



MSc Medical Ultrasound Course

Clinical Placement Agreement Form

(to be completed by the student and practice educator and submitted at the time of application)

Clinical Placement Agreement Form

If Clinical Placement is requested through the AECC University College, School of Radiology, Ultrasound Clinic please tick [] and complete only the grey section below.

Name of Student:

Name of Clinical Practice Educator/Mentor:

1. Designated Practice Educator :.....

*Qualifications/Accreditation:

* Professional Regulatory Body (HCPC/SOR/MDU/Others please specify):

.....

2. Deputy Practice Educator:

*Qualifications/Accreditation:

*Professional Regulatory Body (HCPC/SOR/MDU/Others please specify):

.....

Name and Address of the Department:

Practice Educator Tel No:

Practice Educator Email:

It is agreed that the Department will provide the relevant clinical training in the following selected application(s). Please indicate:

1. Musculoskeletal Ultrasound Upper Limb	[]
2. Musculoskeletal Ultrasound Lower Limb	[]
3. Musculoskeletal Ultrasound Hip/Groin	[]
4. Musculoskeletal Ultrasound Soft Tissue	[]
5. Musculoskeletal Ultrasound Guided Injections	[]
6. Gynaecology Ultrasound (including TAS/TVS)	[]
7. 1 st Trimester Ultrasound	[]
8. 2 nd and 3 rd Trimester Ultrasound	[]
9. Superficial Structures Ultrasound	[]
10. Negotiated Ultrasound Skills (NUS)	[]

Please indicate NUS Clinical Applications below:

11. Abdominal Ultrasound	[]
12. Breast Ultrasound	[]
13. Ultrasound Breast Intervention	[]
14. Ultrasound Guided Fine Needle Aspiration	[]
15. Hysterosalpingo-Contrast-Sonography (HyCoSy) and Saline Infusion Sonography	[]

**Please provide details of qualifications and if you have CASE/RCR/RCOG or any other accredited training.*

**Please provide details of your Indemnity and medico-legal insurance cover; this will insure that you, the student and the AECC are adequately covered.*

It is agreed that the Department will supervise the student in completing the following clinical portfolio:

1. A record of clinical practice
2. Case study (ies) (pathologies) in each subject specialty
3. Prepare the student for the clinical assessment carried out by an assessor and a member of the MSc Programme team as moderator

Departmental Status:

1. NHS site (e.g. Hospital Ultrasound Department/EPAU and other specialists clinics):

Hospital Ultrasound Department:

.....

Community based Ultrasound Service (e.g. GP surgery/Medical Centre):

.....

2. Independent/Private site

Private Ultrasound Service (e.g. BMI, Chiropractic /Physiotherapy Clinic):

.....

Departmental Resources:

Please provide the following information about your department:

1. Type (s) of ultrasound machine (s) and transducers/probes available for clinical practice (include make, model, age of equipment)

.....
.....
.....

2. The ultrasound equipment is fit for purpose? YES NO

Is a QA programme in place? YES NO

Please give brief details to ensure the student can get adequate experience of ultrasound

QA:.....
.....
.....
.....
.....

3. Patient throughput (workload for the year). *Please complete for every clinical application the student plans to undertake throughout the studies.*

Musculoskeletal Ultrasound:

Upper Limb Lower Limb
Hip/groin Soft Tissue
Guided Injections

Gynaecology Ultrasound:

TVS TAS

Obstetric Ultrasound:

1st Trimester 2nd Trimester
3rd Trimester Amniocentesis
CVS Post partum

General Ultrasound:

Abdomen
Superficial Structures
Thyroid
Testes
Interventional Procedures (Biopsy/drainage).....

NUS:

Negotiated Skill 1 ()
Negotiated Skill 2 ()
Negotiated Skill 3 ()

Breast/ Breast Interventional Procedures:

.....

Ultrasound Guided Fine Needle Aspiration:

.....

Other:

.....

Clinical Placement

It is imperative that prior to registration onto the MSc Medical Ultrasound programme the clinical placement has been recognised as satisfactory by the programme leader according to the set criteria. The student is expected to train in a safe environment which provides opportunities for good quality supervised ultrasound training in the relevant ultrasound application (s). The clinical placement must provide student access to a good case-mix of patients in regular planned ultrasound clinics using high-resolution ultrasound equipment. Learning resources should also include library facilities, computers and internet access to encourage students to carry out academic and research activities for the successful completion of their course work.

Criteria:

- a) Recognised provider of ultrasound services to the NHS/Other recognised health provider/Private patients
- b) Good annual turn-over of patients in the relevant ultrasound application to satisfy the requirement of the programme clinical assessment portfolio
- c) Good case-mix of patients in the relevant ultrasound application to satisfy the requirement of the programme clinical assessment portfolio
- d) Good standard of ultrasound equipment to satisfy the requirement of the programme clinical assessment portfolio
- e) An active Quality Assurance (QA) programme in situ to satisfy the requirement of the programme clinical assessment portfolio
- f) Adequate number of qualified ultrasound staff in relevant ultrasound application (s) to provide satisfactory clinical ultrasound supervision to the student (s)
- g) Nominated Practice Educator (s) must have recognised qualifications or status in the relevant ultrasound application to provide satisfactory mentorship to the student to satisfy the requirement of the programme clinical assessment portfolio
- h) A generic good ethos towards educational and training needs of student (s)
- i) Learning resources should also include library facilities, computers and internet access to encourage students to carry out academic and research activities for the successful completion of their course work.

Agreement:

I have read this Clinical Placement Agreement form and understand the requirements of my role as a Practice Educator.

It is agreed that the student..... will be provided with the resources and supervision necessary to fulfil the clinical work-place requirements of the programme for the following clinical applications:

- 1.
- 2.
- 3.
- 4.
- 5.

Signature of Practice Educator:.....

I confirm I will attend the mandatory Practice Educator induction seminar

Date:.....

Departmental stamp:

Signature of the MSc Ultrasound Course Leader:.....

Date:.....