



**Diagnostic Medical Sonography Program  
Portfolio of Clinical Experience  
2022-2023**

# **NOVICE**

**MIDS 151, MIDS 181, MIDS 231**

**&**

**MIDS 281 (ADV. BEGINNER)**

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Student Name

If found, please call: **250-370-3161**

**My HSPnet # :** \_\_\_\_\_

What if I cannot log into my Island Health Windows account?

Call the Service Desk (local 18777; 250.370.8777; toll-free 877.563.3152) and have your HSPnet number handy. They will give you a service ticket number. Please record your service ticket number for future reference.

**MIDS 151**

Clinical Site: \_\_\_\_\_ Clinical Liaison Name: \_\_\_\_\_

**MIDS 181**

Clinical Site: \_\_\_\_\_ Clinical Liaison Name: \_\_\_\_\_

Clinical Site: \_\_\_\_\_

Clinical Site: \_\_\_\_\_

**MIDS 231**

Clinical Site: \_\_\_\_\_ Clinical Liaison Name: \_\_\_\_\_

Clinical Site: \_\_\_\_\_

Clinical Site: \_\_\_\_\_

**MIDS 281**

Clinical Site: \_\_\_\_\_ Clinical Liaison Name: \_\_\_\_\_

Clinical Site: \_\_\_\_\_

Clinical Site: \_\_\_\_\_

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## Student Acknowledgment

*This form must be signed and submitted to the D2L Dropbox before entering patient care or procedure areas.*

By signing below, I verify that:

- I understand that my *Portfolio of Clinical Experience and Competence* must be adequately completed in order to meet the goals and criteria established for the clinical skills-based courses, *MIDS 151, MIDS 181, MIDS 231 and MIDS 281*. Failure to adequately complete my portfolio may result in the ineligibility to complete the Camosun Diagnostic Medical Sonography Program, and thus ineligibility to write the Sonography Canada certification examination.
- I have read and agree to abide by the guidelines and expectations described in the course outline and course content posted to D2L.
- I have read and agree to abide by my placement site policies (for the institution listed on the front cover of this portfolio).
- I understand that failure to abide by any aspect of the school policies and placement site policies may result in non-completion of the program.

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Student Signature

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Date Signed

## Suggested Weekly Goals: MIDS 151

Week	Activities/Goals
0-1	<ul style="list-style-type: none"> <li>• Attend any orientation activities scheduled on D2L</li> <li>• Receive your proximity card, photo ID, Pocketbook and Portfolio</li> <li>• Learn the basic workflow of the department, participate in a variety of procedures, and aim to perform your first unassisted procedure under direct supervision</li> <li>• Complete orientation worksheet and <b>submit to D2L</b> by due date</li> </ul>
2-4	<ul style="list-style-type: none"> <li>• Technologist Feedback forms are due in week 2 and 4. <b>Submit these forms to D2L</b></li> <li>• Pocketbook Reflections are due in week 2 and 4. <b>Submit these forms to D2L</b></li> <li>• Continue to practice key procedures and attempt as many unassisted as possible</li> <li>• Ensure by now you have been meeting with your Clinical Liaison</li> </ul>
5-10	<ul style="list-style-type: none"> <li>• Technologist Feedback forms are due in weeks 6, 8 and 10. <b>Submit these forms to D2L</b></li> <li>• Pocketbook Reflections are due in weeks 6, 8 and 10. <b>Submit these forms to D2L</b></li> <li>• Formative Evaluations will be completed by the Clinical Liaison in weeks 5 and 10. <b>Submit these forms to D2L</b></li> <li>• Continue to practice key procedures and attempt as many unassisted as possible</li> <li>• Continue to meet with your Clinical Liaison on a regular basis and for image critiques as needed</li> </ul>
11-14	<ul style="list-style-type: none"> <li>• Technologist Feedback forms are due in weeks 12 and 14. <b>Submit these forms to D2L</b></li> <li>• Pocketbook Reflections are due in weeks 12 and 14. <b>Submit these forms to D2L</b></li> <li>• Formative Evaluations will be completed by the Clinical Liaison in week 13. <b>Submit these forms to D2L</b></li> <li>• Continue to practice key procedures and attempt as many unassisted as possible</li> <li>• Continue to meet with your Clinical Liaison on a regular basis and for image critiques as needed</li> <li>• <b>Submit image reviews as outlined on D2L</b></li> <li>• <b>All image reviews and competency assessments must be completed within this timeframe</b></li> </ul>
15-16	<ul style="list-style-type: none"> <li>• Complete remedial requirements as necessary</li> <li>• Summative Evaluation will be completed by Clinical Liaison</li> </ul>

## Suggested Weekly Goals: MIDS 181 & 231

Week	Activities/Goals
0-3	<ul style="list-style-type: none"> <li>• Receive your Pocketbook</li> <li>• Attend Skills Refresher Labs in the Teaching Clinic</li> </ul>
4	<ul style="list-style-type: none"> <li>• Attend any orientation activities scheduled on D2L</li> <li>• Learn the basic workflow of the department, participate in a variety of procedures, and aim to perform your first unassisted procedure under direct supervision</li> <li>• <b>Complete Orientation Quiz #1 on D2L</b></li> </ul>
5&6	<ul style="list-style-type: none"> <li>• Technologist Feedback is due in week 5. <b>Submit this form to D2L</b></li> <li>• Pocketbook Reflection is due in week 5. <b>Submit this form to D2L</b></li> <li>• Formative Evaluation will be completed by the Clinical Liaison in week 6. <b>Submit this form to D2L</b></li> <li>• Continue to practice key procedures and attempt as many unassisted cases as possible</li> <li>• Continue to meet with your Clinical Liaison on a regular basis for image critiques as needed</li> </ul>
7	<ul style="list-style-type: none"> <li>• Attend any orientation activities scheduled on D2L</li> <li>• Learn the basic workflow of the department, participate in a variety of procedures, and aim to perform your first unassisted procedure under direct supervision</li> <li>• <b>Complete Orientation Quiz #2 on D2L</b></li> <li>• Technologist Feedback is due in week 7. <b>Submit this form to D2L</b></li> <li>• Pocketbook Reflection is due in week 7. <b>Submit this form to D2L</b></li> </ul>
8&9	<ul style="list-style-type: none"> <li>• Technologist Feedback is due in week 9. <b>Submit this form to D2L</b></li> <li>• Pocketbook Reflection is due in week 9. <b>Submit this form to D2L</b></li> <li>• Formative Evaluation will be completed by the Clinical Liaison in week 9. <b>Submit this form to D2L</b></li> <li>• Continue to practice key procedures and attempt as many unassisted cases as possible</li> <li>• Continue to meet with your Clinical Liaison on a regular basis for image critiques as needed</li> </ul>
10-12	<ul style="list-style-type: none"> <li>• Attend any orientation activities scheduled on D2L</li> <li>• Learn the basic workflow of the department, participate in a variety of procedures, and aim to perform your first unassisted procedure under direct supervision</li> <li>• <b>Complete Orientation Quiz #3 on D2L in week 10 (if applicable)</b></li> <li>• Technologist Feedback form is due in week 11. <b>Submit this form to D2L</b></li> <li>• Pocketbook Reflection is due in week 11. <b>Submit this form to D2L</b></li> <li>• Continue to practice key procedures and attempt as many unassisted cases as possible</li> <li>• Continue to meet with your Clinical Liaison on a regular basis for image critiques as needed</li> </ul>
13-14	<ul style="list-style-type: none"> <li>• Technologist Feedback form is due in week 13. <b>Submit this form to D2L</b></li> <li>• Pocketbook Reflection is due in week 13. <b>Submit this form to D2L</b></li> <li>• Formative Evaluation will be completed by the Clinical Liaison in week 13. <b>Submit this form to D2L</b></li> <li>• Continue to practice key procedures and attempt as many unassisted cases as possible</li> <li>• Continue to meet with your Clinical Liaison on a regular basis for image critiques as needed</li> <li>• <b>Image Reviews are due at the end of week 13</b></li> <li>• <b>All competency assessments must be completed within this timeframe</b></li> </ul>
15-16	<ul style="list-style-type: none"> <li>• Complete remedial requirements as necessary</li> <li>• Summative Evaluation will be completed by Clinical Liaison</li> </ul>

Note: the schedule and due dates in MIDS 231 are subject to change based on scheduling of the academic term and availability of clinical rotations.

## Suggested Weekly Goals: MIDS 281

Week	Activities/Goals
0-1	<ul style="list-style-type: none"> <li>Attend any orientation activities scheduled on D2L</li> <li>Receive your proximity card, photo ID, Pocketbook and Portfolio</li> <li>Learn the basic workflow of the department, participate in a variety of procedures, and aim to perform your first unassisted procedure under direct supervision</li> <li>Complete orientation worksheet and <b>submit to D2L</b> by due date</li> </ul>
2-4	<ul style="list-style-type: none"> <li>Technologist Feedback forms are due in week 2 and 4. <b>Submit these forms to D2L</b></li> <li>Pocketbook Reflections are due in week 2 and 4. <b>Submit these forms to D2L</b></li> <li>Continue to practice key procedures and attempt as many unassisted as possible</li> <li>Ensure by now you have been meeting with your Clinical Liaison</li> </ul>
5-10	<ul style="list-style-type: none"> <li>Technologist Feedback forms are due in weeks 6, 8 and 10. <b>Submit these forms to D2L</b></li> <li>Pocketbook Reflections are due in weeks 6, 8 and 10. <b>Submit these forms to D2L</b></li> <li>Formative Evaluations will be completed by the Clinical Liaison in weeks 5 and 10. <b>Submit these forms to D2L</b></li> <li>Continue to practice key procedures and attempt as many unassisted as possible</li> <li>Continue to meet with your Clinical Liaison on a regular basis and for image critiques as needed</li> </ul>
11-14	<ul style="list-style-type: none"> <li>Technologist Feedback forms are due in weeks 12 and 14. <b>Submit these forms to D2L</b></li> <li>Pocketbook Reflections are due in weeks 12 and 14. <b>Submit these forms to D2L</b></li> <li>Formative Evaluations will be completed by the Clinical Liaison in week 13. <b>Submit these forms to D2L</b></li> <li>Continue to practice key procedures and attempt as many unassisted as possible</li> <li>Continue to meet with your Clinical Liaison on a regular basis and for image critiques as needed</li> <li><b>Submit image reviews as outlined on D2L</b></li> <li><b>All image reviews and competency assessments must be completed within this timeframe</b></li> </ul>
15-16	<ul style="list-style-type: none"> <li>Complete remedial requirements as necessary</li> <li>Summative Evaluation will be completed by Clinical Liaison</li> </ul>

Note: the schedule and due dates in MIDS 281 are subject to change based on scheduling of the academic term and availability of clinical rotations.

