

Harrisburg Area Community College

# **Cardiovascular Technology Program Student Handbook**

2024/2025

Harrisburg Area Community College  
School of Health Sciences  
Cardiovascular Technology Programs  
Invasive Cardiovascular Technology  
Cardiac Sonography  
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This Cardiovascular Technology Student Handbook is current as of the date of publication. It may be necessary to make changes to this CVT Handbook due to changes within the program curriculum, academic calendar, or college personnel. Requirements mandated by CAAHEP or educational recommendations from the U.S. Department of Education (US-DOE) may also impose changes to this document.

COVID-19 Statement: HACC School of Health Sciences/CVT Programs will follow all active policies and procedures provided by the CDC, State of Pennsylvania and all Clinical Partner's (future clinical assignments) due to the COVID-19 pandemic.

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## Equal Opportunity Statement/PHRC Statement

### **STUDENTS IN NEED OF ACCOMMODATIONS:**

Harrisburg Area Community College is committed to providing reasonable accommodations to qualified students with disabilities to ensure that they have an equal opportunity to succeed and participate in their college and career goals. The College in accordance with federal compliance of the Americans with Disabilities Act as Amended (ADAAA), Sections 504/508 of the Rehabilitation Act of 1973 and Title IX of the Education Amendment of 1972. Title IX provides protection for students who are pregnant, parenting and may need to take a medical leave of absence due to pregnancy, childbirth, miscarriage, abortion and or recovery.

The Student Access Services Department, ensures no qualified person will be denied access to, participation in, or the benefits of, any program or activity operated by the college because of disability, pregnancy, or related conditions. Nor will individuals with a disability be subjected to discrimination while participating in college programs or activities due to disability. Whether students had an IEP in high school or not, they may be eligible for accommodations. Student Access Services encourage students who feel they may benefit from accommodations to contact us to learn more and review our webpage at:

<https://www.hacc.edu/Students/AcademicSupport/StudentAccessServices/index.cfm>

Student Access Coordinator contact and location information is available at:

<http://www.hacc.edu/Students/DisabilityServices/Contact-Disability-Services.cfm>

### **EEOC POLICY 005:**

It is the policy of Harrisburg Area Community College, in full accordance with the law, not to discriminate in employment, student admissions, student access and/or student services on the basis of race, color, religion, age, political affiliation or belief, gender, national origin, ancestry, disability, place of birth, General Education Development Certification (GED), marital status, sexual orientation, gender identity or expression, veteran status, genetic history/information, or any legally protected classification. HACC recognizes its responsibility to promote the principles of equal opportunity for employment, student admissions, and student services taking active steps to recruit minorities and women.

The Pennsylvania Human Relations Act (“PHRAct”) prohibits discrimination against prospective and current students because of race, color, sex, religious creed, ancestry, national origin, handicap or disability, record of a handicap or disability, perceived handicap or disability, relationship or association with an individual with a handicap or disability, use of a guide or support animal, and/or handling or training of support or guide animals.

The Pennsylvania Fair Educational Opportunities Act (“PFEOAct”) prohibits discrimination against prospective and current students because of race, religion, color, ancestry, national origin, sex, handicap or disability, record of a handicap or disability, perceived handicap or disability, and a relationship or association with an individual with a handicap or disability.

Information about these laws may be obtained by visiting the Pennsylvania Human Relations Commission website at <http://www.phrc.pa.gov/Pages/default.aspx#.V2HOujFuNS0>

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## **Philosophy and Mission Statement Program Goals**

### **Invasive Cardiovascular Technology Program**

#### **Mission Statement**

HACC will provide a comprehensive cardiovascular curriculum to develop the critical thinking, interpretative and technical skills necessary for entry-level positions in invasive cardiovascular technology and will instill the values of professionalism and compassion that are essential for healthcare professionals.

**Goal:** Prepare competent entry level cardiovascular technologists in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains for invasive cardiovascular technology.

**Goal 1:** Be knowledgeable in anatomy, pathology, physiology and technical methods required for entry-level invasive cardiovascular specialists.

#### **Outcomes:**

1. Demonstrate proficiency in technical skills related to the scrub, monitor and circulating roles of the invasive cardiovascular specialist.
2. Demonstrate competency in defining and assessing anatomy, pathology and physiology associated with the cardiovascular system.
3. Demonstrate understanding of current guidelines and standards set forth by the ACVP and CCI.
4. Demonstrate preparedness to apply for certification through CCI (RCIS).

**Goal 2:** Possess problem-solving, critical thinking, and analytical abilities.

**Outcomes:**

1. Apply knowledge of the cardiovascular system in the performance, documentation, and interpretation of pathology and physiology.
2. Display problem-solving abilities necessary to trouble-shoot issues encountered during the performance of examinations.
3. Utilize critical thinking skills during cardiac catheterization and interventional procedures.
4. Demonstrate analytical skills to assess and interpret clinical findings obtained in the clinical setting.

**Goal 3:** Possess the professional and ethical characteristics of a healthcare provider.

**Outcomes:**

1. Display appropriate interpersonal and professional skills.
2. Demonstrate the ability to interact respectfully and compassionately with patients, family members, co-workers, physicians and administrators.
3. Demonstrate respect for patient privacy and knowledge of HIPAA privacy la
4. Demonstrate cultural awareness when working with patients, their families and other healthcare team members.

**Goal 4:** Possess effective communication skills.

**Outcomes:**

1. Demonstrate accurate and effective verbal, written and electronic communication skills.
2. Utilize professional terminology and language in all communications.

**Goal 5:** Demonstrate understanding of the importance of professional growth, continuing education and professional certification.

**Outcomes:**

1. Demonstrate the ability to articulate knowledge of professional guidelines, standards of practice and accreditation.
2. Explain the need for life-long learning and continuing education.
3. Discuss the importance of professional memberships and certification.

**Goal 6:** Possess the knowledge and skills required of an entry-level invasive cardiovascular specialist.

**Outcomes:**

1. Demonstrate competency to perform complete standard diagnostic and interventional procedures.
2. Demonstrate the knowledge and skills required to sit for the national certification exam for invasive cardiovascular technologists (RCIS).
3. Display professional and ethical characteristics required of healthcare providers.

## Cardiac Sonography Program

### Mission Statement

HACC will provide a comprehensive cardiovascular curriculum to develop the critical thinking, interpretative and technical skills necessary for entry-level positions in cardiac sonography and will instill the values of professionalism and compassion that are essential for healthcare professionals.

**Goal:** Prepare competent entry level cardiovascular technologists in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains for adult echocardiography.

**Goal 1:** Be knowledgeable in anatomy, pathology, physiology and technical methods required for entry-level cardiac sonographers.

**Outcomes:**

1. Demonstrate proficiency in scanning and interpretation of clinical findings.
2. Demonstrate competency in defining and assessing anatomy, pathology and physiology associated with the cardiovascular system.
3. Demonstrate understanding of current guidelines and standards set forth by the ARDMS and ASE.
4. Demonstrate preparedness to apply for certification through ARDMS (RDCS) or CCI (RCS).

**Goal 2:** Possess problem-solving, critical thinking, and analytical abilities.

**Outcomes:**

1. Apply knowledge of the cardiovascular system in the performance, documentation, and interpretation of pathology and physiology.
2. Display problem-solving abilities necessary to trouble-shoot issues encountered during the performance of examinations.
3. Utilize critical thinking skills to acquire images and tailor studies to accurately document pathology.
4. Demonstrate analytical skills to assess and interpret clinical findings obtained in the clinical setting.

**Goal 3:** Possess the professional and ethical characteristics of a healthcare provider.

**Outcomes:**

1. Display appropriate interpersonal and professional skills.
2. Demonstrate the ability to interact respectfully and compassionately with patients, family members, co-workers, physicians and administrators.
3. Demonstrate respect for patient privacy and knowledge of HIPAA privacy laws.
4. Demonstrate cultural awareness when working with patients, their families and other healthcare team members.

**Goal 4:** Possess effective communication skills

**Outcomes:**

1. Demonstrate accurate and effective verbal, written and electronic communication skills.
2. Utilize professional terminology and language in all communications.

**Goal 5:** Demonstrate understanding of the importance of professional growth, continuing education and professional certification.

**Outcomes:**

1. Demonstrate the ability to articulate knowledge of professional guidelines, standards of practice and accreditation.
2. Explain the need for life-long learning and continuing education.
3. Discuss the importance of professional memberships and certification.

**Goal 6:** Possess the knowledge and skills required of an entry-level adult cardiac sonographer.

**Outcomes:**

1. Demonstrate competency to perform complete adult echocardiograms.
2. Demonstrate the knowledge and skills required to sit for the national certification exam for cardiac sonography (RDCS or RCS).
3. Display professional and ethical characteristics required of healthcare providers.

## Scopes of Practice for Cardiovascular Technology

The profession of Cardiovascular Technology was first recognized by the American Medical Association in 1982. The educational guidelines for cardiovascular technology were approved and adopted in 1985. Cardiovascular technologists are qualified by specialized training and education to perform established cardiovascular diagnostic and therapeutic procedures at the request or direction of a physician.

The profession of Cardiovascular Technology is a multi-disciplinary science which requires the technologist to be trained and educated in the basic and applied principles of several modalities. Once training is completed, the cardiovascular technologist will usually specialize and perform procedures in cardiac catheterization, echocardiography, or vascular ultrasound.

Cardiovascular Technology is a field recognized by the American Medical Association.

### Non-Invasive/Cardiac Sonographer

**Scope of Practice of the Profession:**

<https://www.asecho.org/practicefordiagnosticultrasoundprofessional/>

**Scope of Practice for the Diagnostic Ultrasound Professional**

Scope of Practice for the Diagnostic Ultrasound Professional. Preamble: The purpose of this document is to define the Scope of Practice for Diagnostic Ultrasound Professionals and to specify their roles as members of the health care team, acting in the best interest of the patient.

[www.asecho.org](http://www.asecho.org)

<https://www.ardms.org/scope-of-practice/>

**Scope of Practice - ARDMS**

ARDMS strongly encourages all prospective and current sonographers to understand their scope of practice. As a credentialing organization, ARDMS does not determine the scope of practice for sonographers. Currently, there is no national regulatory body that oversees the practice of ultrasound. ARDMS credentials are considered voluntary and not a mandatory license required to practice ...

[www.ardms.org](http://www.ardms.org)

**Preamble:**

The purpose of this document is to define the Scope of Practice for Diagnostic Ultrasound Professionals and to specify their roles as members of the health care team, acting in the best interest of the patient. This scope of practice is a “living” document that will evolve as the technology expands.

**Definition of the Profession:**

The Diagnostic Ultrasound Profession is a multi-specialty field comprised of Diagnostic Medical Sonography (with subspecialties in abdominal, neurologic, obstetrical/gynecologic and ophthalmic ultrasound), Diagnostic Cardiac Sonography (with subspecialties in adult and pediatric echocardiography), Vascular Technology, and other emerging fields. These diverse specialties are distinguished by their use of diagnostic medical ultrasound as a primary technology in their daily work. Certification<sup>1</sup> is considered the standard of practice in ultrasound. Individuals who are not yet certified should reference the Scope as a professional model and strive to become certified.

**Diagnostic Ultrasound Professionals:**

- Perform patient assessments
- Acquire and analyze data obtained using ultrasound and related diagnostic technologies
- Provide a summary of findings to the physician to aid in patient diagnosis and management
- Use independent judgment and systematic problem-solving methods to produce high quality diagnostic information and optimize patient care

<sup>1</sup> An example of credentials: RDMS (registered diagnostic medical sonographer), RDCS (registered diagnostic cardiac sonographer), RVT (registered vascular technologist); awarded by the American Registry of Diagnostic Medical Sonographers,<sup>®</sup> a certifying body with NCCA Category “A” membership.

<sup>2</sup> Credentials should be awarded by an agency certified by the National Commission for Certifying Agencies (NCCA).

**Endorsed by:**

- Society of Diagnostic Medical Sonography
- American Institute of Ultrasound Medicine
- American Society of Echocardiography\*
- Canadian Society of Diagnostic Medical Sonographers
- Society for Vascular Sonography\* Qualified endorsement

Source: [www.asecho.org](http://www.asecho.org)

## Invasive Cardiovascular Technologist

**Definition of the profession**

The Invasive Cardiovascular Technologist is a health care professional that, through the utilization of X-ray radiation and specialized equipment and under the direction of a qualified physician, performs procedures on patients resulting in accurate diagnosis and/or optimal treatment of congenital or acquired heart disease while maintaining maximum patient safety and comfort. The Invasive Cardiovascular Technologist performs/reviews a baseline patient assessment, evaluates patient response to diagnostic or interventional procedures and medications during cardiac catheterization laboratory procedures, participates in diagnostic and interventional procedures and provides patient care and drug administration commonly used in the cardiac catheterization laboratory under the direction of a qualified physician. The Invasive Cardiovascular Technologist is proficient in basic and advanced cardiac life support (pediatric advanced life support/PALS if working with children) as recommended by the American Heart Association. The Invasive Cardiovascular Technologist is proficient in the operation and maintenance, as specified by the manufacturer, of all diagnostic and interventional equipment used for procedures in his/her specific area of operation. Procedures are usually performed in the invasive cardiovascular lab, but may be performed in critical care areas or specialized clinics as necessitated or allowed by circumstances and equipment adaptability.

There are four primary roles in which the Invasive Cardiovascular Professional performs:

- 1) Scrub Assistant
- 2) Operation of imaging equipment
- 3) Circulating during the procedure
- 4) Patient Monitoring and Procedure Documentation

The following is a list of specific diagnostic examinations or procedures, which may be included in, but not limited to, an expected scope of practice for the Invasive Cardiovascular Professional. Adequate education, training and orientation for any procedure or subspecialty (ie; pediatrics, electrophysiology) are required before assuming responsibility as a staff member. It is recognized that many invasive cardiovascular labs are developing expanded practices that may include non-cardiac, peripheral/endovascular examinations and interventions. (From: Alliance of Cardiovascular Professionals).

The credential awarded to the invasive cardiovascular technologist, upon completion of the invasive registry examination, is that of Registered Cardiovascular Invasive Specialist (RCIS)

**Scope of Practice of the Profession:**

## Essential Requirements for Health Careers Programs

### Cardiac Sonography

All individuals, including persons with disabilities, who apply for admission to the Cardiac Sonography program must be able to perform specific essential functions with or without reasonable accommodation.

The following outlines the abilities and behavioral characteristics necessary for the student to be admitted to, continue in, and graduate from, the Cardiac Sonography program at HACC. **These essential requirements are standards of admission.**

The applicant should carefully review the essential requirements for the program and ask questions if not familiar with the activities or functions listed. The applicant must decide if he or she has any limitations that may restrict or interfere with satisfactory performance of any of the requirements. It is ultimately the applicant's responsibility to meet these essential requirements if accepted into the program.

The applicant should consult with the program director to discuss any individual situation if he or she may not be able to meet these essential requirements. Requests for reasonable accommodation will be considered. Contact the program director if you have any questions about this matter.

#### Communication

1. Communicate verbally using clear and effective English
2. Write legibly in clear and effective English using correct grammar, punctuation and spelling
3. Quickly and accurately comprehend and follow verbal instructions in English
4. Quickly and accurately read, comprehend and follow written instructions in English
5. Actively participate in group discussions
6. Use communication equipment – telephone, computer, other devices used for communication

#### Physical Skills

1. Possess fine and gross skills sufficient to handle equipment and provide safe and effective patient care
2. Exert maximum physical force to lift, push, pull or carry objects up to 50 pounds (oxygen cylinders, beds, patients, or any other type of equipment)
3. Wear lead aprons (approx. 10 pounds) up to 2 or more hours
4. Move quickly, freely and safely around the assigned work area and patient care settings
5. Sustain professional activities for up to 8 or more hours
6. Remain standing up to 8 or more hours
7. Remain sitting up to 8 or more hours
8. Reach above the shoulder level or below waist level to perform tasks as needed. Ability to manipulate transducer and ultrasound equipment. The patient is positioned on their left side during the procedure. The student /technologist must be able to hold and manipulate the transducer effectively in order to acquire diagnostic images. This requires leaning and manipulating the transducer with force.
9. Move upper and lower extremities, back, hips, and knees without restriction - bend, stoop, and squat
10. Keep hand and arm steady while moving arm or while holding arm and hand in one position while applying force with the transducer
11. Make precisely coordinated movements of the fingers of one or both hands to grasp, manipulate, or assemble very small objects
12. Coordinate two or more limbs (for example, two arms, two legs, or one leg and one arm) while sitting, standing, or lying down

## Observation and Sensory Skills

1. Hear, comprehend and interpret conversation and sounds not solely based on visual cues (including alarms, monitors, faint sounds, such as heart and breath sounds, taking blood pressure and Doppler)
2. Ability to see details at close range (within a few feet of the observer) and at a distance.
  - a) Function efficiently in various degrees of light, from dark to bright lighting
  - b) Differentiate colors, varying shades of same color, and shades of black, white and gray
  - c) Read fine print and handwriting
3. Detect and distinguish odors from clients and environment
4. Distinguish textures, degrees of firmness, temperature differences, pulse rate and vibrations; feel anatomical landmarks and veins
5. Distinguish and describe patient affect, body language and physical responses which the patient cannot verbally relay (i.e. facial expressions, sweating, trembling, color change, bleeding, etc.)

## Intellectual, Cognitive and Critical Thinking Skills

1. Concentrate on a task over a period of time without being distracted
2. Apply principles of critical, logical thinking to define problems, collect data, establish facts, and draw sensible and valid conclusions
3. Combine pieces of information to form general rules or conclusions (includes finding a relationship among seemingly unrelated events).
4. Perform multiple tasks simultaneously
5. Arrange things or actions in a certain order or pattern according to a specific rule or set of rules (alphabetize)
6. Integrate information quickly, consistently, accurately, especially in an emergency situation

## Behavior/Social Skills/Ethics

1. Display a high level of professionalism and discretion in all actions and communication (written, oral and electronic)
2. Function effectively and display integrity, poise and emotional stability under stress (emergency, critical, or dangerous situations) in actions with all (peers, patients, staff, faculty)
3. Use team approach to carry out responsibilities
4. Respond to all persons sensitively and with respect for cultural diversity
5. Maintain general good health and self-care
6. Display flexibility and adapt to changing environments
7. Manage time effectively
8. Accept responsibility for own behavior and be forthright about errors or uncertainty
9. Refuse to perform or participate in any illegal, unethical or incompetent acts, to include but not limited to the following: falsifying or knowingly making incorrect entries into a patient's record or related document; copying other student's written assignments; cheating on a quiz or examination; making untrue statements to a faculty member or administrator
10. Monitor/assess performance of self, other individuals, or organizations to make improvements or take corrective action
11. Capable of developing mature sensitive and effective relationships (with patients, staff, coworkers, etc.)

## Invasive Cardiovascular Technology

All individuals, including persons with disabilities, who apply for admission to the Invasive Cardiovascular Technology program must be able to perform specific essential functions with or without reasonable accommodation.

The following outlines the abilities and behavioral characteristics necessary for the student to be admitted to, continue in, and graduate from, the Invasive Cardiovascular Technology program at HACC. **These essential requirements are standards of admission.**

The applicant should carefully review the essential requirements for the program and ask questions if not familiar with the activities or functions listed. The applicant must decide if he or she has any limitations that may restrict or interfere with satisfactory performance of any of the requirements. It is ultimately the applicant's responsibility to meet these essential requirements if accepted into the program.

The applicant should consult with the program director to discuss any individual situation if he or she may not be able to meet these essential requirements. Requests for reasonable accommodation will be considered. Contact the program director if you have any questions about this matter.

### **Communication**

1. Communicate verbally using clear and effective English
2. Write legibly in clear and effective English using correct grammar, punctuation and spelling
3. Quickly and accurately comprehend and follow verbal instructions in English
4. Quickly and accurately read, comprehend and follow written instructions in English
5. Actively participate in group discussions
6. Use communication equipment – telephone, computer, other device used for communication

### **Physical Skills**

1. Possess fine and gross skills sufficient to handle equipment and provide safe and effective patient care
2. Exert maximum physical force to lift, push, pull or carry objects up to 50 pounds (oxygen cylinders, beds, patients, or any other type of equipment).
3. Wear lead aprons (approx. 10 pounds) up to 8 or more hours
4. Move quickly, freely and safely around the assigned work area and patient care settings
5. Sustain professional activities for up to 8 or more hours
6. Remain standing up to 8 or more hours
7. Remain sitting up to 8 or more hours
8. Reach above shoulder level (to manipulate equipment)
9. Reach below waist level (to manipulate equipment)
10. Move upper and lower extremities, back, hips, and knees without restriction - bend, stoop, and squat
11. Keep hand and arm steady while moving arm or while holding arm and hand in one position
12. Make precisely coordinated movements of the fingers of one or both hands to grasp, manipulate, or assemble very small objects
13. Coordinate two or more limbs (for example, two arms, two legs, or one leg and one arm) while sitting, standing, or lying down

### **Observation and Sensory Skills**

1. Hear, comprehend and interpret conversation and sounds not solely based on visual cues (including alarms, monitors, faint sounds, such as heart and breath sounds, taking blood pressure)
2. Ability to see details at close range (within a few feet of the observer) and at a distance.
  - a) Function efficiently in various degrees of light, from dark to bright lighting
  - b) Differentiate colors, varying shades of same color, and shades of black, white and gray
3. Read fine print and handwriting
4. Detect and distinguish odors from clients and environment
5. Distinguish textures, degrees of firmness, temperature differences, pulse rate and vibrations; feel anatomical landmarks and veins
6. Distinguish and describe patient affect, body language and physical responses which the patient cannot verbally relay (i.e. facial expressions, sweating, trembling, color change, bleeding, etc.)

### **Intellectual, Cognitive and Critical Thinking Skills**

1. Concentrate on a task over a period of time without being distracted
2. Apply principles of critical, logical thinking to define problems, collect data, establish facts, and draw sensible and valid conclusions
3. Combine pieces of information to form general rules or conclusions (includes finding a relationship among seemingly unrelated events).
4. Perform multiple tasks simultaneously
5. Arrange things or actions in a certain order or pattern according to a specific rule or set of rules (alphabetize)
6. Integrate information quickly, consistently, accurately, especially in an emergency situation

### **Behavior/Social Skills/Ethics**

1. Display a high level of professionalism and discretion in all actions and communication (written, oral and electronic)
2. Function effectively and display integrity, poise and emotional stability under stress (emergency, critical, or dangerous situations) in actions with all (peers, patients, staff, faculty)
3. Use team approach to carry out responsibilities Respond to all persons sensitively and with respect for cultural diversity
4. Maintain general good health and self-care
5. Display flexibility and adapt to changing environments
6. Manage time effectively
7. Accept responsibility for own behavior and be forthright about errors or uncertainty
8. Refuse to perform or participate in any illegal, unethical or incompetent acts, to include but not limited to the following: falsifying or knowingly making incorrect entries into a patient's record or related document; copying other student's written assignments; cheating on a quiz or examination; making untrue statements to a faculty member or administrator
9. Monitor/assess performance of self, other individuals, or organizations to make improvements or take corrective action
10. Capable of developing mature sensitive and effective relationships (with patients, staff, coworkers, etc.)

Print Name	HACC ID
Program	Date

### **Health Careers Admission Criteria Acknowledgement**

\_\_\_\_\_(Initial) I acknowledge that I have read and understand the program Admission Criteria.

### **Essential Requirements**

\_\_\_\_\_(Initial) As an applicant to this program or student in this program, I acknowledge that I have read and understand the essential requirements. **I acknowledge that I am capable of performing the abilities and skills outlined in this document** with or without reasonable accommodation and understand that my status as a student in this program depends on my continued ability to successfully demonstrate these abilities and skills. **I understand that if I am no longer able to meet these essential requirements, I will immediately notify the program director.**

\_\_\_\_\_(Initial) I understand that all students accepted into the clinical component of the program must undergo a **physical and a drug and alcohol screen annually at the student's expense** at the laboratory specified by the program on or before the stated deadline. This lab is used to protect the integrity of the results being reported. The test is at the cost of the student. No student will be admitted or retained in the program with a disqualifying result or failure to meet the specified deadline.

