contacted to participate.*

26. You have the right to be told about the care, procedures, and treatment you will be given; the risks, side effects, and benefits of all medications and treatment you will receive, including those that are unusual and experimental, the other treatments that are available, and what may happen if you refuse the treatment.

27. You have the right to receive information about the major types of prescription medications which your doctor orders for you (effective May 1, 1994).

28. You have the right not to be given medication you don't need or too much medication, including the right to refuse medication (this right extends to your parent or conservator if you are a minor, or your legal guardian when applicable). However, you may be given appropriate medication without your consent if:

- your condition or behavior places you or others in immediate danger; or
- you have been admitted by the court and your doctor determines that medication is required for your treatment and a judicial order authorizing administration of the medication has been obtained.

29. You have the right to receive a list of medications prescribed for you by your physician, including the name, dosage, and administration schedule, within four hours of the facility administrator or designee receiving such a request in writing.

30. You have the right not to be physically restrained (restriction of movement of parts of the body by person or device or placement in a lock room alone) unless your doctor orders it and writes it in your medical record. In an emergency,

you may be restrained for up to one hour before the doctor's order is obtained. If you are restrained, you must be told the reason, how long you will be restrained, and what you have to do to be removed from restraint. The restraint has to be stopped as soon as possible.

31. You have the right to meet with the staff responsible for your care and to be told of their professional discipline, job title, and responsibilities. In addition, you have the right to know about any proposed change in the appointment of professional staff responsible for your care.

32. You have the right to request the opinion of another doctor at your own expense. You have the right to be granted a review of the treatment plan or specific procedure by hospital medical staff. This right extends to your parent or conservator if you are a minor, or your legal guardian, if applicable.

33. You have the right to be told why you are being transferred to any program within or outside the hospital.

34. You have the right to a periodic review to determine the need for continued inpatient treatment.

Voluntary Patients -- Special Rights

1. You have the right to request discharge from the hospital. If you want to leave, you need to say so in writing or tell a staff person. If you tell a staff person you want to leave, the staff person must write it down for you.

2. You have the right to be discharged from the hospital within four hours of requesting discharge. There are only three reasons why you would not be allowed to go:

- First, if you change your mind and want to stay at the hospital, you can sign a paper that says you do not wish to leave, or you can tell a staff member that you don't want to leave, and the staff member has to write it down for you.
- Second, if you are under 16 years old, and the person who admitted you (your parents, guardian, or conservator) doesn't want you to leave, you may not be able to leave. If you request release, staff must explain to you whether or not you can sign yourself out and why. The hospital must notify the person who does have the authority to sign you out and tell that person you want to leave. That person must talk to your doctor, and your doctor must document the date, time, and outcome of the conversation in your medical record.
- Third, you may be detained longer than four hours if your doctor has reason to believe that you might meet criteria for court-ordered services or emergency detention because:
 - you are likely to cause serious harm to yourself;
 - you are likely to cause serious harm to others, or
 - your condition will continue to deteriorate and you are unable to make an informed decision as to whether or not to stay for treatment.

If your doctor thinks you may meet the criteria for court-ordered services or emergency detention, he or she must examine you in person within 24 hours of your filing the discharge request. You must be allowed to leave the hospital upon completion of the in-person examination unless your doctor confirms that you meet the criteria for court-ordered services and files an application for court-ordered services. The application asks a judge to issue a court order requiring you to stay at the facility for services. The order will only be issued if the judge decides that either:

- you are likely to cause serious harm to yourself;
- you are likely to cause serious harm to others; or

- your condition will continue to deteriorate and you are unable to make an informed decision as to whether or not to stay for treatment.

Even if an application for court-ordered services is filed, you can not be detained at the hospital beyond 4:00 p.m. of the first business day following the in-person examination unless the court-order for services is obtained.

3. You have the right not to have an application for court ordered services filed while you are receiving voluntary services at the hospital unless your physician determines that you meet the criteria for court-ordered services as outlined in 573.022 of the Texas Health and Safety Code and:

- you request discharge (see number 2 above);
- you are absent without authorization;
- your doctor believes you are unable to consent to appropriate and necessary treatment; or
- you refuse to consent to necessary and appropriate treatment recommended by your doctor and your doctor states in the certificate of medical examination that:
 - there is no reasonable alternative treatment; and
 - you will not benefit from continued inpatient care without the recommended treatment.

