

# CATALOG



## Cardiac Specialist Certificate Program

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### **NOTICE OF NONDISCRIMINATORY POLICY AS TO STUDENTS**

The Arrhythmia Technologies Institute, Inc., admits students of any race, color, national or ethnic origin to all rights, privileges, programs and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, admissions policies, and other school-administered programs.



## HISTORY

The modern era of cardiac electrotherapy began with ventricular defibrillators as a resuscitative maneuver. In 1952, Morgagni-Adams-Stokes syndrome was shown to be held in check by electrical stimulation. In 1958, Furman, Robinson and Schwedel introduced transvenous pacing which permitted a simpler and safer pacing route. Sennings and Elmquist, also in 1958, surgically implanted the first permanent pacemaker. The Space Age technology utilized in cardiac electrotherapy has changed and improved rapidly.

Cardiac Implantable Electronic Devices have continued to evolve rapidly. The need for professionally trained technologists to aid the physician in managing and optimally utilizing these devices and the complex support equipment is apparent. Until now, training for cardiac devices could only be obtained on-the-job or through seminars usually sponsored by industry.

Arrhythmia Technologies Institute, Inc., was established in 1987 by individuals located at the Robert L. Batey Cardiology Center and L.W. Blake Hospital in Bradenton, Florida to provide comprehensive training in the field of cardiac device technology. The school relocated to Greenville, South Carolina in June 1997 to take advantage of an increased growth potential and more extensive clinical training sites.

## AFFILIATE INSTITUTIONS

ATI utilizes facilities located in six affiliate hospitals and also has cooperation with other institutions to clinically train students. These facilities provide access to classrooms, libraries, surgery suites, follow-up laboratories, EP laboratories and other related areas for the Cardiac Device Technology program.

### **Prisma Health**

Greenville Health System and Palmetto Health are now Prisma Health. Together, we're looking at health in a completely new way, and we're dedicated to supporting the health and well-being of you and your family. Our promise is to: Inspire health. Serve with compassion. Be the difference.

### **Spartanburg Regional Healthcare System**

Spartanburg Regional Healthcare System is an integrated healthcare delivery system that provides care from one's birth through the senior years. We've been a partner with the community for more than 90 years and have earned a reputation for technological excellence.

### **AnMed Health**

AnMed Health is a dynamic, comprehensive health system in Anderson, S.C. For more than 100 years, AnMed Health has provided health care for residents of eight counties in upstate South Carolina and northeast Georgia. AnMed Health's medical staff includes more than 400 physicians, and with over 3,600 employees, AnMed Health is Anderson County's largest employer.



### **Mission Health**

Mission Health is based in Asheville, N.C., and is the state's sixth largest health system. For six of the past eight years, we have been named one of the nation's Top 15 Health Systems by IBM Watson Health—and we're the only health system in North Carolina to achieve this recognition. We operate six hospitals; numerous outpatient and surgery centers; a post-acute care provider, CarePartners; a long-term acute care provider, Asheville Specialty Hospital; and the region's only dedicated Level II trauma center. And with more than 10,500 dedicated colleagues, Mission Health is capable and committed to improving the health and wellness of the people of Western North Carolina.

### **Self Regional HealthCare**

Self Regional Healthcare began as Self Memorial Hospital in 1951 and was built to be one of the most advanced hospitals in the country. Mission: Our hearts, hands and minds are leading our communities to better health. Vision: The care, experience and value we provide will be superior for all the communities we are entrusted to serve. Purpose: Always create the best experience.

### **St. Francis Hospital**

A 245-bed hospital and the St. Francis Outpatient Center. We're proud to offer: Emergency services, Heart Care, Heart Surgery, Inpatient Cancer Services, Bone Marrow Transplantation Center, Orthopedic Surgery, Osteoporotic Fracture Program, Spine Surgery, Neurosurgery, Radiology and Imaging Services, Sleep Center, Outpatient Surgery, Laboratory Services, and more.

Our Mission: To extend the compassionate ministry of Jesus by improving the health and well-being of our communities and bringing help to those in need, especially people who are poor, dying and undeserving.

Our Vision: Inspired by God's hope for the world, we will be a ministry where associates want to work, clinicians want to practice, people seek wellness and communities thrive.

