

**VANDERBILT UNIVERSITY MEDICAL CENTER**

Center for Programs in Allied Health

Perfusion Program



Program Handbook

2024-2025

*Updated: February 2025*

## **INTRODUCTION TO PROGRAM HANDBOOK**

- The purpose of the Program Handbook is to serve as a reference and resource for the students in each of the programs in the VUMC Center or Programs in Allied Health (CPiAH). The policies and procedures in the Program Handbook are aligned with VUMC, CPiAH, and program policies that appear in the Catalog, as well as other locations. The purpose of the Program Handbook is to provide more specific details about the program, with a focus on operational information and procedures.

Other key documents with policy and procedure information important to students include:

- Catalog of the VUMC Center for Programs in Allied Health – Source of important policies and other information related to VUMC, the CPiAH, and each program. The catalog is available on the VUMC CPiAH website.
- VUMC CPiAH Website and Program Website – The Center for Programs in Allied Health has a website, and that website houses a website for each program within the CPiAH. Students will find vital information regarding both the institution and the programs on these sites.

## **IMPORTANT NOTICE TO STUDENTS**

All students enrolled in VUMC Center for Programs in Allied Health (CPiAH) programs are bound by all VUMC, CPiAH, and Program policies. By enrolling in a CPiAH program, every student acknowledges his or her responsibility to abide by and adhere to all institutional and programmatic policies and procedures. Students therefore have the responsibility of being familiar with the policies and procedures described in the Program Handbook, in the Catalog of the Center for Programs in Allied Health, and on the CPiAH and respective program's websites.

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## WELCOME

We are happy you chose the VUMC Perfusion Program, and it is our goal to deliver a perfusion educational experience that exceeds your expectations. This program has been assigned to serve as a learning experience for the development of academic achievement, clinical competency, and professional skills. Your responsibility is to help maintain the objectives of Vanderbilt University Medical Center, the Center for Programs in Allied Health (CPiAH), the Perfusion Program, and the affiliated institutions. The Perfusion Program Director will direct you during your educational and clinical experience. Any questions regarding program policies and procedures should be directed to the Program Director or the Clinical Coordinator. We look forward to having you in the program. Your cooperation in our mutual endeavors is expected and appreciated.

## LOCATIONS OF SERVICE AT VUMC

The diagnostic laboratories and outpatient services are located in The Vanderbilt Clinic (TVC). Medical Center North (MCN) houses various administrative offices, medical research facilities, classrooms, and other support services. For the most part, Vanderbilt University Medical Center Perfusion Program (VUMC-PP) students conduct clinical services on the third floor of the Vanderbilt University Hospital (VUH) and in the Main Operating Room (MOR) as well as the Hybrid OR, which is located in the Cardiac Catheterization laboratory on the fifth floor of VUH. Students rotate through each of the VUMC-affiliated facilities, including Monroe Carell Children's Hospital. The exact amount of time spent in each of the VUMC rotations depends on each student's clinical educational goals. Research laboratory facilities in which perfusion education may be needed are located in Medical Center North.

## PROGRAM ACADEMIC CALENDAR

<b>Perfusion</b>	
<b>2023-24 ACADEMIC CALENDAR</b>	
Program Start Date	Wednesday, August 23, 2023
Orientation Date(s)	Monday, August 21, 2023
Labor Day 2023	Monday, September 4, 2023
Fall Break 2023	Thursday October 19, 2023 - Friday, October 20, 2023
Thanksgiving 2023	Monday, November 20, 2023 - Friday, November 24, 2023
Winter Break 2023	Monday, December 18, 2023 - Friday, January 5, 2023
New Year's Day 2024	Monday, January 1, 2024
Martin Luther King Jr. Day 2024	Monday, January 15, 2024
Spring Break 2024	Monday, March 11, 2024 - Friday, March 15, 2024
Memorial Day 2024	Monday, May 27, 2024
Summer Break 2024	Saturday, June 29 - Sunday, July 7, 2024
Independence Day 2024	Thursday, July 4, 2024
Labor Day 2024	Monday, September 2, 2024
Thanksgiving 2024	Thursday, November 28, 2024 - Friday, November 29, 2024
Winter Break 2024	Saturday, December 21 - Sunday, January 5, 2025
New Year's Day 2025	Wednesday, January 1, 2025
Martin Luther King Jr. Day 2025	Monday, January 20, 2025
Spring Break 2024	Saturday, March 8, 2025 - Sunday, March 16, 2025
Program Completion Date	Friday, May 9, 2025

## TRANSCRIPT GRADES

Transcript grades be posted on Orbund Campus Management System two weeks after the semester ends. The final grade received is the summation of assessments performed by the student based on the course assessment distribution for each course described in each course syllabus. When evaluating acceptable academic progress, course grades are considered based on the final transcript grade. The total number of points earned by the student is divided by the number of credits taken by the student to determine the student's grade point average.

## ACADEMIC PROGRAM

The Perfusion Program is 22 consecutive months in length which includes five (5) semesters. The curriculum utilizes the principles of the cognitive, affective, and psychomotor domains to develop competent entry-level perfusionists. The course of study includes five (5) semesters and currently includes courses in anatomy and physiology, pathophysiology, pharmacology, perfusion technology, research, skills techniques, simulation training, and practical training (clinical rotations).

Students are introduced to the clinical arena, professional behavior, and ethics during the program. A significant portion of the 22-month training period is spent gaining experience in clinical perfusion, beginning in earnest in the second semester of the program.

### Curriculum Schedule (2023-2025 Cohort)

<b>FALL SEMESTER – FIRST YEAR (August through December)</b>		
<i>CLASS TITLE</i>	<i>CLASS DESCRIPTION</i>	<i>CREDITS EARNED</i>
A & P 501	Anatomy and Physiology	4.5
Sim 501	Simulation 1	3
Pharm 501	Pharmacology	3
CVPT 501	Cardiovascular Perfusion Technology 1	6.5
RES 501	Research I	2
<b>Total Hours</b>		<b>19</b>
<b>SPRING SEMESTER – FIRST YEAR (January through May)</b>		
CVPT 502	Cardiovascular Perfusion Technology II	2
Patho 501	Pathophysiology	4
RES 502	Research II	1
CR 501	Clinical Rotation I	15
Sim 502	Simulation II	1
<b>Total Hours</b>		<b>23</b>

<b>SUMMERS SEMESTER – SECOND YEAR (May through August)</b>		
CR 502	Clinical Rotation II	12
SEM 501	Seminars in Perfusion	1.5
<b>Total Hours</b>		<b>13.5</b>
<b>FALL SEMESTER-SECOND YEAR (August through December)</b>		
CVPT 503	Cardiovascular Perfusion Technology III	2
CR 503	Clinical Rotation II	16
SIM 503	Simulation III (continuation for outside rotations)	1
RES503	Research III	1
<b>Total Hours</b>		<b>20</b>
<b>SPRING SEMESTER – SECOND YEAR (January through May)</b>		
CVPT 504	Cardiovascular Perfusion Technology IV	2.5
CR 504	Clinical Rotations IV	16
SIM 504	Simulation IV	1
RES 504	Research IV	1
<b>Total Hours</b>		<b>20.5</b>

### **Competencies and Terminal Objectives**

The schedule of tests, final exams, and other assignments will be found in the course syllabi posted on Canvas, our LMS (Learning Management System). The course schedule will be discussed at orientation, or during the first meeting of each new didactic course. Exams are scheduled throughout the course and at the completion of each course; however, regular chapter topic exams, quizzes, and other exams may be part of each instructor’s curriculum.

Each course identifies objectives and competencies that must be demonstrated by the student. Each course utilizes testing to assess the student’s retention of the material to match the course objectives through examinations, written, practical, and oral presentations. Each course does have outside work assigned and is described in the syllabus.

### **Simulation Laboratory**

The Perfusion Program simulation lab is located in Medical Center North, CC-2316. The hours for simulation lab instruction will be given at the beginning of each semester. The Program Director / Simulation Coordinator may also have open simulation lab hours throughout the semester. The wet lab experience will begin by introducing students to diverse types of perfusion equipment. Laboratory experience will begin early in the program, allowing hands-on training to support the didactic classes.

Simulated experiences allow the perfusion student the unique and valuable opportunity to begin functioning independently as a perfusionist. This experience is designed to increase student autonomy and will allow the student the opportunity to practice perfusion technique in a less stressful environment.

### **Medical Center Weekly Conferences**

Each student will be required to attend weekly conferences as required in the course syllabi.



## **Student Performance Conferences**

Individual student performance conferences with the Program Director and/or the Clinical Coordinator will be held at the end of each clinical rotation and at the end of the semester. If a student has concerns or issues related to academic or technical performance, he/she can schedule a meeting with the Program Director at any time. The Program Director shall, if possible, based upon staffing and the surgical schedule, maintain regular weekly office hours for students to seek guidance and assistance during their tenure. Such a schedule will be made periodically available to the students for their use.

