

West Virginia University Hospitals

Imaging Science Education Programs
Diagnostic Medical Sonography

Clinic Handbook



2026-2027
Academic year

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PREFACE

WVU Hospitals offers an 18-month, 40-hour-per-week education program in Diagnostic Medical Sonography. It is designed to provide students with the basic knowledge and principles necessary to perform sonographic procedures in the clinical setting. The program is hospital-based and is accredited by The Commission on Accreditation of Allied Health Education Programs (CAAHEP) in cooperation with the Joint Review Committee on Education in Diagnostic Medical Sonography (JRC-DMS). The essentials and guidelines for accreditation are available to students to read and may be found in the office of the Program Director.

WVU Hospitals awards a certificate to each student who satisfactorily completes all courses of study and fulfills all clinical requirements of the program. Upon graduation, students are eligible to sit for several registry exams offered by the American Registry of Diagnostic Medical Sonographers. In addition, students are also eligible to sit for the certification exam in Sonography held by the American Registry of Radiologic Technologists. One stipulation beginning in January of 2015 is that for a student to be eligible to take the ARRT Sonography Exam, the student must hold an academic degree of an associate degree or higher will be mandatory.

Students enrolled in the program are regarded as mature, responsible individuals seeking education in the field of ultrasound. They are not considered employees of the hospital or students of West Virginia University.

The following information has been prepared to inform the students of both policies and procedures of the ultrasound facilities as well as the didactic and clinical requirements expected of them during this educational endeavor.

Medical Director: Dr. Cara Lombard Ultrasound Education Coordinator: Kathleen Riley

Mission Statement

The Diagnostic Medical Sonography education program at West Virginia University Hospitals aims to train entry-level diagnostic medical sonographers through a comprehensive curriculum that includes both theoretical and clinical education. Additionally, this program focuses on equipping students with the essential skills needed for professional development and career progression in the imaging sciences.

With an emphasis on ongoing technological advancements and a strong commitment to medical education, West Virginia University Hospitals provides a solid foundation for students to enhance and refine their imaging skills in the field of diagnostic medical sonography.


Goals

The goal of the Diagnostic Medical Sonography Program is to prepare competent entry-level general sonographers in the **cognitive (knowledge)**, **psychomotor (skills)**, and **affective (behavior)** learning domains in the abdomen-extended and obstetrics/gynecology sonography concentrations.

Graduates of this program will develop skills to:

1. Be clinically competent to perform appropriate procedures and record anatomic, pathologic, and/or physiologic data;
2. Apply critical thinking and problem-solving skills to exercise discretion and judgment in performance of diagnostic sonography;
3. Demonstrate appropriate communication skills; and
4. Demonstrate professionalism and growth in the profession.

The program will continually monitor program effectiveness through assessment and evaluation to ensure that the needs of the community are met.

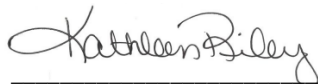


Education Coordinator

Date

Policy Change

The administration of the West Virginia University Hospitals and the Faculty of the West Virginia University Hospital's Program of Imaging Science reserves the right to change any of the stated policies as necessary and/or when advisable for improvement of or to meet new standards within the program.



Education Coordinator

Date

How to use this book:

The purpose of this book is to provide a central location of clinic information for you to reference. If you review the table to contents you will find that there are sections for each semester, examples of evaluations, and a forms that need to be turned in.

Items to Complete This Week

1. **Acknowledgment Form (Page 8)**
You must sign the acknowledgment form on page 7 and submit it to Katie or Caitlin. This form verifies that you have received this handbook and understand its purpose.
2. **Scan Lab Authorization Form (Page 2)**
The Scan Lab is used to teach basic scanning skills, exam protocols, and image labeling. You must complete and submit the Scan Lab authorization form located on page 14.

Things to use or turn in throughout the semester:

1. **Orientation Checklists**
Orientation checklists are provided for each clinical rotation. If you forget to turn in a checklist, it will remain in this handbook for reference.
2. **Competency List (Page 53)**
A complete list of required clinical competencies is included on page 53. Students are encouraged to keep track of their progress using this list.
3. **Clinical Syllabi**
Each semester's clinical syllabus is included in this handbook and outlines expectations, grading, and requirements for that semester.
4. **Clinical Schedules**
 - a. A copy of the Semester 1 clinical schedule is located on page 22.
 - b. Example clinical schedules for Semesters 2 and 3 are provided on pages 23 and 24

Due
July 6

Diagnostic Medical Sonography Program

Clinical Handbook Acknowledgement

I acknowledge that I have received, read, and understand the *Diagnostic Medical Sonography (DMS) Clinical Handbook*. I recognize that the handbook contains essential information regarding clinical expectations, professional conduct, patient care standards, safety procedures, competencies, evaluation processes, and policies governing clinical participation and performance.

By signing below, I agree to follow all guidelines, procedures, and expectations outlined in the Clinical Handbook. I understand that it is my responsibility to ask clinical faculty, instructors, or program administration for clarification if any section of the handbook is unclear. I also understand that clinical policies may be revised as necessary, and I am responsible for reviewing and adhering to any updates communicated to me.

Student Name: _____

Student Signature: _____

Date: _____

*This signed acknowledgement must be signed and turned into the Program Director by July 6, 2026 to receive full credit as part of the Intro to Sonography Class.

Clinical Education Standards, Supervision, Clinic documentation, and Make-up Policy

The Diagnostic Medical Sonography Education Program ensures that all clinical education experiences are conducted in accordance with the **CAAHEP Standards and Guidelines** and the expectations of the **Joint Review Committee on Education in Diagnostic Medical Sonography (JRC-DMS)** for the preparation of competent, entry-level diagnostic medical sonographers.

Clinical education is **competency-based** and requires students to demonstrate the integration of **cognitive knowledge, psychomotor skills, and professional (affective) behaviors** necessary for safe and effective patient care. Students must comply with all clinical standards, supervision requirements, and evaluation procedures while participating in clinical education.

Clinic Standards:

Students are expected to:

- Maintain professional and ethical behavior consistent with the sonography profession
- Protect patient privacy and confidentiality at all times
- Follow established patient safety, infection control, and ergonomic practices
- Adhere to clinical supervision requirements and scope of practice limitations
- Accurately document all clinical activity and evaluations in Trajecsys® Electronic Clinical Workbook.

Direct/Indirect Supervision:

Direct: The student will perform an imaging study with a clinical instructor; both student and instructor will scan the patient. The clinical instructor will be present in the exam room for the entire length of the exam. The clinical instructor will be present to assist the student at all times. The sonographer is ultimately responsible for the exam.

Indirect: The student will perform an imaging study with a clinical instructor; the clinical instructor may or may not scan the patient. The clinical instructor may not be present in the exam room for the entire length of the study; however, the clinical instructor will be immediately available to assist the student. The clinical instructor will review the study with the student. The clinical instructor is ultimately responsible for the exam.

Immediately available is interpreted as the presence of a clinical instructor adjacent to the room or location where the sonogram is being performed

Exams Requiring Direct Supervision:

In accordance with CAAHEP and JRC-DMS Standards, certain examinations present increased risk to patient safety and therefore **require direct supervision at all times**, regardless of the student's documented level of clinical competence. Under no circumstances may the following examinations be performed under indirect supervision. Direct supervision guidelines will be strictly followed and require the supervising credentialed sonographer to be physically present in the examination room for the entire procedure:

- Mobile examinations
- Operating Room (OR) examinations
- Special procedures
- Invasive procedures

- **Transvaginal** ultrasound examinations
- **Scrotal** ultrasound examinations

Clinical Instructor:

A credentialed sonographer who provides appropriate clinical supervision and completes student clinical evaluations. Qualified Clinical Instructors may conduct competency and proficiency exams.

Clinical Instructors guide students through department operations, scanning techniques, equipment use, normal anatomy, and pathology. Each student is assigned to a Clinical Instructor for one to two weeks.

Clinical Instructor responsibilities include:

1. Instructing and assisting students with required sonographic procedures
2. Supporting the mission and goals of the education program
3. Providing feedback on clinical performance through evaluations and discussion
4. Participating in Clinical Instructor meetings to enhance the program
5. Acting in a professional manner that reflects the profession and institution

****Instructor Note:**** *The term "Instructor" refers to any individual designated as a clinical instructor for SONT 300, 301, and 302 Applied Sonography I, II, and III.*

****Responsibilities:**** *A clinical instructor must be present and available to students while assigned to a clinical setting. They are responsible for providing appropriate clinical supervision and conducting evaluations of student performance.*

****Qualifications:**** *Clinical instructors must possess the necessary credentials relevant to the specific concentration in which they are assessing student competency.*

Clinic Evaluation and Grading:

A student's clinical grade is determined by successful completion of multiple required components, including but not limited to: daily log sheets, sonographer evaluations, weekly clinical evaluations, clinical scanning lab competency, clinical competency examination, documented scanning participation, and the Clinical Coordinator evaluation.

Required examinations and corresponding grading sessions are identified within the clinical course syllabus. Failure to complete the required number of scanning and cognitive competencies or designated scanning lab assessments during the assigned grading session will result in a **grade of zero** for the incomplete examination(s). Any examination or competency not completed as scheduled will remain a program requirement and must be completed in the subsequent grading session.

All required competency examinations and clinical proficiencies must be successfully completed by the end of the third semester to meet graduation requirements. To achieve clinical competency, students must complete a total of 27 required competency exams and two elective exams.

Elective exams are defined as approved clinical procedures selected from the program's designated elective list, as outlined the clinical syllabus for each semester and the clinical handbook. These electives allow students to demonstrate competency in additional procedures beyond the required core exams.

Cognitive competency is assessed as an integrated component of each clinical competency evaluation and does not require a separate stand-alone competency.

Competency Evaluation: Objectives and Methodology

Student clinical performance in **SONT 300, 301, and 302 (Applied Sonography I, II, and III)** is evaluated through a competency-based assessment process. Clinical competencies must be performed on actual

patients, while proficiencies may be completed on patients or in the scanning laboratory. Performance is evaluated based on the student's ability to meet criteria independently, with assistance, or not meet criteria. All evaluations are documented using the **Trajecsys® Electronic Clinical Workbook**.

Required Clinical Competencies

Students must successfully complete all required clinical competency and proficiency examinations to demonstrate entry-level competence, in accordance with CAAHEP and JRC-DMS Standards. A complete list of required clinical competencies, proficiency requirements, and associated assessment criteria is published in the **Clinical Handbook**. An example of the competency grading sheet is provided in the **course syllabus**. These materials are made available to all students.

Scan Time Limitation:

To ensure patient safety, workflow efficiency, and educational appropriateness, West Virginia University Hospitals is committed to supporting student education while maintaining the highest standards of professional and optimal patient care. In order to prevent delays in patient care, students performing clinical examinations for graded evaluations are subject to the following limitations:

- The Student's time begins from the start of the exam in RIS until their last image.
- Exams with a 45-minute time slot:
Students are allotted 40 minutes to complete the exam; however, if by 30 minutes, more than half of the exam isn't complete, the sonographer will take over the exam so there will not be a delay in patient care.
- Exams with a 30-minute time slot:
Students are allotted 25 minutes to complete the exam; however, if by 20 minutes, more than half of the exam isn't complete, the sonographer will take over the exam so there will not be a delay in patient care.

Clinical Education Progression and Retention Policy:

Students enrolled in the Diagnostic Medical Sonography Education Program are required to maintain a **minimum overall Clinical Education (Applied Sonography) grade of 86% (B letter grade)** at the conclusion of each academic semester. This requirement supports the program's obligation to ensure students demonstrate competency consistent with CAAHEP Standards and JRC-DMS expectations for entry-level diagnostic medical sonographers.

Formal counseling will occur at mid-semester and at the end of each semester to review the student's clinical progress, competency development, professional behavior, and readiness for continued progression in the program. Informal counseling and feedback may occur at any time throughout the semester as part of the ongoing clinical evaluation process. While evaluations and feedback are provided regularly, it remains the responsibility of the student to remain informed of their clinical progress and current clinical grade.

Failure to achieve and maintain the required minimum clinical grade of 86% at the end of a semester indicates inadequate demonstration of required clinical competencies. Students who do not meet this requirement will be dismissed from the program due to failure to meet clinical education standards necessary for safe and effective practice.

All decisions regarding clinical dismissal are based on documented evaluations and competency outcomes and are considered final. Students retain the right to due process, as outlined in the Program's Due Process Policy contained in the Student Handbook, in accordance with institutional and accreditation standards.

Clinical Documentation and Tracking System (Trajecsys®)

The West Virginia University Hospitals, School of Diagnostic Medical Sonography Program utilizes the **Trajecsys Report System®** as the official electronic clinical documentation system. Trajecsys® is a web-based platform which serves as the primary method to maintain student competency records, proficiency forms, evaluation forms, and clinical time and attendance reports.

Students are required to:

- Accurately document daily clinical activity, including procedures observed or performed, level of participation, and supervising personnel
- Record clinical competencies, proficiencies, and scan lab assessments as required
- Ensure all entries are complete, truthful, and submitted within established program timelines
- Review and acknowledge clinical evaluations posted in Trajecsys®
- Review and use didactic course materials in the documents section
- Review class, clinic, weekly, and monthly schedules

Clinical Instructors and **faculty** utilize Trajecsys® to:

- Complete student evaluations and competency assessments
- Verify clinical participation and progression
- Support clinic grading, clinic progression, and clinic completion decisions

Information documented in Trajecsys® constitutes the **official clinical education record** and is used to assess student performance, determine progression or dismissal, support eligibility for program completion, and demonstrate compliance with **CAAHEP and JRC-DMS accreditation standards**.

