Department of Cardiopulmonary Science Cardiovascular Sonography Program Student Handbook

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http://alliedhealth.lsuhsc.edu/cp/



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1.0 GENERAL INFORMATION

1.1 INTRODUCTION

Welcome to the Department of Cardiopulmonary Science and the cardiovascular sonography program! Your acceptance into this program suggests that you are serious about your studies and motivated toward establishing a career in the allied health profession of cardiovascular sonography. We the faculty will do everything we can to help you achieve your goals and become a valuable contributor to patient care. We ask that you take your responsibilities seriously by attending all classes, being punctual, meeting all assigned deadlines, taking an active role in learning, and respecting the policies and procedures of the cardiovascular sonography program.

The purpose of this handbook is to give you, the student, a convenient reference for familiarizing yourself with the policies and procedures of the cardiovascular sonography program. This handbook deals with subjects that are pertinent primarily to our program and is supplemental to the official LSU Health Sciences Center — New Orleans (LSUHSC-NO) Catalog/Bulletin, and the School of Allied Health Professions (SAHP) <u>Student Handbook</u> and orientation packet/materials that are given out to all students at orientation by the Office of Student Affairs. Program academic and clinical policies apply to all students and faculty regardless of location of instruction. Although most of the information that you need is in one of these three sources, should you have any questions, feel free to ask a member of the faculty, who will be happy to assist you.

1.2 DESCRIPTION OF THE CARDIOPULMONARY SCIENCE CURRICULUM

The Department of Cardiopulmonary Science grants a Bachelor of Science degree in Cardiopulmonary Science. Students who apply to the program must choose whether they wish to apply to the respiratory therapy program or the cardiovascular sonography program. About one third of the curriculum consists of courses common to both programs, and the remainder of the curriculum is specific to one program or the other. The cardiovascular sonography program consists of education in adult echocardiography and vascular technology. The Department currently holds accreditation only in adult echocardiography and not vascular technology.

Students receive didactic instruction in cardiopulmonary anatomy, cardiopulmonary physiology and pathophysiology, cardiac electrophysiology, patient assessment, echocardiography, and sonography principles and instrumentation prior to any clinical rotations. In addition, students must be able to demonstrate basic clinical skills on classmates prior to performing procedures on patients. A full semester of laboratory experience in echocardiography precedes the initial clinical rotation in echocardiography, which occurs during the third semester of the program, the spring semester of the junior year. Didactic instruction in vascular technology begins during that same spring semester, and vascular clinical rotations begin the following semester, the summer semester of the senior year.

1.3 STATEMENT OF EQUAL OPPORTUNITY

The LSU System assures equal opportunity for all qualified persons without regard to race, color, religion, sex, sexual orientation, national origin, age, disability, marital status, or veteran's status in the admission to, participation in, or employment in the programs and activities, which the LSU System operates.

1.4 ORGANIZATIONAL CHART

The Department's organizational chart can be found here.

1.5 ACCREDITATION

The Department's program in adult cardiac sonography is accredited by the Commission on Accreditation of Allied Health Education programs (www.caahep.org) upon the recommendation of the Joint Review Committee on Education in Cardiovascular Technology. The program in noninvasive vascular study is not accredited. Graduates who attain the RDCS credential from the American Registry for Diagnostic Medical Sonography (ARDMS) are immediately eligible to take the registered vascular technologist exam offered by ARDMS.

Commission on Accreditation of Allied Health Education Programs

9355 113th St. N, #7709 Seminole, FL 33775 (727) 210-2350

1.6 GOALS AND OBJECTIVES

Goal: To prepare cardiovascular technologists in cognitive, psychomotor, and affective learning domains to enter the professions of adult cardiac sonography and noninvasive vascular study.

Knowledge objectives

Upon completion of the program, graduates will demonstrate:

- 1. sufficient knowledge of adult echocardiography and vascular technology, as well as general medical knowledge, to function in a healthcare setting.
- 2. the ability to collect data from charts and patients.
- 3. the ability to interpret patient data.
- 4. the ability to use sound judgment while functioning in a healthcare setting.
- 5. the ability to apply knowledge in a clinical setting.
- 6. the ability to pass national registry exams in adult echocardiography.

Clinical proficiency objectives

Upon completion of the program, graduates will demonstrate the ability to:

- 1. perform complete echocardiograms on adult patients.
- 2. perform vascular assessments of upper and lower extremities, and carotid and vertebral arteries.
- 3. perform patient assessment.
- 4. perform preliminary interpretation of adult echocardiograms.

Behavioral skills objectives

Upon completion of the program, graduates will be prepared to:

- 1. communicate effectively within a healthcare setting.
- 2. conduct themselves in an ethical and professional manner.
- 3. manage time efficiently while functioning in a healthcare setting.

1.7 ELIGIBILITY FOR REGISTRY EXAMS

Ideally, students will receive the Registered Diagnostic Cardiac Sonographer credential offered by ARDMS (www.ardms.org) upon graduating. To achieve this credential, students must take and pass the Sonography Principles and Instrumentation (SPI) exam as well as the Adult Echocardiography (AE) exam. The SPI exam may be taken once the course of the same name is completed successfully. Students can sign up for the AE exam 60 days prior to graduation. Once this credential is achieved, students can take the Registered Vascular Technologist (RVT) exam offered by ARDMS as long as they submitted a clinical verification form signed by a registered vascular technologist.

1.8 ACADEMIC CREDIT FOR PRIOR EDUCATION OR WORK EXPERIENCE IN CARDIOVASCULAR SONOGRAPHY

Prior education or work experience in cardiovascular sonography will NOT be accepted in lieu of required coursework unless the applicant has attained the RVT or Registered Vascular Sonographer (RVS, offered by Cardiovascular Credentialing International) credential. Applicants who have previously earned the RVT or RVS credential will only be exempted from didactic and clinical courses related to the earned credential and only be considered for the RVT or RVS to BS track.

1.9 ADDITIONAL PROGRAM-RELATED COSTS TO STUDENTS

Required Approximate Cost

Clinical background check

•	Drug screening	\$35
•	Liability insurance	\$120
•	Scrubs	\$40-48
•	Parking	\$457
•	Diploma, cap, and gown	\$125
•	Basic life support	\$50

Profession-Related

SPI exam	\$250
 Adult echocardiography exam 	\$275
 Student ASE membership 	\$75

2.0 STUDENT SUCCESS

2.1 ACADEMIC STANDARDS

The Department of Cardiopulmonary Science follows the undergraduate scholastic requirements and provisions for academic progression of the SAHP.

Undergraduate Scholastic Requirements

- 1. The minimum scholastic requirement for course work is a grade of C. In courses designated Pass/Fail or Satisfactory/Unsatisfactory a grade of Pass or Satisfactory is required to be in good academic standing.
- 2. A minimum semester and cumulative professional GPA (for course work taken at LSUHSC) of 2.0 must be maintained.
- 3. Departmental scholastic requirements may differ from those of the School and should be noted by students.