## **Comprehensive Mock Board Examination**

Each student must pass a comprehensive mock board as a requirement for CVPT IV to be allowed to graduate from the program. This exam is a multiple-choice, computer-based exam with content and questions similar to the Board Certification exam. The purpose of this comprehensive final exam is to ensure that students have the knowledge needed for certification and to aid students in their preparation for the certification exams. Students must earn at least 75% to pass the exam and will have three attempts in which to do so. The first attempt for the comprehensive final exam will be scheduled for the first week of March by the Program Director and administered to the class as a whole. Any students who do not pass on the first attempt will individually schedule their second and third attempts, if needed, with the Program Director. Once the student has received a score of 75% or greater, s/he will not need to complete any additional remediation.

Should the student not pass the comprehensive final after the third attempt, the Program Advisory Committee will meet to review the student's academic performance throughout the year. This review will either result in a failure to graduate or in an extension of training in the area(s) of concern. The decision made by the Advisory Committee may be appealed according to the Program's Appeals Policy.

## **Practical Examinations**

Practical examinations will be given during SIMS 501, 502, and 503 and prior to graduation in the simulation lab. The practical examinations are competency-based and will be used to assess a student's clinical readiness.

Passing is required for progression and completion of the program. Should the student not pass the practical exam, the student will be placed on academic probation and will be subject to an action plan and/or clinical remediation and will not be allowed to participate in active clinical activities until achieving 75% or greater on the practical exam. The student will be given an opportunity to repeat the second practical exam. Should the student not pass a second practical exam the Advisory Committee will review the student. This review will either result in dismissal from the program or an extension of the probationary period with a detailed timeline for passing a competency-based practical exam. The decision made by the Advisory Committee may be appealed according to the Program's Appeals Policy.

## **Research Paper / Project**

Each student/team may be required to submit a research paper and presentation to graduate from the program. In all likelihood, student research projects will encompass topics that are related to ongoing departmental research projects, and as a result thereof, topics for student research may be selected by the Medical and/or Program Directors. Student input is always considered. Student research projects may include critical analysis of publications related to specific topics. Student research projects may be presented to the perfusion community at a local, state, or national venue. Further information will be provided in advance of the project selection and deadlines as part of the Research Course Series.

## **Clinical Rotation Schedule**

The student will be introduced to the proper conduct of clinical perfusion, and as the student's knowledge and skills become more sophisticated, the student will gradually assume greater responsibility for the case.

Early clinical case rotation is limited to those cases that the Program Director, Clinical Coordinator, or Site Coordination (a designee) determines will involve basic techniques, and the student will work under the direct supervision of those clinical instructors/perfusionists with the greatest experience in teaching in general, in supervising students, in demonstrating express clinical expertise based upon standards of practice, policies, and procedures then in effect within the Vanderbilt Heart and Vascular Institute and Perfusion Department. Gradually, the students will be exposed (over time) to more involved technical operations, including managing various equipment and perfusion devices necessary for clinical perfusion. Participation of less experienced staff perfusionists functioning as supervisors is overseen by the Program Director, and gradually, as the perfusion technology student becomes more experienced, participation by less experienced staff in teaching increases.

Early experience for the students consists of adult cases. The Program Director, Clinical Coordinator, or Site Coordinator (a designee) shall determine which student shall participate in which case during the daily operating schedule, and when necessary, which staff perfusionist will supervise a student during any case. This system results in a smooth transition for the student through the continuum of easy to difficult cases, and at the same time it optimizes competency with the relative clinical instructor/staff level of experience.

In infant and pediatric cases, the perfusion student's participation is limited to set-up and close observation throughout the early and middle clinical experience. Participation as an active perfusionist for the student during infant and pediatric cases may be allowed during the late clinical experience (at the discretion at the clinical site). Before the student can function as a primary perfusionist during infant and pediatric cases, s/he must have shown consistently superior understanding and performance as primary perfusionist over a compelling number of adult cases. The pediatric perfusion team will determine when such a level of performance is attained.

Rotation schedules will be assigned by the Program Director or the Clinical Coordinator. Students must participate in clinical rotations outside of the Nashville area. While on an outside clinical rotation, students are responsible for their food, housing, and transportation to and from the rotation. Students in the program must prepare to do two outside rotations of eight (8) to twelve (12) weeks each. Students will spend the first portion of CR501 (January to mid-May) at Vanderbilt University Medical Center, Centennial Medical Center, Memorial Medical Center (starting in March) and in an observation role at Monroe Carrel Children's Hospital at Vanderbilt. Students will begin participating in other clinical rotation sites in mid-May. Some rotations will require at least 1 (one) week observation and orientation during the active rotation. Students may have the option to do a third off-site rotation. The Program Director or Clinical Coordinator can and will alter the student rotation schedule if needed to enhance or remediate the student's competency of his/her clinical skills.

## **Clinical Rotation Sites**

Clinical rotation sites are subject to change and may change frequently throughout the year. You should consult with the Program Director or Clinical Coordinator for the most up-to-date list of active clinical

rotation sites. We are guests at these institutions, and it is up to each clinical site's availability to accommodate Vanderbilt Perfusion Students. Site may cancel clinical rotation at any time.

## **CLINICAL EDUCATION OBJECTIVES**

The Clinical Education Objectives will be addressed in the clinical rotation syllabus.

## **CLINICAL EDUCATION AND ON-CALL ASSIGNMENTS, POLICIES AND PRACTICES**

### **Clinical Assignments**

Clinical assignments will be made each day by the Clinical Coordinator, Program Director, Clinical Coordinator, or designee. Students must be available for assignment at 6:00 a.m. (or earlier as designated by the clinical site) in order to be fully prepared to provide their portion of perfusion care prior to the time that the patient enters the operating room and be fully immersed in the learning opportunities available at each clinical site.

It is likewise important for perfusion students to be readily available during the workday to participate in and assist in on-going clinical work to which they may not be primarily assigned. Clinical opportunities may arise at any time and students should be open to participating in unscheduled cases even when not assigned call responsibilities. Students should stay in the operating room(s), the pump room, or near it to receive timely assignments, and so that Clinical Coordinator may obtain their presence immediately. Students should understand and accept that it is the student's responsibility to be available for clinical assignments. Students must stay until 3:00pm, unless otherwise directed by the clinical site coordinator.

### **Daily Clinical Assignments**

The clinical schedule timing is subject to clinical rotation for which the student is participating in. It is the student's responsibility to contact the scheduler for each rotation no later than 9 p.m. if s/he has not received their clinical assignment by text for the following day. In addition, "on-call" students must keep their phones "on" when "on-call" as outlined in the on-call policy.

### **Clinical Experience in Transportation of a Patient**

The Perfusion Program has sought approval for the students to participate in transportation of patients from outside facilities to VUMC if their supervising certified clinical perfusionist (CCP) desires their participation. We have been successful in getting Risk Management to add perfusion students to the VUMC Aircraft AD&D Policy as well as get Legal to approve an acknowledgement form. We have been given permission by the administration of the Center for Programs in Allied Health to allow students to participate in these types of clinical experiences with the completion of the travel acknowledgement form. Copies of the form can be found on Canvas LMS in the clinical rotation information course.

As a program, we support the decision of the clinical instructors to include or exclude students from these activities. Although, we feel these experiences will be advantageous for the students to participate in while under the supervision of CCP; we understand the complexity of the management during transportation and will support the exclusion of a student.

If a student is offered a patient transport experience the following steps should be followed:

- Students will notify the Program Clinical Coordinator or Program Director of their invitation to participate.
- Students will complete the acknowledgment form and sign their supervising CCP before departure.
- Students will submit the completed form to the Perfusion Program Director for placement in the student's permanent file.
- If the transport is in the middle of the night and immediate approval cannot be obtained, students must fill out the form and email either the Clinical Coordinator or Program Director before leaving their clinical site.

The student must take ownership of the communication and the completion of the required acknowledgment form.

### **Clinical Experience Daily Availability**

A student not immediately available in the operating suite for assignment during the day is considered absent from the workplace and program. Unexcused absences from the workplace and program are not tolerated. A no-call, no-show is not allowed. If this occurs, the sites notify us that the student is subject to immediate probationary status and possible dismissal from the program. Any such unexcused absence will result in a zero grade for that day, and will be made up by the student, day for day, either during scheduled program breaks or following the date of graduation. In addition, a student failing to report to clinical responsibilities will be subject to the disciplinary action protocol and could be subject to immediate probation or dismissal from the program.

