

Neurodiagnostic Technology



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Welcome to Neurodiagnostic Technology Program

Congratulations! You have chosen a wonderful and rewarding career and secured admission to an exceptional partnership program to help you achieve your goals.

This handbook serves to provide you with important information on program policies and procedures. This handbook should be used in conjunction with the corresponding applicable Carroll University Student Handbook, Carroll University Undergraduate Catalog, as well as the student handbook provided by Advocate Aurora Health. Accepted students transitioning into the clinical phase of the program must adhere to all policies and maintain all progression standards outlined and provided by their cooperating hospital partner. See the College of Health Science Progression Standards section of the catalog for more details. **Students in partnership programs Neurodiagnostic Technology must adhere to the policies and requirements outlined by both Carroll University and Advocate Aurora Health program.** Because program policies and procedures are subject to change over time, this handbook is reviewed annually and subject to change as appropriate.

The road to successfully completing the hospital phase of your program can be a long and challenging one. Guidance and support will be provided in a cooperated effort from your Carroll University Advisor and the faculty and staff at Advocate Aurora Health program over the next two years. I'm excited to continue supporting you though the next phase of your academic journey.

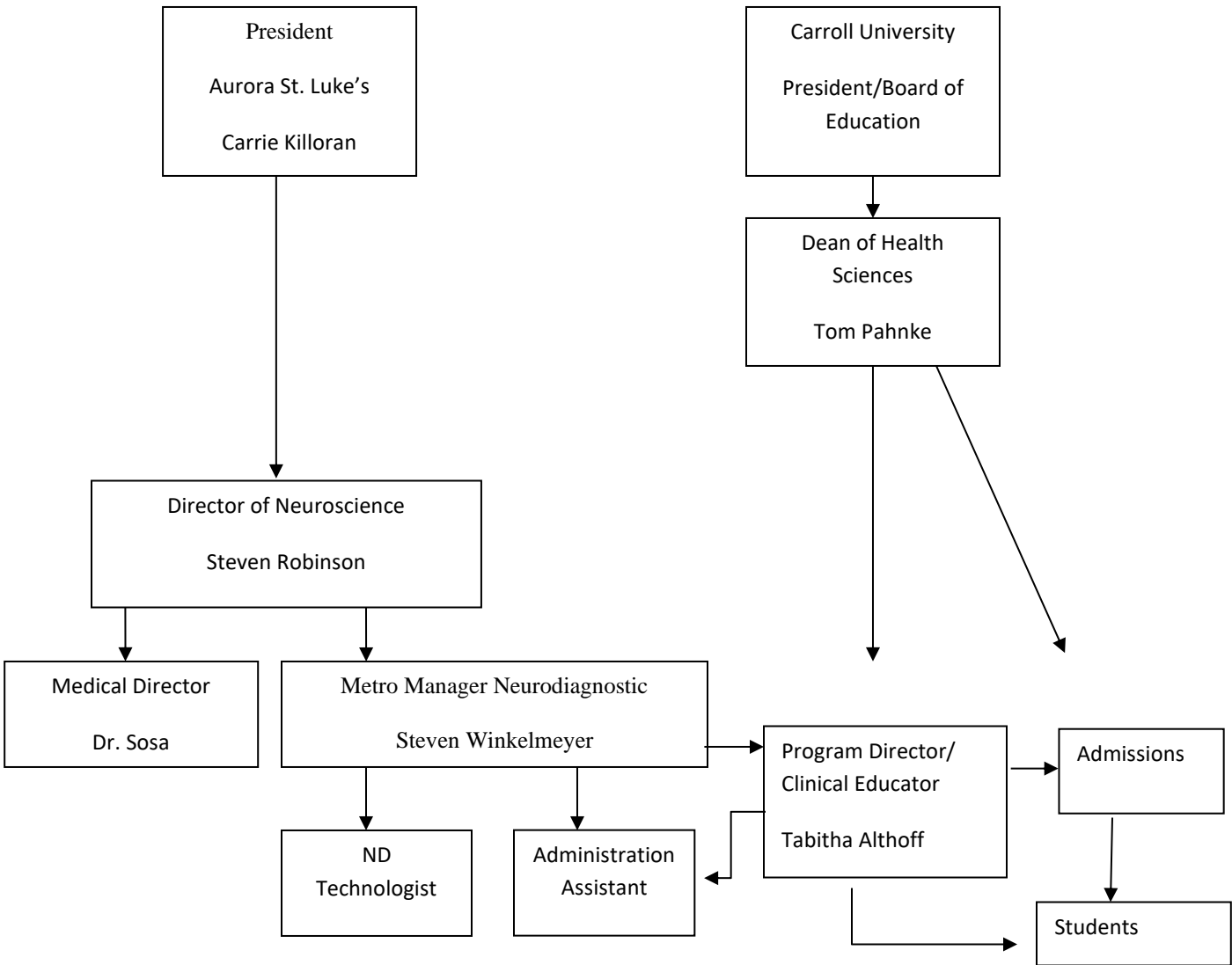
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Advocate Aurora Health

Advocate Aurora Health Purpose, Vision and Values



Aurora Health Care and Carroll University Neurodiagnostic Program Administration Chart



Carroll University & Hospital Affiliate Information

Advisor Contact

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Additional Campus Contacts

Please reference the current Carroll University Student Handbook for additional contact information.

Academic Advising Services

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262.524.7412

Academic Support

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262.524.7180

Career Services

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Financial Aid

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Registrar's Office

reg@carrollu.edu
262.524.7208

Student Success

Jeff McNamara
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262.524.7360

Hospital Affiliates

Advocate Aurora Health School of Neurodiagnostic Technology

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Program Objective

Program Mission

The mission of Carroll University’s and Advocate Aurora Health Bachelor of Science in Neurodiagnostic Technology program is to prepare students to become ethical healthcare technologists who incorporate critical thinking, evidence-based principles, and interprofessional practice in the neurodiagnostic field.

Curriculum Overview

These partnership programs are offered in a didactic + clinical education cohort model and require a full-time commitment (40 hours/week), as well as access to reliable transportation to travel between the school and clinical sites. A list of clinical sites for each hospital can be found on the program-specific *MyGroups pages in the Carroll portal*. 18 classes will be on site at Advocate Aurora Health (AAH) 4 of which include Clinicals/Internship. AAH classes will be held Monday – Friday 8 am to 4 pm at Aurora St. Luke’s Medical Center following the CU class academic calendar. JR will have class in the morning and clinicals/ internship to follow. SR will have clinicals/ internship in the morning and classes to follow.

Curriculum is based on the Committee Accredited for Education in Neurodiagnostic Technology (CoA-NDT) as established by the Commission on Accreditation of Allied Health Education Programs (CAAHEP). The faculty presents the curriculum through formal lecture, laboratory and clinical applications to enhance the learning experience. Written and practical tests are administered at defined intervals. A syllabus that outlines course goals, requirements and lecture schedule is distributed at the beginning of each course. The preparation of Case Study projects is a regularly scheduled program requirement.

	NDT
	Aurora
Program Length (in months – hospital phase)	21
Total Semesters	4
FA & SP Semesters	4
SU Semesters (additional tuition required)	0
Graduation	May

List of Courses

Support

ANP130 Introduction to Human Anatomy and Physiology I 4 credits
ANP140 Introduction to Human Anatomy and Physiology II 4 credits
PSY101 Introductory Psychology (S1) 4 credits
COM207 Intercultural Communication (S1) 4 credits
PHY101 Introductory Physics I 4 credits
PHY102 Introductory Physics II 4 credits
NDT275 Neuroanatomy and Physiology 4 credits
Total 28 credits

Core

NDT301 Neurodiagnostic Basic 3 credits
NDT302 Neurodiagnostic Neurological Disease 3 credits
NDT303 Neurodiagnostic Instrumentation 3 credits
NDT304 Neurodiagnostic Intro to PSG 3 credits
NDT305 Neurodiagnostic Recording Standards 3 credits
NDT306 Neurodiagnostic Pattern Recognition of Electroencephalograms 3 credits
NDT307 Neurodiagnostic Intro LTM/EP/IONM/NCV 3 credits
NDT308 Neurodiagnostic Board Prep 3 credits
NDT380 Neurodiagnostic Internship I (EEG) 5 credits
NDT390 Neurodiagnostic Internship II (EEG) 5 credits
NDT401 Neurodiagnostic Evoked Potential 3 credits
NDT402 Neurodiagnostic Evoked Potential Board Prep 3 credits
NDT440 Neurodiagnostic IONM I 3 credits
NDT450 Neurodiagnostic IONM II 3 credits
NDT460 Neurodiagnostic IONM III 3 credits
NDT470 Neurodiagnostic IONM IV 3 credits
NDT480 Neurodiagnostic Internship III (IONM) 5 credits
NDT490 Neurodiagnostic Internship IV (IONM) 5 credits
Total 66 credits

Pioneer Core

ENG170 Writing Seminar 4 credits
CCS100 Cultural Seminar 4 credits
Distribution Courses 16 credits
CCS300 Cross Cultural Experience 2 credits
CCS400 Global perspectives Colloquium 2 credits
Total 28 credits

BS Requirements

CMP112 Computational Thinking I 4 credits
CMP114 Computational Thinking II - Statistical Analysis Emphasis 4 credits
Total 8 credits

Total BS in NDT 128 credits

BS in NDT Plan of Study

Year 1 – Fall

CCS100 Cultural Seminar 4 credits
ANP130 Introduction to Human Anatomy and Physiology I 4 credits
PSY101 Introductory Psychology (S1) 4 credits
ENG170 Writing Seminar 4 credits
Total Credits 16 credits

Year 1 – Spring

CMP207 Intercultural Com (CCD) 4 credits
ANP140 Introduction to Human Anatomy and Physiology II 4 credits
CMP112 Computation Thinking I 4 credits
GE1 PioCore (F1,P1,H1) 4 credits
Total Credits 16 credits

Year 2 – Fall

CMP114 Computational Thinking II 4 credits
PHY101 Introductory Physics I 4 credits
GE1 PioCore : F1/H1/P1 4 credits
GE1 PioCore: F1/H1/P1 4 credits
CCS300 Cross Cultural Experience 2 credits

Total Credits 16 credits

Year 2 – Spring

PHY102 Introductory Physics II 4 credits
CMP112 Computational Thinking I 4 credits
GE2 Pioneer Core: F2/H/2/P2 4 credits
CCS Global Perspectives Colloquium 2 credits
Total Credits 18 credits

Year 3 – Fall

NDT301 Neurodiagnostic Basic 3 credits
NDT302 Neurodiagnostic Neurological Disease 3 credits
NDT303 Neurodiagnostic Instrumentation 3 credits
NDT304 Neurodiagnostic Intro to PSG 3 credits
NDT380 Internship I (EEG) 5 credits
Total Credits 17 credits

Year 3 – Spring

NDT305 Neurodiagnostic Recording Standards 3 credits
NDT306 Neurodiagnostic Pattern Recognition of Electroencephalograms 3 credits
NDT307 Neurodiagnostic Intro LTM/EP/IONM/NCV 3 credits
NDT308 Neurodiagnostic Board Prep 3 credits
NDT390 Internship II (EEG) 5 credits
Total Credits 17 credits

Year 4 – Fall

NDT401 Neurodiagnostic Evoked Potential 3 credits

NDT402 Neurodiagnostic Evoked Potential Board Prep 3 credits

NDT440 Neurodiagnostic IONM I 3 credits

NDT480 Internship III (IONM) 5 credits

Total Credits 14 credits

Year 4 – Spring

NDT450 Neurodiagnostic IONM II 3 credits

NDT460 Neurodiagnostic IONM III 3 credits

NDT470 Neurodiagnostic IONM IV 3 credits

NDT490 Internship IV (IONM) 5 credits

Total Credits 14 credits

Total Program Credits 128 credits

Program Student Learning Outcomes

The Program Student Learning Outcomes are as follows:

1. Graduates will possess the knowledge and skills in the domains of Neurodiagnostic Technology for entry-level practice as delineated by the American Clinical Neurophysiology Society (ACNS).
2. Graduates will have an understanding of interprofessional healthcare practice and its impact on the patient experience.
3. Graduates will use sound clinical decision-making skills in a variety of dynamic neurodiagnostic environments.
4. Graduates will possess appropriate communication and situational skills necessary to practice successfully with diverse patient populations and professional environments.
5. Graduates will have an appreciation for the impact and influence of the ACNS code of ethics and regulatory considerations on the practice of Neurodiagnostics.

Relationship between Program Student Learning Outcomes/Objectives, Four Pillars and Courses and Assessment Indicators

The University's educational philosophy is sustained by the four pillars of integrated knowledge, lifelong skills, enduring values and gateway experiences.

1. **Integrated Knowledge** is the very foundation of a quality liberal arts program. The Carroll curriculum emphasizes breadth and depth of learning. Our purpose is to encourage students to recognize the interrelationships among ideas. We believe that students with this understanding will continue to learn, grow and succeed long after they leave the campus.
2. **Lifelong Skills** help students prepare for life and work in a world of rapid and constant change. We believe that graduates will continue to evolve and contribute to their communities long after they earn their degrees. To that end, our mission is to help students learn to think critically and creatively, adapt to changing technologies, work efficiently and effectively, collaborate with others, and communicate clear, compelling ideas.
3. **Enduring Values** help students to consider always the impact of their actions on the world around them. We believe that effective leaders draw their inspiration from strong personal value systems. Our goal, therefore, is to offer students multiple opportunities to make decisions and then to reflect upon their consequences.
4. **Gateway Experiences** occur both upon entering and upon leaving Carroll University. We believe that our educational responsibility extends beyond the classroom into every aspect of our students' lives. That is why we place a special emphasis on preparing incoming students for university life and on helping graduates make successful transitions into their first jobs, or graduate and professional schools.

Upon graduation the Neurodiagnostic student will:

1. Possess the knowledge and skills in the domains of Neurodiagnostic Technology for entry-level practice as delineated by the American Clinical Neurophysiology Society (ACNS);
2. Have an understanding of interprofessional healthcare practice and its impact on the patient experience;
3. Use sound clinical decision-making skills in a variety of dynamic Neurodiagnostic environments;
4. Possess appropriate communication and situational skills necessary to practice successfully with diverse patient populations and professional environments; and
5. Have an appreciation for the impact and influence of the ACNS code of ethics and regulatory considerations on the practice of Neurodiagnostics.

This assessment report specifically evaluates program learning outcomes through the following assessment measures:

1. Student performance on the Board of Registration (BOR) Examinations
2. Student performance in domains related to the BOR pass rate
3. Student performance in domains related to certification practice exams
4. Student performance on signature assignments within courses
5. Student scores on the Program Exit Survey
6. Student and preceptor evaluation during clinical education courses

GENERAL INFORMATION

Pending Accreditation

The program is pending accredited by the Commission on Accreditation of Allied Health Education Programs (CAAHEP) upon recommendation by CoA-NDT. If schooling coincides with a site visit, the CoA-NDT representatives may request to speak to the student and/or review student records.

Americans with Disabilities Act

The program complies with the Americans with Disabilities Act. If the student has a special accessibility need, the student should notify the faculty.

Bloodborne Pathogens

Students are responsible for compliance with OSHA standards. OSHA standards and facility exposure control plans will be provided for new students during orientation. Students are required to participate in annual Infection Control In-services and review the Infection Control manual updates as necessary.

Changes in Status

It is very important that the faculty be aware of any status changes. In order to keep your records current, please alert the faculty to address, phone number, and name changes.

Confidentiality

Aurora Health Care, Inc. and its affiliates recognize the need to protect the privacy of individually identifiable health information (protected health information or PHI). All Aurora organizations and affiliates and Aurora employees, volunteers, contractors, students and temporary help shall adhere to privacy-related requirements as defined by Aurora policies and as required by state and federal law.