Clinic Make-up/Missed Clinical Time

Students are expected to complete all scheduled clinical hours as outlined in the Diagnostic Medical Sonography Education Program curriculum. Any absences exceeding the nine allotted clinical days must be made up by the student to successfully complete the clinical education component of the program. Completion of all required clinical hours is necessary to ensure attainment of program competencies and compliance with accreditation standards and is required for the Education Coordinator/Program Director to recommend the student to sit for the Diagnostic Medical Sonography registry examinations.

1. **Excused Absences**

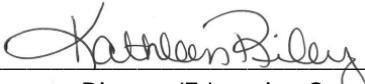
- Excused absences may include illness, family emergencies, or circumstances approved by the Program Coordinator.
- The student must notify the Education Program Coordinator **and** the clinical site according to program attendance procedures.
- Documentation is required.

2. **Unexcused Absences**

- Failure to follow notification procedures or absences without approval will be considered unexcused and may result in disciplinary action per program policy.
- All unexcused absences must be made up in accordance with program policy and may result in extension of the clinical education period beyond the scheduled program completion date.

Make-Up Clinical Time

- Excessive absenteeism is addressed in the Attendance Policy 2.007
- Make-up time must be scheduled in advance and approved by the Education Program Coordinator and clinical site. The make-up time may not interfere with didactic coursework.
- If the make-up time is not completed within the semester then the student's clinical education will be extended beyond graduation to account for the number of days or hours in excess of the allotted nine personal leave days not to exceed five days.



Program Director/Education Coordinator

Date

Clinical Affiliate Assignment and Utilization Policy

The Diagnostic Medical Sonography (DMS) Education Program ensures that all clinical affiliate sites provide students with adequate clinical experiences necessary to achieve competency in accordance with CAAHEP Standards and Guidelines and JRC-DMS expectations.

Clinical affiliates must provide each student with access to a sufficient number and variety of diagnostic medical sonography examinations to support the development of competency in both normal and abnormal findings within the program's designated concentrations, abdomen and obstetrics/gynecology. The program is responsible for assigning students to clinical sites that offer a broad range of patient care environments and learning opportunities to support comprehensive clinical education.

Clinical Case Volume and Variety

Clinical affiliates are chosen based on:

- Their ability to provide access to an adequate volume and variety of sonographic examinations
- Ensure exposure to both normal and pathological conditions
- Support student progression from observation to supervised performance based on competency level
- Facilitate completion of all required clinical competencies as outlined in the program curriculum

The program will monitor clinical case volume and variety through:

- Trajecsys® clinical documentation
- Daily logs and participation levels
- Competency tracking
- Clinical instructor and student feedback

Variety of Clinical Settings

Students will be assigned to a variety of clinical environments to ensure exposure to diverse patient populations and clinical conditions. These settings include:

- Inpatient, emergency room, operating room, trauma, and intensive care settings:
 - Ruby Memorial General Ultrasound Clinic
 - Golisano Children's Hospital
 - Ruby Memorial Vascular Lab
- Outpatient general ultrasound clinics
 - Physician's Office Center
 - Cheat Lake Physicians
 - University Town Center
 - Fairmont Gateway Center
- Outpatient OBGYN ultrasound clinics
 - Cheat Lake Physicians
 - University Town Center
 - Maternal Fetal Medicine at The Golisano Children's Hospital
- Specialty clinics/rotations
 - Betty Puskar Breast Care Center
 - Ruby Memorial Vascular Lab
 - Fetal Echocardiography at the Golisano Children's Hospital
 - Sitting with a body radiologist and pediatric radiologist

Clinical rotations are structured to ensure that each student experiences both inpatient and outpatient workflows and a range of clinical scenarios.

Student Assignment and Clinical Ratios

Student placement at clinical affiliates will be determined by the Clinical Coordinator and/or the Education Coordinator based on:

- Student knowledge, skill level, and competency level
- Clinical site capacity and available resources
- Volume and variety of examinations
- Availability of qualified clinical instructors
- Ability to maintain appropriate supervision

The program will maintain a student-to-clinical staff ratio that ensures:

- Adequate supervision at all times
- Equal access to scanning opportunities
- Fair and equitable clinical experiences
- Alignment of clinical assignments with the student's current level of training and competency development
- Achievement of required competencies and clinical outcomes

Students will not be assigned to a clinical site if sufficient supervision, case volume, or educational quality cannot be maintained.

Clinical Affiliate Evaluation

The program will routinely evaluate all clinical affiliate sites to ensure compliance with program expectations and accreditation standards. Evaluation methods include:

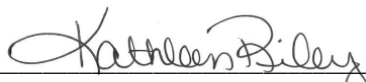
- Review of student clinical logs and competencies
- Student evaluations of clinical sites and instructors
- Clinical instructor feedback
- Program site visits and communication with department leadership
- Assessment of student progression and outcomes by clinical site

The clinical coordinator and/or education coordinator may change a student's clinic site if:

- The site does not meet program standards for case volume, variety, supervision, or educational quality.

The program will:

- Ensure all clinical affiliates meet accreditation standards
- Monitor clinical education quality and compliance
- Assign students to appropriate clinical sites
- Track student clinical experiences and competency progression
- Evaluate clinical sites and instructor effectiveness
- Ensure equitable distribution of clinical opportunities



Program Director/Education Coordinator

Staff Clinical Instructor Orientation

This policy serves to identify the procedure for orientation of new staff sonographers relative to their required duties as Staff Clinical Instructors for the Imaging Science Education Programs/Ultrasound.

Individuals hired for the Position of Diagnostic Medical Sonographers at West Virginia University Hospitals will participate in the Staff Clinical Instructor orientation process after their initial employment and before being assigned a student. The orientation process will be conducted in the following manner.

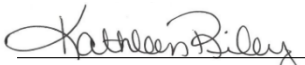
Procedure:

- A. The Radiology/Department Manager will explain to the new employee his/her duties as a Staff Clinical Instructor for the Imaging Science Education Programs/Ultrasound, as described in the employee's job description. The Radiology/Department Manager will point out that the staff sonographer job description requires that the sonographer perform in his/her capacity as a Staff Clinical Instructor.
- B. The Radiology/Department Manager will notify the Education Coordinator when a new sonographer has been hired. The coordinator will schedule a time with which to meet with the new sonographer to describe the clinical education process. The agenda for this meeting shall include but will not be limited to the following:
- C. The Clinical Coordinator will document Staff Clinical Instructors orientation by having the Sonographer sign the Clinical Instructor Orientation on Trajecsys. The Clinical Coordinator will also provide the Sonographer with links to the program website and electronic Trajecsys System to review the student handbook, policies and procedures.
- D. Should the employee have specific questions relative to their duties as a Staff Clinical Instructor or desire further information concerning the operations of the Educational Program, they should direct these questions to the Radiology/Department Manager and/or the Education Coordinator who will respond accordingly.

The Clinical Coordinator will:

- a. Describe to the new sonographer the process by which the student's clinical grades are formulated.
- b. Explain the proper procedure in which to complete the required evaluations (Weekly Evaluations, Competency/Proficiency Exams) on the electronic Trajecsys System.
- c. Describe the Program's Policy relative to the performance of Competency and Proficiency Examinations by the staff sonographers.
- d. Explain the "Guidelines for Supervision of Student Sonographers" policy, identifying the meaning of "direct" and "indirect" supervision.

- e. Identify the function of the student's Competency Worksheet and its practical application.
- f. Explain that at the end of each rotation, the student is required to complete an evaluation on the Staff Clinical Instructor, which rates the quality of clinical education that the student received during the clinical rotations. These evaluations will be given to the Radiology/Department Manager prior to the Staff Clinical Instructor's annual performance appraisal.

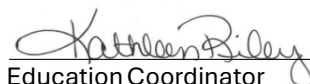

Education Coordinator

Staff Clinical Instructor Evaluation

The Staff Clinical Instructor Evaluation provides program officials with a mechanism for the evaluation of quality of the clinical education provided by Staff Clinical Instructors. These evaluations are completed by the diagnostic medical sonography students at the end of each rotation of each semester. The objective of this evaluation process is to identify the strengths and weaknesses of each clinical instructor and to identify potential student / technologist issues.

The evaluation process will be conducted as follows:

- A. During the student orientation week, the components of the Staff Clinical Instructor Evaluation form will be explained to the student. After the completion of each semester, each student will be required to complete an evaluation of the Diagnostic Medical Sonographers they have rotated with that semester. The student will be instructed to base their evaluation rating on the technologist instruction performance only. The importance of remaining objective in their evaluation criteria will be stressed.
- B. The student will rate the instructor from a scale of 1 to 5 in each category on the evaluation form. **(1 = Poor, 2 = Fair, 3 = Satisfactory, 4 = Good, 5 = Excellent)**
- C. Each student will complete an instructor evaluation at the end of the student's rotation. They should complete an evaluation on the sonographer that they worked with the most.
- D. The average score produced by each student will be averaged together to produce an overall rating.
- E. The Education Coordinator will run reports in Trajecsyst of the clinical instructor evaluations at the end of each semester. The reports will be retained in a file marked Trajecsyst reports. At the end of each semester, the Education Coordinator will distribute evaluation results to the Ultrasound/Department manager for use in the annual performance appraisal of each staff technologist relative to their duties as staff clinical instructors.
- F. In the event that a technologist receives an evaluation that falls into the "needs improvement or unsatisfactory" category, the Education Coordinator will discuss the evaluation with the student evaluator. If the Clinical Supervisor deems that the evaluation is accurate and the performance of the technologist is detrimental to the clinical education process, the evaluation will be discussed with the Radiology manager and Ultrasound/Department manager. If deemed necessary, the technologist will be counseled regarding their clinical instruction performance.
- G. In order to maintain the integrity of the evaluation and to allow students to complete the evaluation without fear of retribution, the student's identification will be kept confidential. At no time will the staff clinical instructor or the department manager be provided with information regarding the identity of the student evaluator. Staff clinical instructors who wish to challenge a student's evaluation may do so by submitting a formal complaint in writing to the Program Director. The Program Director and the Radiology/Department Manager will investigate the complaint and provide feedback to the staff clinical instructor relative to the validity of the student's evaluation.


Education Coordinator

SECTION 1

The instructor provides students with opportunities to practice technical skills	<input type="radio"/> Poor	<input type="radio"/> Fair	<input type="radio"/> Satisfactory	<input type="radio"/> Good	<input checked="" type="radio"/> Excellent
The instructor emphasizes problem solving approaches rather than solutions per Se.	<input type="radio"/> Poor	<input type="radio"/> Fair	<input type="radio"/> Satisfactory	<input type="radio"/> Good	<input checked="" type="radio"/> Excellent
The instructor corrects the student's errors in front of patients in an appropriate and Professional manner.	<input type="radio"/> Poor	<input type="radio"/> Fair	<input type="radio"/> Satisfactory	<input type="radio"/> Good	<input checked="" type="radio"/> Excellent
The instructor provides appropriate supervision (direct/indirect) in regard to the Student's level of competency.	<input type="radio"/> Poor	<input type="radio"/> Fair	<input type="radio"/> Satisfactory	<input type="radio"/> Good	<input checked="" type="radio"/> Excellent
The instructor communicates role expectations to the students.	<input type="radio"/> Poor	<input type="radio"/> Fair	<input type="radio"/> Satisfactory	<input type="radio"/> Good	<input checked="" type="radio"/> Excellent
The instructor encourages students to actively participate in procedures.	<input type="radio"/> Poor	<input type="radio"/> Fair	<input type="radio"/> Satisfactory	<input type="radio"/> Good	<input checked="" type="radio"/> Excellent
The instructor is usually accessible to students.	<input type="radio"/> Poor	<input type="radio"/> Fair	<input type="radio"/> Satisfactory	<input type="radio"/> Good	<input checked="" type="radio"/> Excellent
The instructor takes time for and encourages discussion and questions.	<input type="radio"/> Poor	<input type="radio"/> Fair	<input type="radio"/> Satisfactory	<input type="radio"/> Good	<input checked="" type="radio"/> Excellent
The instructor has the ability to answer questions clearly.	<input type="radio"/> Poor	<input type="radio"/> Fair	<input type="radio"/> Satisfactory	<input type="radio"/> Good	<input checked="" type="radio"/> Excellent
The instructor discusses practical application of knowledge and skills.	<input type="radio"/> Poor	<input type="radio"/> Fair	<input type="radio"/> Satisfactory	<input type="radio"/> Good	<input checked="" type="radio"/> Excellent
The instructor gives appropriate answers to specific questions.	<input type="radio"/> Poor	<input type="radio"/> Fair	<input type="radio"/> Satisfactory	<input type="radio"/> Good	<input checked="" type="radio"/> Excellent
The instructor discusses points of view other than their own.	<input type="radio"/> Poor	<input type="radio"/> Fair	<input type="radio"/> Satisfactory	<input type="radio"/> Good	<input checked="" type="radio"/> Excellent
The instructor gears instruction to the student's level of knowledge and competency	<input type="radio"/> Poor	<input type="radio"/> Fair	<input type="radio"/> Satisfactory	<input type="radio"/> Good	<input checked="" type="radio"/> Excellent
The instructor interacts with students in a friendly, outgoing manner	<input type="radio"/> Poor	<input type="radio"/> Fair	<input type="radio"/> Satisfactory	<input type="radio"/> Good	<input checked="" type="radio"/> Excellent
The instructor encourages a climate of mutual respect	<input type="radio"/> Poor	<input type="radio"/> Fair	<input type="radio"/> Satisfactory	<input type="radio"/> Good	<input checked="" type="radio"/> Excellent
The instructor attentively listens to students.	<input type="radio"/> Poor	<input type="radio"/> Fair	<input type="radio"/> Satisfactory	<input type="radio"/> Good	<input checked="" type="radio"/> Excellent
The instructor demonstrates sensitivity to student needs.	<input type="radio"/> Poor	<input type="radio"/> Fair	<input type="radio"/> Satisfactory	<input type="radio"/> Good	<input checked="" type="radio"/> Excellent
The instructor recognizes and gives positive feedback for extra effort, good Observations, and/or performance.	<input type="radio"/> Poor	<input type="radio"/> Fair	<input type="radio"/> Satisfactory	<input type="radio"/> Good	<input checked="" type="radio"/> Excellent
The instructor takes responsibility for their own actions and procedures	<input type="radio"/> Poor	<input type="radio"/> Fair	<input type="radio"/> Satisfactory	<input type="radio"/> Good	<input checked="" type="radio"/> Excellent
The instructor demonstrates sensitivity to the needs of patients and guests.	<input type="radio"/> Poor	<input type="radio"/> Fair	<input type="radio"/> Satisfactory	<input type="radio"/> Good	<input checked="" type="radio"/> Excellent

SECTION 2

COMMENT SECTION

Comments:

In what ways did this instructor's approach contribute significantly to your learning experience?

