



Admission Observation Form

DIAGNOSTIC MEDICAL SONOGRAPHY PROGRAM –

3201 W. 16th St. • Sedalia, MO 65301-2199

CARDIAC TRACK

To the applicant: Observe a minimum of 8 hours with a sonographer in one or more clinical sites and use a new form for each site (make copies of this form as necessary). Observation hours are good for 18 months. It is recommended that students observe more than 8 hours and in more than one clinical setting. Contact the site in advance and schedule the observation. Please dress appropriately for your observation. Take this form with you and give to the sonographer to complete and sign. Submit the signed form with your application packet. If student is employed at this facility, a maximum of 8 hours observation at this site may be counted. NOTE: The Admissions Committee may contact the facility for additional information or verification.

Dates of Observation

Total # of Hours Observed

Student Name (please print)

Facility Name

City/State

To the Supervising Sonographer: As an admission requirement to the SFCC Diagnostic Medical Sonography – Cardiac Track Program, applicants are required to observe for a minimum of 8 hours in one or more clinical settings. If the information listed above for the prospective student is correct for today’s observation, please complete the section below, sign the form and return it to the student. Forms with missing signatures will not be accepted.

Type of exams that the student observed at this facility on the above date(s):

- _____ Cardiac Echocardiogram
_____ Limited Cardiac Echocardiogram
_____ Cardiac Echo with Bubble Study
_____ Cardiac Echo with Contrast
_____ TEE
_____ Stress Echocardiogram
_____ Pediatric Echocardiogram
_____ Vascular-Carotid
_____ Vascular-Venous Upper Extremity
_____ Vascular-Venous Lower Extremity
_____ Vascular-Arterial Upper Extremity
_____ Vascular-Arterial Lower Extremity
_____ Invasive Procedure (centesis)
_____ Other (vascular or cardiac ultrasound exams)

Printed name of observed sonographer: _____

Signature: _____

Did the student present himself or herself in a professional manner? ____ Yes ____ No

Thank you for sharing your time and expertise. Please complete the comment box below or contact our office if you have further comments regarding this applicant.

Additional comments about this applicant:

SFCC Sonography- Cardiac Track
Maddie Stephan, Program Director
660-596-7418