

PSHMC SCHOOL OF MEDICAL LABORATORY SCIENCE

STUDENT POLICIES

These policies are to be utilized as guidelines for actions and decisions made throughout the year.

1. **Supervision:** (Refer to the Laboratory Management and Clinical Instructor rosters)
 - a. The clinical instructor to which you are assigned should be considered your immediate supervisor. Any technical problems should be reported to her/him. Overall responsibility for the school is the Program Director who reports to the PHC Laboratory Director. Please feel free to speak to any of these individuals regarding any problem you may have, utilizing the appropriate chain of command (i.e., Instructor, then Program Director, then Director of the Laboratory). Problems are expected to be resolved in a timely manner. If the Program Director is unavailable, feel free to speak with the staff in the Education Division.
2. **Schedule:** (Refer to the rotation schedule for specific dates)
 - a. The clinical year is broken up into two phases; didactic with student laboratory training and clinical rotations. Clinical rotations within the divisions are generally Tuesday-Friday; Mondays are set aside for specialty topics, guest lectures, projects, or rotation-specific content.
 - b. Core topics of Didactic/Student Lab include: Phlebotomy; Chemistry; UA and Body Fluids; Hematology and Coagulation; Blood Bank; Microbiology; Virology; Parasitology; Mycology; Immunology/Serology; Interprofessional Education; Molecular Diagnostics; Research; Laboratory Operations.
 - c. Clinical rotations include: Chemistry; Hematology/Coagulation; Microbiology; Blood Bank; Phlebotomy; Lab Operations. Rotations are guaranteed for all students upon acceptance into the program.
 - d. Reviews are interspersed throughout the year. Comprehensive Exams occur within the last two weeks of the program.
 - e. The following holidays are observed by the school: Labor Day, Thanksgiving Day (and the day after Thanksgiving), Christmas Day, New Year's Day, and Memorial Day. Students receive two weeks of vacation for either winter or summer break, as applicable.

Note: Due to the needs of the hospital, affiliated clinical partners, clinical staff, anticipated events or unscheduled happenings at the medical center the clinical schedule is subject to change. Students will be notified of these changes as they occur. **Students should anticipate some minor changes to the schedule throughout the year to insure availability of guest speakers and quality learning experiences.**

3. **Hours:**
 - a. Scheduled hours vary and are dependent upon the specific rotation. The majority of the hours are Monday - Friday between 0500 and 1700. Some rotations are scheduled during evening shift hours, Monday-Friday between 1200 and 0000. Prior to the start of each rotation, seek out the respective clinical instructor for hours of the rotation. On some lecture days, the days maybe greater than 8 hours, on others they may be less than 8 hours. This should roughly balance out by the end of the year.
 - b. You are expected to be on time for lectures and clinical instruction.
4. **Breaks/Lunch:**
 - a. You are allowed (2) 15-minute breaks each day. There may be occasions when you are asked to take one 30-minute break instead of the two 15-minute breaks at the discretion of the instructor.

- b. Lunch is a 30-minute break. A 45-minute lunch may occur during the Student Lecture/Lab. You may choose to eat in the PSHMC cafeteria, in the employee lounges or other acceptable places. It is fine to leave the premises for lunch if you return on time. Once again, excessive tardiness from breaks is reason for disciplinary action.
- c. Timely patient care is always of primary importance and may, at times, delay scheduled breaks.

5. **Absenteeism, Tardiness, & Time Clock:**

- a. Absenteeism, tardiness, and improper use of the time clock in the health care professions has the potential to reduce both the quality of patient care and the productivity of the department. The fiscal impact generated from excessive absenteeism by employees of the Medical Center is significant and could jeopardize current services to our patients or prevent further development of new services. Students should give serious thought to these ramifications as progression is made from a student to an employee role. In addition, the clinical year is very intense, and students are expected to be committed to the program. **Time clock usage, attendance, and tardiness comprise 10% of the total Lab Practice grade. Therefore, attendance and punctuality are essential for successful completion of the program.**

i. **Time Clock**

1. A time clock system is used to manage attendance. Students are required to use the designated system. Time clock stations are located in most of the student areas for convenience during all phases of the program. Students assigned to other locations for rotations are not required to use the time clock for those rotations. However, affiliate mentors at off sites will be monitoring attendance and will report to the school, as necessary.
2. Forgetting to clock in or out is a violation of this policy. After 8 occurrences, the student's record will be evaluated by the Program Director for possible termination.
3. A three week 'Grace Period' is given at the beginning of the program to allow students to become familiar with clocking in and out. After the 'Grace Period' the student will be given 2 'Free Passes' before time clock violations count as an occurrence.

ii. **Tardiness**

1. **Tardiness is defined as not being ready to begin your assignment at the designated time scheduled. Even one minute late is considered tardy.** Tardies in excess of 1 hour will be considered a half day absence and greater than 4 hours will be considered a full day absence. Personal days cannot be used to exempt a tardy. At 8 tardies, the student may be dismissed from the program at the discretion of the Program Director.

iii. **Absences**

1. students are allowed 1 personal day per semester, a total of 3 per clinical year. These days can be used for any personal reason such as illness, family obligation, interviews, etc. These days are not counted against the student's attendance record. If a student is absent for any reason, personal days must be used first.
2. When possible, absences should be scheduled in advance to allow for schedule adjustments; this may lessen any make up time required. Once the student returns to school after an absence, the next absence is considered a separate occurrence. Leaving early without instructor consent is considered an absence. The clinical instructor or program director reserves the right to have any absences made up. This occurs on a case-by-case basis and

varies according to the curriculum, schedule and the student meeting the competencies of the program.

3. After 8 recorded absences the student may be dismissed from the program at the discretion of the Program Director. Absences during the program are documented as a minimum of a half day absence (absences cannot be broken up into hours missed). If the student is absent for more than 4 hours, it will be documented as a full day missed, even if the student is able to attend a few hours of the scheduled day.
 4. Doctor appointments or other personal appointments should be scheduled during non-school hours whenever possible. If appointments occur during school hours and the time away exceeds one hour, it will be documented as an absence. If late arrival time to class is less than one hour, it would be considered a tardy. Exceptions may be made at the discretion of the program director for long-term conditions requiring multiple appointments and/or a medical leave of absence. Personal bereavement is handled according to the employee policy at PSHMC.
 - iv. **When absent or tardy**, please call or email the specific instructor and Program Director prior to the specified start time for that day. Contact numbers are included on the student roster and on Canvas. If you cannot reach the instructor or Program Director, leave a voice message or email. If absent or tardy on a day scheduled for phlebotomy rounds, ***also*** call the Specimen Processing Division at least **two hours** prior to scheduled rounds; please document who you speak with in Specimen Processing.
- 6. Progressive Discipline for Absenteeism, Tardiness, & Time Clock:**
- a. Attendance is a significant portion of the Lab Practice grade (10% of the total). Each occurrence of absence will result in a deduction of 1% from the overall Lab Practice grade. Each tardy will result in a deduction of 0.5% from the overall lab grade. Each missed clock in/out will result in a deduction of 0.25% from the overall lab grade.
 - b. Absences, tardiness, and time clock policy non-compliance are documented in three separate categories within the attendance policy. Progressive discipline is applied to the specific category (absence, tardy, or time clock) for each occurrence.
 - c. The following progressive discipline process will be implemented as appropriate:
 - i. 2nd occurrence: verbal counseling
 - ii. 4th occurrence: 1st written warning
 - iii. 6th occurrence: 2nd written warning
 - iv. 8th occurrence: possible dismissal from the program at the discretion of the Program Director
 - d. The maximum deduction from Lab Practice for all three areas combined is 10% of the final grade. The minimum passing score for the Lab Practice course is 80%.
 - e. The attendance record is retained as a part of the permanent student file and this information is used as documentation in employment reference checks.
 - f. **If two or more areas of the program are in progressive discipline the global performance of a student will be evaluated for possible dismissal from the program at the discretion of the Program Director.**
- 7. Personal Appearance, Dress and Grooming:**
- a. Good personal cleanliness and appearance are of extreme importance for the welfare of our patients, and are, therefore, expected of all students at all times. The Medical Center serves the community, and

with this service comes faith and trust in the employees of the Medical Center. To be worthy of this trust you must look the part, as well as act the part. First impressions are very important and are quite often based on appearance.