Based upon the nature of the business of surgery, a perfusionist's workday is not a "9-5" business, and it is not unusual for the workday to be extended by emergencies, delays in the surgery schedule, and the like. Therefore, to maximize student exposure to the clinical experience, student dismissal at the end of the clinical experience day is at the discretion of the Site Designee or Clinical Coordinator or the Program Director.

### **Clinical Experience Daily Dismissal**

Student dismissal shall occur at the end of the clinical experience day; that is when cases other than on-call or unanticipated emergency cases are completed. Student dismissal shall not occur nor is it inappropriate for students to seek dismissal, prior to 3:00 pm on any training day, unless the student is excused by the Clinical Coordinator or designee. Student dismissal at the end of the clinical experience day shall be at the end of their clinical assignment, and not until their patient has left the operating room, is stable in the intensive care unit, and the cases for which the student was assigned are cleaned, stocked, and reset for the next procedure. **Before leaving clinical assignment, the student MUST notify the Clinical Instructor or Site Coordinator or Chief Perfusionist, indicating they have been approved to leave clinic.**

Failure to obtain permission to be excused from the operating room at any time during the clinical experience day, including the conclusion of the workday, is not acceptable and will result in the student receiving a zero for that clinical experience day, and the student will make up that workday, day by day, during scheduled program breaks or following the date of graduation. In addition, a student failing to gain approval to be dismissed from clinical responsibilities will be subject to the disciplinary action protocol and could be subject to immediate probation or dismissal from the program.

As with any and all matters of behavior and assignment within the program, the Attendance Policy is subject to disciplinary action. As with all policies within the program, the chain of command shall always be followed. Program policy is subject to change at the discretion of the program officials, but written and verbal notifications will be provided to the student body.

## **POLICY FOR CLINICAL ASSIGNMENT OF VAD's and ECMO**

### **Purpose**

The purpose of this policy is to provide a mechanism by which the students in the Perfusion Program participate in the monitoring, maintenance, and troubleshooting of various circulatory assist devices in use within the Medical Center while under the supervision of a certified clinical perfusionist.

### **Intent**

The program's intent is to provide the students with actual and meaningful contact with various circulatory assist devices as part of their clinical and didactic training in perfusion care. The program's intent is to provide the students with actual and meaningful contact with various circulatory assist devices as part of their clinical and didactic training in perfusion care. Since the program cannot predict if and when any circulatory assist device may be clinically applied, it is imperative that the student clinical assignments be flexible to the extent that significant contact with the assist devices is made, notwithstanding normal or otherwise assigned clinical duties.

It is furthermore the intent of the program that student duties regarding assist devices are closely monitored in terms of the level of responsibility to be assumed by the student and furthermore monitored in terms of time commitment throughout the day and night.

### **On-Call Responsibilities**

As a part of the educational experience in the Perfusion Program, students will be required to be “ON-CALL” during CVPT 1, Clinical Rotations I, II, III, and IV. The hours and frequency will vary depending on the clinical assignments. Students on-call must have their phones on. The school no longer uses pagers. It is the “ON-CALL” student’s responsibility to be available in the operating room within the designated time (usually a ½ hour) of the clinical rotation site in which the student is participating. The program understands and respects that students need both time off from clinical and other training, as well as time for family, etc. Nonetheless, there are no training programs (or employment settings) where the weekend call is disregarded – it is and will remain an important part of caregiving, as well as training.

Call will be assigned by the Clinical Coordinator, Site Coordinator, or a designee. Students must be at the work site within thirty (30) minutes or less following a call or text to come into the hospital depending on the clinical rotation. Refer to attendance policy regarding unexcused absences.

Upon notification of the Program Director from the clinical rotation site of a student’s failure to comply with the “ON-CALL” responsibilities of the clinical rotation site, a student will be subject to disciplinary action protocol with the possibility of dismissal from the clinical rotating site *and up to and including dismissal from the program.*

### **Chain of Command for Clinical Assignments**

As with any group, and especially regarding a clinical practice group, it is imperative that the chain of command be followed to facilitate efficient and structured administrative management of Program and

Department-related affairs. From time-to-time concerns or disagreements might arise related to individuals in the chain of command. In these situations, the student is required to maintain the utmost professionalism, engaging only in constructive behaviors and speech that reflect favorably on the student, the Program, the Center for Programs in Allied health, VUMC and associated clinical areas/departments.

In the event of any questions regarding a clinical or other assignment by any student, the student is strongly encouraged to resolve the question with the clinical or didactic instructor assigned to their case or other duties or course.

If no resolution can be reached within a reasonable time, the questions should be posted to the Chief Perfusionist or the Clinical Site Coordinator, with notification to the Program Director and/or the Clinical Coordinator or designee for further evaluation. The Clinical Coordinator or the Program Director will resolve the matter with the Chief Perfusionist and/or Program Medical Director, as appropriate to the case. Failure to follow this chain of command is a violation of Program policy, subject to disciplinary action.

In short, the chain of command is the following during all clinical assignments:

1. Clinical Instructor (if one is assigned) or Clinical Site Coordinator
2. Chief Perfusionist and/or Clinical Site Coordinator
3. Clinical Coordinator
4. Program Director
5. Medical Director
6. Program Advisory Committee (see disciplinary portion of Handbook)

## **ASSESSMENT OF STUDENT CLINICAL AND ACADEMIC PERFORMANCE**

### **Evaluation of Student Didactic Performance**

Student didactic performance is monitored through the learning platform Canvas at VUMC. A student must maintain a passing grade of >75%. In the event that a student fails an assignment or falls below 75% the student will first receive written counseling. Remediation and corrective measures will be addressed with the student. If the student does not recover their course grade to >75% or resubmit an assignment, once in the program, for a passing averaged graded assignment after remediation the student will be presented to the competency committee to address probationary status with the potential of removal from the program.

Students must submit all assignments and coursework by the due dates posted on Canvas. The student is responsible for monitoring Canvas routinely for updates or changes to the course as the instructor adjusts for proper learning pathways.

### **Evaluation of Student Clinical Performance During Clinical Rotations**

Student competency is measured by a daily electronic clinical evaluation form. The daily clinical evaluation form was designed to address the cognitive, affective, and psychomotor learning domains of the program and the interpersonal domain. The student must send the form to the clinical instructor, who completes the evaluation, and then reviews it with the student as soon as possible following each case. Students are responsible for completing the initiating Redcap evaluation form and providing it to the correct clinical instructor's email at the beginning of the clinical experience.

Students are required to submit a case log of the daily evaluations from the previous week as specified in course instruction. Students on rotations outside Nashville must electronically submit their evaluations to the program. If the evaluations show consistency in areas of a student's performance that need special attention, this will be addressed through increased instruction and practice. Extra simulation sessions, facilitated and supervised by the Program Director, may be required.

Students are also evaluated at the end of rotation evaluation by their clinical instructors, as outlined in the syllabus of each clinical course. The evaluation scale is as follows:

1. Dependent: > 90% of the time the student almost REQUIRES direction, guidance, monitoring, and support, while 10% of the time the student EXHIBITS assertiveness, efficiency, focus, and eagerness to learn.
2. Novice: 75% of the time the student REQUIRES direction, guidance, monitoring, and support, while 25% of the time the student EXHIBITS assertiveness, efficiency, focus and eagerness to learn.
3. Assisted: 50% of the time the student REQUIRES direction, guidance, monitoring, and support, while 50% of the time the student EXHIBITS assertiveness, efficiency, focus and eagerness to learn.
4. Supervised: 25% of the time the student REQUIRES direction, guidance, monitoring, and support, while 75% of the time the student EXHIBITS assertiveness, efficiency, focus and eagerness to learn.
5. Self-Directed: <10% of the time the student REQUIRES direction, guidance, monitoring, and support, while >90% of the time the student EXHIBITS assertiveness, efficiency, focus and eagerness to learn.

Students are expected to make clinical progression as outlined in each of the clinical course syllabuses.

### **Methods of Evaluation of Clinical Course Performance**

A final grade of 75% or greater is necessary to receive a passing mark.

1. Competency Checklist
  - a. Prior to pumping their first case, a student must have completed their clinical competency checklist.
2. Case Evaluations
  - a. Submitted after each case through Redcap online portal with a case log submitted weekly through file upload in Canvas.
3. End of Rotation Evaluations
4. Professionalism
  - a. Students communicate effectively, respectfully, and appropriately to the surgical team.
  - b. Student demonstrates a professional attitude: prompt, punctual, reliable, and dependable. Students should assume appropriate workload; accept requests and follow through with assignments.
  - c. Student is motivated to provide the "best patient care."
  - d. Students dispose of the circuit properly without increased exposure to blood. Student leaves his/her workspace clean and prepares for the next colleague.
  - e. Student communicates any significant factors affecting the patient's hemodynamic status to his/her clinical instructor.