Credentials

Upon satisfactory completion of the prescribed curriculum and other listed criteria, the student receives a certificate of graduation. This certificate enables the student to apply to take the national certifying examinations administered by the ABRET.

Drug-free Workplace

Aurora St. Luke's Medical Center and the Neurodiagnostic Technologist are committed to

achieving and maintaining a drug free workplace. *Any student under the influence of alcohol or illegal drugs or uses these substances while at school will be terminated.* Final acceptance into the program depends on the results of a drug-screening test.

Guidance

Guidance is available to all students enrolled in the program. The faculty will assist the student with academic and clinical concerns. The faculty will direct the student to their personal physician for counseling or referral in cases of personal problems that may interfere with the program.

Library

Students may use any books or periodicals from the classroom or offices. If the student wishes to sign materials out, the student must return materials the next day. In addition, students enrolled in the program have access to the AAH libraries and CU.

Loss Prevention Services

The program strives to provide a secure and safe environment for students and employees. Security officers are available to assist you 24 hours a day, 7 days a week. If you notice any suspicious activity, contact Loss Prevention or your supervisor immediately.

Reporting Concerns

Every student problem is a concern to the program administrators. The student may best handle minor personality differences with the individual involved. If the student is unable to resolve the conflict, the student should inform the program supervisor and/or supervising clinical instructor of the situation. We routinely solicit student feedback through semester evaluations and the rotation evaluations. However, in order to address any concerns in a timelier fashion we have an alternative method for reporting concerns to program faculty.

For clinically related issues you need not report every issue only those for which your clinical instructor could not, or did not, address your concern or if there is an issue with a clinical instructor. A member of the program faculty will provide you with clarification and/or direction in an attempt to resolve the matter. The student will not be required to submit any written documentation.

Tuition

As discussed during advising, students will continue to register for all courses and pay tuition to Carroll University each semester. CU will reimburse the hospital partner for tuition costs and enter grades on transcripts once received from the program. A temporary grade of 'INC' may be entered, and the transcript will be updated to accurately reflect final grades once received. Additionally, courses completed in the winter or summer terms are not included in fall or spring tuition (including CCS400 if not completed prior to the hospital phase). SU/WN credits are billed out at the Part-time (less than 12 credits). *Please refer to the catalog for current tuition rates and additional information.*

Financial Services

The Financial Aid Office is responsible for providing qualified students the appropriate documentations and counseling to secure financial assistance in the form of loans, scholarships, and grants.

Student Health and Insurance Requirements

Clinical students are required to have completed a health screening, updated immunizations and tuberculosis screening according to current Centers of Disease Control and Prevention (CDC) recommendations for health professionals, and background investigation and drug screening prior to beginning the professional phase of the program. Failure to maintain updated immunizations can prevent a student from progressing in the program. Clinical students are required to maintain health insurance coverage, at their own expense, for the duration of the program.

Technical Standards

Each hospital affiliate requires that a student possess the ability to meet the requirements of the program. Though the program might modify certain course requirements to provide accommodations required by the Americans with Disabilities Act and Section 504 of the Rehabilitation Act of 1990, there are no substitutes for essential skills. The intern must independently, with or without reasonable accommodation, be able to meet each requirement to gain admission to the program, and must also continue to meet them throughout participation in the program. A copy of the program's technical standards will be provided by each hospital at time of matriculation to the clinical phase.

Progression Standards

Clinical interns in the partnership programs must adhere to all policies and maintain all progression standards outlined and provided by their cooperating hospital partner. *See the College of Health Science Progression Standards section of the catalog for more details.*

Admissions, Prerequisites, and Academic Progression

The NDT Program provides the student the opportunity to enter the Neurodiagnostic Training Program two ways:

1. Direct Admission (Freshman-level of entry)

Direct admission entry provides select incoming first-time freshmen matriculating directly out of high school an opportunity to enter directly into the pre-NDT phase of the program and receive a guaranteed NDT seat, provided progression standards and cohort requirements are met. The NDT program comprises four total years of study.

Direct admission selection decisions will be based on evaluation of:

1. Carroll University general admission undergraduate application.
2. Those accepted for NDT direct admission must submit and meet program Safety and Technical Standards.
3. Transcript from an accredited secondary school which shows six semesters of coursework. It is recommended that a senior course schedule is included with general application materials. In addition, the following high school courses are strongly recommended, with grades of "C" or better:
(One or more years of high school biology
One or more years of high school chemistry
Two or more years of high school foreign language
Three or more years of mathematics
One year of physics
Students directly admitted to the NDT program must earn a minimum 3.0 cumulative and professional GPA. The professional GPA is calculated with the following courses (or their equivalent): ANP130, ANP140, PHY101 and 102, NDT275 or their equivalent. Professional phase courses may only be repeated once.

2. Non-direct Admission

Students who enroll at Carroll, not having been admitted to the program through direct admission can apply to the professional phase of the NDT program. Admission decisions will be made by the NDT Program Admissions Committee.

Items required for application:

1. A cumulative and semester GPA of 2.8 or higher is suggested for application
2. Pre-professional GPA of 2.8 or higher is suggested for application (ANP130 and 140, PHY101 and 102, NDT275)
3. A minimum course grade of "C" is required in all coursework used to calculate pre-professional GPA.
4. Completion of the Pioneer Core (with the exception of CCS400) and required

Support Courses (ANP130, ANP140, PSY101, COM207, PHY101, PHY102, and NDT 275)

5. Submission of application to include: transcripts, cover letter, résumé, personal essay and two letters of reference (one from a professor and one from a character reference).
6. Completion and submission of technical standards form and criminal history check.
7. May only repeat a course once and not be on academic probation.
8. Admission and progression standards are subject to change based on regulatory licensing, and/or certification needs.

3. Academic Progression

Academic progression in the NDT program requires a minimum grade of BC or better in all NDT courses. A letter grade of C, D, F or U is considered a failing grade and requires the student to repeat the course before progressing to subsequent courses for which the failed course is a prerequisite. When repeating an NDT course, a student may be required to successfully complete ancillary learning experiences or clinical competencies/practicums that validate theoretical knowledge. If a student is unable to take further courses in the next occurring semester as a result of this policy, the student is placed on academic suspension and repeats the course during the next appropriate semester.

A course may be repeated only one time. A student receiving a C, D, F or U in the same NDT course twice or in two NDT courses is dismissed from the program. A student in the professional phase of the NDT must obtain a minimum grade point average of 2.75 or better each semester. If a student earns a semester grade point average between 2.00 to 2.74 or receives an “Unsatisfactory” course grade, he/she is placed on academic probation.

To meet academic standards for progression, the student must earn a grade point average of 2.75 or better in the following semester. If a clinical internship course is scheduled during the next semester, the student must earn a satisfactory (S) grade in the clinical internship course to be removed from academic probation. If a student does not meet progression standards a second time during his or her tenure in the program, he or she will be dismissed from the program. If a student earns a semester grade point average of 1.99 or less, he/she will be dismissed from the program.

UNSATISFACTORY COURSEWORK/CLINICAL PERFORMANCE

PURPOSE: To establish guidelines for failure to maintain grading standards.

SCOPE: This policy applies to students enrolled in Neurodiagnostic Technology.

PROCEDURE:

Academic:

Students must earn all course credits to graduate from Neurodiagnostic Technology. Failure of classroom assignments, tests or the final exam could result in failure of the course.

The following guidelines will be used for failed coursework:

1. Test Corrections will be required for any unit test score below the school standard of B.
 - The student will provide an explanation in their own words for incorrect answers.
 - Demonstrate an accuracy in their explanation to include why their choice was incorrect.
 - Provide at least two sources for their explanation from the required textbooks.
 - The instructor will review all test corrections to ensure accuracy and provide additional feedback to the student when needed.
 - Additional points may be awarded for test corrections up to a maximum of 3 points total at the discretion of the instructor.

2. Students who are demonstrating poor academic progress will meet with the instructor and program supervisor to discuss potential tutoring.

3. After Semester 1, remediation will be offered to any student who does not satisfactorily pass a course. The student will be placed on probation during the remediation period. Successful completion of remediation will lift the probationary status.
 - The instructor and program supervisor will meet to devise a remediation assignment.
 - The assignment will be in the form of student self-study. The student may request a meeting with the instructor at any time during the self-study for additional assistance.
 - The assignment will correlate directly with the course objectives.
 - Successful completion of the assignment will prepare the student for the remediation final exam.
 - A remediation final exam will be formulated to ensure the course objectives have been met.

- The student will demonstrate mastery of the course material by achieving a minimum letter grade of B or better on the final exam. Failure of the remediation final may result in termination from the program.
 - The student will meet with the program supervisor and instructor prior to and after completion of remediation (see disciplinary process).
 - A new grade for the course will be calculated from remediation and averaged with the original grade in the course.
 - The student's new grade in the course will be reflected on the transcript along with the original grade.
 - The student will receive ½ the original point value for the course as calculated in the overall GPA.
4. The following conditions will result in student dismissal from the program:
- a. Failure of any academic course or any component of clinical education during the first semester
 - b. Failure of more than one course during semesters 2 -4
 - c. Failure of one course and one component of clinical education during semesters 2 – 4
 - d. Failure of more than one component of clinical education during semesters 2 – 4
 - e. Failure of a course, a second time
 - f. Any student performance that warrants a 3rd probationary period
 - g. Non-compliance with a probationary action plan

Clinical

Students must earn all clinical credits to graduate from the Neurodiagnostic Technology. Failure of any clinical component could result in failure of clinical education. The following guidelines will be used for failed clinical components:

1. Clinical Proficiency

- Any student receiving a grade below the minimum standard (B) will be required to repeat the proficiency.
- The program faculty will coach the student on deficiencies
- The new grade will be averaged with the first proficiency/test out grade for a final grade in that area of study.
- Failure of a proficiency a second time may result in disciplinary action including dismissal from the program

2. Clinical competency

- The failed competency is recorded and becomes part of the overall competency grade for the major area of study.
- Students will repeat any failed competency.
- Repeated failure of a competency in any major area of study may result in disciplinary action including dismissal from the program

3. Clinical performance evaluation

- Any student receiving a grade below the minimum standard (B) will be placed in disciplinary action which may include dismissal from the program.

4. Clinical Practicum

- Any student receiving a grade below the minimum standard (B) will be placed in disciplinary action which may include dismissal from the program.

5. Clinical Assignments

- Any student receiving a grade below the minimum standard (B) will be placed in disciplinary action which may include dismissal from the program.

Grading System

PURPOSE: To establish standards for determining successful completion of all aspects of the radiography curricula.

SCOPE: This policy applies to students enrolled in the Neurodiagnostic Technology.

Program Standard

The student must achieve a minimum of an 80% (B) average in all academic and clinical courses in order to earn course credits and remain in good standing. Failure to achieve the school standard of 80% will lead to disciplinary action, which may include termination from the program.

Grading Scale

All grades are determined as a numeric value and transferred to a letter grade. The numeric, letter and descriptive relationships are as follows:

Numeric Grade Letter Grade Grade Point Clinical Performance Academic Performance

90.0 - 100	A	4.0	Significant Strength	Excellent
85.0 –89.99	B+	3.5	Developing Strengths	Above Average/Excellent
80.0 – 84.99	B	3.0	Proficient	Above Average
75.0 – 79.99	C+	2.5	Developing Proficiency	
Below 74.99	U <	2.0	Needs Development	Unsatisfactory

Standard Compliance and Documentation

Academic achievement and clinical performance are evaluated and graded at the conclusion of each semester. Semester letter grades are documented on the corresponding semester transcript. The final transcript is signed by both the program director and student

Appeal Process

Students in the partnership programs must adhere to the policies and requirements outlined by both Carroll University and AAH. Questions on the appeal process can be directed to the Health and Medical Sciences Advisor.

GRADUATION CRITERIA

PURPOSE: To establish the guidelines necessary for graduation.

SCOPE: This policy applies to all students involved in the Neurodiagnostic Technology program.

PROCEDURE: The following criteria must be met/achieved by the student:

1. Complete all didactic courses with a letter grade of “B” or better.
2. Complete all components of clinical education with a letter grade of “B” or better.
3. Complete required exit outcomes /competencies to the satisfaction of the program faculty.
4. Register for Electroencephalographic Technologist (EEG) Boards through ABRET.
5. All tuition and fees are paid in full.
6. All library materials are returned.
7. All missed time is made up.

Upon successful fulfillment of these criteria, graduating students receive a certificate from ASLMC Neurodiagnostic Technology and a diploma from Carroll University.

STUDENT PROGRESS – SELF EVALUATION

PURPOSE:

This policy is intended to provide guidelines aimed at ensuring continued evaluation of the student's academic and clinical progress throughout the program. To evaluate the student's portrayed confidence level for different Neurodiagnostic exams learned to date.

SCOPE:

This policy applies to all students enrolled in the Neurodiagnostic Technology.

PROCEDURE:

The student will meet with members of the program faculty mid semester and at the end of the semester to discuss programmatic progress. Students will complete a form that allows them to evaluate their own progress. In addition, program suitability will also be evaluated. Current academic and clinical grades will be discussed, and goals will be outlined as needed.

Program faculty will review each student form and discuss the self-evaluation with the student. Program clinical instructors possess knowledge of the student's progress through one on one-site visits. Future goals will be discussed and documented.

The evaluation form provides a means of evaluating individual student's strengths and weaknesses in relation to specific neurodiagnostic examinations.

It is the responsibility of the program faculty to revise and update evaluation forms on a continual basis.

It is the responsibility of the student to complete this evaluation form at appropriate intervals.

Progress evaluations will be maintained as part of the student's permanent records.

Academic Accommodations

Any students seeking or continuing a request for accommodations with their hospital partner, should follow the instructions in the Carroll University catalog. The hospital is free to make arrangements with interns, but official accommodations must be made through Student Accessibility Services. While the hospital partners can choose to make modifications for students at their discretion without the official form being filed with Carroll, submitting the form requires that instructors with the hospital must make accommodations as listed for the student.

After accommodations have been granted, the form must be completed and resubmitted by the student each semester in order to continue to receive accommodations. Student Accessibility Services will inform the hospital instructors of the approved accommodations, but it is the student's responsibility to request the accommodations from individual instructors as needed.

Problem/Conflict Resolution

When a clinical student identifies a conflict or problem with a course or instructor, the student should follow this list of steps:

1. Begin by speaking with the course instructor. If this does not resolve the concern then:
2. Talk with the Program Director. If the issues are still not resolved then:
3. Communicate with the Health and Medical Sciences Advisor.

If a student is experiencing personal problems, the student should speak with their CU advisor. The advisor will try to guide the student to appropriate resources, such as student services or referral to outside agencies.

Employment during the Clinical Phase

Because of the intensity of the partnership programs, it is important for students to successfully balance employment and academics should they choose to work during the program. If a student chooses to have a job, it is his/her responsibility to ensure that employment does not interfere with or hinder academic progress. Having a job is not an excuse for missing lectures, examinations, clinical labs, or assignments. Students will be required to participate in didactic and clinical studies for about 40 hours a week.

Participation in Athletics

The student's first priority should be maintaining progression standards within the partnership program. If a student is able to meet the demands of the full course load and clinical experience, they are welcome to speak to their coach about how participation in athletics might be coordinated outside of the academic and clinical program requirements.

Advising & Registration

Even though clinical students in the partnership programs are, for all intents and purposes, "off-campus", they remain Carroll students and able to utilize university resources. The Health and Medical Science Advisor will continue to support and guide the interns through their clinical phase. As Carroll liaison to the hospitals, the advisor is in regular contact with the Program Directors; however, students are asked to share any concerns with their university advisor as soon as any issues arise.

The CU Advisor will communicate regularly with students, so it's very important that they check their PioMail email address frequently to stay informed. While no longer required to attend an advising session, **interns will be required to individually register for classes as advised through the student portal prior to the deadline.**

Students are responsible for **dropping any courses** prior to the deadline date. Be aware that dropping any clinical courses will affect the student's ability to progress in the program. Also, changes in credit load or full-time status may affect financial aid and campus housing. Any **withdrawals from the University** must be completed in the Office of Student Success and communicated to the advisor.

