ARKANSAS TECH UNIVERSITY-OZARK CAMPUS
"ARKANSAS TECH CARDIOVASCULAR TECHNOLOGY-CARDIAC SONOGRAPHY PROGRAM
UNIVERSITY

4700 UST 1 ARKANSAS TECH UNIVERSITY-OZARK CAMPUS Ozark, Arkansas 72949 479-508-3325

Fax 479-667-0198

CARDIOVASCULAR TECHNOLOGY-CARDIAC SONOGRAPHY PROGRAM

Classes held at Fort Chaffee Crossing, Fort Smith, AR 12211 Ward Avenue, Building 139 2020 APPLICATION INSTRUCTIONS

APPLICATION DUE: MARCH 1

ADMISSION CRITERIA

In order to be considered for admission to the Cardiovascular Technology – Cardiac Sonography (CVT) program, each student must meet the following criteria:

- Eligibility for admission to Arkansas Tech University-Ozark Campus
- □ Completion of platform coursework with a minimum 2.5 grade-point average (GPA); conditional acceptance may be granted to those students who are in the process of completing remaining platform coursework. Failure to maintain a 2.5 GPA upon completion of remaining platform coursework may lead to forfeiture of CVT program admission offer;
- ☐ Be at least 18 years of age;
- ☐ Completion of appropriate TEAS testing
- □ Completion of CVT Program Application for Admission;
- □ Two Student Recommendation Forms from professionals, instructors or someone who can testify to your character and work ethic. Reference forms from relatives will NOT be accepted. (forms can be found in this packet)
- ☐ An original typed TWO page double-spaced in Times New Roman 12 point font essay on the following topic: Why you want to be an Adult Cardiac Sonographer/Echocardiographer. Use examples from cardiac experiences you have had. Explain why you desire a career in this profession and your understanding of what this profession entails.
- □ Attendance to ONE CVT informational session and observation session on Feb 26, 2020 from 9:00 a.m.-12:30 p.m. at Chaffee Crossing. You will be automatically enrolled in the session when you turn in your application. If you cannot attend or missed the session, please contact Sharyl Moffit at 479 508-3325. If you are NOT turning in your application prior to Feb. 26, 2020 please contact Sharyl to be enrolled in the session at (479) 508-3325.
 - o NOTE: Attendance to the informational and observational session is highly encouraged; however, IF you live further than 90 miles from Fort Chaffee Crossing, you may complete observational hours and review a CVT program informational packet in lieu of the informational and observational session held at Fort Chaffee Crossing. In lieu of attendance of the informational and observation session, you MUST complete 4 observation hours at a facility with a registered diagnostic cardiac sonographer or a registered cardiac sonography with the rating scale completed and turned in with the application packet. You must also review the CVT program informational packet with receipt of review turned in with the application packet. Please contact Sharyl Moffit for email delivery of the informational packet.

READ THE FOLLOWING INSTRUCTIONS CAREFULLY.

1. Each applicant must apply for admission to Arkansas Tech University-Ozark Campus **before** applying to the CVT Program. Application information may be obtained by contacting the Office of Student Services in person or through the following:

Office of Student Services Arkansas Tech University-Ozark Campus 1700 Helberg Lane Ozark, AR 72949 (479) 667-2117 www.atu.edu/ozark

- 2. The following are required for application:
 - CVT Program Application for Admission;
 - Acknowledge of Essential Functions form;
 - Understanding of Clinical Participation Requirements form;
 - Original typewritten essay (two-page double spaced in 12 point Times New Roman font) about why you want to be an Adult Cardiac Sonographer/Echocardiographer. Use examples from cardiac experiences you have had. Explain why you desire a career in this profession and your understanding of what this profession entails.
 - Two (2) Student Recommendation Forms from professionals, instructors or someone who can testify to your character and work ethic. Reference forms from relatives will NOT be accepted.
- 3. Each applicant is responsible for verifying that all of the following requested information has been completed and submitted to the Allied Health Secretary. All application items requested should be submitted as a complete packet if possible or physically brought to the Allied Health secretary in the Health Education Building. Applicants are responsible for items sent separately.

THE INFORMATION CONTAINED IN THIS APPLICATION PACKET IS SUBJECT TO CHANGE AT THE DISCRETION OF THE CVT PROGRAM.

The above items must be received by the Allied Health Secretary BY MAIL OR IN PERSON by March 1 in order to be considered complete:

Cardiovascular Technology – Cardiac Sonography Program Attn: Allied Health Secretary Arkansas Tech University-Ozark Campus 1700 Helberg Lane Ozark, AR 72949

4. Once the application is complete, the applicants will be required to take the Test of Essential Academic Skills (TEAS). This test will be scheduled and given at Arkansas Tech University-Ozark Campus after the application deadline.

CVT PROGRAM DESCRIPTION

The Cardiovascular Technology – Cardiac Sonography (CVT) program at Arkansas Tech University-Ozark Campus is a course of study leading to the attainment of an Associate of Applied Science degree upon completion of 29 hours of platform coursework and 42 hours of technical coursework. The CVT program curriculum includes platform coursework, which must be completed prior to enrollment in the technical phase. The technical phase will include 3 consecutive semesters of study starting with the fall term and continuing until the end of the summer II term of the following year. Students will be required to maintain a 75% in all classes and demonstrate satisfactory skill competency during the technical phase in order to meet program requirements for graduation.

Students who complete the non-invasive Cardiovascular Technology-Cardiac Sonography (CVT) program of study will be prepared to enter the healthcare field in cardiac sonography labs as adult cardiac sonographers. Cardiac sonography, also known as echocardiography, is a rapidly advancing specialty area of cardiac imaging that uses ultrasound technology to evaluate the heart. With this technology, a cardiac sonographer uses sound waves created by the machine to acquire images of the cardiac chambers, walls, valves and blood flow.

The cardiac sonographer is a skilled person qualified by academic and clinical preparation to have:

- A detailed working knowledge of the anatomy and physiology of the heart
- The ability to optimize images
- A thorough understanding of cardiac pathology and its effects on the heart
- The ability to comprehend the echocardiography appearance of normal and abnormal cardiac conditions

Cardiac sonographers generally work closely with cardiologists, who use the images to diagnose cardiac diseases.

Students completing the Associate of Applied Science in Cardiovascular Technology will prepare to sit for the Registered Cardiac Sonographer (RCS) exam through Cardiovascular Credentialing International (CCI) and the Registered Diagnostic Cardiac Sonographer (RDCS) exam through American Registry for Diagnostic Medical Sonography (ARDMS).

The CVT program at Arkansas Tech University-Ozark Campus is accredited by Committee on Accreditation of Allied Health Education Programs (CAAHEP) through the Joint Review Committee on Education in Cardiovascular Technology (JRC-CVT).

PLATFORM COURSEWORK

Students will be required to complete 29 hours of platform coursework with a minimum 2.5 GPA prior to admission to the technical phase of the CVT program. Applicants with prerequisite coursework completed at other institutions should have their official transcripts sent to the Office of Student Services for review. The platform coursework includes the following:

| PREFIX | NUMBER | TITLE | CREDIT HRS |
|--------|--------|--|------------|
| HSCI | 1123 | Human Anatomical Structure I | 3 |
| HSCI | 1113 | Medical Terminology | 3 |
| BST | 1303 | Introduction to Computers | 3 |
| ENGL | 1013 | Composition I | 3 |
| MATH | 1003 | College Mathematics (or higher) | 3 |
| PHSC | 1013 | Introduction to Physical Science | 3 |
| PHSC | 1021 | Introduction to Physical Science Lab | 1 |
| or | or | or | or |
| BIOL | 1014 | Introduction to Biological Science with lab (4 CR HRS) | 4 |
| HSCI | 1243 | Human Anatomical Structure II | 3 |
| ENGL | 1023 | Composition II | 3 |
| PSY | 2003 | General Psychology | 3 |
| EMTP | 1001 | First Aid and CPR | 1 |
| | | TOTAL PLATFORM HOURS | 29 |

Substitution and/or waiving of platform coursework will be at the discretion of the CVT program director in accordance with the policies and procedures of Arkansas Tech University-Ozark Campus.

TECHNICAL COURSEWORK

Students must apply to the technical phase of the program following completion of the prerequisite coursework. Admission to the technical phase is competitive due to limited enrollment. Satisfactory completion of the technical coursework will enable a student to graduate with an Associate of Applied Science degree. The technical phase of the program includes a combination of classroom/laboratory study and required clinical education. During the classroom/laboratory portion of the program, students will have the opportunity to learn Adult Cardiac Sonography procedures and practice specific procedures on fellow CVT students. Students will be expected to participate in all class and laboratory activities as both a demonstration subject and a simulated patient for their classmates. The clinical education portion of the program consists of working with patients in a clinical facility as a student under the supervision of a clinical instructor. Clinical education sites are located in various cities and towns throughout the area, and some may even require lodging due to their distance from Arkansas Tech University-Ozark Campus. Students will be responsible for all travel associated with clinical education. In addition, each student will be responsible for all meals and lodging associated with clinical education, unless provisions are made by the clinical education site to which they are assigned. Students should anticipate 40 hours per week spent in class and clinical education. This does not include prep or study time.

| FALL | | Core Classes | |
|--------|--------------|---|----|
| CVT | 2113 | Hospital Policies and Patient Care | 2 |
| CVT | 2123 | Sonography Physics and Instrumentation I | 3 |
| CVT | 2132 | Echocardiography I Lab | 2 |
| CVT | 2133 | Echocardiography I | 3 |
| CVT | 2144 | Clinical Practicum I | 4 |
| | | Total Semester Hours | 14 |
| SPRING | | Core Classes | |
| CVT | 2211 | Principles of Electrocardiography | 1 |
| CVT | 2213 | Cardiac Pathology Studies | 3 |
| CVT | 2223 | Sonography Physics and Instrumentation II | 3 |
| CVT | 2231 | Echocardiography II Lab | 1 |
| CVT | 2233 | Echocardiography II | 3 |
| CVT | 2244 | Clinical Practicum II | 4 |
| | | Total Semester Hours | 15 |
| SUMMER | I (extended) | Core Classes | |
| CVT | 2312 | Interdisciplinary Cardiac Imaging | 2 |
| CVT | 2313 | Echocardiography Concepts | 3 |
| CVT | 2323 | Physics Concepts | 3 |
| CVT | 2344 | Clinical Practicum III | 4 |
| | | Total Semester Hours | 12 |
| | | CVT COURSEWORK HOURS | 41 |
| | | TOTAL DEGREE HOURS | 70 |

CLASS SIZE

The class size will be determined in the spring dependent on clinical site availability and job market.

