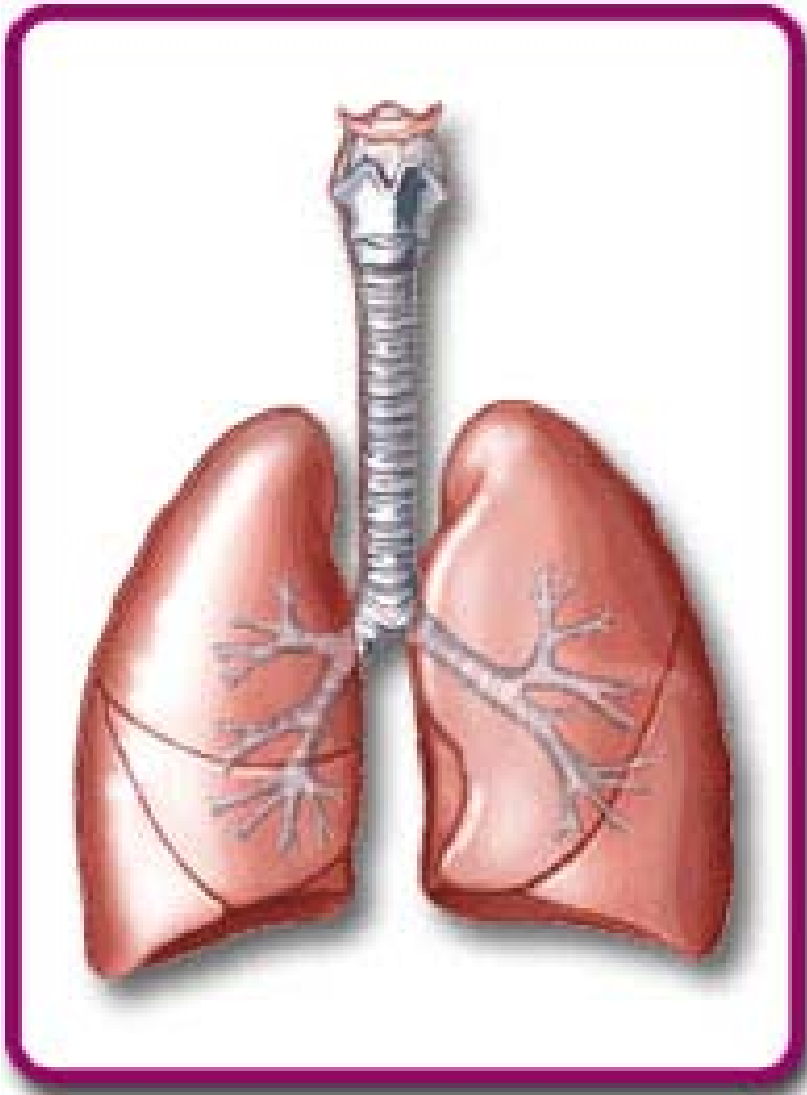


St. Johns River Community College



Respiratory Care

Program Handbook & Policy Manual

Fall 2009

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St. Johns River Community College

RESPIRATORY CARE

WELCOME

On behalf of the faculty and staff of St. Johns River Community College (SJRCC), we welcome you to the Respiratory Care Program. This program is designed to prepare you to become a Registered Respiratory Therapist. This course of study is a combination of both technical and general education courses. The clinical education is carefully planned with area health facilities.

The completion of this 21-month program fulfills the educational requisite for confirmation of the Associate in Science Degree and meets the requirements for taking the National Board for Respiratory Care examinations granting the titles of Certified Respiratory Therapist (CRT), and Registered Respiratory Therapist (RRT).

The Respiratory Therapist is qualified to assume primary responsibility for respiratory and cardiac care, including the supervision of technicians. The therapist makes patient care decisions concerning the use of life-support systems, oxygen therapy and other breathing treatments. They also perform heart and lung diagnostic studies.

Graduates may be employed in hospitals, clinics, cardiopulmonary labs, education, industry, and home care.

The policies of the program are set forth in this handbook. These policies are implemented so that each student will have an understanding of expectations in most eventualities and for the enhancement of the program. This handbook is not intended to replace or substitute policies and procedures addressed in the College catalog. The intent of this handbook is to be a supplement to the College catalog and addresses Respiratory Care program specific information. All students enrolled in the Respiratory Care program at SJRCC, are subject to the rules and regulations of both the College catalog and the Respiratory Care Student Handbook.

Again, we welcome you.

Thomas D. Baxter, MHRD, R.R.T.
Holly Coulliette, BS, R.R.T.

Faculty

Thomas D. Baxter – Program Director (PD), phone 904-808-7458

ThomasBaxter@SJRCC.edu

Holly Coulliette - Director of Clinical Education(DCE), phone 904-808-7441

HollyCoulliette@SJRCC.edu

Anna Lebesch – V.P. of Workforce Development, phone 386-312-4061

AnnaLebesch@SJRCC.edu

Maureen McKanna – Secretary, phone 904-808-7465

MaurenMcKann@SJRCC.edu

Program Faculty

The respiratory care faculty serves as an initial point of contact for all program concerns. The faculty is available on an appointment basis and during office hours. In addition, during each semester an evaluation conference is scheduled with the faculty to review your progress. Times for these conferences will be announced, and it is the student's responsibility to sign up for and attend these conferences.

Medical Director

Dr. Manoj Prakash – 904-797-2338

Counseling and academic advisement

A counseling office is located on each campus of SJRCC. Professional counselors are available to work individually with students requesting assistance in the decision-making process involving academics, vocational choice and personal adjustment.

The telephone numbers for counseling are:

| | |
|----------------------|----------------|
| Palatka Campus | (386) 312-4035 |
| Orange Park Campus | (386) 276-6855 |
| St. Augustine Campus | (386) 808-7400 |

In addition to the counseling office, the respiratory faculty is available to advise and/or make necessary referrals for academic advisement of students. Students will be assigned a faculty advisor upon acceptance into the program. Individual appointments need to be made directly with the faculty.

Accreditation

The St. Johns River Community College holds a Letter of Review from the Committee on Accreditation for Respiratory Care (www.coarc.com).

CoARC 1248 Harwood Rd Bedford, Texas 76021-4244

(817) 283-2835 (817) 354-8519 (fax)

Program Mission Statement:

The mission of the Respiratory Care program at St. Johns River Community College is to provide an educational experience which will allow individuals the opportunity to obtain the knowledge, skills, and attitudes necessary to function at the entry and advanced levels of Respiratory Care.

Philosophy & Objective

The philosophy of the educational approach of this program is one of professional development and application of material. Learning is an active and ongoing process manifested by a change in behavior and involving cognitive, affective and motor skills. Each individual learns at his or her own rate depending on abilities, needs, motivation, and experience. Therefore, the program uses a multi-faceted, multi-stage approach to curriculum development.

Development of an individual's commitment to optimum respiratory care is the program's foremost goal. Another primary objective of this program is to meet the community needs for respiratory care providers and build and maintain a progressive respiratory care profession for the citizens of the community.

Respiratory Care is a dynamic profession based on psychosocial and biophysical sciences involving actions which facilitate and promote the health of individuals, groups, and communities. The Respiratory Care educational process is a systematic method of utilizing knowledge, theory, and skills to facilitate the provision of care. The program includes preparation in general education and respiratory courses. The scope of respiratory care encompasses the following roles: direct caregiver, communicator, patient advocate, patient educator, and manager of patient care. The educational preparation influences the manner in which the therapist performs these roles.

The Respiratory Care Program at St Johns River Community College functions on the honor system. The profession you are preparing for demands the utmost integrity and ethics. Students are given access to confidential and sensitive information. All areas of training measure fundamental approaches to truth, honesty, integrity and ethical conduct.

PROGRAM COMPETENCIES/OUTCOMES:

Upon successful completion of the program the graduate, in any patient setting, will be able to:

1. Demonstrate effective reading, writing, speaking, and listening skills by adequately communicating with patients, family and health care professionals in the appropriate clinical situations required for the profession.
2. Demonstrate the ability to apply basic computational, science and computer skills.
3. Demonstrate an appropriate professional behavior.
4. Demonstrate the ability to collect/analyze information and make decisions on patients.
5. Demonstrate technical proficiency.

American Association for Respiratory Care

9425 N. MacArthur Blvd, Suite 100, Irving, TX 75063

AARC Statement of Ethics and Professional Conduct

In the conduct of professional activities the Respiratory Therapist shall be bound by the following ethical and professional principles. Respiratory Therapists shall:

- Demonstrate behavior that reflects integrity, supports objectivity, and fosters trust in the profession and its professionals. Actively maintain and continually improve their professional competence and represent it accurately
- Perform only those procedures or functions in which they are individually competent and which are within their scope of accepted and responsible practice
- Respect and protect the legal and personal rights of patients they treat, including the right to privacy, informed consent and refusal of treatment
- Divulge no protected information regarding any patient or family unless disclosure is required for responsible performance of duty, or required by law
- Provide care without discrimination on any basis, with respect for the rights and dignity of all individuals
- Promote disease prevention and wellness
- Refuse to participate in illegal or unethical acts
- Refuse to conceal, and will report, the illegal, unethical, fraudulent, or incompetent acts of others
- Follow sound scientific procedures and ethical principles in research
- Comply with state or federal laws which govern and relate to their practice
- Avoid any form of conduct that is fraudulent or creates a conflict of interest, and shall follow the principles of ethical business behavior
- Promote health care delivery through improvement of the access, efficacy, and cost of patient care
- Encourage and promote appropriate stewardship of resources.

Effective 12/94
Revised 12/07

GENERAL INFORMATION

**ST. JOHNS RIVER COMMUNITY COLLEGE
ASSOCIATE IN SCIENCE IN RESPIRATORY CARE ESTIMATED COST SHEET FOR IN-STATE
STUDENTS**

St. Johns River Community College Application Fee = \$30.00
 General Education Courses 27 hours at \$85.00 per credit hour = \$2,295.00
 Books for General Education Courses = \$990.00
 Professional Check = \$30.00
 Criminal background check and drug screen = \$30-35; drug screen varies according to site chosen by student (This cost is not included in Estimated Total Cost)
 Lab fees for general education biology courses = \$81.00
 Respiratory Core Courses 50 hours at \$85.00 per credit hour = \$4,250.00

FIRST YEAR (32 credit hours)

| | |
|-----------------------------|------------|
| Course Fees..... | \$2,720.00 |
| Books | \$661.00 |
| Uniforms..... | \$250.00 |
| Miscellaneous Supplies..... | \$150.00 |
| Liability insurance..... | \$15.00 |
| Laboratory fees | \$250.00 |
| Physical and shots | \$400.00 |

SECOND YEAR (18 credit hours)

| | |
|--------------------------|------------|
| Course Fees..... | \$1,530.00 |
| Books | \$225.00 |
| Liability insurance..... | \$15.00 |
| Laboratory fees | \$199.00 |

These costs are estimates (starting Fall 2009) only and are subject to change.

Honesty Policy

The pursuit of scholarly activity, free from dishonesty, fraud, or deception, is essential to the mission of the College, Respiratory Care Program, and to the full exercise of academic freedom. Cheating, plagiarism, fabrication of information or citations, and other forms of unethical conduct compromise the quality of education and will not be condoned. Infractions may result in penalties or sanctions beyond those imposed by an individual faculty member.

The following definitions, although not comprehensive, address some of the more common prohibited behaviors that are disruptive of teaching and learning. Violations carry consequences ranging from reprimand or failure of the course to suspension or expulsion from the institution.

ACADEMIC DISHONESTY is an act of deception, usually intentional, by which the student seeks to claim credit for the work or effort of another.

CHEATING includes using or attempting to use unauthorized materials, information, or study aids; an act of misrepresentation of academic skills or knowledge; unauthorized copying or collaboration; or submitting work for credit more than once without approval.

PLAGIARISM is the use of the words or ideas of another without acknowledgement, whether intentional or inadvertent, and can include paraphrases, direct quotations, or borrowed facts or opinions; the commercial product of a vendor; or copying the work of another.

FABRICATION is the intentional misrepresentation, invention, or falsification of information or the listing of incorrect or fictitious references or sources.

AIDING AND ABETTING is assisting another in an act of academic dishonesty.

Cheating will not be tolerated. Any student in violation of any of the above is subject to the Student Disciplinary Code as outlined in the SJRCC Student Handbook, pp. 32 – 38, up to and including dismissal from the college.

Student Catalog and Handbook

Students are expected to follow the general rules and regulations of the college as written in the SJRCC Student Handbook and the specific requirements of the department. The purpose of these rules and regulations is to protect the rights of students and allow students to prepare academically in a positive environment.

It is important that the student read the college's handbook which explains students' rights and responsibilities. The disciplinary actions and appeals process described are followed in administering the rules and regulations of the program.

If a student in the Respiratory Care program is dismissed due to violation of policies and procedures described in the college or the Respiratory Care Student Handbook, he/she may be able re-enter only by following the appropriate procedures as described under grievance procedures.

Inclement Weather

Occasionally, SJRCC is closed as a result of inclement weather. If conditions do not permit attendance, time missed will be made up at a time designated by the department chairperson.

OSHA Training

Students will be required to complete the Occupational and Safety Health Administration (OSHA) communicable disease training, tuberculosis education, and high efficiency respiratory mask fit test before beginning the clinical experience phase. This will be coordinated by the Program Director. OSHA requirements are subject to change.

Transportation to Clinical Affiliates

Transportation to clinical affiliates is the responsibility of the student. Students may be assigned to rotate through a clinical affiliate outside of St Johns County as a requirement of the curriculum. It is the student's responsibility to arrange transportation.

Confidentiality

It is important to protect the right to privacy and confidentiality during the creation, collection, storage, viewing and transmission of information at the clinical facilities.

1. Students are required to comply with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) policies of their clinical facility.
2. At all times both inside and outside of the health care facility, students must not discuss a patient's medical, social, financial, emotional or any other condition except with the instructor or other classmates in the conference or classroom setting. Students must be careful not to discuss information about patients, respiratory and medical staff and the health care agency or its policies in public places such as the cafeteria, elevator, grocery store, or with any friends, family members or relatives of the patient.
3. Information relating to patients shall be given only to patients themselves except when the patient is a non-emancipated minor and in special circumstances. Please refer these issues to the therapist assigned to the patient or the manager.
4. If any student has a computer code as an employee of a clinical facility, the student must not use this code while in the role of the student. Students must follow the facilities policies regarding confidentiality and access to computer information.
5. Violations of this policy may result in disciplinary action up to and including withdrawal from SJRCC, Associate in Science in Respiratory Care Program.

Medical Care

Students are responsible for providing for their medical care insurance coverage. The following procedure is to be followed in case of a needle stick, blood exposure or other accident in the laboratory or clinical area:

1. The student shall immediately notify the clinical instructor and other appropriate personnel such as the cardiopulmonary manager and a Respiratory Care faculty member.
2. A facility incident report, as well as a SJRCC incident report, should be completed with a copy for the student, the student's campus file, and the instructor, as well as the facility and SJRCC.
3. If the student is sent to the Emergency Room, it is his/her individual financial responsibility. Students may prefer to choose their own facility since they are the payee but they must go immediately.
4. When a student is exposed to blood or other body fluids directly or indirectly, (e.g. needle stick) of a patient with suspected or documented HIV infection while in the clinical area, the student will be advised by the assigned instructor to follow the Center for Disease Control (CDC) guidelines for exposure as well as those of the assigned clinical agency.

Standard Precautions and Handling of Body Fluids in the Respiratory Skills Laboratory

1. In an effort to provide a safe learning environment, any procedure or accident which involves blood or body fluids must be handled using standard precautions according to the Center for Disease Control of the United States Public Health Service guidelines (posted in the laboratory).
2. All disposable sharp objects should be deposited in "sharps" containers, sealed when full, and disposed of in the proper manner.
4. All materials which come in contact with body fluids are to be disposable. Any non-disposable items which come in contact with body fluids are to be cleaned with the appropriate disinfectant using gloves.

Background Check and Drug Testing

All students are required to obtain a current criminal background check and drug testing at their own expense prior to entry into the Respiratory Care curriculum phase. The approximate cost for the criminal background check is \$30-35. There is also a fee for a Professional drug screening of \$30.00. Students may choose their own source of the ten panel drug screen and therefore the cost will vary according to the site chosen by the student. Students with criminal records or substance abuse problems may have limited clinical and/or licensure opportunities. Therefore, admission or continuance in the program may be denied.

Attendance of Professional Meetings

All students are encouraged to attend professional Respiratory Care organization meetings and workshops as identified by the program director. Students attending a professional organization meeting will be responsible for turning in a written assignment as determined by the program faculty.

Smoking Cessation Clinics

Clinical assignments may involve a mandatory rotation as an assistant to a clinic facilitator for the American Lung Association's "Freedom from Smoking" program. Since smoking students are not good role models for this program, smokers may be required to attend a clinic and prepare an alternative assignment. Also, a student's assignment may involve educational presentations to elementary through high school students regarding smoking and respiratory care.

Videotaping

All students will be required to present oral reports and demonstrations as part of a course requirement. In order to facilitate objective evaluation of those presentations, the instructor may videotape the students.

Outside Employment

The workload in the Respiratory Care Program is such that the student is encouraged not to be engaged in outside employment. All students may have required group activities in addition to course requirements, such as participation in groups set up by the counseling staff in the Student Development Office. Outside employment must not interfere with required course work.

Vacation and Holidays

Students are allowed vacation and holidays as listed in the 2008 – 2009 college calendar.

CPR Training

Hospitals require that students be certified in AHA (American Heart Association) CPR before attending clinical rotations. Documentation of certification must be provided to the instructor before a student can enter clinic. The student must complete the requirements for certification in Basic Life Support that includes Adult, Child & Infant Cardiopulmonary Resuscitation (CPR), the Heimlich Maneuver, and Automatic External Defibrillator (AED) used by the American Heart Association prior to entry into the Respiratory Care curriculum phase. Certification must be maintained throughout the program. BLS, ACLS, and PALS instruction will be provided during the program.

POLICIES

Smoking Policy

Smoking is not allowed in the entire Respiratory Care facility or in any building on the SJRCC campus. Students are highly encouraged to refrain from smoking during clinical rotations. Respiratory care students should not smoke by any building entrance at any SJRCC campus, the Flagler Life Institute, or any rotation site. Smoking on SJRCC campus is allowed in designated areas only.

Cigarettes, tobacco products and packaging must not be visible on the student's uniform.

The faculty, patients, and clinical preceptors should not be able to detect the smell of tobacco products on the students. Students failing to follow the smoking policy will be sent home with an unexcused absence.

Classroom Conduct Policy

The classroom setting should be conducive to learning for all. Students are required to be respectful and courteous to peers and faculty in the classroom. Repeated talking during lecture and presentations is inappropriate behavior. These conversations are disruptive and inhibiting to others.

Inappropriate behavior or remarks during class/test reviews will be called to the attention of the student(s) during class. Continuation of this behavior and disruptions will result in the student(s) being requested to leave the classroom at the discretion of the instructor. See current edition of St Johns River Community College Catalog, "Standard of Conduct."

Cell Phones

The policy on cell phone/pagers/beepers is as follows: Students must not engage in any activity which is disruptive to orderly classroom instruction including, without limitation, taking cell phone or pager calls in the classroom. Students are therefore required to disengage all such devices when present in a classroom or clinical site.

Ringling cell phones are a major distraction to the learning process; therefore, the faculty requires that you turn your phone to vibrate only for the duration of classes, labs, and clinicals. You are not allowed to use cell phones as this type of activity is disruptive to the learning process and extremely disrespectful to your classmates. Text messaging is not allowed at any time while in the classroom, clinic or lab.

Tardiness

If a student arrives after the scheduled beginning of class time, returns late after a class break, or leaves before the scheduled class ending, he/she will be considered tardy. Three tardies constitute one absence. Absences are marked at the beginning of class. Tardy students should check with the instructor immediately following class to make sure they are noted as tardy rather than absent. Quizzes are usually given immediately following the start of class and/or after breaks. Excused absences (generally this means having a doctor's note) will not result in a zero for a quiz grade.

Absenteeism

Students not attending class are to call the program director/instructor on the day absent, prior to class. The student may leave a message on the phone mail. Failure to do so may result in the student not being allowed to make-up work missed on that day and a "0" may be given. The didactic phase of your education is very important and you must be in class/lab to gain knowledge not always in the textbook. Notification regarding an absence is a part of your professional responsibility.

The instructors will issue a notice to students who have missed 3 instructional hours of class, lab, or clinical hours. If absences exceed 3 instructional hours, the student may be dropped. Students absent more than two scheduled class days may be required to obtain a statement from a health care provider, written on the health care provider's letterhead, to return to class/clinical. If a student misses class/clinical due to a debilitating injury or surgery, a release from the health care provider (on the health care provider's letterhead) must be provided.

Academic Requirements

Students must have cumulative GPA of 2.0 to continue in the program.

A minimum grade of "C" is required on all respiratory curriculum and science courses. A grade below "C" will not enable a student to enroll in the next curriculum course. In this situation, the student will not be able to complete the curriculum and will be withdrawn from the curriculum for that academic year.

The grading scale for Respiratory care will be as follows:

92-100=A 83-91=B 75-82=C 65-74=D 65 & Below = F

A grade of "Incomplete" will be recorded in the event a student has not completed his/her course objectives by the last day of the semester. A grade for this incomplete course must be awarded within thirty days following the semester. If course work is not completed by this deadline, a grade of F is automatically assigned.

Assignments

Late assignments will be accepted with a five percent (5%) reduction in the grade for each day late. Students who have an excused absence may e-mail assignments in or send them by mail without penalty.

Make-up Tests

If a student is absent from a test, it must be taken on the next class day attended. The test make-up time should be arranged with the instructor. Make-up tests may differ from the test administered on the date missed. If the student does not call in, a zero may be given for the missed test.

Jury Duty

In the event that the student is called for jury duty, the student will be allowed to miss up to 3 clinical days without penalty. Beyond 3 clinical days the student will be required to makeup any additional clinical hours. Proof of jury duty will be required.

Re-Entry/Transfer Policy

Re-entry or transfer into the Respiratory Care Program will be done on a space available basis. A student may only apply for readmission one time.

A student must meet the following criteria and submit the following materials for consideration:

1. A written request for readmission. The deadlines for submission of the request are as follows:
 - a. October 15th for Spring Term
 - b. March 15th for Summer Term
 - c. June 15th for Fall term

No application will be considered if submitted after these deadlines.

2. Applicants must have an overall grade point average of at least 2.5 in the Respiratory Care curriculum to include pre-requisites.
3. Documentation of evidence or plans to address previous deficiencies, to include but not limited to the following areas:
 - a. Academic Performance
 - b. Clinical Performance – No more than one (1) year lapse in experience.
 - c. Professionalism
 - d. Attendance
 - e. Commitment
 - f. Extenuating Circumstances

The application packet will be reviewed by a committee consisting of the Vice President for Workforce Development, Respiratory Care Program Director, and Respiratory Care Director of Clinical Education. Each application will be evaluated on an individual basis. The decision of the committee will be to admit or not admit. No other documentation will be provided. The decision of the committee is final.

A student must complete the Respiratory Care program within five (5) years after admission to the first Respiratory Care course. If the time lapse is greater than five (5) years, the student must start over as a new student. At the time of readmission, the student must meet all current requirements.

Progression Policy

A student may progress into the next semester with a grade of "C" or better in any RET course. If a student's grade is below "C", the student will be terminated from the program and would have to apply for reentry into the program.

Additionally, student may not graduate with less than a "C" in any general education course in the curriculum.

Illness or Pregnancy Policy

Approval to attend class/clinical is required whenever the student's physical or emotional status could be affected by illness, or pregnancy. Students with an illness or pregnancy are required to submit an approval statement from a health care provider. All statements from health care providers, concerning a student's physical and emotional status, are to be written on the health care provider's office stationery or official hospital stationery. The official stationery should include the health care provider's telephone number, signature, and any limitations imposed on the student. No other statements will be accepted.

Students with Disabilities

Students with disabilities should contact the Office for Students with Disabilities located in the Counseling Office on campus.

Policy on Writing Skills

Students enrolled in the Respiratory Care Program and preparing for registration must use correct grammar and spelling and write legibly.

Lab Practice

During lab practice a student must demonstrate competence and be checked off for that competency. A failed competency check-off must be repeated and passed within 5 school days. No more than four attempts are allowed for any competency check-off. An appointment must be made with the instructor prior to the deadline.

Students will be assigned a specific time period for demonstration and practice of skills lab for each course. Students will be expected to perform the skills by practicing in the skills lab during designated open hours for practice. A student may also make an appointment with a faculty member during open hours to work on individual needs. Any student who is unable to adequately perform skills in the clinical area may be referred to the laboratory for additional practice of that skill.

Laboratory Guidelines

It is the wish of the Respiratory Care faculty to provide laboratory access at times other than class time.

- I. Use of laboratory during regularly scheduled laboratory sessions:
 - a. During lab sessions, students should keep the laboratory area neat and clean at all times.
 - b. Upon completion of sessions, all equipment must be returned to the proper storage area.
 - c. Laboratory stations must be cleaned after each use.

- d. Medical gas supplies (i.e. oxygen, air and suction) must be turned off after use.
- e. Disposable supplies that will not be reused must be disposed of in appropriate receptacles.
- f. Class will not be dismissed until all laboratory stations are clean.
- g. Students may not leave laboratory sessions until dismissed by instructor. Leaving early, without prior approval will result in an absence for that lab session.

II. Additional use of laboratory:

- a. Students must schedule a practice time with the Respiratory Care faculty prior to the date requested.
- b. Students may use the laboratory to practice procedures any time that the laboratory is not being used, and an instructor is present or on the campus.
- c. Be sure that all laboratory areas are clean and all equipment returned to its proper place prior to leaving the laboratory.
- d. It is recommended that students spend at least three hours per week in the laboratory practicing procedures and utilizing audiovisual materials.

CLINICAL ROTATION

RULES AND REGULATIONS

1. An SJRCC instructor will provide rotation schedules for each student at the rotation site.
2. The shift supervisor will utilize the rotation schedule and assign students to assigned preceptors working in the designated area.
3. An SJRCC Respiratory Care instructor shall be available as needed for guiding the learning needs of the students.
4. Preceptors will retain total responsibility for patient care and will maintain administrative and professional supervision of students.
5. The student is responsible to the preceptor and SJRCC instructors.
6. The student will communicate his/her clinical objective needs to the preceptor.
7. The preceptor will always remain in the area with the student during the performance of new or critical activities.
8. The maximum number of students permitted in the critical care units will vary.
9. Students cannot take verbal orders.
10. Students shall adhere to hospital policies/procedures.
11. Respiratory Care students shall report their care and outcomes to the responsible preceptor prior to the end of the students' scheduled shift.
12. Respiratory Care students will not be counted in the Respiratory Care ratios approved by Hospital Administration.
13. SJRCC instructors reserve the right to reassign students at any time it is deemed necessary to assist the student in meeting their clinical and/or College objectives.
14. The student may not ask permission to leave the clinical site for personal errands or any other unexcused absences. Program faculty must approve any change in the clinical rotation schedule, including early dismissal.
15. Students will be provided with a clinical schedule prior to the beginning of clinical rotations. The schedule will be completed one week prior to the semester starting. Any questions or requests by the students must be made in writing prior to the completion of the clinical schedule. This schedule will not be changed without the approval of the Director of Clinical Education (DCE). Students must follow the rotation schedule. Failure to do so, without prior approval, will result in disciplinary action.

Clinical Absence Policy

The clinical assignment is an integral part of the student's education. The student is required to attend all clinical sessions in order for the faculty to evaluate their progress toward attainment of clinical objectives.

In the event of a clinical absence the student is responsible for notifying the affiliating agency thirty minutes prior to the beginning of the shift on the scheduled day. He/she must call the unit to which he/she is assigned and report the absence. When calling in, give your name, the name of your instructor, and identify that you are a St Johns River Community College student in the Respiratory Care Program. Also, identify the person with whom you are leaving the message. You must also call the Director of Clinical Education and leave a message on the phone mail. Clinical absences in excess of one day will result in three (3) percentage points for each absence being deducted from the final grade. If the student fails to call in as described, five (5) points will be deducted from the final grade. Early dismissal(s) will be equated to an absence if the total number of hours is five or more. Early dismissals from clinical beyond three per semester will equate to one absence. Absences interfere with meeting clinical objectives required for progression.

Sign In

Students are required to sign in and out on attendance logs in their clinical notebook. Falsification of either of these documents will result in disciplinary actions. Students are never to login another student or this may also result in disciplinary action.

Clinical Skills Referral Policy

A student considered lacking competence in a respiratory care skill appropriate for his/her level, may be returned to the skills lab for remedial help. An instructor will give individualized instruction or supervised practice in the lab and/or clinic. The student has seven (7) class days to complete the competency. Upon completion of the skill in the laboratory, the instructor who supervised the student should document completion of the required skill and the student may return to practice in the clinical setting.

Uniforms

For the SJRCC campus classes, refer to the college's Student Catalog page 13 for the dress code policy. For the clinical phase or any class sessions held at a clinical facility, the students should wear the scrub uniform, a student lab coat, socks or hose, and clean athletic shoes. Excessive jewelry is not acceptable. Students are also required to have a stethoscope, a watch with a second hand, bandage scissors, goggles, a calculator, a note pad, their clinical book, and a black pen.

The following dress code applies to the clinic phase:

All lab coats and tops will display the RC emblem sewn neatly in the left upper chest area.

Appropriate student IDs must be displayed on the uniform.

Fingernails must be neat, clean and short (no more than slightly visible when looking from the palm of the hand). Fingernail polish is not allowed. Any fake fingernails to include acrylic, gel, overlays or tips are strictly prohibited due to infection control.

Hair must be short or pulled back from the face and kept above the collar and neatly groomed and styled to avoid contact with patients.

Facial hair must not interfere with the fit of high efficiency respirator masks.

Undergarments should not be visible.

A plain wedding band is allowed.

Costume jewelry is not allowed which includes, but is not limited to:

- Costume rings
- Necklaces
- Costume earrings –
 - Small earrings in gold, silver, white or diamonds are permissible for pierced ears
 - Limited to one hole per ear in a matched set.
- Other than pierced ears, no additional visible body piercing jewelry (including tongue piercing) is to be worn in the clinical setting.
- Costume pins (professional pins allowed)
- Anklets
- Bracelets

Heavy fragrances of perfume or cologne should not be worn due to the nature of respiratory patients.

Cigarettes and other tobacco products should not be visible on the student uniform.

All tattoos must be covered while in the clinical setting.

All students must maintain proper oral and physical hygiene at all times.

Clinical training sites may have specific dress codes and safety regulations. You will be required to conform to the dress code and safety regulations while affiliating at that facility.

If students do not comply with the dress code they may be dismissed from clinical. This will be considered an unexcused absence.

Clinical Hours

Clinical hours may vary depending on the clinical rotations. Students should make arrangements to be available for clinical education between the hours of 0630 and 1500. There will be a one-two (1-2) day Sleep Study rotation requiring the student to attend between the hours of 1900 and 0700.

COMMUNITY SERVICE

The Respiratory Care Program faculty believes in the importance of service to the community and makes every effort to involve students and faculty in these types of activities. Students in the Respiratory Care Program are required to do 5 contact hours per semester of community service beginning in the summer (2nd) semester of the program. Community service involves students helping others in a health related environment.

This service requirement is part of the following courses: RET 1875L (summer), RET 2876 (fall), RET 2877 (spring), and RET 2878L (summer). The planned activities must be reported to the course instructor within the first two weeks of the course and the five hours must be completed by the end of the term. The following represents a list of examples of acceptable community service activities in which students may become involved. Students should check any activity before they perform it to be sure it conforms to a health/education related activity:

- * Nursing homes
- * Health fairs
- * High school/junior high presentations about respiratory care
- * Stop smoking programs
- * Career talk participation
- * School tours at SJRCC
- * Telethons
- * Respiratory care week activities
- * Children's hospital activities
- * Tutoring or helping in lab with other respiratory care students

STUDENT INTERACTIONS

Student/Patient Interaction

1. The student will consistently display a professional and positive attitude in all dealings with patients.
 - a. The student will always identify himself/herself to patients
 - b. The student will explain the purpose of his/her presence to the patient.
 - c. The student will display courteous behavior towards the patient.
 - d. The student will display courteous behavior towards the patient regardless of race, religion, color, creed, or sex.
 - e. The student will adhere to the above objectives regardless of the patient's condition.

2. The student will maintain confidentiality of all patient records and information.
 - a. The student will record all information accurately in the patient's chart.
 - b. The student will discuss patient information only with other medical personnel involved in the care of the patient in non-public areas.
 - c. The student will display patient anonymity when removing information from the chart for program related projects.
 - d. The student will discuss with the patient, only information already known to the patient.
 - e. The student will discuss the patient's condition only when out of the audible range of the patient and/or family and not in public areas.

3. The student will display respect for the patient's right to privacy.
 - a. The student will arrange clothing and bedding to maintain patient's modesty.
 - b. The student will knock on the patient's door before entering room.
 - c. The student will perform a physical examination of the patient only when indicated, and with the assistance of a member of the same sex as the patient, when indicated.

4. The student will demonstrate concern for the protection of the patient from injury during all procedures.
 - a. The student will perform only those procedures in which he or she has been deemed competent by the instructor.
 - b. The student will adhere to task sheet when performing any procedure.
 - c. The student will assess the patient's condition.
 - d. The student will perform only procedures as written by the physician prescription. Any question concerning a specific prescription must be preferred to the SJRCC instructor, or designee, before any action on the part of the student is taken.
 - e. The student, upon completion of therapy, will return patient's siderail to an upright position.

Student/Student Interaction

1. The student will consistently display a professional and positive attitude in all dealings with fellow students.
 - a. The student will complete, without the aid of another student, all assignments that he or she is expected to complete alone.
 - b. The student will perform cooperatively when working in assigned areas with other students.

Student/Instructor Interaction

1. The student will consistently display a professional and positive attitude in all dealings with his or her instructor.
 - a. The student will work to the best of his or her ability to complete all assignments.
 - b. The student will use established procedures in mediating any differences between him/her and the instructor.
 - c. The student will demonstrate respect for the instructor at all times.

Student/Clinic Personnel Interaction

1. The student will consistently display a professional and positive attitude in all dealings with clinic personnel.
 - a. The student shall identify himself/herself by wearing proper uniform, name pin, and SJRCC shoulder patch.
 - b. The student will display respect for all hospital personnel regardless of race, religion, color, creed, or sex.
 - c. The student will read and practice all rules, regulations, and procedures that are established for the department to which he or she is assigned.
2. The student will first discuss with the SJRCC instructor any established clinic procedures or any techniques observed in the clinic with which he or she does not agree. The student will not discuss or debate any clinic procedure in the presence of a patient and/or family member.
3. The student will demonstrate respect for the clinic by careful and responsible use of the clinic facilities and equipment.

SCHEDULES

RESPIRATORY CARE PROGRAM
CURRICULUM

| Spring | | | | | |
|------------|---|---------|---------|-----|----------|
| Prefix/ # | Course Title | Credits | Lecture | Lab | Clinical |
| RET 1024C | Fundamentals of Respiratory Care | 4 | 3 | 2 | 0 |
| RET 1350C | Cardiopulmonary Pharmacology | 4 | 3 | 2 | 0 |
| RET 1485C | Cardiopulmonary Anatomy and Physiology | 3 | 3 | 0 | 0 |
| RET 1874L | Clinical Education I | 1 | 0 | 0 | 5 |
| Totals | | 12 | 9 | 4 | 5 |
| Summer A/B | | | | | |
| Prefix/ # | Course Title | Credits | Lecture | Lab | Clinical |
| RET 1027C | Respiratory Therapeutics and Diagnostics | 4 | 3 | 2 | 0 |
| RET 1264C | Introduction to Respiratory Critical Care | 3 | 2 | 2 | 0 |
| RET 1875L | Clinical Education II | 3 | 0 | 0 | 15 |
| RET 2601C | Cardiopulmonary Pathophysiology | 3 | 3 | 0 | 0 |
| Totals | | 13 | 8 | 4 | 15 |
| Fall | | | | | |
| RET 2714C | Pediatric and Neonatal Respiratory Care | 3 | 2 | 2 | 0 |
| RET 2280C | Advanced Respiratory Critical Care | 4 | 3 | 2 | 0 |
| RET 2876 | Clinical Education III | 3 | 0 | 0 | 15 |
| Totals | | 10 | 5 | 4 | 15 |
| Spring | | | | | |
| RET 1284C | Cardiac Diagnostics | 3 | 3 | 0 | 0 |
| RET 2418C | Advanced Diagnostics and Therapeutics | 3 | 2 | 2 | 0 |
| RET 2877 | Clinical Education IV | 3 | 0 | 0 | 15 |
| Totals | | 9 | 5 | 2 | 15 |
| Summer A | | | | | |
| RET 2930C | Respiratory Care Seminar | 3 | 3 | 0 | 0 |
| Summer B | | | | | |
| RET 2878L | Clinical Education V | 3 | 0 | 0 | 15 |
| Totals | | 6 | 3 | 0 | 15 |

Laboratory Evaluation Schedule

Listed below are the laboratory performance evaluations which are to be completed. After the student has had adequate practice in the clinical setting, he/she may request to be checked-off. Before the student performs in the laboratory, didactic material related to the procedure has been covered in the classroom.

-
1. Hand washing
 2. Isolation
 3. Vital signs
 4. Breath sounds
 5. Oxygen supply systems
 6. Oxygen administration
 7. Patient positioning
 8. Patient assessment
 9. Small volume nebulizer, MDI, DPI
 10. Humidity and Aerosol
 11. Chest percussion & P.D.
 12. Incentive spirometry
 13. IPPB

-
25. Initiation of continuous mechanical ventilation – adult
 26. Monitoring continuous mechanical ventilation – adult
 27. Changing a ventilator circuit

-
14. Bedside spirometry
 15. Basic spirometry
 16. Arterial puncture
 17. Arterial line sampling
 18. Manual resuscitation-adult
 19. Nasotracheal suction
 20. Endotracheal suction
 21. Tracheostomy & stoma care
 22. Intubation
 23. Extubation
 24. ECG

-
28. Croup tent
 29. Oxyhood
 30. Initiation of continuous ventilation – infant
 31. Bag mask ventilation – infant
 32. Monitoring continuous mechanical ventilation – infant
 33. Nasal CPAP – infant
 34. Capillary blood gas sampling
-

Clinical Performance Evaluation Schedule

Performance evaluations are an invaluable tool for assessment of a student's ability to function properly in the clinical setting. These evaluations must be successfully completed on or before the end of the assigned semester. Preceptors/therapists can perform practice check-offs, but only the program director, director of clinical education or their designee, can perform a formal/final check-off.

1st Spring Semester (some carried over to 2nd semester)

- * Hand washing
- * Isolation
- * Vital Signs
- * Breath Sounds
- * Oxygen Supply Systems
- * Oxygen Administration
- * Patient Positioning
- * Small Volume Nebulizer, MDI, DPI
- * Physical Assessment
- * Incentive Spirometry
- * Chest Percussion and P.D.
- * IPPB

1st Fall Semester

- * Arterial Puncture (5)
- * Initiation of Continuous Mechanical Ventilation
- * Monitoring of Continuous Mechanical Ventilation
- * Initiation of Newborn Mechanical Ventilation
- * Monitoring of Newborn Mechanical Ventilation
- * Tracheostomy and Stoma Care
- * Passive nebulization of medication to ventilated patient
- * Extubation
- * Changing a ventilator circuit
- * Bipap

Summer A

- * Arterial Puncture
- * Nasotracheal Suction
- * Endotracheal Suction
- * Humidity and Aerosol Therapy
- * Monitoring Continuous Mechanical Ventilation – Adult
- * ECG
- * Arterial Puncture

2nd Spring Semester

- * Arterial Line Sampling
- * Arterial Puncture (5)
- * Initiation of Continuous Mechanical Ventilation - Adult
- * Monitoring of Continuous Mechanical Ventilation – Adult

Six checkoffs for NICU

- * Monitoring Continuous Mechanical Ventilation – Infant
- * Initiation of Mechanical Ventilation - Infant
- * Nasal CPAP – Infant
- * Capillary Blood Gas Sampling
- * Oxyhood
- * ECG

Only 2 check-offs (of the 6) are required to be completed in the neonatal ICU

**ST JOHNS RIVER COMMUNITY COLLEGE
RESPIRATORY CARE AFFILIATES**

Flagler Hospital..... (904) 819-4370
Director: Judi Marcinell, RRT

Putnam Community Medical Center (386) 328-5711
Director: Daniel Gryboski, RRT

Kindred Hospital North Florida..... (904) 284-9230
Director: Tina Stapleton, RRT

Orange Park Medical Center (904) 276-8500
Director: Gerry Chagnon, RRT

Shands Jacksonville (904) 244-4130
Director: Keith Cason, RRT

Florida Hospital Flagler..... (386) 586-4450
Director: Robert Sullivan, RRT

Wolfson Children's Hospital..... (904) 202-8278, ext. 8300
Director: Amanda Kellum, RRT

Baptist South.....(904) 821-6923
Director: Bryan Stepp, RRT

Baptist Medical Center.....(904) 202-1063
Director: Tim Collins, RRT

ACADEMIC AND TECHNICAL STANDARDS FOR ADMISSION AND PROGRESSION: ENVIRONMENT/WORKING CONDITIONS

Purpose: To provide the student/applicant an understanding of the physical demands and communications skills required for the program based on tasks performed by Respiratory Care Practitioners working in the field.

Description of Work Environment and Activities:

The common work environment for a Respiratory Care Practitioner and for a student studying for the same profession would include the following:

1. Constant contact and communication with the patient, the public and other members of the healthcare team.
2. Making decisions on patient care based on assessment of the patient.
3. Moving and manipulating equipment.
4. Frequent and timely operation of computers and telephones.
5. Moving patients for such activities as walking (ambulation of a patient), moving a patient in a wheelchair, and assisting with the lifting of patients --examples are movement in bed, moving from a chair to a bed, or from a stretcher to a bed and vice versa.
6. Exposure to pathogens through bodily secretions, mucous, and blood.

Procedures: Applicant/student receives technical standards policy prior to entry into the program.

Exemptions: There are no exemptions.

**ST. JOHNS RIVER COMMUNITY COLLEGE
RESPIRATORY CARE PROGRAM
TECHNICAL STANDARDS**

Applicants and students should be able to perform these essential functions, or with reasonable accommodations, such as the help of compensatory techniques and/or assistive devices, be able to perform these functions.

| Essential Function | Technical Standard | Some Examples Of Necessary Activities (not all inclusive) | YES | NO |
|---------------------------------|--|---|-----|----|
| Critical Thinking | Critical thinking and problem solving ability sufficient for appropriate clinical judgment. | Identify cause-effect relationships in clinical situations, use problem solving methods to assess, plan, carry out, and evaluate nursing or allied health care. | | |
| Interpersonal | Sufficient to interact with individuals, families, and groups from a variety of social, cultural, and intellectual backgrounds. | Exhibit behavioral and social skills that are acceptable in dealing with clients, peers, and healthcare personnel. | | |
| Communication | Sufficient for interaction with others in verbal and written form. Read, write and speak with sufficient skill to communicate. Computer literacy desirable. | Explain treatment procedures, initiate health teaching, document nursing or allied health actions, and client responses as appropriate. | | |
| Physical/ Psychological Ability | Strength and stability to endure the demands of nursing or allied health. | Very mobile and able to tolerate long periods of standing, sitting, and heavy work load. Effectively deal with exposure to stressful situations. | | |
| Mobility | Physical abilities sufficient to move from area to area and maneuver in small spaces; full range of motion; manual and finger dexterity; and hand-eye coordination. | May be exposed to kicking, biting or scratching injuries. May be exposed to machine-related hazards. | | |
| Motor Skills | Gross and fine motor abilities sufficient to provide safe and effective care of clients and operate equipment. Ability to reach and operate overhead equipment. | Be able to lift independently up to 50 pounds. May be required to lift greater weights on demand. Reach above head at least 18 inches. | | |
| Hearing Ability | Auditory ability sufficient to access non-direct essential information. | Must be able to hear verbal instructions. Must be able to hear soft whispers of clients. Must be able to tolerate loud, sustained, high pitched noises. If corrective hearing devices are required, must be worn while on duty. | | |
| Visual Ability | Normal or corrected visual ability sufficient for observing, assessment and/or treatment; ability to discriminate between subtle changes in density (black to gray) of a color in low light. | Vision must be able to be corrected to no less than 20/40. If corrective lens devices are required, must be worn while on duty. | | |
| Tactile Ability | Tactile ability sufficient for physical assessment. | Perform functions related to a care giver: perception relating to touch, textures, temperatures, weight, pressure, and one's own body position, presence or movements. | | |
| Olfactory Ability | Olfactory senses (smell) sufficient for maintaining environmental safety, and client's needs. | Must be able to distinguish odors. Has a significant tolerance to foul smells which may be part of the routine job. | | |
| Professional Presentation | Ability to present professional appearance and attitude; implement measures to maintain own physical and mental health and emotional stability. | Demonstrate emotional stability and psychological health in the day-to-day interaction with clients, peers, and healthcare personnel related to work environment. | | |

Student Name (Please Print)

Student Signature

Date

Advisor Signature

Date

HANDBOOK

I have received, read, and understand the Respiratory Care Department Handbook.

DATE

SIGNATURE

I, _____, give my permission for St Johns River Community College to release information about me to perspective employers concerning my academic performance, attitude, appearance, and any otherwise pertinent information while a student at the college.

DATE

SIGNATURE

I, _____, give permission for St Johns River Community College to contact my post-graduate employers and ask them to complete an "Employer Satisfaction Survey."

DATE

SIGNATURE