QUEENSLAND UNIVERSITY OF TECHNOLOGY
DISCIPLINE OF MEDICAL RADIATION SCIENCES

To whom this may concern

You have been nominated as the principal clinical supervisor for an applicant to the Graduate Diploma in Medical Ultrasound (CS60).

As the Principal Clinical Supervisor, you will be required to act as a mentor for the student and to fulfil the roles and responsibilities of a clinical supervisor as outlined in the subsequent pages. Other individuals (if appropriately qualified – see below) may also act as Assistant Clinical Supervisors; for example, when the Principal Supervisor is away from the clinical practice or when the student visits alternate clinical sites.

If you feel that you are unable to fulfil these responsibilities, you may pass this on to another suitably qualified individual within your practice. Please note that all clinical supervisors must be either:

- An Accredited Medical Sonographer (AMS) as recognized by the ASAR or
- The holder of a Graduate Diploma in Medical Ultrasound or
- The holder of a Master of Applied Science (Medical Ultrasound) or
- The holder of a Diploma of Medical Ultrasound (DMU) from ASUM or
- The holder of a Diploma in Diagnostic Ultrasound (DDU) from ASUM or
- A Radiologist with an extensive background in Diagnostic Ultrasound

Please complete the enclosed Principal Clinical Supervisors form at your earliest convenience and ask the student to return the form with their completed application for admission to QUT. If there are any questions, in relation to this, please do not hesitate to contact me directly.

Yours sincerely,

Christopher Edwards
Course Coordinator – CS60Grad Dip in Medical Ultrasound
Phone: (07) 3138 1924 (message)
Email: c8.edwards@qut.edu.au (preferred contact)
Postal: QUT, Faculty of Health - Medical Radiation Sciences, GP Campus,

GPO Box 2434, BRISBANE Q 4000
Requirements of Clinical Supervisors

1. Principle Clinical Supervisor

- The principle clinical supervisor forms an important part of the student’s learning process. It is expected that in their role as mentor, they will work collaboratively with their student to help ensure their student’s preparedness for clinical assessments.
- After each semester the principle clinical supervisor is required to complete a clinical competency assessment reviewing the students’ knowledge across a range of clinical skills.
- The principle clinical supervisor also has the responsibility to ensure the student receives the required training hours directly engaged in Medical ultrasound practice.
- Student sonographers performing ultrasound examinations in Medicare-designated rural and remote locations must still have appropriate professional supervision and have available clinical guidance from the reporting Sonologist or an Accredited Medical Sonographer. In these cases, if on site supervision is not practicable, the reporting Sonologist must be readily contactable to discuss the procedure during the ultrasound examination and supervision should be exercised via teleradiology and/or internet access and/or telephone. Indirect supervision must also be in keeping with the experience level of the student sonographer.

The roles and responsibilities of the clinical supervisor include:

- To ensure that the student has adequate clinical experience and exposure to a variety of clinical cases
- To ensure that the student maintains an adequate standard of scanning
- To be available to assist the student on site when confronted with technical difficulties
- To provide feedback to the student regarding the completeness of the examination, the accuracy of the examination and the diagnostic value of the examination
- To encourage and help develop students’ communications skills, both written and verbal
- To ensure that the student is aware of the patients’ needs and provides appropriate patient care
- To ensure that the student is aware of, and practices, universal infection control practices
- The ability to verify records presented in the students’ Clinical ePortfolio.
Requirements of Clinical Departments

1. **Workload**
   - In order for the student to satisfactorily complete the Clinical Practice units, they must achieve a satisfactory level of clinical competence; hence, clinical experience of the student MUST be hands-on and not just observation.
   - Students need to be engaged in ultrasound practice throughout the duration of the course with a minimum requirement of working directly in the ultrasound department **3 days per week**.
   - The student must demonstrate they have achieved a minimum of **2000 ultrasound training hours** for the duration of the course.

2. **Clinical environment**
   - **A range of ultrasound techniques**: Students are required to observe or perform a broad range of ultrasound examinations including a number of specialised ultrasound examinations eg. Obstetrics, Gynaecology, Small Parts, Paediatric, MSK and Vascular scans. Students, who work in a practice that do not perform some or all of these specialised examinations, will be required to visit an institution (for example, tertiary referral centres) where the student can observe these examinations. Students will be required to organise visits to these institutions themselves.

3. **Student activities away from Clinical Departments**

   The majority of university activities are conducted external to the university via online resources such as QUT’s Blackboard site. The student however is required to attend:

   - The on campus lecture blocks at the beginning of Semester 1 and 2 in the first year and the beginning of Semester 1 in 2nd year. These blocks are approximately 1 week long and correspond to the orientation week as listed on the QUT academic calendar; and
   - Clinical practical assessments as timetabled for each student, the approximate timeline for these are outlined in the clinical supervisor’s handbook provided to the student on acceptance.
Clinical Supervisor Form - Please complete this form and include in the application for entry into the CS60 – Grad Dip Medical Ultrasound

Student’s Name: ..............................................................................................................

Principal Clinical Supervisor Details:
Name: ..............................................................................................................................
Email: ..............................................................................................................................
Contact phone number .................................................................................................
Relevant Qualifications: .................................................................................................
If principle clinical supervisor is a sonographer, please provide
• ASAR Registry No.: ......................................................

Assistant Clinical Supervisor Details:
Name: ..............................................................................................................................
Email: ..............................................................................................................................
Contact phone number .................................................................................................
Relevant Qualifications: .................................................................................................
If assistant clinical supervisor is a sonographer, please provide
• ASAR Registry No.: ......................................................
Name and Address of Clinical Practice:

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Principal Clinical Supervisor Roles and Responsibilities: (Please tick appropriate boxes to confirm your understanding of your roles and responsibilities to students undertaking this course)

| I have read the roles and responsibilities of the Clinical Supervisor and I am willing to comply with these roles and responsibilities. |
| Every reasonable attempt will be made to ensure that the student is rostered in ultrasound for a **minimum of 3 days per week** (minus standard leave privileges). *(NB: entry into the course is subject to this requirement being met).* |

Principal Supervisor’s Signature:  ___________________________________

Date:  ___________________________________

Assistant Supervisor’s Signature:  ___________________________________

Date:  ___________________________________