



# **Respiratory Therapist Program**

## **Wallace Community College**

### **Student Handbook**

### **Class of 2016**

## **TABLE OF CONTENT**

	<b>Page</b>
<b>Introduction.....</b>	4
Health Profession in Demand .....	5
Goals and Objectives .....	5
Required Competencies .....	5
Minimum Physical Abilities .....	6
Professional Code of Conduct .....	7
 <b>Policies and Procedures .....</b>	 8
General Grading Policies .....	8
Courses and Grades.....	8
Class Attendance.....	9
Lab Attendance .....	10
Examinations, Quizzes, and Make-up .....	10
Program Completion/Readmission .....	11
Attitude .....	12
Student Regulations .....	12
Physical and/or Mental Disability.....	12
Pregnancy Policy .....	12
Contacting Facility.....	12
Disruptions.....	12
 <b>Respiratory Therapy Clinical Policies .....</b>	 13
HIPA .....	13
Falsification of documentation .....	13
Thievery .....	13
Clinically Incompetency .....	13
Disruptive Behavior .....	13
Student Placement.....	14
Medical Clearance .....	14
Drug Testing .....	14
CPR Certification.....	14
Uniform and Photo I.D. .....	14
Unprofessional Communication .....	14
Electronic Communications Devices .....	15

<b>Submission of Late Work .....</b>	15
<b>Clinical Policies and Grading System .....</b>	15
Attendance .....	15
Clinical Grades.....	17
Make-up Time.....	17
Competencies/Evaluations .....	18
Dress Code .....	18
Personal Appearance.....	19
Grades .....	19
<b>Rules and Regulations .....</b>	19
Student Responsibilities.....	19
Professional Code of Conduct .....	20
Student Behavior.....	20
Student/Preceptor Relationship.....	20
Falsification of Records .....	20
Student/Patient Privacy .....	20
Disruptions.....	20
Affiliate Specific Orientation (ASO) .....	21
Smoking/Eating/Drinking .....	21
Audit RPT Courses .....	21
Repeating RPT Courses for Credit .....	21
<b>AARC Code of Ethics .....</b>	22
<b>AARC Model Statement.....</b>	23
<b>Acknowledgement .....</b>	24

## **INTRODUCTION**

The purpose of this manual is to provide information regarding policies and procedures within the Respiratory Therapy program of Wallace Community College, so as to provide consistent and equitable treatment throughout the Respiratory Therapy program.

Any revisions or addendum to this handbook will be provided in writing to each student and will become effective at the time specified on the written notice.

The faculty of the Respiratory Therapy program welcomes each student and encourages each one in attaining his/her career goals. It is the intent of the faculty to support the success of each student by providing additional help and cooperation as needed. The faculty is available to answer any questions and assist with any problems that may arise.

**Ms. Judith L. Harrell, B.S. RRT**  
**Director of Program**  
**jharrell@wallace.edu**

## **RESPIRATORY THERAPY**

### **I. Health Profession in Demand**

The field of respiratory therapy, one of the fastest growing medical professions, needs dynamic, motivated individuals to serve the needs of critically-ill adults, children, and newborns. In addition, respiratory therapists play an integral part in the rehabilitation of patients suffering from a variety of cardiopulmonary diseases.

Whether in the intensive care unit, emergency room, rehabilitation clinic, or even the patient's home, the respiratory therapists will be called upon to administer various treatment modalities/medications, perform diagnostic procedures, and/or manage sophisticated life support equipment.

Although the majority of respiratory therapists are employed by hospitals, opportunities to practice outside of the standard hospital setting are in demand. Other opportunities for the respiratory therapist include emergency transport and education.

### **II. Goals and Objectives**

The overall goal of the associate in applied science degree in Respiratory Therapy is “to prepare graduates with demonstrated competence in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains of respiratory care practice as performed by registered respiratory therapists (RRTs)” as defined by the CoARC. A respiratory therapist is responsible for the administration, under physician's prescription, of many types of breathing therapeutics utilizing specialized breathing equipment, aerosol, and humidity administration. The respiratory therapist works closely with the physician and also directly with the patient in the treatment situation, an attractive feature of this career.

The Respiratory Therapy program is accredited by the Commission on Accreditation for Respiratory Care (CoARC).

### **III. Required Competencies**

Respiratory therapy students must demonstrate numerous competencies representing all three learning domains; the cognitive, psychomotor, and affective domains. Students learn, practice, and verify these competencies in a number of settings including the classroom, laboratory, and clinic. Respiratory therapy laboratories provide students with the opportunity to view demonstrations, evaluate and practice with medical devices, and perform simulated clinical procedures. In addition to the cognitive skills required in the class room, students must demonstrate psychomotor skills in manipulation of patients and equipment, as well as general professional behaviors like team-building and interpersonal communications. To satisfy laboratory and clinic requirements, students must perform all procedures without critical error.

**Wallace Community College**  
**RESPIRATORY THERAPY PROGRAM**

**Wallace Community College** will provide reasonable accommodations for students with special needs.

The following functions are the **Minimum Physical Abilities** required in order to fulfill the duties of a respiratory therapy student.