Student Responsibilities

Students are responsible to:

- Check their PioMail email address regularly for university communications.
- Contact the Health and Medical Sciences Advisor with any questions or concerns.
- Maintain sufficient health insurance coverage at their own expense for the duration of the program.

- Be aware of important academic calendar dates and program deadlines.
- Register for class each term during the entire hospital phase of the program.
- Submit an Application for Graduation/Degree Audit to the Registrar’s Office through the student portal as soon as 60 credits are earned.
- Maintain full-time student designation as this affects the total credits students are allowed to register for each term.
- Have reliable transportation to the school and various clinical sites.
- Comply with campus housing and meal plan requirements. Students should work with the Housing Office regarding any questions or Requests for Exemption.

Additional student responsibilities are outlined in the ***Carroll University Student Handbook***.

Commencement and Diplomas

Commencement is the formal campus-wide graduation ceremony held in May of each year during which degrees are conferred from the university. Students completing their program requirements in August are still able to participate with their fellow Pios in the May Commencement festivities.

Students wishing to walk in the spring ceremony, should complete a degree audit (also referred to as an application for graduation) any time after they’ve earned a total of 60 credits. When completing the online form, students should indicate a planned graduation of SP/May (even if they will truly finish their program in August). This will ensure the graduate receives notifications about the May ceremony. The Registrar will typically email mid-late February with information. Students must be registered for graduation by April and will not be allowed to change their intent to walk in the ceremony after that. Diplomas will be sent after program completion and degree confirmation by the Registrar.

Credential Awarded

Upon successful completion of the partnership programs, students will be awarded one of the following Bachelor of Science degrees and be eligible to sit for the national exam for their specific discipline:

Neurodiagnostic Technology

- BS in NDT
- The American Board of Registration of Electroencephalographic and Evoked Potential Technologists (ABRET) encourages and promotes quality technical and clinical standards worldwide for neurodiagnostic technologists and laboratories through certification and accreditation.

Registry vs. Licensure

Neurodiagnostic Technology

The NDT partnership program provides the approved education needed for students to be eligible to sit for their required national exam. Passing the exam is required in order to practice. Professionals must pass ABRET board exams which are recognized worldwide. There are no state licensure requirements at this time for NDT.

<https://www.abret.org/candidates/credentials/eeg/>

Additional Resources

Neurodiagnostic Technology

- [ASET The Neurodiagnostic Society](#)
- [ABRET Neurodiagnostic Credentialing and Accreditations](#)

- [Board of Registered Polysomnographic Technologists](#)
- [Organisation of Societies for Electrophysiological Technology](#)
- [The Nerve Conduction Association](#)
- [American Society of Neurophysiological Monitoring](#)
- [American Clinical Neurophysiology Society](#)

Attendance Policy

PURPOSE: To establish guidelines and standards regarding student attendance during the Neurodiagnostic Technology program.

SCOPE: This policy applies to all students enrolled in the Neurodiagnostic Technology program.

RESPONSIBILITY: It will be the responsibility of the Program Supervisor and/or Clinical Coordinator to ensure compliance with this policy.

PROCEDURE:

Aurora St. Luke's Medical Center Neurodiagnostic Technology is a twenty-one (21) month, full-time program. Students enrolled in the school are required to attend the Medical Center or affiliates based on 40 hours per week (Monday – Friday). Both the Clinical and Didactic phases of the Educational Program are incorporated into the 40 hours. No student will be scheduled didactic and clinical hours to exceed forty hours per week.

Time Recording:

- A record of each student's clinical hours will be maintained electronically through Sling.
- Students are required to check in with the teacher upon arrival to record arrived time and departure. Students are expected to arrive on time and stay for the entire 8 hours unless prior written approval has been granted by the program supervisor and/or clinical coordinator. Written approval documents will be retained in the student file.
- **Falsifying timecard entries is grounds for immediate dismissal from the program.**
- Except when approved for early dismissal by the program supervisor and/or clinical coordinator, students will never leave their clinical sites early for any reason except a medical emergency or illness.
- Clinical instructors may not approve early release for any reason other than medical emergency or illness.

Illnesses:

- Students may be absent when there is a medical or personal emergency or illness. If a student is going to be absent for any reason, he/she must notify the program Clinical Coordinator and the clinical site at least **one-half hour** prior to the scheduled starting time on each day of the absence.
- When reporting an absence, the student must provide their name and anticipated length of absence.
- An excused absence will require a doctor's note.
 - Any student that is absent for three (3) days or more must have a doctor's release before returning to school activities.
- Students should discuss special circumstances with the program clinical coordinator in advance of the needed time off.
- Clinical hours missed will need to be made up on a later date.

Occurrence:

- Two unexcused tardies **or** one unexcused absence each count as one occurrence.
- Occurrences will negatively impact the student's standing in the program. Unexcused absences in excess of 1 per semester will be considered grounds for disciplinary action, which could lead to termination from the program. **A sixth unexcused absence will result in dismissal from the program.**
- An absence that consists of more than 1 day will be counted as a single occurrence if the time missed is successive.
- Any student that is absent for three (3) days or more must have a doctor's release before returning to school activities.

Scheduled Breaks:

- Fall Break
 - Thanksgiving Break
 - Winter Break
 - Spring Break
 - Good Friday
- * Scheduled Break a line with CU schedule

Any time off from school beyond the extent of this policy must be in accordance with the following policies:

- Leave of Absence
- Military Leave Policy
- Funeral Leave Policy
- Pregnancy Policy

Time off Request Form

Today's Date: _____

Student Name: _____

Date(s) you are requesting off: _____

Make Up dates and hours: _____

Type of Time Off: _____

Total Hours: _____

It is the student's responsibility to review and be familiar with all attendance policies.

Please email this form to the program supervisor(s) for approval.

Approved Not Approved

Signature of Program Supervisor and Date

Notification of Excessive Tardiness and/or Unexcused Absences

Tardy

The Neurodiagnostic Technology Program has the expectation that the student will be in their clinical area or class, appropriately dressed and ready to work at the appointed starting time. Arriving after the scheduled starting time is considered tardy.

As such, excessive tardiness will not be tolerated and is considered grounds for dismissal. Two (2) tardies in one semester will equal one (1) unexcused absence (8 hours). It is understood that I, have had tardies in Semester. It is understood that I will have hours to make up over the next scheduled break. I acknowledge that tardiness in excess of ten (10) will result in my dismissal from the program.

I acknowledge that this is a verbal warning for my excessive tardiness and that any further tardies may result in further discipline according to the School's disciplinary code.

Unexcused Absence

In accordance with the Aurora St. Luke's Medical Center Neurodiagnostic Technology Program Attendance Policy, each student is allowed a maximum of five (5) unexcused absences during the duration of the program. A sixth unexcused absence will result in dismissal from the program.

As of, I understand that I have reached the maximum number of unexcused absences allowed. I have also been informed that additional unexcused absences will result in my dismissal from the program.

Student Signature

Print Name

Program Supervisor or Clinical Coordinator

Print Name

Date

FUNERAL LEAVE

PURPOSE: To establish parameters for funeral leave and to provide direction for handling situations involving the death of a member of a student's family.

SCOPE: This policy applies to all students enrolled in the Neurodiagnostic Technology Program.

PROCEDURE:

Definitions: "Immediate Family" means husband, wife, father, mother, daughter, son, brother or sister.

- Amount of Funeral Leave
 - Four days of absence in case of a death in a student's immediate family.
 - Three days of absence will be granted for the loss of stepmother, stepfather, stepdaughter, stepson, stepsister, stepbrother, step-grandmother, step-grandfather, grandmother, grandfather, great-grandmother, great-grandfather, granddaughter, grandson, mother-in-law, father-in-law, sister-in-law, brother-in-law, son-in-law, and daughter-in-law.
- One day of absence will be granted to attend the funeral of an aunt, uncle, niece, nephew, grandmother-in-law, or grandfather in-law.
- The student must notify the faculty prior to the absence.
- Funeral Leave is an excused absence that does not have to be made up.
- The Faculty reserves the right to verify absences related to funeral leave and may require proof of relationship and/or death notice.

INCLEMENT WEATHER POLICY

PURPOSE: To provide students with guidelines in the event of inclement weather.

SCOPE: This policy applies to all students enrolled in the Neurodiagnostic Technology Program.

PROCEDURE:

1. Students are expected to make allowances for severe weather conditions in order to arrive on time. However, the program reserves the right to make exceptions to the policy based on the timing and severity of weather conditions.
2. The determination to report to class and/or clinical when travel conditions are potentially hazardous is at the student's discretion. Students are encouraged to consider their personal safety when travel conditions are potentially hazardous.
3. Absence due to adverse weather conditions when the school remains open is considered an unexcused absence and will be logged as an occurrence. The time missed must be made up during a regularly scheduled break.
5. School closure
 - Determination will be made as far in advance as feasibly possible
 - Students will be notified of school closure via email
 - In the event of school closure, students are not required to make up the time.
 - In the event that conditions worsen during the day and the school elects to close early, the student will be dismissed from class/clinical at the determined time of closing without penalty.

JURY DUTY

PURPOSE: To establish guidelines and standards regarding Jury Duty during the Neurodiagnostic Technology Program.

SCOPE: This policy applies to all students enrolled in the Neurodiagnostic Technology Program.

PROCEDURE: Postponement of jury duty can be requested by the Program Supervisor. Any student called to jury duty will be released for the time of service. If the student is called for half-day services, the student must report to class or clinical duties for the rest of the day. Students are responsible for assuring that all missed work is completed. Students are not required to make-up time lost, unless the Jury Duty extends beyond 3 days.

Leave of Absence

PURPOSE: To define guidelines for managing excessive and/or extended absences from the program.

SCOPE: This policy applies to students enrolled in the school of Neurodiagnostic Technology.

PROCEDURE:

A student in good academic standing may petition the faculty for a continuous or non-continuous leave of absence. The petition must be in writing and include the nature of the leave, the length of time and terms of the leave. A request for a leave of absence due to medical and/or emotional reasons must be accompanied by certification from the attending physician. Failure to comply with the terms as set forth in the student's initial petition may lead to a release date later than the original anticipated date of graduation or disciplinary action up to and including termination. The program supervisor must agree to and approve the terms of the leave. Leave of absence requests will be granted on a case by case basis. All time must be made up prior to graduation. No matter what the nature of the leave the maximum time off allowed is 160 hours. Based on the leave of absence request or if the time off required exceeds 160 hours, the student may be dropped from the program with eligibility to be readmitted in proper academic and clinical sequencing in the following year. The student's readmission and date of program completion will be determined by the Admissions Committee. If the need for a leave of absence occurs in the first four months of the program, the student must reapply for admission to the School in the class starting the following year.

MILITARY LEAVE

PURPOSE: To establish guidelines and standards regarding student attendance and Military Leave of Absence during the Neurodiagnostic Technology.

SCOPE: This policy applies to all students enrolled in the Neurodiagnostic Technology Program.

PROCEDURE: Students who are enlisted in the National Guard, or any other type of Military Reserve unit will be allowed to meet their military service commitments in the following manner.

1. Weekend Drills

The student must submit to the Program Supervisor a list of drill weekends that he/she will need off. This list must be submitted at least two (2) weeks prior to the posting of the schools clinical experience schedules.

2. Yearly Two (2) Week Active Duty Commitment

Every effort should be made by the student to postpone any active duty commitment. Students that are unable to do so will be released. The student will be responsible for completion of all assignments and tests.

All time missed due to military leave must be made up prior to graduation from the program, which may extend training, and postpone graduation, if necessary.

PREGNANCY POLICY

PURPOSE: This policy is intended to provide guidelines for the pregnant student.

SCOPE: This policy applies to all students enrolled in the Neurodiagnostic Technology.

PROCEDURE: Upon determination of pregnancy, the student is required to inform the program supervisor and submit a physician's statement indicating the following:

- Estimated date of delivery
- A release- which permits continued
- participation in school activities
- Restrictions (if any apply)
- If the delivery of the baby coincides with program activities the student must petition the faculty for a leave of absence (see leave of absence policy for limitations of hours).

Following the leave of absence, the student is responsible for making up any lost time, which may extend training, and postpone graduation, if necessary.

The student is also responsible for making up assignments promptly upon return from Medical Leave. The period of time for making up work must not exceed the length of the leave itself.

CELL PHONES, SMART WATCHES AND OTHER ELECTRONIC DEVICES

PURPOSE: To establish the appropriate guidelines for use of cell phones, smart watches and other electronic devices during clinical and classroom activities.

SCOPE: This policy applies to all students involved in the Neurodiagnostic Technology Program.

PROCEDURE: Using personal electronic equipment during class, at formal training sessions, or at clinical sites is disruptive to the individual as well as their classmates, instructor, technical staff and the **patients!**

Classroom:

- During all regular class hours, cell phones, smart watches and other electronic devices must be turned off.
- Students may use cell phones, smart watches and other electronic devices during breaks

Clinical:

- Absolutely no cell phones, smart watches and other electronic devices are to be brought into the clinical setting at any time.
- Students are prohibited from carrying any cell phone, smart watch or other electronic device on their person while at the clinical site.

If a student chooses to use any of the aforementioned devices during normal class or clinical hours they will be subject to disciplinary action that may include probation and/or dismissal from the program.

CLASSROOM BEHAVIOR AND GUIDELINES

PURPOSE: To establish the appropriate guidelines for conduct in the classroom.

SCOPE: This policy applies to all students involved in the Neurodiagnostic Technology Program.

PROCEDURE: The school provides the students with classrooms, study facilities, libraries of books and journals, audiovisual aids and a teaching file of neurodiagnostic examinations. Attendance at all classes is mandatory. Students are expected to be seated and prepared for class at the time and place designated on the schedule. Disruptive behavior of any sort will not be tolerated.

Talking and inattention during class time are disrespectful to the lecturer and will not be tolerated.

Students attending outside classes are expected to conduct themselves in a manner becoming a professional person. Any unexcused/unauthorized absence from such courses will constitute grounds for disciplinary action

CLINICAL BEHAVIOR AND GUIDELINES

PURPOSE: To establish guidelines and standards regarding clinical activities during the Neurodiagnostic Technology Program.

SCOPE: This policy applies to all students enrolled in the Neurodiagnostic Technology Program.

PROCEDURE:

GENERAL GUIDELINES

Clinical rotations are designed to provide equitable clinical opportunity to *all* program participants. For that reason, no student will be exempt from clinical assignments nor can assignments be changed without written approval from the Program Supervisor. While in the clinical setting, students are responsible for performing all duties assigned by their supervising technologist.

These may include any/all of the following:

Technical duties and assisting with task

- Performing studies, archiving, pruning
- Providing patient care and transportation
- Clerical duties, including data entry, creation and organization of files, answering telephone calls
- Cleaning exam rooms and associated equipment
- Stocking of supplies

Please keep in mind that you are a *guest* of the affiliate department, and therefore must demonstrate the basic courtesies expected of a visitor. Consult the various policies stated in this handbook for further information concerning the procedures to be followed while participating in the clinical phase of your training.

PROCEDURE: BEHAVIORAL GUIDELINES

- Always introduce yourself to staff, physicians, and potential patients.
Conversations/procedures performed at clinical sites are of an extremely private nature.
- Conduct yourself with the utmost amount of professionalism.
- Wear appropriate uniforms as described by the dress code policy.
- **ALWAYS WEAR YOUR IDENTIFICATION BADGE.**
- Do not wander into other areas without permission.
- **Do Not** ask overt questions during the procedure.
- Please **observe**, take notes if needed, and ask questions after the patient is no longer in the area.
- Refrain from making comments or offering your opinion while the patient is in the room.
- Be sensitive to the “style” of each clinical site and do your best to fit in.
- Try not to be obtrusive.
- Offer your assistance in performing basic tasks (changing linens, etc.).
- Do not try to perform any task you are unsure of and recognize that some sites will perform tasks differently from what you are accustomed to.
- Adhere to the cell phone, smart watch and other electronic devices policy at all times.

COUNSELING AND GUIDANCE POLICY

PURPOSE: To assist the student in obtaining counseling and/or guidance to achieve success within the program.

SCOPE: This policy applies to students enrolled in the Neurodiagnostic Technology.

PROCEDURE:

Students needing educational counseling or guidance (academic or clinical) are requested to discuss their needs with a member of the faculty. The faculty member will assist the student in clarifying the problem and will determine a course of action to resolve the problem.

When a student is placed on academic or clinical probation the terms of the probation are outlined. The student is counseled on specific areas for improvement and how additional occurrences will affect his/her standing in the program. The terms of the academic and/or clinical probation will be documented and become a permanent part of the student's file.

Students with personal problems, which cannot be resolved with normal supervisory attention, are referred to employee health for further assessment. The employee health department will direct the student to the appropriate resources for assistance in resolving personal matters affecting academic and/or clinical performance. The student will incur the cost of any related services, treatment, etc.

CRIMINAL CONDUCT REPORTING

SCOPE: This policy applies to students enrolled in the Aurora St. Luke's Neurodiagnostic Technology Program.

PROCEDURE:

A student must notify the Aurora St. Luke's Human Resources Department as soon as possible, but no later than three (3) working days, when any of the following occurs:

- The student is charged with or has been convicted of (or pled no contest) to any crime, including municipal ordinance violation.
- The student has been or is being investigated by any governmental agency for any other act, offense, or omission, including an investigation related to the abuse or neglect or threat of abuse or neglect to a child or other person receiving direct care or treatment services from an AAH facility, or an investigation related to misappropriation of the property of a person receiving direct care or treatment services from an AAH facility.
- The student has a governmental finding substantiated against him or her of abuse or neglect of or misappropriation of the property of a person receiving direct care or treatment services from an AAH facility.
- In the case of a position for which the person must be credentialed by the Department of Regulation and Licensing, the person has been denied a license, or the person's license has been restricted or otherwise limited.
- Discharge from any branch of the U.S. Armed Forces, including any reserve component.
- Residency outside the State of Wisconsin
- Rehabilitation review requests

Failure to provide Aurora Health Care with required notice may lead to discipline, up to and including termination from the program.

Note: If any of the above situations occur the student is also advised to contact the ABRET in order to determine eligibility for certification.

DISCIPLINARY PROCESS

PURPOSE: To encourage students to take corrective action and to make improvements in their academic and/or clinical performance. Discussion with a student to point out what is expected or to tell the student how he/she is doing should be enough. There are times, however, when these corrective actions are not enough, and more severe discipline is required.

SCOPE: This policy pertains to all students enrolled in Neurodiagnostic Technology.

PROCEDURE:

The Neurodiagnostic Technology program is committed to maintaining quality care and a high standard of education. For this reason, reasonable rules and regulations have been established by policies provided in the Student Handbook. Engagement in conduct, clinical performance or scholastic achievement that is not consistent with hospital, department, or program policy will result in disciplinary action.

Discipline may include:

- VERBAL COUNSELING
- WRITTEN WARNING
- PROBATION
- TERMINATION

Discipline may begin at any step in the procedure, including termination, and steps in the procedure may be skipped, depending upon the seriousness of the matter or the offense committed and the surrounding circumstances.

VERBAL COUNSELING:

- Consists of a conference with the student that describes the offense and outlines the consequences of further offenses. This counseling is documented in the student file.
- Generally, the first offense results in a verbal counseling. (This is dependent on the nature of the offense). A second offense or continued behavior or actions contrary to policy or procedure results in a written warning

WRITTEN WARNING:

- Consists of a conference with the student, which is documented in the student's file. The problem and conditions for its improvement will be outlined, discussed and signed by the student and Program Supervisor(s).
- The original form is permanently retained in the student's file with a copy given to the student.

PROBATION:

- Probation is defined as a period of testing and trial to ascertain a student's fitness for the program.
- All students are on probation during Semester 1. **Failure of any academic course or any component of clinical education during semester 1 will result in dismissal from the program.**
- After the initial probationary period, a student may be placed on probation for cause.
- Grounds for probation include, but are not limited to:
 1. Failure to maintain the minimum academic standard of B
 2. Failure to maintain the minimum standard of B in any component of clinical education
 3. Failure to demonstrate clinical progression after repeated verbal counseling
 4. Excessive unexcused absences and/or tardiness
 5. Failure to comply with the classroom/clinical behavior guidelines
 6. Failure to comply with policy and procedures as outlined in the student handbook
 7. Disregarding verbal/written disciplinary warnings
- Probation for cause shall not exceed ninety (90) days

The terms of probation will be clearly outlined on the Disciplinary action form, which includes:

1. Length of probation
2. Steps necessary to lift the probationary status
3. Consequences of continued failure to correct the offense
 - Any student on probation for academic and/or clinical performance may request counseling or guidance in accordance with the policy.
 - A student on probation must comply with the following criteria.
Noncompliance will result in dismissal from the program.

1. Meet all requirements as listed on the disciplinary action form. The program supervisor will conduct a meeting to ensure the student understands the action plan and can seek further clarification, if needed.
2. Maintain clinical progression by meeting the minimum grading standard of B in current components of clinical education.
3. Maintain academic progression by meeting the minimum grading standard of B in current academic courses.
4. Not incur any additional infractions of program policy and procedures as outlined in the student handbook.
 - **Any student performance that warrants a third probationary period will result in dismissal from the program.**

TERMINATION:

- The most severe disciplinary action consists of dismissal from the program, generally occurring after prior disciplinary and counseling steps have been taken.
- In accordance with the grade determination and unsatisfactory coursework policies, the following conditions will result in student dismissal from the program:
 1. Failure of any academic course or any component of clinical education during the first semester
 2. Failure of more than one course during semesters 2 - 4
 3. Failure of one course and one component of clinical education during semesters 2 – 4
 4. Failure of more than one component of clinical education during semesters 2 – 4
 5. Failure of a course, a second time
 6. Any student performance that warrants a 3rd probationary period
 7. Non-compliance with a probationary action plan
- In other cases, dismissal will result after continual:
 1. Unprofessional, unethical or dishonest action
 2. Failure to maintain a minimum letter grade of B in all academic courses and each major clinical component as described in the Grade Determination Policy.
 3. Poor clinical progress
 - Failure to retain clinical competencies
 4. Habitual disregard for Program/Medical Center rules/regulations
 5. Excessive absences or tardiness
- Severe infractions may result in immediate discharge without prior warning. Examples include:
 1. Gross insubordination
 2. Willful abuse of Program/Medical Center, or another's personal property
 3. Stealing
 4. Intoxication by alcohol or drugs while in class or clinical activities.
 5. Cheating on examinations
 6. Falsification of records
 7. Unauthorized intentional disclosure of confidential information
 8. Possession of dangerous weapons on Program/Medical Center grounds
 9. Fighting
 10. Conviction for a violation of criminal law related to the Program/Medical Center
 11. Unauthorized absences in accordance with the attendance policy
 12. Willful or negligent behavior which endangers the life of a patient, employee, visitor, or fellow student
 13. Sexual harassment of an employee, student, patient or guest

DRESS CODE

PURPOSE: To establish guidelines for appropriate attire for students involved in classroom/clinical activities.

SCOPE: This policy applies to students enrolled in the Neurodiagnostic Technology Program. Students participating in AAH onsite classes/ clinicals must wear scrubs.

- It is the responsibility of each student to purchase and launder his or her own scrubs.
- Scrubs must be professional in appearance

GUIDELINES FOR WEARING SCRUBS:

Colors

- Any color scrub, except those listed below, including coordinating print tops are acceptable.
- Denim, camouflage or light blue surgical scrubs **MAY NOT** be worn.
- A white, matching solid or coordinating print lab coat or scrub jacket may be worn.
- Sweaters and other outer covering will not be permitted.

Pants

- Scrub pants should be clean and pressed
- No tight/clinging, jogging or sweat pants
- Scrub pants are to be ankle length
- No crop pants
- Pants should not cover the shoe or drag on the ground
- Scrub pants must not be rolled up or tucked into socks

Tops

- White or solid color turtlenecks or long sleeve shirts may be worn under the scrub shirt for warmth.
- If a shirt is worn below a scrub top, it must not be visible below the hemline of the scrub top
- No loud/bold, suggestive or obnoxious tops
- No decals, caricatures, slogans or advertising
- No sweatshirt or sweatshirt type tops

Shoes

- Clean shoes or clogs should be worn – shoes must be in good condition
- Tennis or athletic shoes are acceptable. Bright colors should be kept to a minimum
- Opened toed shoes and sandals are not allowed
- Socks or stocking must be worn at all times

IDENTIFICATION:

- Name badges are worn **at all times** as identification for our patients and caregivers.
- Students who do not have their name badge will be sent to the school for the day and will make up the lost clinical day over the next scheduled break.
- Students will notify the school immediately if badge is lost. Replacement badges take 24 hours to process.
- Name badges are worn above the chest, name side out, so that it is easily seen and read utilizing standard human resource badge holders.
- Logos, vendor names, or other verbiage is not allowed on name badges or holders.
- Stickers, service awards or other items will cover up no part of the name or other information on the badge.

(Refer to AHC System Administrative Policy #126 on Name Badges for further information)

PERSONAL GROOMING:

- Hair
 - Hair, mustaches, and beards must be neatly trimmed and/or styled so as not to come in contact with patients or interfere with job performance or safety.
 - Hair color should be natural shades or subtle undertones.
 - Long hair should be worn so it does not interfere with your work, which requires that it be pulled away from the face and tied back.
- Artificial fingernails or extenders must not be worn when providing direct patient care (direct patient care defined as having direct contact with patients as part of job requirements).
- Natural nail tips must be kept less than 1/4 inch long in all areas. Nail polish must be intact and must not be chipped.
- Students so as to prevent offensive odors for patients and coworkers should practice daily bathing and the use of deodorants.
 - **NO perfume, after-shave, cologne or scented lotion is allowed**
- It is essential that all caregivers and their attire are neat, clean, pressed and never revealing or tight fitting.
- Clothing or accessories should never obstruct job performance or cause a safety concern.
- It is expected that all team members will follow good personal hygiene practices.
- A single small tattoo, no larger than 2 x 2", is allowed on the leg, ankle, and upper arm.
 - At all times, clothing must cover any tattoo that does not meet these criteria.

- Any showing tattoo must not be disruptive or offensive and not be in conflict with our Values or any other policy.

The clinical management staff and program's faculty will be responsible for interpretation of the dress code. Should there be any infraction of this policy; the student will be sent home to change. The lost time will be made up during a scheduled student break.

GRIEVANCE POLICY

PURPOSE: To provide guidance for achieving a fair and equitable solution to grievances.

SCOPE: This policy applies to all students enrolled in the Neurodiagnostic Technology Program.

PREFACE: It is the position of the education program at Aurora St. Luke's Medical Center, Neurodiagnostic Department to treat all students fairly and equitably. Although all sources of dissatisfaction cannot be eliminated, it is the policy of the program to afford students the opportunity to bring their concerns to the proper authority for review.

All time frames listed below will begin on the next business day. If a grievance occurs prior to scheduled school closure, the time frame may begin after the scheduled break.

PROCEDURE:

1. The aggrieved student must advise the Program Supervisor, Clinical Instructor or other School Official in writing of the situation to be considered. The student must submit the grievance within twenty-four (24) hours of the precipitating event.

2. The School Official receiving the complaint will arrange for a meeting of all faculty to discuss the grievance in a timely manner, preferably within twenty-four (24) hours, but no later than seventy-two (72) hours after notification of the grievance.

3. Every effort shall be made to investigate the problem and reach a resolution at this step. The program supervisor will poll faculty members and communicate the outcome to the student no later than seventy-two (72) hours after having been advised of the grievance. Successful resolution will end the grievance process. However, if the aggrieved student does not agree with the decision made by the faculty, the student has the right to petition the Advisory Committee, continuing this process to step four (4) listed below.

- The student must advise the program supervisor of his/her decision to petition the Advisory Committee as well as submit a written summary of the grievance within twenty-four (24) hours, but no later than seventy-two (72) hours after being informed of the faculty decision.

1. A special meeting of the Advisory Committee will be called to convene within seven (7) working days to discuss the grievance and formulate a resolution. Successful resolution at this point will end the grievance process. The student may appeal the decision made by the Advisory Committee, continuing this process to step 5 listed below.

- The student must advise the program supervisor of his/her decision to petition the Final Appeals Committee as well as submit a written summary of the grievance within twenty-four (24) hours, but no later than seventy-two (72) hours after being informed of the Advisory Committee decision.

5. The final appeals committee consists of individuals external to the school. A special meeting with the Final Appeals Committee will be called to convene within seven (7) working days after the student's decision to appeal the decision of the Advisory Committee has been communicated. The decision of this committee is final.

- ASLMC Director- Human Resource Services
- ASLMC Director- Patient Care Services
- ASLMC Director - Neuroscience

PROFESSIONAL CONDUCT

PURPOSE: To provide students with guidelines for acceptable conduct in the work area.

SCOPE: This policy applies to students enrolled in the Neurodiagnostic Technology Program.

PROCEDURE: A professional relationship must exist between students and all other employees or medical staff members. While involved in clinical or classroom activities, students should address other students or employees by their first name and physicians by Doctor, with the last name. Students must refrain from using nicknames. Hospital and professional decorum prohibits loud or boisterous conduct. Students should maintain a dignified, mature attitude in their concern for patient safety, comfort and well-being. This courtesy should extend to relatives or friends who accompany patients. Students must not discuss a patient's condition with each other or with the patient's relatives or friends. Refer any questions about a patient's condition to the supervisor or their physician. Accidents, operations, etc. are not proper subject matter for conversation within range of patients or non-employees. Professional ethics prohibit discussion of disease, treatment or personal history of any patient except as it pertains to the patient's treatment or the student's education. Unusual occurrences, accidents and/or other incidents must be reported immediately to the Supervisor, the Neurodiagnostic Manager, and the faculty. Students are subject to, and covered by all Medical Center personnel policies except as specifically differentiated by school or hospital policy.

SMOKE FREE POLICY

PURPOSE: To outline Aurora Health Care’s policy regarding a smoke and tobacco free environment throughout the system.

SCOPE: This policy applies to all students enrolled in the Neurodiagnostic Technology Program at Aurora SLMC.

POLICY: Aurora Health Care has a commitment to care management and disease prevention. We have a responsibility to provide a safe and healthy environment to our patients, visitors, students, and employees. Aurora Health Care has been a tobacco free environment since July 4, 2006.

PROCEDURE: Students will not be allowed to use tobacco products anywhere on Aurora property. Students may not leave the school grounds or clinical site during breaks for any reason. Students may leave the school grounds or clinical site during the 30-minute lunch break. The site clinical instructor must be notified if the student is leaving the clinical site during lunch for any reason. It is expected that all students will comply with this policy. Failure to comply with the Smoke Free Policy will result in progressive discipline that could lead to termination from the program.

STUDENT WITHDRAWAL/TERMINATION POLICY

PURPOSE:

To provide guidance to faculty in advising individuals of his or her rights following termination or withdrawal from the program.

SCOPE:

This policy applies to the Neurodiagnostic Technology Program.

