



**RESPIRATORY THERAPY STUDENT HANDBOOK
2024-2025. Revised 8/2025,**

**Designed for Undergraduate Students Majoring in
Associate of Applied Science in Respiratory Therapy**

DIVISION OF NURSING, ALLIED HEALTH, LIFE AND PHYSICAL SCIENCES

Accreditation:
Commission on Accreditation for Respiratory Care
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LETTER TO STUDENTS

Dear Respiratory Therapy Student:

Welcome, and thank you for considering the Respiratory Care/Therapy Program at the University of the District of Columbia Community College (UDC-CC). Our program is committed to preparing the next generation of respiratory care professionals who are not only clinically competent but also compassionate, ethical, and ready to lead in a rapidly evolving healthcare environment.

At UDC, we believe in excellence. Our dedicated faculty goes above and beyond to support and mentor students—offering a rich blend of academic rigor, hands-on training, and personal guidance. As we often say, *“To whom much is given, much is expected.”* In return for our commitment to you, we expect you to give your best—excelling in your board exams, contributing meaningfully to patient care, and becoming a leader in the field.

We are proud to offer a curriculum rooted in evidence-based practice and designed to foster critical thinking, clinical judgment, and interprofessional collaboration. Along the way, you will be encouraged to pursue advanced education and professional development, so that you graduate not only as a skilled clinician but as a well-rounded respiratory care practitioner ready to meet today's and tomorrow's healthcare challenges.

Your journey here will be demanding—but you will not walk it alone. We are here to support you every step of the way because **your success is our mission.**

We look forward to welcoming you to the UDC-CC Respiratory Therapy family.

Warm regards,

Dr. Benedict Donkor, RRT

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I. INTRODUCTION

A. OVERVIEW

The Respiratory Therapy Handbook provides direction and guidance to collegiate Respiratory Therapy majors regarding the regulations, procedures, activities, and services unique to the undergraduate Respiratory Therapy Program at the University of the District of Columbia Community College (UDC-CC). The Respiratory Therapy Program reserves the right to add, revise, or repeal policies and requirements at any time. Respiratory Therapy policies are specific to undergraduate respiratory therapy students and may differ from community college or University policies on the same subject.

The Associate Degree Respiratory Therapy Program resides within UDC-CC, which is accredited under the University system by the Commission on Higher Education of the Middle States Association of Colleges and Schools. The Respiratory Therapy Program is accredited by the Commission on Accreditation for Respiratory Care.

Every effort is made to ensure that the information in this Handbook is accurate and current. The undergraduate Respiratory Therapy policies are subject to modification as program and/or curriculum revisions occur. The Respiratory Therapy faculty reserves the right to make curriculum revisions and policy changes provided these changes will not impact negatively on accepted respiratory therapy majors by lengthening the projected period required to obtain an Associate of Applied Science Degree in Respiratory Therapy. Students are responsible for posted changes that become effective prior to the publication of the next Respiratory Therapy Student Handbook. Any changes in the program policy will be posted as announcements on Blackboard. Blackboard announcements are simultaneously linked to their school email account. Announcements will also be made on the website link <https://www.udc.edu/cc/programs-majors/respiratory-therapy-aas/>. Therefore, students are advised to read the Respiratory Therapy notices posted at Lamond-Riggs campus on the 3rd floor near the Respiratory Therapy classrooms, and the faculty offices on floor 1st room 116. Additional program materials may be obtained on display racks outside the department secretary's office on the third floor.

B. HISTORICAL PERSPECTIVE

The University of the District of Columbia (UDC or University) is the only public post-secondary institution in Washington, D.C. and the nation's only urban land-grant university. As such, the University is directing the century old rural land-grant traditions of equal educational opportunity, applied research, and public service to the vastly more complex conditions of modern urban life in the District of Columbia.

UDC-CC provides city residents of all ages and backgrounds with equal access to low-cost, high-quality education through an open admissions policy for all beginning college applicants. UDC's research is directed toward the social and technical problems of the District, producing practical knowledge and information that is readily applicable to urban regeneration. The wide array of community services offered responds to the basic human needs of District residents. UDC is a

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working partner in the efforts of business, industry, and government to improve the economic, social, and cultural life of the nation's capital.