Allowing scan time and good verbal cues when scanning

In what ways might this instructor enhance their approach or methods?

N/A

Scan Lab Policy for DMS students

The West Virginia University Hospitals (WVUH) Diagnostic Medical Sonography (DMS) Education Program conducts scanning labs in a controlled laboratory setting under the direct supervision of the Education Coordinator and the Clinical Coordinator. Scanning labs are incorporated into the curriculum as a mechanism for developing psychomotor skills and clinical scanning techniques in a simulated patient environment. Volunteer imaging subjects are utilized and may include students and/or other members of the general population. Scanning labs are conducted for educational purposes only and are non-diagnostic. Student participation as an imaging subject is voluntary and is governed by the following:

Procedure

1. During orientation, the Educational Coordinator or Clinical Coordinator will review this policy and provide students with an information sheet describing the scanning lab procedure and specifics regarding participation and the anatomical areas generally imaged.
2. The Educational Coordinator or Clinical Coordinator will explain to the students that participation as an imaging subject is strictly on a voluntary basis and that refusal to participate will not affect the student's clinical grade and/or evaluations.
3. Students will be given the opportunity to discuss any concerns, questions, and/or reservations they may have regarding the scanning lab procedure and their potential participation as an imaging subject.
4. Students will be asked to complete the attached form reflecting their decision regarding their level of participation. A copy will be retained as part of the student educational record.
5. Students will be advised that during their participation as an imaging subject, should a situation arise in which they feel uncomfortable, they reserve the right decline participation regardless of their indicated choice on the attached authorization form.
6. The supervising sonographer shall be guided by what he/she knows or reasonably should know to be informational needs of the scan lab practice patient and disclosure of said information will depend upon the existence and materiality of that information with respect to potential medical conditions/treatment. Students may be urged to seek a physician order for a formal exam and report in situations where the supervising faculty feels findings are significant and worthy of follow-up.

Incidental Findings

The Scan Lab is a **training environment only** and is **not intended for diagnostic use**. Images produced during simulated sonographic examinations are for educational purposes and are not sufficient for medical diagnosis. Incidental or unexpected findings may occasionally be identified **by the Scan Lab Instructor** during scan lab activities.

1. Identification and Review of Imaging Data

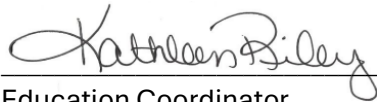
If the Scan Lab Instructor observes a possible incidental finding during review of images or real-time scanning, the instructor will initiate appropriate follow-up.

When feasible, image review by an appropriately trained medical professional will occur. If this is not possible the instructor may recommend the student or volunteer contact a health professional to be evaluated and to schedule an official scan.

2. Sharing Imaging Information

Scan Lab images are educational in nature and may not meet diagnostic standards; however, they may be shared with appropriate medical professionals to assist with follow-up, but cannot be substituted for an official exam. The student or volunteer will be informed that any further questions or medical decisions must be addressed by a qualified healthcare provider.

The responsibility of the Diagnostic Medical Sonography Education Program and WVU Medicine in cases of incidental findings is limited to notification and referral for appropriate follow-up. No diagnostic interpretation, medical advice, or treatment is provided through the Scan Lab.



Education Coordinator

Date

Due
July 6

Student Volunteer Consent Form

I, _____, as a student enrolled in the West Virginia University Hospitals DMS Education Program acknowledge the following:

1. I have received a copy of the Scanning Lab Policy and the information sheet
2. I understand the procedures and practices inherent in Scanning labs and the essential use of imaging subjects in the clinical education process.
3. I have been given the opportunity to ask questions and seek clarification on all aspects relative to the Scanning lab and my voluntary participation as an imaging subject.
4. I understand that my participation as an imaging subject is strictly voluntary and that my refusal to participate does not negatively affect my clinical grades and/or evaluations.
5. I understand should a situation arise in which I feel uncomfortable, I reserve the right to decline participation regardless of my indicated choice on this authorization form.

Therefore, in consideration of the aforementioned criteria:

- I agree to voluntarily participate as an imaging subject during scanning labs while I am enrolled in the DMS program at WVUH with no exceptions.
- I agree to voluntarily participate as an imaging subject during scanning labs while I am enrolled in the DMS program at WVUH with the following exceptions.

Please list:

- I do not wish to participate as an imaging subject during scanning labs while I am enrolled in the DMS program at WVUH.

Student Signature

Date

Education Coordinator/Clinical Coordinator

Date

Scan Lab Student Information Sheet

What Is the Scan Lab?

The Scan Lab is a place where you learn and practice ultrasound scanning skills before working with real patients. It is a safe environment to build confidence, follow exam steps, and improve your technique.

What Is Expected of You

Students are expected to:

- Arrive on time and ready to learn
- Follow all Scan Lab and program rules
- Use Scan Lab time only for learning and practice
- Be respectful to instructors, classmates, and equipment
- Practice good ergonomics, communication, and infection control
- Take responsibility for your own learning and improvement

Practice and Learning

- The Scan Lab is a practice space, not a test every time
- Mistakes are expected and are part of learning
- Practice exam steps, probe movement, and image quality
- Ask questions if you are unsure or need help

Scan Lab Competencies

- When you feel ready, tell the Scan Lab Instructor you would like to complete a Scan Lab competency
- Scan Lab competencies check your:
 - Scanning technique
 - Following the exam protocol
 - Image quality
 - Professional behavior
- You must earn a 92% or higher to pass
- Passing a Scan Lab competency means you are ready to move on to practice exams and patient-based competencies
- Scan Lab competencies count toward your clinical grade, as listed in the syllabus

Incidental findings

- The Scan Lab is a **training environment only** and is **not intended to be used for medical diagnosis**. Scanning in the lab does not replace an official scan.
- On occasion the instructor may observe minor or more serious incidental findings while in scan lab. If this occurs the instructor may recommend that the student follow-up with a healthcare provider so that an official scan can be scheduled.
- Students are only expected to recognize when something looks abnormal. Diagnostic interpretation and medical decision-making are outside the student and sonographer role and should be handled by qualified clinical professionals.

Equipment Care

Students are expected to make sure the equipment is ready

- Turn the machine on
- On the demographics page enter the following:
 - ID: the date of scan lab (ex. 4262026)
 - Last name: SCANLAB
 - First name: US
 - Select the supervising sonographer's initials
- Make sure the correct probe for the area of interest is selected
- Make sure there is warm gel, washcloths, towels
- Put a sheet on the bed.

Students must:

- Handle machines and probes carefully
- Clean equipment
 - Dirty linens in the linen basket
 - Probes and cords cleaned
 - The touch screen and control panel cleaned
- Report any problems right away to the instructor

Professional Behavior

- Speak respectfully to everyone
- Follow instructor directions
- Keep a positive learning attitude
- **Keep side conversations to a minimum** they are distracting and prevent the student from hearing instructions.
- Unprofessional behavior may result in being asked to leave the Scan Lab or other program action

Typical exams practiced in Scan Lab:

- Renal
- Thyroid
- Transabdominal pelvis
- Rt upper quadrant
- Spleen
- Abdominal Doppler

The list of Scan Lab examinations may be adjusted as needed based on course objectives, student readiness, equipment availability, and other program considerations.

Documentation

Images will be saved into PACS and used as instruction materials or to observe the student's progress. The images will be retained in PACS for a short period of time.

EXAM COMPETENCY FAQ:

These rules are taken directly from the CAAHEP standards

Definitions:

Proficiency – May be demonstrated in a clinical setting or a simulated environment

Competency – Must be completed in a clinical setting

❖ For all competencies and proficiencies:

- The department protocol should be followed.
- The student should be able to answer all questions from the sonographer about anatomy, pathology, image improvement, protocols, clinical information, and anything else directly related to the exam.

What is a competency:

A sonography competency shows that the student can safely perform a specific ultrasound exam **with appropriate supervision** by applying their **knowledge, scanning skills, and professional behavior** with real patients.

To be considered competent, a student must be able to:

- Verify the correct patient and exam order
- Explain the exam to the patient
- Follow the exam protocol and scan in correct planes
- Obtain clear, diagnostic-quality images
- Recognize normal anatomy and identify possible abnormalities
- Use proper patient safety, infection control, and ergonomics
- Communicate effectively with the supervising sonographer
- Complete required documentation accurately

Competencies are completed on real patients in the clinical setting and show that a student can perform the exam **with minimal help**, while still prioritizing patient safety. A credentialed sonographer is always responsible for the exam and present to supervise and assist as needed.

Adult Kidneys

- ❖ Complete the scan lab assessment
- ❖ Competency

Pediatric kidneys

- ❖ Competency

Thyroid

- ❖ Complete the scan lab assessment
- ❖ competency

Right upper quadrant

- ❖ Complete the scan lab assessment
- ❖ Competency

Spleen

- ❖ Complete the scan lab assessment
- ❖ Competency

Chest

- ❖ Competency
- ❖ The lung and pleura should be included

Complete Abdomen

- ❖ Competency

Biopsy

- ❖ Competency

Any ultrasound-guided procedure works here.

- ❖ The student should be able to demonstrate knowledge in these specific areas:
 - Sterile setup
 - Procedural time-out
 - Pre- and post-procedural documentation
 - Informed consent
 - Transducer guidance

Scrotum

- ❖ Competency

GI Tract

- ❖ **Proficiency**

- ❖ There is no guidance from CAAHEP about a specific part of the GI Tract, so any exam that evaluates some part of the GI tract qualifies

Abdominal Doppler

- ❖ **Proficiency**

- ❖ The specifications for this exam are abdominal vascular Doppler assessment of hepatic, mesenteric, and renal arteries.

Neonatal Head

- ❖ Competency

Breast

- ❖ Competency

TA Pelvis

- ❖ Competency

- ❖ Vagina, cervix, uterus, post and ant cul-de-sac, adnexa, ovaries, and fallopian tubes are required in either a TAS or TVS scan. A TVS is a more comprehensive way to obtain this anatomy.

TV Pelvis

- ❖ Competency

- ❖ Visualization of vagina, cervix, uterus, post and ant cul-de-sac, adnexa, ovaries, and fallopian tubes are required in either a TAS or TVS scan. A TVS is a more comprehensive way to obtain this anatomy.

Fetal 1st trimester

- ❖ Competency

- ❖ Visualize gest. sac, embryonic pole, yolk sac, fetal cardiac activity, placenta, uterus, cervix, adnexa, cul-de-sacs.
 - Separate images of the uterus, cervix, or cul-de-sacs if they are included in other images. The student, however, should recognize their structure and if they are within normal limits.

Fetal Second trimester – growth and anatomy

- ❖ Competency
- ❖ **Anatomy study to include:**
 - intracranial anatomy, face, cardiac activity, 4 chamber, heart, LVOT, RVOT, 3VV, 3VT, cord insert, spine, extremities, amniotic fluid (include comment of WNL/oligohydramnios/polyhydramnios and measurement if after 24 weeks), placenta, umbilical cord, maternal cervical length, maternal adnexa

Fetal third trimester - growth

- ❖ Competency
- ❖ Position, lat. ventricle, 4-chamber, RVOT, LVOT, stomach, bladder, placenta, fluid, biometry measurements, and any anatomy that was not obtained during the second-trimester scan.

Biophysical

- ❖ Competency
- ❖ BPP – per department protocol

Aorta/IVC

- ❖ Competency
- ❖ This could be included with an abdominal complete ultrasound or on its own.

Vascular:

Proficiencies:

- ❖ Abdominal duplex (renal art/SMA/cealic): Visceral vascular

Competencies:

- ❖ Carotid
- ❖ Aortoiliac duplex
- ❖ ABI
- ❖ Lower arterial
- ❖ Lower venous
- ❖ Venous lower insufficiency
- ❖ Upper venous



Radiology & Children's Hospital Protocol Access

Quick Student Guide

Option 1: SharePoint (WVU Email)
1. Log in to WVU Medicine email
2. Click App Launcher (9 dots)
3. Select SharePoint
4. Open Ultrasound site
5. Click Protocols
Option 2: Connect
1. Open Connect
2. Click Departments
3. Scroll to Clinical Services
4. Select Radiology
5. Click Ultrasound
6. Select Protocols
Tips
• Make sure you are in the Ultrasound section
• Use your WVU Medicine account
• Folders may be organized by semester, policy, or clinical site

HIPAA and Patient Confidentiality

Students in the Diagnostic Medical Sonography Program are required to comply with all applicable Health Insurance Portability and Accountability Act (HIPAA) regulations and WVU Medicine privacy policies.

Students must:

- Maintain strict confidentiality of all patient information, including verbal, written, and electronic data
- Access patient information only as necessary for educational and clinical responsibilities
- Refrain from discussing patient information outside of the clinical setting
- Not photograph, record, or store patient information on personal devices

Students are not permitted to access their own medical records, or the records of family members, friends, or acquaintances through WVU Medicine systems, unless following established hospital procedures for patient access. Accessing records outside of assigned clinical responsibilities is considered a violation of HIPAA and institutional policy.

