

APPENDIX B

**MISERICORDIA UNIVERSITY
COLLEGE OF HEALTH SCIENCES AND EDUCATION
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DIAGNOSTIC MEDICAL SONOGRAPHY**

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CLINICAL POLICY #1: STUDENT CLINICAL CLEARANCE

Purpose:

1. In conjunction with the College of Health Sciences and Education, the Diagnostic Medical Sonography Department has established requirements for students engaging in clinical education experiences.
2. The documentation of such requirements will be placed on file in the department of the student's major both prior to the beginning of clinical education experience and yearly thereafter.

Procedure:

1. The student will be provided with a Clinical Clearance packet, which contains a checklist. The student must use this list to ensure that all required items are included, prior to submission to the Clinical Coordinator. Some clinical education centers may require additional information, immunizations or testing. Students will be notified of any additional requirements. The students must comply with such requests in order to initiate a clinical education experience at that center.
3. Students are required to obtain initial clinical clearance as determined below:
 BS DMS Majors
 Freshman year:
 - Freshman Medical form with documentation of ability to meet program essential function.
 - Essential Functions checklist
 - Information regarding background checks with signature of understanding.
 - Forms due no later than August 15th.
 Sophomore year:
 - Clinical Packet provided in early Spring semester with return of required documents by July 1st.
 Certificate Students
 Incoming: Documents provided to incoming student in May with a return date of August 1st
4. All students are required to complete annual updates for some or all of the initial clearances. Students are responsible for knowing when their clearances expired. Examples are, but not limited to, health clearance, CPR, TB testing, and state background check. Student are strongly encouraged to be proactive in completing the required documentation at least two weeks in advance of expiration date. Students not meeting clinical requirements will be prohibited from attending clinical until requirements are met. Absence of excessive time may result in course failure or program dismissal.

Refer to Policy # 1 related to attendance.

5. The Health Clearance Form contains all mandatory tests that must be completed by the student's health care provider. The completed Health Clearance Form and copies of the final lab results must be submitted to the Clinical Coordinator of the student's major/program. Submission of this documentation is required for clinical clearance prior to the start of the actual clinical experience.
6. It is the responsibility of the student to maintain current clinical clearance.
7. Upon verification by the Clinical Coordinator that all required clinical documentation has been received the Clinical Coordinator will complete the Clinical Clearance Verification Form.
8. Clinical Clearance will be withheld if all requirements are not fulfilled. As a result, the clinical experience start will be delayed.
9. Some clinical sites may require copies of any/all clinical clearance documentation. Students will be required to sign a statement allowing Misericordia University to release such information.
10. Any change in medical status following the initial clearance, must be reported to the Clinical Coordinator, and the student must provide an updated clearance from a health care provider, to continue/resume classroom, laboratory and / or clinical activities.
11. Students who miss more than three sequential days of clinical or excessive absenteeism may be required to update their health clearance due to the following, but not limited to: illness for more than one week, trauma, repeated requests for extensions on assignments due to emotional, mental, or physical health, or communication regarding syncope or vertigo.

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Clinical Policy # 2 Immunization Policy

Purpose:

To outline the procedure for obtaining the essential immunizations necessary to participate in Misericordia University's in-house clinic, off campus clinics, and fieldwork placements.

Procedure:

1. Prior to the onset of any clinical assignment, all students must undergo a physical examination by their family physician and have their family physician complete the *Misericordia University Clearance* form. These clearances are required as per our contractual agreements with clinical sites.
2. On the required form, all students must provide proof of the following immunizations:
 - Rubella titer
 - 2 STEP TUBERCULIN SKIN TEST: **** 2 -STEP PPD TEST VIA MANTOUX** (fully documented) Chest x-ray report (**only** if PPD via MANTOUX is positive) Chest x-ray is necessary every three years following initial x-ray unless required by an off campus site
 - Tetanus Toxoid Booster within 10 years
 - MMR2 Vaccine or Titer
 - Poliomyelitis
 - Hepatitis B (must have two in series completed by due date of health clearance form)
 - Varicella vaccine or titer
 - Any other site specific requirements (ex: flu vaccine, etc...)
3. A student who chooses not to have all of the required immunizations will not be able to successfully meet the clinical requirements set forth by Clinical Education Centers; therefore, will not be able to complete the Clinical Sonography courses required of the Diagnostic Medical Sonography program at Misericordia University.

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CLINICAL POLICY #3: CRIMINAL RECORD CHECK AND CHILD ABUSE HISTORY CLEARANCE

Purpose:

To inform students interested in pursuing careers in the Health Sciences that:

1. Criminal Record Check, (Federal and/or State), and/or Child Abuse History Clearance, is required by the program, by the professional certification organization, licensing board, or by any site providing clinical placements for students during their education.
2. The student must authorize release of the results of any Criminal Record Check, (Federal and/or State), and/or Child Abuse History Clearance when requested by the program, university, or clinical placement site.
3. All costs associated with the Criminal Record Check, (Federal and/or State), and/or Child Abuse History Clearance are the responsibility of the student unless specifically stated otherwise by the party requesting the Criminal Record Check, (Federal and/or State), and/or Child Abuse History Clearance.
4. A positive Criminal Record Check, (Federal and/or State), and/or Child Abuse History Clearance may result in any of the following:
 - Inability to find a clinical placement
 - Dismissal from a clinical placement
 - Inability to obtain professional certification licensure
 - Legal ramifications
 - Inability to matriculate or continue within a program within the Health Sciences
 - Inability to meet requirements for graduation from the program of study
5. Any student with a history of a positive finding on a Criminal Record Check or Child Abuse History Clearance should seek advice from legal counsel for the potential impact on the ability of the student to meet specific program requirements or for eligibility for applying for national certification examinations prior to entering a program in the College of Health Sciences and Education.

Procedure:

1. Any student with a history of a positive finding or a change in status on a Criminal Record Check or Child Abuse History Clearance must inform the Clinical Coordinator who will inform the Department Chair and Dean of the College of Health Sciences and Education. The student should also seek advice from legal counsel for the potential impact on the ability of the student to meet specific program or licensing requirements.

2. The Department Chair and/or the Clinical Coordinator will inform students of the specific requirements and timing for Criminal Record Checks, (Federal and/or State), and/or Child Abuse History Clearances.
3. Clinical Placements that have required Criminal Record Checks, (Federal and/or State), and/or Child Abuse History Clearances policies will be clearly identified for students prior to placement in the facility.*
**Students should be aware that the individual Clinical Placements may institute changes in policies without notice. Should this occur the student is still responsible for meeting the requirements of the Clinical Placement.*
4. In cases where students are the direct recipient of the criminal record check the student must supply the Clinical Coordinator with a copy of the report. Any student who fails a Criminal Record Check, (Federal and/or State), and/or Child Abuse History Clearance has the right to appeal the result with the vendor and/or authorized issuing agency completing the clearance. The student must notify the Clinical Coordinator if and when an appeal will be initiated. In the event a student fails a criminal record check the Clinical Coordinator will notify the Department Chair and Dean. The student will be notified if s/he cannot be placed in a clinical facility.
5. Failure to comply with this Clinical Policy will preclude participation in clinical placement. As a result, the student may not be able to complete the requirements of the Health Sciences and Education program, may not be eligible for national, federal or state credentialing/licensing required for practice, and may be dismissed from the respective program.

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CLINICAL POLICY #4: CPR CERTIFICATION

Purpose:

1. To establish criteria for CPR certification.
2. To establish a procedure for submitting results.

Procedure:

1. Students are required to obtain certification in professional level/healthcare provider Adult (one and two person)/Infant/Child/AED CPR at their own expense. The CPR certification must include a face-to-face demonstration of ability to perform CPR on some form of mannequin.
2. Certification must be kept current for the length of time the students/clinical employee are enrolled in any clinical education experience.

A copy of the official certification card must be submitted to the designated clinical education coordinator by the date specified by each department. The coordinator may be reached by contacting the department's Clinical Coordinator at (570)674-8013.

3. Students will not be allowed to participate in clinical education experiences unless they provide proof of the approved level of CPR certification.
4. It is the responsibility of the students to be aware of the expiration date. They must submit a copy of the current CPR card to the designated clinical education coordinator prior to the respective expiration date. Failure to comply with these requirements will result in a delay in their clinical placement or removal from the clinical education site. If students are removed from the clinical education site and do not obtain clearance within the timeline designates by department, students will be subject to disciplinary action by their department.
5. CPR is offered by the Health and Wellness Center in the fall and spring semesters each year. Students can register for HP999. Students choosing to obtain CPR outside of Misericordia University should contact the Clinical Coordinator to verify the program being considered will be accepted by the program.