PROCEDURE:

Student Withdrawal

1. Should a student withdraw from the program, they will be informed of their rights according to the:
 - a. Records maintenance policy
 - b. Tuition policy
 - Students from university partners pay tuition directly to the university. All matters of tuition must be discussed with the appropriate representatives at the university.
 - Non-university students will be expected to comply with the tuition policy; total tuition due at the time of withdrawal will be paid in full.
2. Students that elect to withdraw from the program will be asked to submit written documentation of their intentions. They are strongly encouraged to include the reason for withdrawal.
3. Students who are in good standing at the time of voluntarily withdrawal from the program may be considered for reinstatement at a later date. Consideration for reinstatement is assessed on an individual basis by the program faculty.
4. The student must return all hospital and school property.

Student Termination

1. Should a student be dismissed from the program, they will be informed of their rights according to the:
 - a. Grievance policy
 - b. Records maintenance policy
2. Students that are involuntarily terminated from the program will receive written notification from the program director.
3. Students who are dismissed from the program will not be considered for reinstatement, unless mandated by the findings of a grievance process.
 2. The student must return all hospital and school property.

Student Transcripts

1. Student withdrawal or termination prior to the completion of a course will result

in one of the following:

- a. W – withdrawal
- b. WF – withdrawal failing course
- c. T – termination
- d. TF- termination failing course

2. Completed courses at the time of withdrawal or termination will be marked as follows:

- a. A – 4.0
- b. B – 3.0
- c. C – 2.0
- d. U – Unsatisfactory / F level

ADVISORY COMMITTEE

PURPOSE: An advisory committee shall be appointed to assist the Program Director in the evaluation and coordination of the program.

SCOPE: This policy applies to the Neurodiagnostic Technology Program.

COMPOSITION: The Advisory Committee will be made up of the following individuals:

- Program Director
- Medical Directors
- Neuroscience Director
- Neurodiagnostic Manager
- Supervisory Representatives from Clinical Sites as required
- Clinical Instructors / Program faculty
- Members from the community of interest:
 - Human resource representative
 - College affiliate representative
 - Student representative
 - Graduate representative
 - Public member

GUIDELINES:

1. The Advisory Committee will hold a minimum of one meeting annually.
2. Agendas will be distributed in advance and minutes will be recorded and filed.
3. The Advisory Committee will be instrumental in future planning, reviewing policies, curriculum and clinical rotations, and evaluating program effectiveness.
4. Each meeting will include the following standing agenda items:
 - a. Review of program mission and goals
 - b. Review of outcomes/survey data
 - c. Curriculum
 - d. School policies
5. The Advisory Committee will serve as arbitrator when student grievances cannot be resolved by the Program faculty.
6. The Committee will ensure that the program be responsive to reasonable recommendations and provide channels of communication between the decision making parties.
7. For all matters put to a vote, each representative will have one (1) vote.

BREAKS – CLASSROOM

PURPOSE: To establish guidelines for the availability of appropriate breaks in classroom activities.

SCOPE: This policy applies to students enrolled in the Neurodiagnostic Technology Program.

Whenever possible, breaks are given to students at the discretion of the course instructor. Breaks are given to break the monotony of the day, and allow students to refresh their minds. Lunches will be scheduled for at least ½ hour. There are two café on campus which the students will have access too. There are also a variety of restaurants within close proximity to the school.

COMMUNICABLE DISEASE POLICY

PURPOSE: To provide a mechanism for students to report exposure to communicable diseases.

SCOPE: This policy pertains to all students enrolled in the Neurodiagnostic Technology Program.

PROCEDURE: The Program Director **must** be informed in the event a student has reason to believe that he/she has contracted a communicable disease. The student will be referred to their personal physician for evaluation, treatment and advice. If there is confirmation that the student harbors a communicable disease, the student will not be permitted to report to the classroom or clinical sites until cleared to do so by their personal physician.

In accordance with the attendance policy;

- All time missed due to illness and/or medical emergency will be deducted from the student's time off bank and will be considered an unexcused absence.
- An excused absence will require a doctor's note.
- Any student that is absent for three (3) days or more must have a doctor's release before returning to school activities.
- Time off in excess of 160 hours will result in dismissal from the program.

Harassment Document Number: 2520

Document Type: Policy Procedure Guideline Other Last Review/Revision Date: 09/20/2019

Content Applies to Patient Care: (Select all that apply)

- Adults
- Pediatrics (Under 18)

Content Applies to:
(Select One)

- Clinical
- Administrative

Next Review Date: 09/20/2022

Effective Date: 10/01/2019

Scope: AAH System AAH IL Only AAH WI Only Site Only (Location Name):

Department Only (Department Name):

I. PURPOSE

Advocate Aurora Health is committed to maintaining a work place free from intimidation and harassment.

II. SCOPE

This policy applies to all Advocate Aurora Health, Inc. and any entity owned and/or controlled by Advocate Aurora Health, Inc. (collectively, "Advocate Aurora").

III. DEFINITIONS/ABBREVIATIONS

Harassment in general includes any unwelcomed conduct that can be verbal, nonverbal, physical and/or visual based on race, color, religion, sex (including pregnancy), gender/gender identity, national origin, age (40 or older), physical or mental disability or genetic information.

Sexual Harassment is conduct that specifically involves unwelcomed sexual advances or any conduct of a sexual nature which substantially interferes with an individual's work performance or creates an intimidating, hostile or offensive working environment.

Intimidating, Hostile or Offensive Work Environment refers to intimidating, abusive and/or otherwise offensive conduct and/or speech, going beyond rudeness or casual joking, that is intentional, severe, recurring and/or pervasive that interferes with a team member's ability to perform his/her job.

Retaliation is defined as any adverse action taken, either overtly or covertly, against a team member because he/she exercised his/her rights under law, spoke out against discrimination or harassment, assisted another team member in exercising his/her rights, or for participating in an investigation of unwelcomed conduct.

Consensual Close Personal Relationships refers to relationships between Advocate Aurora team members (including romantic, dating and/or sexual

relationships) involving either a team member and his/her indirect or direct supervisor, or two team members whose job responsibilities require that they routinely interact in the performance of their job duties.

HR Representative refers to the HR resource that supports an Advocate Aurora site based upon established protocol, which may be located on-site, off-site or through the Advocate Aurora Team Member Relations Center (“AARC”).

IV. POLICY

A. Advocate Aurora’s Behavioral Expectations

It is the expectation that all team members are fully committed to, and demonstrate, Advocate Aurora’s values of Excellence, Compassion and Respect. Behaviors that reflect intimidation or harassment, or behaviors that create a hostile or offensive work environment will not be tolerated by Advocate Aurora. This applies whether in the workplace, at work assignments outside of the work place, or at Advocate Aurora-sponsored social functions and/or events. This policy may also apply outside of work when such behaviors are directed at team members, patients, physicians or anyone that Advocate Aurora conducts business with, as it relates to inappropriate emails or social media postings, or other forms of communication.

1. Policy Applies To All Sources of Prohibited Behaviors

This policy prohibits and addresses all sources of intimidation or harassment, or behaviors that create a hostile or offensive work environment, whether the source involves team members, members of leadership, patients, family members or visitors, physicians, volunteers, contractors or vendors, or anyone who a team member may encounter during the course of his/her Advocate Aurora employment.

2. Unlawful Discrimination - Unwelcomed Conduct

Advocate Aurora is committed to providing a work environment that is free of unlawful discrimination. This policy prohibits any unwelcomed conduct that is based on an individual’s race, creed, color, religion, sex (including pregnancy, childbirth, and medical conditions related to pregnancy, childbirth, or breastfeeding), sex stereotyping, a person’s appearance or behavior, gender roles, gender expressions or gender identity (including assumptions), national origins, age, disability, ancestry, medical condition, marital status, political party affiliation, military or veteran status, citizenship status, sexual orientation, genetic information, or any other protected status of an individual or that individual’s family or relatives. Advocate Aurora interprets these protected statuses broadly to include both the actual status, as well as perceptions and assumptions made regarding these

statuses. Advocate Aurora will not tolerate any form of discrimination or harassment, regardless of whether the behavior rises to the level of a legal violation.

3. Sexual Harassment

Sexual harassment will not be tolerated, whether the individual engaged in the harassing behavior and the individual being harassed are of the same or different gender. It is the expectation that team members will maintain an awareness of, and respect for, the personal and professional boundaries of other team members. The following are examples of verbal, nonverbal, visual or physical behaviors that constitute sexual harassment, which are not meant to be all-inclusive:

- a) Offensive sex-oriented verbal kidding, teasing or jokes.
- b) Repeated unwanted sexual flirtations, advances or propositions.
- c) Verbal abuse of a sexual nature.
- d) Graphic or degrading comments about an individual's appearance or sexual activity.
- e) Offensive visual conduct, including leering, making sexual gestures, the display of offensive sexually suggestive objects, pictures, cartoons or posters.
- f) Unwelcomed pressure for sexual activity.
- g) Offensive, suggestive or obscene letters, emails, texts, notes or invitations.
- h) Offensive physical contact, such as patting, grabbing, pinching, or intentional brushing against another's body.

B. Advocate Aurora's Commitment To Address Intimidation, Harassment & Hostile or Offensive Work Environment Behaviors

Advocate Aurora takes all allegations of harassment, intimidation, or hostile work environment very seriously and is fully committed to initiating a thorough and timely investigation, and will take all reasonable steps to prevent the continuation of such behaviors during the investigation and resolution process. Advocate Aurora is further committed to taking appropriate corrective actions when allegations of harassment, intimidation, or hostile work environment are substantiated.

C. Retaliation

Advocate Aurora will not tolerate any form of retaliation, either overt or covert, against a team member for having reported inappropriate behaviors; for having participated in an investigation of inappropriate behaviors; for filing an administrative claim with the EEOC or a state government agency, for participating in a government agency investigation; or for assisting others to exercise their right to bring concerns forward.

D. Consensual Close Personal Relationships at Work

While Advocate Aurora does not seek to interfere with the private off-duty conduct of its team members, consensual close personal relationships (including romantic, dating and/or sexual relationships) between a leader (any individual having authoritative influence over the terms and conditions of a team member's employment) and a team member they supervise, or between two team members working in the same area, may interfere with the effective performance of a team member's job duties.

1. Leader/Team Member Consensual Close Personal Relationships

a) The existence of consensual close personal relationships between a leader and a team member that he/she indirectly or directly supervises creates a situation that has the potential to evolve into allegations of sexual harassment. Such relationships can also create a conflict of interest. These conflicts include: 1) workplace distractions; 2) misunderstandings; 3) perceptions of favoritism; and 4) a potential breach of confidentiality. Therefore, consistent with Advocate Aurora's values and commitment to prohibit harassment, Advocate Aurora will not condone the existence of these relationships.

b) Leaders who engage in a consensual close personal relationship with a team member that he/she indirectly or directly supervises are required to self-disclose the relationship to his/her leader and HR representative. The leader who is engaged in the relationship will be provided a reasonable period of time, not to exceed ninety (90) days, within which to obtain a job transfer, unless the team member voluntarily elects to transfer to a position that does not report to the leader. The leader's HR representative will make reasonable efforts to assist the leader in Advocate Aurora's competitive job transfer process. If a job transfer is not successful, the leader may voluntarily resign his/her employment, or be involuntarily terminated.

2. Team Member/Team Member Consensual Close Personal Relationships

a) Team members, including physicians, whose job responsibilities require that they routinely interact with each other in the course of their work, who engage in a consensual close personal relationship are required to self-disclose their relationship to their leader(s) and HR representative. The team member's leader(s) and HR representative will conduct a risk assessment, and will subsequently meet individually with each team member to: 1) confirm that the relationship is consensual; 2) review and discuss the potential risks and/or distractions; 3) ensure that

work performance expectations are clearly understood; 4) discuss consequences should the relationship cause work performance issues and/or interfere with a department's efficient and harmonious operations; and 5) provide and review a copy of Advocate Aurora's Harassment policy.

b) Should it be determined, either through the initial risk assessment, or as the result of an identified failure of either team member to meet his/her work performance expectations and/or the relationship negatively impacts department operations, job transfer may be required.

3. Married Team Members

a) Situations involving team members who are married are addressed under Advocate Aurora's Recruitment & Transfer policy (Hiring and Transferring of Relatives).

V. PROCEDURE

A. Shared Responsibility

Advocate Aurora takes all allegations of harassment, intimidation, or hostile work environment seriously, and it is the expectation that Advocate Aurora's policy will be thoroughly followed in a timely manner through a collaborative partnership between the leader and HR representative. A team member who directly experiences and/or observes such behaviors is expected to report the behaviors to his/her leader, another representative of leadership, their HR representative, or the Advocate Aurora Compliance Hotline.

B. Team Member Response To Unwelcomed Conduct

If a team member does not feel in danger and is comfortable in doing so, it is recommended that he/she first speak to the person who has engaged in the inappropriate behavior and clearly state that the person's conduct is not appreciated, and ask that he/she refrain from any continuation of such behaviors. If the inappropriate behavior does not stop, or a team member is not satisfied with the offender's response, or if a team member is not comfortable speaking to the offender, the team member is encouraged to immediately notify their leader, another member of leadership, or their HR representative. It is important that team members notify leadership as soon as possible, as leadership cannot responsibly act to remedy the situation if it has no knowledge of its existence. The site HR representative should be immediately notified whenever a leader receives a complaint.

C. Investigation – Proactive Measures

1. The complainant's leader and HR representative will assess the situation to determine what reasonable steps, if any, may need to be implemented to ensure that harassment, intimidation or

other conduct that is prohibited within this policy does not reoccur and/or result in retaliation. These steps may include a temporary adjustment to work schedules or assigned work areas, or at the complainant's request, a temporary or permanent job reassignment, or suspension of the accused until such time as the investigation is completed. If the offender is not employed by Advocate Aurora, appropriate steps will be taken to ensure that the offender does not have contact with the complainant.

2. Advocate Aurora will fully investigate all complaints of harassment and conduct prohibited within this policy in a timely manner. The investigation generally includes an initially investigatory interview with the complainant, followed by interviews with identified witnesses, and then the accused.

3. The HR representative must promptly notify his/her regional Vice President of HR and/or others as required, based on the reporting protocols established within a site, market or region. Leaders and HR representatives will be held accountable for ensuring that investigations are completed, and the finding appropriately reported, in a timely manner.

D. Allegations Substantiated – Corrective Action

1. Any team member, including individuals who are in leadership positions, who have been found to have engaged in harassment, intimidation, or behaviors that create a hostile work environment, or who retaliates against a team member because the team member reported the inappropriate conduct, participated in an investigation of alleged inappropriate conduct, or helped others exercise their right to complain is subject to corrective action, up to and including termination.

2. Offenders are subject to potential job reassignment based on the circumstances of the situation.

3. Advocate Aurora may take corrective action for any inappropriate conduct discovered through the investigation, whether or not the conduct is found to be a violation of law, or a violation of this policy.

4. If the offender is not employed by Advocate Aurora, every reasonable step will be taken to appropriately address and correct the situation.

5. The HR representative will formally communicate in writing to the complainant informing him/her that the investigation has been completed; the allegations were found to be substantiated; and that appropriate actions have been taken to address the offender. The specific actions taken will be kept confidential to

the extent possible.

6. Team members receiving corrective action under this policy, including termination, are exempt from the utilization of Advocate Aurora's Conflict Resolution Program, but may appeal the decision to the regional Vice President of Human Resources.

E. Allegations Unsubstantiated

1. The HR representative will formally communicate in writing to the accused that the investigation has been concluded and that the findings did not support and/or substantiate the complainant's allegations, and as a cautionary measure, the accused will be provided with a copy of Advocate Aurora's Harassment policy, which is to be reviewed and discussed with the accused.

2. The HR representative will formally communicate in writing to the complainant informing him/her that the investigation findings did not support and/or substantiate the allegations; however, Advocate Aurora's Harassment policy was reviewed and discussed with the alleged offender, including the potential consequences had the allegations been substantiated.

3. Investigation findings that do not support and/or substantiate the complainant's allegations are not in and of itself to be interpreted as a false complaint. A complaint that is made in good faith that cannot be verified, or where honest differences of opinion as to the circumstances that gave rise to the complaint, can reasonably occur.

