

OBSERVATION REPORT RECORD

Diagnostic Medical Sonography

A minimum of 40 hours of observation is required for acceptance into the Diagnostic Medical Sonography Program. Consideration will be given if you have worked or are currently working in a medical imaging setting.

Please use this form for recording your clinical observations. The observations must be completed under the direction of the department/facility supervisor for applicants to the Sonography Program.

Submit this completed document with your "Completion Packet Checklist" to:

College of Southern Nevada
 Limited-Entry Office
 Charleston Campus – W1K
 6375 West Charleston Boulevard
 Las Vegas, Nevada 89146

Name _____
 Last First Middle All Last Names Used

Address _____
 Number Street Apt. Number Social Security Number

_____ **Telephone** () _____
 City State Zip Day Number

Date	Agency & Address	Contact Person & Phone Number	From (Time)	To (Time)	Number of Hours