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CLINICAL POLICY #5: CLINICAL INCIDENT REPORT

Purpose:

To provide guidelines for reporting incidents or unusual occurrences involving a Misericordia University Health Sciences student who is participating in a clinical education experience.

An incident is defined as any occurrence out of the normal operation of the institution. The incident may result in an injury or a situation that could cause an injury to a patient, staff or student. Any situation when an incident report is filed at a clinical education site, a Misericordia University Clinical Incident report form must be filed.

Procedure:

1. See the clinical education center's documentation for specific policies regarding reporting of clinical incidents.
2. In the event of any student injury where treatment is not covered by the individual clinical education center, the student will incur the expense.
3. Forms for reporting clinical incidents may be obtained from the Clinical Coordinator.
4. This form must be completed by the student's clinical instructor or departmental supervisor, (clinical instructor – an appointed employee whose duty is to supervise **university** students at the clinical education center, who will, in that capacity, have direct patient contact and involvement in clinical activities), and signed by both the student and the clinical instructor or designee.
5. The original report will be forwarded to the Department Chair. Copies will be provided to the student and to the Clinical Instructor of the student's Clinical Education Center.



CLINICAL INCIDENT REPORT

Purpose: This form is used to report incidents or unusual occurrences involving a Misericordia University student who is engaged in a **scheduled** clinical activity. The report is to be completed by the student's clinical instructor/supervisor and signed by both the student and the clinical instructor/supervisor. The original report will be forwarded to the department chairperson. Copies will be provided to the student and to the Clinical Instructor of the student's Clinical Education Center.

PLEASE PRINT OR TYPE INFORMATION ON FORM AND ATTACHED SHEETS.

I.

Student Name: _____

Misericordia University e-mail address: _____

Program/Level: (Circle one)

Diagnostic Medical Sonography: Clinic I Clinic II Clinic III Clinic IV

Clinical Employee/Supervisor Name: _____

Title: _____

Date of Report: _____ **Date of Incident:** _____

Time of Incident: _____ a.m. p.m.

Name of clinical agency where incident occurred:

II.

What was the student doing when the incident occurred? (Be specific. If the student was using equipment or handling material, etc. please identify and tell what was being done.)

III.

How did the incident occur? (Describe fully the events that resulted in the incident. Tell what happened, how it happened, whether an injury occurred as a result, and name any equipment, personnel, or other factors involved in the incident. Attach additional pages to this form if necessary.)

IV.

If an injury resulted, explain who was injured and the nature and location of the injury. (Describe fully, including parts of the body affected.)

V.

Was medical attention received? (Describe by whom, where and when.)

*Signature is required in the appropriate space below **only if** student sustained an injury.*

Treatment **received** (student's signature)_____

Treatment **refused** (student's signature)_____

VI.

Who was notified of the incident? (Provide the names of each person in the order that they were notified of the incident. Be sure to include Misericordia University personnel. Include the dates when notified and by whom).

VII.

If applicable, provide a plan to keep other such incidents from occurring in the future. (This section is completed by the clinical instructor/supervisor in consultation with the student. List mutually agreed upon strategies.)

VIII.

Additional Comments: (Attach additional sheets as needed.)

Student Signature: _____ **Date:** _____

Clinical Instructor/Supervisor Signature: _____ **Date:** _____

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CLINICAL POLICY # 6: CLINICAL EDUCATION CLINICAL POLICY FOR INJURIES FROM SHARP INSTRUMENTS AND BLOOD BORNE PATHOGENS EXPOSURE

Purpose:

To develop a standard Clinical Policy for the prevention and treatment of sharp instrument injury and blood borne pathogens exposure incurred during clinical education experiences. This Clinical Policy is in compliance with Occupational Safety and Health Administration (OSHA) Blood Borne Pathogens Exposure Control Plan to which Misericordia University adheres.

Procedure:

1. Standard precautions and Transmission Based Precautions will be observed during any tasks that involve exposure to blood, body fluids, or tissues.
2. During clinical/fieldwork education experiences, clinical education center policies and procedures will apply regarding the care and use of needles and other exposure to blood borne pathogens. During academic education experiences, the Misericordia University department and clinical policies and procedures will apply.
3. After use, disposable syringes, needles and other sharp instruments will be placed in the appropriate puncture resistant sharps container.
4. The student is responsible for reviewing the clinical education center's documentation for specific policies regarding reporting of clinical incidents.
5. In the event a student is injured with a sharp instrument or otherwise exposed to blood borne pathogens during the clinical education experience, the Clinical Instructor or clinical education center's designated supervisor and the Clinical Coordinator and/or Department Chair must be notified immediately. The student is required to follow the Clinical Education Center's policies for reporting exposure to blood borne pathogens. If the student chooses to not follow the requirements, the student must submit in writing their refusal to follow requirements and accept full responsibility for any adverse outcomes. All expenses incurred are at the cost of the student.
6. As outlined in the Diagnostic Medical Sonography Clinical Policy #5 Clinical Incident Report, a Clinical Incident Report form must be completed and returned within 10 working days from the date of the incident. Forms for reporting clinical incidents may be obtained from the department's Clinical Coordinator by contacting 570-674-8013.
7. For specific policies and procedures regarding academic courses on campus, refer to the individual department Clinical Policy.

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CLINICAL POLICY #7: HIPAA CONFIDENTIALITY

Purpose:

To provide guidelines for providing HIPAA confidentiality education to all Misericordia University Health Sciences and Education students who will participate in clinical education experiences.

Procedure:

1. Prior to the commencement of student placement at the clinical education center the Clinical Coordinator will arrange for the students to complete HIPAA training.
2. Upon completion of HIPAA training, students will submit a verification of their HIPAA training to the department Clinical Coordinator.

Copies of the verification will be maintained in the students' clinical file and will be provided to the student's assigned clinical education center as requested.

3. Any student who has not successfully completed HIPAA training by the specified date will not be allowed to begin a clinical observation or experience as scheduled. Individual program policies regarding absence will be applied in these cases.
4. Clinical Education Centers may require student(s) to complete additional HIPAA education modules prior to commencement of attendance at the assigned site.

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CLINICAL POLICY #8: ESSENTIAL FUNCTIONS DOCUMENTATION PROCESS

Purpose:

To provide a consistent, timely, accurate method for documenting a student's capacity to perform essential functions.

- A. All students will be advised of the essential functions required of their Health Sciences majors/certificate program prior to formally entering the programs.
- B. Medical clearances related to the essential functions will be required of all students prior to their entering the laboratory or clinical education settings, following any subsequent change in health or functional status, and as deemed necessary by each individual department.
- C. By reviewing the list of essential functions, it is expected that students will be able to indicate their likeliness of successful compliance, document any limitations related to essential functions, and request specific accommodations relevant to the listed tasks, as necessary. Ideally, potential accommodations will be considered prior to entrance into the major or certificate program. Minimally, the medical clearances required prior to participation in the laboratory or clinical settings must define any limitations and the accommodations needed to comply with the essential functions.
- D. Reasonable accommodations will be provided to support students with documented disabilities. An accommodation cannot pose a threat to the patient, staff, student, or interfere with the program's essential functions, if it is to be considered reasonable.
- E. In compliance with a Clinical Policy respecting student's rights to privacy, confidential information will be released on a need-to know basis. In the clinical setting, information about a student's accommodations which relate to the clinical performance standards will need to be shared with clinical educators and those involved with accommodation delivery and facilitation. The student may or may not choose to disclose the underlying condition or specific details of their disability. Accommodations that relate solely to classroom experience need not be revealed to clinic personnel. The student must sign a written release (provided by the Student Success Center (SSC)) defining the information that will be shared in the clinical setting. Accommodations provided in the clinic are specific to the center and the clinical experience and may not be the same as the classroom.
- F. Clinical education center assignment/selection may include a consideration of the center's ability for flexibility, ability to work with disabled students, and facility and logistical characteristics. The clinical center will make the determination as to whether or not it can provide the reasonable accommodations.
- G. This process is intended to ensure equal access to professional programs. However, it is not an assurance of student success.