- b. Good grooming is essential. Clothes should be conservative and professional as related to health care. Clean and unwrinkled lab coats must be worn at all times while in the laboratory. Any student that does not adhere to these policies will be sent home; this will be considered an absence. Under no circumstances will blue jeans or leggings be worn.
- c. Shoes must be clean, professional and non-permeable to liquids. Shoes must cover the entire foot and not be made of canvas, cloth-like material, or have ventilation holes.
- d. Hair longer than shoulder length must be pulled back at all times while in any lab areas, including student lab. Likewise, long jewelry, scarves or other loose clothing must not hang outside of the lab coat in student or clinical lab.
- e. Fingernails should not be longer than one quarter of an inch and artificial nails are not acceptable.
- f. Strongly scented personal products, such as perfumes and colognes, are not allowed
- g. Name badges must be worn at all times while in the Medical Center and at affiliated institutions. Nothing except hospital related information should be affixed to name badges.
- h. Gloves and other PPE must be worn as required in the safety policy. This rule applies even if you see others in the lab not adhering to this policy. Students should be extremely safety conscious since mistakes are more apt to be made while a level of proficiency is being developed.
- i. Scrubs may only be worn on phlebotomy draw days. You must change out of your scrubs on phlebotomy days if:
 - i. You're presenting in front of a group, in class or otherwise
 - ii. You're meeting with a clinical mentor, manager, supervisor, other leader
 - iii. You're performing a mock CAP inspection
 - iv. We have outside presenters for a panel session speaking in class
 - v. All modesty, logo, and quality standards apply to scrubs as they would to street clothes (clean, good condition, unwrinkled, etc.)
 - vi. **Hospital-issued scrubs or any scrubs resembling hospital-issued scrubs in color are not allowed.**

Note: Please refer to the laboratory dress code policy, hospital professional appearance policy and lab safety policy for specifics.

8. **Professionalism:**

- a. When you are interacting with patients, visitors, and health care workers, you represent the School of Medical Laboratory Science and the Department of Laboratory Medicine at Providence Sacred Heart Medical Center. In addition, your actions are a reflection of your own personal involvement, concern and character and will be considered in rotation evaluations which are referenced by future employers. Professionalism should be exemplified at all times. Please refer to handouts on affective behavior.

9. **Visitors:**

- a. You are not permitted to have personal visitors during assigned clinical hours. You may meet your visitors during break and meal periods outside of the lab. If you would like to show a relative or friend through the lab, please schedule this in advance with the Program Director.

- b. Please do not visit with another student in a different department during school hours. Although you may be on your break, visiting may interrupt other students' learning.

10. Phone calls:

- a. Personal phone calls should be made during rest breaks or meal periods, preferably with your personal cell phone.
- b. When answering the lab phone, proper telephone etiquette is expected at all times. Always state the name of the department and your name.

11. Cell Phones & Social Media:

- a. Cell phones are not to be used during instruction time; this includes phone calls, texting and internet use. Use of cell phones is limited to break times and should never be used in the student or clinical laboratories. If a student is expecting an urgent message, the student can also provide the Education Office phone number to family members who may need to reach them during school time for urgent matters (509-474-3382).
- b. To protect the privacy of employees, patients and visitors, the use of photography equipment, including cell phone cameras, on hospital premises is prohibited without prior approval from the program director. If approved, any photos or video cannot be posted on social networking sites, published or otherwise displayed outside the Medical Center.
- c. Students can only use social media during non-school hours and on computers/laptops not owned by the Medical Center. Students are responsible for their commentary and posts on social networking and can be held personally liable for anything considered confidential, defamatory, obscene, proprietary or libelous by any offended party. Students cannot share patient information or proprietary information, photographs or videos about Providence on personal sites. Posts can be viewed, copied, forwarded or shared by anyone with access to your posts and potentially made accessible to anyone. **PSHMC reserves the right to take appropriate action, up to and including termination for students whose actions have potential to affect the Medical Center negatively or compromise confidentiality.**