Any violation of patient confidentiality, unauthorized record access, or misuse of protected health information may result in disciplinary action up to and including dismissal from the program and may carry legal consequences.

Semester 1 Clinic schedule



West Virginia University Hospitals, Inc.
Diagnostic Medical Sonography Education Program

Semester I Fall 2026

Clinic Rotations

June 29 - December 18

Class of 2027	June 29-July 3	July 6-10	July 13-17	July 20-24	July 27-31	August 3-7	August 10-14	August 17-21	August 24-28	Aug 31-Sept 4	Sept 7-11	Sept 14-18	Sept 21-25	Sept 28-Oct 2	Oct 5-9	Oct 12-16	Oct 19-23	Oct 26-30	Nov 2-6	Nov 9-13	Nov 16-20	Nov 23-27	Nov 30-Dec 4	Dec 7-11	Dec 14-18
Addison Cunningham	0	0	0	1	1	8	6	9	9	2	2	1	1	9	9	6	6	8	8	10	OB	2	8		
Lauren D'Angelo	0	0	0	2	2	1	1	8	6	9	9	8	8	1	1	9	9	6	6	8	10	OB	2		
Kaylie Hegedis	0	0	0	9	9	2	2	1	1	8	6	6	6	8	8	1	1	9	9	9	8	10	OB		
Darraah Pennington	0	0	0	8	6	9	9	2	2	1	1	9	9	6	6	8	8	1	1	OB	2	8	10		

Key	Clinical Education Site	Hours
1	Physician's Office Center	7:30-4:00
2	Ruby Memorial Hospital (Inpatient)	7:00-3:30
3	Vascular Lab	8:00-4:30
4	Betty Puskar Breast Care Center	7:30-4:00
5	High Risk Obstetrics & Gynecology	7:00-3:30
6	Cheat Lake Physicians (OB & General)	7:30-4:00
7	University Town Center (OB)	7:30-4:00
8	University Town Center (General)	8:00-4:30
9	Children's Hospital	7:30-4:00
10	Fairmont Gateway Clinic	8:00-4:30

Hours for general ultrasound at **Cheat Lake** are Monday-Thursday from 7:30-4:00 and **Friday from 7:00-3:30**.

OB clinic sites will be assigned on Trajectories.

*Schedule is subject to change at the discretion of the Program Director/Clinical Coordinator.

Class Vacations: Fall Break: October 16

Holidays: Independence Day: July 3

Labor Day: September 7

Thanksgiving: November 26 - 27

Christmas/New Years: Dec 21 - Jan 1

Graduation: December 3, 2027 (tentatively)

Elective rotation selections by Monday, November 23, 2026

Example of Spring Semester 2 clinic schedule

Clinic Rotations Semester II Spring 2026

January 5 - June 19

Jan 5-9	Jan 12-16	Jan 19-23	Jan 26-30	Feb 2-6	Feb 9-13	Feb 16-20	Feb 23-27	Mar 2-6	Mar 9-13	Mar 16-20	Mar 23-27	Mar 30-Apr 3	Apr 6-10	Apr 13-17	Apr 20-24	Apr 27-May 1	May 4-8	May 11-15	May 18-22	May 25-29	June 1-5	June 8-12	June 15-19	June 22-26	
3	OB	2	2E	1	1	9	9E	3	3	SPRING BREAK			OB	1	1	9	9	10	OB	3	6	8	1	ELECTIVES	
9	9E	3	OB	2	2E	1	1	9	9	SPRING BREAK			3	OB	1	1	1	6	10	OB	3	6	8	ELECTIVES	
1	1	9	9E	3	OB	2	2E	1	1	SPRING BREAK			9	3	3	OB	OB	3	6	10	OB	1	6	ELECTIVES	
2	2E	1	1	9	9E	3	OB	OB	OB	SPRING BREAK			1	9	3	3	3	OB	3	6	10	1	6	ELECTIVES	

Key	Clinical Education Site	Hours
1	Physician's Office Center	7:30-4:00
2	Ruby Memorial Hospital (Inpatient)	7:00-3:30
3	Vascular Lab	8:00-4:30
4	Betty Puskar Breast Care Center	7:30-4:00
5	High Risk Obstetrics & Gynecology	7:30-4:00
6	Cheat Lake Physicians	7:30-4:00
7	University Town Center (OB)	7:30-4:00
8	University Town Center (General)	8:00-4:30
9	Children's Hospital	7:30-4:00
10	Fairmont Gateway Clinic	8:00-4:30

Cheat Lake General Ultrasound clinic hours are Mon-Thurs 7:30-4:00 and Fridays 7:00-3:30
 OB clinic sites will be assigned on Trajecsys.

**Schedule is subject to change at the discretion of the Program Director/Clinical Coordinator.

Class Vacations: Spring Break: March 16-20

Summer Break: June 22-26

Holidays: Memorial Day: May 25

Graduation: December 4, 2026 (tentatively)

Elective rotation selections by Monday, June 1st

Example of Spring Semester 3 clinic schedule



West Virginia University Hospitals, Inc.
Diagnostic Medical Sonography Education Program

Clinic Rotations Semester III Fall 2026

June 29 - December 4

Class of 2026	Semester III												Fall 2026											
	June 29-July 3	July 6-10	July 13-17	July 20-24	July 27-31	August 3-7	August 10-14	August 17-21	August 24-28	Aug 31-Sept 4	Sept 7-11	Sept 14-18	Sept 21-25	Sept 28-Oct 2	Oct 5-9	Oct 12-16	Oct 19-23	Oct 26-30	Nov 2-6	Nov 9-13	Nov 16-20	Nov 23-27	Nov 30-Dec 4	
Alina Asmar	3	3	9	9	OB	OB	3	3	4	4	OB	OB	1	10	2	1	Fall Break		11/12	1	4	1	Electives	
Kaitlin Heavener	OB	OB	3	3	9	9	OB	OB	3	3	4	4	2	1	10	2	Fall Break		4	11/12	1	6	Electives	
Kaylin Nixon	9	9	OB	OB	3	3	4	4	OB	OB	3	3	10	2	1	10	Fall Break		1	4	11/12	9	Electives	

Key	Clinical Education Site	Hours
1	Physician's Office Center	7:30-4:00
2	Ruby Memorial Hospital (Inpatient)	7:00-3:30
3	Vascular Lab	8:00-4:30
4	Betty Puskar Breast Care Center	7:30-4:00
5	High Risk Obstetrics & Gynecology	7:00-3:30
6	Cheat Lake Physicians (OB & General)	7:30-4:00
7	University Town Center (OB)	7:30-4:00
8	University Town Center (General)	8:00-4:30
9	Children's Hospital	7:30-4:00
10	Fairmont Gateway Clinic	8:00-4:30
11	Read with a radiologist (Tues & Wed)	7:30-4:00
12	Fetal Echo - observation only (Mon & Thurs)	8:00-4:30

Hours for general ultrasound at Cheat Lake are Monday-Thursday from 7:30-4:00 and Friday from 7:00-3:30.

OB clinic sites will be assigned on Trajecsys.

**Schedule is subject to change at the discretion of the Program Director/Clinical Coordinator.

Class Vacations: Fall Break: October 19 - 23

Holidays: Independence Day: July 3

Labor Day: September 7

Thanksgiving: November 26 - 27

Graduation: December 4, 2026 (tentative)

Elective rotation selections by Monday, November 9, 2026

Addresses for Clinic Sites

- Ruby Memorial Hospital
 - 1 Medical Center Drive
 - Morgantown, WV 26506
 - POC, Inpatient, Vascular lab, Children's Hospital, and MFM
 - Students park in Research Parking lot and shuttle over to the hospital
 - The parking map is on the following page

- University Town Center
 - 6040 University Town Center Drive
 - Morgantown, WV 26501
 - OB is on the 2nd floor
 - Radiology Ultrasound is on the 1st floor
 - There are signs that indicate where the employee parking is located. Park in the employee designated spots. These spots are around the edge of the parking lot.

- Cheat Lake Physicians
 - 608 Cheat Road
 - Morgantown, WV 26508
 - OB and General ultrasound are located on the main floor, next to the main entrance.
 - Their parking spots are numbered, so you must be careful where you park. At this time (5/28/2025) you can park in the upper lot, within the yellow lines.

- Fairmont Gateway Clinic
 - 100 Stoney Hill Road
 - Fairmont, WV 26554
 - General ultrasound, the sonographer is Megan Hickman
 - There are signs that indicate where the employee parking is located. Park in the employee designated spots. These spots are around the edge of the parking lot.

Student Lunch time guidelines and expectations

Students are expected to take a **scheduled lunch break** during each day, in accordance with their assigned clinical site's workflow and department practices. The time may vary due to the student's class and clinic schedule or due to the clinic schedule. '

Students may take 30-45 (clinic dependent) **minutes for their lunch.**

- If the student is in clinic all day, their lunch break should coincide with their clinical instructor's lunch break.
 - Students should be present for the last patient of the morning and the first patient of the afternoon.
- If the student has class in the morning and clinic in the afternoon.
 - The student should arrive to clinic for the first patient scheduled in the afternoon.
- If the student has clinic in the morning and class in the afternoon
 - The student should start their lunch break after the last morning patient.
- If the student is offsite:
 - All-day clinic
 - Their lunch break should coincide with their clinical instructor's lunch break.
 - When there is afternoon classes:
 - Allow 30 minutes for lunch and the time necessary to travel from the clinic to class.
 - When there is afternoon clinic:
 - Allow 30 minutes for lunch and the time necessary to travel to the clinic by the first scheduled patient in the afternoon.
- **Students may not:**
 - Leave the clinical site during lunch without notifying the supervising sonographer
 - Extend lunch breaks beyond the approved time
 - Skip lunch breaks to accumulate additional scan time unless specifically approved by the Clinical Instructor, Clinical Coordinator, or Program Director.



Semester 1

SONT 300 – Applied Sonography I

2026-2027 Term: Semester I

Hours: 530 clock hours

Instructor(s): Caitlin Chisler BA, RDMS, RT(R)
Various Staff Technologists

Prerequisites: Acceptance into the program
SONT 340 – Intro to Sonography & Scan Lab

Locations: WVU Medicine Physician’s Office Center
WVU Medicine Ruby Memorial Hospital, Inpatient
WVU Medicine Children’s Hospital
WVU Medicine Cheat Lake Physicians, General, OB/GYN
WVU Medicine University Town Center, General,
OB/GYN WVU Medicine Fairmont Gateway Clinic,
General

Time: Monday – Friday
Hours vary by clinical site. See clinical schedule for specifics.

Textbook: N/A

Supporting Documents: Clinical Handbook and Trajecsys Report System

Course Description:

This course is the first of three clinical education courses in the Diagnostic Medical Sonography Program. Students rotate through assigned ultrasound departments and receive an introduction to the clinical environment. Emphasis is placed on department orientation, patient care, professional behavior, and understanding the role of the sonographer. Under **direct supervision**, students begin developing foundational scanning skills and participate in ultrasound examinations and procedures appropriate to their level of training.

Course Objectives:

1. Adhere to the dress code and all other program and clinical site policies as outlined in the Student Handbook.
2. Demonstrate professional, ethical, and compassionate patient care.
3. Apply standard infection prevention and control practices.
4. Communicate effectively with patients, clinical staff, and instructors.
5. Prepare patients and examination rooms for routine ultrasound procedures.
6. Perform routine ultrasound examinations under direct supervision.
7. Identify normal anatomy and basic pathology on routine ultrasound examinations.
8. Recognize when modifications to standard scanning protocols may be necessary.
9. Demonstrate proper use and care of ultrasound equipment.
10. Maintain accurate clinical documentation and complete required records.
11. Demonstrate progressive development of scanning, patient care, and professional skills through clinical competency evaluations.

12. Achieve a minimum score of 86% on all required clinical competency examinations and maintain a minimum overall clinical grade of 86%.

13. Successfully complete the minimum number of required Semester I clinical competencies.

Clinical Grading Scale:

The clinical grade is determined using the following grading scale.

Percentage Grade	Letter Grade	Quality Points
100% - 93%	A	4.0
92% - 86%	B	3.0
85% - 78%	C	2.0
77% - 70%	D	1.0
< 70%	F	0.0

Clinical Grade Standard (minimum):

Each student must achieve a minimum overall weighted clinical average of **86% (B)** by the end of each semester to complete the clinical education requirements of the program. Successful completion of each clinical level is required for progression to the next semester. Clinical levels may not be repeated; therefore, students who fail to achieve the required 86% (B) clinical average will be dismissed from the program.

The Clinical Education Coordinator will provide clinical progress counseling at midterm, at the end of the semester, and as needed. However, students are ultimately responsible for monitoring their own clinical progress and academic standing.

Clinical Grade Calculation:

The final clinical grade is based on the following components and weighted percentages:

Component	Weighted Average
Orientation Forms	5%
Logs/Clinical Instructor Evals	5%
Weekly Clinical Evaluations	10%
Clinical Coordinator Evaluation	10%
Scan Lab Assessments	20%
Competencies/Proficiencies	50%

Clinical Orientation Forms:

Students are required to complete a *Clinical Orientation* form at the beginning of each new clinical rotation. The form is designed to familiarize students with the department, equipment, protocols, and expectations of the assigned clinical area. Completed forms must be submitted **within one week** of the rotation start date. Students will earn one (1) point for each completed form submitted by the deadline. Clinical Orientation Forms account for **5%** of the overall clinical grade.

Daily Exam Logs:

Students are required to maintain accurate and up-to-date daily exam logs in the Trajecsys Clinical Report System throughout each clinical rotation. Daily logs serve as documentation of the procedures observed, assisted with, or performed by the student and are required for accreditation and program reporting purposes. Students must log a minimum of fifteen (15) examinations per

week. Participation levels should be accurately recorded for each exam.

The following participation levels are used when filling out the Daily Log sheet in Trajecsys:

1. **Observed (Level 1):**

The student assists with patient care and examination room preparation and clean-up. The student observes the sonographer perform the entire examination but does not scan.

2. **Observed and Assisted (Level 2):**

The student assists with patient care and examination room preparation and clean-up. The student also provides limited assistance to the sonographer during the examination but does not scan.

3. **Scanned < 10 minutes (Level 3):**

The student assists with patient care and examination room preparation and clean-up. Under direct supervision, the student scans for 10 minutes or less during the examination.

4. **Scanned > 10 minutes (Level 4):**

The student assists with patient care and examination room preparation and clean-up. Under direct supervision, the student scans for more than 10 minutes but does not complete the entire examination.

5. **Scanned entire exam (Level 5):**

The student assists with patient care and examination room preparation and clean-up. Under direct supervision, the student performs the entire sonographic examination.

Students are eligible to complete a clinical competency for a specific exam after documenting a minimum of two (2) Level 5 exams of the same type in the Daily Log sheet.

Staff Clinical Instructor Evaluations:

At the end of each clinical rotation, students are required to complete a *Clinical Instructor Evaluation* in Trajecsys. These evaluations allow students to provide feedback on the quality of clinical instruction and support continuous improvement of the clinical education program. Evaluation scores and comments are shared with the supervising sonographer's manager. Student identities are not disclosed, and all feedback is handled in a professional and confidential manner.

Timely completion of Daily Exam Logs and Clinical Instructor Evaluations is required. Together, these requirements account for **5%** of the overall clinical grade.

Weekly Clinical Evaluations:

At the end of each clinical rotation, students are responsible for ensuring that a supervising sonographer completes a performance evaluation in Trajecsys. This evaluation serves as the sonographer's formal assessment of the student's clinical performance, professional behavior, and progression during the rotation.

The *New Student Clinical Evaluation* form is utilized during the first half of Semester I (July through September). After midterm grade counseling, students will transition to the *Clinical Weekly Evaluation* form for the remainder of the program.

Each evaluation category is scored using the following scale:

5 – Excellent

4 – Above Average

- 3—Average
- 2—Needs Improvement
- 1—Unsatisfactory

The average score across all categories determines the student's clinical evaluation points for that rotation. These points will contribute to the Weekly Clinical Evaluations portion of the Clinical Grade Calculation, which accounts for **10%** of the overall grade.

If multiple evaluations are submitted for a single rotation, the average of all submitted evaluations will be used in grade calculation. Failure to obtain a completed evaluation will result in the student receiving **zero** points for that rotation.

Clinical Coordinator Evaluation:

Prior to midterm and at the end of each semester, the Clinical Coordinator will evaluate each student's overall clinical performance using the *Clinical Coordinator Evaluation* form. Each category is scored on a scale of 1 to 5 points. The average score across all categories accounts for **10%** of the overall clinic grade.

Scan Lab Assessments:

Most of the required scanning skills are practiced in the scan lab. Once a student feels comfortable with the scanning protocol and examination process, they should notify the instructor that they are ready to complete a scan lab assessment. Students who achieve a score of **92%** or higher on this assessment will be eligible to complete practice exams and ultimately complete the clinical competency for the corresponding exam. Scan lab assessments account for **20%** of the overall clinical grade.

Competencies:

What is a competency?

An entry-level competency demonstrates a student's ability to safely, effectively, and professionally perform a specific ultrasound examination in the clinical setting under the supervision of a credentialed sonographer. Competency assessment evaluates the student's ability to integrate didactic knowledge, technical scanning skills, critical thinking, patient care, and professional behavior while performing examinations on real patients.

To be considered competent, the student should be able to:

- Verify patient identity and confirm the correct exam order.
- Communicate effectively with the patient to explain the examination, address questions, and promote patient comfort.
- Prepare ultrasound equipment, including selection of the appropriate transducer and exam setting.
- Follow established departmental and program scanning protocols.
- Acquire diagnostic-quality images in the appropriate scanning planes.
- Demonstrate knowledge of normal anatomy and recognize findings that may require additional evaluation.
- Apply proper infection control procedures, patient safety practices, and ergonomic principles.
- Communicate effectively and professionally with patients, supervising sonographers, and other healthcare personnel.

- Complete all required documentation accurately and thoroughly.

Competencies are completed on real patients in the clinical setting and are intended to verify that the student can complete the exam with minimal assistance while maintaining patient safety, professionalism, and image quality standards. A credentialed sonographer remains responsible for the exam and must be present to provide supervision, guidance, and assistance as needed.

Required Clinical Competencies:

Students must successfully complete a minimum of 29 clinical competencies to satisfy program graduation requirements.

Abdomen (13)	OB/GYN (6)	Vascular (6)	Elective (2)
Adult Renal	Transabdominal Pelvis	Aorta/IVC	Soft Tissue Neck
Thyroid	Transvaginal Pelvis	Carotid	Elastography
Right Upper Quadrant	1 st Trimester	PVR/ABI	Superficial ST (w/ path)
Spleen	2 nd Trimester – Anatomy	Venous Lower	Pediatric Spine
Chest	3 rd Trimester - Growth	Venous Upper	GI Tract**
Complete Abdomen	Biophysical Profile	Arterial Lower	Renal Transplant
Biopsy			
Scrotum			
Pediatric Renal			
Neonatal Head			
Breast			
Abdominal Doppler*			
GI Tract**			

*Can be done as a proficiency or a competency

**The GI Tract exams must be different types of exams.

Proficiency—as defined in the JRC-DMS standards and guidelines—may be demonstrated in a clinical setting or in a simulated environment.

- Per the JRC-DMS, the only exams that may be performed as a proficiency include the Abdominal Doppler assessment (hepatic, mesenteric, and/or renal vasculature), and the GI tract assessment.

Competency—as defined in the JRC-DMS standards and guidelines—must be done in a clinical setting.

***Not all listed competencies are expected to be completed during the first semester. Eligibility is based on student readiness, clinical opportunity, and program guidance.*

Timing of Competencies:

First Semester:

Students are required to successfully complete a total of **four (4)** competencies/proficiencies by the end of the first semester, with a minimum of **two (2)** completed by midterm.

Recommended competencies/proficiencies include, but are not limited to:

- Adult Renal
- Thyroid
- Right Upper Quadrant (RUQ)
- Spleen
- Pediatric Renal
- Aorta/IVC
- Transabdominal Pelvis

Competencies should be selected in consultation with the clinical instructor and based on examination availability, student skill level, and clinical site workflow.

All clinical evaluation forms and related documentation are available in the Clinical Handbook.

Student Name: _____

Clinical Site: Children's Hospital

Clinical Rotation Date: _____



Inpatient/Outpatient Clinical Orientation

This questionnaire is designed to help you become familiar with and confident in each new clinical environment you will be working in. It must be completed at the beginning of each new rotation and will count as a grade for the Introduction to Sonography and Scan Lab course.

***Please submit your completed form to Caitlin Chisler either in person or as a PDF via email within one week of your clinical rotation start date.*

Department Overview

Ask one of the staff sonographers you are working with to help you locate each of the following items. Once completed, have them initial and sign the corresponding spaces below.

<i>Location</i>	<i>Sonographer Initials</i>
Waiting room	
Supply cart/closet (for restocking gel, gloves, transducer covers, etc.)	
Linen cart (for restocking rooms)	
Supplies/linens in US room	
Staff and/or patient restrooms	
Crash cart	
Nearest emergency exit	
Fire extinguisher	
Nearest fire alarm	

Sonographer Name: _____ Signature: _____

This signature confirms that the student was oriented to the locations listed above..

Workflow & Patient Care

1. If multiple exams are on the worklist to be completed, how should you prioritize the order in which each exam is done?

2. How do you know when an outpatient has arrived?

2. If there is more than one sonographer, what is the process for determining which sonographer scans each patient?
**If there is only one sonographer at this clinical site, write "N/A"

3. List a few of the most common exams performed in this department.
 - o What patient prep is required for some of these exams?

4. What exams are required to be done portable?

5. What steps are taken to clean and reset the room after each patient?

6. After the scanning portion of the exam is complete, what steps does the sonographer take to finalize the exam before moving on to the next patient?

Student Name: _____

Clinical Site: Ruby - Inpatient

Clinical Rotation Date: _____



Inpatient Clinical Orientation

This questionnaire is designed to help you become familiar with and confident in each new clinical environment you will be working in. It must be completed at the beginning of each new rotation and will count as a grade for the Introduction to Sonography and Scan Lab course.

***Please submit your completed form to Caitlin Chisler either in person or as a PDF via email within one week of your clinical rotation start date.*

Department Overview

Ask one of the staff sonographers you are working with to help you locate each of the following items. Once completed, have them initial and sign the corresponding spaces below.

<i>Location</i>	<i>Sonographer Initials</i>
Radiology waiting room (for outpatient biopsies)	
Supply cart (for restocking gel, gloves, transducer covers, etc.)	
Linen cart (for restocking rooms)	
Supplies/linens in US room	
Staff and/or patient restrooms	
Crash cart	
Nearest emergency exit	
Fire extinguisher	
Nearest fire alarm	

Sonographer Name: _____ Signature: _____

This signature confirms that the student was oriented to the locations listed above..

Workflow & Patient Care

1. If multiple exams are on the worklist to be completed, how should you prioritize the order in which each exam is done?

2. Briefly explain where to find the nurse's phone number for an inpatient.
 - What other relevant details about your patient can you get from this page?

3. Briefly explain where to find the nurse's phone number for an ED patient.
 - What other relevant details about your patient can you get from this page?

4. What are some important questions to ask the nurse when calling about an ultrasound order for a patient?

5. What information must be included when putting a patient into transport?

6. List a few of the most common exams performed in this department.
 - What patient prep is required for some of these exams?

7. How is the room prepared prior to bringing an outpatient back for an FNA?

8. How does preparing the room for an inpatient differ from preparing it for an ED patient?

9. After the scanning portion of the exam is complete, what steps does the sonographer take to finalize the exam before moving on to the next patient?

10. What information does the sonographer include in the study notes?

Student Name: _____

Clinical Site: Physician's Office Center (POC)

Clinical Rotation Date: _____



Outpatient Clinical Orientation

This questionnaire is designed to help you become familiar with and confident in each new clinical environment you will be working in. It must be completed at the beginning of each new rotation and will count as a grade for the Introduction to Sonography and Scan Lab course.

***Please submit your completed form to Caitlin Chisler either in person or as a PDF via email within one week of your clinical rotation start date.*

Department Overview

Ask one of the staff sonographers you are working with to help you locate each of the following items. Once completed, have them initial and sign the corresponding spaces below.

<i>Location</i>	<i>Sonographer Initials</i>
Waiting room	
Supply cart/closet (for restocking gel, gloves, transducer covers, etc.)	
Linen cart (for restocking rooms)	
Supplies/linens in US room	
Staff and/or patient restrooms	
Crash cart	
Nearest emergency exit	
Fire extinguisher	
Nearest fire alarm	

Sonographer Name: _____ Signature: _____

This signature confirms that the student was oriented to the locations listed above..

Student Name: _____

Clinical Site: UTC - General

Clinical Rotation Date: _____



Outpatient Clinical Orientation

This questionnaire is designed to help you become familiar with and confident in each new clinical environment you will be working in. It must be completed at the beginning of each new rotation and will count as a grade for the Introduction to Sonography and Scan Lab course.

***Please submit your completed form to Caitlin Chisler either in person or as a PDF via email within one week of your clinical rotation start date.*

Department Overview

Ask one of the staff sonographers you are working with to help you locate each of the following items. Once completed, have them initial and sign the corresponding spaces below.

<i>Location</i>	<i>Sonographer Initials</i>
Waiting room	
Supply cart/closet (for restocking gel, gloves, transducer covers, etc.)	
Linen cart (for restocking rooms)	
Supplies/linens in US room	
Staff and/or patient restrooms	
Crash cart	
Nearest emergency exit	
Fire extinguisher	
Nearest fire alarm	

Sonographer Name: _____ Signature: _____

This signature confirms that the student was oriented to the locations listed above..

Student Name: _____

Clinical Site: Fairmont Gateway Clinic

Clinical Rotation Date: _____



Outpatient Clinical Orientation

This questionnaire is designed to help you become familiar with and confident in each new clinical environment you will be working in. It must be completed at the beginning of each new rotation and will count as a grade for the Introduction to Sonography and Scan Lab course.

***Please submit your completed form to Caitlin Chisler either in person or as a PDF via email within one week of your clinical rotation start date.*

Department Overview

Ask one of the staff sonographers you are working with to help you locate each of the following items. Once completed, have them initial and sign the corresponding spaces below.

Location	Sonographer Initials
Waiting room	
Supply cart/closet (for restocking gel, gloves, transducer covers, etc.)	
Linen cart (for restocking rooms)	
Supplies/linens in US room	
Staff and/or patient restrooms	
Crash cart	
Nearest emergency exit	
Fire extinguisher	
Nearest fire alarm	

Sonographer Name: _____ Signature: _____

This signature confirms that the student was oriented to the locations listed above..

Student Name: _____

Clinical Site: Cheat Lake - General

Clinical Rotation Date: _____



Outpatient Clinical Orientation

This questionnaire is designed to help you become familiar with and confident in each new clinical environment you will be working in. It must be completed at the beginning of each new rotation and will count as a grade for the Introduction to Sonography and Scan Lab course.

***Please submit your completed form to Caitlin Chisler either in person or as a PDF via email within one week of your clinical rotation start date.*

Department Overview

Ask one of the staff sonographers you are working with to help you locate each of the following items. Once completed, have them initial and sign the corresponding spaces below.