In 1974, the U.S. Congress authorized the creation of UDC with the passage of Public Law 93-741. As provided in the congressional legislation, the District of Columbia Council amended P.L. 93-741 in 1975 with the approval of D.C. Law I-36 and authorized the merger and consolidation of three former post-secondary institutions: the Washington Technical Institute (WTI), the District of Columbia Teachers College, and Federal City College. Between 1976 and 1978, the administrators and faculties of these three institutions achieved the consolidation of the administrative services and academic programs of the predecessor institutions.

The Respiratory Therapy Program at the former WTI was an outgrowth of the 18-month hospital-based program at Washington Hospital Center, which had its inception in 1967 when the need for formally prepared technicians in this metropolis was acute. At that time, the need had increased significantly as was evidenced by the number of vacancies in this profession in area hospitals. The move to associate degree education in Respiratory Therapy in 1969 necessitated the transplantation of the program into the academic environment at WTI. Thus was created the 21-month associate degree program.

In 1994, with the mandated elimination of the summer offering, the program again evolved, this time into a six (6) semester format. This format was comprised of a two (2) semester pre-clinical division followed by a four (4) semester clinical division. Further changes occurred in 2001 with the reduction in credits to 68. A strengthening of the program has seen a return to the summer offering with an introduction to mechanical ventilation course in preparation for second year critical care clinical experience and an increase in required credits to the current 72.

In 2008, the University Board of Trustees approved the 2 + 2 Bachelor of Science Degree in Respiratory Therapy, which was administratively located in the Department of Nursing and Allied Health at the University. The Bachelor's program has since been discontinued.

The Respiratory Therapy Program at UDC is completing its 54th year of existence and will be graduating its 53rd class of therapists in the spring of 2025.

The University created the Community College in 2009-2010.

The program's two-member full-time faculty is stable. Use of part-time adjunct faculty, many of whom have long histories of dedicated service to the program, complement the full-time staff to fulfill the instructional demands of the program. Contracts are active with six (6) of the area's major teaching hospitals to serve as primary or secondary clinical affiliates. On-campus skills laboratories are equipped with the latest ventilators and computerized clinical simulation manikins.

The primary responsibility of the Program is to serve the needs of the residents of the District of Columbia. This involves staffing several hospitals in the District with graduates. Additionally, a

secondary role is played in staffing additional hospitals and health centers in the Washington Metropolitan Area.

The Respiratory Therapy Program has historically maintained, and seeks, a student body representative not only of American students, but also from numerous backgrounds from African and Latino cultures. This cosmopolitan mixture brings a rich diverse perspective to the student body.

C. ORGANIZATIONAL STRUCTURE

Respiratory Therapy is administered by the Program Director for Respiratory Therapy within UDC-CC's Department of Nursing, Allied Health, Life and Physical Sciences. The Department includes the Associate Degree programs in Nursing, Mortuary Science and Respiratory Therapy, as well as professional training in biology and chemistry. The Program Director for Respiratory Therapy Program reports to the Director of the Division of Nursing, Allied Health, Life and Physical Sciences who reports to the Dean of Academic Affairs.

The UDC-CC and University Catalogs, Student Handbook; Info at a Glance; Schedule of Classes for Registration; and the Website, <http://cc.udc.edu> provide detailed information on the organizational structure with locations, administrators and telephone numbers.

D. MISSION OF THE UNIVERSITY OF THE DISTRICT OF COLUMBIA

The University is an urban land-grant institution of higher education. It is a comprehensive public institution offering quality, affordable postsecondary education to District of Columbia residents. Its mission states:

“Embracing its essence as a public historically black urban-focused land- grant university in the nation’s capital, UDC is dedicated to serving the needs of the community of the District of Columbia, and producing lifelong learners who are transformative leaders in the workforce, government, nonprofit sectors and beyond.”

The Respiratory Therapy Program is in alignment with the mission of the university. The mission of the Respiratory Therapy Program is also in alignment with the Commission on Accreditation of Respiratory Care (CoARC) which is to ensure high quality educational programs prepare competent respiratory therapists for practice, education, research, and service.