Provisions for Academic Progression

- If an unacceptable grade is recorded in a required course the student will be placed on scholastic probation and must satisfactorily complete the required course before continuing the program sequence.
- 2. Students may not participate in clinical, fieldwork, or preceptorship courses until all prerequisite course work has been completed successfully.
- 3. Students who receive a grade of D or F in more than one required course will be dismissed from the School.
- 4. Students placed on scholastic probation must repeat those courses in which an unacceptable grade was earned when next regularly offered and earn a satisfactory grade. Students will remain on scholastic probation until this requirement is met and the

- minimum scholastic requirement for cumulative professional GPA is achieved. Students who do not meet this requirement will be dismissed from the School.
- 5. A course, including those designated clinical, fieldwork, and preceptorship, may be repeated one time only. Students who repeat a course but earn an unacceptable grade will be dismissed from the School.
- 6. Students who fail to attain a minimum 2.0 cumulative and/or semester professional GPA in two consecutive semesters will be dismissed from the School.
- 7. Students on scholastic probation are not eligible for graduation.
- 8. Students must complete the professional program in a specified period of time. (Time frame is determined by each department).
- 9. Grades recorded in repeated course work do not replace the original grade. Both the original grade and repeated grade will appear on the academic transcript and both grades will be used in the computation of the academic grade point average.
- 10. Students dismissed from the School for academic reasons must reapply to the program to be considered for readmission.

2.2 EXPECTATIONS AND GUIDELINES

Acceptance into the Cardiopulmonary Science Bachelor of Science degree program at LSUHSC-NO indicates that the faculty and staff in the Department of Cardiopulmonary Science have chosen to dedicate their time, efforts, and expertise to train you to become an allied health practitioner. Your acceptance of our invitation to enter the program indicates that you are committed to becoming a professional in the cardiopulmonary sciences by fulfilling the degree requirements and taking all the appropriate board exams. Your acceptance also marks the beginning of an intense two-year didactic and clinical preparation to become a competent and caring professional in cardiovascular sonographer. Successful completion of the program demands the fullest commitment of time, effort, and energy from all parties involved. This section outlines the specific qualities, attributes and learning strategies required of a successful student in the Program, and further serves to define resources and references you may need throughout your course of study as well as those you may need in your career as a professional in the cardiopulmonary sciences.

1. Transitioning to Professionalism

Your tenure as a student in the Department of Cardiopulmonary Science will be unlike your past educational experiences. Unlike the general curriculum required for most bachelor's degrees, your coursework is streamlined and specialized to the cardiopulmonary sciences and will traverse classroom examination to demonstration of competency in clinical settings. The most successful graduates from the Cardiopulmonary Science program demonstrate a triad of qualities including professional decorum, professional integrity, and educational leadership. The integrated incorporation of these qualities eases the transition from college student to health care professional.

A. Professional Decorum

First impressions go a long way in determining how one is perceived and treated in the classroom and in the clinic. Arriving on time or early demonstrates that you understand and respect the importance of your attendance in both the clinic and the classroom. Health care professionals should be well groomed, dressed in the appropriate attire, and prepared for the task at hand whether it be classroom activities (books, assignments, prior readings, etc.) or in the clinic. Students should also be respectful of those who may be sensitive to strong odors by limiting the use of scented products (e.g., colognes, lotions, cigarette smoke, etc.). Taken together, these guidelines define the professional decorum expected of each student enrolled in the Department of Cardiopulmonary Science as they pertain to both the classroom and clinical environments.

B. **Professional Integrity**

Professional integrity is one key to professional success. The successful student is one who possesses effective communication skills, is self-directed, and willingly participates in all aspects of the educational process. These students demonstrate profound respect for themselves, their professors, and colleagues; they are honest and embrace clinical practice with high ethical and moral standards.

As a student, you are expected to:

- Utilize effective interpersonal communication skills.
- Be self-directed and motivated in your studies and in clinical rotations.
- Demonstrate respect for yourself, the faculty and staff, and your peers.
- Provide sympathetic and empathetic care.

C. Educational Leadership

Your proficiency as a cardiovascular sonographer will also be evaluated on your educational leadership. The most successful professionals not only understand and are proficient at the "how" of the tasks in their field, but also understand the "why" behind the actions on a fundamental level. It is not enough to memorize the material presented; students must possess an understanding of the material beyond recall. Such understanding of fundamental procedures and disease processes allows a professional to make the most informed decisions and anticipate realistic outcomes and complications in patient care. Futhermore, health care professionals are expected or required to continue their education after completion of the degree program. Educational leaders share their knowledge and skills with others (e.g., preceptorship, serving on advisory committees, hospital committees, and state and national professional societies).

As a student, you are expected to:

- Master the presented material at the application and analysis levels.
- Demonstrate mastery of the fundamental principles and techniques.
- Familiarize yourself with current topics in professional journals (e.g., Journal of the American Society of Echocardiography).
- Demonstrate competency in diagnostic procedures and patient care.

II. Helpful Hints for Success

A. Commit Yourself

You cannot go about learning cardiovascular sonography in a halfhearted fashion. To integrate the many concepts of cardiopulmonary sciences you must be aggressive and be devoted to your studies. This may mean spending less time with family, friends, and co-workers and more time with fellow students, faculty, and patients.

B. Ask Yourself Why

Whenever possible, ask yourself why something is the way that it is, or happens the way that it does. If you are unsure of the answer, ask the instructor. This method will help you remember and integrate material and increase your level of understanding. The beauty of cardiovascular sonography is that so much of the physiology, pathophysiology, and diagnostic techniques make sense. If something does not make perfect sense to you, make every effort to see that it does. Do not simply give in and memorize the material.

C. Take Responsibility for What You Do Not Know

If you do not understand something, and you are like many students, you will do one of two things. You can forget about the material, attempt to learn it the day before the test when it is too late, completely botch it on the exam, and then blame the teacher for not explaining it to your satisfaction. Better yet, you can ask the teacher, preferably on the day of the lecture, about material that you do not understand. The teacher is here to help you, so take advantage of his or her knowledge. You cannot and must not be afraid of asking questions. You are paying for this, so get your money's worth.

D. Focus on the Material

To make your time here a rewarding experience, your goal must be to learn the material, not just pass the exams. The primary purpose of exams is to assess what you have learned. If you work hard and dedicate yourself to learning the material, the exams will take care of themselves. Do not continually ask, "Do we need to know this for the test?" If you familiarize yourself with everything presented in class, as well as each reference indicated by the instructor, you will do well.

E. Do Not Cram

To reduce stress in your life, keep up with the material! Read and refer to accompanying textbook(s) for more detailed information on presented material. There is far too much information to expect to learn it in a few hours or even days. Repeated exposure and further investigation strengthen your understanding.