12. Supplies:

- a. The program will provide all required PPE and materials/supplies for learning activities.
- b. Lecture slides and materials will be posted on Canvas for students to access. Students are responsible for having access to these slides and materials during lecture either electronically or by printing hard copies independently.
- c. Medical supplies account for a significant part of a patient's expense. Diversion of supplies (including linens, scrubs, etc.) for personal use is considered gross misconduct and may result in immediate termination from the school. Empty boxes may be removed from the premises only with the permission of security.
- d. Students are expected to maintain a clean work area and to replenish any supplies used at the end of the day. Work areas should always be left neat with supplies put away. Microscopes should be cleaned, and light turned off at the end of each usage. Lab coats should be hung up, not left on chairs. The classroom areas and student lab areas should be left in order with chairs and tables being properly returned to standard places, tables wiped down, lights turned off at the end of each day and vacuum when needed.

13. Smoking/Vaping:

Because tobacco is both a health and safety hazard, Providence Sacred Heart Medical Center has a tobacco-free policy. Smoking, chewing tobacco and the use of e-cigarettes are prohibited on Providence-owned or leased property. Students who smoke should make extra efforts not to smell of smoke when assigned to patient care areas because the smell of smoke on you may be very offensive to patients.

14. Soliciting/Gratuities:

- a. Selling and soliciting for any purpose is not permitted on hospital premises or at any other clinical site. Students may not accept any gift, tip, or gratuity from any patient, visitor, business firm, or any other person or organization for any service of any nature rendered by the student during the school hours.

15. Health Services:

- a. Services available to the students in medical laboratory science are the same as provided for employees, to include: a health evaluation, immunizations, TB screening, lab work, treatment for injuries on the job, flu shots, limited over-the-counter medications, counseling services through the Caregiver Assistance Program and blood pressure readings. A temporary rest area is also provided for students with minor illnesses. To assist the student to receive prompt treatment in the above instances, he/she should phone extension 474-3378 for an appointment with Employee Health Services. (Refer to Health Services handout). The Employee Health Service (EHS) Department is open Mon-Fri 7:30 am – 4:00 pm.
- b. Students do not qualify for employee offered insurance benefits with Providence. Services are available to assist students in finding an affordable insurance options.

16. Cheating:

- a. Cheating on any assignment, report, quiz, exam, or falsifying patient results is considered gross misconduct and grounds for immediate dismissal. Cheating and falsifying information is unethical conduct not tolerated in the program, the Medical Center or in the health care professions. Our actions can have a direct impact on patient care which requires staff of high integrity.
- b. Cheating is defined as deceiving or misleading somebody especially for personal advantage, or to break the rules in completing a test, assignment or project. Any written or practical test/quiz that is administered during didactic or clinical rotations must be the student's own original work. Any test/quiz, assignment or project that can be worked on in collaboration with others will be designated as such by the instructor. Collaborative work must always include the names of those who contributed to the end product. Using a copy of a past test/quiz/assignment is considered cheating.

17. Grades:

- a. Tests and quizzes are administered frequently throughout the year. Questions evaluate both the didactic and practical portions of courses. Passing grades for each written and practical test are determined by the clinical instructors (generally 80%) and are clearly stated in written objectives for that rotation. Grades are also given for affective skills (with a minimum of 80% pass).

18. Quizzes:

- a. A quiz is defined as an evaluation tool used as a check point to validate the student has learned a small component of instruction before proceeding with additional information. The curriculum content of the quiz is then later included as part of a test. It is up to the discretion of the instructor to determine if a make-up quiz should be given, should a student fail a quiz; the decision applies to all students who fail that quiz. Documentation of the failed quiz should be noted on the written evaluation form. The grade of the first attempt at the quiz is the grade used when calculating final grades. A 3rd failed quiz will

initiate the progressive discipline system. Each subsequent failed quiz or test will continue the steps of the discipline system.