- f. Students are required to respect, value, and protect the confidentiality related to patient care.
  - g. Students will communicate with any clinical rotation site directly to resolve any conflict of schedules, on call responsibilities.
5. Rotation Writeups
    - a. Patient Work-Up Forms
    - b. Weekly Progress Reports
    - c. Submission of Patient Work-Up Forms and Weekly Progress Reports will be due weekly as specified in the course syllabus through Canvas/Email.
  6. Case Log
    - a. Daily submission of the information required for the case log
    - b. Case Log is found on the program website.
  7. Conference Log
  8. Monthly Timesheets (submitted monthly to the Program Director (no later than the 5<sup>th</sup> of each month). Clinical instructors must sign them.

## **CLINICAL COMPETENCY COMMITTEE**

The Clinical Competency Committee consists of the Program Director, Clinical Coordinator, Simulation Coordinator, and Clinical Perfusion Instructors of the Perfusion Program. The Program Director may appoint a Chairperson of the Clinical Competency Committee and request periodic meetings to evaluate a student's clinical performance.

At the completion of the case requirements for each clinical level or at any time at the request of the Program Director, the members of the Clinical Competency Committee will evaluate the student's clinical performance. The student will advance to the next clinical level by passing the preceding clinical course.

If a perfusion student does not successfully complete Clinical Rotation I, II, or III or IV, the student will be dismissed from the program, with appropriate warning and opportunity for remediation (full SAP Warning, Probation and Dismissal policies are described in the Catalog). Failure to successfully complete any course in the Clinical Rotation Series I, II, III, or IV), as required to satisfy the clinical competencies of the program and maintain satisfactory academic progress in the program, would result in the student not meeting the requirements for graduation in the program. A student dismissed for unsatisfactory academic progress may reapply to the program in the future.

Each student is evaluated by the Committee prior to graduation to determine whether the student is clinically competent and meets the minimum requirements of the American Board of Cardiovascular Perfusion (ABCP). No student is given clinical clearance from the program until (2 weeks prior to graduation) and only after a review has been completed on their independent number of clinical cases.

## **STUDENT PHYSICAL REQUIREMENTS**

A perfusionist must be able to perform a variety of physical movements in order to operate and manipulate the heart-lung machine and other heavy equipment. Any student admitted to the program must acknowledge his/her ability to conduct the physical standards with or without reasonable accommodations.

1. Push, pull or lift 50 pounds routinely and more than 50 pounds occasionally.



2. Stand, bend, stoop, kneel, squat, or sit and reach for prolonged periods of time.
3. Adequately control and manipulate equipment weighing up to 500 pounds on wheels.
4. Adequately control fine motor skills for extended periods of time.
5. Maintain calm, controlled mannerisms over prolonged periods of time.
6. Sufficiently distinguish audible differences including audio signals, patient and co-worker communication and patient conditions.
7. Adequately visualize and perceive image data on computer and video monitors to acquire and interpret hemodynamic data with color distinction.
8. Fluently demonstrate English language skills to provide optimum communication with patient and healthcare team members.
9. Follow verbal and written instructions to provide optimum care for patients.

Students must provide verification of annual physical to participate in specific clinical affiliations.

### **ATTENDANCE AND PERSONAL LEAVE POLICY**

Clinical Training within a post graduate medical technical program most closely resembles a residency program or fellowship in advanced medical/surgical training. Students are expected to be present full-time throughout their time in the Perfusion Program. The students in the Perfusion Program will be exposed to the widest variety of clinical situations and cases, many of which occur during emergency situations, after hours, and on weekends. Therefore, in order to maximize student exposure to these clinical situations, students are required to sometimes spend long hours in the operating room, either participating in, observing, or available for and anticipating in the unusual or emergency case.

Attendance of all didactic lectures will be taken during each meeting of the course. During the clinical rotation courses, students will be required to maintain a daily time sheet. These timesheets must be signed by a Clinical Instructor and submitted to the Program Director by the 5<sup>th</sup> of the following month. (Example: May time sheet is due into the Directors office by June 5<sup>th</sup>). Documentation of any absences and/or tardiness is to be noted.

The exception being on-call assignments made during clinical rotations, perfusion students must sign into their clinical assignments in a timely manner, generally at 6 AM depending on the daily responsibilities. Students are required to attend lectures, simulation sessions, medical conferences, and clinical rotations. Tardiness is not tolerated since the clinical team, including the perfusion staff and students, nurses, anesthesiology, and surgery, and most importantly the patient, rely upon each member of the team to be ready to perform their particular care prior to the time the patient arrives in the operating room. Furthermore, each time a student is unavailable to participate clinically they are depriving themselves of the opportunity to receive the maximum benefit of their training within the allotted time. It is therefore appropriate to require students to participate in clinical training beyond the date of their anticipated graduation, should any student fail to adhere to attendance or other policies.

Failure to attend a mandatory assigned event within the program will be addressed by the Program Director and the student will be given an assigned requirement to be completed on the topic presented with a specific deadline of submission of the assignment. Any unexcused absence for a didactic lecture or laboratory session will result in a 25-point penalty on any coursework required for submission on that date or any exam to be given on that date. The 25-point penalty supersedes the syllabi 5-point penalty per day when a student is missing course or lab requirements due to an unexcused absence. Failure to attend an assigned clinical case will be addressed by the Program Director and could result in additional clinical participation or clinical probation up to dismissal from the program. At a minimum, a student with an

unexcused absence from a clinical assignment will receive a “0” for the daily case evaluation and will be required to make up the unexcused clinical absence during schedule program break or following graduation.

Any unapproved time off taken may result in the student’s certificate being withheld until the hours are made up after graduation. The student with three consecutive days of unapproved absence will be placed on probation while the academic committee decides if the student will be dismissed from the program.

### **Requests for Personal Time Off**

Students must complete the Request for Personal Time-Off form two (2) weeks prior to the requested time off, except for the two circumstances described below. The Request for Personal Time-Off form is available on the program website or in the student call room. The form must be fully completed and will require approval from the Chief Perfusionist of the rotation in which the student is participating at the time of the requested time off. Regardless, all time off requests must be submitted to the Program Director and copy the Clinical Coordinator in writing via email. Personal time off will not be approved without a properly completed form. Once approved, students must obtain the Clinical Site Coordinator’s approval and resubmit a time off form to the Director.

Juniors are not eligible for personal time off. The PTO time bank will be discussed with the Senior Class the first week of the Fall Term.

There are three exceptions to the prior notification rule.

1. An emergency/illness, or
2. Job interviews (please try to schedule these during times at Vanderbilt)
3. Bereavement

In these instances, the following rules apply.

1. Interview Absence: The chief perfusionist of the rotation site for which the student is/will be participating in at the time of the interview needs to be given communication of this absence by both the Program Director and the student as described above.
2. Emergency/Illness Absence: Time off for an illness requires immediate communication with the Program Director, Clinical Coordinator and the Chief Perfusionist of the rotation site. A student out due to an illness for more than two (2) days must provide a physician’s written notification/medical excuse to the Program Director. Following such absence, a student is not allowed to return to class or clinical rotation until such paperwork is completed.
3. In cases of both interviews and emergencies/illness:
  - a. The student must speak with the Program Director or Clinical Coordinator and the Chief Perfusionist of the clinical rotation EACH day of their absence.
  - b. Upon return, the request form must be completed and submitted to the Program Director for final approval.
4. Students will not be permitted to take time off during the last two (2) weeks of the program that you will return to campus. Exceptions will be allowed for the following reasons.
  - a. Bereavement
  - b. Jury Duty
  - c. Illness with a written medical excuse.
5. Students absent without proper notification/approval and documentation, as described in this policy, may be suspended, and dismissed from the program.

- a. Bereavement: The Personal Time Off Request form must be completed, but only approval by the Program Director is required. A student may take up to three (3) days of leave **without** penalty for a death in the family. Family is defined as a spouse, son, daughter, mother, father, mother-in-law, father-in-law, sister, brother, grandparent, or grandchild. The policy also includes domestic partner, stepparent, stepsibling, or stepchild.
- b. Jury Duty: The Personal Time Off Request form must be completed, but only approval by the Program Director is required. Time spent on jury duty **does not** result in loss of personal hours off. If the jury obligation is less than three (3) hours a day, the student must report to clinic/classroom for the rest of his/her daily responsibilities.
- c. NOTE: A student who appears in court on their own behalf must notify the Program Director and the Clinical Coordinator immediately. They will be required to participate in additional clinical days prior to completion of the program or during scheduled breaks. The student will be dismissed from the program if convicted of a felony.