TEAS EXAM

The TEAS exam is given **after** the application deadline. You will receive a letter after the deadline with testing dates and times. Prior to taking the TEAS, applicants will be required to pay a testing fee. The TEAS is a computerized test and therefore test scores will be immediately available. Test results will then be forwarded to the CVT program office and the Office of Student Services. Acceptance of TEAS results from testing at locations other than Arkansas Tech University-Ozark Campus will be at the discretion of the CVT program. The TEAS test will be used by the CVT program for admission consideration.

SELECTION CRITERIA

Due to the limited spots available for each class of CVT students, the CVT Program must use a method of ranking each candidate according to the candidate's qualifications. The following will be used in the selection process:

TEAS score: 70% Essay: 25% Recommendation Forms: 5% In the case of a tie in the application score for applicants, the following criteria will be utilized as tie-breakers (the criteria are arranged in order of importance):

- 1. Cumulative GPA for all college coursework completed prior to the application deadline;
- 2. Number of platform hours completed prior to application deadline;
- 3. Date of submission of completed CVT program application materials.

SELECTION PROCESS

Offers of admission for available spaces will be made to the qualified applicants with the highest overall ratings. All applicants will be notified by the CVT program of their admission status. Applicants accepted into the program must notify the CVT program office as soon as possible of their decision to accept or decline the offer of admission. Applicants who decline admission or are not accepted for admission may reapply for admission the following year. In the event an opening for a student becomes available, then applicants from the alternate list will be offered admission according to individual ranking.

The timeline for the application and selection process is included below:

| March 1 | CVT program application and forms included in packet due. |
|---------------|--|
| After April 1 | Students with completed applications will complete appropriate TEAS exams as scheduled by Allied Health secretary. |
| By June 1 | CVT applications will be reviewed and students will be selected for entry to the technical coursework. |

FINANCIAL AID

Students requesting information regarding financial aid are encouraged to contact the Financial Aid Office as follows:

Financial Aid Office 1700 Helberg Lane Ozark, AR 72949 479-667-2117

NONDISCRIMINATION STATEMENT

The CVT program at Arkansas Tech University - Ozark Campus does not discriminate on the basis of race, color, sex, national origin, veteran status or disability in any of its policies, practices, or procedures. This includes, but is not limited to, admissions, employment, financial aid, or educational services. Arkansas Tech University - Ozark Campus complies with all applicable state and federal laws including, but not limited to, Title VI and Title VII of the Civil Rights Act of 1964 as amended, the Age Discrimination in Employment Act of 1967 as amended, Title IX of the Educational Amendments of 1972, Section 504 of the Rehabilitation Act Amendments of 1974, the Civil Rights Restoration Act of 1987, the Americans with Disabilities Act of 1990 and the Civil Rights Act of 1991. Social Security numbers are used as identification numbers for convenience and for consistency with other records. Responsibility for implementation and compliance with this Affirmative Action policy has been delegated to the Affirmative Action officer; email affirmative.action@atu.edu.

PROJECTED PROGRAM COSTS

Estimated costs for enrollment in the technical phase of the CVT program are as follows:

- Approximately \$7,000 for tuition and fees
- Approximately \$1,200 for textbooks
- Approximately \$200 for red scrubs and closed toe tennis shoes
- \$15 for a campus parking permit
- Approximately \$150 for a physical
- Approximately \$50 for TB testing; (available at Arkansas Tech University's main Russellville campus)
- Approximately \$30 for tetanus vaccination; (available at Arkansas Tech University's main Russellville campus)
- Approximately \$90 for Hepatitis B vaccination (available at Arkansas Tech University's main Russellville campus)
- Approximately \$100 for varicella (chicken pox) titer (not needed if proof of history of varicella or varicella vaccination is given)
- Approximately \$40 for flu vaccination

The above projected costs are subject to change.

CRIMINAL BACKGROUND INVESTIGATION

Students admitted to the CVT program will be expected to obtain criminal background checks following entry into the program. Criminal background checks may be a requirement for attendance at some of the clinical education sites affiliated with the CVT program. Based upon the results of these checks, an affiliated clinical education site may determine not to allow a particular student's presence at a facility. In addition, a criminal background may preclude licensure or employment following graduation. Students are responsible for the associated costs and delivery of background results to the clinical facility requesting the information.