Program Goals

The overall goal of the program is to prepare graduates with demonstrated competence in the cognitive (knowledge), psychomotor (skill) and affective (behavior) competencies of Registered Respiratory Therapists (CoARC). The program does this by creating a learning environment that fosters critical thinking through experiential learning, problem-based learning and hands-on clinical practice. Graduates are able to practice in a variety of settings and attend to respiratory health needs of all age groups across the healthcare continuum from wellness to critical care.

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Upon successfully completing the program of study, the student will be able to:

- Goal 1: Evaluate clinical data as it pertains to cardiopulmonary disorders and diseases. [National Board for Respiratory Care Content Matrix (NBRC #1)]
- Goal 2: Demonstrate appropriate use of therapeutic devices in respiratory care and infection control. (NBRC#2)
- Goal 3: Perform evidenced-based respiratory care interventions in the treatment of patients suffering from a wide range of respiratory pathologies. (NBRC#3)
- Goal 4: Demonstrate compassionate, ethical, and professional behaviors with patients, peers, supervisors, and members of the community.

E. PHILOSOPHY OF THE RESPIRATORY THERAPY PROGRAM

The faculty of the Respiratory Therapy Program embraces the mission of the University and supports its goals. As a major component of this land-grant institution of higher education, the faculty has the responsibility for providing respiratory therapy education opportunities, which will lead to licensed graduates who will provide quality respiratory care for residents of the District of Columbia.

Complementing the nature of health care practice, the Program in Respiratory Therapy has three overarching commitments: the development of a strong cognitive knowledge base with critical thinking skills, technical competence, and professional and ethical sense of responsibility.

II. ADMISSION, PROGRESSION AND GRADUATION

The Respiratory Therapy Program at UDC-CC currently offers the Associate of Applied Science Degree in Respiratory Therapy. The Associate of Applied Science in Respiratory Therapy prepares graduates to take the National Board of Respiratory Care Entry Level, Certified Respiratory Therapist, an examination which States utilize in granting licensure to practice Respiratory Therapy. Further, it prepares students to take the advanced practice, Registered Respiratory Therapist, examination, which is identified nationwide as the optimal professional credential in the discipline.

A. ADMISSION TO THE RESPIRATORY THERAPY PROGRAM

Admission to the University of the District of Columbia Community College

The UDC Office of Admissions processes applications to the Community College. Admission to UDC-CC does not guarantee admission into the Respiratory Therapy Program. Admission to the Program is limited by available resources and student eligibility.

Upon admission to the Community College, new students identifying Respiratory Therapy as their intended major are assigned to a Student Success Center Advisor who will assist them in completing the prerequisites to enhance their likelihood of being accepted into the Respiratory Therapy Program.

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Admission to the Respiratory Therapy Program is competitive. To be considered for admission to the Respiratory Therapy Program, eligible students must first be enrolled at the University, complete prerequisites of 17 semester hours earning a minimum grade of “C” in each identified course, and have a cumulative grade point average (CGPA) of 2.5 or higher.

Prerequisite Courses:

<u>Course No.</u>	<u>Course Title</u>	<u>Credit Hrs.</u>
FSEM- 101C	First Year Seminar	1
RSPT-170C	Introduction to Health Science	2
IGED-120C	Foundation Quantitative Reasoning	3
IGED-110C	Foundation Writing in the Arts & Humanities	3
BIOL-111	Anatomy and Physiology I Lecture	3
BIOL-113	Anatomy and Physiology I Lab	1
BIOL-112	Anatomy and Physiology II Lecture	3
BIOL-114	Anatomy and Physiology II Lab	1
Total		17 Credit Hours

Admission to the Respiratory Therapy Program

Interested students will submit a separate application to the Respiratory Therapy Program. This application may be obtained from the program faculty in early October. Applications must be submitted to the Department no later than Friday, the first week of February, for placement consideration in the fall class. Students are responsible for meeting all program deadlines. Students submitting applications after the deadline will not be considered for admission to the fall program.

