May 27, 2014

Candace S. Spalding, BA, RDMS, RVT, RT(R)
University of Kansas
School of Allied Health Professions
3901 Rainbow Boulevard, G-600
MS 4032
Kansas City, KS  66160-7234

Program Number: 110131

Dear Ms. Spalding:

The site visit report has been reviewed for the diagnostic medical sonography program sponsored by the University of Kansas, located in Kansas City, KS. The program is in the comprehensive review process for the continuing evaluation of the general and vascular concentrations by the Joint Review Committee on Education in Diagnostic Medical Sonography (JRC-DMS).

The program was evaluated using the CAAHEP Standards and Guidelines for the Accreditation of Educational Programs in Diagnostic Medical Sonography (2011). The following is a composite report developed from documentation submitted by the program and the site visit report submitted by the site visitors. Specific findings from the self-study and site visit review are provided.

I. SPONSORSHIP

Based on the findings of the site visit team, the program appeared to be in substantial compliance, at the time of the site visit, with the criteria in this section of the Standards.

II. PROGRAM GOALS

The program appears to be non-compliant with the following Standard and is requested to provide additional narrative and documentation to demonstrate compliance.

B. Appropriateness of Goals and Learning Domains
The program must regularly assess its goals and learning domains. Program personnel must identify and respond to changes in the needs and/or expectations of its communities of interest.

An advisory committee, which is representative of these communities of interest, must be designated and charged with the responsibility of meeting at least annually, to assist program and sponsor personnel in formulating and periodically revising appropriate goals and learning domains, monitoring needs and expectations, and ensuring program responsiveness to change.

The site visit team identified the following finding for Standard II.B.:

- The program does not have a student or public member on the advisory committee. Tina Crain is noted as the public member; however she is affiliated with the School of Health Professions.
Based on the findings of the site visit team, the program appeared to be in substantial compliance, at the time of the site visit, with the remaining criteria related to this section of the Standards.

**III. RESOURCES**

The program appears to be non-compliant with the following Standard and is requested to provide additional narrative and documentation to demonstrate compliance.

**C. Curriculum**

7. The Vascular Learning Concentration must include the following:
   
d. Demonstrate knowledge and understanding of clinical vascular diagnostic procedures:
      - Relationship of vascular diagnostic techniques to patient history and physical examination
      - Knowledge of appropriate indications for vascular examination
      - Differential diagnosis as it relates to vascular testing and examination
      - Vascular surgery and interventional vascular procedures including intravascular ultrasound, angioscopy, transluminal angioplasty with and without stenting, atherectomy, endarterectomy, patch graft endarterectomy, vein and synthetic vascular bypass procedures as well as embolectomy and thrombectomy, radio-frequency and laser vein ablation, endovascular repair

The site visit team identified the following finding for Standard III.C.7.d:

- Although the vascular didactic staff state that they somewhat cover this material, there wasn’t an area documented in the syllabus or in content outlines that state that the above material is covered.

Based on the findings of the site visit team, the program appeared to be in substantial compliance, at the time of the site visit, with the remaining criteria related to this section of the Standards.

**IV. STUDENT AND GRADUATE (OUTCOMES) EVALUATION/ASSESSMENT**

Based on the findings of the site visit team, the program appeared to be in substantial compliance, at the time of the site visit, with the criteria in this section of the Standards.

**V. FAIR PRACTICES**

Based on the findings of the site visit team, the program appeared to be in substantial compliance, at the time of the site visit, with the criteria in this section of the Standards.

**Program Strengths**

1. Candace Spalding is an excellent Program Director and Ultrasound Supervisor. She is dedicated, hard-working individual who excels at wearing many “professional hats”. Candy should be commended for how well she treats her students and her staff, and encouraging them to pursue professional development opportunities.

2. Regarding the sonography program, Candy has created a program that is academically rigorous, gives students a good amount of clinical exams and variety of pathology, and works closely with the other faculty members in supervising the students. The program has been given excellent support both from a financial and professional development standpoint by the medical center, and has wonderful clinical affiliate support especially by the Medical Advisor, Dr. Stanton Rosenthal. Overall, this program is doing a fantastic job of producing more than just “entry-level” sonographers. They are creating proficient sonographers that can take off as soon as they begin their careers. This reputation has been in place for several years as most of the sonographers in the area are former graduates of the program.

3. The Medical Advisor, Dr. Stanton Rosenthal, is openly enthusiastic about the program and plays an active part in the program, the advisory committee, and in ensuring student success as sonographers.

4. The Clinical Education Coordinator, didactic faculty, and clinical instructors are all hard-working, enthusiastic and dedicated supporters of the program and the students they educate. This was evidenced by the number of program graduates employed at the surrounding clinical sites. All members of the team should be very proud of this program.
Areas of Concern

1. As noted above.

One copy in electronic format of the response to this report of findings, including the signature of the Chief Executive Officer of the sponsoring institution is required prior to June 27, 2014. The response should address the findings outlined in this letter and may also include comments regarding the site visit. We are aware that findings related to outcomes issues may not be fully resolved until additional information has been gathered however, the program must supply the dates by which this information will be available for submission. The institution and program are encouraged to share this report and its response with program faculty and institutional departmental officials of its clinical affiliates. Failure to submit the requested information by the due date given may result in a delay in the overall accreditation process.

If I can provide further information or clarification regarding this report, please contact the JRCDMS office at 443-973-3251 or magat@jrcdms.org.

Sincerely,

Cindy Weiland
Executive Director

cc: Douglas Girod, MD, Acting Executive Dean, School of Medicine
    Karen Miller, RN, Ph.D., FANN, Senior Vice Chancellor and Dean
    Stanton Rosenthal, MD, Medical Advisor