DRUG AND ALCOHOL TESTING

Drug and alcohol testing may be a requirement for attendance at some of the clinical education sites affiliated with the CVT program. Based upon the results of these checks, an affiliated clinical education site may determine not to allow a particular student's presence at a facility. The student is responsible for the costs associated with any drug and alcohol testing required for attendance at a particular clinical education site. In addition, the student is also responsible for submission of testing results to the clinical education facility requesting the information.

STUDENT HEALTH AND PHYSICAL EXAMINATION

Students admitted to the CVT program will be expected to provide health information and participate in a physical examination to be performed by a physician, physician's assistant or nurse practitioner. The purpose of the physical examination is to determine the student's ability to safely perform the physical demands expected of a CVT. The purpose of the Health Information form is to enable the student an opportunity to provide pertinent information to the CVT program which may affect the student's ability to safely participate in laboratory and clinical education activities.

ESSENTIAL FUNCTIONS FOR THE CARDIOVASCULAR TECHNOLOGY

Successful participation in the CVT program includes the ability to perform essential functions, which are necessary for delivery of Cardiovascular Technology – Cardiac Sonography services in a safe, ethical, legal manner. The essential functions are expected to be demonstrated, with or without reasonable accommodation, by students participating in the CVT program. Upon reviewing the Essential Functions for the CVT student included in this packet, the candidate will complete the Acknowledgment of Essential Functions for the Cardiovascular Technology – Cardiac Sonography Student form and indicate whether or not that student can perform the essential functions. Prior to admission to the program, the student is responsible for providing written documentation of any disabilities, along with evidence for the need for accommodation. Requests for accommodations will be forwarded to the Disability Coordinator for Arkansas Tech University. The university will then decide if reasonable accommodations can be made for that particular student.

Cardiovascular Technology-Cardiac Sonographers, Essential Functions

Essential functions describe the tasks, skills, abilities, work activities, work context and work styles that are required for the completion of the CVT Program and to work as an adult cardiac sonographer. The student is required to meet all objectives related to the coursework and clinical experiences. Physical, emotional, cognitive and environmental demands will vary throughout the curriculum and clinical experience. This list is a summary of the essential functions, but is not meant to be all-inclusive. More specific information can be found in the Dictionary of Occupational Title published by the United States Government or the O*Net website at http://online.onetcenter.org

Throughout the educational program and later throughout their careers, CVTs must be able to perform these essential functions with or without reasonable accommodations.

Tasks

- Provide sonogram and oral or written summary of technical findings to physician for use in medical diagnosis.
- Decide which images to include, looking for differences between healthy and pathological areas.
- Operate ultrasound equipment to produce and record images of the motion, shape, and composition of blood, organs, tissues, or bodily masses, such as fluid accumulations.
- Observe screen during scan to ensure that image produced is satisfactory for diagnostic purposes, making adjustments to equipment as required.
- Select appropriate equipment settings and adjust patient positions to obtain the best sites and angles.
- Prepare patient for exam by explaining procedure, transferring patient to ultrasound table, scrubbing skin and applying gel, and positioning patient properly.
- Observe and care for patients throughout examinations to ensure their safety and comfort.
- Obtain and record accurate patient history, including prior test results or information from physical examinations.
- Determine whether scope of exam should be extended, based on findings.
- Maintain records that include patient information, sonographs and interpretations, files of correspondence, publications and regulations, or quality assurance records, such as pathology, biopsy, or post-operative reports.

Skills

- **Speaking** Talking to others to convey information effectively.
- Active Listening Giving full attention to what other people are saying, taking time to understand the points being made, asking questions as appropriate, and not interrupting at inappropriate times.
- **Reading Comprehension** Understanding written sentences and paragraphs in work related documents.
- **Social Perceptiveness** Being aware of others' reactions and understanding why they react as they do.
- Critical Thinking Using logic and reasoning to identify the strengths and weaknesses of alternative solutions, conclusions or approaches to problems.
- **Monitoring** Monitoring/Assessing performance of yourself, other individuals, or organizations to make improvements or take corrective action.
- Science Using scientific rules and methods to solve problems.
- **Time Management** Managing one's own time and the time of others.
- **Coordination** Adjusting actions in relation to others' actions.
- Operation and Control Controlling operations of equipment or systems.

Abilities

- **Oral Comprehension** The ability to listen to and understand information and ideas presented through spoken words and sentences.
- **Oral Expression** The ability to communicate information and ideas in speaking so others will understand.
- **Near Vision** The ability to see details at close range (within a few feet of the observer).
- **Control Precision** The ability to quickly and repeatedly adjust the controls of a machine or a vehicle to exact positions.
- **Problem Sensitivity** The ability to tell when something is wrong or is likely to go wrong. It does not involve solving the problem, only recognizing there is a problem.
- Speech Clarity The ability to speak clearly so others can understand you.
- **Speech Recognition** The ability to identify and understand the speech of another person.
- Written Expression The ability to communicate information and ideas in writing so others will understand.
- **Arm-Hand Steadiness** The ability to keep your hand and arm steady while moving your arm or while holding your arm and hand in one position.

• **Inductive Reasoning** — The ability to combine pieces of information to form general rules or conclusions (includes finding a relationship among seemingly unrelated events).

Work Activities

- **Assisting and Caring for Others** Providing personal assistance, medical attention, emotional support, or other personal care to others such as coworkers, customers, or patients.
- **Updating and Using Relevant Knowledge** Keeping up-to-date technically and applying new knowledge to your job.
- **Getting Information** Observing, receiving, and otherwise obtaining information from all relevant sources.
- **Documenting/Recording Information** Entering, transcribing, recording, storing, or maintaining information in written or electronic/magnetic form.
- Identifying Objects, Actions, and Events Identifying information by categorizing, estimating, recognizing differences or similarities, and detecting changes in circumstances or events.
- Communicating with Supervisors, Peers, or Subordinates Providing information to supervisors, co-workers, and subordinates by telephone, in written form, e-mail, or in person.
- **Performing for or Working Directly with the Public** Performing for people or dealing directly with the public. This includes serving customers in restaurants and stores, and receiving clients or guests.
- Controlling Machines and Processes Using either control mechanisms or direct physical activity to operate machines or processes (not including computers or vehicles).
- **Performing General Physical Activities** Performing physical activities that require considerable use of your arms and legs and moving your whole body, such as climbing, lifting, balancing, walking, stooping, and handling of materials.
- Establishing and Maintaining Interpersonal Relationships Developing constructive and cooperative working relationships with others, and maintaining them over time.

Work Styles

- Attention to Detail Job requires being careful about detail and thorough in completing work tasks.
- Integrity Job requires being honest and ethical.
- Concern for Others Job requires being sensitive to others' needs and feelings and being understanding and helpful on the job.
- **Cooperation** Job requires being pleasant with others on the job and displaying a good-natured, cooperative attitude.

- **Self Control** Job requires maintaining composure, keeping emotions in check, controlling anger, and avoiding aggressive behavior, even in very difficult situations.
- **Stress Tolerance** Job requires accepting criticism and dealing calmly and effectively with high stress situations.
- **Dependability** Job requires being reliable, responsible, and dependable, and fulfilling obligations.
- **Independence** Job requires developing one's own ways of doing things, guiding oneself with little or no supervision, and depending on oneself to get things done.
- **Initiative** Job requires a willingness to take on responsibilities and challenges.
- **Achievement/Effort** Job requires establishing and maintaining personally challenging achievement goals and exerting effort toward mastering tasks.

Knowledge

- Customer and Personal Service Knowledge of principles and processes for providing customer and personal services. This includes customer needs assessment, meeting quality standards for services, and evaluation of customer satisfaction.
- **Medicine and Dentistry** Knowledge of the information and techniques needed to diagnose and treat human injuries, diseases, and deformities. This includes symptoms, treatment alternatives, drug properties and interactions, and preventive health-care measures.
- Physics Knowledge and prediction of physical principles, laws, their interrelationships, and applications to understanding fluid, material, and atmospheric dynamics, and mechanical, electrical, atomic and sub- atomic structures and processes.
- English Language Knowledge of the structure and content of the English language including the meaning and spelling of words, rules of composition, and grammar.
- Computers and Electronics Knowledge of circuit boards, processors, chips, electronic equipment, and computer hardware and software, including applications and programming.
- Education and Training Knowledge of principles and methods for curriculum and training design, teaching and instruction for individuals and groups, and the measurement of training effects.
- **Psychology** Knowledge of human behavior and performance; individual differences in ability, personality, and interests; learning and motivation; psychological research methods; and the assessment and treatment of behavioral and affective disorders.

*Information taken from the O*Net website on Diagnostic Medical Sonographers*



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Ozark, Arkansas 72949
479-508-3325
Fax 479-667-0198

ACKNOWLEDGMENT OF ESSENTIAL FUNCTIONS

By signing below, I acknowledge that I have read and understand the Essential Functions for the Cardiovascular Technology – Cardiac Sonography Student. I believe to the best of my knowledge that I have the ability to learn and perform the essential functions:

| (Please check one) | |
|--|--|
| ☐ Without reasonable accommodation☐ With reasonable accommodation | ations ns (further documentation is attached) |
| Student Name | Date |
| Student Signature | |



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Understanding of Clinical Participation Requirements

Arkansas Tech University-Ozark Campus Cardiovascular Technology – Cardiac Sonography program uses external affiliated agencies for clinical experiences for our students. Affiliated agencies may impose requirements for students in order to be allowed access to clinical experiences.

Students may be required to provide the following information to external affiliated agencies:

- Health Screening/Immunizations;
- CPR Certification:
- Criminal Background Investigation;
- Drug Testing.

The student should maintain copies of the documents listed above. Affiliating agencies may require the student to provide a copy of the documentation.

NOTICE AND RELEASE - READ CAREFULLY BEFORE SIGNING

I, the undersigned applicant to the Cardiovascular Technology – Cardiac Sonography program at Arkansas Tech University-Ozark Campus, understand that participation in a clinical experience is part of the Cardiovascular Technology – Cardiac Sonography program and that participation in a clinical experience includes working as a student at an affiliating agency. I understand that I will be responsible for all travel, meals and lodging associated with clinical education. I further understand that affiliating agencies have the right to establish requirements for participation in clinical experience.

I understand that I am responsible for providing copies of the documentation requested by the affiliated agency. I understand and agree that if I am rejected for participation in a clinical experience by an affiliating agency or if I refuse to submit to checks or tests that are required by an affiliating agency in order to participate in a clinical experience, I may be unable to complete my program of study and graduate from the Cardiovascular Technology – Cardiac Sonography program. I hereby release Arkansas Tech University-Ozark Campus, its employees and all affiliating agencies from any liability with regard to my participation in a clinical experience and decisions made concerning my participation in a clinical experience.

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| OFFICE USE ONLY GPA _ | TEAS Sco | re |
|---|--|--|
| Date Received: | Essay Received: Essa | ny Score: |
| Received By: | _ , | |
| Clinical Participation form | Essential Functions Form | ARKANSAS TECH |
| | ovider or Professional Rescuer Ca | ord OZARK |
| , | | CAMPUS |
| CARDIOVASCULAR | R TECHNOLOGY-CARDIAC S APPLICATION FOR ADMIS | |
| Last Name | First Name | Middle Name |
| Mailing Address | | |
| City | State | Zip Code |
| Tech T# | Social Security # | Date of Birth |
| Home Phone | Cell Phone | Email |
| Please indicate if you are curren | tly a student of: | |
| ☐ Arkansas Tech University | ☐ Arkansas Tech Univer | rsity – Ozark Campus |
| Have you previously attended a Program or Diagnostic Medical | nother Cardiovascular Technolog Sonography Program? | y – Cardiac Sonography |
| □ No □ Yes Name of sc | hool attended | |
| (Remember to forward transcrip 1700 Helberg Lane, Ozark, AR | <u> </u> | ed to the Office of Student Services, |
| Please attach: Two (2) typed reference letters | from professionals, instructors or | someone that can testify to your |
| · / • - | s from family members will not b | • • |
| question: Why do you want to become an | Adult Cardiac Sonographer/Echo | n 12 point font answering the following ocardiographer? Use examples from reer in this profession and your |

15

Date

I certify that the above information is accurate and complete to the best of my knowledge.

understanding of what this profession entails.

Signature

CLINICAL OBSERVATION

Applicants who live 90 or more miles from Fort Chaffee Crossing may complete 4 hours of clinical observation in lieu of the observational portion of the informational and observational session held at Fort Chaffee Crossing. If you ARE attending the observational portion of the informational and observational session held at Fort Chaffee Crossing you do NOT need to complete any other observation or this form. This must be completed with a Registered Cardiac Sonographer (RCS) through Cardiovascular Credentialing International or a Registered Diagnostic Cardiac Sonographer (RDCS) through the American Registry of Diagnostic Medical Sonographers. The clinical observation verification and rating scale must be completed by the RCS/RDCS. The purpose of the clinical observation requirement is to provide applicants with a better understanding of the cardiac sonography profession and the role of cardiac sonographers. Applicants are encouraged to abide by the following guidelines when completing the clinical observation requirement:

- Call clinical sites in order to arrange an appointment for observation. Explain to the supervisor of
 the cardiac sonography department your intention to apply to a cardiac sonography program.
 Also explain to the supervisor that you would like to observe either a RCS or RDCS at their
 facility.
- Dress appropriately for your observation appointment. Appropriate dress includes closed-toed shoes, slacks (khakis are acceptable) and a collared shirt or nice blouse. Avoid jeans, T-shirts, sandals, excessive perfume and hats. In addition, visible tattoos may need to be concealed and body piercings (other than a single-stud type earring) may need to be removed. The clinical facility has the right to send you away if your appearance is considered inappropriate.
- Be punctual for your observation appointment. If you cannot make the appointment, please be sure to call the clinical facility to cancel and re-schedule as necessary.
- Maintain confidentiality. Students must remember to never mention a patient's name, medical diagnosis or treatment when outside of the facility. Familiarize yourself with The Health Insurance Portability and Accountability Act of 1996 (HIPAA) before completing observation.
- Be courteous and pay attention to the exams you are observing. Also remember to thank the supervising RCS or RDCS for allowing you to observe in their facility.

The student is responsible for ensuring that the completed Clinical Observation form is included with the other application materials.



MEMORANDUM

TO: Cardiovascular Technology-Cardiac Sonography applicant

FROM: Arkansas Tech University-Ozark, Department of Cardiovascular Technology-Cardiac Sonography

SUBJECT: Required volunteer/observation experience

Arkansas Tech University-Ozark Campus' Department of Cardiovascular Technology program requires a volunteer/observation experience for all program applicants. This experience must be completed at Fort Chaffee Crossing or, for those applicants living 90 miles or further from Fort Chaffee Crossing, at a facility with a Registered Cardiac Sonographer (RCS) or Registered Diagnostic Cardiac Sonographer (RDCS). If the observation is NOT completed at Fort Chaffee Crossing the observation must be for a minimum of 4 hours and may be completed in any cardiac sonography setting under the supervision of one (1) RCS or RDCS. It is the responsibility of the applicant to make arrangements with a RCS/RDCS for this experience. The applicant is also responsible for obtaining the clinical observation evaluation form from Arkansas Tech University-Ozark Campus and giving it to the supervising sonographer. This requirement must be met and all forms returned by the application deadline. IF the applicant does NOT live further than 90 miles from Fort Chaffee Crossing, they will complete observation at Fort Chaffee Crossing and do NOT need to complete observation at a facility nor turn in the clinical observation form with the application.

Guidelines for the volunteer experience are as follows:

- 1. The applicant makes arrangements with a RCS/RDCS to complete the 4 hours of clinical observation. It is up to the applicant and the RCS/RDCS to agree on the schedule for these hours. This is a voluntary service provided by the RDCS/RCS. Facilities are NOT obligated to provide this experience.
- 2. The applicant gives the RCS/RDCS the evaluation form at the beginning of the volunteer experience.
- 3. Once the volunteer experience is finished, the RCS/RDCS completes the evaluation form, seals it in an envelope and signs his/her name across the seal.
- 4. The evaluation form MUST be received prior to the application deadline.
- 5. Each of the required 4 hours of observation MUST be completed with one RCS or RDCS.
- 6. Observation hours must be dated within the current 6 months preceding the application. For example, an applicant for the 2019 class must have observation hours completed between October 2018 and March 2019.
- 7. Applicants will not be allowed to use current or previous work site as observation hours, nor can an applicant observe under a RCS/RDCS who is a family member or friend.
- 8. Observation time is not considered a clinical experience, it is **NOT** recommended for students to perform any hands on patient related activities for the safety of the patient and the student.



CLINICAL OBSERVATION EVALUATION FORM

| 1 0 1 | | Date: used in the admission selection process for the Cardiovascular Technology-Cardiac waive my right of access to this document. |
|-------------------------------------|---------------------------------|--|
| Student Signature: X | | _ |
| RCS/RDCS completing this form: | | |
| | Print Name | Signature |
| ARDMS registered ☐ CCI registered | d□ | |
| Registry #: | | |
| Facility & Address: | | |
| Telephone Number: | | |
| Number of volunteer/observation hou | rs completed at your facility:_ | |

SUPERVISING RCS/RDCS: Please fill out these forms confidentially, place them in an envelope, seal the envelope and sign your name across the seal. Please return the envelope to the student to turn in as part of his/her CVT application. THANK YOU!

Instruction: Please circle the number closest to the best description of the student.

| 1. | Personal Appearance | 2 | 3 | | 4 | 5 |
|----|---|---|----------------|----------------------------------|---|--|
| | Sloppy, too casual, overly revealing | | One clothing | item inappropriate dirty, ripped | | Complies with dress code |
| 2. | Attendance | 2 | 3 | | 4 | 5 |
| | Poor, over 10 minutes late | | Less than 10 i | minutes late | | Punctual |
| 3. | Attitude Toward Patients 1 | 2 | 3 | | 4 | 5 |
| | Rude, careless, disrespectful | | Indifferent or | overly chatty | | Pleasant/appropriate |
| 4. | Attitude Toward Staff 1 | 2 | 3 | | 4 | 5 |
| | Rude, sullen | | Indifferent or | overly friendly | | Cooperative, respectful |
| 5. | Communication Skills 1 | 2 | 3 | | 4 | 5 |
| | Poor listener, no attempts to ask questions Talks about self only | | Unclear quest | ions, random attempts | | Thoughtful questions, on topic |
| 6. | Motivation 1 | 2 | 3 | | 4 | 5 |
| | Disinterested in patient care | | Occasional in | terest in exams | | Seeks out learning in appropriate ways |



MEMORANDUM

TO: Cardiovascular Technology-Cardiac Sonography applicant

FROM: Arkansas Tech University-Ozark, Department of Cardiovascular Technology-Cardiac Sonography

SUBJECT: Required informational packet review

Arkansas Tech University-Ozark Campus' Department of Cardiovascular Technology (CVT) program requires an informational session for all program applicants. Attendance to this informational session is required at Fort Chaffee Crossing or, for those applicants living further than 90 miles from Fort Chaffee crossing, review of the CVT informational packet will be accepted in lieu of attendance. If the applicant is reviewing the informational packet in lieu of attending, the attached receipt of cardiovascular technology (CVT)-cardiac sonography informational packet form must be turned in with the application. If the applicant does NOT live further than 90 miles from Fort Chaffee Crossing, attendance to the informational session at Fort Chaffee Crossing is required. If the applicant attends the informational session at Fort Chaffee Crossing they do NOT need to complete and turn in the receipt of cardiovascular technology (CVT)-cardiac sonography informational packet.



ARKANSAS TECH UNIVERSITY-OZARK CAMPUS
CARDIOVASCULAR TECHNOLOGY –
CARDIAC SONOGRAPHY PROGRAM
1700 Helberg Lane
Ozark, Arkansas 72949
479-667-2117
Fax 479-667-0198

RECEIPT OF CARDIOVASCULAR TECHNOLOGY (CVT)-CARDIAC SONOGRAPHY INFORMATIONAL PACKET

This is only required for those who live further than 90 miles from Fort Chaffee Crossing and do not attend the CVT information and observational session.

I DO HEREBY ACKNOWLEDGE THAT I HAVE RECEIVED THE CVT INFORMATIONAL PACKET. I HAVE REVIEWED THE MATERIAL FOUND IN THE CVT INFORMATIONAL PACKET. I UNDERSTAND THE INFORMATION FOUND IN THIS PACKET. I ALSO UNDERSTAND THAT ANY OF THE INFORMATION FOUND IN THIS PACKET MAY BE UPDATED, CHANGED, OR REPLACED.

| APPLICANT NAME | DATE | |
|---------------------|------|--|
| | | |
| | | |
| | | |
| APPLICANT SIGNATURE | | |



1700 Helberg Lane Ozark, AR 72949 Phone: 479 667-2117, Ext. 325 Fax: 479 667-0198

CARDIOVASCULAR TECHNOLOGY-CARDIAC SONOGRAPHY (CVT) PROGRAM Student Recommendation Form

Evaluator: Please return to the applicant in a sealed envelope with the signature over the seal or mail in a sealed envelope to: Arkansas Tech University-Ozark Campus, Attention: CVT Program Secretary, 1700 Helberg Lane, Ozark, AR 72949 or email smoffit@atu.edu.

| Thank you for providing this in | ıvaluable inforr | nation on l | oehalf of: | | | |
|-----------------------------------|------------------|--------------|------------|---------------|----------------|-------|
| Applicant's | | | | | | |
| Name: | Last | Firs | t | | Middle | |
| | | | | | Wilder | |
| In your experience with the ap | plicant, please | rate the fol | lowing: | | | |
| | Superior | Good | Fair | Poor | N/A | |
| Attitude | | | | | | |
| Dependability | | | | | | |
| Integrity | | | | | | |
| Ability to work with others | | | | | | |
| Ability to work independently | | | | | | |
| Initiative | | | | | | |
| Academic Performance | | | | | | |
| Oral Communication Skills | | | | | | |
| Written Communication Skills | | | | | | |
| Leadership Ability | | | | | | |
| What is your relationship to the | e applicant? | | | | | |
| Instructor Sun | ervisor | Employee | | Other | | |
| Instructor Supe | 51 VISOI | Employer | | Juici | | |
| If other, please specify: | | | | | | |
| How long have you known the a | applicant? | | | | | _ |
| How well do you know the app | olicant? | | | | | |
| Very Well | Well | | omewhat | | Not Well | |
| <u> </u> | wen | | ome what | | Trot wen | |
| Overall Recommendation: | | | | | | |
| Strongly Recommend | Recommend | Reco | ommend w | ith reservati | ions Do not re | ecomr |
| Evaluator's Name | | Title | e | | | |
| Preferred Contact and Information | tion | | | | | |
| Signature | | Date | | | | |



1700 Helberg Lane Ozark, AR 72949 Phone: 479 667-2117, Ext. 325 Fax: 479 667-0198

CARDIOVASCULAR TECHNOLOGY-CARDIAC SONOGRAPHY (CVT) PROGRAM **Student Recommendation Form**

Evaluator: Please return to the applicant in a sealed envelope with the signature over the seal or mail in a sealed envelope to: Arkansas Tech University-Ozark Campus, Attention: CVT Program Secretary, 1700 Helberg Lane, Ozark, AR 72949 or email smoffit@atu.edu.

| Applicant's | | | | | | |
|-----------------------------|----------------------|---------------|---------------|----------|--------------|------------|
| Name: | Last | | First | | | Middle |
| In your experie | nce with the applic | ant, please 1 | rate the foll | owing: | | |
| | | Superior | Good | Fair | Poor | N/A |
| Attitude | | | | | | |
| Dependability | | | | | | |
| Integrity | | | | | | |
| Ability to work v | vith others | | | | | |
| Ability to work is | ndependently | | | | | |
| Initiative | | | | | | |
| Academic Perfor | mance | | | | | |
| Oral Communica | tion Skills | | | | | |
| Written Commun | nication Skills | | | | | |
| Leadership Abili | ty | | | | | |
| What is your re Instructor | lationship to the ap | | Employer | | Other | |
| If other, please | specify: | | | | | |
| How long have y | you known the appl | icant? | | | | |
| How well do yo | ou know the applica | nt? | | | | |
| Very Wel | 1 | Well | | mewhat | | Not Well |
| Overall Recom | mendation: | | | | | |
| Strongly Red | commend Re | commend | Reco | mmend wi | th reservati | ions Do no |
| Evaluator's Na | ne | | Title | | | |
| Preferred Conta | ect and Information | | | | | |
| Signature | | | Date | | | |