2.3 GUIDANCE AND ADVISING

Guidance and advising are available to the student as follows:

- School and departmental orientations are provided for students at the onset of the program.
- The School's student handbook and catalog and program-specific student handbook are available to the student on the School's and program's websites.
- Students may direct questions to faculty members at any time during the program.
- Advising on professional and career issues is available from any faculty member at any time during the program.
- Counseling for personal problems is available through the <u>Campus Assistance Program</u>.
- Students with disabilities are required to register their need for accommodation with the Office of Disability Services as soon as their need is identified.
- Financial assistance is available through the Student Financial Aid Office.
- Confidentiality and impartiality are maintained in accordance with the equal opportunity
 policy statement and the Family Education Rights and Privacy Act addressed in the
 LSUHSC-NO Catalog/Bulletin as listed under Federal Regulations. All information
 contained in student files is kept confidential and not released with the student's written
 permission. Any information to be discarded by faculty that contains student identifying
 factors is placed in the School's shred bins.

2.4 GUIDELINES FOR ACADEMIC COUNSELING

A student whose grade on an exam or whose average during the course is below a letter grade of C is strongly advised to immediately contact the course director to discuss academic progression and means for improving academic performance. These may include scheduled meetings with the course director or instructional faculty, seeking out tutoring, additional practice assignments and/or practice time.

2.5 TUTORING

If a student is not earning a letter grade of C or better in a course, the course director may

suggest tutoring. The department will *attempt* to find a recent graduate or a current student to function as a tutor for those students. The fee for tutoring will be set by the tutor. The payment for tutoring is from the tutored student directly to the tutor.

2.6 REMEDIATION POLICY

A full-time student who makes a letter grade of D in a course may petition the department head to remediate that course. The department head and course director will determine if remediation will be granted according to the following:

- 1. Remediation will not be considered for a student who earns a letter grade of D in more than one semester course.
- 2. Remediation will not be considered for a student who earns an F in any course.
- 3. A student may not remediate more than two courses throughout the duration of the program.
- 4. Remediation will not be considered for a returning student who is currently on scholastic probation.
- 5. In laboratory courses or lecture/laboratory combined courses, if student failure is due to inability to demonstrate mastery of written material, remediation may be considered. If student failure is due to unsatisfactory performance in the laboratory, remediation is not possible.
- 6. Remediation may postpone progression to clinical courses. Missed clinical rotation time will be scheduled according to clinical course syllabi policies.
- 7. Clinical courses may not be remediated.
- 8. Remediation may postpone graduation by one semester.
- 9. If remediation is granted then a letter grade of "I" may be assigned in the final grade roster. If the course is successfully remediated, the "I" letter grade will be changed to a C; if the student does not successfully remediate the course or is subsequently deemed ineligible for remediation then the "I" letter grade will be changed to a D.

Remediation specifics:

- The remediation exam will be comprehensive or other repeat exams or assignments may be given at the discretion of the course director.
- Exam format is at the discretion of the course director.
- Remediation will be scheduled at the end of the semester in which the unsatisfactory grade is earned.
- The length of time scheduled for remediation is at the discretion of the course director but must not exceed the date for converting "I" letter grades, as specified in the School of Allied Health Professions' academic calendar.
- The remediation plan developed by the course director will be given to the student.
- The student will indicate agreement by signing the plan.

- The passing score on the remediation exam, repeat exams, or assignments is a letter grade of C or higher, according to each program's grading scale policy.
- A student must earn a letter grade of C or higher on the remediation exam or other repeat exams or assignments to have the "I" letter grade converted to a letter grade of C.
- If a student earns a letter grade less than C, the "I" letter grade is converted to the original earned letter grade of D.
- The highest letter grade that may be received for a remediated course is C.

2.7 REQUIREMENTS FOR GRADUATION

- The student must have fulfilled all requirements of each course listed in the Cardiopulmonary Science curriculum and have received a grade of "C" or better in all didactic courses and a passing grade of "P" in all clinic courses.
- II. The student must have met all financial obligations to the LSU System at least ten days prior to graduation.
- III. The student must be registered in the semester of anticipated graduation and pay the appropriate diploma fee.
- IV. The student must attend commencement ceremonies, unless excused in writing by the dean.

3.0 POLICIES AND PROCEDURES

3.1 PROFESSIONAL BEHAVIOR

I. Class Attendance

Students are expected to provide advance notice of absences or a reasonable explanation to the faculty member whose class is missed as soon as possible (and not later than 24 hours) after the missed class. In case of serious illness or other emergencies, the student will need to inform the instructor by phone or e-mail. If the faculty member is not available by phone, the student will need to leave a message with the office staff of the Cardiopulmonary Science Department at (504) 568-4227. If a serious illness or emergency occurs on the day the student is scheduled at a clinical facility, it is the student's responsibility to inform the clinical coordinator, as well as the supervisor of the clinical facility. Timelines for notification are described under the clinical policies and procedures section of this handbook. All missed clinical days must be made up. In the event of serious illness or emergency, the student and clinical coordinator will develop a written plan for making up missed clinical days.

II. E-Mail Requirements

Upon registration in the program, each student is assigned an LSUHSC-NO email account. Students will be required to use their e-mail accounts for registration purposes, and to receive messages from the School and the department. It is preferred that students correspond with faculty members through their LSUHSC-NO email account. Students are expected to check their email regularly, at least daily, and promptly respond to faculty requests.

III. In-Class Computer Use

Courses may require the use of computers for classroom assignments, including exams, quizzes, or other classroom activities. Please refer to course syllabi for specific policies for computer use and communicate with the course director/instructor for answers to specific questions. When computers are used in class, they are expected to be used for school classroom activities only. Any student using a computer during class for non- school related activities will be asked to leave the classroom.

IV. Portable Electronic Devices

Cell phones should be silenced during all classes and during all meetings with faculty. Students whose electrical devices disrupt class may be asked to leave class and will not be permitted to return for the session. Recording devices to reinforce content acquisition may be used in lecture classes only with prior permission of the faculty. They may not be used in lieu of class attendance.

V. Dress for Classroom, Laboratory, and Clinical Rotations

Classroom and laboratory attire: We would like to limit the number of rules that we need to enforce, but we do not want students to dress inappropriately in class or lab. Wearing anything that is too revealing will not be acceptable. For example, short shorts and halter tops are frowned upon, as are open-toed shoes. Preferred shoes: specific LSUHSC-NO Cardiopulmonary Science polo shirts, or sweatshirts. Another option is matching solid color scrub tops and pants. Everyone must wear the official School ID badge while on campus.

Clinical attire: Solid navy-blue scrub top and pants; style is student's choice; should be ordered from the LSUHSC-NO bookstore

VI. Confidentiality of Clients, Patients, and Colleagues

Students are required to respect the dignity, individuality, privacy, and personality of every individual. Information about a client should be shared on a "need to know" basis only, and not for reasons of personal interest. In other words, to provide services, it is necessary for various professional personnel to know personal information about a client. If a client's

information is discussed related to official class business (e.g., during seminars, classes), the client's identity must remain anonymous, and information about the client that is not necessary to the learning situation must not be shared, (e.g., identity of known relatives, legal or moral issues not related to respiratory services being rendered). This is also true about personal discussions that students participate in during class time. Students are expected to respect the confidentiality and privacy of their classmates.

VII. Hall Conduct

Students need to be cognizant when talking and gathering in the halls that noise travels easily. We ask that students try to keep the noise at a minimum, particularly since we share the floor with other offices.

