

STUDENT POLICY MANUAL
Department of Medical Technology

The University of Southern Mississippi
September 16, 2011

Purpose of the Manual

The Student Policy Manual is intended to provide the student with the basic information regarding policies and procedures of the medical technology program.

It is assumed the student is familiar with the basic policies and procedures of The University of Southern Mississippi and the College of Health as provided in the current Undergraduate Bulletin and the USM Student Handbook.

Program Mission and Goals

The Medical Technology Department, a functional unit of The University of Southern Mississippi, adheres to the mission of the university. The Department has a commitment to providing a quality education for students entering the medical technology profession and a commitment to striving to meet the needs of the State of Mississippi for medical technology manpower. The Department recognizes responsibility to contribute to the body of knowledge relating to this relatively young profession and responsibility to present leadership through service activities to the state, region, and nation.

The major goals of the medical technology program are:

1. To define clearly what is expected of the students at all levels of the program and to help students achieve those expectations.
2. To incorporate appropriate liberal arts and basic science courses into the curriculum so as to produce professionals aware of the values and needs of our global society.
3. To prepare graduates to integrate theory and practice by effective use of campus laboratories and clinical sites.
4. To prepare graduates for employment in a variety of clinical laboratory settings at career entry level.
5. To prepare graduates who can not only generate data to be used in patient care but also evaluate the validity of that data and assure its reliability before reporting results.
6. To prepare graduates who function as laboratory professionals by respecting the confidentiality of patient information; maintaining neatness in personal habits, work areas, and laboratory reports; performing to the best of their abilities; and assuming responsibility for their ethical conduct as well as their work.
7. To prepare graduates capable of professional advancement, whether in technical, management, or educational positions.
8. To increase the body of knowledge of the profession.
9. To strive to meet the current and projected manpower needs of the State of Mississippi and the region by recruiting and educating qualified applicants.
10. To provide educational opportunities for other disciplines.
11. To serve our academic community and profession.
12. To seek funding for the support of this quality program.

The University of Southern Mississippi Department of Medical Technology is accredited by the National Accrediting Agency for Clinical Laboratory Sciences, 5600 N. River Rd, Suite 720, Rosemont, IL 60018-5119, phone (773) 714-8880, and adheres to the description of the profession given in the **STANDARDS**.

Description of the Clinical Laboratory Science Profession

The clinical laboratory professional is qualified by academic and applied science education to provide service and research in clinical laboratory science and related areas in rapidly changing and dynamic healthcare delivery systems. Clinical laboratory professionals perform, develop, evaluate, correlate and assure accuracy and validity of laboratory information; direct and supervise clinical laboratory resources and operations; and collaborate in the diagnosis and treatment of patients. The clinical laboratory professional has diverse and multilevel functions in the areas of analysis and clinical decision-making, information management, regulatory compliance, education, and quality assurance/performance improvement wherever laboratory testing is researched, developed or performed. Clinical laboratory professionals possess skills for financial, operations, marketing, and human resource management of the clinical laboratory. Clinical laboratory professionals practice independently and collaboratively, being responsible for their own actions, as defined by the profession. They have the requisite knowledge and skills to educate laboratory professionals, other health care professionals, and others in laboratory practice as well as the public.

The ability to relate to people, a capacity for calm and reasoned judgment and a demonstration of commitment to the patient are essential qualities. Communications skills extend to consultative interactions with members of the healthcare team, external relations, customer service and patient education. Laboratory professionals demonstrate ethical and moral attitudes and principles that are necessary for gaining and maintaining the confidence of patients, professional associates, and the community.

Description of Career Entry of the Medical Technologist:

At career entry, the medical technologist will be proficient in performing the full range of clinical laboratory tests in areas such as hematology, clinical chemistry, immunohematology, microbiology, serology/immunology, coagulation, molecular, and other emerging diagnostics, will play a role in the development and evaluation of test systems and interpretive algorithms. The medical technologist will have diverse responsibilities in areas of analysis and clinical decision-making, regulatory compliance with applicable regulations, education, and quality assurance/performance improvement wherever laboratory testing is researched, developed or performed. The medical technologist will also possess basic knowledge, skills, and relevant experiences in:

- a. Communications to enable consultative interactions with members of the healthcare team, external relations, customer service and patient education;
- b. Financial, operations, marketing, and human resource management of the clinical laboratory to enable cost-effective, high-quality, value-added laboratory services;
- c. Information management to enable effective, timely, accurate, and cost-effective reporting of laboratory-generated information, and;
- d. Research design/practice sufficient to evaluate published studies as an informed consumer.

*NOTE: Throughout this Manual stipulations applying to MTC undergraduate students, also apply to those students in the Masters program. MTC undergraduate courses have equivalent graduate level courses.

I. Medical Technology Policies Prior to Practicum

A. During the junior year, the student must complete these medical technology (MTC) courses:

MTC 301/301L	Professional Communications
MTC 302/302L	Clinical Bacteriology I lecture/lab
MTC 306/306L	Fundamentals of Hematology lecture/lab
MTC 309/309L	Clinical Chemistry I lecture/lab
MTC 315	Introduction to Clinical Immunology

B. The Department repeat policy: A grade of C or above must be made in all junior-level MTC courses. If a student fails to make the required grade, the repeat policy is as follows:

1. A student may repeat one junior-level MTC course to improve the grade.

2. A second repeat (for a total of two) of a junior-level course will require specific permission of the Department. To obtain permission, the student must present a justification in person before the faculty of the Department. A majority vote of the faculty is required for permission to be granted.
 3. Only under unusual circumstances will a student be allowed to repeat more than two junior courses. To obtain permission, the student must present a justification in person before the faculty of the Department. A majority vote of the faculty is required for permission to be granted.
- C. MLT students who have an Associate Degree and hold certification as a Medical Laboratory Technician (or equivalent) from a nationally recognized certifying agency are exempt from taking the MTC courses prior to the Practicum, as long as their transcript documents equivalent courses taken as part of the junior/community college program and a grade of C or above was obtained in each MLT course.
- D. MTC Prerequisite Requirements are:

Admission to Junior Level MTC courses or Basic Masters courses: A minimum GPA of 2.0 overall and a C or better in College Algebra, and General Chemistry lecture and laboratory are required for entrance to junior level or basic master's courses.

MTC 202 and 203 are corequisites or prerequisites to the first MTC junior level course. Students must make a C or above in these courses.

- MTC 301: **Professional Communication.** Prerequisite: ENG 101, ENG 102, Medical Technology major or permission of the instructor. Concurrent course: MTC 301L. Professional writing, speaking and computer skills.
- MTC 301L: **Professional Communication Laboratory.** Prerequisite: ENG 101, ENG 102, Medical Technology major or permission of the instructor. Concurrent with MTC 301. Professional writing, speaking and computer skills.
- MTC 302/502: **Clinical Bacteriology I.** Prerequisites: MTC 202 or MTC 203, BSC 110/110L, BSC 380/380L or permission of instructor. Corequisite: MTC 302L/502L. (Offered Spring Only) Evaluation of clinical specimens with regard to pathogenic microorganisms.
- MTC 302L/502L: **Clinical Bacteriology I Laboratory.** Prerequisite: MTC 202 and 203, BSC 110/110L, BSC 380/380L or permission of instructor. Corequisite: MTC 302/502. (Offered Spring Only)
- MTC 306/506: **Fundamentals of Hematology.** Prerequisite: MTC 202 and 203, BSC 110/110L. Corequisite: MTC 306L/506L. (Offered Spring Only) An introduction to the study of blood and blood forming organs.
- MTC 306L/506L: **Fundamentals of Hematology Laboratory.** Prerequisite: MTC 202, MTC 203, BSC 110/110L. Corequisite: MTC 306/506. (Offered Spring Only)
- MTC 309/504: **Clinical Chemistry I.** Prerequisite or Corequisite: MTC 202, MTC203, CHE 420/420L, BSC 110, 110L or permission of instructor. Corequisite: MTC 309L/504L. (Offered Fall Only) An introduction to the basic principles and methodology of clinical chemistry.
- MTC 309L/504L: **Clinical Chemistry I Laboratory.** Prerequisite or Corequisite: MTC 202 , MTC 203. BSC 110/110L, CHE 420/420L or permission of instructor. Corequisite: MTC 309/504. (Offered Fall Only)
- MTC 315/515: **Introduction to Clinical Immunology.** Prerequisite or Corequisite: BSC 110/110L, MTC 202, MTC 203, or permission of instructor. (Offered Fall Only) Function of the immune system and its relationship to diagnostic methods.

- E. If number of applicants for the Practicum exceeds Practicum class size, acceptance will be based on GPA, with higher GPAs given preference.

- F. Student preferences for hospital assignments will not be requested. The Affiliated hospitals include Forrest General Hospital (FGH), Hattiesburg; Memorial Hospital (MHG), Gulfport; and Singing River Hospital (SRH), Pascagoula; Wesley Medical Center (WMC), Hattiesburg; VA Gulf Coast Health Care System (VA), Biloxi; St. Dominic-Jackson Memorial Hospital (St.D), Jackson. WMC, VA, St. D. are activated under certain circumstances as described in II.F. 2 of the Student Policy Manual.
- G. Each student has final responsibility to ascertain that he or she has complied with all applicable catalogue requirements for graduation. Faculty advisors assist students in developing their programs, but these advisors cannot waive or vary degree requirements as they appear in the University Bulletin. Each student is permitted to preregister for MTC courses but final permission to take the class depends upon successfully meeting all requirements and adequate student enrollments.
- H. Documentation that you have received Hepatitis B vaccination is required for entrance into the Practicum. If upon consultation with a physician, specific conditions exist which are medically recognized contraindications, you should consult the Program Director for a Certificate of Medical Exemption. It is highly suggested that vaccination be completed prior to the junior year. Three injections are required over a six month period with cost of approximately \$40 per shot.
- I. For policy regarding AP credit, see USM Bulletin.
- J. Students enrolling in and graduating from a Medical Technology program must meet the essential function requirements of the academic program and the profession. Essential Functions are the non-academic standards that a student must be able to master to participate successfully in the MT program and become employable*. Examples of this program's essential functions are provided below. If you are not sure that you will be able to meet these essential functions, please consult with the Department Chairperson for further information.

Essential Visual and Observation Skills for Medical Technology

The Medical Technology student must be able to:

- observe laboratory demonstrations in which biological (i.e., body fluids, culture materials, tissue sections, and cellular specimens) are tested for their biochemical, hematological, immunological, microbiological, and histochemical components.
- characterize the color, odor, clarity, and viscosity of biologicals samples, reagents, or chemical reaction products.
- utilize a clinical grade binocular microscope to discriminate among fine structural and color (hue, shading, and intensity) differences of microscopic specimens.
- read and comprehend text, numbers, and graphs displayed in print and on a video monitor.
- recognize alarms.

Essential Motor and Mobility Requirements for Medical Technology

The Medical Technology student must be able to:

- perform laboratory testing adhering to existing laboratory safety standards.
- perform moderately taxing continuous physical work, often requiring prolonged sitting and/or standing, over several hours.
- travel to assigned clinical laboratory Practicum sites.
- reach laboratory benchtops and shelves, patients lying in hospital beds or patients seated in specimen collection furniture.
- grasp, hold, transport, utilize specimens, reagents, hazardous chemicals and equipment in a safe manner as needed to perform laboratory testing.

- obtain patient specimens in a timely, safe, and professional manner (e.g. perform phlebotomy).
- use laboratory equipment (e.g. pipettes, inoculating loops, test tubes) and instruments to perform laboratory procedures according to established laboratory guidelines.
- use a computer keyboard to operate laboratory instruments and to calculate, record, evaluate, and transmit laboratory information.
- troubleshoot and correct basic equipment malfunctions.

Essential Communication Requirements for Medical Technology

The Medical Technology student must be able to:

- read and understand technical and professional materials (i.e. textbooks, journal articles, handbooks, and instruction manuals).
- follow oral and written instructions independently.
- clearly instruct patients regarding specimen collection.
- demonstrate sensitivity, confidentiality and respect when speaking with patients.
- communicate clearly, accurately and tactfully with faculty members, student colleagues, staff and other health care professionals orally and in a recorded format (writing, typing, graphics, or telecommunications).

Essential Intellectual Requirements for Medical Technology

The Medical Technology student must be able to:

- comprehend, measure, calculate, reason, integrate, analyze, evaluate, correlate, problem-solve and compare.
- recognize abnormal laboratory results (e.g. patient and QC) and take appropriate action.
- demonstrate critical-thinking and judgment skills appropriate to a given situation.
- independently prepare papers, prepare laboratory reports, and take paper, computer, and laboratory practical examinations.

Essential Behavioral Requirements for Medical Technology

The Medical Technology student must be able to:

- organize work and perform multiple tasks within given time constraints and under stressful conditions while maintaining the ability to communicate clearly.
- be able to manage the use of time and be able to systematize actions in order to complete professional and technical tasks within realistic constraints.
- possess the emotional health necessary to effectively apply knowledge and exercise appropriate judgment.
- be able to provide professional and technical services while experiencing the stresses of task-related uncertainty (i.e., ambiguous test order, ambivalent test interpretation), emergent demands (i.e. "stat" test order), and distracting environment (i.e., high noise levels, crowding, complex visual stimuli).
- be flexible and creative and adapt to professional and technical change.
- recognize potentially hazardous materials, equipment, and situations and proceed safely in order to minimize risk of injury to patients, self, and nearby individuals.

- adapt to working with unpleasant biologicals.
- support and promote the activities of fellow students and of health care professionals. Promotion of peers helps furnish a team approach to learning, task completion, problem solving, and patient care.
- be honest, compassionate, ethical, and responsible. The student must be forthright about errors or uncertainty. The student must be able to critically evaluate her or his own performance, accept and act on constructive criticism, and look for ways to improve (i.e., participate in enriched educational activities).
- show respect for individuals of different age, ethnic background, religion, and/or sexual orientation.
- exercise independent judgment and accept responsibility for own work.

In addition, the student must follow all established policies and procedures of the program and clinical affiliate sites.

- Certain disabilities may limit employment opportunities. Moreover, immunocompromised individuals may put themselves at personal risk due to exposure to infectious agents that occur in all aspects of the laboratory.

K. Healthcare Criminal History Background Affidavit:

All students must complete a notarized Healthcare Criminal History Background Affidavit. This affidavit will be required the semester prior to going to the assigned clinical affiliate (Phase II). The affidavit will be given to the assigned clinical affiliate who will review the affidavit for eligibility of the student to attend the assigned clinical affiliate. If a student has a felony conviction, the student may not be able to complete the degree because the student may not be able to perform the clinical experience. Felonies by the current law are: possession or sale of drugs, murder, manslaughter, armed robbery, rape, sexual battery, child abuse, arson, grand larceny, burglary, gratification of lust, aggravated assault, felonious abuse, and/or battery of vulnerable adult or sex offenses listed in Section 45-33-23 Mississippi Code of 1972. A student may be denied clinical assignment if no affiliated hospital accepts the student based on this affidavit. Questions regarding this requirement should be addressed to the Program Director preferable prior to entering Phase I of the program.

L. For degree requirements, refer to the USM Bulletin.

M. Credit by Examination is described in the USM Bulletin. If a student documents previous work experience in medical technology or previous knowledge through college level courses, the Program Director in consultation with medical technology faculty may approve a student to sit for challenge examinations in medical technology courses: MTC 101, MTC 110, MTC 202, MTC 203, MTC 309/309L or MTC 504/504L, MTC 306/306L or MTC 506/506L, MTC 302/302L or MTC 502/502L, MTC 315 or MTC 515. The student must register for the challenge examinations as described by the University and pay the fee. The student must make 80% or higher to successfully challenge these courses.

N. Applicants with foreign degrees are processed through the Office of International Admissions who obtain GPA, TOEFL, GRE (where applicable), transcripts, and evaluation of foreign educational credentials. Admission requirements for International Students are listed in the USM Bulletin. Application information is sent to the department and the Program Director transfers courses listed on the evaluation to the course planning sheet. A schedule for obtaining course work prior to the Practicum is then prepared.

O. Regardless of courses taken previously, if English is not the native language of any student, evidence of English proficiency must be provided prior to admission into the Practicum. The MTELP (Michigan Test of English Language Proficiency) requirement is "Proficiency II" and is preferred by the department. Alternately, a TOEFL of 550 may be accepted. In addition, a score of 4 ("functional language skills") must be earned on a fluency test administered by the English Language Institute. This fluency test is specifically designed to determine listening and speaking skills with respect to situations and language expected during the Practicum phase of the program. To take the Oral Proficiency Interview, a student should contact the English Language Institute. A fee is charged for the oral interview.

- P. The official record is maintained in the registrar's office and a student may request a student copy or official copy of their transcripts by submitting a request in writing and paying the appropriate fees. Students with picture identification may access their department records by submitting a request in writing to the Program Director. Records may not be removed from the Medical Technology Department office and must be observed in the department office in the presence of the Program Director or Senior Faculty Member. Student can access their SMART forms readily through SOAR. Health records must be accessed through the USM Clinic.
- Q. If more than two years have lapsed since a junior course has been taken, the student must revalidate the course either by repeating the course or making 80% or higher on a test or tests regarding the material in the course. The student should see the Department Chairperson, the individual instructor, or the medical technology advisor to start the revalidation process.
- R. In MTC courses (including courses in the junior year, Phase I and Phase II), students work with the following hazards:
- patient and prepared specimens that contain live organisms, including bacteria, viruses, fungi and parasites (biohazardous materials)
 - chemicals including gases from volatiles or flammables
 - laboratory equipment/glassware
 - electrical equipment

Working with any of the above agents entails risks. These risks include, but are not limited to, contracting disease, contracting infections, and injury from laboratory equipment. The risk of contracting diseases and/or infections, which could be serious or even fatal, is significantly increased in individuals whose immune system (body defenses) is impaired.

Persons with immune system deficiencies include those individuals who currently are undergoing chemotherapy, taking immunosuppressive drugs (such as corticosteroids), have diabetes, have autoimmune disease (such as lupus erythematosus or multiple sclerosis), and/or positive for HIV. Students who know or suspect they may have an abnormal immune response, should consult a physician as to the advisability of enrolling in the Medical Technology program at the present time.

Any student who elects to continue in the Medical Technology program, after being advised of the hazards, knowingly and consensually assumes all risks.

Students will be advised regarding clinical laboratory safety procedures during MTC 202 or equivalent, during each MTC campus course, and during the Phase II clinical rotation. Each student must agree to abide by safety regulations, instructions and procedures, in order to minimize danger to him-her self and others in the clinical laboratory.

If a student does not have a clear understanding of the safety regulations, instructions and procedures as presented, it is the student's responsibility to ask for clarification.

A current immunization form is required before a student enters the Practicum.

It is highly recommended that the student have medical/hospitalization insurance in force during the Junior year and Phase I and II of the Practicum since health care expenses are solely the responsibility of the student.

A student will be required to report to the University Health Services Center or hospital designated department and complete an incident form when an injury occurs during class hours. This will be done as a precautionary measure and will be strictly adhered to. The student is responsible for cost associated with all medical care.

- S. Granting of the baccalaureate degree and/or certificate is not contingent upon students passing any type of external certification or licensure examination.
- T. The dress code for Practicum students is based upon professional and safety considerations. A uniform is required for Phase I and Phase II.
- U. Students may not have cell phones in lectures or laboratories. Phone should be turned off and stored in

backpacks or in purses, etc. during this time. Phones can only be used during break times. Students violating this policy will be asked to leave class.

Application for Practicum:

You must make application for the Practicum (applications made in Fall semester for January Class and Spring semester for July Class). It is your responsibility to obtain an application from The Medical Technology Office (Room 307, Chain Technology Center) the first of the appropriate semester, complete, and return it by the Departmental deadline. A portion of the application will include review of a Practicum Student Policy Manual, which includes additional policies for the Practicum.

Criteria For Admission To Practicum:

1. Completed application which includes professional liability, hepatitis vaccination, immunization form, etc.
2. Successful completion of all courses in the medical technology curriculum through the junior level. A grade of C or better must have been obtained in lecture and laboratory of each junior-level MTC course.
3. A cumulative and science grade point average (GPA) of at least 2.30. (A list of applicable science courses is available from Departmental Chair).
4. Demonstration of qualities and attitudes which are necessary to develop as a competent professional in the field of medical technology.

*Note: Stipulations applying to MTC undergraduate courses in this document also apply to graduate students.

The Practicum

During the Practicum, students in Medical Technology are required to complete a curriculum of two (2) semesters on campus and 24 weeks at an affiliated hospital. This curriculum consists of: Phase I: On-campus classes and laboratory sessions in the USM student laboratories. These courses in clinical laboratory sciences, taught by clinical laboratory specialists, prepare the student for the clinical rotation. Phase II: Clinical rotation in the laboratory departments of one of our affiliated hospitals. At each hospital, the clinical faculty is directed by a medical technologist who is the Education Coordinator and a pathologist who serves as Clinical Laboratory Education Director.

A student must make specific application for admission to the Practicum. Application is made during the Spring semester for the August class and during the Fall semester for the January class.

II. Admission to the Practicum

A. Criteria for Admission

1. Completed application. The application forms are distributed and completed during the Spring semester for the August class and during the Fall semester for the January class.
2. Successful completion of all courses in the medical technology curriculum through the junior level. A grade of C or better must have been obtained in lecture and laboratory of each junior-level MTC course or acceptable transfer course.
3. A cumulative and science grade point average (GPA) of at least 2.30. A list of applicable science courses is available from Departmental Chairperson.
4. Demonstration of qualities and attitudes which are necessary to develop as a competent professional in the field of medical technology (See Affective Domain Objectives). A student who has not demonstrated such attitudes and qualities in the Junior year may be refused admission or admitted on probation.

B. Application for Admission

Application forms and information will be distributed at a called meeting early in the Fall or Spring semester.

By the designated date, the student must have completed and submitted to the Department:

1. Application for Admission
2. The General Information Sheet.
3. Transcript current through the last complete semester.
4. A current Student Policy Manual with each page signed.

Tentative acceptance may be granted after the Admission Committee vote with final acceptance dependent upon meeting the criteria for admission listed in II.A. Notification letter will be prepared within 14 days after the action of the Committee.

If a student is accepted into the Practicum, he/she must sign the compliance form regarding admission and return it to the Medical Technology Department office within two weeks after notice of admission is received.

Prior to the first day of class a completed Department Physical form must be received by the Department. The physical form will be checked by the Department Chairperson, the original sent to the USM Clinic for filing, and a copy sent to the affiliated hospital at which the student is assigned for Phase II.

C. Admission Procedure

1. Applications are reviewed by the Admissions Committee, composed of the education coordinators from the affiliated hospitals and the USM faculty.
2. The Committee will evaluate applications based on the following criteria:
 - a. GPA: No student with a cumulative or science GPA of less than 2.30 will receive regular admission.
 - b. Performance in junior-level (300) medical technology courses. A student must have completed the junior level MTC courses or their equivalent as determined by the department with a grade of C or better in order to be acceptable for the Practicum.
 - c. Successful completion of all required coursework.
 - d. Demonstrations of qualities and attitudes which are necessary to develop as a competent professional in the field of medical technology (See Affective Domain Objectives). A student who has not demonstrated such attitudes and qualities in the Junior year may be refused admission or admitted on probation.
3. Personal interviews with applicants may be required.

D. Probationary Admission

1. In very rare instances, a student may be allowed to enter the Practicum on probation, for academic reasons.
2. If such an event should occur, the student will have the conditions of the probationary status explained to him before entering the Practicum.
3. The student will sign a form that lists the conditions of the probationary status. These conditions may include non-academic requirements and may involve observational assessments by the faculty.
4. During the probationary period, the student will meet on a regular basis with the faculty to discuss the student's progress.
5. Failure to abide by the conditions of admission will be immediate grounds for dismissal.
6. A student will only be removed from probationary status when the faculty deems that the probationary status is no longer necessary.

E. Appeals

1. A student may appeal actions regarding admission, hospital assignment or dismissal.

2. If a student wishes to appeal any of the items in E.1., he/she must submit in writing the item to be appealed and the reasons, no later than two weeks following the receipt of the letter. This appeal should be addressed to the Chairperson of the Medical Technology Department. The student should also make an appointment to talk with the chairperson regarding the appeal.
3. The chairperson will present the appeal to the Appeals Committee, composed of the education coordinators from the affiliated hospitals, the USM Medical Technology faculty, and one individual not affiliated with the program designated by the Chairperson, at the next monthly meeting. The student shall have a right to present information on his or her behalf at the meeting. The student may have one representative accompany him or her, but the representative may not participate in the proceedings except to consult with and advise the student. The Appeals Committee may request assistance for legal matters from the University Legal Counsel.
4. The Appeals Committee will evaluate the appeal and rule on it. The decision of the Appeals Committee shall be made in writing within 14 days following the meeting.
5. The actions of the Appeals Committee regarding the appeal are final.

F. Hospital Assignment

The Hospital Assignment Committee composed of the education coordinators from the affiliate hospitals and the USM senior medical technology faculty, reserves the right to modify this procedure if the Committee determines the modification is beneficial for the program.

1. Clinical affiliate assignment order is rotational and predetermined.
2. With the exception of MLT to MT fast-track students, MT traditional students are arranged in entering Practicum GPA order from highest to lowest, and the Chairperson automatically assigns the highest GPA to the affiliate in the No. 1 spot, the second highest to the affiliate in the No. 2 spot, etc. up to the maximum numbers listed below or the clinical affiliate's limit request. After the assignments are completed, a list is given to the Hospital Assignment Committee for verification and approval.

The maximum number of students assigned to each clinical affiliate is as follows and a 1:1 ratio is maintained in the clinical affiliates:

Maximum quotas:

FGH = 4 students
 MHG = 4 students (5 in case of emergency)
 SRH = 2 students (4 if needed)
 WMC = 2 students (4 if needed)
 St. D = 2 students
 VA = 2 students
 Total = 16 - 21 students

When the class number is greater than 10, WMC (maximum 4 students) will be activated. When required, St. Dominic and VA-Biloxi are activated. MLT fast-track students are assigned according to the hospital (s) activated for fast-track. (Additional hospital affiliations will be sought if the class size exceeds the capacity of the above affiliated hospitals.)

3. Student preferences are not considered.
4. A hospital may request to take less students than the maximum listed above provided:
 - a. the number of students accepted for Phase I allows
 - b. the request is made prior to student assignments for Phase II
5. A hospital may request to go inactive for six months provided that:
 - a. the number of students accepted for Phase I allows
 - b. the request is made six months prior to the student assignment month so that the program will have six months to activate another hospital if needed

6. Hospital assignments will be made the beginning of the second semester of the Practicum and approved by the Hospital Assignment Committee composed of one Education Coordinator from each hospital and the Senior Medical Technology Department Faculty. Student notification letters, including the Hospital Assignment Acceptance Form, will be prepared within 14 days after the action of the Committee.
7. The Hospital Assignment Acceptance Form must be signed by the student and returned to the department office within two weeks of notification. The student must indicate acceptance of the assignment and agree to abide by the policies and procedures of the hospital. Policies and procedures may include passing pre-rotation drug screen testing, signature on confidentiality statement, passing medical ethics testing, etc.
8. Regulations governing request to trade hospital assignments:
 - a. Students must notify the Chairperson in writing of reasons with signatures of both students who are requesting to trade.
 - b. Request for trade must be submitted prior to the April Education Coordinators meeting for the July hospital class and prior to the October Education Coordinators meeting for the January hospital class.
 - c. If both hospitals to which the students have been assigned agree to allow the trade, the Chairperson will present the trade request to the Hospital Assignment Committee for approval.
 - d. Students requesting trade should have comparable GPAs.
9. In a case where the hospital cannot keep its commitment for student(s) assigned, the student(s) will be notified of the vacant slots and allowed to select among the vacant slots. If more than one student desires the same slot, the student having the highest overall GPA at the beginning of the Practicum Phase I will be given the slot.
10. Appeal of the hospital assignment will be addressed by the Appeals Committee. Actions of the Appeals Committee are final.

G. Retention and Dismissal Policy

A student will be dismissed from Phase I or Phase II under the following circumstances. ANY OF THE FOLLOWING ACTIONS ARE CONSIDERED AS JUST CAUSE FOR IMMEDIATE DISMISSAL:

1. Failure to meet grade expectations as stated in III.D. and IV.E.
2. Excessive or unexcused absences as stated in III.B. and IV.C.
3. Positive drug screen at clinical affiliate as part of Phase II practicum orientation
4. Unauthorized removal, destruction, or theft of any property of the program, USM, clinical affiliates, employees, or patients.
5. The use or unauthorized possession of any intoxicants, illegal drugs or narcotics on the grounds of USM or its clinical affiliates.
6. Unauthorized use, possession, or distribution of firearms, explosives, fireworks or knives on the grounds of USM or its clinical affiliates.
7. Willful submission of false information or alteration of any records or reports.
8. Dishonesty (cheating, forgery, plagiarism, etc.).
9. Violation of HIPPA or patient confidentiality via but not limited to verbal, written, phone, text, email or social network formats. Disclosure of confidential information or discussion of any patient information with unauthorized personnel is prohibited.
10. Negligence or misconduct in the performance of duty.

11. Willful disobedience or insubordination.
12. Abusing a patient, employee or fellow student (including abusive language).
13. Willful violation of laboratory safety or other laboratory policies.
14. Conviction of a felony (either while a student or in the past).
15. Drawing blood or performing procedures without the approval of the teaching technologist.

A student may appeal any dismissal to the Appeals Committee.

H. The procedure for grievances is found in the University Student handbook.

I. Policy for petitioning for financial reimbursement for Practicum students.

The policy applies only to students in the Practicum (MTC 401/401L, 402/402L, 403/403L, 405/405L, 406/406L, 407/407L, 408/408L, 409/409L, 410/410L, 411/411L, 412, 501/501L, 522/522L, 503/503L, 505/505L, 526/526L, 507/507L, 508/508L, 509/509L, 510/510L, 511/511L, 512). It also does not apply to students who voluntarily decide to withdraw from the Practicum, but only to those students who are required by the program to withdraw from the program.

Students required to withdraw from the program have 5 days following the completion of the course (on campus or in the hospital) or dismissal from the program to notify the Bursar in the Business Office to be considered for the refund.

III. Practicum Phase I: USM Campus

A. Class Hours

1. An example schedule will be distributed at the application informational meeting which will list class hours. A final schedule will be provided by the first day of class.

B. Attendance

1. Students are expected to be present each day for all lectures and all laboratory sessions.
2. The program director or Department Chair may approve up to two absences with documentation; however, upon a third absence, the student must appeal to the entire campus faculty to continue in the program. In Phase I, absences by the student may not exceed the instructor's ability to provide make up work in a timely and academically sound manner as designated by the department faculty in collaboration with the instructor(s). If absences exceed the approved limit, the student must reapply and if accepted, repeat the Practicum, as determined by the Education Coordinators' Committee.
3. When a student misses a laboratory session or lecture without prior approval, a call must be made to the department and then a written statement of reason must be turned in to the instructor at the next session following the absence. This statement will become a part of the student's file. If no statement is given or the reason for the absence is not considered a valid one by the instructor and the department chairperson, the absence will be counted as unexcused. Unexcused absences during Phase I will be considered reason for dismissal from the program.
4. All work missed by the student during an absence must be made up by arrangement with the instructor.
5. Three tardies in either lecture or laboratory of a course will constitute an unexcused absence.
6. Additional stipulations regarding attendance may be stated for individual courses (see individual course syllabi)

C. Participation

1. Students will participate in laboratory sessions in a variety of circumstances. In most instances students work individually. In others, pairs or teams of students work cooperatively. In some instances, a team leader or supervisor directs the other students. The purpose of team assignments is to prepare the student for cooperative efforts in the clinical laboratory and to give him/her supervisory experience.
2. The faculty members encourage students to discuss with them any problems that may arise. These discussions will be held in confidence by all faculty members. If needed, the faculty will suggest possible ways a student can improve his study habits. If a student seeks help, the faculty may suggest extra study-aids. Although the faculty members have no desire to interfere in the personal lives of the student, we realize that the faculty-student relationship in this department is drastically different than in the more traditionally academic areas of college life. We are, therefore, willing to assist the student in any reasonable way possible to cope with problems that may arise. In rare instances student counseling by the University Counseling Center may be needed. This counseling will be for the benefit of the student in terms of improvement of student habits, setting priorities and realization of potential. Every reasonably possible effort will be made to help the student develop professionalism and dedication to medical technology as a career.
3. It is our philosophy that we learn best by doing. Performance in the student labs prepares the student for performance in the hospital lab. The more practiced and confident the student becomes during the campus phase, the more efficient the performance should be in the hospital labs. For this reason, performance in the laboratory portion of our courses is equally important as passing tests in the lecture portion. We want to help you achieve competency, so that the hospital phase of your education will be a time for polishing of your techniques and a graduation to the most sophisticated level of laboratory performance.

D. Grades

1. Records will be maintained in the department files.
2. Final grades in MTC courses will be determined by the instructor in charge of each course. The faculty member will determine the weight to be given to each quiz or examination. The instructor will plan quizzes and exams to assess your knowledge of, and competency in, the particular course. The instructor will explain the grading system to be used in the course on the first day of class. A written schedule of lectures/laboratories will be given to each student at that time.

Because we are concerned with performance of tasks as well as demonstration of knowledge, it will be necessary for the instructor to make a judgment of competency of the student to perform each task.

Such intangible qualities as organizational ability, manipulative ability, leadership, initiative, integrity of results, professional judgment, etc. must be factors which the instructor includes in the assessment of competency.

Specific Cognitive, Psychomotor and Affective objectives planned by the instructor must be met by each student.

3. In Practicum Phase I courses, the grading scale is as follows:
 - A = 90-100 percent
 - B = 80-89 percent
 - C = 75-79 percent
 - D = 70-74 percent
 - F = Below 70 percent
4. If the student makes below 75% on either the didactic grade or laboratory grade, he/she must exit the program as soon as the unsatisfactory grade is received. The student may choose to 1) receive "WP" in the courses not completed and cease coming to classes OR 2) with individual course professor's approval change to audit status and continue to attend those classes in which audit approval is received and take "WP" if audit approval is not granted by individual course professor. If the student is allowed to audit a course, the student must meet all requirements of

the course including attendance, assignments, exams, etc., or the student will lose the opportunity to continue attending the course.

5. An affective domain evaluation is performed in each course. The student will receive a composite rating for each characteristic based upon the combined rating of the senior faculty and laboratory instructor(s) (when applicable) in each Phase I course. The student will be counseled and given an opportunity to improve any characteristic identified as unsatisfactory anytime during the course but prior to receiving the final rating. If after documented counseling, the faculty still views the characteristic as unsatisfactory at the end of the course, five points will be deducted from the final course grade for every characteristic deemed unsatisfactory. Items marked with an asterisk if cited after documentation may be grounds for dismissal from the program.

At the end of a course, if an instructor has cited any affective domain characteristic(s) as unsatisfactory, the instructor will report it to the chair. The chair will check the student's file to see whether other instructors have also cited the same characteristic(s). If two different senior faculty from two different courses cite the same characteristic as unsatisfactory, the student will be counseled by the chair and the faculty. Subsequent citations of that characteristic anytime during the remaining time in the Practicum (Phase I or II) will invoke the clause regarding a willful disobedience or insubordination which will result in immediate dismissal from the program.

E. Student Health

1. The Department immunization form is required before a student enters the Practicum (see section II.B).
2. It is highly recommended that the student have medical/hospitalization insurance in force during Phase I and II of the Practicum since health care expenses are solely the responsibility of the student.
3. A student will be required to report to the University Health Services Center and complete an incident form when an injury occurs during class hours. This will be done as a precautionary measure and will be strictly adhered to. The student is responsible for cost associated with all medical care.
4. Any time off for illness will be made up (see section III.B.).

F. Health Statement (Also applicable to Phase II)

In MTC courses (including courses in the junior year, Phase I and Phase II), students work with the following hazards:

- patient and prepared specimens that contain live organisms, including bacteria, viruses, fungi and parasites (biohazardous materials)
- chemicals or gases from volatiles or flammables
- laboratory equipment/glassware
- electrical equipment

Working with any of the above agents entails risks. These risks include, but are not limited to, contracting disease, contracting infections, and injury from laboratory equipment. The risk of contracting diseases and/or infections, which could be serious or even fatal, is significantly increased in individuals whose immune system (body defenses) is impaired.

Persons with immune system deficiencies include those individuals who currently are undergoing chemotherapy, taking immunosuppressive drugs (such as corticosteroids), have diabetes, have autoimmune disease (such as lupus erythematosus or multiple sclerosis), and/or positive for HIV. Students who know or suspect they may have an abnormal immune response, should consult a physician as to the advisability of enrolling in the Medical Technology program at the present time.

Any student who elects to continue in the Medical Technology program, after being advised of the hazards, knowingly and consensually assumes all risks.

Students will be advised regarding clinical laboratory safety procedures during MTC 203, during each MTC campus course, and during the Phase II clinical rotation. Each student must agree to abide by safety regulations, instructions and procedures, in order to minimize danger to him/herself and others in the clinical laboratory.

If a student does not have a clear understanding of the safety regulations, instructions and procedures as presented, it is the student's responsibility to ask for clarification.

IV. Practicum Phase II: Affiliated Hospital Laboratories

- A. If the hospital agrees to provide monies, during the hospital rotation, the student will receive \$200/month as a Medical Technology fellowship from the assigned clinical affiliate. This is intended to help the student with expenses involved in relocating to the hospital area.
- B. Class Hours
1. Class hours scheduling during Phase II will vary among hospitals. Variations will be necessary in order to provide the optimum educational experience in each laboratory section.
 2. The daily routine will vary slightly from one affiliated hospital to another. The majority of the time will be spent on the bench working under the direct supervision of a technologist. This will be supplemented with lectures, special presentations, and general seminar type review sessions which will not infringe upon the necessary laboratory performance time.
- C. Attendance
1. Daily attendance is an absolute requirement. There are no scheduled days off during this Phase except those holidays designated by the hospital at the beginning of Phase II. Absences may be excused only by prior permission of the education coordinator. These absences will be made up at the discretion of the education coordinator. No more than **three** absences will be allowed by the education coordinator. Upon obtaining the **fourth** absence, the student must request permission from the department chairperson for permission to continue in the program. If absences exceed the limit, the student must reapply and if accepted, repeat the Practicum, as determined by the Education Coordinators' Committee.
 2. Absence without permission or more than **3** excused absences not approved by the department chairperson constitutes an automatic dismissal from the program. The student may appeal one dismissal to the Appeals Committee.
 3. Habitual tardiness after a written warning constitute an absence.
 4. All work missed by the student during an absence must be made up by arrangement with the education coordinator.
- D. Student Activities
1. The student will follow the schedule planned by the education coordinator. This schedule will include:
 - a. Class participation.
 - b. Attendance at special lectures and activities arranged by the education coordinator, usually, but not always to occur during regular class time hours.
 - c. Laboratory rotations.
- E. Grades
1. In Phase II courses, 50% of the total grade is didactic and 50% of the total grade is laboratory. Thirty percent of the 50% of the didactic grade is derived from laboratory department material and 20% of the 50% of the didactic grade from class material which is coordinated by the Education Coordinator. The laboratory grade is derived from the laboratory performance and will constitute 50% of the total grade. Forty percent of the laboratory grade is derived from laboratory

performance and 10% from practicals and/or unknowns. The student must make at least an average of 75% on the didactic grade and 75% on the laboratory grade in order to progress. The grading scale is as follows:

A = 90-100 percent

B = 80-89 percent

C = 75-79 percent

F = Below 75 percent. If student makes below 75% on either the didactic grade or laboratory grade, he/she must exit the program as soon as the unsatisfactory grade is received.

2. During Phase II of the Practicum, in order for the MTC Phase II student to obtain a passing grade for each MTC phase II course, two criteria must be met: (1) must earn at least 75% (37.5 points) in the laboratory grade and (2) must earn at least 75% (37.5 points) in didactic grade. For students who meet these criteria, the final course grade will be calculated by averaging the laboratory grade and the didactic grade. However, if a student makes below 75% (37.5 points) in either laboratory grade or didactic grade, the final grade will be failing and the student must report immediately to the USM MTC Program Director for further advisement. If the Phase II clinical student has received documented unsatisfactory ratings on the Final Affective Domain, **five points** will be deducted from the final course grade for each unsatisfactory rating. If the instance arises where the Phase II Clinical students final course grade is less than 75% due to Affective Domain unsatisfactory rating deductions, the student has failed the course and must report immediately to the USM MTC Program Director for further advisement.

During Phase II of the Practicum, if a student makes below an average of 75% on either the didactic grade or the laboratory grade, the student may not continue and must apply for readmission to the Phase II and if accepted, repeat the entire Phase II. The department does not guarantee acceptance of reapplication. If reapplication is accepted, the student will be placed only as hospital slots are available. An available slot will be offered only once per Phase II class. If a slot is offered and declined, the student may not reapply until the next Phase II rotation period.

3. An affective domain evaluation is performed in each course. The student will receive a rating for each characteristic by an individual designated as the Teaching Technologist(s) in each Phase II course. The student will be counseled and given an opportunity to improve any characteristic identified as unsatisfactory anytime during the course but prior to receiving the final rating. If after documented counseling, the teaching technologist(s) still view the characteristic as unsatisfactory at the end of the course, five points will be deducted from the final course grade for every characteristic deemed unsatisfactory. Items marked with an asterisk if cited after documentation may be grounds for dismissal from the program.

At the end of a course, if a teaching technologist has cited any affective domain characteristic(s) as unsatisfactory, the teaching technologist will report it to the education coordinator. The education coordinator will report it to the chair who will check the student's file to see whether other instructors (Phase I or II) have also cited the same characteristic(s). If two different instructors from two different courses cite the same characteristic as unsatisfactory, the student will be counseled by the chair and the faculty. Subsequent citations of that characteristic anytime during the remaining time in the Practicum (Phase I or II) will invoke the clause regarding a willful disobedience or insubordination which may result in immediate dismissal from the program.

F. Working for pay outside of class hours is between the student and the employer and is not considered a part of the program. Students do not work for pay during class hours.

G. Student Health

1. The University Health Services Center is available for students to use while at the hospital since the student is officially enrolled as a USM student during this time.
2. Care at the Hospital and surrounding health care facilities are available to the student; however accessibility is governed by whether the student can demonstrate ability to pay or proof of insurance.
3. It is highly recommended that the student have medical/hospitalization insurance in force during Phase I and II of the Practicum since health care expenses are solely the responsibility of the student.
4. In case of emergencies associated with performance during Practicum hours, the hospital will

provide emergency care; however, the student is responsible for cost associated with this care.

V. Ethics and Student Conduct

- A. The following is the code of ethics of the American Society for Clinical Laboratory Science. It is given here as a goal for the student during the year of Practicum:

Preamble

The code of Ethics of the American Society for Clinical Laboratory Science (ASCLS) sets forth the principles and standards by which clinical laboratory professionals practice their profession.

Duty to the Patient

Clinical laboratory professionals are accountable for the quality and integrity of the laboratory services they provide. This obligation includes maintaining individual competence in judgment and performance and striving to safeguard the patient from incompetent or illegal practice by others.

Clinical laboratory professionals maintain high standards of practice. They exercise sound judgment in establishing, performing and evaluating laboratory testing.

Clinical laboratory professionals maintain strict confidentiality of patient information and test results. They safeguard the dignity and privacy of patients and provide accurate information to other health care professionals about the services they provide.

Duty to Colleague and the Profession

Clinical laboratory professionals uphold and maintain the dignity and respect of our profession and strive to maintain a reputation of honesty, integrity and reliability. They contribute to the advancement of the profession by improving the body of knowledge, adopting scientific advances that benefit the patient, maintaining high standards of practice and education, and seeking fair socioeconomic working conditions for members of the profession.

Clinical laboratory professionals actively strive to establish cooperative and respectful working relationships with other health professionals with the primary purpose of ensuring a high standard of care for the patients they serve.

Duty of Society

As practitioners of an autonomous profession, clinical laboratory professionals have the responsibility to contribute from their sphere of professional competence to the general well being of the community.

Clinical laboratory professionals comply with relevant laws and regulations pertaining to the practice of clinical laboratory science and actively seek, within the dictates of their consciences, to change those which do not meet the high standards of care and practice to which the profession is committed.

Pledge to the Profession

As a clinical laboratory professional, I strive to:

Maintain and promote standards of excellence in performing and advancing the art and science of my profession;

Preserve the dignity and privacy of patients;

Uphold and maintain the dignity and respect of our profession;

Seek to establish cooperative and respectful working relationships with other health professionals;
and

Contribute to the general well being of the community.

I will actively demonstrate my commitment to these responsibilities throughout my professional life.

Honor Code

As a student in a professional program, I will honor myself, my profession and my professional code of ethics by pledging that all my actions will demonstrate my academic honesty. I will never give or receive information in a testing situation, plagiarize material or falsify information. If I have concerns regarding academic honesty in any of my classes, I understand I am to report these concerns to the instructor of the class or the program director. I also understand that ethical professional conduct is my professional responsibility regarding all matters in the program.

VI. Dress Code

The dress code for Practicum students is based upon professional and safety considerations.

1. Uniform requirements for Phase I (Appropriate attire determined by individual affiliates) are:
 - A. Black scrubs any brand or style. (Piping may be white or gold). The Medical Technology program shoulder patch must be worn on the left shoulder (when available). (Uniforms Etc. will have the patch sewed on for you if you like.)
 - B. White or black closed toed and heel, low heel, slip resistant shoes with no limited color (gray, silver) must be worn with the uniform (no cloth or canvas).
 - C. Warm up lab waist cut lab jackets may be worn in lecture.
 - D. Uniform requirements for Phase II will be determined by the individual clinical affiliates.
2. Only black t-shirts can be worn under the uniform.
3. The uniforms should also be wrinkle free and clean.
4. A full-length laboratory coat must be worn in all laboratories.
5. Hair should be neat and clean. **Unnatural colored hair is not allowed.** Hair shoulder length or longer that may interfere with laboratory procedures or pose a safety hazard must be tied back. No hats are allowed.
6. Beards must be trimmed and not of a length to interfere with laboratory procedures or constitute a safety hazard.
7. Fingernails must be clean and trimmed to a length so as not to interfere with laboratory procedures. Fingernails (natural nails) must be clean and trimmed to a length that are less than $\frac{1}{4}$ " (one-fourth inch) long (not extending beyond the tip of the finger) and manicured.
8. Jewelry must be conservative and kept to a minimum. No bulky or dangling jewelry (earrings, neck chains, or bracelets) which may interfere with laboratory procedures or pose a safety hazard is permitted. Any body piercing that may be visible when interacting with patients or peers is prohibited, with the exception of earrings.
9. Excessive make-up or fragrances are not allowed.

Students who do not conform to the dress code will not be permitted to attend class or laboratory sessions.

Faculty members have the right to prohibit on an individual basis any style or article of dress they deem unsafe or unprofessional.

Students are expected to maintain the professional appearance of their uniform to be laundered and pressed.

VII. Laboratory Safety

- A. The student must be ever aware of the potential hazards in the clinical laboratory environment, e.g., infectious agents, caustic and flammable chemicals, radiation, and mechanical and electrical equipment.
- B. The instructor for each MTC course on campus (including junior and Phase I courses) or the technologist-in-charge of each section of the laboratory rotation for Phase II will review safety precautions and procedures

with the student at the beginning of each respective course or rotation.

- C. Each student is responsible for being familiar with the potential hazards and safety procedures, not only of the laboratory in general, but those unique to each laboratory section or activity.
- D. The following are safety regulations and general laboratory policy which apply to the USM campus laboratories:
1. Do not smoke, eat, drink or chew gum in the laboratory at any time. Likewise, do not put fingers, pencils, or other objects in your mouth or around your face or mouth. No food is to be stored in the laboratory refrigerators or freezers. Eating/Drinking is allowed in the tutorial and office areas only. This building is a smoke-free environment.
 2. Use a mechanical pipetting device or bulb for all solutions.
 3. Wear gloves when handling any biological specimen. Gloves should also be worn when handling concentrated chemicals and all chemicals known to be toxic, including mercury, bromine, and cyanide.
 4. Lab Dress:
 - a. Wear a fastened full-length lab coat or appropriate uniform at all times in the laboratory when engaged in laboratory exercises.
 - b. Wear safety glasses whenever handling or preparing caustic chemicals, reagents, and biohazardous materials if aerosols could be formed.
 - c. Hair that may interfere with the performance of laboratory procedures must be tied back while in the laboratory.
 - d. Slip-resistant shoes with closed toes and closed heels must be worn in the laboratory at all times.
 - e. Legs should be covered.
 5. For the following tasks listed are the personal protection device(s) that should routinely be used in our labs:
 - a. General lab tasks - gloves, lab coat/apron
 - b. Phlebotomy - gloves, lab coat
 - c. Processing patient specimens - gloves, lab coat, goggles, masks, and/or bench top hood.
 - d. Microbiology - gloves, lab coat, goggles, benchtop hood, or biological safety cabinet if needed for type culture processing (TB, Fungi, high pathogenic organisms).
 - e. Blood culture, blood tests, and all chemistry classes - gloves, lab coat, goggles and/or hood (if popping tops on specimens or creating aerosols). Goggles or eyeglasses will be worn at all times in clinical chemistry labs.
 - f. Extensive specimen manipulation - gloves unless cuts or hangnails evident then use double gloves, lab coat, goggles, and/or hood if popping specimen tops or creating aerosols.
 6. The following personal protection devices are available in all student labs provided by the department:
 - specimen containers
 - biohazard hoods
 - eyewash stations
 - gloves in appropriate sizes
 - rigid containers for sharps
 - biosafety shields

Student provides: goggles or lab glasses and lab coats
 7. You should routinely remove your lab coat in the following situations:
 - a. To go out of the general medical technology laboratory area.
 - b. To go to the tutorial area (food is stored and eaten here).
 - c. To go to any other floor in the building, when you leave the building to go elsewhere on campus, or when you go home. You may take your lab coats home when they need laundering after they have been autoclaved.

8. **WASH HANDS** with bactericidal soap according to CDC hand hygiene guidelines
 - a. Before leaving lab, even to go to another lab.
 - b. Before going to bathroom.
 - c. Before drawing a patient and after.
 - d. After removing gloves.
9. Gloves should be changed and hands washed according to CDC hand hygiene guidelines
After processing patient specimens.
After a glove breaks.
After one patient has blood drawn and before another is stuck.
10. Use the biological safety cabinet for hazardous specimens and procedures. Handle all flammable solvents and fuming reagents under a fume hood. Store such materials in well ventilated cabinets.
11. Dispose of all specimens, contaminated materials, and broken glassware in the appropriate receptacle. For disposal of environmentally-damaging chemicals, consult an instructor.
 - a. All sharps (needles, lancets, etc.) should be placed in rigid containers designed for this purpose. If you aren't aware of what these look like, please ask.
 - b. Infectious non-sharps should all go in the biohazard bags located in each lab.
 - c. Only paper waste not contaminated with blood should go in the regular trash.
 - d. Glassware is disposed of in rigid containers and labeled as such.
12. Do not abandon specimens or cultures in the laboratory. Each person is responsible for the proper handling; storage and disposal of his/her own specimens.
13. Laboratory bench tops are to be cleaned with 0.5% sodium hypochlorite after each laboratory session by each individual. Leave work areas neat and clean. Put all materials and reagents back in their proper storage place. Place dirty glassware in appropriate containers.
14. Anything spilled or dropped must be cleaned up immediately by the individual involved.
15. Spills in the lab are handled according to type:
 - a. Microbiology spills are decontaminated with 0.5% sodium hypochlorite, put in double bag for autoclaving and disposal.
 - b. Acid/base spills are neutralized properly before cleanup.
 - c. Blood spills are cleaned with fresh 0.5% sodium hypochlorite solution and double bagged as a biohazard.

The materials for cleanups are available in each lab area. The 0.5% sodium hypochlorite solution is equivalent to a 1:10 dilution of commercial bleach. The bleach should be less than 24 hours old.
16. The computer keyboard in the lab should only be used after gloves are removed and hands washed:
17. Specimens obtained from patients either in our labs or from other labs should be either bagged or parafilm (with strips around cap to tighten seal) before being transported. Specimens sitting in racks should be stoppered or parafilm.
18. During phlebotomy procedures, needles are **not** recapped. Needles and caps are disposed of in special "puncture proof" containers.
19. Know the location and proper operation of safety equipment, such as the fire extinguishers, eye wash stations, safety showers, fire blankets, first aid kits, and chemical spill kits. Know the types of fire extinguishers and be able to select the type needed for the types of fires that can occur in the lab. Know the location of Material Safety Data sheets (MSDS) for the hazardous materials found in the laboratory. It is always good practice to read the MSDS sheet before working with any hazardous material.

20. No biological or chemical material or equipment of any kind is to be taken from the laboratory.
21. Do not leave a bunsen burner flame unattended. Turn the burner off as soon as you are finished with it. Do not use any flammable substance near an open flame. Never lean over an open flame.
22. Use padded gloves or hand protectors to handle hot materials or glassware.
23. Plainly label all lab bottles, specimens, etc. When a reagent is no longer in use, it should be returned to storage. Never use a chemical that is not properly labeled. Always recap reagent bottles as soon as use is completed.
24. Never taste any chemical. Avoid smelling chemicals, but if this is necessary use the procedure of fanning the fumes toward the nose.
25. Always add acid to water when performing dilutions. Never add water to acids. Prevent splashing of acids and bases by pouring the solution very slowly down the side of the vessel.
26. Never pour volatile or radioactive solutions down the sink.
27. If water or any other solution is spilled on the floor, it should be immediately wiped up. Serious injury can result from falls on wet floors.
28. Use caution when handling glassware. Broken glass is a frequent cause of lab injury. Immediately discard broken or cracked glassware in the glassware container.
29. Never open a centrifuge during operation. Never attempt to stop a centrifuge rotor by hand.
30. Do not sit on any laboratory benches or sit on a chair with feet propped on a laboratory bench.
31. No radios or music are permitted in the laboratory during scheduled lab sessions.
32. Materials such as coats, hats, books, and so forth that are not needed in the laboratory are to be put in lockers or other appropriate storage areas.
33. Books and notebooks that are needed in the laboratory must be on laboratory benches, not on the floor.
34. Drawers and cupboards are to be open only when something is being put into or taken out of them. At all other times they are to be closed.
35. When chairs are not in use, they are to be pushed under the laboratory bench.
36. Immediately report all laboratory accidents, no matter how minor, to the instructor. The instructor will decide whether an Incident Report should be filed. If a student is injured while in lab, the student will complete an Incident Report and be sent to the USM Clinic. The faculty member will call the Clinic and report the incident and that the student is to report to the Clinic doctor. This is a precautionary measure and will be strictly adhered to. The student has the responsibility of deciding what testing/treatment will be done. The student is responsible for cost associated with all medical care and may assume the cost of a donor classmate testing if the results are desired and the donor classmate agrees to testing. In the case of a body fluid accident, the student will be counseled by the Clinic physician regarding baseline testing for various diseases, whether to take HIV prophylactic drugs, etc. Since response to the drugs is most effective within two (2) hours of the incident, the student must report to the Clinic immediately. If the incident involves the body fluid of another student in the class, that student will also report to the Clinic. The cost of testing and treatment may be as high as \$500 to \$1000; therefore, the department highly recommends medical insurance.
37. Instructors will check to see if safety regulations are understood by students each time a new lab begins. Students will sign that they have reviewed and understand the safety regulations and have received a list of hazardous materials used in the lab.

VIII. Testing of Student Specimens in Student Laboratories and the Clinical Laboratory

If a student is testing his/her own specimen in the student laboratory, he/she should recognize that the reagents which we used are many times out-of date; therefore, no clinical diagnostic significance can be determined from the results. No laboratory testing should be done on students at the clinical affiliates unless the student is in the role of a patient and proper testing orders have been issued. If student specimens are tested in the case of an accident follow-up, the student should give permission in writing prior to the testing.

IX. Hurricane Policy

- Students should keep their contact information, including home and cell phone, updated with the Medical Technology office by checking the information every semester.
- When a "Hurricane Watch" is issued by the National Weather Service, students should be sure that the car has a full tank of gas and prepare to leave the projected impact area. This usually occurs approximately 72 hours prior to landfall.
- When a "Hurricane Warning" is issued by the National Weather Service, students should leave the coast or other impact area. This usually occurs approximately 48 hours prior to landfall. At this point students do not have to get approval from the hospital or the University to leave the area; however, if possible, students should contact the education coordinator at the hospital or the program director at the university to confirm they are leaving the area.
- After the hurricane, campus students should come back to campus when the news media or University phone or web site states that the campus is open. Students from the coast hospitals should contact the campus Medical Technology office or the education coordinator prior to returning to the coast hospital.
- In extreme circumstances, if the hospital cannot continue with students or the program director with the education coordinator determine that the living conditions are such that students can not continue at a hospital, the program director will make every effort to find another hospital in which the student can complete his/her clinical experience. However, if another hospital can not be found, the students may have to wait a semester to complete the clinical experience.

X. Grade Review and Grievance Policy

- A. The University has well-defined grade review and grievance procedures. These are printed in the USM Undergraduate Bulletin and the USM Student Handbook. Information regarding these procedures is available from the department chairperson or the dean's office.
- B. A student who is dissatisfied with his/her grade should first attempt to negotiate a change in the final grade with the instructor responsible for the course. If the decision of the instructor is unacceptable to the student, the student should obtain a University grade review form from the provost office, and provide the information required. The student then proceeds with the steps of the grade review procedure as described in the procedure.
- C. Student grievances generally originate at the department level, and the resolution of the grievance is sought at the department level. If the decision of the department is unacceptable to the student, the student should follow the steps in the University's Grievance Policy.

XI. Affirmative Action / Equal Employment Opportunity Policy

The University of Southern Mississippi offers to all persons equal access to educational, programmatic and employment opportunities without regard to age, sex, sexual orientation, religion, race, color, national origin, Vietnam era veteran status or disability status. These provisions are pursuant to applicable federal and state regulations. Inquiries concerning discrimination should be directed to the following:

**Office of Affirmative Action/Equal Employment Opportunity
The University of Southern Mississippi
118 College Drive #5168
310 McLemore Hall
Hattiesburg, Mississippi 39406-0001**

**Office: (601) 266-6618
Fax and TTY: (601) 266-6344**

Email: rebecca.woodrick@usm.edu

Web Site: www.usm.edu/aa-eeo/

I, _____, have read and understand The University of Southern Mississippi Department of Medical Technology Student Manual, and have verified that I have read each page by initialing each page. I agree to abide by the stipulations set forth in the Student Manual while I am a student in the USM Medical Technology Program. I also certify that I have received a copy of this student manual to keep.

Signature

Date

Please sign here to indicate that you have read and understood the program's essential functions (I.J.) and believe that you can meet them.

Student

Date

STATEMENT OF MEDICAL INSURANCE COVERAGE

During Phase I and II, each student is highly encouraged to have medical insurance coverage since health care expenses are solely the responsibility of the student. See Student Health Section III. E. and IV.G. of the Student Policy Manual.

One of the possible situations that you might encounter as a student in Medical Technology is a blood injury such as a needle stick. The estimated cost of a needle stick injury is as follows.

HIV, Hepatitis A, B, C and Liver tests at initially, at 1 month and at 6 months: \$1,050

HIV, prophylactic drugs: \$800/week for 1 month = \$3,200

Emergency room: \$400

Physician Fees: \$200

Total estimated cost for one needle stick injury is \$4,850

You should check your medical insurance to be sure it will cover laboratory testing, drugs, emergency room fee and physician fee in case of blood accident.

I understand that it is highly recommended that I have medical/hospitalization insurance in force during Phase I (USM campus phase) and Phase II (hospital phase of the senior year and that health care expenses are solely my responsibility.

Student

Date

STATEMENT OF PROFESSIONAL LIABILITY INSURANCE COVERAGE

During Phase I and II, the student is required to have professional liability insurance coverage. Therefore, concurrent with application to the senior class the student must certify that he/she will have professional liability insurance in force during Phase I and Phase II. Documentation of professional liability insurance coverage (including dates of the policy) must be submitted to the Chair by the first day of class in Phase I. Should the renewal date occur within the period the student is enrolled in Phase I or II, the student must submit documentation that the policy has been renewed to the Chair.

The student may obtain coverage through any agency that provides coverage. Brochures regarding the ASCLS policy and the McInnis Associates policy are available in the Department Office.

I understand that I must have professional liability insurance in force during Phase I (USM campus phase) and Phase II (hospital internship phase) of the senior year before I will be permitted to enter Phase I and Phase I and on renewal dates as applicable.

The University offers McInnis Professional Liability Insurance for \$10.00 per semester. If you would like to have this insurance, please check below and we will have your Student Account billed. This provides documentation.

_____ Please bill my account for Professional Liability Insurance.

Student

Date

I understand and agree that the Hospital Acceptance Form is a contract that I accept my hospital assignment and that I agree to abide by the policies and procedures of The University of Southern Mississippi, USM Department of Medical Technology and the clinical affiliate/hospital assigned. Policies and procedures may include passing pre rotation drug screen testing, signature on confidentiality statement, passing medical ethics testing, etc.

Student

Date