19. Tests:

- a. A test is defined as an evaluation tool used to determine if a student has learned a large amount of information, usually administered at the end of a rotation or large component of instruction. One failed test grade initiates the progressive discipline system and must be documented. One make-up test is allowed to prove competency in that area; if failed, the rotation may be repeated one time. The grade of the first attempted test is the grade used in calculating final scores.

20. Testing Standards:

- a. Testing time frames have been established to standardize testing parameters among instructors and to provide students with clear expectations for exams. Multiple choice or short answer questions should take about 72 seconds per question, which is the same average standard used in the National Board of Certification. The amount of time for essay questions will be determined by the instructor, based on material and length of response.
- b. The start and end times for quizzes and tests will be posted. Upon completion, students are to leave the testing area quietly or stay and quietly study with no disruption to fellow classmates. To lessen noise and commotion, please put laptops away AFTER the testing period has ended. Personal items may be left in the testing area. Students can return to the classroom at the posted time or when all students have completed the quiz/exam. When time has expired for the assessment, students who have not completed the exam will be asked to stop and any answers left blank will be considered incorrect.
- c. PSHMC School of Medical Laboratory Science Program does not discriminate against students with disabilities and will strive to accommodate those with documented needs.
- d. All electronic devices are to be silenced and put away during quizzes, written tests, practical tests, and while in the student and clinical laboratories.

21. Failed Tests:

- a. If competency is not demonstrated by the second attempt of taking a test, the rotation will need to be repeated prior to one final test being administered. Related pre-requisite coursework may also need to be repeated. Scheduling of repeat rotations is made at the discretion of the Program Director and determined by availability of instructor and other resources. If a repeated rotation ends with a failing test score, the student cannot complete the requirements of the program for graduation.
- b. The student should take the initiative to seek out the instructor within one week for proper follow up on tests and plans for any make-up work.

22. Final Grades:

- a. Final grades for the year are determined as follows:
 - i. A grade is given for each rotation, which is calculated by including the didactic, practical and affective evaluation scores. Didactic grades are comprised of written tests or other assignments. Practical grades may take into consideration the performance on any practical examinations, checklists, presentations or other activities assigned by the instructor. The written evaluations completed by the instructor(s) assess the affective behaviors not necessarily measured by the written and practical tests. These evaluations are periodically scored, providing another component of the student rotation grade.

- ii. Final grades are calculated by a predetermined percentage assigned to each graded component in that discipline in Canvas. It is the responsibility of the clinical instructor to review percentage points and calculation of grades with students at the start of each rotation.
 - iii. If a student fails a test, and later passes the make-up test for any given area, the failed test score is still the score used in calculating the rotation grade.
 - iv. Each final rotation grade must be a minimum of 80% in order to pass the rotation.
 - v. Comprehensive exams are scheduled near the end of the school year. The purpose of the exams is to help the students prepare for the national certification exams and to identify areas of strength and weakness. These scores are not calculated in the final grades, except for the Immunology exam, the content of which is not covered heavily during any other time.
- b. Grades and final summative evaluations are kept in the student's file for future references.
- c. Final numerical scores are converted to letter grades for permanent transcripts utilizing the following system:
- i. 97 - 100 = A
 - ii. 92 - 90 = A-
 - iii. 89 - 88 = B+
 - iv. 87 - 83 = B
 - v. 82 - 80 = B-
 - vi. Below 80 = Failure

23. Evaluations:

- a. A written evaluation form is completed by each clinical instructor at the end of an evaluation period. Evaluations review the student's cognitive, psychomotor and affective behaviors during the rotation. Content of the evaluation should be discussed between the student and clinical instructor. This represents an opportunity to review the student's progress and should not represent undue criticism. Students are asked to accept constructive criticism in a positive manner and to learn from the feedback. Refer to the evaluation form for specific criteria.
- b. Students are encouraged to provide written and verbal comments regarding each evaluation period. Evaluation forms must be signed by the student. The affective evaluation counts towards 10% of each area of discipline.
- c. In addition, students may be asked to complete a self-evaluation prior to the end of didactic evaluation periods. This information helps the instructor to better understand the student's perception of their strengths and weaknesses.