VIII. Classrooms

Students are expected to demonstrate respect for the School and courtesy to others. Students are expected to take responsibility for keeping the classrooms free of trash and debris, i.e., soft drink cans, paper, etc. Bulletin boards are intended for the display of instructional and professional materials, not personal or social items.

IX. Laboratory

Room 6B2 is the cardiovascular sonography lab. Students are free to use the ultrasound machines outside of scheduled lab time, including at night and on the weekends. Students may scan family members and friends to practice. If for some reason the lab is locked, please ask the department head or department coordinator to open it. If it is after hours, the department head will have to send an email to University Police asking them to open the lab. The machine(s) should be turned off when not in use.

X. Student Lounge

Room 6A12 is designated as a student lounge. The microwave and refrigerator in this room are for student use on the condition that students always keep them clean. Any food left in the refrigerator or in this room must be marked with the student's name. Food items left in the refrigerator or in the student lounge without a name attached are to be discarded by students. The refrigerator and microwave are to be emptied and cleaned at the end of each semester. During hurricane season (June 1 to November 30), items should be removed at the end of each week. It is the responsibility of the students to see that these tasks are performed on a regular basis. Failure to keep both items clean may result in the termination of the use of these items.

XI. Building Access

Students have access to the buildings of the Health Sciences Center 24 hours a day, 7 days a week. A student ID is always necessary to enter.

XII. Study Rooms

All lecture rooms of the department are available to students when not being used for lectures, as is the student lounge. Room 6C3 is available for studying as well as for taking exams outside of the testing center. The library in the Resource Center is also available for studying.

XIII. Student Illness/Injury

All students with health conditions (illnesses/infections/injury) that necessitate extended absences (three or more days) must discuss the reason for the absence with the program director. The student may continue in the program with the written approval of his/her physician.

An illness that requires an extended absence that prevents the completion of course work because of circumstances beyond the student's control may necessitate the student's withdrawal from course(s), resignation from the University and/or issuance of a grade of "I" (incomplete). In such cases, the student must consult the program director for cardiovascular sonography for guidance.

3.2 COMMUNICATION

I. Contacting Faculty

A. Students may communicate with faculty via email or cell phone. Students are welcome to call or text faculty should the need arise. Ideally, phone calls would occur prior to 6 p.m. and texts prior to 10 p.m.

II. Appointments with Faculty

- A. It is preferred that students make non-emergency appointments with faculty members in advance.
- B. Faculty members are available during office hours as listed on syllabi and/or on an asneeded basis.
- C. Students or faculty may initiate a meeting.
- D. The student or faculty member will need to make an appointment at a time that is convenient to both parties.
- E. Ways in which a student can make an appointment:
 - 1. A student may stop by a faculty member's office.
 - 2. A student may call, text, or send an email.
 - 3. A student may request a Zoom meeting.

- 4. A student or the faculty member can ask for an appointment before class, during a class break, or after class. Keep in mind that faculty often do not take their calendars to class, so the student may need to accompany the faculty member to his or her office after class to set the appointment.
- F. If a faculty member's door is open, it is preferred that students knock and directly request to speak with the faculty member.
- G. Students are not permitted in faculty offices unsupervised.
- H. Students should meet with the faculty member(s) responsible for a course to discuss course-specific policies and procedures. If a student is not satisfied with the results of a meeting with a faculty member, then the issue may be discussed with program director. If a student is still not satisfied with the results of a meeting with the program director, then the issue may be discussed with the department head. For information about academic appeals, students can refer to that section in the SAHP Student Handbook.

III. Faculty Office Hours and Student Counseling

Faculty members have an open-door policy regarding student counseling and allow students to make appointments to meet with them regarding their academic concerns and problems. Included in all course syllabi is the course director's office location and semester office hours and/or a statement informing students how they can make an appointment to meet with them. Faculty assess student performance throughout a course of study, including clinics, and strongly recommends to students who receive a deficient performance evaluation to seek immediate guidance from the course director on means for improving their performance. These might include scheduled meetings with the course director or instructional faculty, additional practice assignments and/or practice time. Students seeking guidance should make an appointment with the appropriate course director and refer to the Appointments with Faculty Members section of the cardiovascular sonography student handbook. Faculty may keep secure and in confidence a written record of all out-of- class counseling with students.

IV. Difficulties Accessing Email and Moodle

Difficulties accessing e-mail and Moodle should be reported to the HELP desk at 568-HELP (4357). The HELP desk is available 24 hours/7 days a week. Because technology is unpredictable at times, students may experience difficulties submitting assignments or accessing announcements at times of high demand. Students are expected to check the Moodle sites, gradebook, and announcements several times a week. If a problem occurs, it is the student's responsibility to e-mail the course instructor immediately to report the problem. There are occasions when a simple adjustment by the instructor can remediate the problem. Instructors reserve the right to decide if assigned work can be re-submitted.

3.3 DEPARTMENTAL DISASTER PLAN

All faculty, staff, and students should be familiar with the Emergency Response Actions page (https://www.lsuhsc.edu/emergencypreparedness/) on the LSU Health Sciences Center New Orleans website, as well as the Chancellor's Memorandum 51 pertaining to weather-related emergencies (https://www.lsuhsc.edu/administration/cm/cm-51.pdf). It is each individual's responsibility, whether faculty, staff or student, to obtain essential information about a hazardous condition from television, radio, or newspaper. Specific emergency information pertaining to LSU Health Sciences Center New Orleans (LSUHSC-NO) can be found on the LSUHSC-NO website at the following address: https://911.lsuhsc.edu. All faculty, staff, and students should sign up for the emergency alert system at

https://911.lsuhsc.edu/eas/textemailalerts.aspx in order to receive a text or email pertaining to important safety information. It is each individual's responsibility to evaluate the situation and determine the course of action that is in the individual's best interest. The Department of Cardiopulmonary Science does not guarantee that every individual will be notified, nor assumes any liability for failure to contact any individual. Given these conditions, the Department will make an effort to notify faculty, staff, and students of important information regarding hazardous conditions (e.g., hurricane information). This effort will include one or more of the following means of communications: mass communication, telephone, and/or answer machine. In the case of mass communication, faculty, staff and students will be advised to listen to major television and radio stations for information.

Hurricane

In the event of a hurricane watch, all faculty, staff, and students must vacate the campus not less than 6 hours in advance of the mandated closure time. All individuals should be prepared for an extended absence from the LSUHSC campus. Faculty and staff, if possible, should make sure computers and other electronic devices are not positioned near windows. Faculty and staff should be prepared to use laptop computers at a remote location, if necessary, to perform essential duties.

In the event students, faculty, or staff are not able to access emergency information, or have questions pertaining to proper procedures, the following individuals may be contacted by telephone:

Andy Pellett will be the first point of contact. (504) 957-8200 (cell) (504) 568-4229 (office)

Alternatively, the following individuals may be contacted:

John Zamjahn

(504) 237-0728 (cell) (504) 568-4228 (office)

Kevin Lord

(210) 210-5510 (cell) (504) 568-4232 (office)

Brenda Ramirez

(504) 435-7061 (cell) (504) 568-4230 (office)

Khy Fisher

(817) 307-1631 (cell) (504) 568-4234 (office)

Charlaine Ritter

(504) 452-9503 (cell) (504) 568-4227 (office)

If possible, the answering machine in the Department main office (568-4227) will be programmed with an appropriate message or notification.

If students need to be contacted by phone, Andy Pellett will contact the cardiovascular sonography students, and John Zamjahn will contact the respiratory therapy students. If either program director is unavailable, the other program director will contact all students, perhaps with assistance from faculty and staff.

1. LSU Shield App:

https://911.lsuhsc.edu/report/lsushield.aspx

2. uTip (Text University Police)

https://911.lsuhsc.edu/report/utip.aspx

3. Text Alert Sign-up

https://lsuhsc.omnilert.net/subscriber.php?sso=1

4. Campus Police

https://www.lsuhsc.edu/administration/vcgcsa/police/

5. Chancellor's Memo 51: Emergency Closure Policy & Procedures for Weather-Related and Other Events

https://www.lsuhsc.edu/administration/cm/cm-51.pdf

4.0 THE CLINICAL EXPERIENCE

4.1 CLINICAL COURSE DESCRIPTIONS

New faculty receive an orientation from both Human Resource Management and from the SAHP. Ideally, the School orientation session will occur as soon as possible after the date of hire,

but that may depend upon the number of new faculty hires. New faculty should look for an email indicating the date and time of such a session.

I. Echocardiography Clinics I (CPSC 3388)

A. This is the initial clinical experience in echocardiography. Three days per week obtaining echocardiographic views and performing color flow and spectral Doppler exams.

II. Echocardiography Clinics II (CPSC 4185)

A. Continuing clinical experience in two-dimensional and Doppler echocardiography.

III. Vascular Clinics I (CPSC 4195)

A. This is the student's initial clinical experience in vascular technology. Emphasis is on performing extracranial vascular exams.

IV. Echocardiography Clinics III (CPSC 4265)

A. Continuing clinical experience in two-dimensional and Doppler echocardiography, with additional emphasis on interpretation of echocardiograms.

V. Vascular Clinics II (CPSC 4275)

A. Clinical instruction in vascular technology, with emphasis on diagnosis of upper and lower extremity arterial disease.

VI. Echocardiography Clinics IV (CPSC 4360)

A. Two days per week of continuing clinical experience in echocardiography, allowing the student to maintain and improve skills.

VII. Vascular Clinics III (CPSC 4350)

A. Clinical instruction in vascular technology, with emphasis on ultrasonic examination of upper and lower extremity veins, as well as abdominal arteries and veins, intracranial blood vessels, and hemodialysis access fistulas and grafts.

4.2 CLINICAL ROTATIONS

I. General Overview

A. The student clinical experience begins during the third semester (spring). After the first week, students attend clinic Tuesday through Thursday. Each day lasts 8.5 hours at most.

The first semester of clinics only includes echocardiography. Every semester thereafter involves clinical rotations in both echocardiography and vascular technology. Some clinical rotations involve clinical sites that instruct in either echocardiography or vascular technology, and some clinical rotations involve instruction in both. Every semester after the third semester includes 4 days of clinical instruction.

- B. Each clinical rotation typically lasts for the entire semester.
- C. Students are prepared to perform complete echocardiograms during their first clinical rotation, but they are not necessarily expected to do so. The ability to perform a complete echocardiogram will usually develop gradually, particularly in patients with more difficult windows. It should be the goal of each student to be able to perform a complete echocardiogram by the fall semester of the senior year, if not sooner.
- D. The number of vascular clinical hours is less than that for echocardiography. The goal for each student is to be able to perform carotid and vertebral artery Doppler exams, lower and upper arterial Doppler exams, venous exams, and physiologic testing such as ankle/brachial index.

II. Clinical Sites

A. New Orleans Area

- 1. Cardiovascular Institute of the South, Luling
- 2. Cardiovascular Institute of the South, Westbank
- 3. Children's Hospital, New Orleans
- 4. East Jefferson General Hospital
- 5. John L. Ochsner Heart and Vascular Institute
- 6. Ochsner Hospital for Children
- 7. Ochsner Medical Center, Kenner
- 8. Ochsner Medical Center Vascular Lab (main campus)
- 9. Ochsner Medical Center, West Bank
- 10. Touro Infirmary
- 11. Tulane University Hospital and Clinic
- 12. West Jefferson Medical Center

B. Baton Rouge Area

- 1. Baton Rouge General Hospital
- 2. Baton Rouge Cardiology Center
- 3. Cardiovascular Institute of the South, Baton Rouge
- 4. Cardiovascular Institute of the South, Prairieville
- 5. Cardiovascular Institute of the South, Zachary

- 6. CVT Surgical Center Vascular Lab
- 7. Ochsner Health Center O'Neal

C. North Shore of Lake Pontchartrain

- 1. Cardiovascular Clinic of Covington
- 2. Heart Clinic of Hammond
- 3. Lakeview Hospital (Covington)
- 4. North Oaks Cardiology Clinic (Hammond)
- 5. North Oaks Medical Center Heart Health Center (Hammond)
- 6. Ochsner Health Center Covington
- 7. Slidell Memorial Hospital
- 8. St. Tammany Health System

D. Houma/Thibodaux

- 1. Cardiovascular Institute of the South, Houma
- 2. Cardiovascular Institute of the South, Thibodaux
- 3. Terrebonne General Medical Center

E. Lafayette/New Iberia/Opelousas

- 1. Cardiovascular Institute of the South, Lafayette at Lafayette General Medical Center
- 2. Cardiovascular Institute of the South, New Iberia
- 3. Cardiovascular Institute of the South, Opelousas
- 4. Ochsner Health Center for Children, Lafayette
- 5. Ochsner Lafayette General Medical Center

F. Bogalusa

1. Our Lady of the Angels Hospital

G. Mississippi

- 1. Forrest General Hospital, Hattiesburg
- 2. Hattiesburg Clinic
- 3. Memorial Hospital at Gulfport
- 4. Merit Health Wesley

III. Placement of Students at Clinical Sites

A. A clinical rotation schedule is sent to students about a month prior to the start of clinical rotations.

- B. Students will be asked about their location of residence and any potential connections to clinical sites outside of the New Orleans area.
- C. The clinical coordinator creates the clinical rotation schedule. The site of student placement may be affected by the proximity of the clinic site, the educational environment of the clinic site, and more. A student may immediately request a different clinic site, but there is no guarantee that the request can be accommodated.