## **PHYSICAL FACILITIES**

The school facilities include over 5,500 square feet of classroom and office space. Teaching methods include classroom lectures and numerous visual aids, skill laboratories and clinical practicums. The school is equipped with a comprehensive array of pacemakers, defibrillators, programmers, pacing systems analyzers, EP Mapping Systems, and heart simulators for hands-on practice.

## **STATEMENT OF PURPOSE**

Arrhythmia Technologies Institute (ATI) is dedicated solely to training individuals in the specialized professions of cardiac electrophysiology and cardiac device technology. Historically there has been no direct career path available to attain entrance into these specialized fields. Non-experienced new-hires typically require six months to a year of employer-provided training before a new-hire is able to perform basic tasks without supervision. Employers typically see a significant number of new-hires fail their training using this method.



ATI's Cardiac Specialist Program creates a direct career path for college graduates to be able to enter the specialized professions of cardiac electrophysiology and cardiac device technology. In addition, ATI graduates require less training and less time to complete their employer's training with an extremely high likelihood of passing compared to a non-experienced hire.

## **MISSION STATEMENT**

Arrhythmia Technologies Institute's mission is to educate students by combining dynamic, rigorous academic study with field-based experience in the disciplines of cardiac rhythm management and electrophysiology. ATI seeks distinction by promoting patient care, stewarding the education of the device management specialist and creating mutually beneficial partnerships with healthcare and medical device companies.

### **ATI seeks to accomplish this mission by:**

- Improving the quality of patient care and the efficiency of health care delivery through education.
- Encouraging ethical and patient-centric decision-making and behavior by instilling a sense of social responsibility in each student.
- Creating an environment that fosters intellectual and personal development of students.
- Engaging in a curriculum that provides our students with academic and clinical instruction in electrophysiology to prepare them for successful interactions in the EP lab environment.
- Emphasizing field-based experiences firmly grounded in theory through exposure to simulation laboratories, live device implantations and device follow-up clinics.
- Providing training on multiple pacing systems analyzers and programmers to ensure students are able to perform complicated programming sequences, data retrieval and interpretation to make clinical assessments.
- Designing continuing education programs for industry personnel and medical professionals.

## **PROGRAM OBJECTIVE**

1. Prepare individuals to be successful in the field of Electrophysiology and Cardiac Device Technology.
2. Prepare individuals to be aware of the job responsibilities in the Cardiac field by shadowing in hospitals and clinics.



3. Prepare individuals to be knowledgeable in the Cardiac field by working with simulators here at ATI and in the EP lab, implant lab and follow up lab.
4. Prepare individuals to perform in the Cardiac field by computerized testing as well as hands on testing.

### **LICENSING**

Licensed by the Commission on Higher Education, 1122 Lady Street, Suite 300, Columbia, SC 29201, Telephone (803) 737-2260, [www.che.sc.gov](http://www.che.sc.gov). Licensure indicates only that minimum standards have been met; it is not an endorsement or guarantee of quality. Licensure is not equivalent to or synonymous with accreditation by an accrediting agency recognized by the U.S. Department of Education.

### **OWNERSHIP/GOVERNING BODY**

Arrhythmia Technologies Institute, Inc. is a non-profit corporation formed under the laws of the State of Florida and registered as such in the State of South Carolina. The governing body is the Board of Directors consisting of: James Brubaker, James Holland and Kimberly Walters.

The corporation officers include the President/Treasurer James Holland and Vice President/Secretary Kimberly Walters.

### **PROGRAM DIRECTORS AND ADVISORS**

Educational Director and CEO: James Holland, MS  
Testamur, NASPEXAM/AP  
BS, University of North Carolina  
MS, Nova University

Director of Professional Development & Clinical Education & COO:  
Kimberly Walters, BSN, MBA  
ATI Alumnus  
BSN, East TN State University  
MBA, Strayer University

Medical Advisor: Jay Gaucher, MD, FACC  
Cardiologist with Carolina Cardiology Consultants  
M.D. Medical College of Virginia

Clinical Advisor: David Rodak, MD, FACC  
Electrophysiologist with Cardiology Consultants in Spartanburg  
M.D. West Virginia School of Medicine



## FULL-TIME FACULTY

James Holland, MS

Kimberly Walters, BSN, MBA

Paul Holland, AS

Erik Hammes, BS, MS, PhD

Lindsey Huguley, BA

Rebecca Jones, BA, CCDS

Additional faculty includes physicians, engineers, scientists, clinical managers, regional directors, and other professional personnel.