## Portfolio Requirements Checklist

Anatomical Part  ✓required *optional	Imaging Method	Unassisted			Date Clinical Skill Demonstrated	Clinical Liaison Initials
		Lab Simulation	Human Simulation	Clinical Skills Lab		
<b>MIDS 151</b>		<b>ABDOMEN</b>				
Left Liver	✓	-				
Right Liver	✓	-				
Pancreas	✓	-				
CBD & GB	✓	-				
RT Kidney	✓	-				
LT Kidney	✓	-				
Spleen	✓	-				
Aorta + Iliac Arteries	✓	-				
IVC	✓	-				
<b>MIDS 151</b>		<b>TA PELVIS</b>				
Bladder	✓	TA				
Prostate w/ Measurement	✓	TA				



Uterus, Endo., Cervix	✓	TA					
Ovaries + Adnexa	✓	TA					

<b>MIDS 151</b>		<b>EV PELVIS</b>					
Uterus, Endo., Cervix	✓	EV					
Ovaries + Adnexa	✓	EV					
<b>MIDS 151</b>		<b>SCROTUM</b>					
Left Testicle, Epi	✓	TA					
Right Testicle, Epi	✓	TA					
<b>MIDS 151</b>		<b>1<sup>st</sup> TRIMESTER OBSTETRICAL</b>					
1 <sup>st</sup> Trimester M-Mode HR	✓	TA or EV					
1 <sup>st</sup> Trimester MSD + YS	✓	TA					
1 <sup>st</sup> Trimester CRL (Fetal Pole)	✓	TA					
1 <sup>st</sup> Trimester Uterus + Cervix	✓	TA					
1 <sup>st</sup> Trimester Ovaries + Adnexa	✓	TA					
1 <sup>st</sup> Trimester MSD + YS	✓	EV					
1 <sup>st</sup> Trimester CRL (Fetal Pole)	✓	EV					
1 <sup>st</sup> Trimester Uterus + Cervix	✓	EV					
1 <sup>st</sup> Trimester Ovaries + Adnexa	✓	EV					
1 <sup>st</sup> Trimester Limb Development	✓	TA or EV					

MIDS 181		2 <sup>nd</sup> TRIMESTER OBSTETRICAL					
2 <sup>nd</sup> Trimester Maternal Cervix	✓	TA or EV					
2 <sup>nd</sup> Trimester Ovaries + Adnexa	✓	TA					
2 <sup>nd</sup> Trimester FHR	✓	TA					
2 <sup>nd</sup> Trimester Fetal Lie	✓	TA					
2 <sup>nd</sup> Trimester Placenta + Placenta Location + CI	✓	TA					
2 <sup>nd</sup> Trimester BPD + HC	✓	TA					
2 <sup>nd</sup> Trimester AC + FL	✓	TA					
2 <sup>nd</sup> Trimester Stomach/Bladder/CI	✓	TA					
2 <sup>nd</sup> Trimester Kidneys + Renal Pelvis	✓	TA					
2 <sup>nd</sup> Trimester Legs + Feet	✓	TA					
2 <sup>nd</sup> Arms + Hands	✓	TA					
2 <sup>nd</sup> Trimester Fetal Spine	✓	TA					
2 <sup>nd</sup> Trimester Profile + NB	✓	TA					
2 <sup>nd</sup> Trimester Orbits/Face/NL	✓	TA					
2 <sup>nd</sup> Trimester CP/LV/CSP	✓	TA					
2 <sup>nd</sup> Trimester Cere/CM/NF	✓	TA					
2 <sup>nd</sup> Trimester 4Ch/IVS/3VV	✓	TA					
2 <sup>nd</sup> Trimester RVOT/LVOT	✓	TA					
2 <sup>nd</sup> Trimester AA/Bicaval	✓	TA					

MIDS 181		2 <sup>nd</sup> TRIMESTER OBSTETRICAL					
3 <sup>rd</sup> Trimester Maternal Cervix	✓	TA or EV					
3 <sup>rd</sup> Trimester FHR + 3 Heart Views	✓	TA					
3 <sup>rd</sup> Trimester Fetal Lie	✓	TA					
3 <sup>rd</sup> Trimester Placenta	✓	TA					
3 <sup>rd</sup> Trimester BPD + HC	✓	TA					
3 <sup>rd</sup> Trimester AC + FL	✓	TA					
3 <sup>rd</sup> Trimester Cord Doppler	✓	TA					
3 <sup>rd</sup> Trimester DVP/AFI	✓	TA					
MIDS 181		CARDIAC					
Abdominal Situs & Cardiac Position	✓	SC					
Chest and Thorax (adjacent, extra-cardiac)	✓	TTE					
Coronary Vessels	*	TTE					
Hepatic Veins	✓	SC					
Outflow Tracts	✓	TTE					
Pulmonary Veins	✓	TTE					
Wall layers & wall segments	✓	TTE					
Aortic Arch and branches	✓	TTE					
Ascending, Descending & aortic root	✓	TTE					
Left & Right atria and left atrial appendage	✓	TTE					
Pulmonary artery and bifurcation	✓	TTE					

Atrial and Ventricular Septa	✓	TTE					
Aortic Valve	✓	TTE					
Mitral Valve & annulus	✓	TTE					
Pulmonic Valve	✓	TTE					
Tricuspid Valve & annulus	✓	TTE					
Right Ventricle	✓	TTE					
Left Ventricle	✓	TTE					
Inferior Vena Cava	✓	SC + TTE					
<b>MIDS 231</b>		<b>SUPERFICIAL STRUCTURES</b>					
Lymph Node (Neck)	✓	-					
Lymph Node (Groin)	✓	-					
Popliteal Fossa	✓	-					
Left Thyroid	✓						
Right Thyroid	✓	-					
<b>MIDS 231</b>		<b>VASCULAR</b>					
Common Carotid Artery	✓	-					
Internal Carotid Artery	✓	-					
External Carotid Artery	✓	-					
Vertebral Artery	✓	-					
Subclavian Artery	✓	-					
Brachiocephalic Artery	✓	-					
Jugular Vein	✓	-					
Innominate Vein	✓	-					
Subclavian Vein	✓	-					
Axillary Vein	✓	-					
Brachial Vein	✓	-					

Basilic Vein	✓	-					
Cephalic Vein	✓	-					
Forearm Veins	✓	-					
Iliac Vein	✓	-					
Common Femoral Vein	✓	-					
Femoral Vein	✓	-					
Popliteal Vein	✓	-					
GSV/CFV Junction	✓	-					
SSV/Pop V. Junction	✓	-					
Calf Veins	✓	-					
Stent	✓	-					
Aorta	✓	-					
Hepatic Artery	✓	-					
Superior Mesenteric Artery	✓	-					
Renal Artery	✓	-					
Renal Veins	✓	-					
Hepatic Veins	✓	-					
Portal Veins	✓	-					
Splenic Vein	✓	-					
Inferior Vena Cava	✓	-					
Brachiocephalic Artery	✓	-					
Subclavian Artery	✓	-					
Axillary Artery	✓	-					
Brachial Artery	✓	-					
Forearm Arteries	✓	-					
Iliac Artery	✓	-					
Common Femoral Artery	✓	-					
Femoral Artery	✓	-					
Popliteal Artery	✓	-					
Calf Arteries	✓	-					
<b>MIDS 231</b>				<b>CARDIAC</b>			
2D Measurement of Left Ventricle PLAX (IVSd, LVIDd, PWD, LVIDs)	✓	-					
2D LA Measurement – PLAX	✓	-					
2D Measurement of Aortic Root – PLAX	✓	-					
2D Measurement of Ascending Aorta – High PLAX	✓	-					

2D Measurement of the Left Ventricular Outflow Tract – Zoomed PLAX	✓	-					
2D Measurement of the Right Ventricular Outflow Tract – PLAX RVOT or PSAX Views	✓	-					
2D Measurement of the Inferior Vena Cava (Subcostal short axis)	✓	-					
M-Mode of the Aortic Valve	✓	-					
M-Mode of the Mitral Valve	✓	-					
RV Function – Tricuspid Annular Plane Systolic Excursion – AP 4 M-Mode	✓	-					
2D Measurement of the Right Ventricle AP4 (RVIDd)	✓	-					
LV Simpson’s Bi-plane Ejection Fraction – AP4, AP2	✓	-					
2D LA Volume Measurement – AP4, AP2	✓	-					
Colour Doppler of the RVOT – PLAX or PSAX	✓	-					
Colour Doppler of the LVOT – AP5 or AP3	✓	-					
Colour Doppler of the Right Superior Pulmonary Vein – AP4	✓	-					
Colour Doppler of the Pulmonic Valve – PSAX or PLAX RVOT	✓	-					
Colour Doppler of the Left Atrium and Mitral Valve – PLAX or AP4 or AP2 or AP3	✓	-					
Colour Doppler of the Aortic Valve – PLAX or PSAX or AP5 or AP3	✓	-					
Colour Doppler of the Hepatic Vein and Inferior Vena Cava – Subcostal short axis	✓	-					
Colour Doppler of the Ascending Aorta – SSN View	✓	-					

Colour Doppler of the Descending Aorta – SSN View	✓	-					
<b>MIDS 281</b>		<b>MUSCULOSKELETAL</b>					
Biceps Tendon	✓	-					
Subscapularis Tendon	✓	-					
Supraspinatus Tendon	✓	-					
Infraspinatus Tendon	✓	-					

<b>MIDS 281</b>		<b>CARDIAC</b>					
PW of RVOT & CW of PV with measurements	✓						
PW & CW of TV with measurements	✓						
TDI of TV Lateral & measurement	✓						
PW & CW of MV with measurements	✓						
TDI of MV Sept & Lat with measurements	✓						
PW of Pulmonary vein & measurement	✓						
PW of LVOT, CW of AV with measurements	✓						
PW of Hepatic vein & measurement	✓						
CW of Ascending AO & measurement	✓						
PW & CW of Descending AO with measurements	✓						

*EV-Endovaginal SC-Subcostal TA- Transabdominal TTE-Transthoracic Echo*



## Oral Critiques and Image Reviews

The student is responsible to practice image analysis before presenting cases to the Clinical Liaison. Inadequate analysis according to the criteria below may result in the need to repeat this exercise or additional remediation, at the discretion of the Clinical Liaison. This will be noted in the formative evaluation.

### Oral Critique

For each case presented for inclusion in the Clinical Portfolio, the student must be able to:

1. State the **requested procedure** and describe the **reason** for doing it. This may be a blend based on the exams used to form the full representative exam for critique and analysis.
2. Name the **images** according to the imaging protocol of the clinical site based on the patient's history.
  - a. *Note: the student is responsible to learn site-specific annotation. These may differ from those taught on campus.*
3. Using correct scientific terminology, for each image:
  - a. Name the **anatomical part** and describe how the image was obtained.
  - b. Assess the **Frequency, Gain, Focus, Depth and Required Structures** seen on the image:
    - i. Describe what the frequency, gain, focus, depth and required structures should be for this body part.
    - ii. Has that been achieved on this image series? If not, elaborate why not.
    - iii. Describe any corrective actions.
  - c. Assess the **annotations** used on the image:
    - i. Describe what annotations you should see.
    - ii. Has that been achieved on this image? If not, elaborate why not.
    - iii. Describe any corrective actions.
  - d. Assess the accuracy of the ultrasound **imaging**:
    - i. Describe how the structures should look on this image.
    - ii. Describe, and prove, any errors relative to these terms, where applicable:
      1. Measurements/Biometry
      2. Colour Doppler
      3. Pulsed Wave Doppler
      4. M-Mode
    - iii. If you needed to, prove how you differentiated similar looking anatomy (eg. Left lobe of the liver from right lobe, common hepatic duct from hepatic artery).
    - iv. Describe any corrective actions.
  - e. Determine an overall impression of the **image quality**:
    - i. Is the image too dark or too bright in any areas?
    - ii. Does the image demonstrate proper depth and focus?
    - iii. To improve, does the image necessitate a change in technique?
  - f. Describe any **pathologies** seen.
    - i. Describe any possible corrective actions.