\_\_\_\_\_(Initial) I have read and understand the **Prohibitive Offense Procedure** as posted on the HACC Health Careers website.

\_\_\_\_\_(Initial) I understand that some clinical sites do not allow **tobacco/vaping use** and may require testing at the student's expense.

\_\_\_\_\_(Initial) I understand that all students accepted into the clinical component of the program must undergo an **annual Pennsylvania Child Abuse History Clearance, FBI Check, and State Police Criminal Record Check at the student's expense.** No student will be admitted or retained in the program with a disqualifying criminal history or child abuse

clearance.

\_\_\_\_\_(Initial) I understand that students accepted into the clinical component of the program may perform procedures which may expose them to bloodborne and airborne pathogens, ionizing radiation and potentially hazardous materials.

\_\_\_\_\_(initial) I understand that all students accepted into the clinical component of the program must have the following immunizations (at the student's expense): MMR, DPT, Varicella, Hepatitis B, an annual TB screen, and an annual influenza vaccination.

\_\_\_\_\_(initial) I understand that students accepted into the clinical component of the program may be required to have the COVID-19 vaccine and the program cannot guarantee clinical placement if I have not received the vaccination. HACC currently does not require me to be vaccinated against COVID. Clinical affiliates MAY require the vaccination and may not accept waivers to any vaccination from a student. We cannot control the decisions of the clinical facilities since we are considered their guest. If I choose not to be vaccinated, HACC may not be able to place me in a clinical rotation which would prevent me from completing the program. It is the decision of the clinical sites, not HACC, if immunizations are required for our students.

\_\_\_\_\_(Initial) I understand that in the event of an incident in the clinic, lab or outside rotation that I am responsible for all related medical expenses.

Have you ever been admitted to another clinical health career program at HACC from which you did not graduate?

\_\_\_\_\_I have not \_\_\_\_\_I have (Good Standing Form to be completed)

\_\_\_\_\_(initial) I understand my responsibility to disclose to the program director, any release from work at a hospital or health care facility resulting in ineligibility for rehire. This includes events that occurred prior to admission or during enrollment in the program of study.

\_\_\_\_\_(initial) I also understand that this may affect my eligibility to be admitted or continue in the program.

### **Health Careers Code of Ethics**

\_\_\_\_\_(initial) I understand that students shall be denied admission to a program for breaches in any of the Health Careers Code of ethics. Students who are in a clinical program and breach the code of ethics will be dismissed from the program and denied access to any other health career program at HACC.

### **Health Careers Medical Marijuana Policy**

\_\_\_\_\_(initial) I understand that due to current laws we cannot provide admission to the clinical phase in any of our Health Career Programs and students who have been admitted and are later to be found positive for medical marijuana will be removed.

\_\_\_\_\_(initial) I understand that intentional deceit, falsification or failure to disclose any information on this document will disqualify me from admission and/or continuation in any health career program at HACC.

Student Signature	Date
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## **Program Curriculum**

Ten core courses comprise the curriculum for the Cardiovascular Technology-Invasive Program. These courses are: CVT 200, CVT 210, CVT 211, CVT 212, CVT 213, CVT 214, CVT 215, CVT 216, CVT 217, and CVT 218.

Nine core courses comprise the curriculum for the Cardiovascular Technology-Cardiac Sonography Program. These courses are: CVT 219, CVT 220, CVT 221, CVT 222, CVT 223, CVT 224, CVT 226, CVT 228, and CVT 230.

### **Course Descriptions (see college catalog)**

**Course Sequence  
Core Curriculum Classes**

#### **Invasive Cardiovascular Technology**

##### **Fall I**

CVT 200	Cardiac Pathophysiology	4 credits
CVT 218	Cardiovascular Pharmacology	2 credits

**Spring**

CVT 210	Introduction to Invasive Cardiovascular Technology	3 credits
CVT 211	Radiation Safety and Invasive Instrumentation	2 credits
CVT 212	Invasive Hemodynamic Assessment	3 credits
CVT 213	Invasive Instrumentation Lab	2 credits

**Summer**

CVT 214	Interventional Cardiac Practices	4 credits
CVT 215	Invasive Cardiovascular Clinical I	4 credits

**Fall II**

CVT 216	Congenital Heart Disease	1 credit
CVT 217	Invasive Cardiovascular Clinical II	5 credits

**Cardiac Sonography****Fall I**

CVT 221	Cardiac Pathophysiology and Echo Concepts I	4 credits
CVT 222	Cardiac Sonography Physics and Instrumentation	3 credits

**Spring**

CVT 219	Introduction to Ultrasound Imaging Systems	1 credit
CVT 220	Introduction to Cardiac Sonography	3 credits
CVT 223	Cardiac Pathophysiology and Echo Concepts II	4 credits

**Summer**

CVT 224	Cardiac Sonography Clinical I	4 credits
CVT 226	Cardiac Hemodynamics	2 credits

**Fall II**

CVT 228	Cardiac Sonography Clinical II	5 credits
CVT 230	Introduction to Pediatric Echo	2 credits

**Additional Courses Required for Associate Degree Option:**

- FYS
- ENG 101
- ENG 102
- COM 101
- CVT 100
- Humanities and Arts Core Elective
- Core B: PSYCH 101
- BIO 121
- BIO 122
- MATH 111
- PE and Wellness (requirement)
- Core A Global Awareness course is required to meet graduation requirements. (See HACC catalog for complete list of courses)

Students are responsible to meet requirements for graduation and should be consulting with their academic advisor for questions and qualifications.

**Cardiovascular Technology****Policy for CVT 101**

This course must be completed within three years of application to the clinical component of the CVT programs. Students who have completed this course more than three years ago must meet with the Program Director.

## Program Graduation Requirements

Students must achieve successful completion of all required courses with a minimum grade of 75% - "C". In addition, students must obtain a minimum grade of a 75% on all final and practical examinations.

## Credentialing Examinations

Students are required to attempt one of the national registry exams.

### Cardiac Sonography Students:

ARDMS (RDMS Exam: two parts)

CCI (RCS Exam)

### Invasive Students:

CCI (RCIS Exam)

To accomplish this requirement, students will be provided direction in clinical course syllabi.

A fee is associated with each examination/application. Instructions regarding the application process and exam content outlines are provided on each registry website and in D2L for each course.

If a student does not pass the exam, they are required to take the program's comprehensive examination as required by the program's accrediting body (CAAHEP). This examination will be graded for student assessment. The focus of this exam is to assess knowledge and to enable the student to concentrate on areas of limitation prior to reattempting the appropriate registry exam. Students are expected to provide the DCE (professor) with a copy of the exam results from the Pearson testing center documenting the score earned.

## Other Program Graduation Requirements

To successfully remain in the CVT program and be eligible for graduation the student must:

- Complete all clinical rotations and clinical competencies
- Complete all course requirements by maintaining a grade of 75% "C" or better as defined in Grading System provided below.

Successfully complete the CCI and/or ARDMS registry exam

## Program Grading

Grades will be recorded as a numerical average or letter grade equivalent on graded assignments, which encompasses quizzes, tests and examinations. The grading scale for the cardiovascular technology program is as follows:

<u>Percentage Range</u>	<u>Letter Grade</u>	<u>Quality Point Average</u>
100% - 93%	A	4.0
92.9% - 85%	B	3.0
84.9% - 75%	C	2.0
74.9% - 70%	D	1.0
<69%	F	0.0

The grading scale for the clinical portion of the cardiovascular technology program is as follows:

<u>Percentage Range</u>	<u>Letter Grade</u>	<u>Quality Point Average</u>
100% -95%	A	4.0
94% -85%	B	3.0
84% -75%	C	2.0

Students enrolled in the program are expected to maintain a minimum grade for each course of 75% to be considered in good standing and eligible to advance to the next semester.

## Academic Honesty Policy

*Any student enrolled in the CVT curriculum identified as initiating, cooperating and/or participating in academic dishonesty will receive a zero for the exam or assignment. Please understand a 75% or better in every CVT course is required to continue in the program.*

### Purpose

The purpose of this Administrative Procedure provides a consistent definition of academic dishonesty, describes a process for dealing with dishonesty, and establishes a consistent set of disciplinary actions which may be imposed for such misconduct. Statements defining academic dishonesty will be available online.

### Definitions

Academic dishonesty is defined as an intentional act of deception in which a student seeks to claim credit for the work or effort of another person, or uses unauthorized material or fabricated information in any academic work. It includes, but is not limited to:

- A. Cheating – giving or receiving answers on assigned material, using materials or aids forbidden by the instructor, unauthorized possession of examinations, or any other intentional use or attempted use of unauthorized materials, information, or study aid.
- B. Plagiarism – the offering of someone else’s work, words, or idea as one’s own or using material from another source without acknowledgement.
- C. Interference – interfering without permission with the work of another student either by obtaining, changing or destroying the work of another student.
- D. Buying or selling of term papers, homework, examinations, laboratory assignments, computer programs, etc.
- E. Falsifying of one’s own or another’s academic records, or falsifying of admissions, registration, or other related college materials.
- F. Knowingly assisting someone who engages in A-E above.

Section 7324 of the Crimes Code of PA makes it a misdemeanor of the 3rd degree to see or offer for distribution any dissertation, thesis, term paper, essay, report, or other written assignment, or to sell or offer for distribution any assistance in the preparation of such assignments, for submission to an educational institution to meet the requirements for a degree, diploma, certificate, or course of study. ("Assignment" means a written, recorded, pictorial, artistic, or other academic task. "Prepare" means to create, write or in any way produce in whole or substantial part any such assignment.)

This law does not prohibit an educational institution or members of its faculty and staff from offering instruction or instructional services as part of its curricula or programs. Neither does the law apply to the sale of certain copyrighted materials described in Section 7324(f).

**Plagiarism** (using another person’s specific ideas or words as your own) is cheating. If you are found to have submitted plagiarized work, the paper will automatically receive a “0”. The instructor will then determine if the plagiarism reads as unintentional or intentional plagiarism.

**Unintentional plagiarism** is the failure to include in-text citations properly, although it is obvious that there was an attempt to cite using MLA format. Paraphrase of research that is too close to the original work also constitutes unintentional plagiarism in most cases. Unintentional plagiarism will result in a zero for that assignment; however, the student will have

the opportunity to correct the errors if the plagiarism occurred in the first draft. If it occurs in a final draft, the student will be permitted to revise the work for half credit.

**Intentional plagiarism** is much more serious, and it consists of, but is not exclusive to, having someone else write your paper for you, copying and pasting chunks of someone else's work without giving credit, and buying or borrowing someone else's paper and passing it off as your own. Intentional plagiarism will result in automatic failure of the assignment without the opportunity to submit a corrected draft, regardless of whether the error was made in a first or final draft. If a second case of plagiarism, *intentional or unintentional*, is discovered, the student will fail the course and a behavior report will be submitted to the college administration.

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## Progression and Readmission Policies

### Progression

A grade of 75% or above must be earned for each program course in order to progress to the next course and to successfully graduate from the Cardiovascular Technology Program.

### Retention

Support services are available for students who need help overcoming academic and personal barriers to succeed at the College. At any point, a student may initiate communication (appointments, etc.) with faculty or the Program Director. Students in jeopardy of failing are encouraged to obtain assistance from the appropriate professor during office hours.

### Withdrawal or Failure to Pass

Students may withdraw from a course for any reason without receiving a grade until 70% of the semester has been completed. After that time, students may still withdraw from a course but will be awarded the grade they earned at the time of withdrawal. (See policy below)

Earning a grade lower than 75% in any course in the Cardiovascular Technology Programs forfeits the student's ability to advance to the next consecutive courses. Students will be withdrawn from the program due to an inability to complete the required courses. The Program Director will assist the student in the withdrawal process.

### Readmission

A student who wishes to reenter the Cardiovascular Technology Program shall submit a request for readmission to the Program Director of Cardiovascular Technology as soon as possible. Students will apply to the program and be placed in the pool of applicants and will be given equal consideration for admission.

A student who has failed a cardiovascular technology course may only be readmitted one time with the permission of the faculty and must prove competency in all prior class work. Successful completion of any class with a CVT prefix requires the following: Any student who

does not receive a C or better will not be eligible to progress into the next CVT course or clinical rotation. Students must successfully complete both lecture and lab to attend clinical rotations. Students who receive less than a “C” grade will be dropped from the Cardiovascular Technology Program. There is not an opportunity to immediately repeat any course.

Students who pass lab and do not pass lecture/didactic but successfully complete the failed class within two semesters must demonstrate competency in all prior work (i.e., lab-competency) before being placed in a clinical rotation. Students in the 200-level sequence **who are unsuccessful** should re-apply to the program the following May. **Reapplication to the program does not guarantee acceptance.**

Acceptance into the Cardiovascular Technology Program does not guarantee successful completion or graduation from the program.

Students who fail to progress academically in the Cardiovascular Technology Program may reapply. However, acceptance is not guaranteed.

Students who are dismissed from the program for a Code of Ethics violation are not permitted to reapply the program.

## Problem Resolution

Students having difficulty in any aspect of the Cardiovascular Technology Program are asked to follow the **Chain of Command** listed below in their attempt to resolve the problem:

- Step 1. Discuss your concerns with the **Instructor** with whom you are having difficulty—either the classroom or clinical instructor.
- Step 2. Discuss your concerns with the **Program Director of Cardiovascular Technology**, if you still feel that the problem has not been resolved to your satisfaction.
- Step 3. Discuss your concerns with the **Dean** of the School of Health Sciences.

If the problem remains unresolved at this point, the Dean will discuss the college grievance policy.

## Course Policies

### Classroom Requirements

The course syllabus is provided the first day of class. Students should read the appropriate materials **before** lecture materials are presented.

Students are expected to be considerate of other students in the classroom and not to be disruptive. Talking during lecture can be extremely disruptive and may interfere with understanding complex material. Disruptive students will be asked to leave the classroom.

Academic Honesty policies will be strictly followed. Refer to the student handbook, college catalog, and AP 594. Students will be dismissed for all forms of Academic Dishonesty, including plagiarism and cheating during exams and/or quizzes. Re-appointment/re-application to the Cardiovascular Technology Program **will not** be considered.

## On-campus Attendance Policies

### Course/Curriculum Attendance

Students are expected to attend all scheduled theory classes. All absences will be recorded. **If a student is absent for 10% of the total classroom hours the student will be dropped a letter grade. If the student is absent for 15% of the total classroom hours the student will be dropped from the class.**

The individual student is responsible for all the material covered in class and all the assignments that are given in his/her absence. See syllabus for details.

### **Laboratory Attendance**

Students are expected to attend all learning experiences in required laboratory courses (CVT 213, CVT 214, CVT 219, CVT 220, CVT 222 and CVT 226). The faculty believes attendance is critical to learning. The development of technical skills is required to successfully participate in clinical rotations. If a student is unable to attend lab for any reason he/she must notify the instructor and make-up all time missed.

**Uniforms are required for all lab courses. Hair should be tied back.**

## **Clinical Attendance Policy**

Students are expected to report to the department promptly and remain there during the designated hours. The Director of Clinical Education or clinical mentor may excuse students early from the site provided patient exams and related tasks have been completed, with the understanding that students have a certain number of clinical hours they must complete. Leaving the clinical site early on a regular basis will delay the completion of the assigned clinical rotation.

**Students must attend clinical a minimum of 3-4 days (8-hour days) per week in order to complete clinical obligations by the mid-December deadline.** Failure to complete clinical hours by the deadline may result in dismissal from the program.

If a student is going to be late, she/he is expected to notify the Supervisor/Clinical Lead at the Clinical site assignment/hospital or outpatient office and the Director of Clinical Education (HACC) per the guidelines provide in each program clinical manual (to be reviewed during clinical orientation in May).

If a student needs to leave early, the request must be approved in advance. The judgment of the Director of Clinical Education and/or the clinical mentor will determine whether the request is appropriate. If the clinical instructor/mentor offers for the student to leave early due to low patient volumes the student is required to follow-up by documenting the reason for the early clock-out in the appropriate area in the Trajecsys Online Clinical Reporting System (as explained in the clinical manual (May of each year)).

If a student cannot be present during a clinical day, she/he must notify the contact person at the clinical facility before the scheduled reporting time. The student must also contact the Director of Clinical Education between the hours of 8:00 - 9:00 AM on the day of the absence. Students will be placed on probation after the first missed unexcused absence. If a second unexcused absence occurs the student **will** be dismissed from the program.

A physician's excuse is required for missed clinical time due to illness (i.e. more than three consecutive days). The excuse must be copied and given to the clinical mentor and the original must be given to the Director of Clinical Education.

### **Types of Absences:**

Examples of **excused** absences:

- You are ill and you contacted your clinical preceptor and director of clinical education prior to the start of your normal shift. If you need to miss more than three consecutive days you must present documentation from your physician (i.e.: a doctor's note).

- Your child is ill and you contacted your clinical preceptor and director of clinical education prior to the start of your normal shift.
- You requested time off and your request was approved in advance by the director of clinical education, your clinical preceptor and/or the program director. **See attached request form.**

Examples of **unexcused** absences:

- You do not report to your clinical site and you do not contact your clinical preceptor or Director of Clinical Education with a reason why, i.e.: you simply **do not show up** for your scheduled clinical day.
- You will be placed on probation (written warning) after the first missed clinical day for an ***unexcused*** absence.

**Any student not conforming to the Attendance Practice will be subject to disciplinary action that will result in dismissal from the program.**

**The clinical facilities expect students to arrive on time and be available to begin clinical duties upon arrival; this is your professional responsibility. You are a guest in the hospital.**

Absenteeism in the clinical area will result in an Unsatisfactory Overall Rating and/or dismissal from the program if the student is unable to meet clinical objectives. **In the event of an absence, a phone call must be placed to the Director of Clinical Education and to the hospital in the morning of the corresponding clinical day.**

### **Withdrawal/Incomplete Grades**

As per HACC's policy on attendance and withdraws, you must attend class regularly (actively participate online). You may only withdraw or be dropped from a course class during the first 70% of the course meetings (total course hours). No withdraws are possible after 70% of the class has been completed. During the drop/withdrawal period of a CVT course, if you miss more than 15% of the scheduled classes (activities) and you are failing the course, you will be removed from the course for excessive absences and will be assigned an "F". If you decide to withdraw from the course, you can do so through MyHACC. You will then receive a "W". If you have been academically dishonest, you will receive an "F" grade, whether you withdraw or are dropped from the class. After the drop/withdrawal period has ended, if you choose to withdraw, you will be assigned a grade based on the grade you have earned.

In extraordinary circumstances, a student may request an Incomplete grade for a course or courses in a semester. All coursework must be completed within 8 weeks of official grade submission at the end of the semester. Students must make an appointment with the course instructor to discuss the process. An *Incomplete Grade contract* will be generated documenting when the student will finish the outstanding assignments, exams or clinical learning requirements. Once all work is complete, the Incomplete (I) grade will be changed to the student's earned grade. Failure to complete the coursework within the 8-week time frame will result in a "F" grade for the course. This will preclude the student from continuing in the program.

### **Clinical Practice Statement**

Students are educated on safe practice and national standards of patient care and clinical practice. College program practice supersedes clinical site practice. If at any time a student has a question, they should contact clinical faculty immediately.

### **Competency to Attend Clinical and Perform Clinical Examinations on Patients**

It is important to recognize that we are supporting the community, patients we serve and our profession. Students who are not deemed competent to attend clinical will be withdrawn from the program. Students must demonstrate competency in laboratory skills, by successfully passing the practical final examination with a grade of "C" or better. Failure to do so will result in the student receiving a "D" for the course and being withdrawn from the program.

# Cardiovascular Technology Programs Professional Conduct

As future members of the cardiovascular profession, it is of utmost importance that cardiovascular technology students conduct themselves professionally at all times. The following are some of the guidelines for proper conduct. Because it is impossible to list all situations that you may encounter, we must rely on your maturity in handling each occurrence with professionalism. **Please remember your conduct in the clinical setting is a *direct reflection on the Cardiovascular Technology Program and Harrisburg Area Community College*.** Students are present in the clinical setting as guests of the facility for the purpose of education. Facility policies and procedures are to be followed; however, college program practice supersedes clinical facility practice.

- All students must assume a professional attitude at all times.
- Patients must be addressed by title and last name, i.e., Mr. Smith, Mrs. Jones. Members of the staff must be addressed by their title and last name, i.e., Miss Smith, Dr. Jones, etc., while in the presence of patients.
- All patients must be crosschecked for positive ID (wrist band, name, date of birth).
- Students shall not at any time administer water, medication or treatment of any kind, except under the direction of a physician. If a patient suddenly becomes ill or injured, a physician should be notified immediately.
- Students may not accept gratuities from patients.
- Students may not sleep during clinical.
- Loud talking and shouting down hallways, whistling, clowning and horseplay, or any other demonstration of unprofessional conduct, will not be tolerated.
- No food or drink may be taken into the patient care area.
- Students may not discuss their private affairs in front of patients or in any area where patients are likely to hear the discussion.
- Patients must not be left alone or unattended while in the non-invasive cardiology department, cardiac sonography department, or cardiac catheterization laboratory.
- Never argue with a patient, preceptor or Director of Clinical Education.
- Never let the patient read his or her own chart.
- The student will not give personal opinions concerning the patient's condition, diagnosis or physician. Always be careful in giving information to a patient, verifying it is information that you are permitted to discuss.
- In accordance with professional conduct, the student will never demonstrate behaviors that are abusive to a patient (physical or verbal); regardless of the treatment you receive from the patient.
- The use of profane language anywhere in the clinical setting is forbidden.
- Chewing gum is not permitted in the clinical setting.
- Smoking is not permitted in the clinical setting. A designated smoking area is generally made available by the clinical site; please adhere to the individual smoking policies at your assigned site.

- Spare time is to be utilized wisely. Reading of anything other than school-related material is not permitted, as is any form of needlework, sewing or other unrelated activities.
- Loitering in halls, control areas and processing areas will not be tolerated.
- The use of alcoholic beverages or drugs while on duty, reporting to class or clinical setting with alcohol on breath or under the influence of drugs will subject the student to disciplinary action in accordance with the College's Drug and Alcohol Practice.
- Personal use of clinical site computers and phones is prohibited.
- Any student participating in academic dishonesty will receive an "F" for the course and subsequently be dismissed from the program.
- Unprofessional conduct and insubordination results in probation or dismissal from the program, based on the severity of the behavior.
- Always talk with the patient in a professional manner and explain the procedures in simple terms that the patient will understand.
- Try to reassure the patient if you feel the patient is apprehensive or frightened.
- Inappropriate contact with the clinical site or its employees/preceptors including but not limited to e-mail, letters, phone calls and visits.
- Falsification of time records. (Trajecsys reporting/GPS location)

## **Interpersonal Communication**

It is the belief of the faculty that interpersonal communication is a key component to the students' success. Students should possess the following attributes in the classroom, clinical environment and laboratory (on campus).

- Ability to work well with others.
- Good communication skills.
- Ability to be punctual.
- Demonstrates motivation to participate.
- Demonstrates empathic and self-directed care of patients.
- Dependability.
- Consistency in work ethic and responsibility for one's actions.
- Consistency in ability to complete work in a timely fashion taking quantity into consideration.
- Thoroughness when completing assignments.
- The ability to exercise independent judgment.

A portion of the student's grade will depend on interpersonal communication with staff, students, patients, faculty and physicians.

The Director of Clinical Education will contact the clinical instructor/mentor periodically to confer about the student's progress.

## **Health Career Code of Ethics**

In order to promote excellence in patient care, the HACC Health Career student, while in their program, and/or in their clinical uniform, are to:

- Treat patients with respect for the dignity, rights, and value of each individual.

- Provide nondiscriminatory and equitable treatment for all patients.
- Promote and strive to protect the health, safety, and rights of each patient.
- Maintain confidentiality of patient information following privacy regulations required by law (HIPAA and Protected Health Information (PHI)).
- Not disclose or share information associated with their health career program about or relating to any patient, person, clinical facility, or clinical experience outside of the sanctioned educational context of the classroom or online course environment with oversight of an instructor. This includes communication in any format including verbal, written, and digital (includes but is not limited to text, email, photographs, and social media).
- Perform procedures or functions within his/her level of education in the profession.
- Refuse to participate in any illegal, unethical, or incompetent acts.
- Disclose any illegal, unethical, or incompetent acts of others to the proper authority.
- Avoid any conduct that creates a conflict of interest.
- Demonstrate professional behavior that reflects integrity and a positive image of the profession and the college.
- Follow all principles of ethical and professional behavior, as identified in the code of ethics of his/her chosen health career.

Students must understand that we take the code of ethics seriously, as do our clinical partners. As a result, violation of the code of ethics may result in the faculty filing a BIT (Behavioral Intervention Report) and may result in a student being asked to leave a clinical placement, and/or failing the course in which the violation occurred. If the student is dismissed from a clinical placement we may not be able to place a student at another clinical site, which will result in the student having to leave the program. Students must also be aware that violating HIPAA is a criminal offense.

Because we want all of our students to be successful, if you are ever in doubt of the ethics of a given choice, please consult your faculty in the program.

## Program Policies and Procedures

### Addressing Patients & Personnel

**Practice:** Students must address patients and personnel in the proper manner.

**Procedure:** Cardiovascular technology students are to address healthcare professionals by their proper names (i.e., Doctor Jones). Instructors are to be addressed by their title and last name unless otherwise specified by the instructor.

Patients should always be addressed by their last names, unless otherwise instructed.

Supervisors should be addressed by their title and last name, unless otherwise instructed.

### Non-business Telephone Calls and Computer Usage

**Practice:** Students are not to use the phones and/or computers for personal use (i.e., checking email or performing searches unrelated to cardiology) at their clinical sites. Phones are to be used for business purposes only or personally in the event of an emergency.

**Procedure:** Use of phones or computers will result in disciplinary action. If this condition persists, probation or dismissal for conduct reasons will result.

### Lunch

**Practice:** Student lunches will be 30 minutes in length. Daily clinical time is 8 ½ hours with a 30-minute lunch break.

**Procedure:** While in the clinical area, it will be the responsibility of the supervising technologist/clinical instructor to assign lunches. Students will take lunches according to their clinical room assignment/technologist's lunch time.

While in the classroom, breaks will be scheduled at the discretion of the individual instructor.

Lunches will be taken on the clinical site premises unless otherwise authorized by the clinical instructor.

## **Performance of Exams Prior to Competency Completion**

**Practice:** Students should perform all cardiac sonography examinations and invasive procedures with direct supervision.

**Procedure:** Cardiac Sonography and Invasive students who perform any examination without direct supervision will be placed on academic probation.

## **Completion of Attendance Records, Clinical Experience Records**

**Practice:** Attendance records and clinical experience evaluations must be completed and submitted to the Director of Clinical Education during the midterm and final part of the semester via the online Trajecsyst clinical reporting system. Incomplete attendance records and clinical experience evaluations will result in a deduction in the clinical grade.

**Procedure:** Students' clinical grade will be lowered by 5 points for each incomplete clinical experience record not submitted in accordance with the above Practice.

## **Breaks**

**Practice:** The academic calendar identifies breaks during and between semesters.

## **Attendance**

**Practice:** Students are required to participate in all assigned classes, laboratory classes and clinical assignments unless excused by the Director of Clinical Education for reasons of illness or emergency. Students are required to be present for classroom hours and clinical rotation hours identified in the semester schedules.

Students who have responsibilities outside the program **will not** be given any special consideration as to attendance requirements and are required to participate in all aspects of the program.

## **Tardiness**

**Practice:** Students are required to be punctual for both didactic and clinical rotation assignments.

Students who report late to their clinical rotation assignment will be referred to the CVT program handbook guidelines. Specifically, after two late arrivals the student will be given a written warning. Additional issues with tardiness will result in dismissal from the CVT program at the discretion of the Director of Clinical Education (DCE) and Program Director.

## **Inclement Weather Guidelines**

### **General Procedure**

In the event the college closes due to a snowstorm or other inclement weather, all health career students who are scheduled for class or a clinical experience that day will not report to class or clinical.

In the event a campus closes due to a snowstorm or other inclement weather, all health career students who are scheduled for class or a clinical experience originating (section campus) at that campus that day will not report to class or clinical.

In the event of inclement weather and the college remains open, all students are expected to make every reasonable effort to attend class and clinical. However, **undue risk when traveling is to be avoided**. Students who believe it is not safe to travel should notify the clinical area/affiliate and/or the director of clinical education/clinical instructor of their absence per the course syllabus and/or student clinical handbook. Students are responsible for making up missed assignments or the clinical day per the course syllabus and/or student clinical handbook.

In the event of the college announces a delayed opening:

Students who are scheduled for classes on campus should follow the college delayed opening schedule per course syllabus. Students who are scheduled for clinical start time prior to 9:00 AM should report at 9:00 AM. All other students report at the assigned time.

Program Director/Director of Clinical Education reserves the right to cancel a clinical rotation even if the campus remains open.

## Weather Emergency Announcement

Students scheduled to attend class on campus:

Subscribe to E2Campus for the campus where classes originate and check emails/text messages for notices of cancellation.

Refer to the HACC website at [www.hacc.edu](http://www.hacc.edu).

Students scheduled to attend a clinical experience:

Subscribe to E2Campus for the campus where classes originate and check emails/text messages for notices of cancellation.

Refer to the HACC website at [www.hacc.edu](http://www.hacc.edu).

Follow program procedure for clinical cancellation as stated in the course syllabus and/or student clinical handbook. Program will utilize a communication method (email or text message notification).

### **E2Campus Emergency alert system:**

e2Campus is HACC's emergency alert system. With e2Campus, you'll be informed quickly via text and email when the College has announcements, such as weather-related closings, delays, cancellations or emergencies.

<https://www.hacc.edu/CampusLife/ParkingPublicSafety/e2campus-faqs.cfm>

**Students are responsible for maintaining accuracy of their contact information with the program director.**

## Make-up Policy for Missed Clinical Hours/ Course Work

**Clinical Hours.** Any clinical time missed due to absence must be made up. Hours can be added at the end of the clinical rotation or inserted during the clinical rotation (i.e., staying longer than 8.5 hours, coming in on an extra day during the week, coming in on call with your preceptor). Any hours inserted into the clinical schedule must be approved by the clinical site. Students are required to complete **340 hours of clinical time (361 hours including lunches)** during the first clinical rotation and **500 hours of clinical time (531.5 hours including lunches)** during the second clinical rotation.

## Leave of Absence

**Practice:** Due to the nature of the program, leaves of absences may be granted to the individual student. If a major subject is missed during the leave of absence, the student will be terminated and may reapply the following year.

**Procedure:** Students must submit, in writing, a request for a leave of absence. This request must include the length and reason for the leave, which may include documentation from your physician.

The request will be reviewed by the Program Director for approval or disapproval. Students reapplying to the program after a one-year leave will be required to take a series of clinical and academic examinations to determine their level of competency. The results will be used to determine if advanced placement in the program is appropriate.

## Funeral Leave

**Practice:** In the event of a death in the immediate family:

- Parent
- Spouse
- Child
- Sibling (Brother/Sister)
- parent-in-law
- brother/sister-in-law
- grandparent
- legal guardian/significant other

The student will be granted time off by notifying the director of clinical education and program director.

The program recommends a minimum of 7 – 10 days leave immediately following the death. In the healthcare profession the program recognizes the necessity of allotting time to grieve.

This leave will be granted upon the DCE and PD receiving email notification. The DCE will then contact the clinical partner and place appropriate documentation in Trajecsys.

## Tardiness

**Practice:** Habitual tardiness will result in disciplinary action.

**Procedure:**

1. After two late arrivals in a semester, the student will be given a written warning.
2. Additional problems with tardiness will result in dismissal from the program at the discretion of the Director of Clinical Education.

## Clinical Experience Dress Code

1. Student's personal appearance and required attire must be neat and clean. Students are expected to dress in an appropriate and professional manner suitable for their specific work area and are to maintain a well-groomed professional appearance at all times. **Uniforms are required for all cardiovascular technology students.**
  - Hair should be tied back. Hair color must be a natural hair color (i.e. purple hair, etc...is not acceptable).
  - No artificial nails of any kind are acceptable.
  - Body piercing is not permissible. Belly-button rings must be appropriately covered (i.e. appropriate shirt length). Any visible tattoos must be covered while participating in clinical requirements.
  - Students should not wear clothing with insignias, pins, etc...which are controversial in nature and unrelated to the health care mission. Clothing should be neat and pressed with no emblems or labels that are visible (i.e. popular clothing insignias).
2. Students must display their HACC photo ID badge to serve as identification unless they have received a hospital issued ID badge. Many clinical affiliates require a hospital ID badge at the student's expense. **The required uniforms are gray/black tops and black pants.**
3. Shoes will be neat, clean, and should be comfortable. Clogs and high-heel shoes and open toe shoes are considered safety hazards and are not permitted.
4. Students may be dismissed from the clinical facility at the discretion of the preceptor due to inappropriate dress or grooming. Notification of this action by the preceptor will be documented on the student's evaluation form.
5. Although some hospitals may state that uniforms are not necessary the student is responsible to wear the uniform under HACC guidelines.

## References for Employment

All requests for references are to be made in writing to a faculty member, giving the name and address of the employer. See the program faculty for the “Authorization to Release Information” document. In order to provide a reference for any prospective employer, one release will be sufficient.

## Remediating an Unsafe Practice Incident

1. The student will submit an “Event Report” to the Program Director.
2. The Program Director and Director of Clinical Education may meet with the student to discuss the incident and remedial plan. The remedial plan will be prepared in writing and become part of the student's permanent file. A standard form is available.
3. The hospital may complete an incident report per their policy.

## Health Requirements Practice

The student will have to complete and submit all required documents to the Administrative Program Specialist of the Cardiovascular Technology programs. This includes all required health forms and vaccination history, prior to beginning the “Clinical” portion of the program.

I understand that as a health care worker:

- Many procedures performed may expose me to blood borne pathogens, ionizing radiation and potentially hazardous materials.
- I should have the following immunizations: Hepatitis B, MMR, DPT, Varicella, Influenza, and an annual TB screening unless I choose to request an allowable exemption.
- I may be required to submit a drug test after acceptance into the program and that I am responsible for this expense.

## Radiation Safety Policies and Procedures

*In compliance with the NRC Title 10 Code of Federal Regulations part 20.1502, the program shall monitor exposure to radiation and radioactive materials of faculty and students likely to receive in 1year, from sources external to the body, a dose in excess of 10 percent (500 mRems) of the annual dose limits for adult radiation workers (5 Rems). This includes all students attending clinical education as part of the clinical phase of the program, but does not include any pre-clinical students who would receive considerably less than this amount during their limited observational rotations in the imaging department.*

### Disciplinary Actions

Any infraction of the radiation safety program policies and procedures will result in disciplinary action to be determined according the severity of the infraction by the program officials. Minor infractions will at a minimum result in a documented written warning. Any infraction that results in the unnecessary radiation of a person will be considered a severe infraction, and may result in suspension, probation or dismissal from the program.

### General Procedures

1. If the student is unlikely to exceed 500 mrem per year, a personal dosimeter is not required.
2. Students whose radiation exposure is not monitored through a personal dosimeter will be classified as part of the general population, whose annual does limit is 100 mrem.

3. If a faculty member or a student in the clinical phase of the program is pregnant and declares her pregnancy in writing, the College will acquire a second dosimeter to be worn at the waist level. When lead apparel is appropriate, the device will be worn under the lead apparel at the waist level.
4. All students will receive basic radiation safety instruction prior to participation in clinical education.
5. Careful collimation shall be used to restrict the x-ray beam to the size of the image receptor, or area of interest, whichever is smaller.
6. The student must make use of the appropriate operator protection devices provided, e.g. lead apron, lead shield, etc.
7. The student must adhere to any special radiation safety instructions relating to specific equipment or procedures.
8. Any unusual occurrence or apparent malfunction of the x-ray apparatus that may involve increased exposure to radiation shall be reported to the college faculty instructor and facility supervisor.
9. The student will never be in the direct path of the x-ray beam. Students should always be protected.
10. Protective lead wear shall be worn during procedures.

### **ALARA Program and Reporting Program Policies**

The intent of the ALARA (As Low as Reasonable Achievable) program is to maintain exposure to radiation at levels that are as low as reasonably achievable. This radiation safety program is based on the premise that radiation exposure is not risk free. Therefore, exposure should be kept to levels below the limits permitted by the State of Pennsylvania, The Nuclear Regulatory Commission and other regulation agencies. ALARA is critical to our radiation protection philosophy. The dose limits for faculty and students in the clinical phase are:

#### **Effective Dose Limits**

1. Whole body deep dose 5,000 mrem (mRem)/year. 1,250 mRem/quarter.
2. **ALARA whole body dose limit:** 500 mRem/year; 125 mRem/quarter
3. **ALARA's Level 1 investigation limit is:** Whole body deep dose 125 mRem/quarter to 374 mRem/quarter
4. **ALARA's Level 2 investigation limit is:** Whole body deep dose > 375 mRem/quarter and to 499 mRem/quarter
5. **ALARA's Level 3 investigation limit is: Whole body is greater than 500 Rrem/quarter.**
6. **Declared pregnancy level:** Fetal dosimeter limit is 500 mRem/per gestation period 50 mRem/month

### **Personnel Radiation Monitoring Program Policies**

It is the policy of the Invasive CVT Program at Harrisburg Area Community College to evaluate exposure to personnel and students on a quarterly and accumulative basis.

#### **Materials and Methods**

1. All students in the clinical phase of the Invasive CVT program will be issued a personal dosimeter.
2. The dosimeter will be worn *at all times* when ionizing radiation is being used in the energized lab and at the assigned clinical site.
3. The dosimeter shall be positioned on the front of the body at the collar level; if lead apparel is worn, the device shall be positioned on the collar outside of the lead apparel.
4. All dosimeters are to be exchanged quarterly with program officials according to the assigned due date, which will coincide with schedule didactic classes.
5. If a student loses or damages his/her dosimeter device, the director of clinical education (DCE) or program director will be contacted prior to the students or faculty member reporting to an assigned clinical site.

#### **Procedures**

1. Every 3 months dosimeters are returned to the Director of Clinical Education and processed by an approved NVLAP (National Voluntary Laboratory Accreditation Program) facility.
2. When the dosimeter reports are received, they will be reviewed by the Program Director and Director of Clinical Education.

3. All readings will be monitored for levels exceeding the effective dose limits.
4. If any faculty's or student's reading exceeds the level one effective dose limit, the Director of Clinical Education or Program Director will meet with the faculty member or student to determine possible reasons for the exceeded level and review radiation safety practices. The student conference form will be used to document the advising session with students.
5. Additionally, if any faculty's or student's reading exceeds the level two or the fetal dose limit, the Program Director or designee will investigate the causes for the excessive dose level. The objective of the investigation will be to learn why the faculty member or student received the excessive dose and to determine what type of corrective action may be needed. A written report of findings with recommendations will be provided. Based the written report, corrective actions will be determined and documented on a student conference form for students and letter to the Program Director. Additionally, if any faculty's or student's reading exceeds 1250 mRem/quarter or 5000 mRem/year, the investigation must also include notification to the Pennsylvania Department of Environmental Protection (DEP) Radiation Control Division.
6. Copies of all notices, investigation, etc... will be maintained in the ALARA binder and for students in the individual's advising file.

### **Radiation Monitoring Reports**

1. Social Security numbers and birth dates are removed from the reports.
2. The exposure reports will be forwarded by the Program Director to the respective Director of Clinical Education. The Director of Clinical Education will arrange for students to review the report.
3. The exposure reports will be maintained in the Program Director's office.
4. A copy of the termination report will be provided to the student upon request.

## **Health Practice Related to Pregnancy**

1. In the event a student becomes pregnant, she must submit a statement from her obstetrician or midwife, which will be attached to the health form.
2. The obstetrician or midwife must state that she may continue to participate in cardiovascular technology clinical experiences. Recommended Center for Disease Control (CDC) guidelines related to avoidance of exposure to infectious diseases by pregnant women will be followed.
3. After delivery, written approval must be given prior to returning to clinical experience. Faculty will make reasonable efforts to allow make-up of missed clinical experiences; however, the student must recognize that extended absences may result in the inability to meet clinical objectives.
4. Students who withdraw from courses for documented health problems--including pregnancy--are allowed readmission to the course the following year, if so requested in a letter to the faculty.
5. ***For students in the Invasive CVT Program***, the Program Director, Radiological Physicist Consultant and the Radiation Safety Officer will review the radiation dosimetry report monthly.

## **Practice Regarding Standards of Behavior in Clinical and Classroom Settings**

### **Purpose**

The Cardiovascular Technology Program at Harrisburg Area Community College is committed to the education of cardiovascular technology students in a safe and conscientious manner. The Cardiovascular Technology Program is also committed to student participation in clinical settings. Each cardiovascular technology student must be able to complete the classroom and clinical components of the program described in the syllabus and clinical evaluation tool. A student's success in doing so can be affected by emotional/psychological problems that can interfere with their ability to function safely in the classroom or in a clinical setting. These problems can be related to drug, alcohol, and financial, sexual, spiritual, harassment, violence, or interpersonal issues. These problems sometimes manifest themselves in unsafe or unprofessional behavior of students involved in clinical programs. When this occurs, the Cardiovascular Technology Programs will have a strong interest in intervening.

Therefore, this Practice is established to identify potential and actual behavior problems, and to establish procedures to deal with these problems, in order to: (1) ensure patient safety and well-being, and (2) foster each student's successful completion of their course of study through a demonstration of safe cardiovascular technology practices.

#### Practice

It is the practice of the Cardiovascular Technology Programs to actively address any student's unsafe and/or unprofessional behavior in a clinical setting. Unsafe or unprofessional behavior can be the result of drug-induced or alcohol-induced impairments, sometimes in combination with interpersonal, financial, sexual or spiritual issues. Whatever its source, it is unacceptable behavior that is the primary focus of this Practice.

#### Procedure

- Students and faculty may identify unacceptable behaviors. Students are encouraged to talk with faculty about any problems that may cause the student difficulty in the educational program before the behavior becomes unacceptable. A Behavioral Intervention Report may be submitted.
- A faculty member in a clinical setting who identifies a student exhibiting unacceptable behavior may send that student home once it is determined that the student is able to go home safely.
- A faculty member in a clinical setting or a classroom setting who identifies a student exhibiting unacceptable behavior may ask the student to leave the room immediately and to speak with the faculty member at the end of the class or clinical session. In either case, the student will be directed to see the Program Director on or before the next class or clinical session. The Program Director will discuss the situation and possible helpful interventions with the student. A behavior intervention report may be submitted.
- If substance/alcohol abuse is suspected and the student denies drug/alcohol use, the student will be asked to submit to a prompt blood test at the student's expense.
- **In cases where representatives of HACC have reasonable suspicion of drug use, HACC reserves the right to require drug testing as a condition of remaining in the Program.**

### BLS Course Practice

- Prior to beginning CVT 103, CVT 224, or CVT 215, all students must show evidence of having completed a BLS for Healthcare Providers course.
- A BLS course completion card is accepted from the American Heart Association (BLS for healthcare providers). A current copy of the student's verification card shall be maintained on the student's file, while the student is enrolled in the program.
- Students are not permitted in the clinical area without a current BLS card. It is the student's responsibility to ensure that the BLS card is current.

### Employment Practice

- The student is urged to give careful consideration to his/her ability to engage in part-time or full-time employment during the academic year because of the considerable demands of the cardiovascular technology programs.
- Students will not be excused from theory or clinical experiences due to conflict with employment schedule.
- Full-time employment during clinical rotations is not acceptable.
- Third shift employment is not permitted during the clinical phase of the program.
  - The student has an obligation to complete course requirements prior to engaging in full-time employment.
    - Liability:
      - students may not function as an employee of a clinical site while they are fulfilling clinical time for a CVT program.
    - Conflicting roles:
      - Students have course objectives that must be met.
      - Employees must meet their employer's objectives in a given day.

- The patient deserves to know whether they are being cared for by an educated employee with clinical experience or a student accompanied by an educated healthcare professional.
- Clinical hours must be completed in order to graduate from the program.
- Students may not be paid for clinical time. This includes: CVT 103, CVT 224, CVT 228, CVT 215, and CVT 217.
- If it is found that a student is in violation of this Practice, it will result in **immediate dismissal** from the program.

## Time Requirements of the Clinical Portion of the Cardiovascular Technology Programs

### Invasive Cardiovascular Technology

#### Fall I

CVT 200	Cardiac Pathophysiology	2-classes/week (blended format)
CVT 218	Cardiovascular Pharmacology	online

#### Spring

CVT 210	Intro to Invasive Cardiovascular Technology	2- classes/week
CVT 211	Radiation Safety and Invasive Instrumentation	1- class/week (blended format)
CVT 212	Invasive Hemodynamic Assessment	1- classes/week
CVT 213	Invasive Instrumentation Lab	1- class/week

#### Summer

CVT 214	Interventional Cardiac Practices	1 class/week (blended format)
CVT 215	Invasive Cardiovascular Clinical I	3-4 days per week/340-hour clinical rotation

#### Fall II

CVT 216	Congenital Heart Disease	online
CVT 217	Invasive Cardiovascular Clinical II	4-5 days per week/500-hour clinical rotation

### Cardiac Sonography

#### Fall I

CVT 221	Cardiac Pathophysiology and Echo Concepts I	2-classes/week (blended)
CVT 222	Cardiac Sonography Physics and Instrumentation	2-class/week (online/lab)

#### Spring

CVT 219	Introduction to Ultrasound Imaging Systems	1-class/week (lab)
CVT 220	Introduction to Cardiac Sonography	2-classes/week (blended/lab)
CVT 223	Cardiac Pathophysiology and Echo Concepts II	2-class/week (blended)

#### Summer

CVT 224	Cardiac Sonography Clinical I	3-4 days per week/340 hour clinical rotation
CVT 226	Cardiac Hemodynamics	2-class and 1 lecture and lab/week (lab)

#### Fall II

CVT 228	Cardiac Sonography Clinical II	4-5 days per week/500 hour clinical rotation
CVT 230	Introduction to Pediatric Echo	1-class/week (online/lab)

## School of Health Sciences Policy on Student Injury or Accidental Exposure to Infectious Agent

All injuries, blood and body fluid exposures, or exposure to a potentially infection TB patient for whom infection control procedures have not been taken must be reported to your instructor, preceptor or supervisor immediately. He/she will follow the appropriate guidelines to assist you in receiving immediate medical attention. He/she will ask you about the incident and initiate the appropriate incident report and treatment processes. Be as specific as possible when giving details around the incident including the location and/or identification of the source or source person.



AN INCIDENT REPORT MUST BE FILED FOR EVERY INJURY OR ACCIDENTAL EXPOSURE. In case of accidental exposure to blood or body fluids, or exposure to TB, students are expected to follow the procedure outlined after the incident report. All forms will be retained on a secure drive by the Coordinator of Health Careers.

**Health & Public Service Department**  
**Student Injury or Accidental Exposure to Infectious Agent Incident Report Form**

**Directions:** This form should be completed by the student within immediately after an incident occurs. Clinical preceptor and Program Director/Director of Clinical Education should be notified immediately. Form must be in Program Director's office within 24 hours.

Student Name: \_\_\_\_\_ Student HACC ID: \_\_\_\_\_

Date of Incident: \_\_\_\_\_ Date of Report: \_\_\_\_\_

Place Incident Occurred (specify facility and unit/department): \_\_\_\_\_

Person(s) involved in the Incident: \_\_\_\_\_

Instructor/Preceptor/Supervisor Name: \_\_\_\_\_

Describe the Incident:

Detail what equipment was being used:

Initial Action(s), such as flushing, washing, medical care, etc...:

Describe planned follow-up action(s), such as medical care, etc.:

**The student must initial each statement below. The student's initials indicate understanding of each statement.**

\_\_\_\_\_ I realize that I am responsible for any health care expenses related to this situation.

\_\_\_\_\_ I realize that I have the right to refuse to be treated for injury and accept all responsibility.