## COURSE TUITION AND PAYMENT SCHEDULE

Tuition Cost: \$29,500.00. Books & Materials are included. Deposit: A \$1,000.00 deposit is due upon mutual acceptance. \$350.00 of the deposit is non-refundable. The remaining \$650.00 is non-refundable after 90 days prior to the program when books are purchased, however, the student may keep books and materials.

Balance Due: 90 days prior to program \$28,500.00

Total Cost: \$29,500.00

Living expenses are not included in the tuition and are the responsibility of the student. Financial aid is not available through ATI and the school does not qualify for traditional student grants, loans or the GI Bill.

Clinical training is required and will take place off-site away from the main campus at several other facilities. Therefore, a motorized means of transportation will be required, and there will be additional personal costs related to traveling (e.g., fuel costs, car maintenance, insurance, etc.) to these clinical sites for training.

There may also be seminars or meetings dealing with cardiac device technology, which the student may wish to attend outside of the school. The student must pay these costs, however, these extracurricular activities are not required as part of the program.

## REFUND POLICY

Should a student withdraw or be dismissed from the program for any reason, all refunds will be made according to the following schedule:

1. Tuition will be refunded, minus fees ATI has already incurred for books, materials, health screenings, radiology badges, etc., if the student withdraws within 72 hours (excluding weekends and holidays) after signing the enrollment agreement.



2. Withdrawal after attendance has begun but prior to sixty percent (60%) completion of the program will result in a Pro Rata refund. The refund will be computed from the last day of attendance, less any unpaid charges owed for the period of enrollment for which the student has been charged, and less a \$100 withdrawal administrative fee. The student may keep all books and supplies provided by the school to date.

The portion of the period of enrollment for which charges will be determined is computed by dividing the number of clock hours comprising the period of enrollment for which the student has been charged into the number of clock hours remaining to be completed by the student as of the last recorded day of attendance by the student and rounded downward to the nearest ten percent of that period.

3. Withdrawal after completing sixty percent (60%) of the program will result in no refund. The student may keep all books and supplies provided by the school to date.
4. Effective termination date: the termination date for refund computation purposes is the last date of actual attendance by the student.
5. Refunds will be made within forty (40) days of the effective termination date.

### **HEALTH INSURANCE AND MEDICAL RECORDS MANDATORY**

Students are required to carry their own health insurance for interaction in the clinical portions of the program. This insurance is not available through the school and is not covered by tuition costs. Proof of health insurance will be required prior to coming to school. Prior to class starting dates, students must provide proof of healthcare status to include TB (by PPD test within the past year), rubella and rubeola, mumps, varicella (chicken pox), tetanus (or tetanus booster within the last 10 years), and Covid vaccine. If shot records are not available for rubella, rubeola, mumps or varicella we will need a copy of results from a titer being drawn. Students are also required to be vaccinated against hepatitis B (three shots over a six-month period). *As students will be working in the healthcare field and typically work for companies that require drug screening, students may be asked to submit to a drug screening test during the course of the school year if one was not submitted as part of the application process.* This list may be updated periodically to reflect affiliated hospital requirements for clinical training.

### **ADMISSION REQUIREMENTS**

1. The number of qualified students to be accepted into the school will be determined annually by the Board of Directors.
2. Students, to be qualified, must be a US citizen and must hold a baccalaureate degree.
3. Students will be accepted by the school only after their application, current curriculum vitae or resume, official college transcripts, essay, introductory video and two letters of reference (professional individuals) have been evaluated as



satisfactory. The student must also interview with a school official coinciding with an on-site visit of the school facilities. Satisfactory Background Check/Motor Vehicle Report are also required. Application materials are accepted year round.

The school may refuse admission to any student who does not meet all of the above requirements. The standards required for continuing in the program shall be clearly stated and made available to the student. The school reserves the right to choose among qualified applicants.