### **Communication in Case of Illness or Emergency**

In the case of an illness or emergency in which a student must be absent without prior notice, the student must report the situation immediately by:

1. Calling the Clinical Coordinator at the clinical site or the instructor for the lecture. If the Clinical Coordinator is not available, the student will leave a message with the perfusionist in the perfusion department who answered the call and email the instructor to follow up.
2. Emailing the Program Director and the Clinical Coordinator with pertinent information, including how long the student anticipates his absence to be and how the information was communicated to the instructor (*i.e.*, phone call or email).
3. If the absence extends beyond one day, the student must keep the instructor and Program Director current on the duration of time away.
4. Any absences from illness/injury greater than two (2) days require a doctor's excuse before makeup work can be rescheduled.
5. Texting is not considered notification.

A student who may have a communicable condition/illness should not participate in any program activities, as doing so presents an infection risk to others, including students, faculty members and patients and their families. If a student experiences any of the following, he or she should not report for class or clinical duties:

1. Fever >101 F
2. Diagnosis of a communicable illness (medical documentation should be submitted)
3. Vomiting/Diarrhea
4. Positive COVID Diagnosis

The student must follow the Communication Policy as outlined.

### **Timesheet Documentation of Personal Time Off**

Absences are documented on the weekly time sheet located on the student site of the program website and must be promptly completed.

### **Holidays**

Students will observe all CPiAH holidays. No student is required to take call on holidays.

## **Tardiness**

A student is considered tardy if the student is more than fifteen (15) minutes late for any lecture, laboratory, or clinical rotation. If a student is more than thirty (30) minutes late for any lecture or laboratory, the student is marked as absent. If the student is over thirty (30) minutes late for a clinical experience, they are excused from the clinical rotation and must immediately report to the Program Director and/or Clinical Coordinator. Students must notify the course instructor and Program Director using the same guidelines as provided for communication of emergency situations. Two (2) episodes of tardiness during the program will result in a student write up.

\*Exceptions may be made for extreme circumstances that are out of the student's control, such as an interstate closure due to a traffic accident. However, students are expected to understand the typical daily traffic flow along their route to plan the drive without incident. If a student is tardy for a test or simulation session, the student will be allowed to take the assessment or participate in the simulation; however, no additional time will be granted to the tardy student. The student must complete it by the same time as the students who began at the designated time.

## **Excessive Tardiness, Use of Sick Leave and Unavailability for Clinical Experiences**

An excessive number of tardy days is defined as greater than five (5) of each throughout the program. Excessive tardiness is detrimental to patient care, and disruptive to the clinical site, the cardiac team, and the program. The program considers it unprofessional conduct and failure on a student's behalf to perform assigned duties. In such cases, the student will be subject to disciplinary action, up to and including dismissal for a rotation and/or from the program.

## **Make Up Policy**

Absences that take place when a student's personal time off is used up may, at the discretion of the Program Director, be made up. Students are required to obtain the permission of the Program Director to make up any missed attendance. Any missed time, didactic or clinical, beyond the student's allotment of personal time off hours must be made up in the clinical setting and only during scheduled breaks or after program completion/graduation. Make up hours are calculated in increments of one (1) hour. The Program Director will counsel any student requiring make up clinical hours.

Faculty presentations and assigned coursework are vital components in the learning process. In the event of an excused absence during a scheduled didactic course, the student will refer to the course syllabus for make-up options specific to that course. Any assignments missed during an absence must be completed upon the student's return. If a simulation or research session is missed, the student must schedule the make-up work at the instructor's convenience, not the student. Each student is responsible for following up with the instructor within 24 hours of return to school to decide to make up any missed work. All make-up work must be completed within 3 workdays of the student's return from an excused absence. Failure to schedule or communicate with the instructor about make up work will result in an automatic zero (0) and may result in disciplinary action, up to and including temporary suspension and dismissal from the program. Exams will be made up only upon approval of the course instructor; instructors are not required to provide the opportunity to make up missed examinations. Students should refer to course syllabus for exam dates.

**ALL TIME OFF NEEDS TO BE APPROVED.**

## **STUDENT WORK POLICY**

Due to the complex content and intense time commitment associated with the program's curriculum, the student is encouraged to not work during the program. If a student needs to work, the student is required to disclose their work arrangements and get permission from the Program Director to work. Any employment and work hours required for the student to maintain an income should not interfere with his/her didactic or clinical assignments including but not limited to class meetings, clinical assignments, on-call or academic performance or a peer's clinical schedule. If a student's work hours interfere with academic, clinical, or professional performance in the program, the student will be asked to curtail work activity. Once the student starts clinical rotations, students will not be allowed to work. Students may NOT receive or be compensated for clinical assignments related to their perfusion training.

Students gain educational clinical experience to prepare them for experience as a future perfusionist. While students are involved in their clinical rotations, time spent in the operating room will be tracked daily on each clinical preceptor evaluation form. Time spent in the operating room will be reviewed by the Clinical Coordinator to verify each student is spending adequate time in the clinical setting. VUMC always provides supervision during clinicals. At no time are students substituted for staff or paid personnel. Students abide by guidelines in place. After 16 hours in a 24-hour period, a student must take an 8-hour break. Students are not required to work more than 32 hours per week. Students may choose to participate in an optional case over the 32 hours per week, at the discretion of the clinical instructor, clinical coordinator, or program director. Optional additional hours will be monitored by the clinical coordinator and students will not participate more than the 16 hours in the 24-hour period. All students are afforded the choice to take 15-minute breaks every 3 hours during clinical rotations.

## **STUDENT WITHDRAWAL FROM PROGRAM**

A student considering voluntary withdrawal from the program should make an appointment with the Program Director to discuss his/her situation. In many cases a student may be provided with, or referred to, support resources that allow him/her to successfully remain in the program.

If a student, after having met with the Program Director, decides to voluntarily withdraw from the program, written notification must be provided, either in hard (paper) copy or by email.

1. If written notification is mailed or hand-delivered, it must be addressed to the Assistant Director for Enrollment and Financial Aid, Center for Programs in Allied Health, Vanderbilt University Medical Center, Center for Programs in Allied Health, 2211 Garland Avenue, Room 3402 Medical Research Building 4, Nashville, Tennessee, 37232-5510.
2. If notification is emailed, it must be sent to [CPiAAdministration@vumc.org](mailto:CPiAAdministration@vumc.org).

Written notification, delivered by either method above, must state the student's intent to withdraw. If the student is willing to share it, the reason for withdrawal should be included. The student may indicate a withdrawal date different from the letter date, provided they continue to participate as required until the withdrawal date. Full institutional policies related to student withdrawal are contained in the VUMC Center for Programs in Allied Health catalog.

## **STUDENT CONDUCT**

All students are bound by several standards of conduct, as outlined in the CPiAH catalog, including:

1. VUMC Code of Conduct
2. VUMC Center for Programs in Allied Health Honor Code
3. American Board of Cardiovascular Perfusion (ABCP) Code of Ethics

#### 4. American Society of Extracorporeal Technology (AMSECT) Code of Ethics

In addition, the Perfusion Program provides its own statement related to student academic and professional conduct.

### **STUDENT BEHAVIOR**

Our program is committed to creating and supporting a positive and respectful learning environment in which all students succeed and have the required tools and knowledge to positively impact patient care. Students are expected to adhere to the following behavioral expectations throughout the program:

#### **Professionalism and Ethical Conduct**

1. Students must behave in a professional and ethical manner while on campus or representing the program or VUMC during off-campus activities.
2. Student behavior must support patient care and safety while performing any program-related activities.
3. Students must abide by laws and regulations governing the sharing of sensitive information.

#### **Attendance and Punctuality**

1. Students must be on time and present in their designated areas during the day as scheduled. Students should not ask to leave early or arrive late and should schedule personal activities during the day around the class schedule. Refer to the Attendance Policy for more information.

#### **Communication and Collaboration**

1. Students are expected to be engaged and participate in classroom discussions and activities.
2. Students are expected to communicate and collaborate with each other during classroom activities.
3. Students must communicate respectfully and professionally with instructors, classmates, patients, and other healthcare professionals in written and verbal communication.

#### **Academic Integrity**

1. Students are expected to uphold lofty standards of academic integrity and honesty and must not participate in cheating, plagiarism, or other forms of academic dishonesty. See the Honor Code for more information.

#### **Safety**

1. Students must be familiar with all personal and patient safety regulations and practices established by the program, Vanderbilt Medical Laboratories, and accrediting and regulatory organizations. To be familiar, students must complete all assigned safety training and demonstrate the ability to operate safety equipment.
2. Students must wear appropriate personal protective equipment (PPE) for the activities in which they are participating and follow all established safety procedures.
3. Students must report any unsafe environments or practices to the program director.

#### **Compliance with Program Policies and Procedures**

1. Students are expected to review and abide by all program policies, procedures, and requirements outlined in program handbooks, syllabi, and other official documents.