<i>Location</i>	<i>Sonographer Initials</i>
Waiting room	
Supply cart/closet (for restocking gel, gloves, transducer covers, etc.)	
Linen cart (for restocking rooms)	
Supplies/linens in US room	
Staff and/or patient restrooms	
Crash cart	
Nearest emergency exit	
Fire extinguisher	
Nearest fire alarm	

Sonographer Name: _____ Signature: _____

This signature confirms that the student was oriented to the locations listed above..



Semester 2

SONT 301 – Applied Sonography II

2026-2027

Term: Semester II

Hours: 610 clock hours

Instructor(s): Caitlin Chisler BA, RDMS, RT(R)
Various Staff Technologists

Prerequisites: SONT 301 – Applied Sonography I

Locations: WVU Medicine Physician’s Office Center
WVU Medicine Ruby Memorial Hospital, Inpatient
WVU Medicine Children’s Hospital
WVU Medicine Cheat Lake Physicians, General, OB/GYN
WVU Medicine University Town Center, General, OB/GYN
WVU Medicine Children’s Hospital, Maternal Fetal Medicine
WVU Medicine Fairmont Gateway Clinic, General
WVU Medicine Ruby Memorial Hospital, Vascular Lab

Time: Monday – Friday

Hours vary by clinical site. See clinical schedule for specifics.

Textbook: N/A

Supporting Documents: Clinical Handbook and Trajecsys Report System

Course Description:

This course is the second of three clinical education courses in the Diagnostic Medical Sonography Program. Clinical education takes place in affiliated ultrasound departments and builds upon the knowledge and skills acquired during the first clinical semester. Students rotate through assigned clinical sites, spending a minimum of one (1) week and a maximum of two (2) weeks in each clinical area.

Emphasis is placed on the development of scanning proficiency, patient care skills, protocol adherence, and professional growth. Under direct supervision, with progression to indirect supervision as competency is demonstrated and documented, students perform ultrasound examinations appropriate to their level of training. Students continue to develop clinical judgment, communication skills, and an understanding of the sonographer's role within the healthcare team.

Course Objectives:

1. Adhere to the dress code and all other program and clinical site policies as outlined in the Student Handbook.
2. Demonstrate professional, ethical, and compassionate patient care.
3. Apply standard infection prevention and control practices.
4. Communicate effectively with patients, clinical staff, and instructors.
5. Prepare patients and examination rooms for ultrasound procedures.

6. Perform routine ultrasound examinations with increasing proficiency under appropriate supervision.
7. Identify normal anatomy and common pathological findings on ultrasound examinations.
8. Recognize when modifications to standard scanning protocols are necessary and implement appropriate adjustments under supervision.
9. Demonstrate proper use, care, and maintenance of ultrasound equipment.
10. Maintain accurate clinical documentation and complete all required clinical records.
11. Demonstrate continued development of scanning, patient care, critical thinking, and professional skills through clinical competency evaluations.
12. Achieve a minimum score of 86% on all required clinical competency examinations and maintain a minimum overall clinical grade of 86%.
13. Successfully complete the required Semester II clinical competencies and proficiencies.

Clinical Grading Scale:

The clinical grade is determined using the following grading scale.

Percentage Grade	Letter Grade	Quality Points
100% - 93%	A	4.0
92% - 86%	B	3.0
85% - 78%	C	2.0
77% - 70%	D	1.0
< 70%	F	0.0

Clinical Grade Standard (minimum):

Each student must achieve a minimum overall weighted clinical average of **86% (B)** by the end of each semester to complete the clinical education requirements of the program. Successful completion of each clinical level is required for progression to the next semester. Clinical levels may not be repeated; therefore, students who fail to achieve the required 86% (B) clinical average will be dismissed from the program.

The Clinical Education Coordinator will provide clinical progress counseling at midterm, at the end of the semester, and as needed. However, students are ultimately responsible for monitoring their own clinical progress and academic standing.

Clinical Grade Calculation:

The final clinical grade is based on the following components and weighted percentages:

Component	Weighted Average
Orientation Forms	5%
Logs/Clinical Instructor Evals	5%
Weekly Clinical Evaluations	10%
Clinical Coordinator Evaluation	10%
Scan Lab Assessments	20%
Competencies/Proficiencies	50%

Clinical Orientation Forms:

Students are required to complete a *Clinical Orientation* form at the beginning of each new clinical rotation. The form is designed to familiarize students with the department, equipment, protocols, and expectations of the assigned clinical area. Completed forms must be submitted **within one week** of the rotation start date. Students will earn one (1) point for each completed form submitted by the deadline. Clinical Orientation Forms account for **5%** of the overall clinical grade.

Daily Exam Logs:

Students are required to maintain accurate and up-to-date daily exam logs in the Trajecsys Clinical Report System throughout each clinical rotation. Daily logs serve as documentation of the procedures observed, assisted with, or performed by the student and are required for accreditation and program reporting purposes. Students must log a minimum of fifteen (15) examinations per week. Participation levels should be accurately recorded for each exam.

The following participation levels are used when filling out the Daily Log sheet in Trajecsys:

1. Observed (Level 1):

The student assists with patient care and examination room preparation and clean-up. The student observes the sonographer perform the entire examination but does not scan.

2. Observed and Assisted (Level 2):

The student assists with patient care and examination room preparation and clean-up. The student also provides limited assistance to the sonographer during the examination but does not scan.

3. Scanned < 10 minutes (Level 3):

The student assists with patient care and examination room preparation and clean-up. Under direct supervision, the student scans for 10 minutes or less during the examination.

4. Scanned > 10 minutes (Level 4):

The student assists with patient care and examination room preparation and clean-up. Under direct supervision, the student scans for more than 10 minutes but does not complete the entire examination.

5. Scanned entire exam (Level 5):

The student assists with patient care and examination room preparation and clean-up. Under direct supervision, the student performs the entire sonographic examination.

Students are eligible to complete a clinical competency for a specific exam after documenting a minimum of two (2) Level 5 exams of the same type in the Daily Log sheet.

Staff Clinical Instructor Evaluations:

At the end of each clinical rotation, students are required to complete a *Clinical Instructor Evaluation* in Trajecsys. These evaluations allow students to provide feedback on the quality of clinical instruction and support continuous improvement of the clinical education program. Evaluation scores and comments are shared with the supervising sonographer's manager. Student identities are not disclosed, and all feedback is handled in a professional and confidential manner.

Timely completion of Daily Exam Logs and Clinical Instructor Evaluations is required. Together, these requirements account for **5%** of the overall clinical grade.

Weekly Clinical Evaluations:

At the end of each clinical rotation, students are responsible for ensuring that a supervising

sonographer completes a performance evaluation in Trajecsys. This evaluation serves as the sonographer's formal assessment of the student's clinical performance, professional behavior, and progression during the rotation.

The *Clinical Weekly Evaluation* form will be used throughout Semester II and will contribute to the student's overall clinical grade. Students are expected to review evaluation feedback and incorporate recommendations to support continued clinical and professional development.

Each evaluation category is scored using the following scale:

- 5 – Excellent
- 4 – Above Average
- 3—Average
- 2—Needs Improvement
- 1—Unsatisfactory

The average score across all categories determines the student's clinical evaluation points for that rotation. These points will contribute to the Weekly Clinical Evaluations portion of the Clinical Grade Calculation, which accounts for **10%** of the overall grade.

If multiple evaluations are submitted for a single rotation, the average of all submitted evaluations will be used in grade calculation. Failure to obtain a completed evaluation will result in the student receiving **zero** points for that rotation.

Clinical Coordinator Evaluation:

Prior to midterm and at the end of each semester, the Clinical Coordinator will evaluate each student's overall clinical performance using the *Clinical Coordinator Evaluation* form. Each category is scored on a scale of 1 to 5 points. The average score across all categories accounts for **10%** of the overall clinic grade.

Scan Lab Assessments:

Most of the required scanning skills are practiced in the scan lab. Once a student feels comfortable with the scanning protocol and examination process, they should notify the instructor that they are ready to complete a scan lab assessment. Students who achieve a score of **92%** or higher on this assessment will be eligible to complete practice exams and ultimately complete the clinical competency for the corresponding exam. Scan lab assessments account for **20%** of the overall clinical grade.

Competencies:

What is a competency?

An entry-level competency demonstrates a student's ability to safely, effectively, and professionally perform a specific ultrasound examination in the clinical setting under the supervision of a credentialed sonographer. Competency assessment evaluates the student's ability to integrate didactic knowledge, technical scanning skills, critical thinking, patient care, and professional behavior while performing examinations on real patients.

To be considered competent, the student should be able to:

- Verify patient identity and confirm the correct exam order.

- Communicate effectively with the patient to explain the examination, address questions, and promote patient comfort.
- Prepare ultrasound equipment, including selection of the appropriate transducer and exam setting.
- Follow established departmental and program scanning protocols.
- Acquire diagnostic-quality images in the appropriate scanning planes.
- Demonstrate knowledge of normal anatomy and recognize findings that may require additional evaluation.
- Apply proper infection control procedures, patient safety practices, and ergonomic principles.
- Communicate effectively and professionally with patients, supervising sonographers, and other healthcare personnel.
- Complete all required documentation accurately and thoroughly.

Competencies are completed on real patients in the clinical setting and are intended to verify that the student can complete the exam with minimal assistance while maintaining patient safety, professionalism, and image quality standards. A credentialed sonographer remains responsible for the exam and must be present to provide supervision, guidance, and assistance as needed.

Required Clinical Competencies:

Students must successfully complete a minimum of 29 clinical competencies to satisfy program graduation requirements.

Abdomen (13)	OB/GYN (6)	Vascular (6)	Elective (2)
Adult Renal	Transabdominal Pelvis	Aorta/IVC	Soft Tissue Neck
Thyroid	Transvaginal Pelvis	Carotid	Elastography
Right Upper Quadrant	1 st Trimester	PVR/ABI	Superficial ST (w/ path)
Spleen	2 nd Trimester – Anatomy	Venous Lower	Pediatric Spine
Chest	3 rd Trimester - Growth	Venous Upper	GI Tract**
Abdomen Complete	Biophysical Profile	Arterial Lower	Renal Transplant
Biopsy			
Scrotum			
Pediatric Renal			
Neonatal Head			
Breast			
Abdominal Doppler*			
GI Tract**			

*Can be done as a proficiency or a competency

**The GI Tract exams must be different types of exams.

Proficiency—as defined in the JRC-DMS standards and guidelines—may be demonstrated in a clinical setting or in a simulated environment.

- Per the JRC-DMS, the only exams that may be performed as a proficiency include the Abdominal Doppler assessment (hepatic, mesenteric, and/or renal vasculature), and the GI tract assessment.

Competency—as defined in the JRC-DMS standards and guidelines—must be done in a clinical setting.

***Not all listed competencies are expected to be completed during the first semester. Eligibility is based on student readiness, clinical opportunity, and program guidance.*

Timing of Competencies:

Second Semester:

Students are required to successfully complete a total of **nine (9)** competencies/proficiencies by the end of the second semester, with a minimum of **four (4)** completed by midterm.

Recommended competencies/proficiencies include, but are not limited to:

- Spleen
- Chest
- Abdomen Complete
- Scrotum
- GI Tract*
- Transabdominal Pelvis
- Transvaginal Pelvis
- 1st Trimester
- 3rd Trimester
- Biophysical Profile
- Carotid
- PVR/ABI
- Venous Upper
- Venous Lower

Competencies should be selected in consultation with the clinical instructor and based on examination availability, student skill level, and clinical site workflow.

All clinical evaluation forms and related documentation are available in the Clinical Handbook.

Student Name: _____

Clinical Site: Cheat Lake - OB

Clinical Rotation Date: _____

Outpatient Clinical Orientation

This questionnaire is designed to help you become familiar with and confident in each new clinical environment you will be working in. It must be completed at the beginning of each new rotation and will count as a grade for the Introduction to Sonography and Scan Lab course.

***Please submit your completed form to Caitlin Chisler either in person or as a PDF via email within one week of your clinical rotation start date.*

Department Overview

Ask one of the staff sonographers you are working with to help you locate each of the following items. Once completed, have them initial and sign the corresponding spaces below.

Location	Sonographer Initials
Waiting room	
Supply cart/closet (for restocking gel, gloves, transducer covers, etc.)	
Linen cart (for restocking rooms)	
Supplies/linens in US room	
Staff and/or patient restrooms	
Crash cart	
Nearest emergency exit	
Fire extinguisher	
Nearest fire alarm	

Sonographer Name: _____ Signature: _____

This signature confirms that the student was oriented to the locations listed above..

Student Name: _____

Clinical Site: UTC - OB

Clinical Rotation Date: _____



Outpatient Clinical Orientation

This questionnaire is designed to help you become familiar with and confident in each new clinical environment you will be working in. It must be completed at the beginning of each new rotation and will count as a grade for the Introduction to Sonography and Scan Lab course.

***Please submit your completed form to Caitlin Chisler either in person or as a PDF via email within one week of your clinical rotation start date.*

Department Overview

Ask one of the staff sonographers you are working with to help you locate each of the following items. Once completed, have them initial and sign the corresponding spaces below.

<i>Location</i>	<i>Sonographer Initials</i>
Waiting room	
Supply cart/closet (for restocking gel, gloves, transducer covers, etc.)	
Linen cart (for restocking rooms)	
Supplies/linens in US room	
Staff and/or patient restrooms	
Crash cart	
Nearest emergency exit	
Fire extinguisher	
Nearest fire alarm	

Sonographer Name: _____ Signature: _____

This signature confirms that the student was oriented to the locations listed above..

