# http://www.ric.edu/webcommunications/images/SealWithText_Small_Black.pngUNDERGRADUATE CURRICULUM COMMITTEE (UCC)PROPOSAL FORM

## Cover page scroll over blue text to see further important [instructions](#instructions): [if not working select “COMMents on rollover” in your Word preferences under view] please read these.

**N.B. DO NOT USE HIGHLIGHT, where choices are given within categories, please DELETE those THAT DO NOT APPLY TO YOUR PROPOSAL. Do not delete numbered categories.**

**ALL numbers in section (A) to be completed, including the impact ones (#5-7), put “none” if that is the case.**

|  |  |  |
| --- | --- | --- |
| A.1. [Course or program](#Proposal) | **MRI 305 Clinical education II** |  |
| [Replacing](#Ifapplicable)  |  |
| A.2. [Proposal type](#type) | **Course: creation** |
| A.3. [Originator](#Originator) | **Eric Hall** | [Home department](#home_dept) | **Biology/Health Sciences** |
| A.4. [Context and Rationale](#Rationale)  | **In this reorganization of the medical imaging program new courses are being developed to cover the depth and breadth of content needed for certification as an MRI technologist.** |
| A.5. [Student impact](#student_impact) | **Improved readiness for working in the hospital or clinical environment** |
| A.6. [Impact on other programs](#impact)  | **None** |
| A.7. [Resource impact](#Resource) | [*Faculty PT & FT*](#faculty):  | **This course will be taught by LSMI faculty.** |
| [*Library*:](#library) | **None** |
| [*Technology*](#technology) | **None** |
| [*Facilities*](#facilities): | **None** |
| A.8. [Semester effective](#Semester_effective) | **Fall 2020** | A.9. [Rationale if sooner than next Fall](#Semester_effective) |  |
| A.10. INSTRUCTIONS FOR CATALOG COPY: This single file copy must include ALL relevant pages from the college catalog, and show how the catalog will be revised. (1) Go to the “Forms and Information” page on the UCC website. Scroll down until you see the Word files for the current catalog. (2) Download ALL catalog sections relevant for this proposal, including course descriptions and/or other affected programs. (3) Place ALL relevant catalog copy into a single file. Put page breaks between sections and **delete any catalog pages not relevant for this proposal**. (4) Using the track changes function, revise the catalog pages to demonstrate what the information should look like in next year’s catalog. (5) Check the revised catalog pages against the proposal form, especially making sure that program totals are correct if adding/deleting course credits. If new copy, indicate where it should go in the catalog. If making related proposals a single catalog copy that includes all is acceptable. Send as a separate single file along with this form. |

B. [NEW OR REVISED COURSES](#delete_if)  **DO NOT use highlight. Do not delete numbered categories, just leave blank if they do not apply. Delete this whole page if the proposal does not include a new or revised course. Always fill in b. 1 and B. 3 for context.**

|  | Old ([for revisions only](#Revisions))ONLY include information that is being revised, otherwise leave blank.  | NewExamples are provided within some of the boxes for guidance, delete just the examples that do not apply. |
| --- | --- | --- |
| B.1. [Course prefix and number](#cours_title)  |  | **MRI 307** |
| B.2. Cross listing number if any |  |  |
| B.3. [Course title](#title)  |  | **Clinical Education II** |
| B.4. [Course description](#description)  |  | Students are further introduced to the clinical practice of MRI with emphasis on departmental procedures, MRI safety and patient care. They will gain practical experience observing and applying imaging principles. 30 contact hours. |
| B.5. [Prerequisite(s)](#prereqs) |  | **MRI 305** |
| B.6. [Offered](#Offered) |  | **Summer** |
| B.7. [Contact hours](#contacthours)  |  | **30** |
| B.8. [Credit hours](#credits) |  | **5** |
| B.9. [Justify differences if any](#differences) | The standard formula for determining credits based on clinical time for medical imaging programs is quite variable. Quinnipiac uses 105 hours/credit, while University of Hartford has formulae that vary from course to course (96 hours/credit up to 108 hours/credit). We are proposing to standardize our credit formula to 90 hours/credit which realistically reflects the time that students actually spends in the clinical setting while awarding credits based on the relative impact of that course on the curriculum. This standard will be utilized in an equal fashion throughout all of the medical imaging concentrations. |
| B.10. [Grading system](#grading)  |  | **Letter grade**  |
| B.11. [Instructional methods](#instr_methods) |  | **Internship** |
| B.12.[Categories](#required) |  | **Required for major**  |
| B.13. Is this an Honors course? |  | **NO** |
| B.14. [General Education](#ge)N.B. Connections must include at least 50% Standard Classroom instruction. |  | **NO |****category:** |
| B.15. [How will student performance be evaluated?](#performance) |  | **Evaluations****Assignments****Journals** |
| B.16 [Recommended class-size](#class_size" \o "Check appendix XVIII in the UCC Manual for Best Practices) |  | **24** |
| B.17. [Redundancy statement](#competing) |  | **N/A** |
| B. 18. Other changes, if any |  |

| B.19**.** [**Course learning outcomes**](#outcomes)**: List each one in a separate row** | [**Professional Org.Standard(s)**](#standards)**, if relevant** | [**How will each outcome be measured**](#measured)**?** |
| --- | --- | --- |
| The student will:* Students should perform the following objectives at a level consistent with their education and clinical experience. Students are responsible for observing, taking notes and maintaining clinical logs.
* Maintain a safe work environment for patients, visitors and health care workers.
* Properly schedule and prescreen patients.
* Communicate professionally with patients and staff members.
* Use standard protocols to perform routine MR examinations.
* Use digital Imaging and Communications in Medicine (DICOM) to archive and send images.
* Identify when to modify a protocol and successfully perform the modification.
* Identify probable cause of image quality problems and recommend an appropriate solution.
* Perform and monitor quality assurance tests.
* Power up and shut down the system.
* Correlate the requested exam with clinical history and reported physical exam findings.
* Ensure patient safety by correlating surgical, accident and occupational history.
* Properly screen patients for contraindications to MR.
* Monitor the patient to ensure proper attire and that no unauthorized metals enter the exam room.
* Maintain a clean, comfortable and safe environment.
* Employ proper precautions to prevent disease transmission.
* Monitor linens and supplies and restock when necessary.
* Demonstrate how to properly prepare a patient for the requested exam.
* Demonstrate the actions required if a patient requires sedation.
* Demonstrate the actions required if a patient required contrast media.
* Demonstrate the actions required for allergic reactions.
* Demonstrate the actions required if a patient is claustrophobic.
* Demonstrate how to use earplugs or headphones to reduce possible acoustic damage.
* Ensure proper set-up of MR coils, equipment, table accessories and cushioning.
* Demonstrate an understanding of a patient’s cultural, ethnic or value system differences.
* Speak with patients in a professional and empathetic manner to alleviate any concerns they express.
* Demonstrate professional ethics by preserving the patient’s modesty.
* Demonstrate how to give proper instructions to optimize patient comfort and cooperation.
* Respond appropriately in emergency situations.
* Recognize patient adverse reactions during MR procedures to contrast administration and act appropriately.
* Identify and report equipment problems.
* Adhere to national, organizational and departmental standards, protocols, policies and procedures regarding MR exams and patient care.
* Ensure that professional performance and competence is reflected throughout and exam.
* Critique images for appropriate clinical information, image quality, and patient information.
* Demonstrate the appropriate corrective actions to improve inadequate image information.
* Consistently maintain patient confidentiality standards.
* Perform safe, ethical and legal practices.
 |  | Clinical Evaluation of Technical and Affective Skills: 70% (25% mid-semester, 75 % end-semester)* Completed once per rotation by supervising technologist to evaluate technical and affective skills. Evaluations are reviewed by program faculty. The criteria for evaluation includes the following:
	+ Quality of performance
	+ MRI Safety
	+ Equipment manipulation
	+ Clinic preparation
	+ Patient care
	+ Customer interactions
	+ Initiative and dependability
	+ Acceptance of constructive criticism
	+ Appearance

Clinical Competencies : 10% * Complete a total of 6 competencies (either mandatory and/or elective).
* The student’s clinical competencies will be evaluated using the following criteria:
	+ Evaluation of requisition
	+ Physical facilities readiness
	+ Patient-technologist relationship
	+ Positioning skills
	+ Equipment manipulation
	+ Evidence of MRI Safety
	+ Image evaluation