Signature of Student: \_\_\_\_\_ Date: \_\_\_\_\_

Student Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**Accidental Exposure to Blood or Body Fluids**

**IMMEDIATELY after you have been exposed to blood or body fluid (i.e. needle stick, splash, and exposed mucosa) WASH THE EXPOSED AREA WITH SOAP AND WATER OR FLUSH EYES WITH AT LEAST ONE (1) LITER OF WATER OR NORMAL SALINE SOLUTION.**

**Follow the appropriate procedure based upon where the exposure occurred:**

<b>On Campus or Agency without on-site medical services</b>	<b>Clinical Agency with on-site medical services</b>
1. Report incident to faculty member. If the student is working with a preceptor the preceptor should contact the program coordinator and the appropriate health care agency administrator.	1. Report incident to clinical instructor/preceptor who will then report the exposure to the appropriate health care agency administrator.
2. If the exposure is on campus, the faculty member will contact HACC security and report the incident so a record can be made of the incident. If occurs off campus complete agency incident report.	2. Follow clinical agency's protocol for accidental exposure. Typically this will require the completing of an agency incident report.

3. Report to local hospital emergency room for immediate evaluation and treatment. Post exposure prophylaxis should occur immediately, but no later than 2 hours after exposure.	3. Report immediately to the emergency department or employee health (as determined by the institutional protocol) for post-exposure prophylaxis.
4. Complete <i>HACC Health Career Programs Blood or Body Fluid or TB Incident Report</i> within 24 hours.	4. Complete <i>HACC Health Career Programs Blood or Body Fluid or TB Incident Report</i> within 24 hours
5. Report incident to program coordinator.	5. Report incident to program coordinator.
6. Sign the <i>HACC Health Career Programs' Post Exposure Responsibility Form*</i> indicating prophylactic treatment was initiated OR that student refused prophylactic treatment after consultation with emergency department physician.	6. Sign the <i>HACC Health Career Programs' Post Exposure Responsibility Form*</i> indicating prophylactic treatment was initiated OR that student refused prophylactic treatment after consultation with emergency department physician.
7. It is expected that the student will follow all recommended post exposure follow up treatment. This may include counseling, further testing, and medication.	7. It is expected that the student will follow all recommended post exposure follow up treatment. This may include counseling, further testing, and medication.
8. All expenses incurred are the responsibility of the student.	8. All expenses incurred are the responsibility of the student.

\**HACC Health Career Programs' Post Exposure Responsibility Form* will be maintained in the student file for 30 years.

### Accidental Exposure to infectious TB

<b>Clinical Agency without on-site medical services</b>	<b>Clinical Agency with on-site medical services</b>
1. Report incident to clinical instructor/preceptor who will then report the exposure to the appropriate health care agency administrator	1. Report incident to clinical instructor/preceptor who will then report the exposure to the appropriate health care agency administrator.
2. Follow clinical agency's protocol for accidental exposure. Typically this will require the completing of an agency incident report.	2. Follow clinical agency's protocol for accidental exposure. Typically this will require the completing of an agency incident report.
3. Report immediately to your family physician or local health department for the placement of a baseline PPD test. This must be administered as soon as possible post-incident. Student should also receive counseling from a health care provider related to the sign and symptoms of TB.  If the student has a previously known positive PPD, a PPD test is not required. The student will need to provide a letter from their health care provider indicating that they have been counseled concerning the signs and symptoms of the disease and that they will be receiving follow care and monitoring for TB. Follow up care may include a chest x-ray to establish that no active disease is present.	3. Report immediately to the emergency department or employee health (as determined by the institutional protocol) for placement of a baseline PPD test.  If the student has a previously known positive PPD, a PPD test is not required. The student will need to provide a letter from their health care provider indicating that they have been counseled concerning the signs and symptoms of the disease and that they will be receiving follow care and monitoring for TB. Follow up care may include a chest x-ray to establish that no active disease is present.
4. Complete <i>HACC Health Career Programs Blood or Body Fluid or TB Incident Report</i> within 24 hours.	4. Complete <i>HACC Health Career Programs Blood or Body Fluid or TB Incident Report</i> within 24 hours
5. Report incident to program coordinator.	5. Report incident to program coordinator.
6. Sign the <i>HACC Health Career Programs' Post Exposure Responsibility Form*</i> . Student must provide the program administrator PPD test results within 24 hours of receiving the results. Student with a previously known positive PPD must provide a letter (see #3) from their health care provider within 48 hours after the exposure.	6. Sign the <i>HACC Health Career Programs' Post Exposure Responsibility Form*</i> . Student must provide the program administrator the results of the PPD test within 24 hours of receiving the results. Student with a previously known positive PPD must provide a letter (see #3) from their health care provider within 48 hours after the exposure
7. It is expected that the student will follow all recommended post exposure follow up treatment.  The student, who previously tested negative for TB, <b>must have a PPD test placed 12 weeks post exposure.</b>	7. It is expected that the student will follow all recommended post exposure follow up treatment.  The student, who previously tested negative for TB, <b>must have a PPD test placed 12 weeks post exposure.</b>

<p>Results must be given to the program administrator within 24 hours of the test being read. If this test is positive for TB exposure, the student will be advised to undergo further medical evaluation and treatment. The student will not be permitted to continue in the program until the student provides sufficient documentation indicating that no active disease is present.</p> <p>The student, who previously had a positive PPD (prior to the exposure), will be required to provide a letter from their medical provider 12 weeks post exposure indicating that they have been examined and that no active disease is present. If the student is found to have symptoms or a positive chest x-ray the student will not be permitted to continue in the program until the student provides sufficient documentation indicating that no active disease is present.</p>	<p>Results must be given to the program administrator within 24 hours of the test being read. If this test is positive for TB exposure, the student will be advised to undergo further medical evaluation and treatment. The student will not be permitted to continue in the program until the student provides sufficient documentation indicating that no active disease is present.</p> <p>The student, who tested positive for TB prior to the exposure, will be required to provide a letter from their medical provider 12 weeks post exposure indicating that they have been examined and that no active disease is present. If the student is found to have symptoms or a positive chest x-ray the student will not be permitted to continue in the program until the student provides sufficient documentation indicating that no active disease is present.</p>
<p>8. All expenses incurred are the responsibility of the student.</p>	<p>8. All expenses incurred are the responsibility of the student.</p>

\* HACC Health Career Programs' Post Exposure Responsibility Form will be maintained in the student file for 30 years



## School of Health Sciences

### Post Exposure Responsibility Form

Student Name: \_\_\_\_\_ Student HACC ID: \_\_\_\_\_ Date of Incident \_\_\_\_\_

**This form must be completed by the student within 24 hours after the exposure and submitted to the program director within 48 hours after exposure.**

**ALL STUDENTS MUST be seen in the emergency department/employee health department within 2 hours for blood and body fluids exposure or TB exposure. Failure to comply will result in dismissal from program. It is the student's responsibility to obtain medical treatment and follow-up after exposure to blood or body fluids or tuberculosis. Treatment following exposure includes initial screening; counseling concerning risk, health, and relationships; and follow up testing. Initial all statements which are correct.**

\_\_\_\_\_ I have been seen in the emergency department/employee health department or by my personal health care provider within 2 hours after a blood and body fluid exposure or within 24 hours of a TB exposure.

\_\_\_\_\_ My exposure was to blood or body fluids and post exposure prophylaxis (PEP) measures were taken as appropriate (PEP measures may include blood work for baseline HIV, Hepatitis B and C; administration of immunizing agents; administration of antiretroviral treatment; and administration of immunoglobulin.)

\_\_\_\_\_ My exposure was to TB, and I previously have had no history of a positive PPD test, a PPD test was placed and I was provided counseling related to signs and symptoms of TB.

\_\_\_\_\_ My exposure was to TB, and I have a previously known positive PPD test, a PPD test was not placed but I was provided counseling related to signs and symptoms of TB and recommended follow up measures.

\_\_\_\_\_ I plan to fully participate in all follow-up medical care as recommended by the emergency department/employee health department or my personal health care provider.

\_\_\_\_\_ I have had a blood or body fluid exposure and I do not plan to participate in follow-up care as recommended.

\_\_\_\_\_ I have had a TB exposure and I do not plan to participate in follow-up care as recommended. I understand my decision to not participate in continued monitoring for the presence of TB will require that I withdraw from the program.

**The student must initial each statement below. The student's initials indicate understanding of each statement.**

\_\_\_\_\_ I realize that I am responsible for any health care expenses related to this situation.

\_\_\_\_\_ I realize that I have the right to refuse to be tested for exposure/infection.

\_\_\_\_\_  
Student signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness printed name



# Prohibitive Offense Procedure for Health Career Programs

## I. Purpose

Outline the steps to be taken in all cases of criminal findings. It is HACC's position, in order to protect the safety of the client and the ethics of the HACC health career programs, individuals who have committed certain crimes cannot be placed in the position of caring for older adults, children, and/or working in a health career environment. This procedure applies to all health career programs except the non-credit nurse aide program.

## II. Definitions

- A. Criminal record: Any history of conviction of a misdemeanor or felony crime.
- B. Pending charges: Any criminal charges as yet unresolved by the courts.
- C. Court documents: Original source documents identifying the outcome of any criminal charge and/or conviction.
- D. Background check: The process required by HACC for admission into any clinical component of any health career, to include PA State Police Criminal Record Check, PA Child Abuse History Clearance and FBI Background check.
- E. Conviction: Being convicted, pleading guilty or entering a plea of nolo contendere, or receiving probation without verdict, accelerated rehabilitative disposition (ARD) or receiving any other disposition (excluding acquittal or dismissal) for any criminal offense.

## III. Procedure

- A. Students must complete this process for all criminal convictions and any pending or new criminal charges. Review of criminal charges can delay a student from starting in the clinical track of a health career program; therefore, students should begin the process at the time of admission to the college or at the time of application to a health career program.
- B. All convictions and pending or new charges must be reported to the director of the health career program immediately upon offer of admission. These include all felony and misdemeanor convictions.
- C. Students must have a PA State Police Criminal Record Check, PA Child Abuse History Clearance and FBI Background check once offered admission to the clinical portion of the health career program and yearly in-programs that are more than 12 months in length.
- D. Students with a criminal conviction in the following majors:
  - Dental Hygiene
  - Nursing
  - Respiratory Therapymust visit <https://www.dos.pa.gov/ProfessionalLicensing/Documents/Preliminary-Determination-Instructions.pdf> to receive a preliminary determination that must then be submitted, along with your background checks to the program director.
- E. All other students with a criminal conviction in a health career major not listed above must submit their background checks to the program director for consideration by the Prohibitive Offense Committee. The offenses for students NOT listed in letter D above can be found in Appendix A. Please note that considerations from Appendix B will factor into the committee decision.
- F. A student with any conviction or pending charge may not be eligible for entry or continuation in a clinical program. As noted below, HACC will consider for admission students with a record of other felony or misdemeanor convictions on a case by case basis.

- G. Falsification of an application or any information related to a conviction will disqualify a student from admission and/or continuation in any health career program at HACC.
- H. Failure to disclose a criminal record, charge, or pending charge will result in dismissal from the program.
- I. A decision by HACC to admit a student to a health career program despite criminal convictions does not guarantee that if the student completes the program and obtains the appropriate degree or certificate, the student will be eligible for licensure or credentialing by a governmental body or will be eligible to work for a particular employer. Licensure and credentialing authorities apply their own standards for evaluating whether criminal convictions are disqualifying, as do employers. HACC accepts no liability in cases where a third party deems criminal convictions sufficiently serious to cause denial of the applicable license or credential, or to refuse employment opportunities. A student with a conviction or convictions is responsible for contacting the appropriate licensure or credentialing board to investigate eligibility and employability prior to entering the non-clinical portion of the health career program.
- J. A decision by HACC to admit a student to a health career program despite criminal convictions does not guarantee that a student will be able to participate in experiences at any clinical site. Clinical sites apply their own standards for evaluating whether or not students are eligible to undergo a clinical experience at their facility, and HACC accepts no liability for a student's rejection by a clinical facility. The clinical facility may require the student to provide additional information before they make a decision. The health career program will contact the appropriate clinical sites and supply them with information regarding the convictions and the college decision. This will be done in writing and a record of all correspondence and answers will be maintained in the student's program file as dictated by the program's records procedure. The decision reached applies only to the program that the student is entering. If the student wishes to change programs, this process must be repeated and may have a different outcome due to the use of different clinical sites.
- K. If a student has or anticipates a criminal charge or conviction, they must complete the following in order to participate in a clinical health career program at HACC. The student may not participate in the program until all documentation is received and a decision is reached. Steps in the process of evaluating criminal records:
1. Complete the required background clearances. (The PA State Police Criminal Record Check, PA Child Abuse History Clearance and FBI Background check).
    - a. If the student has only summary offenses the student must meet with the program director and will be/remain eligible for the program. Go to Section 3 below.
    - b. If the student has a misdemeanor, felony convictions, or any pending charges, the student must obtain an original copy of the court records showing how the case was concluded by the court system. No decision will be made without court documentation. Go to section 2 below (Note: Since a decision must be made prior to participating in any health career program, the student should complete this process as efficiently as possible).
  2. The program director will review these guidelines and the student will submit all documentation to the director, and the director will retain a copy of all documents.
    - a. The program director will forward the information to the chair of the Prohibitive Offense Committee for review.
    - b. The committee chair may consult with the department chair, who in turn may consult with the college attorney, for an interpretation of the conviction. The department chair will include the committee chair in any meetings with the attorney at this stage.
    - c. HACC will consider the applicant for admission but may reject the applicant because of the conviction(s) in its discretion. Factors to be considered are listed below in Appendix B. The program director will forward all information to the HACC Health Careers Prohibitive Offenses Committee and a decision will be made by a two-thirds majority vote of the

members. In the event of a tie, the department chair who oversees the program in which the student wants to enter will be the deciding vote.

1. This committee will consist of a minimum of four health career program directors and two health career directors of clinical education.
  2. Members will serve two years.
  3. A committee chair will be chosen. The role of the chair will be to ensure the decision is made in a timely manner. The chair will keep a record of all meetings of the committee, and notify the requested program director of the decision.
3. In all cases, once the decision has been made, the program director of the requested program will request an appointment with the student to discuss the decision and options for the student. The program director will then:
- a. document the decision and meeting using the attached notification form
  - b. give one copy to the student
  - c. place one copy in the student's confidential file
  - d. forward the original form to the committee chair.

<b>APPENDIX A: Prohibitive Offenses</b>		
Offense Code	Prohibitive Offense	Type of Conviction
CC2500	Criminal Homicide	Any
CC2502A	Murder I	Any
CC2502B	Murder II	Any
CC2502C	Murder III	Any
CC2503	Voluntary Manslaughter	Any
CC2504	Involuntary Manslaughter	Any
CC2505	Causing or Aiding Suicide	Any
CC2506	Drug Delivery Resulting In Death	Any
CC2702	Aggravated Assault	Any
CC2901	Kidnapping	Any
CC2902	Unlawful Restraint	Any
CC3121	Rape	Any
CC3122.1	Statutory Sexual Assault	Any
CC3123	Involuntary Deviate Sexual Intercourse	Any
CC3124.1	Sexual Assault	Any
CC3125	Aggravated Indecent Assault	Any
CC3126	Indecent Assault	Any
CC3127	Indecent Exposure	Any
CC3301	Arson and Related Offenses	Any
CC3502	Burglary	Any
CC3701	Robbery	Any
CC3901	Theft	1 Felony or 2 Misdemeanors
CC3921	Theft By Unlawful Taking	1 Felony or 2 Misdemeanors
CC3922	Theft By Deception	1 Felony or 2 Misdemeanors
CC3923	Theft By Extortion	1 Felony or 2 Misdemeanors

CC3924	Theft By Property Lost	1 Felony or 2 Misdemeanors
CC3925	Receiving Stolen Property	1 Felony or 2 Misdemeanors
CC3926	Theft of Services	1 Felony or 2 Misdemeanors
CC3927	Theft By Failure to Deposit	1 Felony or 2 Misdemeanors
CC3928	Unauthorized Use of a Motor Vehicle	1 Felony or 2 Misdemeanors
CC3929	Retail Theft	1 Felony or 2 Misdemeanors
CC3929.1	Library Theft	1 Felony or 2 Misdemeanors
CC3929.2	Unlawful Possession of Retail or Library Theft Instruments	2 Misdemeanors
CC3930	Theft of Trade Secrets	1 Felony or 2 Misdemeanors
CC3931	Theft of Unpublished Dramas or Musicals	1 Felony or 2 Misdemeanors
CC3932	Theft of Leased Properties	1 Felony or 2 Misdemeanors
CC3933	Unlawful Use of a computer	1 Felony or 2 Misdemeanors
CC3934	Theft From a Motor Vehicle	1 Felony or 2 Misdemeanors
CC4101	Forgery	Any
CC4114	Securing Execution of Documents by Deception	Any
CC4302	Incest	Any
CC4303	Concealing Death of a Child	Any
CC4304	Endangering Welfare of a Child	Any
CC4305	Dealing in Infant Children	Any
CC4952	Intimidation of Witnesses or Victims	Any
CC4953	Retaliation Against Witness or Victim	Any
CC5902B	Promoting Prostitution	Felony
CC5903C	Obscene and Other Sexual Materials to Minors	Any
CC5903D	Obscene and Other Sexual Materials	Any
CC6301	Corruption of Minors	Any
CC6312	Sexual Abuse of Children	Any
CS13A12	Acquisition of Controlled Substance by Fraud	Felony
CS13A14	Delivery by Practitioner	Felony
CS13A30	Possession with Intent to Deliver	Felony
CS13A35(i), (ii), (iii)	Illegal Sale of Non-Controlled Substance	Felony
CS13A36, CS13A37	Designer Drugs	Felony
CS13Axx*	*Any Other Felony Drug Conviction Appearing on a PA RAP Sheet	Felony

\*\*\*Any felony conviction or two misdemeanor convictions within the CC3900 series would prohibit the applicant from admission. The CC3900 series is any offense that starts with CC39. The two misdemeanor offenses do not need to be the same offense.

## Pennsylvania Child Abuse History Clearance

Any student with a finding on the Pennsylvania Child Abuse History Clearance and/or FBI Clearance which indicates the student may not work with children will be ineligible for participation in the clinical programs.

**Other Offenses Not On The Prohibitive List Which Will Be Considered In Admission Decisions**  
**(Note: Any felony or misdemeanor conviction or equivalent from another jurisdiction will be considered. This is not an inclusive list.)**

Shoplifting	Fraud	Bribery
Harassment	Stalking	Extortion
Abuse or neglect in any form	Simple Assault	Prostitution
Weapons	Violation of protection from abuse order	2 or more Driving Under the Influence of drugs or alcohol, or Driving while intoxicated convictions. This includes ARD
Terrorism/terroristic threats	Hate Crimes	Possession of Paraphernalia
Falsification of any legal document/record	Possession and/or distribution of a controlled drug (to include ARD)	Any other felony drug conviction

\*The decisions of HACC are based on Protection of Older Adults Act, the Child Protection Laws, the Pennsylvania Department of Education, and the standards of the clinical sites for the programs.

\*\*Form to notify the student of the decision next page.

## **Appendix B**

The following Assessment Factors and Exceptions are taken from the Pennsylvania Department of State Best Practices Guide to Act 53, 2020

The following process will be utilized when making admission decisions for ALL individuals with criminal histories.

1. The facts and circumstances surrounding your conviction.
2. The number of convictions you have.
3. Whether the criminal conduct for which you were convicted involved an act or threat of harm against you.
4. The increase in your age or maturity since your conviction.
5. Your criminal history, or lack of criminal history, after the date of the conviction.
6. Whether you have successfully completed any training or educational activities, such as those offered through programs within an SCI or county correctional facility.
7. References from employers or others, including probation/parole officers, etc.
8. Whether you can show evidence of progress in personal rehabilitation since your conviction.
9. Whether you meet all of the other licensing/credentialing qualifications for the type of license/credential you are seeking.
10. Any other factor which the board deems relevant, and any additional information that you may wish to provide, or that the board may request.

**There are three notable exceptions to the two-stage evaluation process.**

### **Exception 1: Sexual Offenses:**

If you have been convicted of any of the “sexual offenses” provided at Appendix A, you are prohibited from practicing or being licensed as a *health care practitioner* (this term is defined in Act 53; it includes, for example, doctors, nurses and a number of other professions and occupations).

### **Exception 2: Crimes of Violence:**

A conviction for one of the “crimes of violence” provided at Appendix B is not necessarily a bar to obtaining a license, if you can show that:

- (for those who were incarcerated) at least three years have passed since your release and you have remained conviction-free during that three-year period, or
- (for those who served or are serving a sentence other than incarceration) at least three years have elapsed since your sentence was imposed, and you have remained conviction-free during that three-year period.

You will also need to demonstrate significant rehabilitation since your conviction for a crime of violence.

Finally, the board must reach a determination that granting you a license does not pose a substantial risk to others’ health and safety. The board will utilize the Assessment Factors, above, to make that determination.

The board also takes into consideration the extent to which granting a license might increase the risk of additional convictions because the nature of the occupation might present opportunities for criminal activity.

### **Exception 3: Drug Trafficking Offenses:**

Some boards have restrictions on granting licenses to individuals who have been convicted of one of the “drug trafficking offenses” provided at Appendix C. If you have been convicted of a drug trafficking offense, these boards may only grant you a license if:

- Ten (10) years have elapsed since the date of the conviction.
- You can demonstrate to the board that you have made significant progress in personal rehabilitation since your conviction for a drug trafficking crime.
- The board makes a determination, using the Assessment Factors, that granting you a license does not pose a substantial risk to others’ health and safety. The board also takes into consideration the extent to which granting a license might increase the risk of additional convictions because the nature of the occupation might present opportunities for criminal activity.
- You satisfy all of the other requirements and qualifications for the type of license you wish to obtain.

# Notification of Eligibility Decision

(for entering/continuing in a clinical component of a health career program at HACC based on criminal background findings)

The purpose of this document is to provide written documentation for the student with a criminal record.

Name of Student: \_\_\_\_\_ HACCID: \_\_\_\_\_

Health Career Program: \_\_\_\_\_ Date: \_\_\_\_\_

In attendance at the meeting were: \_\_\_\_\_

The subject of the meeting was as follows:

- To provide a review of the findings on the criminal background check required by the HACC health career program
- To communicate the decision made related to the student's eligibility to participate/continue in the clinical component of a health career program at HACC

If it is decided the student is qualified to apply/continue in the health career program, the subject of the meeting was as follows:

- To communicate the possible effect of the convictions on acquisition of licensure/certification following graduation
- To establish it is the student's responsibility to contact the licensing/credentialing board and employers to determine the effect of these findings on practice in the health career profession.
- To discuss the licensing/credentialing board requirements in the application process, related to criminal records

The student was notified of the following decision of regarding application/continuation in the health career program:

\_\_\_\_\_ The student is qualified to apply/continue in the clinical program.\*\*\*

\_\_\_\_\_ The student is not qualified to apply/continue in the clinical program due to the following reason/s:

Offense/s: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*This decision does **NOT** mean that a student will be able to get a license or a credential in their chosen healthcare field. HACC has no affiliation with these boards and students must contact those boards directly.*

Prohibitive Offense Committee Chair, if applicable: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Program Director: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Student: \_\_\_\_\_ Date: \_\_\_\_\_

A copy of this form will be given to the student, one will be placed in the student's confidential file and the original will be placed in the office of the dean of health careers. (Send completed forms to RCAUMILL)

\*\*\* This decision applies only to the health career program listed above. If the student chooses to pursue a different program, the process must be repeated and there may be a different outcome due to clinical site acceptance.

## STUDENT ACKNOWLEDGEMENT

I hereby acknowledge receipt of the Cardiovascular Technology Handbook. I understand that the handbook contains certain guidelines, regulations, policies, and procedures, but is not intended to be a complete and exhaustive explanation of the same. I also understand this is subject to change, that I am to familiarize myself with its contents, and that I am to abide by the guidelines and regulations as stated herein or as subsequently changed. I further understand and agree that this handbook does not constitute a contract.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

PRINT your name: \_\_\_\_\_

I \_\_\_\_\_, understand the risks associated with the current Covid-19 Pandemic. I understand that the clinical rotation guidelines and practice have changed as a result.