#### Application Requirements:

1. Application
2. Resume or Curriculum Vitae
3. Official College Transcript
4. Essay
5. Introductory Video
6. Two Letters of Reference
7. Background Check/Motor Vehicle Report

### **STUDENT APPLICATION PROCEDURE**

Individuals interested in attending the Arrhythmia Technologies Institute, Inc. should view our website [www.atischool.org](http://www.atischool.org) to get the necessary information including an application, and any updated information concerning the next class. Students should submit a completed application packet consisting of an application, current curriculum vitae or resume, official college transcripts, essay, introductory video, two letters of reference (professional individuals) and background check/motor vehicle report. The admissions committee will evaluate application materials, and interviews will be by invitation only. The application process is open year-round.

### **POLICY ON GRANTING CREDIT OR ADVANCED STANDING**

There is no credit granted or advanced standing for any previous training or education.

### **POLICY ON TRANSFER OF CREDIT**

The school makes no claim or guarantee that credit earned from this program will transfer to any other program or institution.

### **CLASS STARTING AND ENDING DATES**

The spring program is six months and begins in February each year and ends in July. The fall program is six months and begins in August each year and ends in January. The tentative class schedule is Monday through Friday from 8:00am - 5:00pm. Specific class schedules are variable due to the clinical training, guest speakers and interviews that may begin earlier or run later than the stated 8:00am - 5:00pm times.



## **HOLIDAYS**

School will not be held: Easter Monday, July 4<sup>th</sup>, Memorial Day, Labor Day, Thanksgiving (Wednesday, Thursday and Friday), two-weeks for Christmas Break (including Christmas Day and New Year's Day), and Martin Luther King, Jr Day. Additional holidays may be declared at the discretion of a Program Director. Also, each student has two personal days that can be taken when needed with appropriate supervisor approval.

## **TYPICAL CLASS SIZE**

Typical class size for the Cardiac Specialist Certificate Program is 24-48 students. The minimum number of students required to offer the program is 12. In the event the minimum enrollment is not reached, students will be notified of the new start date via email and will have the option of withdrawing with a full refund, or continuing the enrollment process in a future class.

## **CARDIAC SPECIALIST COURSE CURRICULUM**

### **I. Lectures**

Lectures start with the foundations of cardiac anatomy and physiology along with basic ECG analysis and build to interpretation of cardiac arrhythmias, understanding arrhythmia mechanisms, and available treatments. This includes advanced understanding of cardiac device therapies, catheter ablation, and related modalities and procedures.

### **Basic Cardiac Electrophysiology**

An introduction to electrophysiology is presented. Terminology, action potentials, ion channels, and the concepts of brady and tachyarrhythmias are discussed. The specifics of electrophysiology testing in relation to bradycardias and tachycardias are examined and discussed. Particular attention is paid to arrhythmia diagnosis and treatment as it relates to cardiac implantable electronic devices (CIEDs) and catheter ablation.

### **Basic Pharmacology**

Cardiac medications and their effect on the cardiac conduction system are discussed, particularly in relation to EP studies, catheter ablation, cardiac pacing, and implantable cardioverter defibrillators.

### **Business and Marketing**

The business aspects of the cardiac electrophysiology space will be introduced and taught; particularly, business ethics, marketing oneself to an employer, business practices related to this field, how to conduct oneself in relation to healthcare providers, building your brand, and other pertinent topics.



## **Cardiac Anatomy and Physiology**

Detailed cardiac anatomy and physiology are taught, especially in relation to cardiac electrophysiology. This includes structures and functions of the cardiovascular system, action potentials and biochemistry of cell depolarization, cardiac hemodynamics, and basic cardiac pathology with possible resulting therapies and procedures.

## **Cardiac Device Follow-Up**

Topic specific lectures are presented regarding implanted cardiac device DRGs, pacing, available parameters, programming concepts, optimization of parameters, magnet use, timing cycles, NBG codes, programmer use, lead testing, rate modulation, upper rate behaviors, manufacturer specific algorithms, acute and chronic complications, interpreting recorded rhythms, and data management. Additionally, students will apply these concepts with coinciding laboratory practice.