In addition to the Cumulative Grade Point Average (CGPA) and prerequisite requirements, applications require one essay, two letters of recommendation, a current official transcript, a CPR certification from the **American Heart Association** (Health Care BLS) valid for two years, and a criminal background check. Applicants must also complete the HESI exam or the Assessment Technologies Institute Test of Essential Academic Skills (ATI TEAS®) admission exam and complete an in-house writing sample and appear for an admission interview.

Science courses can be **no older than five (5) years at the time of enrollment into the respiratory program**. Credit by examination can be used to verify current competency in science coursework taken longer than five (5) years ago. Students should see the respective departments about the process for testing out. Failure to document current competency requires enrolling in the course(s).

Accepted students must verify completion of the following requirements prior to clinical site assignments (a component of clinical Respiratory Therapy courses):

- (1) Proof of professional liability insurance
- (2) Annual Health clearance by the University Health Services prior to the 1st day of class, including documentation of all required vaccines.
- (3) Current drug screening is required by clinical affiliates.

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- (4) Annual Influenza vaccine and TB screening

Refer to the section on General Information for specific details on course requirements.

B. ADVISEMENT AND REGISTRATION

New students (Freshman Level or Transfer) admitted to the Community College who indicate an interest in Respiratory Therapy should report to the Respiratory Therapy Program for advisement.

Continuing students who are Respiratory Therapy majors are to see their advisors for academic counseling prior to the early registration period each semester. Students should make appointments with their faculty advisor for academic counseling at least once per semester to facilitate optimal progression through the Program. This counseling should be completed prior to the regular registration periods.

UDC/UDC-CC Students planning to change their majors to Respiratory Therapy must adhere to the following procedure:

1. Receive academic counseling from an advisor.
2. Be in good academic standing with a CGPA of 2.5 prior to the change.
3. Complete the change of major form.
4. Submit an application for admission to the Respiratory Therapy Program, according to the above process.

Respiratory Therapy Faculty Advisors

<u>Respiratory Therapy Faculty Name</u>	<u>Office and Telephone</u>
Dr. Benedict Donkor, RRT	Lamond-Riggs, Rm 116 – 274-5864
Tanya Claggett	Lamond-Riggs Rm 128

C. TRANSFER STUDENTS

The Respiratory Therapy Program reserves the right to assess undergraduate transfer credits that count toward the AAS degree. The Respiratory Therapy faculty will review and evaluate all transfer credits applicable to a Respiratory Therapy major and will indicate which respiratory therapy courses the student must complete in order to fulfill degree requirements. The University confers degrees to those students who complete all degree requirements according to the Respiratory Therapy program of study. Acceptance of transfer students from other Respiratory Therapy programs depends on space availability.

Transfer students must be officially admitted to UDC-CC prior to their application to the Respiratory Therapy Program, have their previous course work submitted to the admissions office for transfer credit evaluation, and document completion of the prerequisite courses.

Transfer students must be in good academic standing at their previous colleges(s). Students transferring from another Respiratory Therapy program must submit a letter from their previous program director detailing the reason they are leaving the program and their eligibility to return to that program.

D. PROGRESSION, DISMISSAL AND READMISSION

Progression

- Achievement of a grade of "C" or better in all required courses listed on the Program of Study.
- Incomplete grade(s) in Respiratory Therapy courses must be removed before progressing to another Respiratory Therapy course.
- Pre- and/or co-requisites must be completed for each Respiratory Therapy course prior to progression.
- A course from which a student withdraws is considered an attempt and may be repeated only one time.
- **A grade less than C (D or F) in any Respiratory Therapy course will result in automatic dismissal; however, the student may petition the program director for reinstatement. The reinstatement of a student who fails (receives a grade of D or lower) in a course and wishes to return to the RT program will be determined by the academic committee on a case-by-case basis.**
 - Only one Respiratory Therapy course may be repeated during a student's progression through the Respiratory Therapy program of study.
- **A grade less than C (D or F) in any two (2) Respiratory Therapy courses will result in automatic permanent dismissal from the Program and such a student cannot be accepted into the program again.**

Grading System

The following grades are used in Respiratory Therapy courses to indicate level of achievement:

A	(93-100) Excellent
B	(84-92) Good
C	(75-83) Satisfactory
D	(66-74) Unsatisfactory (not passing)
F	(65 or lower) Unsatisfactory (not passing)

Consortium of Universities

If non-Respiratory Therapy course requirements cannot be met at UDC-CC and students find it necessary to take courses at another academic institution, they must first obtain written permission from the Program Director, the Division Director, and Dean, and initiate the appropriate concurrent enrollment form. (See University Catalogue on Consortium of Universities).