4. Your doctor must note in your medical record and tell you about any plans to file an application for court-ordered treatment or for detaining you for other clinical reasons. If the doctor finds that you are ready to be discharged, you should be discharged without further delay.

Note: The law is written to ensure that people who do not need treatment are not committed. The Texas Health and Safety Code says that any person who intentionally causes or helps another person cause the unjust commitment of a person to a mental hospital is guilty of a crime punishable by a fine of up to \$5,000 and/or imprisonment in county jail for up to one year.

Emergency Detention --Special Rights

(people brought to the hospital against their will)

1. You have the right to be told:
 - where you are;
 - why you are being held; and
 - that you might be held for a longer time if a judge decides that you need treatment.
2. You have the right to call a lawyer. The people talking to you must help you call a lawyer if you ask.
3. You have a right to be seen by a doctor. You will not be allowed to leave if the doctor believes that:
 - you may seriously harm yourself or others;
 - the risk of this happening is likely unless you are restrained; and,
 - emergency detention is the least restrictive means of restraint.

If the doctor decides you don't meet all of these criteria, you must be allowed to leave. A decision concerning whether you must stay must be made within 24 hours, except that on weekends and legal holidays, the decision may be delayed until 4:00 in the afternoon on the first regular workday. The decision may also be delayed in the event of an extreme weather emergency or disaster. If the court is asked to order you to stay longer, you must be told that you have a right to a hearing within 72 hours (excepting weekends, holidays, or extreme weather emergencies or disasters).

4. If the doctor decides that you don't need to stay here, the hospital will arrange for you to be taken back to where you were picked up if you want to return, or to your home in Texas, or to another suitable place within reasonable distance.

5. You have the right to be told that anything you say or do may be used in proceedings for further detention.

Order of Protective Custody -- Special Rights

1. You have the right to call a lawyer or to have a lawyer appointed to represent you in a hearing to determine whether you must remain in custody until a hearing on court-ordered mental health is held.

2. Before a probable cause hearing is held, you have the right to be told in writing:

- that you have been placed under an order of protective custody;
- why the order was issued; and
- the time and place of a hearing to determine whether you must remain in custody until a hearing on court-ordered mental health services can be held.

This notice must also be given to your attorney.

3. You have the right to a hearing within 72 hours of your detention, except that on weekends or legal holidays, the hearing may be delayed until 4:00 in the afternoon on the first regular workday. The hearing may also be delayed in the event of an extreme weather emergency or disaster.

4. You have the right to be released from custody if:

- 72 hours has passed and a hearing has not taken place (excepting weather emergencies and extensions for weekends and legal holidays)'
- an order for court-ordered mental health services has not been issued within 14 days of the filing of an application (30 days if a delay was granted); or
- your doctor finds that you no longer need court-ordered mental health services.

Involuntary Patients -- Special Rights

Under most circumstances, you or a person who has your permission may, at any time during your commitment, ask the court to ask a physician to reexamine you to determine whether you still meet the criteria for commitment. If the physician determines you no longer meet the criteria for commitment, you must be discharged. If the physician determines you continue to meet the criteria for commitment, the physician must file a Certificate of Medical Examination with the court within 10 days of the filing of your request. If a certificate is filed, or if a certificate has not been filed within 10 days and you have not been discharged, the judge may set a time and place for a hearing on your request.

RIGHTS OF THE ELDERLY

In addition the other rights an elderly individual has the rights provided by this section.

1. An elderly individual may not be physically or mentally abused or exploited.
2. An elderly individual may not be physically or chemically restrained unless the restraint:
 - a. is necessary in an emergency to protect the elderly individual or others from injury after the individual harms or threatens to harm himself or another; or
 - b. is authorized in writing by a physician for a limited and specified period of time.
3. A mentally retarded elderly individual may participate in a behavior modification program involving use of restraints or adverse stimuli only with the informed consent of a guardian.
4. An elderly individual should be treated with respect, consideration, and recognition of the individual's dignity and individuality. An elderly individual receives personal care and private treatment.
5. An elderly individual may not be denied appropriate care on the basis of the individual's race, religion, color, national origin, sex, age, handicap, marital status, or source of payment.
6. An elderly individual may not be prohibited from communicating in the individual's native language with other individuals or employees for the purpose of acquiring or providing any type of treatment, care or services.
7. An elderly individual is encouraged and assisted in the exercise of an individual's rights. An elderly individual may voice grievances or recommend changes in policy or service without restraint, interference, coercion, discrimination, or reprisal. The person providing services shall develop procedures for submitting complaints and recommendations by elderly individuals and for assuring a response by the person providing services.
8. An elderly individual may associate, communicate, and meet privately with other individuals unless to do so would infringe on the rights of other individuals. An elderly individual's mail may not be opened unless authorized in writing by a physician.
9. An elderly individual may participate in activities of social, religious, or community groups unless a physician determines that participation would harm the individual. The physician must record the determination in the elderly individual's record.
10. An elderly individual may manage his personal financial affairs. If the elderly individual authorizes in writing the person providing services to assist in managing the finances, the person providing services shall deposit the elderly individual's funds in a separate trust fund and provide the individual with a written receipt; provided, however, if federal regulations prescribe a different procedure, federal regulations prevail.

11. An elderly individual's records are confidential and may not be released without the individual's written permission. An elderly individual may inspect the individual's personal records maintained by the person providing services.
12. A person providing services shall answer an elderly individual's questions concerning the individual's health, treatment, and condition unless a physician determines that the knowledge would harm the individual. The physician must record the determination in the individual's record.
13. An elderly individual may choose a personal physician.
14. An elderly individual may participate in planning the individual's total care and medical treatment.
15. An elderly individual shall be given the opportunity to refuse treatment after the possible consequences of refusing treatment are fully explained.
16. If an area is available, a person providing services shall, on request, provide the elderly individual with a private area to receive visitors. If the elderly individual is married and the spouse is receiving similar services, the couple may share a room.
17. An elderly individual's visitors may not be restricted unless a physician determines that a restriction is medically necessary.
18. An elderly individual may retain personal clothing and possessions as space permits. The number of personal possessions may be limited for health and safety reasons which are documented in the patient's medical record. The number of personal possessions may be limited for the health and safety of other patients.
19. An elderly individual may not be required to perform services for the person providing services.
20. A person providing services shall inform an elderly individual in writing of available services and the applicable charges if the services are not covered by Medicare, Medicaid, or other form of health insurance.
21. A person providing services may not transfer or discharge an elderly individual unless:
 - a. the elderly individual's medical needs require transfer;
 - b. the elderly individual's health and safety or the health and safety of another individual requires transfer or discharge; or
 - c. the elderly individual fails to pay for services, except as prohibited by federal law.
22. Except in an emergency situation, if a person providing services intends to transfer or discharge an elderly person, the person providing services shall notify the individual, the responsible party of the patient, and attending physician not later than thirty days before the date on which the individual will be transferred or discharged.

Texas H.B. No. 1726

I have read the above Rights, they have been explained to me, and I understand them.

Date : _____ _Student: _____

TEEN'S BILL OF RIGHTS

You are probably familiar with the rights that we all have as Americans: things like freedom of religion and freedom of speech. While you are in this hospital you have all those rights, but you also have some extra ones. These rights are meant to make sure you get the best kind of care and treatment while you are here.

This hospital is determined to protect your rights. The only reason any of these rights can be limited is if your doctor thinks you may hurt yourself or someone else, or if your doctor thinks the limitation is necessary for your treatment. Any time your rights are restricted, your doctor will tell you why and for how long. Your doctor has to reconsider this restriction on a regular basis so that you can have all your rights back as soon as possible.

If you think your rights aren't being protected, or you just want to talk to someone about your treatment, there are several places you can call:

If you are at a psychiatric hospital, you can call:

Health Facility Licensure and Certification Division
Texas Department of Health
1100 W. 49th St., Austin, TX 78756

1-800-228-1570

If you are at a TXMHMR facility, you can call:

Consumer Services and Rights Protection
Texas Department of Mental Health & Mental Retardation
PO Box 12668, Austin, TX 78711-2668

1-800-252-8154

Whether you are at a psychiatric hospital or a TXMHMR facility, you can call:

Advocacy, Incorporated
7800 Shoal Creek Blvd., Suite 171 E., Austin, TX 78757

1-800-315-3876

Of course, you should always talk to your parents or a friend about the things you like and don't like at the hospital.