2. Failure to comply with program policies and procedures may result in disciplinary action, up to and including dismissal from the program.

### **Personal Items**

1. Students are expected to bring their laptops, calculators, and other items needed for learning and taking notes with them to class daily.
2. Students are not allowed to use their cell phones in the educational settings. Doing so may violate HIPAA regulations and contaminate the phone. Please step out into a hallway or other room to use cell phones.

### **Consequences of Violations**

Violations of this student behavior policy may result in disciplinary action, including but not limited to verbal warnings, written reprimands, probation, suspension, or dismissal from the program, in accordance with established procedures outlined in this handbook, the CPiAH catalog, and VUMC policies.

## **HONOR CODE**

The Vanderbilt system holds that there is an agreement of mutual trust between students and faculty. Each student promises integrity in the work submitted and the instructors, in turn, presume the student's honesty. The honor system provides an atmosphere of trust essential to the fulfillment of the program's purpose of educating individuals of professional character. The members of the Vanderbilt community regard a breach of honor as a serious breach of their principles, their purpose, and academic enterprise. As such, any documented breach in the Honor Code is cause for immediate dismissal from the program.

All work submitted as part of course requirements is assumed and expected to be the product of the student submitting it unless credit is given by the student using proper footnoting and bibliographic techniques in APA format or as prescribed by the course instructor. Cheating, plagiarizing, falsifying information, using artificial intelligence (AI), or any action designed to deceive any member of the faculty are prohibited. These activities will not be accepted whether they are intentionally or unintentionally performed. The system applies not only to examinations but also to all work handed in or reported, such as papers, lab reports, solutions to problems, practical exams, etc.

**Each instructor has the prerogative to include or exclude what will be covered by the honor code in the course. However, all assignments are to be the work of each individual student without any assistance from other sources, including individuals or AI, unless the instructor specifically allows these sources to be used.**

Without written designation otherwise, the Honor Code applies to the following:

### **Academic Integrity**

1. Saving, copying, or using examinations or other assessment materials from any class is prohibited. This includes posting assessment questions to online websites designed for review or flashcards.
2. Falsification of documents, including checklists, preventative maintenance or quality control sheets, results, attendance and time sheets, and other materials, is prohibited.
3. Sharing questions or answers from any assessment used in the program is strictly prohibited.

4. Plagiarism of any student assignment or portion of the assignment or submitting an assignment or portion of the assignment without proper citation is prohibited.
5. Students are required to report a known or suspected violation of the Honor Code to the program director.

### **Originality and Attribution**

1. Student assignments are prepared solely by the student and have not been previously submitted for a grade in any other course, whether at Vanderbilt University Medical Center or elsewhere, or otherwise published. Similarly, students are not allowed to assist or provide answers to assignments.
2. Assignments are not to be discussed with other previous, current, or past students.
3. Take-home assignments are not to be completed with input from others or with the use of class or outside materials unless allowed in writing by the instructor.
4. Electronic, paper, or internet resources are not to be used unless specifically allowed in writing by the instructor. If allowed, the student must be prepared to show or notate sources to the instructor.
5. Unauthorized collaboration or use of unauthorized materials during examinations or assignments is prohibited.
6. The student must properly cite all sources used to create materials, including text, data, images, and ideas, in accordance with the current APA citation format.

### **Use of Artificial Intelligence (AI)**

1. Students are encouraged to use artificial intelligence to enhance their writing skills and to help them study, but student use of artificial intelligence cannot violate other aspects of this Honor Code, including the practice of only using AI when specifically allowed to do so for the assignment.
2. Students must cite the use of artificial intelligence using the current APA format to ensure transparency and honesty in their assignments.
3. Artificial intelligence apps or websites that enhance student learning or review student-submitted materials, including Grammarly, Socratic, and Photo Math, are encouraged for student use outside of formal learning assessments.
4. Artificial intelligence apps or websites to which students submit actual quizzes, study questions, or test questions are strictly prohibited.
5. Artificial intelligence apps or websites to which students submit patient or other protected information is strictly prohibited.
6. Students may not use artificial intelligence apps or websites during quizzes, exams, or laboratory practices.
7. Students should understand that artificial intelligence has limitations, and students are responsible for the quality and information submitted in their assignments. Students will not be allowed to appeal grades for erroneous information provided by artificial intelligence.

### **Intellectual Property**

1. Students must respect the intellectual property rights of others, including proper use of copyrighted materials, proprietary software, and confidential information. Students may not engage in unauthorized distribution, reproduction, or sharing of copyrighted materials or proprietary information, including academic materials and software resources.

### **Use of Technology**

1. Students must adhere to institutional policies and guidelines regarding the use of computers, software, internet resources, and electronic communication.



2. Students must not engage in activities that compromise the security, integrity, or privacy of electronic systems, networks, or data, including hacking, unauthorized access, or distribution of malware.

The Honor Code at VUMC Perfusion Program specifically prohibits actions deemed as breaches of the mutual trust for which the honor system stands. Violations of the Honor Code provisions are cause for disciplinary actions imposed by the Program Advisory Committee.

It is the duty of all students to show their appreciation of the trust placed in them not only by their own conduct but also by their insistence on the absolute integrity of their fellow students. Students may feel this is a heavy burden, but it is a much more serious situation when they allow themselves or a fellow student to begin the process of dishonor which destroys both the individual and the community. It is, therefore, the duty of every student to behave in a manner that will discourage their fellow students from violating the honor code. Additionally, it should be noted that failure to report a violation of the Honor Code is in and of itself a violation of the Honor Code.

The grievance procedure shall be available to the student when disciplinary action is taken due to the alleged violation of the Honor Code. In addition, students in the program are subject to the policies of academic integrity of the Allied Health Program as outlined in the institutional catalog.

### **Professional Boundaries**

Vanderbilt University Medical center and the Perfusion Program are committed to maintaining an academic environment in which members work freely together, both in and out of the classroom. Program staff member(s), clinical and didactic, and student(s) who engage in personal relationships should be aware of their professional responsibilities and are responsible to ensure that the relationship does not raise concern about favoritism, bias, ethics, and conflict of interest. Romantic or sexual relationships between students and program staff members and/or faculty, clinical and/or didactic, are strictly prohibited. In addition, romantic or sexual relationships between students and patients are strictly prohibited.

## **PROBATION**

### **Academic Probation Policy**

#### **Purpose**

This policy supports students struggling academically while providing them with opportunities for improvement and success.

#### **Policy Statement**

Any student that does not achieve a minimum grade of 75% but achieves a grade of at least 70% in any Student Didactic or Clinical Rotation course will be placed on Academic Probation for that course.

#### **Notification of Probation**

1. Students who receive a final course grade between 70% and 74% will meet with the program director and educational coordinator(s) and will be notified in writing of their probationary status once final grades have been posted.

2. This notification will include the course for which the student will be placed on academic probation, the final grade the student received in the course, conditions of the probationary period, the date at which the probationary period expires, and notes from the program administrators and student to document specific circumstances surrounding the probation.

### **Remedial Examination**

1. Students on academic probation will successfully complete their probationary period by taking a remedial examination for the course they previously failed and scoring at least 75% on the remedial exam.
2. The remedial examination will comprehensively cover the topics and learning objectives of the course and will be administered under the supervision of the program director or an educational coordinator.
3. The remedial examination must be completed within two (2) weeks of notification of the probation.
4. The remedial examination will be in the form of a comprehensive examination in the course for which the student is on academic probation. The grade from this comprehensive examination will replace the previous course grade.

### **Criteria for the Remedial Examination**

1. Students must score at least 70% in the course for which they are placed on academic probation.
2. The student must independently review the presentations and other materials from the deficient coursework for at least two (2) weeks.
3. The student will not be given time away from the typical program coursework or classes to complete any studying or remedial work.
4. The student is not allowed to be tardy or absent during this two-week period unless an emergency or documented illness verified by a medical excuse justifies this tardy or absence.

### **Outcome of Remedial Examination**

1. If a student passes their remedial examination with a 75% or greater, they have successfully completed the terms of academic probation and will be released from their probation.
2. If a student does not pass their remedial examination with a minimum of 75%, they are immediately dismissed from the program.
3. If a student does not achieve a minimum grade of 75% in a second course, a clinical rotation, or a behavioral evaluation, they are immediately dismissed from the program.
4. Students who are dismissed from the program based on their remedial examination grades may appeal through the CPiAH appeals process.

### **Student Support and Resources**

1. During the probationary period, the student will meet with the program director, education coordinator, and the student support services manager as requested by the student to identify issues and discuss ways to improve their grades. Program administrators will provide study materials and tutoring as requested and as they are available to do so.
2. Students will have access to all course presentations, classroom library materials, and other online and printed materials provided by the program.