Procedures:

1. The departments will distribute the Essential Functions Document (EFD) to incoming students (BS entry-level and certificate) in advance of starting the program.
For certificate students, the Clinical Health Clearance Form (CCHF) will be provided with information on process and due date for all forms to be returned. For BS students, a letter will be sent to the student requiring acknowledgement of receipt and understanding of the essential functions document. BS students will be required to complete clinical clearance forms in early spring of sophomore year.
2. Certificate students return completed forms to the Clinical Coordinator and BS students return the form to the department Chair.
3. The Clinical Coordinator or Department Chair reviews the final paragraph of CCHF to determine if the Health Care Provider has indicated that the student is able to fulfill the essential functions of the profession, with or without accommodations.
4. If a student requests accommodations, the student must do so by applying for the Alternative Learners Program (ALP) or by completing the Disability Declaration form provided by Admissions. Once it is determined by the Assistant Director SSC/Office for Students with Disabilities (OSD), Clinical Director, and the student if accommodations are appropriate, then a Plan of Accommodation (POA) will be developed collaboratively by the ALP Director and the Clinical Coordinator. A copy of the POA is attached to the CCF. If special equipment is required, the cost will be paid by the student.
5. The Clinical Coordinator has a preliminary discussion with a potential clinical education center placement to discuss (without identifying the student) the specific accommodations required. If the center is agreeable, the Clinical Coordinator and student meet with clinical education center to review the POA.
6. If the University or Clinical Education Center cannot provide accommodations, the student will not be able to continue in the program of study.

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CLINICAL POLICY # 9: DRUG SCREENING CLINICAL POLICY

Purpose: To inform students interested in pursuing careers in the Health Sciences of the following:

1. Drug Screening is required by the Sonography Department prior to the start of clinical education and may be required at additional times by the clinical education center policies or contract.
2. The student must authorize release of the results of any Drug Screening when requested by the program, university, or clinical education center.
3. All costs associated with Drug Screening are the responsibility of the student unless specifically stated otherwise by the party requesting the Drug Screening.
4. A positive drug screening may result in any of the following:
 - inability to find a clinical placement
 - delay in clinical placement
 - dismissal from a clinical placement
 - inability to obtain professional licensure/certification
 - legal ramifications
 - inability to matriculate or continue within a program within the Health Sciences
 - inability to meet requirements for graduation from the program of study

Procedure:

1. The Clinical Coordinator will provide all necessary information for students to meet the requirement of the mandatory Drug Screening prior to clinical placement.
2. Individual Clinical Placements may institute changes in policies without notice. Should this occur the student is responsible for meeting all the requirements of the Clinical Placement.
3. In the event a student fails a drug screen and is notified by the vendor directly, the student must notify the Clinical Coordinator who will notify the Department Chair and Dean of the College of Health Sciences and education. Any student who fails a drug screening has the right to appeal the results with the vendor and/or authorized laboratory completing the screen. The student must notify the Clinical Coordinator if and when an appeal will be initiated. The student will be notified if s/he can or cannot be placed in a clinical facility. If a delay in placement results the department will determine when and if a make-up opportunity will be granted.
4. Failure to comply with this Clinical Policy will preclude participation in clinical placement. As a result, the student may not be able to complete the requirements of the Diagnostic Medical Sonography major or program, may not be eligible for federal or state credentialing/ licensing required for practice, and may be dismissed from the respective program.

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CLINICAL POLICY #10: POLICY FOR REPORTING VERBAL/SEXUAL HARASSMENT

Purpose:

To outline the standard clinical procedure a student must follow to report verbal/sexual harassment by individuals associated with your educational experiences.

Definition of Harassment

For purposes of this policy, harassment is defined as verbal or physical conduct that denigrates or shows hostility or aversion to their race, color, gender, age, marital status, religion, national origin, disability, gender identification, sexual orientation, medical condition, veteran status, or any other characteristic protected by law as unacceptable by an individual or by that individual's relatives, friends, or associates based on if the conduct also includes one or more of the following:

1. Has the purpose or effect of creating an intimidating, hostile, or offensive working environment;
2. Has the purpose or effect of unreasonably interfering with an individual's work performance;
3. Otherwise adversely affects an individual's employment opportunities;
4. Has the purpose or effect of creating an intimidating, hostile, or offensive study or learning environment;
5. Has the purpose or effect of unreasonably interfering with an individual's study or learning experience; or
6. Otherwise adversely affects an individual's educational opportunities.

Reporting

The student may communicate any concerns with the Clinical Coordinator, Department Chair, or Dean of Students. If communication occurs at the Department level, the faculty member is required to provide the information to the Dean of Students.

Policy

Refer to the Sexual Harassment and Misconduct Policy located in the Misericordia University Student Handbook located under the Student tab in MyMu portal for information on what constitutes sexual harassment and the procedures for reporting.