24. Criteria for Placing Students in the Progressive Discipline Process:

- a. A student will enter the progressive discipline system for any of the following reasons:
 - i. Three failed quiz scores, or one failed test score, or one failed written evaluation:
 - 1. 1st step = verbal counseling
 - 2. 2nd step = 1st written warning
 - 3. 3rd step = 2nd written warning
 - 4. 4th step = may be cause for discharge
 - ii. Excessive absenteeism (refer to Absenteeism #5 in Student Handbook).
 - iii. Excessive tardiness (refer to Tardiness #5 in Student Handbook).

- iv. Unacceptable, unethical and/or unprofessional personal conduct as described throughout the Student Handbook. This may result in accelerating the progressive disciplinary steps if determined necessary by the professional discretion of the Program Director.
 - v. The global performance of a student may be determined to be unacceptable for the profession if the student has accumulated 2 or more disciplinary forms. This decision is up to the professional discretion of the Program Director. If the global performance of the student is determined to be incompatible with the medical laboratory science profession, the student may be dismissed from the program.
- b. When a student enters the progressive disciplinary process, the student will receive a copy of the Progressive Disciplinary Form which notes the unsatisfactory performance, the action plan to improve performance, the date when competency is expected and the consequence if the action plan is not followed. Both the student and Instructor and/or Program Director discuss this and sign the form agreeing to the unsatisfactory performance and follow-up action required. The form becomes a part of the student's file. A copy of the 2nd written warning form is also given to the PHC Laboratory Director.

25. Causes for Dismissal:

- a. A student may be dismissed from the program:
- i. For demonstrating repeated problems in non-compliance with student policies.
 - ii. For gross misconduct that may result in immediate dismissal on the first offense. Gross misconduct is defined as, but certainly not limited to, the following violations:
 1. Cheating on any assignment, report, quiz or exam.
 2. Falsifying any information.
 3. Abuse or inconsiderate treatment of patients or other persons, either emotional or physical.
 4. Violations of patient's privacy by unauthorized release or access of confidential information (refer to Providence Code of Conduct located in Canvas Pre-Orientation course).
 5. Diversion of supplies or stealing from patients, the Medical Center, or other persons.
 6. Possession or use of any alcoholic beverage on the premises; drunkenness.
 7. Unauthorized handling, possession, or use of narcotics or drugs.
 8. Willful destruction of property.
 9. Fighting or unauthorized possession of weapons.
 10. Harassment and misconduct/sexual harassment (refer to PHS policy on Anti-Harassment and Discrimination located in Canvas Pre-Orientation course).
 - iii. As the final consequence in the progressive disciplinary process for either academic or non-academic issues.
 - iv. If the global performance of the student is determined to be unacceptable for the profession.

26. Grievance Procedure (Academic/Non-academic):

- a. If a student believes that he or she has been treated in an unfair or discriminatory manner, the first recourse is to discuss with the Program Director the nature of the complaint. If the student disagrees with the Director's resolution of the problem, the student may request a general meeting of the School's Advisory Council to present the grievance. This council consists of the Director of the Laboratory, the Program Director, and the Clinical Instructor(s). The council will discuss the problem and present the decision to the student.
- b. If the student still feels that the grievance is valid, he/she may go before a Hospital Advisory Council to the School. This body is composed of three individuals within the hospital, but not directly involved with the Laboratory. Generally, these members may include the Director of the Department of Educational Services, the Program Director of the School of Anesthesia and the Director or Manager in Human Resources.

- c. If the student still disagrees with the dispensation of the Hospital Advisory Council, he/she may nominally comply with the decision or resign from the program.

27. Non-Discrimination:

- a. Student recruitment, admission and matriculation are non-discriminatory with respect to race, ethnicity, sex, gender, sexual orientation, disability status, age, cultural background, place of origin, veteran status, or creed.

28. Tuition, Fees and Refund Policy:

- a. Students are expected to pay all expenses and fees associated with the program. Fees consist of tuition, textbooks, personal laboratory supplies, application fee and acceptance fee.
- b. Tuition is fully refundable until the second week of the program. After the second week, tuition becomes non-refundable. The student's application and acceptance fee are non-refundable. Textbook expenses may be refunded based on the return policies of the company or publisher books were purchased from.

29. Student Withdrawal:

- a. Students wishing to withdraw from the program should submit a written statement giving the effective date of separation and the reason for withdrawal to the Program Director.

30. Student Files:

- a. Students may have access to their records upon written request except for information provided by reference, for which the student signed a waiver relinquishing the right to access. Student records include files of admission, school transcripts, grades, evaluations, attendance record, counseling and advising sessions. School of Medical Laboratory Science student program transcripts are kept permanently on all students. All other student-related files are kept for up to 10 years.

31. Course Challenge Procedure:

- a. Students having the minimum qualifications of MLT (ASCP) or the categorical certification may qualify to challenge a rotation by stating in writing the area to be challenged and the reason for the challenge. Final decisions are made by the faculty on a case-by-case basis.
- b. The Phlebotomy rotation may be challenged by any student having current (within last 4 years) phlebotomy experience in a hospital setting or similar clinical environment, and a valid WA State MA-P license. This experience must have been for at least one year with a minimum of 15 hours per week. The student may challenge the rotation by stating in writing the reason for the challenge and areas of experience. Exceptions can be granted to current PHC employees with more than 3 months experience who recently went through internal phlebotomy training. Final decisions are made by the phlebotomy instructor and the program director on a case-by-case basis.

32. Student Work Policy:

- a. Providence Sacred Heart Medical Center is a teaching hospital in which learning experiences are provided for a variety of student programs. Students in the School of Medical Laboratory Science shall not take the responsibility or the place of qualified laboratory staff during any student rotations. The laboratories maintain sufficient staffing to assure that students are not substituted for regular staff. Students do perform procedures during their clinical rotations to gain entry-level competency and are always supervised by the clinical instructor or assigned employee. Students are not responsible for the laboratory workload.

- b. Students may be offered the opportunity for part-time employment during hours not assigned for learning experiences with the medical science programs. These paid positions are strictly voluntary and are subject to employee regulations.

33. Graduation:

- a. Students receive graduation certificates based on passing all clinical rotations in a satisfactory manner and completing all program requirements including the payment of any fees. Certificates of completion are not contingent upon students passing external certification or licensure exams.

34. HIPPA & FERPA Laws:

- a. Students must abide by confidentiality laws and regulations protected under HIPPA and FERPA. It is against the law to relay any personal or confidential information obtained about patients, clients, caregivers, visitors or fellow classmates' students may be privy to while attending the program.

35. Admissions Criteria:

All students admitted into the program must meet the same minimum standards outlined below:

- a. Pass all pending and in progress coursework with a B (3.0) or better.
- b. Successfully completed all pending coursework by the start of the program
- c. Minimum cumulative GPA of 3.0
- d. Paid all tuition, acceptance and related fees
- e. Successfully passed a criminal background check and drug screen
- f. Successfully passed the employee health screening for student placement
- g. BS degree conferred on official transcript (unless attending at a 3+1 student though an affiliated university)
- h. Able to perform the minimum essential functions of the program (with reasonable accommodations if necessary)

36. Guaranteed Clinical Rotation Placement, Student Clinical Rotation Preferences, and Student Ability to Complete Clinical Experience

All students accepted into the PSHMC School of MLS are guaranteed clinical rotation placement, if of good standing at time of clinical rotation placement. Clinical rotation sites are pre-arranged to ensure that placement is possible for all accepted students. Students will be queried as to their clinical rotation location preferences, upon admission. Efforts will be made by the program to respect student preferences. While there is a guarantee of clinical rotation placement, there is no guarantee of placement location. Students are expected to participate in clinical rotations at the location to which they have been assigned, regardless of student preference. If students elect to not attend clinical rotations at a particular location, they will be subject to dismissal for not completing the clinical rotation requirement.

In the event of major disaster, program closure, or inability of a clinical site to support students as previously arranged, the School is committed to fulfilling the training needs of currently enrolled students of good standing. In those instances, the students may be assigned to new or alternate clinical rotation sites to guarantee completion of their clinical experience. The program will facilitate these arrangements for the student. Students will be expected to demonstrate flexibility, patience, and professionalism during this time.