The back of this page tells you about your most important rights* while you are at this hospital. Take some time to read about them, and don't be afraid to ask questions if you are not sure what something means. The people here want to help you.

*There's a longer version of this document that includes more detail about the rights you have in this hospital. Your parents or guardian will get a copy of it, but if you'd like a copy, just ask someone on the hospital staff for a copy of the "Patient's Bill of Rights".

STATEMENT THAT YOU HAVE RECEIVED THIS DOCUMENT AND THAT IT HAS BEEN EXPLAINED

I agree that:

- _____ I got a copy of this document (back and front) prior to admission.
- _____ Sometime during the first 24 hours after I was admitted, someone on the hospital staff explained what it says to me in a language that I can understand (if involuntarily committed).
- _____ Someone on the staff explained what it says to me in a language I understand prior to admission (if voluntary committed).

Name _____

Witness _____

Date _____

Date _____

Relationship of witness to patient: _____

**PARIS JUNIOR COLLEGE
HEALTH OCCUPATIONS DEPARTMENT**

Student _____ Date _____

To whom it may concern:

1. Does a physical condition exist that would limit this student's participation in health care delivery?
YES _____ NO _____
2. If YES, please provide information.
 - a. The limitation is on:
_____ Lifting
_____ Moving-Turning patient
_____ Other _____
 - b. Expected length of condition _____

Signature Required:

_____, M.D. _____, Date

PHYSICAL CONDITION STATEMENT

Students with a noncontagious illness or injury* may be admitted to or choose to continue in health occupations courses. If so, the student must assume the risk that absenteeism or inability to perform duties related to learning objectives and health care delivery can result in the necessity to discontinue the program. It is the student's responsibility to obtain and provide to the instructor continual written permission from the medical doctor. The college is not responsible for exacerbation of illness, injuries, or infectious contact.

I have read and understood the "Physical Condition Statement."

Student Signature Date

Faculty Signature Date

* i.e. broken bones, back injuries, surgery, etc.

**PARIS JUNIOR COLLEGE
DIAGNOSTIC MEDICAL SONOGRAPHY PROGRAM
SELF EVALUATION FOR THE
_____ SEMESTER**

Student Name:_____

Date:_____

This report represents your general evaluation of your performance for the indicated semester. It is a descriptive evaluation intended to help you identify your progress, strengths, and areas of needed improvement. You are to keep one copy of the evaluation and another will be kept in your file.

DMSO_____

List the strengths:

Areas of Improvement:

DMSO_____

List the strengths:

Areas of Improvement:

Student Signature

**PARIS JUNIOR COLLEGE
DIAGNOSTIC MEDICAL SONOGRAPHY PROGRAM
SUMMATIVE EVALUATION FOR THE
_____ SEMESTER**

Student Name:_____

Date:_____

This report represents the faculty's general evaluation of your performance for the indicated semester. It is a descriptive evaluation intended to help you identify your progress, strengths, and areas of needed improvement. You are to keep one copy of the evaluation and another will be kept in your file.

Classroom grade for DMSO_____ is _____

List the strengths:

Areas of Improvement:

The area the faculty would like to see the most improvement for the _____semester is:

Clinical grade for DMSO_____ is _____

List the strengths:

Areas of Improvement:

The area the faculty would like to see the most improvement for the _____semester is:

Faculty Member Signature

Student Signature

Program Coordinator's Signature_____

DRUG ABUSE ATTESTATION

I, _____, recognize that the use and abuse of alcohol, drugs or substances can create an unsafe clinical working environment for others and myself. I certify that I am not engaging in any substance abuse behaviors. I understand that my signature will acknowledge compliance with the substance abuse policy as outlined in the Paris Junior College Diagnostic Medical Sonography Student Handbook. This consent form will be kept in my student file and will remain in effect during the entire period of my enrollment. I acknowledge that I can be selected for a randomized drug screen at anytime during the program.

Student's signature

Date