Discussion Board: 10%Assignments are created to create experiences of higher clinical thinking for the students. Clinical logs: Must be maintained by each student throughout the program. Daily clinical logs are due by 0800 on Monday each week. They will be reviewed by faculty. Tardy clinical logs will result in a one point/day deduction from final clinic grade.Clinical Notebook: 10%A notebook will be evaluated during the semester. Please reference rubric for specification.

|  |  |  |  |
| --- | --- | --- | --- |
| **Criteria** | **Unsatisfactory****(3 points)** | **Satisfactory****(4 points)** | **Target****(5 points)** |
| **Organization** | Organization is unclear or disorganized to the extent that it prevents understanding of the content.  | The organization is generally good, but some parts seem out of place.    | Writing/notes are well organized and easy to understand.    |
| **Confidentiality** | Patient confidentiality is rarely or never protected.  | Patient confidentiality is generally well protected.  | Patient confidentiality is protected throughout the notebook |
| **Content****Grammar****Spelling** | Explanations of clinical examinations are not detailed oriented. Vocabulary and/or instructions are somewhat limited or inappropriate. Common professional vocabulary words are misspelled.  | Explanations of clinical examinations are mostly detailed oriented. For the most part, clinical vocabulary is appropriate. With few exceptions, common professional vocabulary words are spelled correctly.  | Explanations of clinical examinations are detailed oriented. With few to no exceptions, clinical vocabulary is appropriate and spelled correctly. The writer demonstrates a mature and elevated level of thought process.  |

Course Requirements:* Competency evaluations may be obtained only after performing task/exam with supervision for required number of times.
* The student must obtain the required competency evaluations listed for each semester and are encouraged to complete additional competencies from the required list of mandatory and elective competencies.
* Students must review area specific protocols prior to clinic rotation.
* When the student is proving competent on an evaluation, they must be able to scan the study all on their own with minimal supervision.
* The student must complete all required documentation and review Trajecsys
* All mandatory and elective competencies must be completed by the end of the fourth semester.
* There are ten elective competencies due by the end of the fourth semester and can be completed in clinical practice semester after the student has observed the procedure in the clinic area.
* The student must obtain the required competency evaluations listed. (See Clinical Education Competencies Requirements).
 |

| B.20. [**Topical outline**](#outline)**: DO NOT INSERT WHOLE SYLLABUS, JUST A TWO-TIER TOPIC OUTLINE. Proposals that ignore this request will be returned for revision.** |
| --- |
| This clinical internship does not need a topical outline as it is simply hands on practice in this aspect of Medical Imaging. |

## D. Signatures

* Changes that affect General Education in any way MUST be approved by ALL Deans and COGE Chair.
* Changes that directly impact more than one department/program MUST have the signatures of all relevant department chairs, program directors, and their relevant dean (e.g. when creating/revising a program using courses from other departments/programs). Check UCC manual 4.2 for further guidelines on whether the signatures need to be approval or acknowledgement.
* Proposals that do not have appropriate approval signatures will not be considered.
* Type in name of person signing and their position/affiliation.
* Send electronic files of this proposal and accompanying catalog copy to curriculum@ric.edu and a printed signature copy of this whole form to the current Chair of UCC. Check UCC website for due dates.

##### D.1. Approvals: required from programs/departments/deans who originate the proposal. may include multiple departments, e.g., for joint/interdisciplinary proposals.

| Name | Position/affiliation | [Signature](#_Signature" \o "Insert electronic signature, if available, in this column) | Date |
| --- | --- | --- | --- |
| Eric Hall | Program Director of Medical Imaging | e-mail confirmation to curriculum@ric.edu | 4/1/2020 |
| Eric Roberts | Chair of Biology | e-mail confirmation to curriculum@ric.edu | 4/1/2020 |
| Earl Simson | Dean of FAS | e-mail confirmation to curriculum@ric.edu | 4/6/2020 |

##### D.2. [Acknowledgements](#acknowledge): REQUIRED from OTHER PROGRAMS/DEPARTMENTS (and their relevant deans if not already included above) that are IMPACTED BY THE PROPOSAL. SIGNATURE DOES NOT INDICATE APPROVAL, ONLY AWARENESS THAT THE PROPOSAL IS BEING SUBMITTED. CONCERNS SHOULD BE BROUGHT TO THE UCC COMMITTEE MEETING FOR DISCUSSION; all faculty are welcome to attend.

| Name | Position/affiliation | [Signature](#Signature_2) | Date |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  | Tab to add rows |