## **Cardiac Device Follow-up Interpretation**

Content discusses cardiac device follow-up, the role of the allied health professional, and clinical interpretation of chronic cardiac device diagnostics and data. The modes of long-term device follow-up are discussed, such as in-clinic follow-up and remote monitoring. Practical application of interpretation and presentation of preliminary technical reports are discussed, reviewed, and practiced through presented content and exposure to clinical case studies.

## **Cardiac Life Support**

Students are expected to understand and have taken a Basic Life Support course. This content focuses on various methods of emergency and temporary pacing and advanced defibrillation and cardioversion.

## **Cardiac Pathology**

This course examines disease processes which affect the cardiovascular systems and includes lectures and discussions concerning atherosclerosis, ischemic heart disease, myocardial infarctions, valvular heart disease, heart failure, hypertension and others. This content especially focuses on pathology relations to cardiac arrhythmias including both brady and tachyarrhythmias.

## **Cardiac Resynchronization Therapy**

This course content covers pathophysiology leading to need for cardiac resynchronization therapy (CRT), the indications for CRT, mechanisms of cardiac resynchronization, CRT device implant procedures, and device follow-up troubleshooting and optimization in the CRT patient.



## **Clinical Electrophysiology**

Content includes advanced testing and treatment options for cardiac arrhythmias, building upon basic electrophysiology concepts. This includes but is not limited to initial patient assessment, clinical evaluation, indications and contraindications for therapy options, advanced EP topics including pacing maneuvers and ablation strategy, and application with clinical case studies.

### **Electrocardiography**

Includes instruction on analysis of normal and abnormal ECGs, along with clinical application of interpretation utilizing available cardiac device therapies and/or catheter ablation. Additionally, instruction on interpretation of paced ECG morphologies in relation to pacing maneuvers and numerous possible cardiac device pacing modes.

### **Cardiac Electrophysiology and Related Procedures**

Aspects of cardiac electrophysiology (EP) and related procedures are presented. This includes pre-procedural considerations, operating room and EP/catheterization laboratory procedures, sterile environments, ECG monitoring, allied health care professional roles, and use of laboratory equipment including mapping systems, programmers, pacing system analyzers, and accessories.

### **Fundamentals of Electronics**

Electrical concepts are presented including Ohm's Law, field strength, stimulation thresholds, basic and derived quantities, units of measurement, relationships, circuit and signal components, electronic subsystems, voltage, current and resistance, and energy and power.

### **Guest Lectures**

Guest lecturers, including physicians, allied health professionals, industry professionals, and alumni, will visit and discuss real world experiences, case studies, best academic and professional practices, upcoming technologies, and content related to cardiac electrophysiology.

### **Imaging**

Identification of cardiac anatomy and related structures through cardiac imaging are taught. This includes radiology, echocardiography, and other imaging mediums. This knowledge is utilized to identify structures to aid in the fluidity of procedures and possible procedural and follow-up related complications.

### **Implantable Cardioverter Defibrillators**

The theory, indications, considerations, implant procedure, follow-up procedure, complications, troubleshooting, device interactions, and operations of various



implantable cardioverter defibrillators (ICDs) are introduced. ICD therapies, therapy settings, and optimization of parameters are discussed. Additionally, courses cover a historical review of the ICD as well as newest “tiered therapy” devices and ICD technology.

### **Indications**

The standard accepted indications for CIED implantation and catheter ablation intervention are presented and discussed. Additionally, indication based cardiac device follow-up methods are presented and students will practice application through content delivery, clinical case study presentation, and hands-on laboratory practice.

### **Interviewing and Business Skills**

This professional development content specifically fosters skills related to interviewing and professional follow-up. Lectures on interviewing techniques, resume writing, and mock interviews are provided with faculty mentorship and feedback.

### **Intracardiac Electrogram Interpretation**

In addition to interpretation of surface ECGs, students will learn to quickly assess intracardiac electrograms in relation to catheter or lead placement in the heart. Instruction will include interactive lectures, clinical case studies, and coinciding laboratory and clinical experience.

### **Medical Jurisprudence**

Liability, patient rights, and legal risks are presented and discussed in regards to the cardiac electrophysiology field and allied health care professional role.

### **Medical Terminology**

Students will gain a working knowledge of the terminology unique to the medical profession and specific to cardiac electrophysiology. The terminology for accompanying hardware, including laboratory and follow-up equipment are demonstrated, discussed and explained.