4.3 EXPECTATIONS AND RESPONSIBILITIES

1. Student Prerequisites for Clinical Rotations

- A. Each student must have achieved a grade of C or better in all didactic courses prior to each clinical course. Each student must have received a grade of P (pass) in each clinical course in order to enroll in subsequent clinical courses. Prior to Echocardiography Clinics I, each student must have completed the check-off list for the complete echocardiographic exam as part of CPSC 3282, Clinical Echocardiography I.
- B. Each student must have certification in basic life support, which is typically achieved as part of the Patient Assessment course in the fall semester of the junior year.
- C. Each student must carry health insurance.
- D. Each student is responsible for acquiring professional liability insurance prior to any fieldwork experience, with minimum limits of 1,000,000 per occurrence/\$3,000,000 aggregate. Possible sites include proliability.com and hpso.com.
- E. Each student must be immunized for influenza, measles, mumps, rubella, chicken pox, hepatitis B, and have proof of a negative tuberculosis test within 12 months.
- F. Each student must have received a background check and drug test. The student is responsible for the cost of each test.
 - All students require background checks prior to going out on their fieldwork/clinical
 rotations. The clinical coordinator is responsible for ensuring all students receive a
 completion and all clear result before going out on clinical rotations and fieldwork.
 Clinical coordinators can work directly with the assistant dean of student affairs for
 any needs completing the clearance results for all students in their class.
 - 2. If the student requires a copy of an existing report, they can obtain one by going to the following link and following the user guide provided by the clinical coordinator: https://consumercare.certiphi.com

- G. The program director will notify students of specific paperwork or other requirements for certain clinical sites prior to the start of a clinical rotation.
- H. Students must have some form of transportation to a clinical site. Students may be expected to drive an hour or more to a clinical site.

II. Departmental Clinic Policies

A. Standards of Dress

- 1. Solid navy scrub top and pants shall be worn. Scrubs should be ordered from the LSUHSC bookstore with 'LSU Health' and the student's program (cardiovascular sonography) embroidered on the front.
- 2. LSUHSC I.D. must be worn.
- 3. Clean tennis shoes shall be permitted.
- 4. Hair and beards must be clean and neatly trimmed.
- 5. The student must maintain a clean, neat, professional appearance at all times. The instructor may send a student home who is not properly attired. This will result in an unexcused absence.

B. Standards of Grooming

- 1. Fingernails should be clean and short within reason. Nail polish is according to hospital standards.
- 2. Jewelry is appropriate to society's expectations. It should be minimal and, in all cases, out of the way if it interferes or distracts.
- 3. Colognes are not recommended. Certain smells can be distressing to patients and will make it difficult to work with them.

C. Standards of Patient Interaction

- 1. Allied health professionals do not solicit, expect or accept material or monetary gifts or favors for the services they provide.
- 2. The student will be expected to abide by the code of ethics as outlined by the Society of Diagnostic Medical Sonography (https://www.sdms.org/about/who-we-are/code-of-ethics). As an individual each student will sift through the various moral and ethical situations and form his or her own sense of professionalism.
- 3. Students must maintain confidentiality at all times. There should be no discussion of patient affairs in public areas such as hallways, elevators, cafeteria, etc. Patient affairs should be discussed in appropriate areas and only as necessary for proper patient care.
- 4. Students should be reassuring, kind, and considerate to patients at all times. Arguing with patients cannot be tolerated. Students should not allow personal problems, prejudices or attitudes to affect the way they treat patients.

- The patient has the right to know what diagnostic test he or she is being given, who ordered it and why he or she is receiving it. Explanations should be in non-technical terms.
- Information should not be released to the patient that relates to his condition, diagnosis, prognosis or therapy. All those questions should be referred to the patient's nurse and/or physician.
- 7. The morals, privacy, and ideas of both patients and co-workers should always be respected. At no time should one violate the privilege of knowledge of their personal lives in any way other than dealing with medical care. Idle chatter and gossip are just not acceptable.

D. Standards of Co-Worker Interaction

- 1. The allied health student is a guest of the hospital, the department, and the administration. As a guest he is expected to always behave in the following manner in order not to jeopardize his learning opportunities.
 - a. There should be conformation to standards of dress and grooming as outlined above. Attendance and punctuality guidelines are found below.
 - b. Students should accept that some sonographers may feel threatened by the presence of students within their departments. This may exhibit itself as jealousy, ambivalence, or ridicule. It should be kept in mind that every person has his worth and knowledge and none of us knows everything.
 - c. Students should comply with department paperwork, procedures, coffee breaks, meal breaks, etc. All of these things have reasons for being done in a certain way. Valid suggestions should be brought to the attention of clinical instructors in <u>private</u>.
 - d. Students should keep in mind that not all sonographers perform procedures the exact same way. Even though students may have knowledge of a way to do something that may appear to be better, the subject should be approached tactfully and in <u>private</u> with the clinical instructor, if at all. Students are encouraged to make suggestions that are appropriate to the improvement of patient care but are not encouraged to criticize in a random or inappropriate manner.
 - e. Hospital and School supplies and equipment should always be conserved and protected.
 - f. Constructive criticism should always be accepted. It is offered as guidance and advice, not as admonishment. Clarification of the rationale or content should be sought if it is not understood.

E. Cell Phones

1. Cell phones should NOT be used in patient care areas. Students should refrain from using cell phones unless absolutely necessary, as it sends a message of inattentiveness.

F. Attendance

- 1. Students must attend all days of a clinical rotation. Each clinic day lasts 8.5 hours with a maximum of one hour to be taken for lunch. There should be no breaks for breakfast or any other reason unless ALL sonographers are going on break and thus no patients will be scanned during that time.
- If an emergency or illness arises and the student is unable to attend clinics he or she MUST contact the clinical coordinator (Brenda Ramirez) and the lead instructor at the assigned affiliate in a timely manner (within one hour of the start of the clinic day). If either party is not alerted in a timely manner it will result in an unexcused absence.
- 3. All student clinical rotation data is maintained on the website, Trajecsys (www.trajecsys.com). Students must log in to Trajecsys via cellphone or computer upon arrival at the assigned clinic site, and indicate the time of clock in. Upon leaving, students must clock out on the same website. If a student forgets to clock in or out, then a time exception must be completed from the Trajecsys website.

4. Unexcused absences

- a. An unexcused absence will result in the following:
 - 1) a written warning;
 - 2) two days of make-up time for the one day missed;
 - 3) a failing grade when occurring a second time.

b. Excused absences

- 1) Excused absences may only be granted by the clinical coordinator.
- 2) Excused absences must be made up on a one-to-one basis.

c. Make-up time

- 1) Make-up days must be arranged with the clinical coordinator and the lead instructor at the assigned clinical affiliate.
- 2) Make-up days may be arranged during final exam week and the first two days of the week after final exams.

3) If missed clinic days cannot all be made up by Tuesday after final exam week, a grade of Incomplete will be assigned for the class and time must be made up during the semester break.

d. Late arrivals

 Students are expected to arrive exactly at or before the clinic report time. If a student is going to be late, the situation should be treated as an emergency (see b under Attendance). If the student cannot make it to clinic within one hour, it will be viewed as an absence, unless otherwise indicated by the Program Director.

2) Late arrivals will result in the following:

a. One late arrival: verbal warning

b. Two late arrivals: written warning

c. Three late arrivals: conference with Department Head

d. Four late arrivals: failure of course

G. Student clinical rotation activities

- a. The student should treat the clinical rotation as though it is a job, doing whatever is necessary to help the lab run smoothly. A student should also strive to achieve as much hands-on practice as possible without being excessively pushy. An opportunity to attain any hands-on practice should NEVER be declined. The clinical site should not treat the students as though they are indispensable, however, substituting them for actual employees.
- b. The student should complete a daily logsheet on Trajecsys each day (see Appendix B). A hard copy of the daily logsheet should be carried in clinic in order to make notations that can be entered into Trajecsys later.
- c. The student should complete on Trajecsys an evaluation of each clinic site at the end of each rotation.