Student Name: _____

Clinical Site: Vascular

Clinical Rotation Date: _____

Inpatient/Outpatient Clinical Orientation

This questionnaire is designed to help you become familiar with and confident in each new clinical environment you will be working in. It must be completed at the beginning of each new rotation and will count as a grade for the Introduction to Sonography and Scan Lab course.

***Please submit your completed form to Caitlin Chisler either in person or as a PDF via email within one week of your clinical rotation start date.*

Department Overview

Ask one of the staff sonographers you are working with to help you locate each of the following items. Once completed, have them initial and sign the corresponding spaces below.

<i>Location</i>	<i>Sonographer Initials</i>
Waiting room	
Supply cart/closet (for restocking gel, gloves, transducer covers, etc.)	
Linen cart (for restocking rooms)	
Supplies/linens in US room	
Staff and/or patient restrooms	
Crash cart	
Nearest emergency exit	
Fire extinguisher	
Nearest fire alarm	

Sonographer Name: _____ *Signature:* _____

This signature confirms that the student was oriented to the locations listed above..

Workflow & Patient Care

1. If multiple exams are on the worklist to be completed, how should you prioritize the order in which each exam is done?

2. How do you know when an outpatient has arrived?

2. If there is more than one sonographer, what is the process for determining which sonographer scans each patient?
**If there is only one sonographer at this clinical site, write "N/A"

3. List a few of the most common exams performed in this department.
 - o What patient prep is required for some of these exams?

4. What exams are required to be done portable?

5. What steps are taken to clean and reset the room after each patient?

6. After the scanning portion of the exam is complete, what steps does the sonographer take to finalize the exam before moving on to the next patient?

Student Name: _____

Clinical Site: High-Risk OB (MFM)

Clinical Rotation Date: _____



Outpatient Clinical Orientation

This questionnaire is designed to help you become familiar with and confident in each new clinical environment you will be working in. It must be completed at the beginning of each new rotation and will count as a grade for the Introduction to Sonography and Scan Lab course.

***Please submit your completed form to Caitlin Chisler either in person or as a PDF via email within one week of your clinical rotation start date.*

Department Overview

Ask one of the staff sonographers you are working with to help you locate each of the following items. Once completed, have them initial and sign the corresponding spaces below.

<i>Location</i>	<i>Sonographer Initials</i>
Waiting room	
Supply cart/closet (for restocking gel, gloves, transducer covers, etc.)	
Linen cart (for restocking rooms)	
Supplies/linens in US room	
Staff and/or patient restrooms	
Crash cart	
Nearest emergency exit	
Fire extinguisher	
Nearest fire alarm	

Sonographer Name: _____ Signature: _____

This signature confirms that the student was oriented to the locations listed above..



Semester 3



SONT 302 – Applied Sonography III

2026-2027

Term: Semester III

Hours: 680 clock hours

Instructor(s): Caitlin Chisler BA, RDMS, RT(R)
Various Staff Technologists

Prerequisites: SONT 301 – Applied Sonography II

Locations: WVU Medicine Physician's Office Center
WVU Medicine Ruby Memorial Hospital, Inpatient
WVU Medicine Children's Hospital
WVU Medicine Cheat Lake Physicians, General, OB/GYN
WVU Medicine University Town Center, General, OB/GYN
WVU Medicine Children's Hospital, Maternal Fetal Medicine
WVU Medicine Fairmont Gateway Clinic, General
WVU Medicine Ruby Memorial Hospital,
Vascular Lab WVU Medicine Betty Puskar
Breast Care Center

Time: Monday – Friday

Hours vary by clinical site. See clinical schedule for specifics.

Textbook: N/A

Supporting Documents: Clinical Handbook and Trajecsys Report System

Course Description:

This course is the final clinical education course in the Diagnostic Medical Sonography Program. Students apply and refine their scanning skills, clinical knowledge, and professional behavior across assigned ultrasound departments. With appropriate supervision, students perform ultrasound examinations with increased independence and efficiency, complete required clinical competencies, and gain experience with workflow and professional responsibilities. This course prepares students for graduation and entry-level practice as a diagnostic medical sonographer.

Course Objectives:

1. Adhere to the dress code and all other program and clinical site policies as outlined in the Student Handbook.
2. Demonstrate professional, ethical, and compassionate patient care.
3. Apply standard infection prevention and control practices.
4. Communicate effectively with patients, clinical staff, and instructors.
5. Independently prepare patients and examination rooms for ultrasound procedures.
6. Perform ultrasound examinations at an entry-level standard under appropriate supervision.
7. Identify normal anatomy, pathological findings, and anatomical variants during ultrasound examinations.
8. Evaluate examination findings and modify scanning protocols as clinically appropriate.

9. Demonstrate proper operation, care, and quality assurance practices for ultrasound equipment.
10. Maintain accurate clinical documentation and complete all required clinical records.
11. Demonstrate entry-level competency in scanning, patient care, critical thinking, and professional skills through clinical competency evaluations.
12. Achieve a minimum score of 86% on all required clinical competency examinations and maintain a minimum overall clinical grade of 86%.
13. Successfully complete all required clinical competencies and proficiencies necessary for program completion and graduation.

Clinical Grading Scale:

The clinical grade is determined using the following grading scale.

Percentage Grade	Letter Grade	Quality Points
100% - 93%	A	4.0
92% - 86%	B	3.0
85% - 78%	C	2.0
77% - 70%	D	1.0
< 70%	F	0.0

Clinical Grade Standard (minimum):

Each student must achieve a minimum overall weighted clinical average of **86% (B)** by the end of each semester to complete the clinical education requirements of the program. Successful completion of each clinical level is required for progression to the next semester. Clinical levels may not be repeated; therefore, students who fail to achieve the required 86% (B) clinical average will be dismissed from the program.

The Clinical Education Coordinator will provide clinical progress counseling at midterm, at the end of the semester, and as needed. However, students are ultimately responsible for monitoring their own clinical progress and academic standing.

Clinical Grade Calculation:

The final clinical grade is based on the following components and weighted percentages:

Component	Weighted Average
Orientation Forms/Logs/Clinical Instructor Evals	10%
Weekly Clinical Evaluations	10%
Clinical Coordinator Evaluation	10%
Scan Lab Assessments	20%
Competencies/Proficiencies	50%

Clinical Orientation Forms:

Students are required to complete a *Clinical Orientation* form at the beginning of each new clinical rotation. The form is designed to familiarize students with the department, equipment, protocols, and expectations of the assigned clinical area. Completed forms must be submitted **within one week** of the rotation start date. Students will earn one (1) point for each completed form submitted by the deadline.

Daily Exam Logs:

Students are required to maintain accurate and up-to-date daily exam logs in the Trajecsys Clinical Report System throughout each clinical rotation. Daily logs serve as documentation of the procedures observed, assisted with, or performed by the student and are required for accreditation and program reporting purposes. Students must log a minimum of fifteen (15) examinations per week. Participation levels should be accurately recorded for each exam.

The following participation levels are used when filling out the Daily Log sheet in Trajecsys:

1. Observed (Level 1):

The student assists with patient care and examination room preparation and clean-up. The student observes the sonographer perform the entire examination but does not scan.

2. Observed and Assisted (Level 2):

The student assists with patient care and examination room preparation and clean-up. The student also provides limited assistance to the sonographer during the examination but does not scan.

3. Scanned < 10 minutes (Level 3):

The student assists with patient care and examination room preparation and clean-up. Under direct supervision, the student scans for 10 minutes or less during the examination.

4. Scanned > 10 minutes (Level 4):

The student assists with patient care and examination room preparation and clean-up. Under direct supervision, the student scans for more than 10 minutes but does not complete the entire examination.

5. Scanned entire exam (Level 5):

The student assists with patient care and examination room preparation and clean-up. Under direct supervision, the student performs the entire sonographic examination.

Students are eligible to complete a clinical competency for a specific exam after documenting a minimum of two (2) Level 5 exams of the same type in the Daily Log sheet.

Staff Clinical Instructor Evaluations:

At the end of each clinical rotation, students are required to complete a *Clinical Instructor Evaluation* in Trajecsys. These evaluations allow students to provide feedback on the quality of clinical instruction and support continuous improvement of the clinical education program. Evaluation scores and comments are shared with the supervising sonographer's manager. Student identities are not disclosed, and all feedback is handled in a professional and confidential manner.

Timely completion of Orientation Forms, Daily Exam Logs and Clinical Instructor Evaluations is required. Together, these requirements account for **10%** of the overall clinical grade.

Weekly Clinical Evaluations:

At the end of each clinical rotation, students are responsible for ensuring that a supervising sonographer completes a performance evaluation in Trajecsys. This evaluation serves as the sonographer's formal assessment of the student's clinical performance, professional behavior, technical skills, and readiness for entry-level practice.

The *Clinical Weekly Evaluation* form will be used throughout Semester III and will contribute to the

student's overall clinical course grade. Students are expected to review evaluation feedback and demonstrate continued growth toward entry-level competency in all aspects of clinical practice.

Each evaluation category is scored using the following scale:

- 5 – Excellent
- 4 – Above Average
- 3—Average
- 2—Needs Improvement
- 1—Unsatisfactory

The average score across all categories determines the student's clinical evaluation points for that rotation. These points will contribute to the Weekly Clinical Evaluations portion of the Clinical Grade Calculation, which accounts for **10%** of the overall grade.

If multiple evaluations are submitted for a single rotation, the average of all submitted evaluations will be used in grade calculation. Failure to obtain a completed evaluation will result in the student receiving **zero** points for that rotation.

Clinical Coordinator Evaluation:

Prior to midterm and at the end of each semester, the Clinical Coordinator will evaluate each student's overall clinical performance using the *Clinical Coordinator Evaluation* form. Each category is scored on a scale of 1 to 5 points. The average score across all categories accounts for **10%** of the overall clinic grade.

Scan Lab Assessments:

Most of the required scanning skills are practiced in the scan lab. Once a student feels comfortable with the scanning protocol and examination process, they should notify the instructor that they are ready to complete a scan lab assessment. Students who achieve a score of **92%** or higher on this assessment will be eligible to complete practice exams and ultimately complete the clinical competency for the corresponding exam. Scan lab assessments account for **20%** of the overall clinical grade.

Competencies:

What is a competency?

An entry-level competency demonstrates a student's ability to safely, effectively, and professionally perform a specific ultrasound examination in the clinical setting under the supervision of a credentialed sonographer. Competency assessment evaluates the student's ability to integrate didactic knowledge, technical scanning skills, critical thinking, patient care, and professional behavior while performing examinations on real patients.

To be considered competent, the student should be able to:

- Verify patient identity and confirm the correct exam order.
- Communicate effectively with the patient to explain the examination, address questions, and promote patient comfort.
- Prepare ultrasound equipment, including selection of the appropriate transducer and exam setting.
- Follow established departmental and program scanning protocols.
- Acquire diagnostic-quality images in the appropriate scanning planes.

- Demonstrate knowledge of normal anatomy and recognize findings that may require additional evaluation.
- Apply proper infection control procedures, patient safety practices, and ergonomic principles.
- Communicate effectively and professionally with patients, supervising sonographers, and other healthcare personnel.
- Complete all required documentation accurately and thoroughly.

Competencies are completed on real patients in the clinical setting and are intended to verify that the student can complete the exam with minimal assistance while maintaining patient safety, professionalism, and image quality standards. A credentialed sonographer remains responsible for the exam and must be present to provide supervision, guidance, and assistance as needed.

Required Clinical Competencies:

Students must successfully complete a minimum of 29 clinical competencies to satisfy program graduation requirements.

Abdomen (13)	OB/GYN (6)	Vascular (6)	Elective (2)
Adult Renal	Transabdominal Pelvis	Aorta/IVC	Soft Tissue Neck
Thyroid	Transvaginal Pelvis	Carotid	Elastography
Right Upper Quadrant	1 st Trimester	PVR/ABI	Superficial ST (w/ path)
Spleen	2 nd Trimester – Anatomy	Venous Lower	Pediatric Spine
Chest	3 rd Trimester - Growth	Venous Upper	GI Tract**
Complete Abdomen	Biophysical Profile	Arterial Lower	Renal Transplant
Biopsy			
Scrotum			
Pediatric Renal			
Neonatal Head			
Breast			
Abdominal Doppler*			
GI Tract**			

*Can be done as a proficiency or a competency

**The GI Tract exams must be different types of exams.

Proficiency—as defined in the JRC-DMS standards and guidelines—may be demonstrated in a clinical setting or in a simulated environment.

- Per the JRC-DMS, the only exams that may be performed as a proficiency include the Abdominal Doppler assessment (hepatic, mesenteric, and/or renal vasculature), and the GI tract assessment.

Competency—as defined in the JRC-DMS standards and guidelines—must be done in a clinical setting.

***Not all listed competencies are expected to be completed during the first semester. Eligibility is based on student readiness, clinical opportunity, and program guidance.*

Timing of Competencies:

Third Semester:

Students must successfully complete the remaining **sixteen (16)** competencies/proficiencies by the end of the third semester, with a minimum of **five (5)** completed by midterm. Completion of all

required competencies and proficiencies is a graduation requirement.

Recommended competencies/proficiencies include, but are not limited to:

- Biopsy
- Neonatal Head
- Breast
- Abdominal Doppler*
- GI Tract*
- Transvaginal Pelvis
- 1st Trimester
- 2nd Trimester
- 3rd Trimester
- Scrotum
- Biophysical Profile
- Venous Upper
- Venous Lower
- Arterial Lower
- Elective 1
- Elective 2

Competencies should be selected in consultation with the clinical instructor and based on examination availability, student skill level, and clinical site workflow.

All clinical evaluation forms and related documentation are available in the Clinical Handbook.