### **Non-Invasive Cardiac Diagnostic Testing**

Numerous non-invasive cardiac diagnostic tests are presented in relation to heart rhythm disturbances, providing evidence for indication of EP intervention, and troubleshooting cardiac device related complications.

### **Pacemakers**

The theory, indications, considerations, implant procedure, follow-up procedure, complications, troubleshooting, device interactions, and operations of various



implantable pacemakers are introduced. Therapy settings and optimization of parameters are discussed. Additionally, courses cover a historical review of the pacemaker as well as newest available devices and pacemaker technology.

### **Patient Interaction**

This content discusses the ways to provide indication based clinical assessment, appropriate patient education, and professional communication with patients in the setting of device follow-up, the EP lab, and other locations where the cardiac specialist's services and knowledge are needed.

### **Pediatric Electrophysiology and Considerations**

The concepts related to the subspecialty of pediatrics with congenital anomalies and heart rhythm disturbances, along with therapy and treatment options are examined.

### **Product Research Requirements**

Reporting mechanisms, adverse secondary effects, clinical phases, MDS act of 1990, IDE, components of IDE, reporting responsibilities, pre-market notification and application, and post-market surveillance are all topics to be presented and discussed in this course.

### **Recalls, Regulatory Terminology, and Product Performance**

Recall and regulatory terminology is discussed, as well as how to handle a recall or advisory in the clinical arena.

### **Regulatory and Cost Matters**

DRGs, registry, EP, ICDs, USA health care systems, discharge planning, updated regulations, and managed care are topics to be presented and discussed in this course.

### **Safety**

Infection control, radiation safety, electrical safety, procedural safety, drug interactions, device interactions, and EMI are presented in relation to the hospital and clinical environment.

## **II. Skills Laboratories**

The skills laboratory learning approach attempts to coincide with specific classes to provide an opportunity for hands-on experience in a simulated and closely supervised environment.



## **Electrophysiology Laboratory**

Students observe and participate in training, topic specific labs, and simulated procedures that take place in our mock electrophysiology laboratory. These simulated procedures include EP studies, cardiac device implants, catheter ablations, and structural heart procedures. Students practice on current manufacturer specific equipment.

## **Follow-up Laboratory**

Students observe and participate in training, topic specific labs, and simulated troubleshooting scenarios regarding cardiac device follow-up. The cardiac device exposure in this laboratory includes a variety of manufacturer specific pacemakers and ICDs utilizing current manufacturer specific equipment.

## **Journal Club and Clinical Case Studies**

Students read, interpret, and present reports from current medical journals, literature and experiences during clinical rotations. Students will be evaluated and receive faculty feedback on their ability to deliver the information to their peers and answer related questions.

### **III. Clinical Practicum**

Students experience hands-on clinical training through in-hospital and follow-up settings. These experiences include cardiac device follow-up in addition to cardiac and structural heart procedures primarily taking place in cardiac electrophysiology and catheterization laboratories.

### **IV. Professional Development**

ATI provides an environment that fosters professional development, as well as providing professional developmental training to each student via didactic and one-on-one meetings with the faculty. Classes offered include: Coaching, Mentoring, Leading/Teamwork, Selling, EQ vs IQ, Resume Writing, Networking, Interview Skills/Mock Interviews, Understanding Personalities, Verbal vs. Nonverbal Body Language, Professional Follow-up/Thank you.

Total: > 1,000 clock hours

## **GRADING**

Students will be graded on a Pass/Fail basis for many of the courses, particularly, those dealing with the clinical aspects of cardiac device technology. The grade will be based on the instructor's evaluation of the student's ability to follow instructions, quality of work and demonstration of proficiency in a particular area of study.



The academic courses will be graded according to the following schedule:

A - 90-100%	B - 80-89%	C - 70-79%
D - 60-69%	F - 59% or below	

Progress reports are available upon request.

Clinical evaluations will occur frequently with the appropriate supervisors of the student in those areas of clinical training. Written evaluations will become a part of the student's permanent record.

A failed test (score less than 70%) in a course will be repeated at the discretion of the instructor.

## **GRADUATION REQUIREMENTS**

A Certificate of Completion in Cardiac Device Technology and Electrophysiology is presented when the student:

1. Successfully completes the required program classes, tests and assignments, and
2. Fulfills all monetary obligations to the school.

## **STUDENT SERVICES**

### **1. Student Records**

Student records are permanently retained by the school and are available to students upon individual request.

### **2. Student Placement**

Students are assisted with job placement and furnished with contact information for employment possibilities. Inquiries made to the school from potential employers will be communicated to all students. The school will assist the students with employment to the best of its ability. The school cannot guarantee that enrollment in this program or graduation from this program will result in employment. At times students are strongly advised by ATI staff to pursue a specific route, and in extreme cases if the student does not follow advice, ATI could withhold endorsement of the student.

## **RULES AND REGULATIONS**

### **1. Attendance**

Students are expected to be at the school during regular school hours. Missing class without prior approval from the appropriate instructor is considered an unexcused absence. After one unexcused absence, the student is counseled by a Program Director and placed on probation. Should the student have another unexcused absence while on



probation, the student will be counseled by a Program Director and, at the Director's discretion, may be dismissed from the program.

## **2. Tardiness**

A student arriving after attendance has been taken is considered late and will be marked absent unless the instructor considers the reason legitimate. All class time missed in excess of fifteen (15) minutes must be made up by the student prior to graduation.

## **3. Makeup Work**

Students are expected to make up work missed due to absences, tardiness, and clinical training. Tests to be made up will be taken at the earliest possible convenience of the instructor but no later than one week after the original test date. Reports or homework assignments will be due the first day the student returns to school.

## **4. Conduct**

Students are expected to conduct themselves in a professional manner at all times. Inappropriate language, possession of alcohol or unprescribed drugs, and disrespectful behavior are considered unsatisfactory behavior and are grounds for dismissal. A student whose conduct is detrimental to the school, staff or other students will be dismissed from the program. Theft of property from the school, affiliated institutions or other students, cheating on a test, breaching trust of patient information and confidentiality is cause for immediate dismissal.

Appropriate dress is required for school attendance. Excessive piercings or jewelry is not permitted. One ring per hand and one earring per ear is the acceptable standard. Students should present a professional appearance at all times while in school and at clinical locations.

## **5. Probation**

A student who does not adhere to the attendance policy will be placed on probation for thirty (30) days. Should the student have an unexcused absence while on probation, they will be counseled by a Program Director. At the discretion of a Program Director, the student may be dismissed from the program.

## **6. Training Interruptions and Dismissal**

A student who has not successfully completed the examinations at the end of each course is encouraged to attend additional tutoring sessions. A retest on the class material is permitted within a reasonable period of time as determined by the instructor. If the student fails the retest, they will be counseled by a Program Director as to the advisability of continuing in the program since a Certificate of Completion may not be awarded due to inadequate skills.

## **7. Leaves of Absence**

A student may be granted a leave of absence, limited to two weeks, by a Program Director. A request for the leave of absence must be in writing with the expected date of



return specified. If the student does not return to the school program within two weeks, the student will be dismissed from the program and a refund granted according to the Refund Policy.

### **8. Reentry**

A student who has withdrawn or been dismissed from the program and desires to reenter the program must notify the school and follow the admission procedures. A student who was dismissed from the program for any reason must interview with a Program Director and show cause why he/she should be reinstated. The decision of the Program Director is final.

### **9. Withdrawal from the School Program**

A student may withdraw from the school program at any time by notifying the school in writing of this decision. The student's enrollment agreement will then be terminated and a refund will be granted according to the Refund Policy.

### **10. Student Complaints**

Student complaints should be brought to the attention of the President of ATI. He will then discuss the complaint(s) with the appropriate parties and a suitable resolution will be sought. A written record of the disposition of the complaint will be kept on file by the school.

If the complaint cannot be resolved at the school level through its complaint procedure, students may file a complaint with the South Carolina Commission on Higher Education. The complaint form is available via the following link:

[http://www.che.sc.gov/CHE\\_Docs/AcademicAffairs/License/Complaint\\_procedures\\_and\\_form.pdf](http://www.che.sc.gov/CHE_Docs/AcademicAffairs/License/Complaint_procedures_and_form.pdf)

A formal hearing will be initiated involving all concerned parties with a final discussion and resolution.