### **Behavioral Probation Policy**

#### **Purpose**

This policy supports students struggling with professional behaviors necessary for working in healthcare while providing them with opportunities for improvement and success.

## **Policy Statement**

A student will be placed on Behavioral Probation if they earn less than 75% on a behavioral evaluation.

## **Notification of Probation**

1. Students who earn less than 75% on a behavioral evaluation will meet with the program director and educational coordinator(s) and will be notified in writing of their probationary status once the behavioral evaluation has been completed by the clinical instructor.
2. This notification will include a review of the behavioral evaluation, conditions of the probationary period, the date at which the probationary period expires, and notes from the program administrators and student to document specific circumstances surrounding the probation.

## **Behavioral Evaluation**

1. The program administrators will provide the student with assigned training related to professional behavior, specifically to the area(s) in which the students received grades below 7.5.

## **Outcome of Probation**

1. A student will remain on behavioral probation until graduation unless the student is already on academic probation or earns less than 75% on a second behavioral evaluation.
2. If a student earns less than 75% on a second behavioral evaluation or is already on academic probation, they will be dismissed from the program.

## **Student Support and Resources**

1. During the probationary period, the student will meet with the program director, education coordinator, and other individuals employed in VUMC support services as requested by the student to identify issues and discuss ways to improve their behavior.

## **Causes of Immediate Dismissal**

The following are causes for immediate dismissal, superseding the above protocol:

1. Unauthorized removal, destruction, or theft of any property of the program, hospital, employees, or patients. This includes physical property, including instruments, reagents, and exams. This also includes all course and assessment materials, e.g., presentations, study questions, quizzes, and exams, found in the online learning management system, unless given specific approval for removing these materials is provided in writing by the instructor of the course.
2. Breach of any of the program's Honor Code policy.
3. The use or unauthorized possession of any intoxicants, illegal drugs, or narcotics on hospital grounds or impairment or intoxication from alcohol or drugs while performing program activities.
4. The use, possession, or distribution of firearms, explosives, fireworks, or knives on hospital grounds.
5. Willful submission of false information or alteration of any records or reports.
6. Disclosure of confidential information or discussion of any patient information with unauthorized personnel.
7. Negligence or misconduct in the performance of duty.
8. Disobedience or insubordination (any complaint concerning an employee or instructor should be brought to the attention of the program director, education coordinator, or the medical director immediately).
9. Drawing blood, performing procedures, or providing medication to a patient without the order of a physician.

10. Abusing a patient, employee, or fellow student. This includes physical, verbal, and emotional abuse and negligence or failure to adhere to established protocols and safety procedures.
11. Submission for publication of any material relating to the educational experience at Vanderbilt without prior written approval of the affiliate school and Vanderbilt.
12. Demonstrating behavior that violates professional ethics, integrity, or standards of conduct, including dishonesty and fraud.
13. Committing criminal offenses or engaging in illegal activities that pose a threat to the safety, security, or reputation of the program or organization.
14. Failure to meet academic requirements following attempts at remediation through academic or behavioral probation.
15. Demonstrating a pattern of repeated violations of program policies, regulations, or expectations, or displaying a disregard for established rules, guidelines, or directives.
16. Demonstrating unprofessional behavior repeatedly, including disrespect, unprofessional communication, disruptive behavior, or insubordination towards instructors, preceptors, program administrators, or classmates.

## **PATIENT PRIVACY AND HIPAA**

Perfusion Program students have access to a variety of confidential patient information during their training in the program as it is necessary to access this information to adequately prepare and participate in the management of patient on cardiopulmonary bypass. The Perfusion Program requires a commitment by each student associated with Vanderbilt University Medical Center (VUMC) and all program clinical affiliations for which the student and faculty of the program with access to confidential information including patient information will appropriately safeguard and keep confidential.

VUMC has established policies and procedures (<https://ww2.mc.vanderbilt.edu/Inforprivacysecurity/>) to meet HIPAA federal requirements for handling patient information. Information about any patient is strictly confidential and is legally protected from disclosure by HIPAA. It may only be shared with another employee or health care provider when that information is pertinent to patient care, required by law or specifically authorized by the patient. Information should never be shared with any unauthorized person. When on rotations with other clinical affiliations, students in the program are required to follow the confidentiality policies of those institutions and in some instances the student will be required to sign a confidentiality agreement per the affiliation's request.

## **PROGRAM EVALUATION**

A vital part of the Perfusion Program is continuous review and evaluation of the curriculum and techniques used in teaching to assess the effectiveness of the program in meeting its goals. Evaluations are used to identify those areas which need improvement. Evaluation of the program is accomplished as follows.

1. The program participates in an annual review as required to maintain our accreditation through Accreditation Committee – Perfusion Education (AC-PE). This organization requires a periodic self-study to assess program compliance with established guidelines for the operation of a training program. This also involves peer review of the self-study and an onsite visit for continued accreditation.

2. Students play a significant role in the evaluation process by completing formal evaluations on each course as it is completed in both the lecture and the practicum operations of the program at the completion of each semester. These evaluations are distributed and administered through the Redcap online tool and are anonymous. These evaluations are collected by the Program Director and shared with the faculty, clinical instructors, their managers, and the program officials. Information from these evaluations provides input on our faculty's effectiveness and suggestions for improvement in the program curriculum.
3. Students are also asked to complete an evaluation at the end of the training program to provide input on the overall organization and operations of the program. These evaluations are distributed and administered by the Perfusion Program Director. The Program Director shares the feedback with the faculty, the clinical coordination, and the program officials. Information from these evaluations provides input on our faculty's effectiveness and suggestions for improvement in the program curriculum.
4. Evaluations are distributed to the program graduates to assess its curriculum's effectiveness between 6 months and one year after graduation. Once again, this information is used to assess the effectiveness of the program curriculum. These evaluations are distributed and administered by the AC-PE with results sent to the Perfusion Program Director. The Program Director shares the feedback with the faculty, the Clinical Coordinator, and the program officials. Information from these evaluations provides input on our faculty's effectiveness and suggestions for improvement in the program curriculum.
5. Evaluations are distributed to the employers of recent graduates to assess the effectiveness of the program's curriculum between 6 months and one year following graduation. Once again, this information is used to assess the effectiveness of the program curriculum. These evaluations are distributed and administered by the AC-PE with results sent to the Perfusion Program Director. The Program Director shares the feedback with the faculty, the Clinical Coordinator, and the program officials. Information from these evaluations provides input on our faculty's effectiveness and suggestions for improvement in the program curriculum.
6. The Center for Programs in Allied Health administers and distributes an annual evaluation to the student body of all the Programs in Allied Health to assess the effectiveness of the student's respective programs and the administration.
7. The Perfusion Program administers and distributes an annual evaluation to all the programs' clinical affiliations to assess the effectiveness of the program and the quality of our students. These evaluations are distributed and administered through the Redcap online tool and are anonymous to the respondent but not the clinical site. These evaluations are collected by the Program Director and shared with the faculty, the Clinical Coordinator, and the program officials. Information from these evaluations provides input on our faculty's effectiveness and suggestions for improvement in the program curriculum.

## **ACADEMIC ADVISING**

Students in the program meet with the Program Director and Clinical Coordinator at the end of each quarter and after the completion of each 8-week clinical rotation. Students in the program are encouraged to meet with the Program Director as often as they feel necessary/helpful. The Program Director, Clinical Coordinator, and Clinical Instructors maintain an open-door policy for students throughout the program.

## **DRESS CODE**

A student's dress in the clinical and didactic setting shall be tasteful, conservative and communicates a professional image. Student scores in professional conduct will reflect adherence to the dress code. Two or more violations of the dress code will result in disciplinary action. Gum chewing is not considered professional and is not allowed during community events or during rotation hours.

Student dress must consist of the following:

In clinical environment:

1. Light blue scrubs (VUMC issued)
  - a. No visible clothing is allowed underneath scrub tops. If a student wears scrubs to the hospital, scrubs should be changed for new laundered scrubs.
2. Perfusion students have direct patient contact and/or contact with blood or body fluids. Students are **REQUIRED** to adhere to the Personal Protective Equipment (PPE) policies of a medical professional
  - a. **GLOVES MUST ALWAYS BE WORN** during the management and operation of any piece of extracorporeal equipment.
  - b. **PROTECTIVE EYEWEAR MUST ALWAYS BE WORN** during the management and operation of any piece of extracorporeal equipment.
  - c. In addition, surgical gowns or similar clothing can be worn to provide a protective barrier.
3. Shoes must be appropriate for medical/business environment. Open toed shoes, sandals, flipflops are not to be worn in the clinic. Clean athletic shoes may be worn. Students can place disposable shoe covers over their shoes.
4. VUMC or clinical affiliation identification badge must be worn.
5. Long hair must be secured away from the face.
6. **NO** perfume or cologne will be worn.
7. Nails must remain an active length and any color worn should be a neutral or pastel color. Artificial nails are not permitted in patient care areas at any time.
8. Jewelry must be limited.
9. Tattoos and body piercings except ear lobes, including tongue and nose piercings, must not be visible.
10. Facial hair must be neat and well-trimmed.
11. Scrubs cannot be worn to and from the hospital. Students are required to change into new scrubs daily.
12. Socks must be worn.