H. Employment of students

a. A student may work in a clinical setting outside of formal education activities. Students must notify the program director upon employment that involves working in a clinical setting and are required to submit work schedules during times of clinical education rotations.

III. Supervisors

- A. Typically, each clinical site will have one person who is the primary point of contact for the student. This may be the director of the department, or it may be a sonographer. However, there may be more than one sonographer who will teach the student. Sonographers or department directors who directly engage students and can document attendance are listed on Trajecsys as supervisors.
- B. A supervisor should document the attendance of a student on the Trajecsys website and complete an evaluation at the end of each clinical rotation. These evaluations are found on the Trajecsys website as well.
- C. The supervisor should challenge the student by asking questions and should provide as much hands-on practice as possible.
- D. If a student is performing in an unsatisfactory manner in any of the learning domains mentioned above, the supervisor should notify the program director as soon as possible. If, in the opinion of a supervisor, the student is in danger of failing a clinical rotation, the supervisor should tell the student as early in the rotation as possible so that behavior modifications can be made.

IV. Clinical Coordinator

- A. Brenda Ramirez is the clinical coordinator for the cardiovascular sonography program.
- B. The clinical coordinator must create a clinical rotation schedule about a month prior to the beginning of each semester and send this to the affected students.
- C. The clinical coordinator is expected to visit clinical sites to observe the educational environment, and to guiz the student at the site.
- D. The clinical coordinator is expected to report clinic and student performance to the program director.
- E. Any complaints or concerns about or from students regarding clinical rotations should be voiced to the clinical coordinator.

V. Program Director

- A. Dr. Andy Pellett is the program director of the cardiovascular sonography program.
- B. It is the responsibility of the program director to obtain and maintain clinical affiliations.
- C. The program director maintains an advisory committee for the adult echocardiography program and schedules and runs a meeting of the committee each year.

D. The program director maintains the overall quality of the cardiovascular sonography program.

4.4 CLINICAL REMEDIATION POLICIES AND PROCEDURES

Deficiencies

- A. When a student shows insufficient motivation or ability to perform necessary clinical procedures, the clinical supervisor should contact the program director immediately. Ideally, this notification will occur early enough in the rotation so that there is time for the student to improve and demonstrate improved motivation/ability.
- B. A student who receives an average evaluation score less than 3 will be given the opportunity to remediate prior to the start of the next semester. If the student refuses to do so, or continues to demonstrate insufficient motivation, he or she may fail the clinical course and would not be able to continue in the program until the clinical course is offered again.

II. Absences

- A. Excused absences must be made up on a one-to-one basis, typically during final exam week.
- B. Unexcused absences must be made up on a two-for-one basis, typically during final exam week. More than one unexcused absence may result in a failing grade.

III. Withdrawal

- A. A student may voluntarily withdraw from a clinic course at any time. Withdrawal may result in a student receiving an "I", "W", or grade of "NP" (not pass), depending on the time and reason for withdrawal.
- B. Students who withdraw from a clinical course without receiving an "I" (incomplete) may not continue in the program until they complete the course when next offered.

4.5 EVALUATION

I. Student

A. An evaluation of the student is completed by the supervisor at the end of each clinical rotation. All evaluations are located on the Trajecsys website and can be viewed by the student once completed. A student who receives an overall evaluation score of less than 3 may be required to remediate prior to the beginning of the next clinical course. After

counseling by the program director and additional time at the same or a different clinical site, the student will again be evaluated.

B. Clinical Site

1. Each student is expected to complete an evaluation of the clinical site after each clinical rotation. The evaluation form is located on the Trajecsys website. Completed evaluations by the student cannot be seen by the clinical supervisor.

4.6 ASSIGNMENT OF GRADES

All clinical courses are graded on a pass-fail basis. Students must attend all days of a clinical rotation and receive an overall average of at least a '3' on the evaluation by the supervisor(s) in order to pass.

4.7 SAFETY POLICIES AND PROCEDURES

I. Student Conduct

A. Students are expected to act in a professional manner at all times per the School of Allied Health Professions Student Conduct policy, which can be found at the following web address: http://alliedhealth.lsuhsc.edu/admin/studentconduct.aspx.

B. Unsatisfactory clinical behavior

- When unsatisfactory behavior in the clinical setting is identified, the clinical affiliate directors and supervisors, Program faculty, and students will adhere to the following procedures:
 - a. The student will be counseled by the clinical supervisor regarding the behavior in question. The student will be advised that the program director will be made aware of the behavior in question. The program director will discuss the behavior with the student and with the clinical supervisor. The program director will decide whether the behavior warrants a potential charge of professional misconduct. If so, the program director will report the incident to the Office of the Associate Dean for Academic Affairs within 5 days of the occurrence of the behavior in question.

II. Student "At Risk" Incidents

Excerpts below are from CM-25 LSUHSC Policy on AIDS (HIV) and Hepatitis Virus (HBV) (http://www.lsuhsc.edu/administration/cm/cm-25.pdf)

- A. The student must immediately report the incident to his/her clinical supervisor. The supervisor is responsible for reporting the incident and following procedures to ensure that proper testing and health care are provided. The student should be referred to the institutional infection control office (usually, their employee health service).
- B. The student is entitled to seek his/her health care of choice. Health care will be made available if requested by the student at either the LSUHSC-NO Student Health Clinic, or if contracted to another facility or location, from that satellite location following their policy for "at risk" incidents. Injured students may also seek treatment from their personal health care provider. In all cases, the First Report of Injury and Supervisor's Accident Investigation Report must be filed with the Louisiana Office of Risk Management for eligibility under Student Health Needle Stick Insurance.

 The health care provider treating the student must be notified that the student has had an "at risk" incident for HIV/HBV/HCV and that proper testing must be performed. Based on the initial testing, additional testing or treatment may be warranted and must be recommended by the examining health care provider at time of treatment.
- C. The student must report the incident as soon as possible to the program director, who must notify University Police.

4.8 REPORTING CLINICAL AFFILIATE SITE STUDENT HARASSMENT

Preceptors/supervisors and/or directors/managers of cardiology who have knowledge of harassing behavior toward students are responsible for promptly reporting this information to the program director of cardiovascular sonography at LSUHSC-NO.

I. Purpose

A. Students have the right to an environment free from harassment during clinical training at our program's clinical affiliates. Harassment during clinical training can come from anyone — preceptors, supervisors, staff employees, volunteers, vendors, patients, etc. This policy is intended to communicate that inappropriate behavior that demonstrates harassment in any form is unacceptable and is not to be tolerated by students.

II. Definitions

- A. Harassment is offensive conduct, which may include but is not limited to:
 - Offensive physical actions, written or spoken, and graphic communication (e.g., obscene hand or finger gestures, sexually explicit drawings, or intentionally exposing oneself).
 - Any type of physical contact when the action is unwelcomed by the recipient (e.g., brushing up against someone in an offensive manner).

- Expectations, requests, demands or pressure for sexual favors (e.g., submission to or rejection of such conduct is made a term or condition of clinical supervision/training, approval of student procedural competencies, favorable student evaluations, or future employment).
- Conduct that has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive working environment.

III. Reporting Procedures

- A. The program director, who has knowledge of student harassment, is responsible for promptly reporting this information to the SAHP Title IX coordinator.
- B. All complaints must remain as confidential as possible. No form of retaliation may occur for a student pursuing a legitimate complaint of harassment.

SAHP Title IX Coordinator

Leigh Smith-Vaniz (504) 568-2211 <u>lsmi30@lsuhsc.edu</u> https://www.lsuhsc.edu/titleix/

4.9 TIPS FOR SUCCESS

I. Attendance

- A. Show up on time or early every day. Treat your clinical rotation like a job, as every rotation may be like a job interview for you, for you never know when an opening may occur.
- B. Never ask to leave early, as you are sending a message that you would rather be elsewhere. If the supervisor says you can leave because there are no more educational activities for that day, then you may leave. If you have nothing to do, bring your schoolwork and study.
- C. If you are ever not going to be in clinic between 8 and 4:30, make sure that the program director knows about it.

II. Show Interest

A. You absolutely must show 100% interest at all times. At the beginning of the rotation, establish with the sonographer(s) that you want to scan at every opportunity. That way you don't have to keep asking. Establish whether or not a sonographer is going to tell you when he or she is starting a study, or whether you should just go into the study

room. Make sure that you tell the sonographers that you don't want to appear pushy, but that you absolutely need hands-on practice. If you give a sonographer half a chance to think that you don't want to scan, then they may never lift a finger again to get you some practice.

B. Ask questions. Sonographers may hit the buttons and perform the protocol quickly and you might not recognize what they are doing. Do not be afraid to ask about anything. This sends the message that you want to learn.

III. Watch Every Case Carefully

A. Even when you are not scanning, but just observing, you must view each patient as an opportunity to learn. Always be thinking about how the sonographer obtained a certain view, and about what the preliminary interpretation of the echocardiogram might be. Know all of your normal values, and, watch carefully to see what values are obtained by the sonographer or by you. After the patient is gone, you can discuss potentially abnormal values.

Remember two things:

The more effort you put into the clinical rotation, the more you will get out of it.

Treat your patient and his or her diagnostic study as though it is your close relative on the table.

4.10 APPENDIX A: TRAJECSYS WEBSITE

After logging into Trajecsys (<u>www.trajecsys.com</u>) each student will see the following page. From this page, students may log in and out, complete time exceptions, daily logsheets, and evaluations of clinic sites. Pathology reports from each student (via the logsheet) may also be seen here.

Trajecsys	Louisiana State University Health Sciences Center — Cardiovascular Sonography						
★ Home Documents Time Exception Daily Logsheet	Clock IN 11:09 AM 1109 Site 1109 Test Site						
Lini Reports ☑ Send Email	Hello! Welcome to the Trajecsys Reporting System for online management of our clinical rotations. You will use this						
Comments	system to log in and out of the clinic site each day using either a computer or your smartphone. You will also need to complete a daily log sheet so that we and you can keep records of the pathologies that you have seen. In addition, you will need to complete an evaluation of your clinic site at the end of each rotation. Your supervisors will use this system to evaluate you at the end of your rotation.						
o Logout							
☑ Use Legacy App							

APPENDIX B: DAILY LOGSHEET

The echocardiography daily logsheet appears below. A logsheet should be completed each day and entered into Trajecsys so that there is a record of hands-on experience as well as the types of pathologies that each student has seen. The student should print out the logsheet and bring a copy with him/her to clinic each day.

Louisiana State University Health Sciences Center Department of Cardiopulmonary Science Echocardiography Clinics Daily Log

Name:	Clinic:		Date:	
Procedure	Pathology	Participation	Supervisor	Time Spent
		·	·	
TTE	CAD, AS, AR, MS, MR, PrV, DCM,	Observed (O)		
TTE Ped	HOCM, RCM, Tumor, Thrombus, Veg, PE, Tamp, Cons Per, Sys Htn,	Partial Assisted (PA)		
TEE	Veg, PE, Tamp, Cons Per, Sys Htn.	Partial Unassisted (PU)		
Ex Echo DSE	CHD	Complete Assisted (CA) Complete Unassisted (CU)		
Fetal Echo				

Procedure: Indicate the type of diagnostic exam.

<u>Pathology</u>: Describe the primary pathologies, if any. Do not indicate physiologic valvular regurgitation.

Participation: Indicate the level of participation in the study.

Observed: No hands-on practice

Partial Assisted: Some hands-on practice, with the preceptor aiding in some fashion Partial Unassisted: Some hands-on practice with no direct assistance from the preceptor Complete Assisted: Full echocardiogram, with the preceptor aiding in some fashion Complete Unassisted: Full echocardiogram with no direct assistance from the preceptor

<u>Supervisor</u>: Write the name of the preceptor who was teaching you for the study. <u>Time spent</u>: Indicate the approximate amount of time spent with the preceptor.

APPENDIX C: CLINICAL ASSIGNMENTS TO PERSONS WITH INFECTIOUS PROCESSES

Purpose: to provide students with important information regarding the current state of the clinical learning environment and guidance regarding on-site student and learner educational activities.

Students are excluded from the clinical learning environment of all patient rooms and procedure areas of COVID-19 positive patients, presumed positive patients, or patients under investigation.

The student is to expect various safeguards implemented at clinical sites to ensure the highest quality of care and their personal safety. Such safeguards are:

- All admitted patients, regardless of symptoms or history, are tested for COVID-19.
- Admitted COVID-19 positive patients are, where possible, cohorted by med/surgunitor ICU
- COVID-19 testing is performed before any inpatient or outpatient procedure or surgery.
- With just emergent, urgent and time-sensitive cases going to the operating room, the number of healthcare workers permitted to scrub in will be restricted to only the minimum needed for each case.
- Visitors are restricted to only essential and permitted visitors.
- Students will, upon entering each hospital, be screened for symptoms and their temperature checked at eachentry.
- If student's symptom screen is positive or the temporal thermometer reads
 >100.0° F, entry is denied.
- Students are provided with a surgical mask at the point of entry.
- Students are always expected to wear a surgical mask during the day with exception of when eating / drinking.
- A student who is inadvertently exposed at the hospital or who becomes symptomatic
 while onsite will be offered COVID-19 testing and will be expected to follow the
 clinical site's Employee Health guidance regarding monitoring, self-quarantine, and/or
 work restrictions
- Additional Environmental Service staff, cleaning protocols, and ultraviolet light disinfection are deployed.

 $Safeguards\ may\ vary\ from\ site\ to\ site\ based\ on\ COVID-19\ patient\ census\ and\ federal,\ state,\ parish\ mandates,\ and\ stay-at-homeorders.$