4. Willfully and knowingly making a malicious false accusation against another team member is considered a serious offense, which subjects a team member to corrective action, up to and including termination.

F. Confidentiality

Advocate Aurora will attempt to preserve confidentiality during the investigatory and corrective action process to the extent possible, while ensuring that Advocate Aurora meets its obligations to fully address all allegations of harassment, intimidation or other conduct prohibited in this policy, as well as in meeting Advocate Aurora's obligation to conduct a thorough, fair and unbiased investigation, or as may be necessary to disclose on a need-to-know basis, or where relevant to a grievance, charge, claim or other legal proceeding initiated by or on behalf of a team member.

VI. CROSS REFERENCES

Corrective Action

Equal Employment Opportunity
Workplace Violence
Affirmative Action Program

VII. RESOURCES AND REFERENCES

Equal Employment Opportunity Commission (EEOC)

Illinois Department of Human Rights (IDHR) or:

<https://www2.illinois.gov/dhr/Publications/Documents/SH%20and%20DISCRIMINATION%20EMPLOYEE%20POSTER.pdf>

Illinois Human Rights Commission (IHRC)

Wisconsin Department of Workforce Development – Equal Rights Division (ERD)

HEALTH SERVICES AVAILABLE TO STUDENTS

PUPOSE: To define the availability of health services to the student technologist while participating in the program.

SCOPE: This policy applies to all students enrolled in the Neurodiagnostic Technology Program.

PROCEDURE:

The Employee Health Department is available to the student with certain limitations.

Specifically,

the Health Unit cannot be used in place of a personal physician. Each student is required to carry health insurance while enrolled; if not covered by their parents or spouse's policy. Aurora insurance does not cover student for medical, health or pharmaceuticals. Aurora hospital will not be responsible for any medical bills incurred by the student. Should the neurodiagnostic student be involved in an incident of personal accidental exposure or injury while on clinical rotation, the following guidelines are to be followed:

- a. Notify the site Clinical Instructor and/or Neurodiagnostic Supervisor and a member of the program faculty.
- b. Complete an "Employee Incident Report". Check the appropriate box to indicate student status.
- c. For non-emergent situations visit or contact employee health for appropriate follow up. For emergent situations report to the emergency department.

Employee Health evaluates injuries sustained at the medical center or its affiliates and makes recommendations for appropriate follow-up care. The student incurs the cost of any treatment. If the student's personal physician recommends the student not participate in patient-related activities the student must provide a doctor's release before returning to school activities.

In accordance with the attendance policy;

- All time missed due to illness and/or medical emergency will be deducted from the student's time off bank and will be considered an unexcused absence.
- An excused absence will require a doctor's note.
- Any student that is absent for three (3) days or more must have a doctor's release before returning to school activities
- Time off in excess of 160 hours will result in dismissal from the program.

RECORDS MAINTENANCE

PURPOSE: To provide guidance for the maintenance of student admission, attendance and performance records.

SCOPE: This policy applies to all students enrolled in Neurodiagnostic Technology Program.

PROCEDURE:

Records shall be maintained for every student enrolled in the program, including those who graduate, withdraw, or are otherwise terminated. A summary transcript for all courses attempted or completed shall be maintained.

The following documents will be included in the school's permanent record for each graduate:

- Official transcript
- Progress evaluations
- Tuition statements
- Attendance documents
- Clinical competency summation
- Clinical experience log summation
- Disciplinary action notices
- Exit/outcome assessment
- Student application documents

All student records shall be maintained in a secure location for perpetuity. The program maintains older student records in fire-resistant file cabinets with limited access. When available, graduate records will be maintained electronically. The availability of student records will comply with the Buckley Amendment. No transcripts shall be released without written authorization of the student. Duly appointed program officials and accreditation bodies make provisions however, for the inspection of said transcripts and other records. Students have the right to examine their own records on the school premises during regular business hours. The program reserves the right to request a 24-hour advance notice of such inspection.

STUDENT EMPLOYMENT

PURPOSE: To clarify responsibilities / roles when the student is employed within the Medical Center.

SCOPE: This policy applies to students in the Neurodiagnostic Technology Program.

PROCEDURE:

Students may apply for employment within Aurora Health Care while participating in the Neurodiagnostic technology program. This employment is not considered a portion of the educational program.

A student working in this capacity is considered an employee and falls under the responsibility of the respective lead/supervisor/manager. Students will not perform any school related activity while working in the capacity of an employee of Aurora Health Care. The program faculty recommends that students do not work more than ten (10) hours per week while in training. The student is responsible for upholding all academic and clinical standards at all times while enrolled in the neurodiagnostic technology program. Outside work **should not interfere** with the student's academic or clinical responsibilities or achievement. The Neurodiagnostic Technology Program does not employ, facilitate or mediate employment for a neurodiagnostic student.

STUDENT SERVICES

PURPOSE: To identify the types of services available.

SCOPE: This policy applies to all students enrolled in the Neurodiagnostic Technology Program

Academic Assistance

Didactic instructors are available by appointment to provide additional assistance to students having trouble with academic coursework. Remediation is provided for students who fail coursework on the first attempt after Semester 1.

Accommodations

Students may be granted testing accommodations including additional time and/or a distraction free environment for test taking.

Email/Intranet

Upon enrollment, students are assigned an n-number. The n-number is used to generate an Aurora email account and access to the Aurora Caregiver Connect, as well as other internal applications.

Guidance

Guidance is available to all students enrolled in the program. The faculty will assist the student with academic and clinical concerns. The faculty will direct the student to their personal physician for counseling or referral in cases of personal problems that may interfere with the program.

Liability Insurance

Each student is provided with professional liability insurance at no charge to the student.

Library

Students are provided with an orientation to the Aurora Libraries. Following orientation, students have access to all Aurora Health Care Libraries, including onsite services and online access.

Parking

Students must adhere to all parking regulations and restrictions at his or her clinical rotation site. The site clinical instructor will review parking regulations during site orientation. If you have any concerns, please notify the program director.

Clinical Education Overview

A thorough understanding of the theoretical as well as the clinical aspect of neurodiagnostic technology are essential to the training of a neurodiagnostic technology and directly affects the quality of patient care. Clinical education is a major component of the educational program. The student's clinical rotations provide a strong background in the various applications of Neurodiagnostics. The student is required to prove competence by performing examinations in the clinical setting. The didactic portion of the educational program is designed to allow the student to develop a progressive understanding of the cognitive components needed to ensure a quality exam.

Before a student can prove competency in any exam he/she will have completed the following:

- Didactic coursework
- Participated in formal laboratory practice sessions
- Completed all mandatory test outs and/or proficiencies

After successful completion of these prerequisites, the student is allowed to attempt to prove competency. The faculty and qualified technologist (see Qualified Clinical Testers Policy) supervise the students in the clinical setting.

Facilities

Aurora St. Luke's Medical Center Neurodiagnostic Technology Program has several clinical affiliate facilities. The school assigns students to these facilities on a rotational basis during the course of the program. Clinical education is divided into four (4) semesters.

Schedule of Academic and Clinical Hours

Students spend an average of 20 hours in didactic education a week and approximately 16 hours in clinical education. No student is scheduled for more than a total of forty (40) hours per week. The program director and/or clinical coordinator(s) schedule clinical hours, clinical rotations, academic classes, labs, and special guest lectures.

General Guidelines

Clinical rotations are designed to provide equitable clinical opportunity to all program participants. For that reason, students will not be exempt from clinical assignments nor can assignments be changed without written approval of the program director. While in the clinical setting, students are responsible for performing all duties assigned by their supervising technologist. Students must keep in mind that they are a guest of the affiliate and therefore must demonstrate the basic courtesies expected of a visitor.

EDUCATION LAB MODELS

PURPOSE: To establish the appropriate guidelines for volunteer models participating in labs.

SCOPE: This policy applies to all involved in the Neurodiagnostic Program including but not limited to the program faculty, students, and outside models. This policy will be reviewed annually by key personnel. Key personnel may include, but is not limited to the program director, program medical advisor, program faculty, and risk management.

PROCEDURE:

A. Students and other volunteers are commonly used during hands-on Neurodiagnostic training sessions (labs) to practice procedures and techniques.

B. Labs:

1. Provide scheduled and required experiences
2. Provide student neurodiagnostic exercises in a controlled environment
3. May occur in a classroom or clinical setting
4. May utilize volunteer models other than students
5. Occur under the supervision of qualified and appropriately credentialed faculty
6. Occur in accordance with written policy and disclosures that ensure each model understands the lab is educational and not for diagnostic purposes
7. Occur in accordance with applicable infection control and disinfection standards
8. Do not take the place of clinical education on actual patients

C. Consent form for models will include the following:

- a. **Non-Medical Purpose:** all procedure(s) performed in the lab are for educational training purposes only. Resulting, no physician will interpret them, and they will not be part of a medical record.
- b. **Legal Age:** the model must be able to legally sign the consent form and provide informed consent for the neurodiagnostic procedure(s) that the students and lab instructor will perform in the lab setting (e.g., 18 years of age or older, or a legally emancipated minor in the state).
 - i. If the students or lab instructor is performing a procedure on a minor in a lab setting (e.g., in a pediatric the program), the minor's parent or legal guardian must sign the consent form to provide informed consent for the lab neurodiagnostic procedure(s) on the minor.
- d. **Voluntary Participation:** At any time, a model must have the right to decline or otherwise withdraw consent for the procedure or discontinue being a model for the neurodiagnostic program. If the model is also a neurodiagnostic student, participation as a model in a lab must be optional and there must not be any kind of retaliatory action or pressure on the student (e.g., lowering of grade, discipline, and bias, "shaming" or "bullying," peer pressure, etc.) for opting out of being a volunteer lab model.

e. **Disclosure of Medical History Including Known Pathologies:** Models should disclose any previously diagnosed related to the procedure being performing (if known). Models should also disclose pertinent medical conditions, surgeries, treatments, open wounds, or active infections. To protect the students and faculty, disclosure of certain existing pathologies (e.g., open wound or staph infection, etc.) may disqualify a model from participating. The disclosure should ask the model to designate a personal physician (e.g., primary care physician, obstetrician, etc.) that the neurodiagnostic program will notify if the students or lab instructor discover a possible clinically significant or life-threatening incidental finding(s) during a lab.

f. **Medical Release:** The neurodiagnostic program will use the consent form for models, or a separate medical release, to provide authorization to the neurodiagnostic program to share relevant information about the model's preexisting medical conditions, recordings obtained during a lab, or incidental findings as necessary for training, medical, educational, or research purposes. This may include class discussions of recording obtained in the lab, as well as sharing the information with the neurodiagnostic program's medical advisor, program director, or other designee, as needed. It should also authorize sharing of this information with emergency personnel or facilities if students or the lab instructor discover a possible life-threatening incidental finding during a lab.

g. **Neurodiagnostic Procedures:** the model should know the body area(s), and type(s) and length of procedure(s) that the lab instructor and student(s) will perform.

D. Program faculty:

- a. Ensure that all neurodiagnostic procedures performed in the lab follow the ACNS/ABRET standards. The neurodiagnostic program may set limits on the frequency that a model may volunteer (e.g., once per month), and the number and length of procedures that students and the lab instructor may perform.
- b. Refer models to their personal physician: If in a lab identifies a possible clinically significant or life-threatening incidental finding, the neurodiagnostic program should refer the model to their personal physician, or in some cases, for emergency care. The neurodiagnostic program should have a medical release authorization from each model before a lab class.
- c. Review the consent form with each model and answer any questions related to the form or the lab process.
- d. Ensure the model has fully completed and signed the consent form before neurodiagnostic procedures begin on the model. The neurodiagnostic program should securely store the consent forms in accordance with the Neurodiagnostic program's written document retention policy. The model should update their written consent if the procedures are modified after the model originally signed the consent form.

Neurodiagnostic for Educational and Quality Assurance Purposes

LAB MODEL CONSENT FORM

Consent Form

The model must be a minimum of 18 years of age to sign the consent form and provide informed consent for the Neurodiagnostic procedure(s) the students and lab instructor will perform in the lab setting. If the students or lab instructor is performing a neurodiagnostic procedure on a minor in a lab setting, the minor's parent or legal guardian must sign the consent form to provide informed consent for the lab neurodiagnostic procedure(s) on the minor.

I consent to participating as a model for :

EEG LTM EMG TCD SSEP EP

I understand that my involvement in these activities is strictly voluntary and that I may withdraw my consent

at any time, including after the procedure has been initiated. If I am an Advocate Aurora team member or current neurodiagnostic student, I understand that: (1) my participation, withdrawal, or refusal to participate will not affect my employment and/or student status in any way; and (2) the Advocate Aurora team members that assist in the procedure process and the administration of this volunteer program may have access to my health information. I understand that, as a volunteer, I will not receive payment for my time.

I also understand that this neurodiagnostic procedure being performed for educational or quality assurance purposes only. I understand that the person performing the neurodiagnostic procedure is not qualified in the diagnosis of exams. The data obtained will be assessed to determine quality and not to identify clinical abnormalities or for any other diagnostic or therapeutic purpose. I agree that Advocate Aurora Health, its affiliated entities and staff, and its officers, directors, employees and agents will not be held responsible for failure to identify any clinical abnormalities. I will not be provided with a written interpretation or procedure(s) conducted as part of this program. I agree that, should any abnormalities be discovered, Advocate Aurora Health, its affiliated entities and staff, and its and their officers, directors, employees and agents are not responsible for any health care and/or medical expenses that may result from the finding. By signing below, I acknowledge that I have read and agree to all the above and that the proposed of the examinations have been satisfactorily explained to me. I hereby give authorization and consent to the use of the Neurodiagnostic procedure is for educational and quality assurance purposes only. I understand that this consent is valid for the date of this visit.

By checking this box, I opt-out of participation for modeling

Volunteer Signature

Date

Witness Signature

Date

Neurodiagnostic Data for Educational and Quality Assurance Purposes
VOLUNTEER PARTICIPATION AGREEMENT

Medical Release

The Neurodiagnostic program may share relevant information about the model's pre-existing medical conditions, data obtained during a lab, or incidental findings as necessary for training, medical, educational, or research purposes. This may include class discussions of data obtained in the lab, as well as sharing the information with the neurodiagnostic program's medical advisor, program director, or other designee, as needed (in accordance with state and federal privacy statutes and regulations). Model authorizes sharing of this information with emergency personnel or facilities if students or the lab instructor discovers a possible life-threatening finding during a lab.

Disclosure of Medical History Including Known Pathologies

Models should disclose any previously diagnosed pathology in the region being tested. Models should also disclose pertinent medical conditions, surgeries, treatments, open wounds, or active infections in the area to be tested (e.g., staph infection, etc.). To protect the students and faculty, disclosure of certain existing pathologies (e.g., open wound or staph infection, etc) may disqualify a model from participating.

Volunteer Signature Date

Witness Signature Date

MEDICAL DISCLOSURE FORM

Medical History (Explain all “Yes” answers):

Please check below if you are experiencing or receiving treatment for any of the following. Explain all “Yes” answers below in the comment section or on the back of the page and include dates. Answering “Yes” does not constitute an automatic bar from modeling. Please add treatment you are receiving under the comments.

Yes No

- Heart Disease
- High Blood Pressure
- Valvular Disease
- Stroke
- Numbness/tingling
- Fainting
- Seizures
- Diabetes
- Head Trauma
- Asthma
- Sickle Cell
- Pacemaker
- Vagus stimulator

Explain all “Yes” answers:

List all prior surgeries:

INCIDENTAL FINDINGS IN LAB MODELS

PURPOSE: To establish the appropriate guidelines for handling incidental findings discovered during lab class.