In didactic environment and to/from clinic:

1. VUMC or clinical affiliate identification badge must be worn.
2. Shoes must be appropriate for medical/business environment. Flip flops are not to be worn. Socks must be worn.
3. Blouses or collared shirts must be worn tucked in, if designed to be. See-through blouses, t-shirts with slogans, sweatshirts, camisoles, spaghetti straps and halters are inappropriate. Strapless tops or dresses and midriff tops are not acceptable. Tops must fully cover the waistline. There should be no gaps between the tip of trousers or skirts and the bottom of the blouse or shirt. Deep V-neck or scoop neck tops, including camisoles that reveal cleavage, are inappropriate for work environment. Sweatshirts or t-shirts with slogans will not be worn.

4. Sundresses may be worn with a jacket. Full, split skirts or skorts are acceptable if of an appropriate length. Miniskirts, tight fitting knit skirts, mini dresses, shorts, jumpsuits, and sweat suit/athletic suits/shorts are inappropriate.
5. Dress slacks, dress jeans (no cuts or holes), dress shorts of reasonable length, and Capri pants may be worn. Leggings are appropriate if they are under a full-size shirt/skirt.
6. Jean cut shorts, sweatpants, or athletic shorts are not permitted.
7. Hair must be clean, neatly trimmed, and appropriately styled for medical/business environment.
8. Facial hair must be neat and well-trimmed.
9. NO perfume or cologne will be worn.
10. Nails must remain an active length and any color worn should be neutral or pastel color. Artificial nails are not permitted in patient care areas at any time.
11. Jewelry must be limited, simple and suitable for professional attire.
12. Body piercings other than ear lobes, including tongue and nose piercing, must not be visible at any time.

Students must abide to the Dress Code for each clinical site's rules and regulations regarding appearance.

Any failure to adhere to the Dress Code and Clinical Appearance Guidelines may result in suspension of program activities until the code and guidelines are met, and additional disciplinary action may be taken. If a student is suspended from required program activities due to violation of the dress code, the time away from activities plus one hour will be deducted from the student's personal time off.

## **WEAPONS POLICY**

VUMC and the Perfusion Program prohibits student possession of firearms or other dangerous weapons while on the Vanderbilt campus or any affiliating campus or facility. Any student found to be in violation of this policy will be subject to disciplinary action, including immediate termination. If a student observes another individual, staff member, patient, or family member in possession of a firearm or dangerous weapon—or receives information to this effect—he/she should immediately report to the Director or Preceptor in authority.

## **ADDITIONAL PROGRAM POLICIES**

### **Student Workroom**

Perfusion Program students have a Perfusion call room located in Medical Center North. The space has computers, cabinet space, office supplies, refrigerator, and microwave.

The space is in a professional office space. Therefore, while in the work room, students are required to act and speak in a professional manner. This space is student-only space and should be kept clean. Students should turn lights off when leaving the room.

Each student will be provided a key for the student call room. If the student loses the key or damages anything in the call room, it will be the student's responsibility to pay for the costs of replacement or repair. Depending on the nature of the damage to the students' call room, the student causing the damage may be subject to disciplinary action.

### **Textbook Library**

Students may sign out books from the student library in the Program Director's office for two weeks at a time. Students must fill out the book sign-out form and have the Program Director sign off.

## **Maintenance of Program-Issued Equipment**

All program equipment issued to students, including five (5) tubing clamps, parking cards, and ID badges are the property of the Program and the student to whom such items are issued are responsible for their care and use. Failure to turn in program-issued equipment in proper condition, notwithstanding normal wear, and tear, will result in the student being liable for the cost of such equipment and such fees will be assessed and paid prior to the time graduation privileges are granted to a student otherwise eligible for graduation.

## **Cell Phones**

All students are required to have a cell phone that can receive texts. Cell phones are **NOT** allowed in the classroom or clinical setting. Personal cell phones/iPads/handheld devices **MUST be turned off completely** and stored in the student's backpack/purse during all scheduled classes, lab time, and while in the clinical setting. In the clinical setting, communication between students and/or the Clinical Coordinator about the clinical schedule must be done through cell phones. Only with explicit approval from their Clinical Instructor may a student use text messaging to communicate. While on bypass, students are not allowed to use cell phones. Two or more violations of this cell phone policy will result in disciplinary action.

## **BLS Certification**

Basic Life Support (BLS) training must be presented to the Program Director within one month of beginning the program. Students will be required to maintain a current certification until graduation. Verification of HIPAA training must be provided to the Program Director within two weeks of beginning the program. All students must maintain this certification during the program's tenure.

## **Travel**

The student is responsible for transportation costs and safety liability in travel to and from Vanderbilt, hospital affiliates located outside VUMC/Nashville, and travel to professional conferences. The student should complete an Authorization to Travel Form before the travel date and submit it to the Program Director. These forms are available in the Center for Programs in Allied Health central office. The Authorization to Travel Form should be completed when traveling outside metro Davidson County for a clinical rotation and/or a professional conference.

## **Severe Weather Policy**

As a healthcare professional, clinical perfusionists are always expected to arrive for duty as the patient is the number one priority. However, there will be days in which the weather is severe and dangerous for travel. If weather conditions are severe enough that the benefit of the student in clinical attendance does not outweigh the risk, the student may be excused from clinical attendance by a joint decision between the student and the Program Director, or as directed by the administration of the Center for Programs in Allied Health. Didactic courses may be cancelled at the discretion of the course instructor and/or the administration of the Center for Programs in Allied Health. If a student missed a clinical assignment or didactic lecture due to severe weather without an excused absence from the Program Director and/or the administration of the Center for Programs in Allied Health, a Personal Time-Off Request Form must be submitted.

## **Annual Physical**



Students may be required to provide verification of an annual physical for participating with some clinical affiliate sites at the site's discretion.

### **Health Insurance**

Students must maintain health insurance during the program.

### **Student Services Policy**

While in clinical rotation performing patient care service, a clinical instructor will supervise students. Students shall never be employed to take the place or assume the responsibilities of the clinical staff at VUMC or its clinical affiliates. Students are limited to patient care competencies as described in the course-specific syllabus. Specific tasks such as drawing up and check drugs alone or co-checking donor blood products remain the primary responsibility of the clinical instructor in patient care areas, even if the student is a registered nurse. Students do not perform intraoperative blood pumping, autologous blood transfusion, ventricular assist devices or extracorporeal membrane oxygenation without direct clinical instructor supervision.

SHOULD STUDENTS FIND THAT THEY ARE ASSIGNED OR ASKED TO PERFORM PATIENT CARE ACTIVITIES WITHOUT DIRECT CLINICAL INSTRUCTOR SUPERVISION, THE STUDENT MUST IMMEDIATELY CEASE ACTIVITY, CONSULT A CLINICAL INSTRUCTOR OR CLINICAL SITE COORDINATOR, AND NOTIFY THE CLINICAL COORDINATOR OR PROGRAM DIRECTOR.

### **Professional Conferences**

Students are encouraged to submit papers and posters for presentations, participate in student functions, and attend professional conferences. Students will be allowed six (6) days to be used through the twenty-two (22) months of the program to attend professional conferences. Students must complete the Request for Personal Time-Off Form for conferences and get approval from the chief perfusionist of the rotation in which the student is participating at the time of the conference and from the Program Director. The form must be received in the Program Director's office at least two (2) weeks prior to the conference request. The time spent attending a professional conference will not be deducted from the student's personal hours unless the student's time spent at a professional conference exceeds the allotted six (6) days. Students must agree to and sign the Conference Attendance Code of Conduct before gaining approval from the Program Director to attend the conference. The Program Director will provide the student with this form upon receiving notification of a student's desire to attend a professional conference.

#### **Conference Attendance Code of Conduct**

1. Attend all the scientific sessions and be on time in the morning for the meetings.
2. Refuse any dinner or bar tab paid by vendors unless it is a conference sponsored event.
3. Dress professionally when attending all meetings – business professional.
4. Treat all perfusion students from other programs with the utmost respect.
5. Know that violation of any of the above rules may result in probation and/or dismissal from the program.
6. Be a proud professional representative of Vanderbilt University Medical Center, and the VUMC Center for Programs in Allied Health.