



2022 Application for Certificate of Applied Science (CAS) Ultrasound Technology

Dear Diagnostic Imaging Manager/Clinical Coordinator,

The Ultrasound Technology Program at City College offers a Certificate of Applied Science in Abdomen/Small Parts Sonography to individuals interested in pursuing a career in Diagnostic Medical Sonography. Our program is a unique blend of online coursework combined with clinical instruction in health care facilities. Applicants residing outside the Billings, MT area who wish to complete the clinical practicums in their area of residence must be able to identify an acceptable clinical site willing to provide the clinical instruction. Students enter clinical rotations concurrently with their didactic courses.

You are reading this letter because a potential applicant has contacted you and desires to complete their clinical practicums at your facility. The program strives to ensure that student clinical experiences are consistent no matter the location and provide exposure to the broad spectrum of diagnostic ultrasound exams. The program provides clinical objectives and competency checklists in addition to evaluations to assist you in evaluating the student's mastery of the expected skills during clinical practicums.

We are requesting your assistance at this time to determine whether the program clinical requirements can be accomplished at your facility.

- Please complete the Clinical Site Verification (CSV) form provided with this letter.
- Once the form has been completed, please return it to the applicant who will submit it to the City College Ultrasound Technology program as part of the application process.
- Upon receiving the CSV, the City College Ultrasound Technology clinical coordinator will contact your facility to further coordinate this process and initiate an affiliation agreement/Memorandum of Understanding (MOU).

We appreciate your thoughtful consideration to support this innovative program for individuals who wish to begin their career in Diagnostic Medical Sonography. If you have any questions, please do not hesitate to contact our department administrative assistant at 406.247.3077.

Sincerely,

Victor White

Ultrasound Technology Program Director



This form is to be filled out by the education/clinical coordinator or the imaging director/manager who can act as a liaison between institutions to provide clinical experience for the following student. Once this form is received, the clinical coordinator at City College will contact the clinical site to establish an affiliation agreement/MOU. This is not a legally binding document.

Student's Name: _____

Institution: _____

Address: _____

Imaging Manager or Contact at the Site: _____

E-mail: _____ Phone: _____

Does your facility employ an ARDMS credentialed sonographer? _____

If so, what credentials does he/she hold? _____

What days of the week do you perform ultrasound exams? Please check all that apply.

Monday Tuesday Wednesday Thursday

Friday Saturday Sunday

If you offer US on the weekends, is your sonographer on call, or on site for a dedicated number of hours?

Approximately how many Ultrasound exams does your facility perform in a year? _____

Please provide a breakdown of the types of exams your facility does by percentage.

Abdomen/Small Parts _____ %

OB/Gyn _____ %

Vascular _____ %

Are there any specific US exams your facility does not perform (please list)? _____

Do you have any concerns we can address to help you in your decision to host the student?