Student Name: _____

Clinical Site: Breast Care Center (BCC)

Clinical Rotation Date: _____



Outpatient Clinical Orientation

This questionnaire is designed to help you become familiar with and confident in each new clinical environment you will be working in. It must be completed at the beginning of each new rotation and will count as a grade for the Introduction to Sonography and Scan Lab course.

***Please submit your completed form to Caitlin Chisler either in person or as a PDF via email within one week of your clinical rotation start date.*

Department Overview

Ask one of the staff sonographers you are working with to help you locate each of the following items. Once completed, have them initial and sign the corresponding spaces below.

Location	Sonographer Initials
Waiting room	
Supply cart/closet (for restocking gel, gloves, transducer covers, etc.)	
Linen cart (for restocking rooms)	
Supplies/linens in US room	
Staff and/or patient restrooms	
Crash cart	
Nearest emergency exit	
Fire extinguisher	
Nearest fire alarm	

Sonographer Name: _____ Signature: _____

This signature confirms that the student was oriented to the locations listed above..



Forms and Evaluation Examples

List of Competencies

Use this to keep track of what you've completed and what you have left

	Assessment Lab		Clinical Competency/Proficiency			
	Date	Grade	Date	Tech	PT/SIM	Grade
General Patient Care Procedures						
CPR Certification						
Vitals (BP, Pulse, Temp, O2)						
Lift training						
Venipuncture						
Scanning Procedures	Date	Grade	Date	Tech	PT/SIM	Grade
Semester 1						
Adult Kidneys					PT	
Thyroid					PT	
Right Upper Quadrant					PT	
Spleen					PT	
Pediatric Renal					PT	
TA Pelvis					PT	
Semester 2						
Chest					PT	
Complete Abdomen					PT	
Biopsy					PT	
Scrotum					PT	
TV Pelvis					PT	
Fetal 1st Trimester					PT	
Aorta/IVC					PT	
Carotid					PT	
Venous Lower					PT	
Semester 3						
Neonatal Head					PT	
Breast					PT	
Abdominal Doppler*					PT	
GI Tract					PT	
Fetal 2nd Trimester					PT	
Fetal 3rd Trimester					PT	
Biophysical Profile					PT	
PVR or ABI					PT	
Venous Upper					PT	
Arterial Lower					PT	
Elective 1					PT	
Elective 2					PT	

Example of the entry-level weekly evaluation used July-September

Section I:					
A. Use of Ultrasound Equipment:					
Uses & attempts to gain knowledge of various functions of the ultrasound machine	<input type="radio"/> Unsatisfactory	<input type="radio"/> Needs Improvement	<input type="radio"/> Average	<input checked="" type="radio"/> Above Average	<input type="radio"/> Superior
Uses and attempts to gain knowledge of Merlin and Centricity	<input type="radio"/> Unsatisfactory	<input type="radio"/> Needs Improvement	<input type="radio"/> Average	<input checked="" type="radio"/> Above Average	<input type="radio"/> Superior
B. Technical Performance:					
Attempts to observe all exams and scan when appropriate	<input type="radio"/> Unsatisfactory	<input type="radio"/> Needs Improvement	<input type="radio"/> Average	<input checked="" type="radio"/> Above Average	<input type="radio"/> Superior
Able to enter vital information on the Patient data sheet	<input type="radio"/> Unsatisfactory	<input type="radio"/> Needs Improvement	<input type="radio"/> Average	<input checked="" type="radio"/> Above Average	<input type="radio"/> Superior
Correlates the patient history, lab values, & previous findings before the exam	<input type="radio"/> Unsatisfactory	<input type="radio"/> Needs Improvement	<input type="radio"/> Average	<input checked="" type="radio"/> Above Average	<input type="radio"/> Superior
Follows department procedures and carries them out efficiently. (Ex. paperwork, schedules, protocol, Merlin, etc.)	<input type="radio"/> Unsatisfactory	<input type="radio"/> Needs Improvement	<input type="radio"/> Average	<input checked="" type="radio"/> Above Average	<input type="radio"/> Superior
Assures rooms are adequately stocked (Ex. sheets, towels, scanning gel)	<input type="radio"/> Unsatisfactory	<input type="radio"/> Needs Improvement	<input type="radio"/> Average	<input checked="" type="radio"/> Above Average	<input type="radio"/> Superior
Utilization of gloves and mask (when necessary) for infection control.	<input type="radio"/> Unsatisfactory	<input type="radio"/> Needs Improvement	<input type="radio"/> Average	<input checked="" type="radio"/> Above Average	<input type="radio"/> Superior
Section II:					
A. Demeanor regarding...					
Patient	<input type="radio"/> Unsatisfactory	<input type="radio"/> Needs Improvement	<input type="radio"/> Average	<input checked="" type="radio"/> Above Average	<input type="radio"/> Superior
Staff	<input type="radio"/> Unsatisfactory	<input type="radio"/> Needs Improvement	<input type="radio"/> Average	<input checked="" type="radio"/> Above Average	<input type="radio"/> Superior
Profession	<input type="radio"/> Unsatisfactory	<input type="radio"/> Needs Improvement	<input type="radio"/> Average	<input checked="" type="radio"/> Above Average	<input type="radio"/> Superior
B. Attendance					
Participated with all exams during clinic, with the exception of didactic hours.	<input type="radio"/> Unsatisfactory	<input type="radio"/> Needs Improvement	<input type="radio"/> Average	<input checked="" type="radio"/> Above Average	<input type="radio"/> Superior
Satisfactory Attendance throughout rotation without tardiness	<input type="radio"/> Unsatisfactory	<input type="radio"/> Needs Improvement	<input type="radio"/> Average	<input checked="" type="radio"/> Above Average	<input type="radio"/> Superior
C. Appearance					
Follows the Clinical Policies regarding uniform guidelines and Personal Hygiene	<input type="radio"/> Unsatisfactory	<input type="radio"/> Needs Improvement	<input type="radio"/> Average	<input checked="" type="radio"/> Above Average	<input type="radio"/> Superior
Section III: Patient/Customer Communication					
Student effectively utilizes the AIDET Communication	<input type="radio"/> Unsatisfactory	<input type="radio"/> Needs Improvement	<input type="radio"/> Average	<input checked="" type="radio"/> Above Average	<input type="radio"/> Superior

EXAMPLE of a WEEKLY EVALUATION

This will be filled out for each rotation, by the sonographer that you worked with the most. This is the form that will be used after the Semester 1 midterm until graduation.

Clinical Weekly Evaluation

Communication Skills: Ability to communicate, interact and deal effectively with staff and patients. 1 2 3 4 5

Patient Perception: Demonstrates respect for patient; preserves patient modesty. Ability to perceive patient needs creating a warm, friendly and comfortable experience. 1 2 3 4 5

Dependability: Demonstrates reliability and follow-through regarding clinical responsibilities. 1 2 3 4 5

Initiative: Energy and motivation in starting and completing task. 1 2 3 4 5

Attitude: Willingness to be guided, directed and instructed while displaying positive response. 1 2 3 4 5

Organization: Ability to effectively plan, prepare for, and carry out procedural requirements. 1 2 3 4 5

Ability to Follow Directions: Degree to which student can listen, reason and interpret tasks. 1 2 3 4 5

Self-Confidence: Presents with maturity and competence; lacks timidity in dealing with patients or other associates and students. Not overly-confident or aloof. 1 2 3 4 5

Accountability: Present in assigned clinical areas; available to supervising sonographer; respectful of lunch and break times. 1 2 3 4 5

Quality of Clinical Procedures: Thoroughness in procedural performance; accuracy in completing procedures according to documented performance standards. 1 2 3 4 5

Did the student use their cellphone or smartwatch while in the clinic? Yes No

Did the student keep the exam room stocked with linen, gel, gloves, etc.? Yes No

The greatest strength(s) demonstrated by this student during this assignment has been:

The area(s) most requiring development based upon the student's performance during this assignment would be:

- 1 = Poor
- 2 = Needs Improvement
- 3 = Average
- 4 = Above Average
- 5 = Excellent

Examples of the type of professional, detailed comments expected in evaluations:

STRENGTHS:

XXXXXXXX did a great job in her rotation through vascular clinical this week. She is attentive to the techs and the studies being performed. She is willing to participate and watch during exams without being asked. XXXXXXXX also did a great job scanning and helping the techs with their exams this week, like augmenting and working the machine when needed. She was able to start operating both machines with the techs this week. She is a good hands-on learner and we look forward to seeing how she progresses for her next rotation.

NEED TO WORK ON:

As she finishes her first week with XXXXXXXX, XXXXXXXX will need to work on her anatomy knowledge (which will come with learning more during class) and speaking up and/or asking questions. Feel free to ask questions after the exams!

Competency example

SECTION 1: INTERPRETATION OF REQUEST/DATA ENTRY/PATIENT CARE SKILLS

Completed necessary paperwork (EPIC documentation of exam times, additional charges if applicable, & patient education)

- Poor performance Needs Improvement
 Performance meets expectations
 Above average performance Exceptional performance
 N/A

Obtain pertinent information that will assist in the evaluation of the patient.

The student must gather and document the important patient history, which includes past exams, lab results, the reason for the current exam, and any surgical history.

- Poor performance Needs Improvement
 Performance meets expectations
 Above average performance Exceptional performance
 N/A

Communicated with the patient professionally

Informed the patient of their role as a student, obtained permission from the patient to begin the exam, and anticipated the patient's physical and emotional needs throughout the procedure.

- Poor performance Needs Improvement
 Performance meets expectations
 Above average performance Exceptional performance
 N/A

Patient rapport

Explained the roles of all personnel in the exam room, explained the examination process, and answered the patients' questions.

- Poor performance Needs Improvement
 Performance meets expectations
 Above average performance Exceptional performance
 N/A

Interacted professionally with members of the healthcare team

Able to plan and discuss the scan, and can suggest differential diagnoses.

- Poor performance Needs Improvement
 Performance meets expectations
 Above average performance Exceptional performance
 N/A

SECTION 2: TECHNICAL PROFICIENCY

Obtain necessary images of anatomy. (Refer to exam protocol)

Students are expected to understand and adhere to the protocol, including correctly labeling images, ensuring that all images have been saved, and that all images are in the correct order.

- Poor performance Needs Improvement
 Performance meets expectations
 Above average performance Exceptional performance
 N/A

Obtain accurate measurements of the necessary anatomy.

Student accurately measured the anatomy and/or pathology per protocol.

- Poor performance Needs Improvement
 Performance meets expectations
 Above average performance Exceptional performance
 N/A

Utilization of equipment and image settings (gain, preset, depth, resolution, contrast, artifact suppression, and/or zoom)

Has the ability to adjust the various settings beyond selecting the exam preset.

- Unsatisfactory Satisfactory N/A

Correctly labeled the images

Uses correct terminology and correct format to label the images.

- Unsatisfactory Satisfactory N/A

Transducer selection and patient positioning.

Understands which transducer will provide the most accurate images of the region of interest. Understands when and if changing patient position is necessary to obtain better visualization of the anatomy and pathology.

- Unsatisfactory Satisfactory N/A

Performs the exam and obtains images in a timely and efficient manner. Unsatisfactory Satisfactory N/A
Works within the scheduled time allotted for the patient. This includes all the steps from obtaining the patient history to ending the exam and completing the study notes.

Proper ergonomics, including sitting/standing, equipment (machine/bed/chair) adjustments, and transducer handling (grip/pressure/orientation). Unsatisfactory Satisfactory N/A

SECTION 3: KNOWLEDGE OF ANATOMY AND PATHOPHYSIOLOGY

Identify and image abnormalities and/or answer questions about related diseases and disease processes. Poor performance Needs Improvement
 Performance meets expectations
 Above average performance Exceptional performance
 N/A
Includes optimal images of pathology, including the measurements, color, and/or pulsed Doppler, and relational anatomy.
Able to describe the pathology to the sonographer and/or radiologist.

Evaluate and identify subject anatomy and adjacent anatomy Poor performance Needs Improvement
 Performance meets expectations
 Above average performance Exceptional performance
 N/A
Understands the sonographic appearance of the anatomical structures in the region of interest.

Evaluate echogenicity of anatomical structures and relevance. Poor performance Needs Improvement
 Performance meets expectations
 Above average performance Exceptional performance
 N/A
Understands the proper echogenicity of the anatomical structures and can adjust the technical factors to optimize the image.

Adequately convey findings and patient history to the supervising sonographer and, IF available, the interpreting physician. Poor performance Needs Improvement
 Performance meets expectations
 Above average performance Exceptional performance
 N/A
Can describe the normal and abnormal exam findings to the sonographer and can type the findings into the study notes.

Anatomy Unsatisfactory Satisfactory N/A

A list of anatomy and views specific to the examination

SECTION 4: ANALYTICAL PROBLEM-SOLVING Unsatisfactory Satisfactory N/A
Able to modify the procedure and/or technique to meet any unusual diagnostic or behavioral concerns.

Able to independently undertake any additional steps recommended by the physician or the examiner to complete the exam Unsatisfactory Satisfactory N/A

SECTION 5: RETEST RECOMMENDATIONS Yes No N/A
Does the student need to acquire additional experience before reattempting this competency?
Please leave constructive feedback in the comment box.

Instructor comments: Enter

Patient ID # (enter 1st 5 digits in text field at right) Enter

Example of the Clinical Coordinator Evaluation:

Clinical Coordinator Evaluation							
	Sem I Midterm	Sem I End	Sem II Midterm	Sem II End	Sem III Midterm	Sem III End	
Quality of Work							
Knowledge and Care of Equipment							
Ability to Follow Directions							
Contribution to Department Workload							
Initiative							
Punctuality & Attendance (Documentation)							
Appearance							
Professional Demeanor							
Cooperation and Teamwork							
Attitude Toward Criticism							
Ethical Reasoning							
Relationship with Instructors and Staff							
Attitude Toward Profession							
Handles Stressful Situations							
TOTAL	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

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