<b>Physical Requirements</b>	<b>Occasionally</b>	<b>Frequently</b>	<b>Constantly</b>
Walking			X
Sitting	X		
Standing		X	
Stooping		X	
Bending		X	
Kneeling		X	
Twisting		X	
Climbing Stairs		X	
Crawling	X		
Stretching/Reaching			X
Pushing/Pulling			X
Hearing (to normal limits)			X
Seeing (to normal limits)			X
Speaking (to normal limits)			X
Hand-Finger Dexterity			X
Lifting/Carrying up to 75 pounds		X	
Manipulate Jointly up to 500 pounds		X	
Exposure to Bloodborne Pathogens		X	
Exposure to Dust	X		
Exposure to Chemicals	X		
Exposure to Noise	X		

## **THE RESPIRATORY THERAPIST CODE OF CONDUCT**

The respiratory therapy student's Code of Professional Conduct is supplementary to the "Student Code of Conduct" published in the Wallace Community College Catalog. The Wallace Community College faculty members of the RPT program have an academic, legal, and ethical responsibility to protect the public and health care community from inappropriate professional conduct or unsafe behaviors in the practice of healthcare. Acceptance into the program commits the individual to abide by the Code of Professional Conduct. Each student will:

- Attain personal mastery of knowledge and skill in their designated health area through honest effort;
- Relate to those who receive your services with compassion, truthfulness, and respect;
- Relate to peers, teachers, and other caregivers in a spirit of collaboration and mutual respect;
- Recognize and honor privileged information from both patients and colleagues;
- Conduct him/herself in accordance with program policies and Wallace Community College policies.

Examples of unprofessional or unethical conduct include, but are not limited to:

- Conduct as determined by the faculty to be unbecoming or unethical in a person training to practice in a health related field or detrimental to the interests of the public, patients, students;
- Fraud or misrepresentation of themselves for obtaining medical information on persons outside their realm of clinical/fieldwork experience;
- Making false or misleading statements regarding one's level of skill or ability to treat persons;
- Use of any false, fraudulent, or deceptive statement in any document connected with field of study;
- Engaging in inappropriate conduct with a patient;
- Impersonating another person licensed to practice in the health field;
- Use of substance(s) which impairs cognitive function and/or decision making;
- Conduct which is likely to deceive, and with potential to harm the public;
- Obtaining any payment for services by fraud or misrepresentation;
- Being found mentally incompetent or insane by a court of competent jurisdiction;
- Any offenses resulting in arrest which jeopardizes required cleared background check.

**Unprofessional or unethical conduct could be immediate dismissal from the program.**

I have carefully read the Wallace Community College Respiratory Therapy Professional Code of Conduct and hereby declare that I will adhere to this code from the time of signing and throughout my enrollment in a health program at Wallace Community College.

Student Signature\_\_\_\_\_

Witness Signature\_\_\_\_\_

Student (Print)\_\_\_\_\_

Witness Printed Name\_\_\_\_\_

Date\_\_\_\_\_

Date\_\_\_\_\_

## **RESPIRATORY THERAPY POLICIES AND PROCEDURES**

Except where there is conflict with the policies stated below the RPT program abides by those policies established by Wallace Community College.

### **GENERAL GRADING POLICIES**

Final grades awarded in the Respiratory Therapy program conform to the State Board of Education policies and information concerning the College grading scale can be found in the current Wallace Community College Catalog/Student Handbook.

All respiratory therapist program students must maintain a grade of "C" in all courses in the curriculum in order to progress to the next term of instruction or to graduate. Students who fail to achieve a "C" or above in a major required course cannot progress and will be dismissed from the program and must apply for readmission. **A minimal grade of 75 constitutes a "C" in Respiratory Therapy courses.**

**Additional requirements** for progression and graduation are listed in the current Wallace Community College Catalog.

**The Clinical Competency Examination** will be scheduled well in advance of the testing date, and will usually be preceded by a review session.

**As outlined in the WCC Catalog, all RPT students must achieve a grade of 80% or greater on each Clinical Competency Examination in order to progress to the next term of instruction or to graduate from the program. Only one retest per term will be permitted. However, the original grade will be used for the overall average for that course.**

**A course syllabus** for each respiratory therapy course will be available to each student stating the grading policy for that specific course. The grading policy for each course is based upon the discretion of each individual instructor as stated in the course syllabus.

#### **I. Courses and Grades**

##### **A. Grading System**

<b>90-100</b>	<b>= A</b>
<b>80-89</b>	<b>= B</b>
<b>75-79</b>	<b>= C</b>
<b>60-74</b>	<b>= D (74.4 is a failing grade)</b>
<b>59-below</b>	<b>= F</b>

##### **B. Courses taught by the RPT program.**

1. The student receives a grade according to his/her level of performance in each course. Patient care demands at least a minimal level of competence; therefore, the student must achieve at least a "C" level of performance for progression to the next respiratory care sequential course. **If a student scores less than the minimum required passing score, he/she will be allowed to retest only once after a conference for remediation with the Program Director and Director of Clinical Education. If the student scores less than the required minimum passing score on the retest the student will not be able to**

**successfully complete the course objectives and a grade of “F” will be assigned at the end of the term, unless the student initiates a course withdrawal request according to current college policy.**

2. The student must perform all of the criteria for RPT laboratory practicals with a minimal competency grade of "C". A student receiving a grade of "D" or below for his/her performance on the laboratory practical will be subject to dismissal from the RPT program.

**This expectation applies to units of study as well as to specifically numbered courses. The faculty reserves the right to require that a student demonstrate the minimal acceptable achievement in all portions of the program whether this be a unit of work within a course or the total course content. There are some major core exams that require a minimum passing score of 80%. NOTE: ALL CPE EXAMS AND THE RPT 243 CoARC/NBRC ENTRY LEVEL EXAM REQUIRE MINIMUM PASSING SCORE OF 80%. There are Three Exams that will require a minimum passing score of 90% and they are as follows:**

- a. American Heart EKG exam - 90% minimum passing score.
  - b. The Airway Management Intubation/Suctioning written exam -90%
  - c. Skills portion of the Airway Management Intubation/Suctioning- 100%
3. However, if a student develops a pattern of poor practical exams, intervention from the course instructor to remediate the situation may be as follows:
    - a. **The student** will schedule a conference with the instructor to discuss the student's grade and possibly determine reasons for the failing grade.
    - b. After the instructor and student determine reason(s) for the grade, if appropriate, the instructor and student will make remediation plans regarding the student's grade. This will be done in one or several ways, such as:
      - 1) Read material pertaining to laboratory practical again, as well as additional material for better understanding.
      - 2) Write report or case study on material field.
      - 3) Other variables in assisting student to improve:
    - c. The instructor has the final decision in how remediation should be handled.
      - 1) If the student cannot or will not comply with the instructor's intervention or if the student receives a "D" or below, the student will be dropped from the RPT program.
      - 2) If the student cannot or will not comply with instructor's intervention and receives a "D" or below, then the student will be dropped from the RPT program.
      - 3) If a student receives a grade of "D" or below in any RPT course he/she will be dismissed from the program.

## **II. Attendance**

### **A. Class**

**NOTE: Students are expected to be in class EVERY CLASS DAY AND ON TIME.**

Students are expected to attend all classes for which they are registered. Students should recognize at the beginning of their college career that a mature acceptance of their academic responsibilities is a requisite for accomplishment in college work; this applies particularly in the area of class attendance. Policies on workbooks, assignments, in-class projects and missed exams are addressed on each course syllabus.

Allied Health programs are extremely demanding of student time and energy and even one

missed class day can result in academic difficulty. In order to meet the requirements for

Program completion in a CoARC accredited Respiratory Therapy program and to be eligible for NBRC exams, students are required to have sufficient quality and duration to enable students to meet program goals and acquire the competencies needed to practice in the respiratory therapy profession.

**B. Absence**

Upon the second absence in any given course or clinical, the student will be referred to the Program Director and/or Director of Clinical Education for counseling. Students may be advised at this time to drop the course and withdraw from the program.

**C. Clinical**

See Attendance under Clinical Policies and Procedures

**III. Guidelines Concerning Attendance in RPT Lab Courses**

A. Students enrolled in the respiratory therapy program lab courses are subject to failing to successfully complete the lab course objectives when they accumulate **more than** the following number of absence

RPT 212	1 CLASS MEETING
RPT 221	1 CLASS MEETING
RPT 222	1 CLASS MEETING
RPT 223	1 CLASS MEETING
RPT 231	1 CLASS MEETING
RPT 232	1 CLASS MEETING
RPT 234	1 CLASS MEETING
RPT 242	1 CLASS MEETING
RPT 243	1 CLASS MEETING
RPT 244	1 CLASS MEETING

- B. Attendance for laboratory practice is mandatory. The laboratory instructor will keep daily attendance records to include tardiness and early departures. Success in the courses and the program are strongly related to laboratory participation.
- C. Approved lab make-up hours will be completed within 7 days of the first day the student returns to class, at the time scheduled by the instructor. Make-up time will be scheduled at the convenience of the instructor.
- D. The Program Director must document that each student attends all of the course lab times they are assigned each semester. Therefore, all course lab times missed must be made up.

**NOTE: Students are required to wear their clinical uniform (scrubs) to all labs.**

**IV. Guidelines Concerning Examinations, Quizzes, and Make-Up Work**

A. Daily quizzes, pop-tests, laboratory assignment, or other work, which generates a daily grade, **will not qualify** for make-up work. If an absence results in a missed daily grade, then the daily grade will stand as a zero. The decision to make exceptions to this rule rests with the

individual instructor and individual situations which would be considered only in light of “special circumstances”.

- B. **Quizzes and pop-tests** may be announced or unannounced at the discretion of the instructor. Each instructor reserves the right to quiz students at any time during the course of instruction for the purpose of generation of a daily grade.
- C. **Major Examinations** are those examinations that count more than 10% of the final grade as a single test grade will always be announced at least 24 hours in advance, usually 48 hours to one week in advance.

**NOTE:** There are some **major core exams in RPT courses** that require a minimum passing score of 80% and an **American Heart EKG Exam** that requires a 90% minimum passing score. The **Airway Management/intubation/Suctioning Exam** minimum passing score is 90% on the written exam and 100% on the hands-on. If a student scores less than the minimum required passing score, he/she will be allowed to retest only once after a conference for remediation with the Program Director and Director of Clinical Education. If the student scores less than the required minimum passing score on the retest, the student will not be able to successfully complete the course objectives and a grade of "F" will be assigned at the end of the term unless the student initiates a course withdrawal request according to current college policy.

**Major Examinations** qualify for make-up work if the absence is considered excused. It is the responsibility of the student to schedule a make-up examination with the instructor immediately upon return to school. The request for make-up work should be rendered in writing. If the student does not schedule make-up with the instructor within TWO days after their return to classes, then the instructor may not allow a make-up examination and the grade will stand as a zero.

**Major Examinations** will always be scheduled well in advance, therefore if an absence is anticipated on an exam date; the student should notify the instructor in advance of the date of testing.

**NOTE: Make-up examination** schedules will be in each course syllabus.

## V. **Program Completion/Readmission Policy**

- A. It is neither implied nor stated that a student enrolled in the Respiratory Therapy program will complete their degree in a two year period. Actual program completion time will be determined by successful fulfillment of **ALL** program requirements. The time required for program completion will be affected by successful completion of all program requirements on a timely basis, student's course load per semester, and the availability of faculty, classes, and laboratory competencies.
- B. Students who withdraw or are unable to progress in the Respiratory Therapist program may apply for readmission. The Respiratory Therapist Admissions Committee will consider readmission requests on an individual basis. Decisions regarding readmission will be based on program readmission policies in effect at the time of request and availability of openings. Students must apply for readmission by writing a letter to:

Respiratory Therapist Admissions Committee

Wallace Community College

1141 Wallace Drive

Dothan, AL, 36303.

To allow timely scheduling of the readmission examination, this letter should be postmarked no later than 60 days prior to the desired date of readmission. Failure to submit this request on time will result in denial or delay of readmission. **To complete readmission requirements, students must achieve a passing score (80%) on a readmission examination.** The readmission examination will be composed from the content of the last *Cumulative Clinical Proficiency Examination* and *Clinical Skills Examination* successfully completed by the student. Failure to achieve a passing score on the readmission examination will result in denial of readmission.

**VI. Attitude**

*Students* are expected to demonstrate interest, ability, and aptitude for responsibilities in Respiratory Therapy. Unsatisfactory conduct may be considered grounds for probation or dismissal. Disregard for patient's welfare, disinterest in studies (as shown by frequent tardiness and absences), failure to cooperate in class assignments and discussions, being disruptive in the class room, and dishonesty on written examinations are examples of behaviors that can be interpreted as unsatisfactory conduct. All instructors reserve the right to dismiss a student from the classroom if disrespectful or disruptive behavior is exhibited toward the instructor(s) or fellow students.

**VII. Student Regulations**

The RPT program abides by the policies and procedures set forth by Wallace Community College Allied Health Program and as set forth in the Wallace Community College Catalog.

**VIII. Physical and/or Mental Disability**

In the event that a student incurs a physical and/or mental disability while in the RPT program, the student will be maintained only if the disability does not inhibit the effectiveness of the student in the clinical areas and does not present a safety hazard for patients, other students, or personnel.

**IX. Pregnancy Policy**

Wallace Community College students must all adhere to the absentees/tardy policies of the school (see WCC catalog). Should a student need time off due to pregnancy, that student can continue in the regular curriculum sequencing should no more than three weeks total be missed during pregnancy, to include postpartum. All work and/or clinical must be made up before the end of that semester. If not, the student will receive a grade of "I" that must be resolved within the first six weeks of the next semester.

**Should the student be absent for more than three weeks, that student would discontinue the professional phase of Respiratory Therapy program AND FOLLOW THE RE-ADMISSION POLICY GUIDELINES**

Special cases will be reviewed on an individual basis.

**X. Contacting Facility**

Students shall not, for any reason, contact the clinical facility without going through the proper chain of command which is the Director of Clinical Education and/or Program Director.

**XII. Disruptions**

Cell phones, pagers and other electronic communication devices are prohibited during class/lab. An emergency situation should be approved by the instructor before class. Violators will be subject to disciplinary action.

Students are not allowed personal use of the telephones at the clinical site or program office. Cell phones may not be used during clinical, classroom, or laboratory instruction. **Class should never be interrupted by activation of these devices. Use of these devices in respiratory therapy professional courses is considered unprofessional behavior and could result in immediate dismissal from the program.**

**Repeated counseling concerning personal electronic communication devices can result in the student being dismissed from the course. This would require that the student withdraw from the course according to college policy or be awarded the grade of "F" at the completion of the course for failure to meet course requirements.**

**NOTE: Tardiness is also considered disruptive.**

### **RESPIRATORY THERAPY CLINICAL POLICIES**

The following policies are applicable to the Respiratory Therapist program at Wallace Community College. Any breach of these policies may lead to failure of the course in which the student is registered; dismissal from the program; dismissal and/or expulsion from the Health Division or College based on the severity of the breach.

1. All respiratory therapy students are held to the professional, legal, and ethical parameters of the Health Information Privacy and Accountability Act (HIPAA). Breaches of confidentiality of patient information of any kind will not be tolerated (ie. conversation with unauthorized others about a patient, photocopy of chart or protected documentation, taking pictures with a camera of any kind, sharing information with another clinical facility).
2. Falsification of any documentation by a student (ie. application, submission of transcripts, drug testing results, physical exam findings, background check, CPR certification, other) will not be tolerated.
3. Falsification of any patient documentation by an RPT student (ie. charts, flow sheets, medication administration records, others) will not be tolerated.
4. Thievery from the patient or family, the agency, professional colleagues, fellow students by a RPT student will not be tolerated.
5. Students who are deemed clinically incompetent will be removed from the clinical area. Repercussions are dependent on review of the allegations, demonstration by the student of the skills at the expected level of performance, and evaluation of the student's progress in the program. Repercussions are at the discretion of the reviewer(s).
6. All RPT students are expected to behave professionally and ethically. Disruptive behavior or language toward patients/family, professional staff, or other students (ie. profanity, sexually explicit language or innuendoes, threats to physical or mental safety) will not be condoned.

7. Students must be aware that the clinical agency has the contractual right to prohibit a RPT student from being placed at the agency. If the program is unable to place the student for completion of course or program requirements, the student will be required to withdraw or will be administratively withdrawn from the course/program.
8. Students are prohibited from attending clinical unless or until medical clearance required by the program has been submitted. This includes but may not be limited to physical exam, drug testing and validation of immunity by acceptable documentation of immunization, or titer levels and hepatitis B immunization or waiver. Clinical agencies have the right to deny access to the facility based on refusal of immunization by the student.
9. All respiratory therapy students must submit to initial and continuing drug testing at specified intervals, for cause, or at random. Should the student refuse to abide by agency/ WCC policy he/she will be administratively withdrawn from the course and may be denied readmission to the same or any other health division program.
10. All health division students must be CPR certified at the health provider level and must maintain such certification while enrolled in the program. Failure to do so may prohibit the student from completing the clinical assignment and therefore failure in the course.
11. All students are required to have a photo identification badge to utilize clinical agencies. The student is responsible for the cost of the photo ID and any replacement. Students will be dismissed for the day from the clinical experience if he/she does not have the ID badge in full sight while in the clinical agency.
12. Wearing the WCC program uniform or badge is prohibited except for assigned clinical experiences in assigned clinical agencies. Breaches such as wearing the uniform for employment or any nefarious, illegal, or unethical purpose will not be condoned.
13. Students are assigned to clinical agencies by the Program Director, Director of Clinical Education, or designee. Students are not permitted to make individual contacts with agencies for clinical arrangements.
14. In the event of, but not limited to, such circumstances as pregnancy and delivery, hospitalization, prolonged illness, injury, or surgery, the student will be required to submit verification from the approved health care provider that he/she is fit for duty prior to a return to the clinical area. Pregnant students must submit this verification at the beginning of each academic semester during the pregnancy and following delivery. Failure to do so may result in withdrawal from the clinical area.
15. The student will not communicate unprofessionally (ie. argue, solicit professional advice for an illness or disability, other) with any physician, nurse, fellow student, staff member, or preceptor during rotations.

16. The ultimate responsibility for patient care lies with the staff of the rotation site. If a conflict arises between the student and anyone at the rotation site, the student will immediately retire from the conflict and notify the Director of Clinical Education or clinical instructor as soon as possible, or no later than at the completion of the shift.
17. Students will practice universal precautions during all patient care and handling of patient care equipment regardless of the situation.
18. **No electronic communication devices are allowed in the clinical area.** Cell phones, iPods, Blackberry, and other devices must be left in the vehicle or at home. The clinical supervisor (instructor, preceptor) or the clinical contact identified by the Program Director is the emergency contact for the student's family or significant other. Breach of this policy will result in the student being dismissed from the site for the rest of the clinical day and the student will be considered absent under the program absence policy.

**NOTE: ELECTRONIC COMMUNICATION DEVICES ARE NOT ALLOWED IN THE PROFESSIONAL RESPIRATORY THERAPY COURSES (210, 211, 212, 213, 214, 220, 221, 222, 223, 230, 231, 232, 233, 234, 240, 241, 242, 243, and 244)**

#### **SUBMISSION OF LATE WORK:**

From time to time during the course of the program, work will be assigned with deadlines for submission. Submission of late work will not be accepted.

Any work not submitted on the due date may not be accepted and the grade awarded for the assignment will be a zero!

#### **CLINICAL POLICIES AND GRADING SYSTEM**

##### **I. Attendance**

The student is expected to attend **ALL** clinical rotations at their scheduled times. Tardiness or absenteeism is not acceptable. The attendance habits developed in this program will carry over into the student's professional life after completion of the program. The hospitals take note of the attendance patterns of the students. This is a determining factor regarding potential employment. The attendance policy will be adhered to without exception.

Each student receives a daily grade on each assigned clinical day. These daily grades will not qualify for make-up work. Therefore, any clinical absence will result in a zero for the daily grade until makeup policy has been followed and makeup day completed.

Students enrolled in the respiratory therapy program clinical courses are subject to failing to successfully complete the clinical course objectives when they accumulate **more than** the following number of absence

RPT 210	1 CLASS MEETING
RPT 220	1 CLASS MEETING
RPT 230	1 CLASS MEETING

**Students who accumulate more than the allowable NUMBER of absences will be unable to complete course objectives and therefore a grade of "F" will be awarded upon course completion unless the appropriate make-up procedures are followed or the student initiates a request for withdrawal according to current college policy.**

**If the absence is of an excusable nature (as determined by program faculty) make-up time MAY be allowed. This would allow the student to continue in the program.**

Application for make-up time must be made to the Director of Clinical Education utilizing an appropriate request form.

- A. Any absence must be reported to the clinical instructor 30 minutes prior to the scheduled time. The Director of Clinical Education (DCE) must be notified as well. Failure to notify the clinical instructor and DCE will result in the student being placed on probation. The second occurrence may result in the student being dismissed from the program.
- B. Any student that arrives after the scheduled clinical and lab time will be sent home, receive a zero for the day, and will have to follow the make-up policy for clinical and lab absences. Students are expected to ATTEND all classes and be on TIME for all RPT on-campus theory classes.
- C. The DCE must document that each student attends all of the clinical time they are assigned each semester. Therefore, **all clinical time missed must be made up.**
- E. **All** make-up days must be approved through the Director of Clinical Education. The student must make up time missed within two weeks of the absence.
- F. If a student fails to attend a make-up day, another absence will be recorded in the attendance record and the student will be placed on probation. Upon the second occurrence of this nature, the student will be dismissed from the program. **It is the student's responsibility to see that all make-up days are approved through the DCE's office.**
- G. Although making up missed clinical time is required, it will not remove the absence from the student's attendance record. The day missed could still adversely affect the student's clinical grade.
- H. If the student must leave the clinical site early, the time must be made up within the following week. The student will not be allowed to stay past the designated clinical time to leave early at a future date. Missed hours can only be made up after they are missed.
- I. Students are not permitted to contact the clinical sites directly regarding clinical schedule changes. They must be coordinated through the Director of Clinical Education. Failure to comply will result in an absence for the day(s) affected.
- J. Failure to follow the assigned clinical schedule times and locations without prior faculty approval will result in an **absence** for the day(s) and **clinical suspension**. Upon the second

occurrence the student will be dismissed from the program.

- K. Any clinical days missed due to disciplinary action will be subject to a reduction in the clinical grade as per policy for daily grades in clinical or lab.
- L. All respiratory therapy seminars or meetings attended in lieu of clinical days will be documented with a paper written by the student describing the content of the event. The paper is to be attached to a daily evaluation form and turned in as usual on the next day of class.

## **II. Clinical Grades**

Each student receives a daily grade on each assigned clinical day. These daily grades will not qualify for make-up work. Therefore, any clinical absence will result in a zero for the daily grade until makeup policy has been followed and makeup day completed.

Wallace Community College and the Respiratory Therapist program are **adult** educational programs. Students are expected to conduct themselves as adults and attend classes in a responsible manner. When absences do occur, the student must understand the impact they may have on academic progress within the program.

## **III. Application for make-up time must be made to the Director of Clinical Education utilizing an appropriate request form.**

The following procedure must be strictly followed in order to ensure that make-up time is allowed. If the student fails to complete the make-up procedure according to policy, they will be unable to meet course objectives and will be awarded the grade of "F" at the end of the term unless they initiate a withdrawal request according to current college policy.

- A. **FORM "A"** documenting a clinical absence and requesting make-up must be submitted to the Director of Clinical Education on the **FIRST** day the student returns to classes. **Failure to submit FORM "A" on the first day of return to classes** will result in the student being unable to make-up the absence and a grade of "F" will be issued at the completion of the course unless the student initiates a course withdrawal according to current college policy.
- B. **FORM "A"** should be used by the student to explain why the absence should be considered "excused". Excused status is not automatic and absences that are not considered excused will not qualify for make-up. Students should be specific in the information provided on **FORM "A"** since this information will be used by program faculty to determine if the absence should be considered excused.
- C. **FORM "A"** must be completed by the student and submitted to the Director of Clinical Education in order to obtain **FORM "B"** (Clinical Make-up Documentation).

All make-up hours must be **scheduled** with a clinical instructor using **FORM "B"**. Any make-up hours not verified by a clinical instructor will not be accepted. **FORM "B"** must be submitted to the clinical instructor at the clinical site **BEFORE** any make-up work will be allowed.

- D. Approved make-up hours will be completed within two weeks of the first day the student returns to classes, at the time scheduled by the Director of Clinical Education. Make-up time will be scheduled on the shift and on days at the convenience of the clinical instructor.
- E. Once make-up time is scheduled with the clinical instructor the student must complete the make-up hours as scheduled.
- F. Clinical instructors will verify make-up hours using **FORM "B"**. **FORM "B"** must be completed and submitted with a completed clinical log sheet at the end of the clinical session.

- G. Exceptions to this strict policy will be made only in rare circumstances. The decision to modify any of these policy provisions rests with the Director for Clinical Education and Program Director.
- H. Students must submit a written request for consideration of any exception on the calendar day of their return from absence.

#### **IV. Competencies/Evaluations**

- A. Each student will complete the prescribed clinical competencies as noted in their syllabi each semester. The student must assure that these are completed. The proper sequence will be covered by the clinical director. It is the student's responsibility to see that all competencies are completed in the laboratory each semester. Clinical competencies are to be completed in accordance with the clinical course syllabi and the clinical core competencies master document.
- B. If the student receives an evaluation that is unsatisfactory, or less than satisfactory they will be counseled. Upon the second unsatisfactory evaluation, the student is on probationary status and re-evaluated by the Director of Clinical Education. Upon the third unsatisfactory evaluation, the student will be dismissed from clinical resulting in dismissal from the program. No Exceptions!
- C. Failure to safely perform a **critical** skill in the clinical setting will result in remediation of the student. Upon the second failure the student will be dismissed from the program.
- D. Evaluations are turned in to the designated faculty weekly. These evaluations are to be completed by the preceptor. Any information that is forged will result in expulsion from the program.

All questions regarding these policies should be forwarded to the Director of Clinical Education and/or the program Director.

#### **V. Dress Code:**

**Approved** WCC uniforms (white lab coat, Cherokee grape scrubs, and white clinical shoes) and identification badges are to be worn for all clinical rotations and lectures or library activity on non-clinical days. If a student is out of uniform or does not have the identification badge, they will be sent home and be required to make-up the clinical time at a later date.

**ALL CLINICAL SHOES MUST BE COMPLETELY WHITE. ABSOLUTELY NO TENNIS SHOES ALLOWED. ABSOLUTELY NO CLINICAL SHOES WITH BRIGHT COLORS ALLOWED.**

**NOTE: THE APPROVED RESPIRATORY THERAPY CLINICAL UNIFORM MUST BE WORN ANYTIME A STUDENT IS AT A CLINICAL SITE OR ON CAMPUS FOR LAB/SKILLS SCHEDULED TESTING DATES. IF REPRESENTING THE PROGRAM FOR A SPECIAL EVENT, UNIFORM MUST BE WORN FOR THE OCCASSION.**

Make-up should be kept to a minimum. **THE ONLY JEWELRY THAT STUDENTS ARE ALLOWED TO WEAR DURING CLINICAL AND LAB ARE WEDDING RINGS.** No necklace, bracelets, etc. Only one second hand watch will be allowed in the clinical setting. Nail polish is not permitted. Fingernails should be kept clean and professional during clinical

rotations! No long or acrylic nails.

**ABSOLUTELY NO EARRINGS OR OTHER BODY PIERCING ARE ALLOWED.**

Conservative tastes should be your guide to discretion. Many of the patients will be elderly and may object to overt and trendy fashion. Hair must be worn up off the collar. All TATOOS must be covered up and not visible in the hospital or other clinical setting

**Repeated counseling concerning the dress code can result in the student being dismissed from the clinical course. This would require that the student withdraw from the course according to college policy or be awarded the grade of "F" at the completion of the course for failure to meet course requirements.**

**VI. Personal Appearance**

- A. Good Personal Hygiene
- B. Beard and/or moustache should be well groomed.
- C. Hair should be kept neat. If hair exceeds shoulder length, it must be confined while in the clinical area to promote safety and prevent contamination.
- D. Fingernails must be kept clean and trimmed to moderate length. Only clear fingernail polish is permitted. (False nails are not permitted)
- 5. Jewelry is restricted for all students to a watch with a second hand, wedding rings, and one small pair of stud earrings **in the ears only**. No decorative necklaces, bracelets, program insignia, or other pins are allowed to be worn. *Medic Alert jewelry may be worn if necessary. Medic Alert necklaces that can be tucked under the uniform are preferred.*
- E. The use of tobacco products (including smoke-less tobacco or electronic cigarettes) while at clinical is strictly prohibited.
- F. No perfumes or colognes permitted.

**Violation of any of the above policies will result in the student being sent home from the clinical site and will be counted absent.**

**VII. Grades**

Each student will be evaluated by the clinical instructor who is in charge during the student's clinical rotations for each particular clinical area. Grade computation may vary from semester-to-semester. Grade composition for each semester will be provided to the student at the beginning of each semester.

Students are accountable for completing all components of the clinical grade. The student will receive a grade of "I" until all components are completed. If after six (6) weeks the grade is not changed, it becomes an "F".

## **RESPIRATORY THERAPY**

### **RULES AND REGULATIONS**

**NOTE: The instructor reserves the right to alter or modify these policies and guidelines in order to be in compliance with CoARC and the NBRC.**

**I. Student Responsibilities**

All students are expected to act in a mature, self-disciplined manner at all times. This behavior is necessary for the promotion of academic excellence and is outlined thoroughly in the Wallace Community College Catalog. It is suggested that the student take the time to review the Wallace Community Catalog available on the WCC Website.

**II. Professional Code of Conduct for Students in the Department of Respiratory Therapy Clinical Phase**

The student who is involved in the clinical education phase is responsible not only to Wallace Community College, but to the hospital; and ultimately to the patient as well.

**A. Student Behavior**

While at the clinical sites, all students are expected to behave in a professional manner. Conduct should never be disruptive to patients or employees. Loud talking, horseplay, profanity, abusive language, or the use of alcohol or other drugs will not be tolerated. The use of tobacco products (including smoke-less tobacco and electronic cigarettes) while at clinical is strictly prohibited. During school or clinical time a student who engages in inappropriate conduct will be asked by the designee to leave the hospital premises and will receive disciplinary action according to the Wallace Community College Student Handbook section in the Wallace Community College Catalog.

**C. Student/Preceptor Relationship**

Students are expected to maintain a respectful attitude toward the preceptor and/or the designated staff member(s). Students should follow the directions as given unless the student feels uncomfortable or lacks the skill(s) to perform the services. Students should seek clarification of any procedure that he/she feels is unfamiliar.

**D. Falsification Of Records**

Dishonesty, cheating, nor stealing in any form will not be tolerated. Any falsified information documented on patient's records or student's records is prohibited. Students found falsifying any records will receive disciplinary action according to the Wallace Community College Catalog.

**E. Student/Patient Privacy**

Students must always respect the rights of the patients. These rights include the right to privacy, the right to dignity, the right to confidentiality of information, and the right to a sympathetic and compassionate understanding of the fears and insecurities which go along with being ill and hospitalized. The patient should always be treated as an individual of worth and dignity. The behavior of the student should inspire calm and confidence in the patient and should never be abrupt, hostile, condescending, or in any way unsettling to the patient.

If at any time a student disregards standards of professionalism or engages in behavior which endangers their self or others, he/she may be immediately removed from the clinical site. In this event, the student and the designee should contact the Director of Clinical Education.

Success in the Respiratory Therapy program is dependent upon the ability of the student to function effectively in the clinical setting. **Disruptive behavior may result in the dismissal**

**of the student from the program even though grades in the didactic courses are acceptable.**

**F. Disruptions**

Students are not allowed to have visitors during clinical hours. Electronic communication devices are **strictly prohibited** in the clinical area. These devices can interfere with medical equipment and should be left in a designated area within the clinical site, at home, or in the car.

**G. Affiliate Specific Orientation (ASO)**

Although the respiratory therapy program is fairly standardized, each clinical affiliate may have specific guidelines that must be recognized. Therefore, each clinical rotation may also require an “affiliate specific orientation” which must be completed prior to attending clinical.

**H. Smoking / Eating / Drinking:**

Eating nor drinking are allowed in certain approved areas. Wallace Community College is a tobacco free campus. **ABSOLUTELY NO TOBACCO PRODUCTS (including electronic cigarettes) ALLOWED ON CAMPUS OR AT ANY CLINICAL SITE (No Exceptions).**

**I. RPT Courses Cannot Be Taken As Audit**

It is now the policy of the respiratory therapist program that no courses within the RPT curriculum will be made available for audit. This policy became effective February 7, 2002, and is still in force today. Courses within the curriculum must be taken for credit even if a student chooses to repeat a course that has already been successfully completed.

**J. Repeating a RPT Course For Credit**

If a student chooses to repeat an RPT course, that student is responsible for adherence to all rules, requirements, policies, and procedures. Failure to comply can result in counseling. Repeated counseling will result in the student being dismissed from the RPT program without the possibility of readmission. These guidelines and policies apply to all courses within the respiratory program curriculum. As other rules may apply to certain courses, the student is directed to each courses syllabus for more specific information concerning each individual course.

# AARC

## Code of Ethics

As health care professional engaged in the performance of respiratory care, Respiratory Care Practitioners must strive, both individually and collectively, to maintain the highest personal and professional standards.

The principles set forth in this document define the basic ethical and moral standards to which each member of the American Association for Respiratory Care should conform.

The respiratory care practitioner shall practice medically acceptable methods of treatment and shall not endeavor to extend his/her practice beyond his/her competence and the authority vested in him/her by the physician.

The respiratory care practitioner shall continually strive to increase and improve his/her knowledge and skill and render to each patient the full measure of his/her ability. All services shall be provided with respect for the dignity of the patient, unrestricted by considerations of social or economic status, personal attributes, or the nature of health problems.

The respiratory care practitioner shall be responsible for the competent and efficient performance of his/her assigned duties and shall expose incompetence and illegal or unethical conduct of members of the profession.

The respiratory care practitioner shall hold in strict confidence all privileged information concerning the patient and refer all inquiries to the physician in charge of the patient's medical care.

The respiratory care practitioner shall not accept gratuities for preferential consideration of the patient. He/She shall guard against conflicts of interest.

The respiratory care practitioner shall uphold the dignity and honor of the profession and abide by its ethical principles. He/She should be familiar with existing state and federal laws governing the practice of respiratory care and comply with those laws.

The respiratory care practitioner shall cooperate with other health care professional and participate in activities to promote community and national efforts to meet the health needs of the public.

# **AARC**

## **Role Model Statement For Respiratory Care Practitioners**

As health care professionals engaged in the performance of cardiopulmonary care, the practitioners of this profession must strive to maintain the highest personal and professional standards. A most important standard in the profession is for that practitioner to serve as a role model in matters concerning health.

In addition to upholding the code of ethics of this profession by continually striving to render the highest quality of patient care possible, the respiratory care practitioner shall set himself/herself apart as a leader and advocate of public respiratory health.

The respiratory care practitioner shall participate in activities leading to awareness of the causes and prevention of pulmonary disease and the problems associated with the cardiopulmonary system.

The respiratory care practitioner shall support the development and promotion of pulmonary disease awareness programs, to include smoking cessation programs, pulmonary function screenings, air pollution monitoring, allergy warnings, and other public education programs.

The respiratory care practitioner shall support research in all areas where efforts could promote improved health and could prevent disease.

The respiratory care practitioner shall provide leadership in determining health promotion and disease prevention activities for students, faculty, practitioners, patients, and the general public.

The respiratory care practitioner shall serve as a physical example of cardiopulmonary health by abstaining from tobacco use and shall make a special personal effort to eliminate smoking and the use of other tobacco products from his/her home and work environment.

The respiratory care practitioner shall uphold himself as a model for all members of the health care team by demonstrating his/her responsibilities and shall cooperate with other health care professionals to meet the health needs of the public.

## **ACKNOWLEDGEMENT**

I have received and reviewed a copy of the Wallace Community College Respiratory Therapy program general departmental policies. I understand these policies and agree to abide by the rules of the College and the Program. I also understand that failure to abide by the rules could result in dismissal from the Respiratory Therapy program without the possibility of readmission.

Student Name (printed) \_\_\_\_\_

Signature: \_\_\_\_\_

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

Director, Clinical Education: \_\_\_\_\_

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

Program Director: \_\_\_\_\_

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