## CLINICAL PORTFOLIO – NOVICE

### Image Review

For each case presented for inclusion in the Clinical Portfolio, the Clinical Liaison will:

1. Accept or reject the case based on the criteria for acceptability as seen in the table below. **Critical Criteria\*** must be “fully demonstrated” for inclusion into the portfolio. All other criteria must be at least “minimally demonstrated” for consideration, and may be accepted depending on the clinical circumstances.
  - a. Each missed criteria equates to 0.5% of a mark out of a total of 3 marks
  - b. Each missed **Critical Criteria** results in an automatic reject and requires a re-do
2. Ensure that when there is a discrepancy between the student’s judgement and the Clinical Liaison’s judgement, the student understands why the case is rejected.
3. Keep a record indicating the reason why the image was rejected (for example, anatomy was “not demonstrated”).

### Criteria for Acceptability for Image Audits

	Image sub-optimal, not diagnostic (not usually sent to PACS)	Image sub-optimal, but diagnostic		Image optimal
Rating of Criteria	Not Demonstrated	Minimally Demonstrated	Mostly Demonstrated	Fully Demonstrated
Criteria	Reject	May Accept, with rationale	May Accept, with rationale	Accept
<b>Required Structures*</b>	Structures imaged should be centred and zoom should be utilized as appropriate.			
<b>Annotation*</b>	Site-specific annotation must be present as required. This includes the annotation or user initials of “USS” to indicate that the student took that image.			
<b>Measurements*</b>	Are measurements accurate, with proper caliper placements?			
Frequency	Correct frequency selected. Should be highest possible frequency			
Gain, Focus, Depth	Gain should be optimal for part being imaged, focus should be at or slightly below part (when applicable) and depth should not be excessive or too shallow.			
Pathology	Image is of diagnostic quality; any pathology, such as a cyst, or mass seen in its entirety and study expanded as required—ie) additional images utilized to document pathologies or free fluid			
Images in PACS	Displayed in the correct order as per site protocol			
Image Quantity	Enough images of each anatomical part are included to make an accurate assessment. Excessive imaging is not present.			
Colour Doppler	Is colour gain appropriate, without evidence of bleeding or aliasing?			
Pulsed Wave Doppler	Waveforms are free of excessive noise, with proper caliper placement and sweep speed			
M-mode	Appropriate sweep speed, caliper placement and Heart Rate Assessment			
Continuous Wave Doppler	Waveforms are free of excessive noise, with proper caliper placement and sweep speed			
Tissue Doppler Assessment	Waveforms are free of excessive noise, with proper caliper placement and sweep speed			

# Record of Cases for Critique & Review

**CLINICAL PORTFOLIO – NOVICE**

<i>Abdomen Critique &amp; Imaging Review</i>			MIDS 151			
Anatomical Part		Imaging Method	Image Numbers	VIHA Accession	Date of Examination	Passed <i>(CL Initial)</i>
Liver (Lt)	✓	TA				
Liver (Rt)	✓	TA				
Pancreas	✓	TA				
GB + CHD	✓	TA				
Right Kidney	✓	TA				
Left Kidney	✓	TA				
Spleen	✓	TA				
Aorta	✓	TA				
IVC	✓	TA				

**CLINICAL PORTFOLIO – NOVICE**

<i>TA Pelvic Critique &amp; Imaging Review</i>			MIDS 151			
Anatomical Part		Imaging Method	Image Numbers	VIHA Accession	Date of Examination	Passed <i>(CL Initial)</i>
Bladder	✓	TA				
Prostate w/ Volume	✓	TA				
Uterus, Endo., Cervix	✓	TA				
Ovaries + Adnexa	✓	TA				

**CLINICAL PORTFOLIO – NOVICE**

<i>EV Pelvic Critique &amp; Imaging Review</i>			MIDS 151			
Anatomical Part		Imaging Method	Image Numbers	VIHA Accession	Date of Examination	Passed <i>(CL Initial)</i>
Uterus, Endo., Cervix	✓	EV				
Ovaries + Adnexa	✓	EV				

**CLINICAL PORTFOLIO – NOVICE**

<i>Scrotal Critique &amp; Imaging Review</i>			MIDS 151			
Anatomical Part		Imaging Method	Image Numbers	VIHA Accession	Date of Examination	Passed <i>(CL Initial)</i>
Rt Teste, Epididymis	✓	-				
Lt Teste, Epididymis	✓	-				

**CLINICAL PORTFOLIO – NOVICE**

<b>Anatomical Part</b>		<b>Imaging Method</b>	<b>Image Numbers</b>	<b>VIHA Accession</b>	<b>Date of Examination</b>	<b>Passed (CL Initial)</b>
<i>TA Obstetrical 1<sup>st</sup> Trimester Critique &amp; Imaging Review</i>				<b>MIDS 151</b>		
FHR	✓	TA or EV				
MSD + YS	✓	TA				
CRL, Fetal Pole	✓	TA				
Uterus + Cervix	✓	TA				
Ovaries + Adnexa	✓	TA				
Limb Development	✓	TA or EV				



**CLINICAL PORTFOLIO – NOVICE**

<i><b>EV Obstetrical 1<sup>st</sup> Trimester Critique &amp; Imaging Review</b></i>			<b>MIDS 151</b>			
<b>Anatomical Part</b>		<b>Imaging Method</b>	<b>Image Numbers</b>	<b>VIHA Accession</b>	<b>Date of Examination</b>	<b>Passed (CL Initial)</b>
MSD + YS	✓	EV				
CRL, Fetal Pole	✓	EV				
Uterus + Cervix	✓	EV				
Ovaries + Adnexa	✓	EV				

**CLINICAL PORTFOLIO – NOVICE**

<i><b>Obstetrical 2<sup>nd</sup> Trimester Critique &amp; Imaging Review</b></i>			<b>MIDS 181</b>			
<b>Anatomical Part</b>		<b>Imaging Method</b>	<b>Image Numbers</b>	<b>VIHA Accession</b>	<b>Date of Examination</b>	<b>Passed (CL Initial)</b>
Maternal Cervix	✓	TA or EV				
Ovaries + Adnexa	✓	TA				
FHR	✓	TA				
Fetal Lie	✓	TA				
Placenta Location+ Pla. CI	✓	TA				
BPD+HC	✓	TA				
AC+FL	✓	TA				
Stomach/Bladder/CI	✓	TA				
Kidneys + Renal Pelvis	✓	TA				
Legs + Feet	✓	TA				
Arms + Hands	✓	TA				
Fetal Spine	✓	TA				
Profile + Nasal Bone	✓	TA				
Orbits/Face/Nose + Lips	✓	TA				

**CLINICAL PORTFOLIO – NOVICE**

<i>Obstetrical 2<sup>nd</sup> Trimester Critique &amp; Imaging Review</i>			MIDS 181			
Anatomical Part		Imaging Method	Image Numbers	VIHA Accession	Date of Examination	Passed (CL Initial)
CP/LV/CSP	✓	TA				
Cere/CM/NF	✓	TA				
4Ch/IVS/3VV	✓	TA				
RVOT/LVOT	✓	TA				
AA/Bicaval	✓	TA				

**CLINICAL PORTFOLIO – NOVICE**

<i>Obstetrical 3<sup>rd</sup> Trimester Critique &amp; Imaging Review</i>			MIDS 181			
Anatomical Part		Imaging Method	Image Numbers	VIHA Accession	Date of Examination	Passed <i>(CL Initial)</i>
Maternal Cervix	✓	TA or EV				
FHR + 3 Heart Views	✓	TA				
Fetal Lie	✓	TA				
Placenta + Placenta Location	✓	TA				
BPD + HC	✓	TA				
AC + FL	✓	TA				
Cord Doppler	✓	TA				
DVP/AFI	✓	TA				

**CLINICAL PORTFOLIO – NOVICE**

<i>Cardiac Critique &amp; Imaging Review</i> <i>#1 of 2</i>				<b>MIDS 181</b>		
<b>Anatomical Part</b>		<b>Imaging Method</b>	<b>Image Numbers</b>	<b>VIHA Accession</b>	<b>Date of Examination</b>	<b>Passed (CL Initial)</b>
Abdominal Situs & Cardiac Position SC view demonstrating situs solitus	✓	TTE				
Chest and Thorax (adjacent, extra-cardiac	✓	TTE				
Hepatic Veins - SC view demonstrating hepatic vein	✓	TTE				
Outflow tracts (TTE) – Zoomed in PLAX LVOT view and either RVOT or PSAX zoomed in on MPA	✓	TTE				
Pulmonary Veins – AP4	✓	TTE				
Wall layers & wall segments (TTE) - PSAX at MV, PSAX at Papillary muscles, PSAX at apex	✓	TTE				
Aortic Arch and branches - SSN view	✓	TTE				
Ascending, Descending & aortic root - High PLAX view demonstrating asc. Aorta, SC view of descending aorta, and PLAX view of aortic root	✓	TTE				
Left atrial appendage – AP2 view demonstrating LAA	✓	TTE				
Pulmonary artery and bifurcation PSAX PA bifurcation view (visualization of main pulmonary artery, right, and left pulmonary arteries)	✓	TTE				

**CLINICAL PORTFOLIO – NOVICE**

<i>Cardiac Critique &amp; Imaging Review</i> <i>#2 of 2</i>				<b>MIDS 181</b>		
<b>Anatomical Part</b>		<b>Imaging Method</b>	<b>Image Numbers</b>	<b>VIHA Accession</b>	<b>Date of Examination</b>	<b>Passed (CL Initial)</b>
Atrial and Ventricular Septa – AP4	✓	TTE				
Aortic Valve – PSAX at aortic valve level	✓	TTE				
Mitral Valve & annulus (zoomed in AP4 of MV, LA and annulus)	✓	TTE				
Pulmonic Valve - RVOT or PSAX demonstrating pulmonary valve	✓	TTE				
Tricuspid Valve & annulus – Zoomed in AP4 of TV, RA and annulus or RVIT view	✓	TTE				
Right Ventricle AP 4 with visualization of RV free wall	✓	TTE				
Left Ventricle any PLAX or apical image	✓	TTE				
Inferior Vena Cava – SC view	✓	TTE				

**CLINICAL PORTFOLIO – NOVICE**

<i>Superficial Critique &amp; Imaging Review</i>			MIDS 231			
Anatomical Part		Imaging Method	Image Numbers	VIHA Accession	Date of Examination	Passed <i>(CL Initial)</i>
Neck Lymph Node	✓	-				
Groin Lymph Node	✓	-				
Popliteal Fossa	✓	-				
Left Thyroid	✓	-				
Right Thyroid	✓	-				

**CLINICAL PORTFOLIO – NOVICE**

<i>Carotid Critique &amp; Imaging Review</i>			MIDS 231			
<b>Anatomical Part</b> <i>(Lt or Rt)</i>		<b>Imaging Method</b>	<b>Image Numbers</b>	<b>VIHA Accession</b>	<b>Date of Examination</b>	<b>Passed</b> <i>(CL Initial)</i>
CCA	✓	-				
ICA	✓	-				
ECA	✓	-				
Vertebral	✓	-				
Subclavian	✓	-				
Brachiocephalic	✓	-				



**CLINICAL PORTFOLIO – NOVICE**

<i>Arm Veins Critique &amp; Imaging Review</i>			MIDS 231			
<b>Anatomical Part</b> <i>(Lt or Rt)</i>		<b>Imaging Method</b>	<b>Image Numbers</b>	<b>VIHA Accession</b>	<b>Date of Examination</b>	<b>Passed</b> <i>(CL Initial)</i>
Jugular Vein	✓	-				
Innominate V	✓	-				
Subclavian Vein	✓	-				
Axillary Vein	✓	-				
Brachial Vein	✓	-				
Basilic Vein	✓	-				
Cephalic Vein	✓	-				
Forearm Veins	✓	-				

**CLINICAL PORTFOLIO – NOVICE**

<i>Leg Veins Critique &amp; Imaging Review</i>			MIDS 231			
<b>Anatomical Part</b> <i>(Lt or Rt)</i>		<b>Imaging Method</b>	<b>Image Numbers</b>	<b>VIHA Accession</b>	<b>Date of Examination</b>	<b>Passed</b> <i>(CL Initial)</i>
Iliac Vein	✓	-				
Common Femoral Vein	✓	-				
Femoral Vein	✓	-				
Popliteal Vein	✓	-				
GSV/CFV Junction	✓	-				
SSV/Pop V. Junction	✓	-				
Calf Veins	✓	-				

**CLINICAL PORTFOLIO – NOVICE**

<i>Vascular Critique &amp; Imaging Review</i>		MIDS 231				
Anatomical Part		Imaging Method	Image Numbers	VIHA Accession	Date of Examination	Passed <i>(CL Initial)</i>
Indirect Testing (ABI)	✓	-				
CAX, SMA Doppler/2D	✓	-				
GSV & LSV (R or L)	✓	-				
Leg Arteries (R or L)	✓	-				
Graft Assessment	*	-				

**CLINICAL PORTFOLIO – NOVICE**

<b>Anatomical Part</b>		<b>Imaging Method</b>	<b>Image Numbers</b>	<b>VIHA Accession</b>	<b>Date of Examination</b>	<b>Passed (CL Initial)</b>
2D Measurement of Left Ventricle PLAX (IVSd, LVIDd, PWd, LVIDs)		✓	TTE			
2D LA Measurement – PLAX		✓	TTE			
2D Measurement of Aortic Root – PLAX		✓	TTE			
2D Measurement of Ascending Aorta – High PLAX		✓	TTE			
2D Measurement of the Left Ventricular Outflow Tract – Zoomed PLAX		✓	TTE			
2D Measurement of the Right Ventricular Outflow Tract – PLAX RVOT or PSAX Views		✓	TTE			
2D Measurement of the Inferior Vena Cava (Subcostal short axis)		✓	TTE			
M-Mode of the Aortic Valve		✓	TTE			
M-Mode of the Mitral Valve		✓	TTE			

**CLINICAL PORTFOLIO – NOVICE**

<b>Anatomical Part</b>		<b>Imaging Method</b>	<b>Image Numbers</b>	<b>VIHA Accession</b>	<b>Date of Examination</b>	<b>Passed (CL Initial)</b>
RV Function – Tricuspid Annular Plane Systolic Excursion – AP 4 M-Mode		✓	TTE			
2D Measurement of the Right Ventricle AP4 (RVIDd)		✓	TTE			
LV Simpson’s Bi-plane Ejection Fraction – AP4, AP2		✓	TTE			
2D LA Volume Measurement – AP4, AP2		✓	TTE			
Colour Doppler of the RVOT – PLAX or PSAX		✓	TTE			
Colour Doppler of the LVOT – AP5 or AP3		✓	TTE			
Colour Doppler of the Right Superior Pulmonary Vein – AP4		✓	TTE			
Colour Doppler of the Pulmonic Valve – PSAX or PLAX RVOT		✓	TTE			
Colour Doppler of the Right Atrium and Tricuspid Valve – AP4 or RVIT		✓	TTE			

**CLINICAL PORTFOLIO – NOVICE**

<i>Cardiac Critique &amp; Imaging Review</i> <i>#3 of 3</i>			MIDS 231			
<b>Anatomical Part</b>		<b>Imaging Method</b>	<b>Image Numbers</b>	<b>VIHA Accession</b>	<b>Date of Examination</b>	<b>Passed (CL Initial)</b>
Colour Doppler of the Left Atrium and Mitral Valve – PLAX or AP4 or AP2 or AP3	✓	TTE				
Colour Doppler of the Aortic Valve – PLAX or PSAX or AP5 or AP3	✓	TTE				
Colour Doppler of the Hepatic Vein and Inferior Vena Cava – Subcostal short axis	✓	TTE				
Colour Doppler of the Ascending Aorta – SSN View	✓	TTE				
Colour Doppler of the Descending Aorta – SSN View	✓	TTE				

**CLINICAL PORTFOLIO – NOVICE**

<i><b>Shoulder Critique &amp; Imaging Review</b></i> <i>(Lt or Rt)</i>		<b>MIDS 281</b>				
<b>Anatomical Part</b>		<b>Imaging Method</b>	<b>Image Numbers</b>	<b>VIHA Accession</b>	<b>Date of Examination</b>	<b>Passed (CL Initial)</b>
Biceps Tendon	✓	-				
Subscapularis Tendon	✓	-				
Supraspinatus Tendon	✓	-				
Infraspinatus Tendon	✓	-				

**CLINICAL PORTFOLIO – NOVICE**

<i>Cardiac Critique &amp; Imaging Review</i> <i>#1 of 2</i>			MIDS 281			
Anatomical Part		Imaging Method	Image Numbers	VIHA Accession	Date of Examination	Passed <i>(CL Initial)</i>
PW of RVOT & CW of PV with measurements of each (RVOT or PSAX) – 2 IMAGES	✓	TTE				
PW & CW of TV with measurements of each (RVIT or AP4) – 2 IMAGES	✓	TTE				
TDI of TV Lateral & measurement (AP4) – 1 IMAGE	✓	TTE				
PW & CW of MV with measurements of each (AP4) – 2 IMAGES	✓	TTE				
TDI of MV Sept & Lat with measurements of each (AP4) – 2 IMAGES	✓	TTE				



**CLINICAL PORTFOLIO – NOVICE**

<i>Cardiac Critique &amp; Imaging Review #2 of 2</i>			MIDS 281			
Anatomical Part		Imaging Method	Image Numbers	VIHA Accession	Date of Examination	Passed (CL Initial)
PW of Pulmonary vein & measurement (AP4) – 2 IMAGES	✓	TTE				
PW of LVOT, CW of AV with measurements of each (AP5) – 2 IMAGES	✓	TTE				
PW of Hepatic vein & measurement (SUBS) – 1 IMAGE	✓	TTE				
CW of Ascending AO & measurement (SSN) – 1 IMAGE	✓	TTE				
PW & CW of Descending AO with measurements of each (SSN) – 2 IMAGES	✓	TTE				

**CLINICAL PORTFOLIO – NOVICE**

**Summary of Rejected Critiques & Image Audits**

For cases that are presented by the student, but rejected by the Clinical Liaison or designate, a record should be kept indicating the reason why the case was rejected (for example, annotation was rated as “not demonstrated”; according to the criteria for acceptability, annotation must be “fully demonstrated” in order to meet portfolio requirements).

Note that the criteria for acceptability for the portfolio may be higher than the minimally acceptable image for diagnostic purposes.

<b>Date Rejected</b> <i>(DD/MM/YY)</i>	<b>Area</b>	<b>CL</b> <b>Initials</b>	<b>Clinical Liaison’s Rating and Reason for Reject</b> Indicate image, criteria for reason of reject, and rating of indicated criteria
<i>1/2/2020</i>	<i>Abdomen</i>		<i>TRV Liver. Depth and gain were rated as “minimally demonstrated”. Patient was an ambulatory patient and the liver depth was inadequate and over-gained.</i>

# Critique/Image Review Assessments

# SONO CLINICAL PORTFOLIO - NOVICE

## Image Critique and Review Competency Assessment Forms

Example form shown below; to be completed in D2L by Clinical Liaison

\*Note: rubric is subject to change at the discretion of the Instructor and/or Clinical Liaison

<b>Student Name:</b>	<b>Date:</b>
<b>Evaluating Instructor:</b>	<b>Assessment Number:</b>
<b>Body Region and Anatomical Part:</b>	<b>Number of Prior Attempts:</b>

### Professional Performance

Any missed **critical criteria\*** (**bold**) results in the need for a **repeat attempt**.

Professional Conduct	1 point each	Comments – Instructor to mark as skill/behaviour demonstrated/observed.
<b>Appearance*</b>	<input type="checkbox"/>	Adhered to dress code (1. wore proper shoes, 2. Scrubs, 3.ID badge)
<b>Respect &amp; Decorum*</b>	<input type="checkbox"/>	Upheld <i>Respectful Workplace</i> and demonstrated respect toward self and demonstrated professional behaviours
<b>Legal/Ethical*</b>	<input type="checkbox"/>	Upheld Legal requirements; professional <i>Code of Ethics</i> (confidentiality, privacy, consent, unbiased, etc.)
<b>Section Score</b>	<b>/3</b>	
<b>Prepare &amp; Initiate</b>		
<b>Prepare*</b>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Prepare room;: 1. adjust bed, 2. machine, and 3. chair for proper ergonomic positions
<b>Initiate*</b>	<input type="checkbox"/>	Input patient information and examination information properly
Probe & Pre-set Selection	<input type="checkbox"/> <input type="checkbox"/>	Selected the correct 1. probe and 2.pre-set for the examination
<b>Supervision*</b>	<input type="checkbox"/>	Ensured the instructor was ready to observe before interacting with the patient
<b>Section Score</b>	<b>/7</b>	
<b>Establish the Patient Relationship</b>		
<b>Introduction*</b>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Disclosed: 1. role (student), 2. name, 3. introduced instructor, and 4. description of duty (SNOD)
<b>Patient Identification*</b>	<input type="checkbox"/> <input type="checkbox"/>	Confirmed the patient’s identity using two identifiers: 1. date of birth, and 2. Full patient name (according to site policy)
<b>Confirmation of Procedure*</b>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Verified nature of exam with patient: 1. ordering physician, 2. other doctors receiving copies, and 3. what the exam is for
<b>Patient History*</b>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Asked the patient for their: 1. signs & symptoms, 2. relevant surgical history, and 3. confirmed patient preparation
<b>Explanation of Exam*</b>	<input type="checkbox"/>	Explained procedure to patient
<b>Consent*</b>	<input type="checkbox"/>	Obtained informed consent (permission to touch, answered questions, etc.)
<b>Section Score</b>	<b>/14</b>	
<b>Execute the Procedure</b>		
<b>Infection Control*</b>	<input type="checkbox"/> <input type="checkbox"/>	Practiced proper hand hygiene: 1. before and 2. after touching patient (adhered to infection control policies)
Body Mechanics/ Ergonomics	<input type="checkbox"/>	Utilized proper body mechanics while operating the imaging equipment and positioning the patient, etc. AND maintained throughout the exam
ECG Set Up ( <i>Cardiac only</i> )	<input type="checkbox"/>	Ensured proper ECG placement and functioning throughout the test
Patient Care and Safety	<input type="checkbox"/>	Throughout the procedure, monitored patient comfort and assessed needs
Time Management	<input type="checkbox"/>	Conscious of time while completing the exam and made appropriate decisions while acquiring diagnostic-quality images

## SONO CLINICAL PORTFOLIO - NOVICE

<b>Section Score</b>	<b>/5 OR /6</b>	
<b>Conclude the Procedure</b>		
Post-Examination Information	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Described the post-procedural instructions to the patient: 1. reporting process, 2. Radiologist's role, and 3. post-exam follow up
Patient Dismissal	<input type="checkbox"/>	Asked the patient if they had any questions and dismissed the patient
Clean-up	<input type="checkbox"/>	Cleaned and adequately prepared the procedure room for the next patient
Technical Impression Worksheet	<input type="checkbox"/>	Completed an accurate technical impression worksheet
<b>Section Score</b>	<b>/6</b>	
<b>Section Grade</b>		
<b>Part 1: Professional Performance</b>	<b>/35 /36 (cardiac)</b>	
<b>Instructor Notes:</b>		

# SONO CLINICAL PORTFOLIO - NOVICE

## Interrogation & Image Quality

\*If a student scores <65% on the **Complete Interrogation** section, the student may be required to re-demonstrate this skill in a manner up to the assessing instructor.

Interrogation & Image Quality Comments – Instructor to mark as skill/behaviour demonstrated/observed.

[Structure]	Plane	*Complete Interrogation	Correct Depth	Optimized Zoom and/or Sector Width	Correct Focus	Optimized 2D Gain/TGC	Correct Annotation	Measurement Accuracy
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Total:** /

Pathology Documentation (if applicable)		*Complete Interrogation	Correct Depth	Optimized Zoom and/or Sector Width	Correct Focus	Optimized 2D Gain	Correct Annotation	Measurement Accuracy
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Total:** /

Section Score	Totals
	/
	/

**Section Grade**

<b>Part 2: Interrogation &amp; Image Quality</b>	/	
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**Instructor Notes:**

## SONO CLINICAL PORTFOLIO - NOVICE

### Final Grade

<b>Part 1: Professional Performance</b>	/	
<b>Part 1: Weighted Subtotal</b>	/15	<i>Worth 15% of overall mark</i>
<b>Part 2: Interrogation &amp; Image Quality</b>	/	
<b>Part 2: Weighted Subtotal</b>	/85	<i>Worth 85% of overall mark</i>
<b>Bonus Marks for Timely Exam Completion</b> (Completed the exam while obtaining diagnostic quality images)	/2	
<b>Part 1 + Part 2: Subtotal</b>	/	
<b>FINAL SCORE</b>	/	

### Evaluation

	Below Expectations	Needs Improvement	Meets Expectations	Exceeds Expectations	Comments
Professional Conduct (3) <b>All Critical Criteria*</b>	<3	N/A	3		
Prepare & Initiate (7) <b>5 Critical Criteria*</b>	≤5	6	7		
Establish the Patient Relationship (14) <b>All Critical Criteria*</b>	<14	N/A	14		
Execute the Procedure (5 or 6) <b>2 Critical Criteria*</b>	≤2	3-4	5-6		
Conclude the Procedure (6)	≤3	3-5	6		
Interrogation & Image Quality	<55%	56-65%	65%-85%	85%-100%	

**Result:**

Developing competence (must be all M or E) needed  Repeat attempt

Student is able to perform the assessed skills clinically

**Instructor Overall Comments:**

**Signatures:**

<b>Student:</b>	<b>Evaluating Instructor:</b>
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# Formative Evaluations



## SONO CLINICAL PORTFOLIO - NOVICE

### Additional Guidelines for Formative Evaluations

- Formative evaluations are to be completed 3 times during the scheduled clinical rotation, and in weeks 15/16 as needed.
- A minimum of 3 formative evaluations are required in each MIDS course.
- All formative evaluations must be submitted to D2L within 2 clinical days after completion.
- More than one clinical area may be included in the evaluation.
- If a student is not progressing as expected, the Clinical Liaison should indicate this by rating the student at 4 or below and recommend strategies for improvement; a verbal or written plan for remediation may be necessary.
- For any serious incident, the Program Leader should be notified right away.

## SONO CLINICAL PORTFOLIO - NOVICE

### Guidelines for Determining Formative Evaluation Rating (Novice)

Below Expectations	Needs Improvement	Meets Expectations	Exceeds Expectations
1-2	3-4	5-8	9-10
Unsafe or unprepared to resume next rotation.	Showing minimal progression or inconsistent.	Consistently showing progression toward the next level.	Highly consistent and working at a higher level.
<p><i>Indicators/examples:</i></p> <ul style="list-style-type: none"> <li>Does not follow instructions, policies, or guidelines</li> <li>Caused a safety incident</li> <li>Does not seek appropriate supervision</li> <li>Unprofessional</li> </ul>	<p><i>Indicators/examples:</i></p> <ul style="list-style-type: none"> <li>Struggling to maintain reasonable level of achievement</li> <li>Needs a lot of prompting to seek appropriate learning opportunities</li> </ul>	<p><i>Indicators/examples:</i></p> <ul style="list-style-type: none"> <li>Regularly presents new cases for image critique or image audit</li> <li>Continuously strives for personal improvement and seeks out learning opportunities</li> <li>Appropriately prepares self for each learning activity, new modality, competency assessment, or other as relevant</li> </ul>	<p><i>Indicators/examples:</i></p> <ul style="list-style-type: none"> <li>Completed all portfolio requirements early</li> <li>Able to function independently in all/most routine situations</li> <li>Demonstrates highly efficient workflow</li> <li>Makes effective decisions and is ready to take on more challenging situations</li> </ul>
<p><i>Action Needed:</i></p> <ul style="list-style-type: none"> <li>Should be removed from clinical site until plan for remediation has been laid out.</li> <li>Any safety incident or other serious incident must be reported to Clinical Liaison and Program Leader right away; even if evaluation form is not due yet.</li> </ul>	<p><i>Action Needed:</i></p> <ul style="list-style-type: none"> <li>May continue to next rotation (if applicable), however, plan for remediation must be laid out in a timely manner to demonstrate improvement on next formative evaluation.</li> <li>Written feedback may be requested.</li> </ul>		
<b>NC</b>		Must at least “meet expectations” on final summative evaluation in order to progress to the next MIDS course.	

# **MIDS 151 Formative & Summative Evaluations**

# SONO CLINICAL PORTFOLIO - NOVICE

## MIDS 151 Formative Evaluation #1 Week \_\_\_\_\_

Student's Name \_\_\_\_\_ Evaluator's Name \_\_\_\_\_

Date \_\_\_\_\_ Procedure Area(s) \_\_\_\_\_

Based on the current rotation, evaluate the student using the following rating scale:

*Below Expectations 0-2; Needs Improvement 3-4; Meets Expectations 5-8; Exceeds Expectations 9-10*  
(see pg. 46 for more guidance on how to apply rating scale)

<b>Professionalism and Responsibility</b> <i>Expectations:</i> <ul style="list-style-type: none"> <li>• demonstrates punctuality according to posted schedule and communicates whereabouts</li> <li>• makes productive use of time and takes initiative to participate in procedures</li> <li>• works cooperatively as member of team and openly receives feedback and suggestions for improvement</li> <li>• demonstrates accountability for actions and takes personal responsibility for learning</li> <li>• adheres to program and clinical site policies and guidelines</li> </ul>	
Rating 0-10:	Comments
<b>Overall Clinical Competence (Knowledge, Skills, and Judgement)</b> <i>Expectations:</i> <ul style="list-style-type: none"> <li>• demonstrates increasing knowledge and applies knowledge to practice situations</li> <li>• shows improvement from one shift, one case, or one rotation to the next</li> <li>• maintains appropriate level of completion of pocket book &amp; portfolio requirements</li> <li>• communicates effectively with patients and staff</li> </ul>	
Rating 0-10:	Comments

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### Status of Completion of Course Requirements:

<b>Attendance</b>	Days attended this evaluation period: _____
<b>Image Reviews Completed</b>	Total number completed to date: _____
<b>Clinical Skills Completed</b>	Total number completed to date: _____

### Result:

At least **Meets Expectations**

Remediation plan required (4 or less on any criteria); please notify Program Leader; written feedback may be requested

Student Signature \_\_\_\_\_ CL or Designate Signature \_\_\_\_\_

Date Reviewed \_\_\_\_\_

# SONO CLINICAL PORTFOLIO - NOVICE

## MIDS 151 Formative Evaluation #2 Week \_\_\_\_\_

Student's Name \_\_\_\_\_ Evaluator's Name \_\_\_\_\_

Date \_\_\_\_\_ Procedure area(s) \_\_\_\_\_

Based on the current rotation, evaluate the student using the following rating scale:

*Below Expectations 0-2; Needs Improvement 3-4; Meets Expectations 5-8; Exceeds Expectations 9-10*  
 (see pg. 46 for more guidance on how to apply rating scale)

<b>Professionalism and Responsibility</b> <i>Expectations:</i> <ul style="list-style-type: none"> <li>demonstrates punctuality according to posted schedule and communicates whereabouts</li> <li>makes productive use of time and takes initiative to participate in procedures</li> <li>works cooperatively as member of team and openly receives feedback and suggestions for improvement</li> <li>demonstrates accountability for actions and takes personal responsibility for learning</li> <li>adheres to program and clinical site policies and guidelines</li> </ul>	
Rating 0-10:	Comments
<b>Overall Clinical Competence (Knowledge, Skills, and Judgement)</b> <i>Expectations:</i> <ul style="list-style-type: none"> <li>demonstrates increasing knowledge and applies knowledge to practice situations</li> <li>shows improvement from one shift, one case, or one rotation to the next</li> <li>maintains appropriate level of completion of portfolio requirements</li> <li>communicates effectively with patients and staff</li> </ul>	
Rating 0-10:	Comments

### Status of Completion of Course Requirements:

<b>Attendance</b>	Days attended this evaluation period: _____
<b>Image Reviews Completed</b>	Total number completed to date: _____
<b>Clinical Skills Completed</b>	Total number completed to date: _____

### Result:

- At least **Meets Expectations**
- Remediation plan required (4 or less on any criteria); please notify Clinical Liaison; written feedback may be requested

Student Signature \_\_\_\_\_ CL or Designate Signature \_\_\_\_\_

Date Reviewed \_\_\_\_\_

# SONO CLINICAL PORTFOLIO - NOVICE

## MIDS 151 Formative Evaluation #3 Week \_\_\_\_\_

Student's Name \_\_\_\_\_ Evaluator's Name \_\_\_\_\_

Date \_\_\_\_\_ Procedure area(s) \_\_\_\_\_

Based on the current rotation, evaluate the student using the following rating scale:

*Below Expectations 0-2; Needs Improvement 3-4; Meets Expectations 5-8; Exceeds Expectations 9-10*

*(see pg. 46 for more guidance on how to apply rating scale)*

<b>Professionalism and Responsibility</b> <i>Expectations:</i> <ul style="list-style-type: none"> <li>• demonstrates punctuality according to posted schedule and communicates whereabouts</li> <li>• makes productive use of time and takes initiative to participate in procedures</li> <li>• works cooperatively as member of team and openly receives feedback and suggestions for improvement</li> <li>• demonstrates accountability for actions and takes personal responsibility for learning</li> <li>• adheres to program and clinical site policies and guidelines</li> </ul>	
Rating 0-10:	Comments
<b>Overall Clinical Competence (Knowledge, Skills, and Judgement)</b> <i>Expectations:</i> <ul style="list-style-type: none"> <li>• demonstrates increasing knowledge and applies knowledge to practice situations</li> <li>• shows improvement from one shift, one case, or one rotation to the next</li> <li>• maintains appropriate level of completion of portfolio requirements</li> <li>• communicates effectively with patients and staff</li> </ul>	
Rating 0-10:	Comments

### Status of Completion of Course Requirements:

<b>Attendance</b>	Days attended this evaluation period: _____
<b>Image Reviews Completed</b>	Total number completed to date: _____
<b>Clinical Skills Completed</b>	Total number completed to date: _____

### Result:

At least **Meets Expectations**

Remediation plan required (4 or less on any criteria); please notify Clinical Liaison; written feedback may be requested

Student Signature \_\_\_\_\_ CL or Designate Signature \_\_\_\_\_

Date Reviewed \_\_\_\_\_

# SONO CLINICAL PORTFOLIO - NOVICE

## Formative Evaluation – (As Needed)

Student's Name \_\_\_\_\_ Evaluator's Name \_\_\_\_\_

Date \_\_\_\_\_ Procedure area(s) \_\_\_\_\_

Based on the current rotation, evaluate the student using the following rating scale:

*Below Expectations 0-2; Needs Improvement 3-4; Meets Expectations 5-8; Exceeds Expectations 9-10*  
 (see pg. 46 for more guidance on how to apply rating scale)

<b>Professionalism and Responsibility</b> <i>Expectations:</i> <ul style="list-style-type: none"> <li>demonstrates punctuality according to posted schedule and communicates whereabouts</li> <li>makes productive use of time and takes initiative to participate in procedures</li> <li>works cooperatively as member of team and openly receives feedback and suggestions for improvement</li> <li>demonstrates accountability for actions and takes personal responsibility for learning</li> <li>adheres to program and clinical site policies and guidelines</li> </ul>	
Rating 0-10:	Comments
<b>Overall Clinical Competence (Knowledge, Skills, and Judgement)</b> <i>Expectations:</i> <ul style="list-style-type: none"> <li>demonstrates increasing knowledge and applies knowledge to practice situations</li> <li>shows improvement from one shift, one case, or one rotation to the next</li> <li>maintains appropriate level of completion of portfolio requirements</li> <li>communicates effectively with patients and staff</li> </ul>	
Rating 0-10:	Comments

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### Status of Completion of Course Requirements:

<b>Attendance</b>	Days attended this evaluation period: _____
<b>Image Reviews Completed</b>	Total number completed to date: _____
<b>Clinical Skills Completed</b>	Total number completed to date: _____

### Result:

- At least **Meets Expectations**
- Remediation plan required (4 or less on any criteria); please notify Clinical Liaison; written feedback may be requested

Student Signature \_\_\_\_\_ CL or Designate Signature \_\_\_\_\_

Date Reviewed \_\_\_\_\_

# SONO CLINICAL PORTFOLIO - NOVICE

## MIDS 151 Summative Evaluation

Student's Name \_\_\_\_\_ Evaluator's Name \_\_\_\_\_

Date \_\_\_\_\_ Procedure area(s) \_\_\_\_\_

Based on the current rotation, evaluate the student using the following rating scale:

*Below Expectations 0-2; Needs Improvement 3-4; Meets Expectations 5-8; Exceeds Expectations 9-10*

*(see pg. 46 for more guidance on how to apply rating scale)*

<b>Professionalism and Responsibility</b> <i>Expectations:</i> <ul style="list-style-type: none"> <li>• demonstrates punctuality according to posted schedule and communicates whereabouts</li> <li>• makes productive use of time and takes initiative to participate in procedures</li> <li>• works cooperatively as member of team and openly receives feedback and suggestions for improvement</li> <li>• demonstrates accountability for actions and takes personal responsibility for learning</li> <li>• adheres to program and clinical site policies and guidelines</li> </ul>	
Rating 0-10:	Comments
<b>Overall Clinical Competence (Knowledge, Skills, and Judgement)</b> <i>Expectations:</i> <ul style="list-style-type: none"> <li>• demonstrates increasing knowledge and applies knowledge to practice situations</li> <li>• shows improvement from one shift, one case, or one rotation to the next</li> <li>• maintains appropriate level of completion of portfolio requirements</li> <li>• communicates effectively with patients and staff</li> </ul>	
Rating 0-10:	Comments

### Status of Completion of Course Requirements:

Attendance	Days attended this evaluation period: _____
Image Reviews Completed	Total number completed to date: _____
Clinical Skills Completed	Total number completed to date: _____

### Result:

At least **Meets Expectations**

Remediation plan required (4 or less on any criteria); please notify Clinical Liaison; written feedback may be requested

Student Signature \_\_\_\_\_ CL or Designate Signature \_\_\_\_\_

Date Reviewed \_\_\_\_\_



# MIDS 181 Formative & Summative Evaluations

# SONO CLINICAL PORTFOLIO - NOVICE

## MIDS 181 Formative Evaluation #1 Week \_\_\_\_\_

Student's Name \_\_\_\_\_ Evaluator's Name \_\_\_\_\_

Date \_\_\_\_\_ Procedure Area(s) \_\_\_\_\_

Based on the current rotation, evaluate the student using the following rating scale:

*Below Expectations 0-2; Needs Improvement 3-4; Meets Expectations 5-8; Exceeds Expectations 9-10  
(see pg. 46 for more guidance on how to apply rating scale)*

<b>Professionalism and Responsibility</b> <i>Expectations:</i> <ul style="list-style-type: none"> <li>• demonstrates punctuality according to posted schedule and communicates whereabouts</li> <li>• makes productive use of time and takes initiative to participate in procedures</li> <li>• works cooperatively as member of team and openly receives feedback and suggestions for improvement</li> <li>• demonstrates accountability for actions and takes personal responsibility for learning</li> <li>• adheres to program and clinical site policies and guidelines</li> </ul>	
Rating 0-10:	Comments
<b>Overall Clinical Competence (Knowledge, Skills, and Judgement)</b> <i>Expectations:</i> <ul style="list-style-type: none"> <li>• demonstrates increasing knowledge and applies knowledge to practice situations</li> <li>• shows improvement from one shift, one case, or one rotation to the next</li> <li>• maintains appropriate level of completion of pocket book &amp; portfolio requirements</li> <li>• communicates effectively with patients and staff</li> </ul>	
Rating 0-10:	Comments

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### Status of Completion of Course Requirements:

<b>Attendance</b>	Days attended this evaluation period: _____
<b>Image Reviews Completed</b>	Total number completed to date: _____
<b>Clinical Skills Completed</b>	Total number completed to date: _____

### Result:

At least **Meets Expectations**

Remediation plan required (4 or less on any criteria); please notify Program Leader; written feedback may be requested

Student Signature \_\_\_\_\_ CL or Designate Signature \_\_\_\_\_

Date Reviewed \_\_\_\_\_

# SONO CLINICAL PORTFOLIO - NOVICE

## MIDS 181 Formative Evaluation #2 Week \_\_\_\_\_

Student's Name \_\_\_\_\_ Evaluator's Name \_\_\_\_\_

Date \_\_\_\_\_ Procedure area(s) \_\_\_\_\_

Based on the current rotation, evaluate the student using the following rating scale:

*Below Expectations 0-2; Needs Improvement 3-4; Meets Expectations 5-8; Exceeds Expectations 9-10*  
 (see pg. 46 for more guidance on how to apply rating scale)

<b>Professionalism and Responsibility</b> <i>Expectations:</i> <ul style="list-style-type: none"> <li>demonstrates punctuality according to posted schedule and communicates whereabouts</li> <li>makes productive use of time and takes initiative to participate in procedures</li> <li>works cooperatively as member of team and openly receives feedback and suggestions for improvement</li> <li>demonstrates accountability for actions and takes personal responsibility for learning</li> <li>adheres to program and clinical site policies and guidelines</li> </ul>	
Rating 0-10:	Comments
<b>Overall Clinical Competence (Knowledge, Skills, and Judgement)</b> <i>Expectations:</i> <ul style="list-style-type: none"> <li>demonstrates increasing knowledge and applies knowledge to practice situations</li> <li>shows improvement from one shift, one case, or one rotation to the next</li> <li>maintains appropriate level of completion of portfolio requirements</li> <li>communicates effectively with patients and staff</li> </ul>	
Rating 0-10:	Comments

### Status of Completion of Course Requirements:

<b>Attendance</b>	Days attended this evaluation period: _____
<b>Image Reviews Completed</b>	Total number completed to date: _____
<b>Clinical Skills Completed</b>	Total number completed to date: _____

### Result:

- At least **Meets Expectations**
- Remediation plan required (4 or less on any criteria); please notify Clinical Liaison; written feedback may be requested

Student Signature \_\_\_\_\_ CL or Designate Signature \_\_\_\_\_

Date Reviewed \_\_\_\_\_

# SONO CLINICAL PORTFOLIO - NOVICE

## MIDS 181 Formative Evaluation #3 Week \_\_\_\_\_

Student's Name \_\_\_\_\_ Evaluator's Name \_\_\_\_\_

Date \_\_\_\_\_ Procedure area(s) \_\_\_\_\_

Based on the current rotation, evaluate the student using the following rating scale:

*Below Expectations 0-2; Needs Improvement 3-4; Meets Expectations 5-8; Exceeds Expectations 9-10  
(see pg. 46 for more guidance on how to apply rating scale)*

<b>Professionalism and Responsibility</b> <i>Expectations:</i> <ul style="list-style-type: none"> <li>• demonstrates punctuality according to posted schedule and communicates whereabouts</li> <li>• makes productive use of time and takes initiative to participate in procedures</li> <li>• works cooperatively as member of team and openly receives feedback and suggestions for improvement</li> <li>• demonstrates accountability for actions and takes personal responsibility for learning</li> <li>• adheres to program and clinical site policies and guidelines</li> </ul>	
Rating 0-10:	Comments
<b>Overall Clinical Competence (Knowledge, Skills, and Judgement)</b> <i>Expectations:</i> <ul style="list-style-type: none"> <li>• demonstrates increasing knowledge and applies knowledge to practice situations</li> <li>• shows improvement from one shift, one case, or one rotation to the next</li> <li>• maintains appropriate level of completion of portfolio requirements</li> <li>• communicates effectively with patients and staff</li> </ul>	
Rating 0-10:	Comments

### Status of Completion of Course Requirements:

<b>Attendance</b>	Days attended this evaluation period: _____
<b>Image Reviews Completed</b>	Total number completed to date: _____
<b>Clinical Skills Completed</b>	Total number completed to date: _____

### Result:

- At least **Meets Expectations**
- Remediation plan required (4 or less on any criteria); please notify Clinical Liaison; written feedback may be requested

Student Signature \_\_\_\_\_ CL or Designate Signature \_\_\_\_\_

Date Reviewed \_\_\_\_\_

# SONO CLINICAL PORTFOLIO - NOVICE

## Formative Evaluation – (As Needed)

Student's Name \_\_\_\_\_ Evaluator's Name \_\_\_\_\_

Date \_\_\_\_\_ Procedure area(s) \_\_\_\_\_

Based on the current rotation, evaluate the student using the following rating scale:

*Below Expectations 0-2; Needs Improvement 3-4; Meets Expectations 5-8; Exceeds Expectations 9-10  
(see pg. 46 for more guidance on how to apply rating scale)*

<b>Professionalism and Responsibility</b>	
<i>Expectations:</i>	
<ul style="list-style-type: none"> <li>• <i>demonstrates punctuality according to posted schedule and communicates whereabouts</i></li> <li>• <i>makes productive use of time and takes initiative to participate in procedures</i></li> <li>• <i>works cooperatively as member of team and openly receives feedback and suggestions for improvement</i></li> <li>• <i>demonstrates accountability for actions and takes personal responsibility for learning</i></li> <li>• <i>adheres to program and clinical site policies and guidelines</i></li> </ul>	
Rating 0-10:	Comments
<b>Overall Clinical Competence (Knowledge, Skills, and Judgement)</b>	
<i>Expectations:</i>	
<ul style="list-style-type: none"> <li>• <i>demonstrates increasing knowledge and applies knowledge to practice situations</i></li> <li>• <i>shows improvement from one shift, one case, or one rotation to the next</i></li> <li>• <i>maintains appropriate level of completion of portfolio requirements</i></li> <li>• <i>communicates effectively with patients and staff</i></li> </ul>	
Rating 0-10:	Comments

.....

### Status of Completion of Course Requirements:

<b>Attendance</b>	<i>Days attended this evaluation period: _____</i>
<b>Image Reviews Completed</b>	<i>Total number completed to date: _____</i>
<b>Clinical Skills Completed</b>	<i>Total number completed to date: _____</i>

### Result:

- At least **Meets Expectations**
- Remediation plan required (4 or less on any criteria); please notify Clinical Liaison; written feedback may be requested

Student Signature \_\_\_\_\_ CL or Designate Signature \_\_\_\_\_

Date Reviewed \_\_\_\_\_

# SONO CLINICAL PORTFOLIO - NOVICE

## MIDS 181 Summative Evaluation

Student's Name \_\_\_\_\_ Evaluator's Name \_\_\_\_\_

Date (last day of rotation) \_\_\_\_\_ Procedure area(s) \_\_\_\_\_

Based on the current rotation, evaluate the student using the following rating scale:

*Below Expectations 0-2; Needs Improvement 3-4; Meets Expectations 5-8; Exceeds Expectations 9-10*  
 (see pg. 46 for more guidance on how to apply rating scale)

<b>Professionalism and Responsibility</b> <i>Expectations:</i> <ul style="list-style-type: none"> <li>demonstrates punctuality according to posted schedule and communicates whereabouts</li> <li>makes productive use of time and takes initiative to participate in procedures</li> <li>works cooperatively as member of team and openly receives feedback and suggestions for improvement</li> <li>demonstrates accountability for actions and takes personal responsibility for learning</li> <li>adheres to program and clinical site policies and guidelines</li> </ul>	
Rating 0-10:	Comments
<b>Overall Clinical Competence (Knowledge, Skills, and Judgement)</b> <i>Expectations:</i> <ul style="list-style-type: none"> <li>demonstrates increasing knowledge and applies knowledge to practice situations</li> <li>shows improvement from one shift, one case, or one rotation to the next</li> <li>maintains appropriate level of completion of portfolio requirements</li> <li>communicates effectively with patients and staff</li> </ul>	
Rating 0-10:	Comments

### Status of Completion of Course Requirements:

<b>Attendance</b>	Days attended this evaluation period: _____
<b>Image Reviews Completed</b>	Total number completed to date: _____
<b>Clinical Skills Completed</b>	Total number completed to date: _____

### Result:

- At least **Meets Expectations**
- Remediation plan required (4 or less on any criteria); please notify Clinical Liaison; written feedback may be requested

Student Signature \_\_\_\_\_ CL or Designate Signature \_\_\_\_\_

Date Reviewed \_\_\_\_\_

# MIDS 231 Formative & Summative Evaluations

# SONO CLINICAL PORTFOLIO - NOVICE

## MIDS 231 Formative Evaluation #1 Week \_\_\_\_\_

Student's Name \_\_\_\_\_ Evaluator's Name \_\_\_\_\_

Date \_\_\_\_\_ Procedure Area(s) \_\_\_\_\_

Based on the current rotation, evaluate the student using the following rating scale:

*Below Expectations 0-2; Needs Improvement 3-4; Meets Expectations 5-8; Exceeds Expectations 9-10  
(see pg. 46 for more guidance on how to apply rating scale)*

<b>Professionalism and Responsibility</b> <i>Expectations:</i> <ul style="list-style-type: none"> <li>• demonstrates punctuality according to posted schedule and communicates whereabouts</li> <li>• makes productive use of time and takes initiative to participate in procedures</li> <li>• works cooperatively as member of team and openly receives feedback and suggestions for improvement</li> <li>• demonstrates accountability for actions and takes personal responsibility for learning</li> <li>• adheres to program and clinical site policies and guidelines</li> </ul>	
Rating 0-10:	Comments
<b>Overall Clinical Competence (Knowledge, Skills, and Judgement)</b> <i>Expectations:</i> <ul style="list-style-type: none"> <li>• demonstrates increasing knowledge and applies knowledge to practice situations</li> <li>• shows improvement from one shift, one case, or one rotation to the next</li> <li>• maintains appropriate level of completion of pocket book &amp; portfolio requirements</li> <li>• communicates effectively with patients and staff</li> </ul>	
Rating 0-10:	Comments

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### Status of Completion of Course Requirements:

<b>Attendance</b>	Days attended this evaluation period: _____
<b>Image Reviews Completed</b>	Total number completed to date: _____
<b>Clinical Skills Completed</b>	Total number completed to date: _____

### Result:

At least **Meets Expectations**

Remediation plan required (4 or less on any criteria); please notify Program Leader; written feedback may be requested

Student Signature \_\_\_\_\_ CL or Designate Signature \_\_\_\_\_

Date Reviewed \_\_\_\_\_



# SONO CLINICAL PORTFOLIO - NOVICE

## MIDS 231 Formative Evaluation #2 Week \_\_\_\_\_

Student's Name \_\_\_\_\_ Evaluator's Name \_\_\_\_\_

Date \_\_\_\_\_ Procedure area(s) \_\_\_\_\_

Based on the current rotation, evaluate the student using the following rating scale:

*Below Expectations 0-2; Needs Improvement 3-4; Meets Expectations 5-8; Exceeds Expectations 9-10*

*(see pg. 46 for more guidance on how to apply rating scale)*

<b>Professionalism and Responsibility</b> <i>Expectations:</i> <ul style="list-style-type: none"> <li>• demonstrates punctuality according to posted schedule and communicates whereabouts</li> <li>• makes productive use of time and takes initiative to participate in procedures</li> <li>• works cooperatively as member of team and openly receives feedback and suggestions for improvement</li> <li>• demonstrates accountability for actions and takes personal responsibility for learning</li> <li>• adheres to program and clinical site policies and guidelines</li> </ul>	
Rating 0-10:	Comments
<b>Overall Clinical Competence (Knowledge, Skills, and Judgement)</b> <i>Expectations:</i> <ul style="list-style-type: none"> <li>• demonstrates increasing knowledge and applies knowledge to practice situations</li> <li>• shows improvement from one shift, one case, or one rotation to the next</li> <li>• maintains appropriate level of completion of portfolio requirements</li> <li>• communicates effectively with patients and staff</li> </ul>	
Rating 0-10:	Comments

### Status of Completion of Course Requirements:

<b>Attendance</b>	Days attended this evaluation period: _____
<b>Image Reviews Completed</b>	Total number completed to date: _____
<b>Clinical Skills Completed</b>	Total number completed to date: _____

### Result:

At least **Meets Expectations**

Remediation plan required (4 or less on any criteria); please notify Clinical Liaison; written feedback may be requested

Student Signature \_\_\_\_\_ CL or Designate Signature \_\_\_\_\_

Date Reviewed \_\_\_\_\_

# SONO CLINICAL PORTFOLIO - NOVICE

## MIDS 231 Formative Evaluation #3 Week \_\_\_\_\_

Student's Name \_\_\_\_\_ Evaluator's Name \_\_\_\_\_

Date \_\_\_\_\_ Procedure area(s) \_\_\_\_\_

Based on the current rotation, evaluate the student using the following rating scale:

*Below Expectations 0-2; Needs Improvement 3-4; Meets Expectations 5-8; Exceeds Expectations 9-10  
(see pg. 46 for more guidance on how to apply rating scale)*

<b>Professionalism and Responsibility</b> <i>Expectations:</i> <ul style="list-style-type: none"> <li>demonstrates punctuality according to posted schedule and communicates whereabouts</li> <li>makes productive use of time and takes initiative to participate in procedures</li> <li>works cooperatively as member of team and openly receives feedback and suggestions for improvement</li> <li>demonstrates accountability for actions and takes personal responsibility for learning</li> <li>adheres to program and clinical site policies and guidelines</li> </ul>	
Rating 0-10:	Comments
<b>Overall Clinical Competence (Knowledge, Skills, and Judgement)</b> <i>Expectations:</i> <ul style="list-style-type: none"> <li>demonstrates increasing knowledge and applies knowledge to practice situations</li> <li>shows improvement from one shift, one case, or one rotation to the next</li> <li>maintains appropriate level of completion of portfolio requirements</li> <li>communicates effectively with patients and staff</li> </ul>	
Rating 0-10:	Comments

### Status of Completion of Course Requirements:

Attendance	Days attended this evaluation period: _____
Image Reviews Completed	Total number completed to date: _____
Clinical Skills Completed	Total number completed to date: _____

### Result:

At least **Meets Expectations**

Remediation plan required (4 or less on any criteria); please notify Clinical Liaison; written feedback may be requested

Student Signature \_\_\_\_\_ CL or Designate Signature \_\_\_\_\_

Date Reviewed \_\_\_\_\_

# SONO CLINICAL PORTFOLIO - NOVICE

## Formative Evaluation – (As Needed)

Student's Name \_\_\_\_\_ Evaluator's Name \_\_\_\_\_

Date \_\_\_\_\_ Procedure area(s) \_\_\_\_\_

Based on the current rotation, evaluate the student using the following rating scale:

*Below Expectations 0-2; Needs Improvement 3-4; Meets Expectations 5-8; Exceeds Expectations 9-10  
(see pg. 46 for more guidance on how to apply rating scale)*

<b>Professionalism and Responsibility</b>	
<i>Expectations:</i>	
<ul style="list-style-type: none"> <li>• <i>demonstrates punctuality according to posted schedule and communicates whereabouts</i></li> <li>• <i>makes productive use of time and takes initiative to participate in procedures</i></li> <li>• <i>works cooperatively as member of team and openly receives feedback and suggestions for improvement</i></li> <li>• <i>demonstrates accountability for actions and takes personal responsibility for learning</i></li> <li>• <i>adheres to program and clinical site policies and guidelines</i></li> </ul>	
Rating 0-10:	Comments
<b>Overall Clinical Competence (Knowledge, Skills, and Judgement)</b>	
<i>Expectations:</i>	
<ul style="list-style-type: none"> <li>• <i>demonstrates increasing knowledge and applies knowledge to practice situations</i></li> <li>• <i>shows improvement from one shift, one case, or one rotation to the next</i></li> <li>• <i>maintains appropriate level of completion of portfolio requirements</i></li> <li>• <i>communicates effectively with patients and staff</i></li> </ul>	
Rating 0-10:	Comments

.....

### Status of Completion of Course Requirements:

<b>Attendance</b>	<i>Days attended this evaluation period: _____</i>
<b>Image Reviews Completed</b>	<i>Total number completed to date: _____</i>
<b>Clinical Skills Completed</b>	<i>Total number completed to date: _____</i>

### Result:

At least **Meets Expectations**

Remediation plan required (4 or less on any criteria); please notify Clinical Liaison; written feedback may be requested

Student Signature \_\_\_\_\_ CL or Designate Signature \_\_\_\_\_

Date Reviewed \_\_\_\_\_

# SONO CLINICAL PORTFOLIO - NOVICE

## MIDS 231 Summative Evaluation

Student's Name \_\_\_\_\_ Evaluator's Name \_\_\_\_\_

Date (last day of rotation) \_\_\_\_\_ Procedure area(s) \_\_\_\_\_

Based on the current rotation, evaluate the student using the following rating scale:

*Below Expectations 0-2; Needs Improvement 3-4; Meets Expectations 5-8; Exceeds Expectations 9-10*

*(see pg. 46 for more guidance on how to apply rating scale)*

<b>Professionalism and Responsibility</b> <i>Expectations:</i> <ul style="list-style-type: none"> <li>• demonstrates punctuality according to posted schedule and communicates whereabouts</li> <li>• makes productive use of time and takes initiative to participate in procedures</li> <li>• works cooperatively as member of team and openly receives feedback and suggestions for improvement</li> <li>• demonstrates accountability for actions and takes personal responsibility for learning</li> <li>• adheres to program and clinical site policies and guidelines</li> </ul>	
Rating 0-10:	Comments
<b>Overall Clinical Competence (Knowledge, Skills, and Judgement)</b> <i>Expectations:</i> <ul style="list-style-type: none"> <li>• demonstrates increasing knowledge and applies knowledge to practice situations</li> <li>• shows improvement from one shift, one case, or one rotation to the next</li> <li>• maintains appropriate level of completion of portfolio requirements</li> <li>• communicates effectively with patients and staff</li> </ul>	
Rating 0-10:	Comments

### Status of Completion of Course Requirements:

<b>Attendance</b>	Days attended this evaluation period: _____
<b>Image Reviews Completed</b>	Total number completed to date: _____
<b>Clinical Skills Completed</b>	Total number completed to date: _____

### Result:

At least **Meets Expectations**

Remediation plan required (4 or less on any criteria); please notify Clinical Liaison; written feedback may be requested

Student Signature \_\_\_\_\_ CL or Designate Signature \_\_\_\_\_

Date Reviewed \_\_\_\_\_

# **MIDS 281 Formative & Summative Evaluations**

# SONO CLINICAL PORTFOLIO - NOVICE

## MIDS 281 Formative Evaluation #1 Week \_\_\_\_\_

Student's Name \_\_\_\_\_ Evaluator's Name \_\_\_\_\_

Date \_\_\_\_\_ Procedure Area(s) \_\_\_\_\_

Based on the current rotation, evaluate the student using the following rating scale:

*Below Expectations 0-2; Needs Improvement 3-4; Meets Expectations 5-8; Exceeds Expectations 9-10  
(see pg. 46 for more guidance on how to apply rating scale)*

<b>Professionalism and Responsibility</b> <i>Expectations:</i> <ul style="list-style-type: none"> <li>• demonstrates punctuality according to posted schedule and communicates whereabouts</li> <li>• makes productive use of time and takes initiative to participate in procedures</li> <li>• works cooperatively as member of team and openly receives feedback and suggestions for improvement</li> <li>• demonstrates accountability for actions and takes personal responsibility for learning</li> <li>• adheres to program and clinical site policies and guidelines</li> </ul>	
Rating 0-10:	Comments
<b>Overall Clinical Competence (Knowledge, Skills, and Judgement)</b> <i>Expectations:</i> <ul style="list-style-type: none"> <li>• demonstrates increasing knowledge and applies knowledge to practice situations</li> <li>• shows improvement from one shift, one case, or one rotation to the next</li> <li>• maintains appropriate level of completion of pocket book &amp; portfolio requirements</li> <li>• communicates effectively with patients and staff</li> </ul>	
Rating 0-10:	Comments

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### Status of Completion of Course Requirements:

<b>Attendance</b>	Days attended this evaluation period: _____
<b>Image Reviews Completed</b>	Total number completed to date: _____
<b>Clinical Skills Completed</b>	Total number completed to date: _____

### Result:

At least **Meets Expectations**

Remediation plan required (4 or less on any criteria); please notify Program Leader; written feedback may be requested

Student Signature \_\_\_\_\_ CL or Designate Signature \_\_\_\_\_

Date Reviewed \_\_\_\_\_

# SONO CLINICAL PORTFOLIO - NOVICE

## MIDS 281 Formative Evaluation #2 Week \_\_\_\_\_

Student's Name \_\_\_\_\_ Evaluator's Name \_\_\_\_\_

Date \_\_\_\_\_ Procedure area(s) \_\_\_\_\_

Based on the current rotation, evaluate the student using the following rating scale:

*Below Expectations 0-2; Needs Improvement 3-4; Meets Expectations 5-8; Exceeds Expectations 9-10*

*(see pg. 46 for more guidance on how to apply rating scale)*

<b>Professionalism and Responsibility</b> <i>Expectations:</i> <ul style="list-style-type: none"> <li>• demonstrates punctuality according to posted schedule and communicates whereabouts</li> <li>• makes productive use of time and takes initiative to participate in procedures</li> <li>• works cooperatively as member of team and openly receives feedback and suggestions for improvement</li> <li>• demonstrates accountability for actions and takes personal responsibility for learning</li> <li>• adheres to program and clinical site policies and guidelines</li> </ul>	
Rating 0-10:	Comments
<b>Overall Clinical Competence (Knowledge, Skills, and Judgement)</b> <i>Expectations:</i> <ul style="list-style-type: none"> <li>• demonstrates increasing knowledge and applies knowledge to practice situations</li> <li>• shows improvement from one shift, one case, or one rotation to the next</li> <li>• maintains appropriate level of completion of portfolio requirements</li> <li>• communicates effectively with patients and staff</li> </ul>	
Rating 0-10:	Comments

### Status of Completion of Course Requirements:

<b>Attendance</b>	Days attended this evaluation period: _____
<b>Image Reviews Completed</b>	Total number completed to date: _____
<b>Clinical Skills Completed</b>	Total number completed to date: _____

### Result:

At least **Meets Expectations**

Remediation plan required (4 or less on any criteria); please notify Clinical Liaison; written feedback may be requested

Student Signature \_\_\_\_\_ CL or Designate Signature \_\_\_\_\_

Date Reviewed \_\_\_\_\_

# SONO CLINICAL PORTFOLIO - NOVICE

## MIDS 281 Formative Evaluation #3 Week \_\_\_\_\_

Student's Name \_\_\_\_\_ Evaluator's Name \_\_\_\_\_

Date \_\_\_\_\_ Procedure area(s) \_\_\_\_\_

Based on the current rotation, evaluate the student using the following rating scale:

*Below Expectations 0-2; Needs Improvement 3-4; Meets Expectations 5-8; Exceeds Expectations 9-10*

*(see pg. 46 for more guidance on how to apply rating scale)*

<b>Professionalism and Responsibility</b> <i>Expectations:</i> <ul style="list-style-type: none"> <li>• demonstrates punctuality according to posted schedule and communicates whereabouts</li> <li>• makes productive use of time and takes initiative to participate in procedures</li> <li>• works cooperatively as member of team and openly receives feedback and suggestions for improvement</li> <li>• demonstrates accountability for actions and takes personal responsibility for learning</li> <li>• adheres to program and clinical site policies and guidelines</li> </ul>	
Rating 0-10:	Comments
<b>Overall Clinical Competence (Knowledge, Skills, and Judgement)</b> <i>Expectations:</i> <ul style="list-style-type: none"> <li>• demonstrates increasing knowledge and applies knowledge to practice situations</li> <li>• shows improvement from one shift, one case, or one rotation to the next</li> <li>• maintains appropriate level of completion of portfolio requirements</li> <li>• communicates effectively with patients and staff</li> </ul>	
Rating 0-10:	Comments

### Status of Completion of Course Requirements:

<b>Attendance</b>	Days attended this evaluation period: _____
<b>Image Reviews Completed</b>	Total number completed to date: _____
<b>Clinical Skills Completed</b>	Total number completed to date: _____

### Result:

At least **Meets Expectations**

Remediation plan required (4 or less on any criteria); please notify Clinical Liaison; written feedback may be requested

Student Signature \_\_\_\_\_ CL or Designate Signature \_\_\_\_\_

Date Reviewed \_\_\_\_\_



# SONO CLINICAL PORTFOLIO - NOVICE

## Formative Evaluation – (As Needed)

Student's Name \_\_\_\_\_ Evaluator's Name \_\_\_\_\_

Date \_\_\_\_\_ Procedure area(s) \_\_\_\_\_

Based on the current rotation, evaluate the student using the following rating scale:

*Below Expectations 0-2; Needs Improvement 3-4; Meets Expectations 5-8; Exceeds Expectations 9-10*  
(see pg. 46 for more guidance on how to apply rating scale)

<b>Professionalism and Responsibility</b>	
<i>Expectations:</i>	
<ul style="list-style-type: none"> <li>• demonstrates punctuality according to posted schedule and communicates whereabouts</li> <li>• makes productive use of time and takes initiative to participate in procedures</li> <li>• works cooperatively as member of team and openly receives feedback and suggestions for improvement</li> <li>• demonstrates accountability for actions and takes personal responsibility for learning</li> <li>• adheres to program and clinical site policies and guidelines</li> </ul>	
Rating 0-10:	Comments
<b>Overall Clinical Competence (Knowledge, Skills, and Judgement)</b>	
<i>Expectations:</i>	
<ul style="list-style-type: none"> <li>• demonstrates increasing knowledge and applies knowledge to practice situations</li> <li>• shows improvement from one shift, one case, or one rotation to the next</li> <li>• maintains appropriate level of completion of portfolio requirements</li> <li>• communicates effectively with patients and staff</li> </ul>	
Rating 0-10:	Comments

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### Status of Completion of Course Requirements:

<b>Attendance</b>	<i>Days attended this evaluation period: _____</i>
<b>Image Reviews Completed</b>	<i>Total number completed to date: _____</i>
<b>Clinical Skills Completed</b>	<i>Total number completed to date: _____</i>

### Result:

At least **Meets Expectations**

Remediation plan required (4 or less on any criteria); please notify Clinical Liaison; written feedback may be requested

Student Signature \_\_\_\_\_ CL or Designate Signature \_\_\_\_\_

Date Reviewed \_\_\_\_\_

# SONO CLINICAL PORTFOLIO - NOVICE

## MIDS 281 Summative Evaluation

Student's Name \_\_\_\_\_ Evaluator's Name \_\_\_\_\_

Date (last day of rotation) \_\_\_\_\_ Procedure area(s) \_\_\_\_\_

Based on the current rotation, evaluate the student using the following rating scale:

*Below Expectations 0-2; Needs Improvement 3-4; Meets Expectations 5-8; Exceeds Expectations 9-10*  
 (see pg. 46 for more guidance on how to apply rating scale)

<b>Professionalism and Responsibility</b> <i>Expectations:</i> <ul style="list-style-type: none"> <li>demonstrates punctuality according to posted schedule and communicates whereabouts</li> <li>makes productive use of time and takes initiative to participate in procedures</li> <li>works cooperatively as member of team and openly receives feedback and suggestions for improvement</li> <li>demonstrates accountability for actions and takes personal responsibility for learning</li> <li>adheres to program and clinical site policies and guidelines</li> </ul>	
Rating 0-10:	Comments
<b>Overall Clinical Competence (Knowledge, Skills, and Judgement)</b> <i>Expectations:</i> <ul style="list-style-type: none"> <li>demonstrates increasing knowledge and applies knowledge to practice situations</li> <li>shows improvement from one shift, one case, or one rotation to the next</li> <li>maintains appropriate level of completion of portfolio requirements</li> <li>communicates effectively with patients and staff</li> </ul>	
Rating 0-10:	Comments

### Status of Completion of Course Requirements:

Attendance	Days attended this evaluation period: _____
Image Reviews Completed	Total number completed to date: _____
Clinical Skills Completed	Total number completed to date: _____

### Result:

- At least **Meets Expectations**
- Remediation plan required (4 or less on any criteria); please notify Clinical Liaison; written feedback may be requested

Student Signature \_\_\_\_\_ CL or Designate Signature \_\_\_\_\_

Date Reviewed \_\_\_\_\_