SCOPE: This policy applies to all involved in the Neurodiagnostic Program including but not limited to the program faculty, students, and outside models. This policy will be reviewed annually by key personnel. Key personnel may include, but is not limited to the program director, program medical advisor, program faculty, and risk management. Incidental Finding is defined as the identification of an abnormal finding or medical condition that was previously unknown to the model. Incidental findings can range from:

1. Normal anatomical or physiologic variation or other minor findings
2. Possible clinically significant
3. Possible Life-threatening

PROCEDURE:

A. Models are commonly used during hands-on neurodiagnostic training sessions (labs) to practice Neurodiagnostic procedures and techniques (see Lab Model Policy)

B. **Lab Supervision:** A technologist, who is certified and registered in the specialty area of the neurodiagnostic program concentration being taught or the procedure being performed, should act as the lab instructor and directly supervise all neurodiagnostic procedures performed on models in the lab. A lab that uses only phantoms (i.e., no live models) may not require supervision.

C. **Practice Sessions:** program equipment will be made available to students outside of the normal lab hours to complete proficiency assignments.

- Practice sessions will not be directly supervised; therefore, no outside models will be used by students for practice at any time
- All practice sessions will be held at the school
- Available hours will be posted at the start of each semester

D. Incidental Finding Notification:

Students: If a student identifies a potential incidental finding in a lab model, they will privately notify the lab instructor as soon as possible (away from the model and other students). Under no circumstance will the student inform any model of an incidental finding.

Model: for medical and legal reasons, the neurodiagnostic student, lab instructor, program director, or other neurodiagnostic program faculty or staff should not provide diagnostic findings or a diagnosis to the model.

- Models will be notified in a private setting that an incidental finding was found during the non-diagnostic neurodiagnostic procedure by a member of the program faculty.
- The notification will include a brief description of the incidental finding in neutral terms without attempting to make a diagnosis.
- Each situation will be treated seriously and respectfully so as to avoid confusing or upsetting for the model.

1. Normal minor findings

- Program faculty will discuss the possible finding with the model in a private setting.
- The model will be referred to their personal physician using the incidental findings referral form.
- The model will be asked if they would like to continue with the lab; if no – the models participation in the lab will end.

2. Possible clinically significant

- Program faculty will discuss the possible finding with the model in a private setting.
- The model will be referred to their personal physician using the incidental findings referral form.
- The model will be asked if they would like to continue with the lab; if no – the models participation in the lab will end.

3. Possible Life threatening finding

- Program faculty will discuss the possible finding with the model in a private setting.
- The model will be referred for emergency care (e.g. call 911)
- The models participation in the lab will end immediately

Program Director: The lab instructor should notify the program director if a possible clinically significant or life-threatening incidental finding is discovered during lab. This step helps ensure that all parties follow the policy and procedures and that it provides adequate direction to meet everyone's needs, particularly if the incidental finding is serious in nature.

- For a model who is also a student in the program notification of the program director allows the program director to prepare for additional questions from the student, offer suggestions for follow up, and in severe cases, prepare for the possibility of a medical leave of absence or withdrawal from the neurodiagnostic program.
- If the incidental finding was noted by other lab participants or observers, the program director may need to provide assurance that the appropriate procedures are in place and remind everyone to respect the affected student's privacy.
- The discovery of an incidental finding may also cause students to question their future participation as a model. Individualized counseling may be necessary if a fellow student discovered the significant finding.

E. Incidental Finding Referral:

Models will be encouraged to see their personal physician for follow up and possibly obtain a diagnostic examination. Questions about the incidental finding will be deferred to the model's personal physician. An incidental finding referral form will be provided to the model. The form will explain that an educational, non-diagnostic neurodiagnostic procedure discovered and incidental finding. The form will include information about the Neurodiagnostic program, the model's name, the procedure performed, and the date/time of exam.

- The form will not propose a diagnosis or describe the neurodiagnostic findings

- A copy of the referral form will be retained in accordance with the program's document retention policy

Students: will never provide a referral to a model for an incidental finding.

Lab Instructor: Instructors may provide the appropriate referral to a model for normal anatomical or physiologic variation and minor findings.

Program Director: will be made aware and when feasible provide the appropriate referral to a model for clinically significant or life threatening finding.

Neurodiagnostic Procedure for Educational and Quality Assurance Purposes

INCIDENTAL FINDINGS REFERRAL

Date/Time: _____

Department: _____

Supervising Technologist: _____

Model Name: _____

Exams performed: _____

Comments _____

Supervising technologist has disclosed to the model that an incidental finding has been discovered. The model has been advised to see their personal physician. The Aurora St. Luke's School of Neurodiagnostic Technology is not responsible or liable for any costs or results associated with a model seeking medical evaluation or care based on the referral.

Model signature _____

Supervising Technologist signature _____

Date

CLINICAL SUPERVISION

PURPOSE: To define appropriate levels of clinical supervision for students.

SCOPE: This policy applies to all students enrolled in the Neurodiagnostic Technology Program.

PREFACE:

In providing an educational program in Neurodiagnostic Technology, one must recognize that a major portion of the student's education is the applied or clinical aspect. The level of supervision is dependent upon the level of competency. Regardless of the level of competency, a registered technologist **must** review all data.

PROCEDURE:

Clinical education must be carefully supervised and if necessary modified to meet the individual needs of each student.

Regardless of the level of supervision, a qualified technologist must review all examinations prior to the dismissal of the patient.

Direct Supervision

All clinical assignments shall be carried out under the direct supervision of a qualified technologist during semester one through three (1-3). The parameters of direct supervision are:

1. A qualified technologist reviews the request for examination in relation to the student's achievement to determine the student's level of participation with the exam.
 2. A qualified technologist evaluates the condition of the patient in relation to the student's level of achievement to determine the student's level of participation with the exam.
 3. A qualified technologist is physically present during the examination.
 4. A qualified technologist reviews and approves the data collected prior to the dismissal of the patient.
 5. Both the student and supervising technologist name will be entered in the Epic system. The supervising technologist name will be listed first and the students name second.
3. Improper documentation may result in disciplinary action
4. Indirect Supervision

During semester four (4), if a student has successfully completed the required clinical competencies for a given section, the clinical affiliate, at their discretion and within the guidelines of the program, may implement indirect supervision in relation to the student. The parameters of indirect supervision are:

1. A qualified technologist must be physically present in the immediate area where the student is performing the examination and available to assist the student as

necessary. Under no circumstances should the student be assigned alone to an area.
2. Technologist use several guidelines to determine whether a student may proceed with a specific examination. These are merely guidelines. Individual considerations may be necessary when assigning clinical tasks.

Guidelines include the following:

- a. Consider the age appropriateness of the patient
 - b. Consider the patient's history and condition
 - c. Consider the form of transportation and the patient's status
 - d. Consider the student's level of education / training
4. Both the student and supervising technologist name will be entered in the Epic system. Under indirect supervision, the student will enter his/her own name in the system first, then the name of the supervising technologist who verified the order and reviewed the final data collected.
5. Improper documentation may result in disciplinary action.
6. Supervising technologist are advised to consult with a clinical instructor when in doubt of a student's level of competence.
- 7. Even after a student has demonstrated competency in an area, every procedure performed by a student must be reviewed by a qualified technologist before a physician checks the exam or the patient is released.**

QUALIFIED CLINICAL TESTERS

PURPOSE: This policy is intended to provide guidelines to ensure the comprehensiveness and fairness of clinical competency testing.

SCOPE: This policy applies to all students enrolled in the Neurodiagnostic Technology Program.

PROCEDURE:

Any *registered technologist* that meets the following criteria is deemed capable of performing competency testing.

- Appropriately credentialed in the area of competency. For example, a technologist that is registered in modality may evaluate competency.
- Employee of the Clinical Affiliate

A master list showing the technologist current credentials will be maintained by the program faculty and made accessible to the student

- The form should be readily available for the technologist student to view
- The student must repeat competencies evaluated by inappropriately credentialed technologist.

It is the responsibility of all clinical affiliate technologist to be familiar with the Clinical Competency policy.

Site technologist will evaluate the student honestly and provide verbal feedback to the student upon completion of the evaluation.

Doubt about a student's clinical capabilities will be communicated to the program supervisor(s) and a competency retest may be initiated. Refer to "Clinical Competency Policy"

CLINICAL PERFORMANCE EVALUATION POLICY

PURPOSE: This policy is intended to provide guidelines for the use of the clinical performance evaluation form. This form is used to monitor the student's professional growth, interactions and technical ability.

SCOPE: This policy applies to all students enrolled in the Neurodiagnostic Technology Program, technologist of all clinical affiliates and program clinical instructors.

PROCEDURE:

- The student will be evaluated for clinical performance every four (4) weeks.
- The student's overall performance will be evaluated based on **observed** clinical objectives.
- Each objective will describe the desired clinical goal. Each objective will be rated on a 5-point Likert scale with five indicating the student's ability to perform the task without guidance or prompting.
 - 5 = the student performs tasks without guidance or prompting
 - 4 = the student can perform tasks with minimal prompting
 - 3 = the student can perform tasks with moderate prompting
 - 2 = the student can perform tasks with direct guidance
 - 1 = the student has difficulty performing tasks with guidance
- A numeric grade for each rotational evaluation will be calculated; the grades will be available to the student. Students will review and initial all evaluation forms.

SITE CLINICAL INSTRUCTOR RESPONSIBILITIES:

The site Clinical Instructor (CI) will complete a Clinical Performance Evaluation form

- The CI is responsible for eliciting feedback from the neurodiagnostic staff in regard to the student's overall performance based on **observed** clinical performance traits.
- Based on the observations, the CI will suggest one clinical goal for the student to work on.
- To provide timely feedback to the student, it is strongly encouraged that the Site CI discuss the evaluation with the student.
- Site CI's or any staff neurodiagnostic may elect to submit student evaluation forms at any time if there are concerns regarding the student's performance. Additional evaluations will be averaged together with the required evaluations for a final grade.

PROGRAM CLINICAL COORDINATOR / INSTRUCTOR RESPONSIBILITIES:

- In order to provide a means of evaluating individual students during site visits the program Clinical Coordinator / Instructor will complete a Clinical Performance Evaluation as well as provide the student with a verbal review of the site visit.
- It is the responsibility of the program faculty to revise/update evaluation forms on a continual basis.

- The program clinical coordinator will develop action plans with the student for unsatisfactory evaluations on a timely basis.

STUDENT RESPONSIBILITIES:

- Students are required to meet the minimum standard (letter grade “B”) on clinical evaluations. Students unable to maintain the standard will be subject to disciplinary action.
- The student is responsible for assigning the evaluation to the CI. Students are strongly encouraged to ask for feedback and a review of the completed evaluation form.
- A student may obtain additional evaluations, if desired, from technologist other than the site clinical instructor. Students may only request an evaluation from a staff technologist that supervised the student for at least 4 procedures.

CLINICAL PROFICIENCY

PURPOSE:

This policy is intended to develop a consistent method of measuring student progress in clinical procedure skills by a member of the program faculty. Proficiency assignments provide a way for the student to demonstrate their understanding of gross anatomical relationships as well as the technical methods employed in the creation of a diagnostic quality.

SCOPE:

Aurora St. Luke's Medical Center Neurodiagnostic Technology Program.

PROCEDURE:

The neurodiagnostic student is required to complete predetermined proficiency assignments and/or clinical test outs relative to the academic material being presented each semester.

Completing the predetermined proficiency assignment / test out for each area of study is a prerequisite for the student preparing to prove competency in any given area.

Clinical proficiency assignments will correspond directly to the school protocols for the specified procedure. A member of the program faculty will convey the program expectations through demonstration and discussion.

Procedures will be evaluated by the program faculty. Feedback for improvement will be discussed

with the student. The program faculty will assess the accuracy of the protocol for the procedure being performed, and overall quality.

Successful completion of a clinical proficiency / test out requires a minimum letter grade of B or better.

- If the student receives a letter grade below B, the proficiency must be repeated in order to demonstrate appropriate corrective action
 - Failure of a test out on the second attempt will result in disciplinary action which may include termination from the program
 - If the student receives a score of Needs Development or Unable to Demonstrate on any procedure, then data needs to be repeated
 - If the student receives a passing letter grade of B or better but is not satisfied with the results, they may request to repeat the test out
 - No student may attempt competency in the major area of study until successful completion of the corresponding clinical proficiency.

Grading criteria will be as follows:

- Proficiency assignment
 - Unable to demonstrate 1
 - Needs Development 2
 - Fully Competent 3
 - Significant Strength 4

CLINICAL PRACTICUM

PURPOSE:

Ensure appropriate clinical progression during the program.

SCOPE:

This policy applies to students enrolled in the Neurodiagnostic Technology Program.

RESPONSIBILITY:

The student is responsible for preparing for the clinical practicum by fully participating in all components of the clinical education.

PROCEDURE:

1. At the end of semester 2 and 4 the student will demonstrate EEG, LTM, EP and IONM.
2. The practical exam will be graded by the program faculty and will become part of the academic and clinical final grades for the semester.
3. The following skill sets will be assessed to determine the student's current ability:
 - Demonstration ACNS/ ABRET standards
 - The ease at which the student incorporates the skill sets to the exam, performing the exam in a timely fashion and the ability to adapt the exam to the patient
4. The student will be given 60 minutes to demonstrate each exam. The intent is not necessarily for the student to complete an entire exam, rather that they demonstrate a level of competence for the skills listed above.
5. Models will be provided

CLINICAL EXPERIENCE DOCUMENTATION

PURPOSE:

This policy is intended to:

- Provide a means for evaluating the quantity and variety of neurodiagnostic procedures the student is exposed to.
- Document in a regular and timely fashion that the student meets the minimum numbers of procedures and types of procedures as established by the program.
- In conjunction with the CAAHEP accreditation guidelines, documentation will indicate the following:
 - Number and type of procedures performed will be recorded individually
 - Examination findings
 - Extent of student supervision
 - Level of involvement of the student performance
 - Patient age

SCOPE:

This policy applies to all students enrolled in Aurora St. Luke's Medical Center Neurodiagnostic Technology Program.

PROCEDURE:

Students are required to accurately maintain a log of all procedures observed and/or performed. Clinical logs serve as a means for ensuring appropriate levels of student clinical experiences prior to clinical competency. Clinical logs assist the student in the development of essential clinical skills such as taking appropriate patient history, correlating prior diagnostic studies and labs and the formulation of potential diagnosis and differentials. The student may use these logs to follow up on interesting cases in preparation for case study reviews.

Failure to maintain accurate documentation of clinical experience is grounds for disciplinary action up to and including dismissal from the program.

RESPONSIBILITIES:

The student will accurately log their clinical experience log sheet.

- It is recommended that the student log experience daily
- **Entries must be logged as individual cases.**
- The student will review the clinical experience log and summary reports
- All summations will be turned in to the program and be maintained as part of the student file.

The student will accurately record the appropriate level of participation according to the following table:

Date	Patient Initials	Age	Procedure	Normal/ Abnormal	Leads moved	Reading Doctor	Doctor Findings

Acknowledgement Form

Neurodiagnostic Technology Program Student Handbook

I hereby acknowledge that I have received a copy of the Advocate Aurora Health Student handbook. I further acknowledge that I am responsible for all information contained within the manual and will abide by the policies, rules and regulation set forth thereof.

I also acknowledge that I have received a copy of the Carroll University Undergraduate Catalog, Carroll University Student Handbook, as well as the student handbook provided to me by my specific hospital program and that I am responsible for the policies, rules and regulation set forth in these publications.

I acknowledge that I have had the opportunity to ask questions regarding any of the policies, rules or regulations set forth in the Neurodiagnostic Technology Program.

I understand that failure to comply with the policies, rules and procedures set forth in these handbooks may result in disciplinary action, suspension or termination from the Carroll University Health Sciences Program and/or my affiliate hospital program.

Student Signature

Date

Student Name (printed)

Student ID#

Program NDT

Advocate Aurora Health

HEALTH REQUIREMENTS

Please print legibly.

Last Name:		First Name:	
DOB:	Primary Phone Number:		
Primary Email:			
Address:		City:	
State:	Zip Code:	School:	

IMMUNIZATIONS				Copies Attached
<p>MMR (Measles, Mumps, Rubella) – 2 doses of MMR vaccine or two (2) doses of Measles, two (2) doses of Mumps and (1) dose of Rubella; or serologic proof of immunity for Measles, Mumps, and/or Rubella. First dose of any vaccine must be dated after first birthday. Choose only one option.</p>				
Option 1	Vaccine	Date		
MMR – 2 doses of MMR vaccine	MMR Dose #1	___/___/___		<input type="checkbox"/>
	MMR Dose #2	___/___/___		
Option 2	Vaccine or Test			
Measles – 2 doses of vaccine or positive serology	Measles Vaccine Dose #1	___/___/___		<input type="checkbox"/>
	Measles Vaccine Dose #2	___/___/___		
	Serologic Immunity (IgG, antibodies, titer)	___/___/___	Serology Results: <input type="checkbox"/> Positive <input type="checkbox"/> Negative	
Mumps – 2 doses of vaccine or positive serology	Mumps Vaccine Dose #1	___/___/___		<input type="checkbox"/>
	Mumps Vaccine Dose #2	___/___/___		
	Serologic Immunity (IgG, antibodies, titer)	___/___/___	Serology Results: <input type="checkbox"/> Positive <input type="checkbox"/> Negative	
	Rubella Vaccine	___/___/___		<input type="checkbox"/>

Rubella – 1 dose of vaccine or positive serology	Serologic Immunity (IgG, antibodies, titer)	___/___/___	Serology Results: <input type="checkbox"/> Positive <input type="checkbox"/> Negative	
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Influenza Vaccine – 1 dose annually each fall

	Influenza Vaccine	___/___/___		<input type="checkbox"/>
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COVID - 19 Vaccine – if applicable; not mandatory

Pfizer	<input type="checkbox"/>	___/___/___		<input type="checkbox"/>
Moderna	<input type="checkbox"/>	___/___/___		
Other	<input type="checkbox"/>	___/___/___		

TUBERCULOSIS SCREENING

Results of last 2 Tuberculin Skin Tests (TST) or 1 Interferon Gamma Release Assay (IGRA) blood test are required regardless of prior BCG status. If you have a history of a positive TST or IGRA, please supply information regarding any evaluation and/or treatment below. You only need to complete ONE section (A, B, or C). **TST or IGRA testing must be dated within 90 days of start in the program. If chest x-ray is indicated (post positive TB screening), it must be dated within 6 months of start in the program.**

Please complete only one TB section based on your history.	Section A					
	Negative Skin or Blood Test History – last two skin tests or IGRA required. Last testing must be dated within 90 days of start in the program.		Date Placed	Date Read	Result	Copies Attached
		TST #1	___/___/___	___/___/___		<input type="checkbox"/>
		TST #2	___/___/___	___/___/___		<input type="checkbox"/>
			Date	Result		
	IGRA (TB Gold or T-Spot)	___/___/___	<input type="checkbox"/> Negative <input type="checkbox"/> Indeterminate and must be repeated		<input type="checkbox"/>	
	Section B					
	History of Positive TB Screening (TST or IGRA) – IGRAs include T-spot or QuantiFERO N TB Gold blood tests		Date Placed	Date Read	Result	
		Positive TST	___/___/___	___/___/___	_____ mm	<input type="checkbox"/>
				Date	Result	
QuantiFERON TB Gold or T-Spot (Interferon Gamma Releasing Assay)			___/___/___	<input type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Indeterminate and must be repeated	<input type="checkbox"/>	

for tuberculosis	Chest X-ray		___/___/___	_____	<input type="checkbox"/>
	Were you treated for latent TB? <input type="checkbox"/> Yes <input type="checkbox"/> No				
	If treated for latent TB, list medication(s) taken:				
	Total duration of treatment for latent TB: _____ months				
	Date of last annual TB Risk Assessment and Symptom Evaluation: ___/___/___				
Section C					
History of Active Tuberculosis	Date of diagnosis:	___/___/___			
	Date treatment completed:	___/___/___			
	Date of last annual TB Risk Assessment and Symptom Evaluation:	___/___/___			<input type="checkbox"/>
	Date of last chest x-ray (must be dated within 6 months of start of program):	___/___/___			<input type="checkbox"/>

Physical and psychological requirements of program:

- Physical requirements:
 - Sit, stand, walk, lift, squat, bend and twist throughout the workday
 - Lift more than 50 lbs. from floor to waist
 - Lift up to 20 lbs. over the head
 - Carry up to 40 lbs. a reasonable distance
 - Push and pull with 30 lbs. of force
 - Perform a sliding transfer of 150 lbs. with a second person present

- Visual acuity to assess data quality and observe physical changes in the patient's condition during routine neurodiagnostic procedures
 - Ability to discern color distinctions

- Speech and hearing to give instructions to and receive communication from patients, as well as distinguish audible signals while performing the TCD/IONM examination.

- Manual dexterity to adjust machine controls, attach and adjust supportive devices, and assist patients into position for the procedure

- Psychological requirements:
 - Work under stress and maintain self-control
 - Have patience and tact in dealing with others
 - Organize and plan work in a logical sequence
 - Use sound judgment in making decisions
 - Adapt to new situations
 - Demonstrate problem-solving and critical thinking skills



College of Health Sciences

Neurodiagnostic Education Program

Senior Exit Evaluation

Student Name: _____ Date: _____

Years taken to Obtain Degree: _____

Part I.

Which best describes your future plans? (circle one)

- a) I have been accepted to a graduate school.
School _____ Degree Program _____
- b) I have applied to graduate schools but have not been accepted yet.
- c) I have secured a job. Company _____ Position _____
- d) I am still looking for a job.
- e) I have no idea
- f) Other. Please specify _____

Part II.

Please evaluate the Neurodiagnostic education program based on the following scale:

4 = Strongly Agree 3 = Agree 2 = Disagree 1 = Strongly Disagree 0 = N/A

1. I have confidence in the skills I have been taught in the Neurodiagnostic program to succeed as a Registered Technologist.	
2. I have been exposed to working with diverse populations.	
3. I have confidence in the knowledge and skills needed to uphold the quality and integrity in a study or case set by ACNS/ASET and ABRET.	
4. I am confident in my knowledge regarding Evoke Potentials..	
5. I have confidence that I can effectively perform IONM.	
6. I have confidence that I am able to communicate effectively with the patient, family and help improve the quality in care.	
7. I am confident in effectively using Collodion, EC2 Cream, Ten20.	
8. I am confident in effectively using EEG, EP and IONM Machines.	

9. I am confident in my knowledge and skills to handle general medical conditions and disabilities.	
10. I am an effective communicator amongst professionals.	
11. I have learned to practice with professionalism and integrity.	
12. I feel it is important to make a positive effort in continuing education to become a life-long learner in the profession of Neurodiagnostic.	
13. I am confident that I can think critically to effectively solve problems in a variety of dynamic Neurodiagnostic environments.	
14. I was provided with opportunities to interact with a variety of healthcare professionals throughout the curriculum.	

Clinical Education Experience

Please evaluate the following as they relate to your clinical experience in Carroll University’s Neurodiagnostic education program. Use the following codes and circle the appropriate number. Write N/A if it was not an experience you had.

4 = excellent 3 = good 2 = fair 1 = poor 0 = needs work N/A

Aurora Health Care	EEG	4	3	2	1	0	N/A
Aurora Health Care	EP	4	3	2	1	0	N/A
Aurora Health Care	IONM	4	3	2	1	0	N/A

Carroll University Health Center	4	3	2	1	0	N/A
Carroll University Neurodiagnostic Room(s)	4	3	2	1	0	N/A
Capstone Facility _____	4	3	2	1	0	N/A
Other: _____	4	3	2	1	0	N/A

Educational Summary

Please evaluate the following six practice domains on how well Carroll University’s Neurodiagnostic program has prepared you in them. Use the following codes and circle the appropriate number.

4 = excellent 3 = good 2 = fair 1 = poor 0 = needs work

EEG	4	3	2	1	0
EP	4	3	2	1	0
IONM	4	3	2	1	0
Treatment, Neurological disorders	4	3	2	1	0
Organization & Administration	4	3	2	1	0
Professional Development & Responsibility	4	3	2	1	0

Please list any strengths and/or weaknesses you experienced in the academic component of the Neurodiagnostic program. (e.g., courses, classroom/lab instructors, academic advising, facilities, curriculum, design/sequencing, etc.)

Strengths:

Weaknesses:

Student Signature: _____ Date: _____

Program Director Signature: _____ Date: _____

Name:		Supervisor Name:	
Clinical Site(s):			
Clinical Performance	Satisfactory	Unsatisfactory	Comments
Explained information to the patient about exam, expectations and duration.			
Measure using 10-20 System within 0.5cm accuracy			
M&M within 20 Minutes			
Application with Paste within 25 Minutes			
Application with Collodion or other long term set up within 30 minutes			
Under 5k Ohms			
Head Wrap appropriate			
Correct EEG Montages, Settings, Sensitivity			

Proper Duration based on order			
Artifact free			
Proper documentation			
History detailed and proper information exchanged to physician			
Student recognized and changed setting as needed			
Student recognized waveforms and used proper names for the waveforms that were identified			
Study was transferred correctly			
Physician was notified and communicated if anything abnormal appeared			
Charges were placed based on study performed			

Study was reviewed with technologist and identified background, normal, abnormal patterns and sleep stages			
Shows up on time to clinical and ready to work			
Works well and effectively with team and healthcare professionals			
Demonstrates a good rapport with patients, family, staff and healthcare professionals			
Has a good attitude and motivated			
Student able to problem solve and handle stressful environments.			
When the lab is slow, helps clean, stock and finds ways to stay busy and productive.			

Student Summary and rating: Please attach summary paper.			
Supervisor Summary and overall rating: Please attach summary paper.			
Clinical Supervisor Signature:			
Student Signature:			
Date:			

Name:		Supervisor Name:	
Clinical Site(s):			
Clinical Performance	Satisfactory	Unsatisfactory	Comments
Explained information to the patient about exam, expectations and duration.			
Measure using 10-20 System with in 0.5cm accuracy			
Placement of Leads in appropriate location and muscles			
Set up within 30 Minutes			
Under 5k Ohms			
Leads secured properly and needles are properly marked with stress loops			
Wires routed properly and equipment out of the way of Surgeon, X-ray, O-arm, and Anesthesiologist			
Correct Montages, Settings, Sensitivity			

Proper Duration based on order			
Artifact free			
Proper documentation			
History detailed and proper information exchanged to physician			
Student recognized and changed setting as needed			
Student recognized waveforms and used proper names for the waveforms that were identified			
Study was transferred correctly			
Physician was notified and communicated if anything abnormal appeared during the case and after case.			
Charges were placed based on study performed			

Study was reviewed with technologist and normal, abnormal patterns			
Shows up on time to clinical and ready to work			
Works well and effectively with team and healthcare professionals			
Demonstrates a good rapport with patients, family, staff and healthcare professionals			
Has a good attitude and motivated			
Student able to problem solve and handle stressful environments.			
When the lab is slow, helps clean, stock and finds ways to stay busy and productive.			
Student Summary and rating: Please attach summary paper.			

Supervisor Summary and overall rating: Please attach summary paper.			
Clinical Supervisor Signature:			
Student Signature:			
Date:			

NDT 480-490 Clinical Evaluation

Student Name _____

Course _____

Preceptor Name _____

Year _____

Comments: _____

Signature: _____ Date: _____

Neurodiagnostic Student Progress Self Evaluation

Name: _____ Date: _____

Please indicate your perception of your ability to perform the following items:

- 1- Competent
- 2- Minimum Supervision
- 3- Requires Supervision

Procedure	Task	S1	S1	S2	S2	S3	S3	S4	S4
		Week 8	Week 15	Week 8	Week 15	Week 8	Week 15	Week 8	Week 15
Routine	M&M in 30 min								
	Applying leads in 30 min								
	Impedances under 10 k ohms with a balance of 4 k ohms								
	History taking								
	Supplies ready								
	Running Study								
	Computer Troubleshooting								
	Photic								
	HV								
	Documentation								
	Tech Impression								
	Contacting MD								
	Charting in Epic								
	Room Navigation								
	Patient Interaction								
Transferring of study									
Cleaning Equipment									
Long Term Monitoring	M&M/applied in 60 Minutes								
	Impedances under 10 k ohms with a balance of 4 k ohms								
	Getting supplies ready								
	History Taking								
	RN Interactions								
	Patient Interactions								
	Room Navigation								
	Computer Troubleshooting								
	Connecting to LVP								
	Photic								
	HV								
Documentation									

	Tech Impression								
	Contacted MD								
	Charting in Epic								
	Pruning study								
	Cleaning Equipment								
Ambulatory EEG	M&M/ Applied in 60 minutes								
	Impedances under 10K ohms within 4 k ohms								
	Room Navigation								
	Patient interactions								
	Wrapped head								
	Running the study								
	Paperwork								
	Downloading of study								
	History								
	Pruning of study								
	Tech Impression								
	Contacted MD								
	Video camera								
	Taking wires off								
	Calling patient to check on set-up and batteries								
	Able to answer patient questions								
	Cleaning equipment								
	Epic Charting								
WADA	RN Communication								
	MD Communication								
	Room Navigation								
	Patient Interaction								
	Machine set up								
	M&M/ Applied 30 minutes								
	Under 10k ohms within 4 k ohms								
	Proper Montage								
	Reading MD Communication								
	Baseline obtained								
	Documentation								
	Identified Delta								
	Baseline identification								
	Cross Contamination identified								
	Cleaning patient head								
	Cleaning Machine								
	Transferring study								
	Epic Charting								
Pet Scan	CT Communication								
	Room Navigation								

	MD Communication								
	Set up machine to server								
	M&M/ Applied 30 min								
	Under 10 k ohms within 4 k ohms								
	Patient interactions								
	History								
	Study performed								
	Documentation								
	Identified Abnormalities								
	Communication to MD/CT								
	Tech Impression								
	Cleaning up of patient								
	Equipment cleaned								
	Epic Charting								
Monitoring	Obtain Handoff								
	Pull up patients on LVP								
	Collect information from set up tech								
	Patient card filled out								
	RN Contact number								
	Know when to call into patient room								
	Demonstrated over head page and when too								
	Documentation on EEG								
	Identified Abnormalities								
	MD communications								
	Proper communications with RN/Patient/ MD								
	Able to answer question when answering the phone								
	Identified normal variants								
	Trouble shooting								
	Epic Documentation								
	Provide Handoff								

STUDENT PROGRESS – SELF EVALUATION

Name: _____ Date: _____

What area of Neurodiagnostic do you feel most confident in and why?

What area of Neurodiagnostic do you feel you need the most improvement on?

What goal(s) did you meet since your last evaluation?

If goal(s) were not met, what resources have you identified to ensure you meet the goal(s) now?

List 2 big picture goals then expand or breakdown the goal into the specific steps you will take to achieve the goal in the next 8 weeks.

HEALTHCARE PROVIDER STATEMENT

Communicable disease findings (please choose one):

This patient is free of clinically apparent communicable disease

This patient is not free of clinically apparent communicable disease:

Physical and psychological findings (please choose one):

This patient can perform the physical and psychological requirements listed above.

This patient can perform the physical and psychological requirements listed above with the following restrictions:

This patient is NOT able to perform the physical and psychological requirements listed above, with or without accommodations.

Signature Physician, Nurse Practitioner, or Physician Assistant's Name:

Print name of Physician, Nurse Practitioner, or Physician Assistant:

Credential / License #:

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Applicant met health requirements of program

Applicant did not meet health requirements of program

Signature:

Date: