

## School of Health Sciences

# **Diagnostic Medical Sonography**

Diploma Program Application Package for:

Student Name

September 2022 Intake



#### APPLICANT'S CHECKLIST

All of the following should be completed and submitted electronically to the College of New Caledonia's

	- · · · · · · · · · · · · · · · · · · ·
Office of	the Registrar at regoffice@cnc.bc.ca.
	Official high school transcripts
	Self-Report on Suitability for the Profession
	<ul> <li>See pages 4 and 5 of the Application Package</li> </ul>
	Two original reference forms
	<ul> <li>See pages 7 to 10 of the Application Package</li> </ul>
	<ul> <li>Must be emailed directly to CNC Office of the Registrar (see page 6 for instructions)</li> </ul>
<u>Additional</u>	Documents to Submit
	Official transcripts from post-secondary institution

#### **APPLICATION DEADLINES**

<u>Diagnostic Medical Sonography Program application:</u> The Application for Admission must be submitted by March 31 and all accompanying documentation must be submitted no later than April 30 for consideration for the September intake.

Once accepted: Students are required to submit the following documents prior to the first day of classes;

- **a.** Proof of current immunizations status. Students may be prevented from starting clinical placements with incomplete immunization schedules **(uploaded to Moodle)**
- b. CPR certification (minimum requirement CPR Level C). Online CPR courses are not acceptable. Students are responsible for maintaining certification while in the program (uploaded to Moodle)
- c. Criminal Record Check. (prior to commencement of program must be submitted to the Office of the Registrar)
- **d.** Successful completion of the Medical Terminology for Sonography (SONO 101) course

#### \*Prior to Clinical Orientation:

- N95 mask fitting
- Influenza immunization
- Any other applicable requirements

All associated costs are the responsibility of the student

<sup>\*</sup>More information will be provided to students during first semester.



#### **SELECTION CRITERIA**

In the event of program oversubscription, applicants who meet the admission requirements will reviewed through the selection criteria below:

	Selection Criteria				
		Points			
1	The cumulative grade point average of the required English, Biology, Physics, and Mathematics courses (minimum GPA of 3.00 with B or greater in each) contributes its actual points i.e. a GPA of 3.70 contributes 3.70 points	4.33			
2	30 course credits or more at the post-secondary level in which the language of instruction was English and with an overall GPA of 2.50 contributes 2 points	2.00			
	Education in a health care field – proof of degree, diploma or certificate (with minimum 6 months program length) contributes 1point	1.00			
4	Two original reference forms contribute 1 point	1.00			
5	F TO THE TOTAL TOT	Maximum of 2.00 points			
	Total possible points				

Students who meet the admission requirements but are not offered a seat will be waitlisted for the program year in which they apply only.

<sup>\*</sup>Northern BC is defined as the Northern Health Authority geographical boundaries.



#### **SELF REPORT ON SUITABILITY**

The following attributes are strongly recommended to ensure the best possible chance of success in this program. Please check  $(\checkmark)$  beside each statement, sign at the bottom and submit to CNC Office of the Registrar at <a href="mailto:regoffice@cnc.bc.ca">regoffice@cnc.bc.ca</a>.

Strong problem solving and interpersonal skills, ability to function as part of a team
A professional attitude and work habits including time management and organization
Ability to multi-task and prioritize in a demanding work environment
The ability to visualize objects in 3D, and clearly differentiate between colors, and sounds
Physical Stamina: applicants are advised that sonography requires repetitive movements and sitting or standing in a fixed position for long periods of time. Applicants with a history of arm, wrist, elbow, shoulder, neck or back injury should <u>carefully consider</u> their suitability for this career
Applicant must have proficient oral and written English skills in order to communicate effectively directly with patients and the healthcare team
Familiarity with word processing programs and electronic forms of communication
Ability to work evenings, weekends, nights, on call and 40 hours per week during clinical training
Awareness that this program requires obtaining clinical competencies in both male and female reproductive organ systems
The candidate must possess the ability to work with needles, body fluids
Ability to be empathetic and flexible in order to meet the unique needs of each patient
Ability to respond professionally to difficult situations such as fetal death, trauma, surgical procedures and ill patients
Agreement to follow the Sonography Canada Policies and Procedures:
<ul> <li>http://www.sonographycanada.ca/Apps/Pages/scope-of-practice</li> <li>http://www.sonographycanada.ca/Apps/Pages/code-of-ethics</li> <li>http://www.sonographycanada.ca/Apps/Pages/code-of-conduct</li> </ul>
Awareness that students will be expected to participate in a number of clinical rotations including urban, rural and remote sites; all costs are the responsibility of the student
Awareness of Selection Criteria for Diagnostic Medical Sonography diploma program (see page 3 of application package)

## SONO 2022: Diagnostic Medical Sonography Application Package



Printe	d Name Signature Date
nclusive Medical	no reason why I would be unable to participate in the full Diagnostic Medical Sonography program of all theory, lab and clinical responsibilities and I am a suitable applicant for the CNC Diagnostic Sonography Program.
-	that I have read the above and I acknowledge that I understand the information. I am aware that ceptance into the program this information will be shared with the program coordinator.
	If applicable, I have contacted Accessibility Services to determine potential academic accommodations
	Strong sense of responsibility, caring nature, interest in the well-being of others, excellent interpersonal skills, strong problem-solving skills and ability to work in diverse teams
	This is a full-time program with limited breaks and a heavy academic and clinical workload. It is suggested that 20 hours of studying, homework and preparation be allotted for each week in addition to attending classes/ clinical placements
	Prior to performing any exams in the healthcare setting, students will be required to demonstrate skills on each other as well as volunteers in a supervised lab setting
	Awareness of the financial demands of the program and have proactive arrangements to cover all of the costs



#### REFERENCES

Please provide two references. It is preferred that both are professional references, however, **one** reference may be from a personal reference if two professional references are not available. The referee must mail the form in a sealed envelope; originals must be received by the CNC Office of the Registrar and any forms sent by fax or email will be marked as copies. The referee must be acquainted with the applicant for at least 6 months and may be contacted to obtain additional information.

#### Instructions to student:

- 1. Print pages 7 to 10 of this package
- 2. Fill in the top portion of both reference forms with your name, relationship to referee, and referee name and phone number
- 3. Give both pages of the reference form (Reference Form page 1 and 2) to the referee
- 4. The referee must complete the form, place in a sealed envelope and **mail originals directly** to the College of New Caledonia, Office of the Registrar, at:

#### 3330 - 22nd Ave. Prince George, BC, V2N 1P8

References delivered by the applicant **will not be accepted** and will impact the student's scoring on the selection criteria (page 3 of this package).

Reference forms must be received no later than March 31 for consideration for the September intake.



# REFERENCE FORM (page 1 of 2) For Admission to the DIAGNOSTIC MEDICAL SONOGRAPHY PROGRAM

#### **APPLICANT: complete this section**

Surname	Given Names	Previous Names (if ap	plicable)
Relationship to th	e Referee		
Referee Name:		Phone number	
f I have plagiarized	n for CNC to contact the above na I any part of this document or allo NC Diagnostic Medical Sonograph	cated the task to a second party,	•
Applicant		Date:	
REFEREE: complet	e this section		
Referee Name:		Phone:	
Address:			
Position/Title:		Phone:	
Organization:			
declare that the in	formation provided in this referen	ce is complete and correct.	
Printed Name			Date

# DO NOT SHARE YOUR REFERENCE CONTENT WITH THE APPLICANT

- ➤ Please complete this form and return the originals of both pages by March 31, 2022 to: Office of the Registrar 3330 22nd Ave. Prince George, BC, V2N 1P8
- If you have any questions or concerns, contact the Office of the Registrar at <a href="mailto:regoffice@cnc.bc.ca">regoffice@cnc.bc.ca</a> or 250-562-2131.



#### **REFERENCE FORM (page 2 of 2)**

The above-named applicant has applied to the Diagnostic Medical Sonography Program. As part of the application process, 2 references are required. Please indicate the applicant's ability to successfully complete the Diagnostic Medical Sonography program. Please rate to applicant on the following attributes:

0 = unable to judge 1 = has difficulty 3 = average 5 = outstanding

	Attributes of the Applicant	Rating					
1	Communication skills	0	1	2	3	4	5
	Demonstrates listening skills						
	Ability to express meaningful and clear ideas						
	Uses effective nonverbal and verbal communication						
	Ability to read, understand and document information						
2	Working with the public	0	1	2	3	4	5
	Recognizes and respects individualism and diversity						
3	Ability to function within a team	0	1	2	3	4	5
	Understands the roles of team members and works within group						
	dynamics						
	Ability to manage and resolve conflict						
	Flexible, respectful and open to feedback and contributions of others						
	Practices effective interpersonal communication						
4	Problem solving skills	0	1	2	3	4	5
	Assess situations and identifies problems						
	Evaluates possible solutions						
5	Time management/organizational skills	0	1	2	3	4	5
	Works independently and is self-reliant						
	Ability to carry out multiple tasks or projects						
	Accepts feedback and is willing to continuously learn and grow						

**Additional Comments:** 



# REFERENCE FORM (page 1 of 2) For Admission to the DIAGNOSTIC MEDICAL SONOGRAPHY PROGRAM

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Surname	Given Names	Previous Names (if	applicable)
Relationship to the	e Referee		
Referee Name:		Phone number	
hat if I have plagia		named referee for further inform or allocated the task to a second ohy Diploma Program.	
Applicant		Date:	
REFEREE: complete	e this section		
Referee Name:		Phone:	
Address:			
Position/Title:		Phone:	
Organization:			
declare that the in	formation provided in this refere	ence is complete and correct.	
Printed Name		Signature	Date
`	SHARE YOUR REFERENCE CONTE	ENT WITH THE APPLICANT	24 2022 : 055

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Additional Comments: