



# DIAGNOSTIC MEDICAL SONOGRAPHY DEGREE PLAN WITH ASSOCIATE OF APPLIED SCIENCE DEGREE (AAS) Emphasis in Vascular Technology

Student \_\_\_\_\_ Emphasis/Title \_\_\_\_\_  
 Student ID# \_\_\_\_\_ Advisor \_\_\_\_\_  
 Proposed Term of Graduation \_\_\_\_\_ Year of Application \_\_\_\_\_ Date \_\_\_\_\_

<i>GENERAL EDUCATION REQUIREMENTS: (Advisor—please indicate transfer/substitute courses)</i>							
SEMESTER I	COURSE	COURSE TITLE	CREDITS REQUIRED	CREDITS RECEIVED	GRADE RECEIVED	PTS. RECEIVED	DATE COMPLETED
<i>Suggested sequence</i>							
	ENG 121	English Composition .I	3				
	PSY 235 *	Human Growth and Development*	3				
	BIO 201*	Human Anatomy & Physiology I (lab req.)*	4				
SEMESTER II							
<i>Suggested sequence</i>							
	MAT 107	Career Math	3				
	BIO 202*	Human Anatomy & Physiology II (lab req.)*	4				
<b>TOTAL CREDIT HOURS:</b>			<b>Required: 17</b>	<b>Rec'd: _____</b>	<b>GPA: _____</b>		

**\* Preferred courses; BIO 201/202 must have a lab component**

Students must receive a "C" or better in all courses

GPA= Total quality pts/ total credit hours

**SEE CATALOG**

<b>Total General Ed. Credits</b>		<b>17</b>
<b>Total Specific Program Credits</b>	+	<b>46</b>
<b>Grand Total of All Credits</b>	=	<b>63</b>

**Comments:**

**Advisor Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Student Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**PROGRAM EDUCATION REQUIREMENTS:** Students must earn a "C" or better in all DMS courses, and prerequisite courses to graduate.

SEMESTER	COURSE	COURSE TITLE	CREDITS REQUIRED	CREDITS REC'D	GRADE REC'D	PTS. REC'D	DATE COMPLETED
<i>Prerequisite Course</i>							
	RTE 255	Multiplaner Sectional Imaging	2				
<i>Required Major Courses</i>							
II	DMS 203	Cerebrovascular Sonography	2				
II	DMS 204	Venous Sonography	2				
I	DMS 251	Vascular A & P	2				
III	DMS 252	Abdominal Vascular	2				
I	DMS 261	Intro to Vasc. Testing	2				
III	DMS 262	Arterial Sonography	2				
I	DMS 241	Ultrasound Physics I	2				
III	DMS 242	Ultrasound Physics II	2				
I	DMS 281	Ultrasound Internship I	10				
II	DMS 282	Ultrasound Internship II	10				
III	DMS 283	Ultrasound Internship III	10				
<b>TOTAL CREDIT HOURS:</b>			<b>46</b>	<b>GPA: _____</b>			

Advisor initials \_\_\_\_\_

Date \_\_\_\_\_