Denial of Progression

A grade less than "C" in any Respiratory Therapy, or prerequisite/co-requisite science course, will result in a denial of progression of students in the Respiratory Therapy Program course sequence, until such time as the course is passed with a grade of "C" or better.

Permanent Dismissal

- A grade less than "C" on the second attempt of a Respiratory Therapy course will result in automatic permanent dismissal from the Program. No more than one (1) Respiratory Therapy course may be repeated in the above fashion. Thus, any subsequent grade below a "C" in

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a second respiratory course will automatically result in dismissal from the program.

- Professional conduct that does not adhere to the American Association for Respiratory Care (AARC) Statement of Ethics and Professional Conduct, or the Code of Conduct for UDC (See Student Handbook - <https://www.udc.edu/student-life/student-handbook/>. Respiratory

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Therapy students will automatically result in the student's permanent dismissal from the Program.

The following incidents may result in dismissal from the Program:

- Any verified instance of cheating or academic dishonesty. Any violation of the UDC Student Code of Conduct. (See Student Handbook - <https://www.udc.edu/student-life/student-handbook/> .
- Any incident or pattern of conduct by a student where the student continuing in the Program would likely be detrimental to the mental, emotional or physical health of the student or to others or would tend to interfere with the overall learning or teaching environment.
- Any circumstance where a clinical site dismisses a student whose behavior is deemed to be detrimental to the hospital or proper rendering of quality patient care.
- Failure to comply with hospital or program policies regarding required immunizations.

Clinical site placement is contingent on the agreement of the participating clinical facility. Thus, the clinical site reserves the right to exclude any student whose behavior, in the sole opinion of the site, is deemed to be incompetent, unprofessional or detrimental to the hospital or proper rendering of quality patient care.

When a student is dismissed from the Respiratory Therapy Program, they are not dismissed from the Community College and are assisted to identify another major.

Returning Students

Students who have not been enrolled for one or more semesters in the Respiratory Therapy Program course sequence for whatever reason must submit a complete admission application and a letter of request for consideration for readmission to the Program. Consistent with the admission policy, students must have a grade point average of 2.50 to be eligible for readmission. Students who withdraw from the Respiratory Therapy Program sequence, and plan to return at a later date, even though the student has earned a "C" grade in Respiratory Therapy courses during a previous enrollment, will be required to validate previous coursework according to the policy described below. **Students who withdraw from the Respiratory Therapy Program sequence, and plan to return more than a year later, even though the student has earned a "C" grade in Respiratory Therapy courses during a previous enrollment, will be required to reenroll as a new student in the Program.** Readmission of Respiratory Therapy students is contingent upon review by the faculty Admission and Progression Committee and space availability. If a student is readmitted, he/she will be readmitted under the current curriculum plan and handbook policies in place at the time of readmission.

Policy for Validating Previous Coursework Following a Break in Enrollment

Any student who, upon successful completion of the first-year clinical course work, has a lapse of **one or more** semesters before enrolling in subsequent clinical courses must, prior to being assigned to a subsequent clinical course, demonstrate continued current competency in the cognitive and psychomotor skills presented in the first-year clinical course work.

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Demonstration of competency shall require direct patient contact and thus require repeating Principles and Practice of Respiratory Therapy II (RSPT-172), or its equivalent under the then-current Schedule of Courses, in its entirety for credit.

Successful repetition of RSPT-172 will be followed by enrollment in Introduction to Mechanical Ventilation (RSPT-250) during the subsequent summer semester, **regardless of whether the student previously passed this course.**

Second year students who fail to progress to the 2nd year Fall semester for any reason (academic or non-academic) must return during the subsequent summer semester (pending no prior failures in any respiratory therapy classes), enroll and repeat Introduction to Mechanical Ventilation, and then repeat Critical Care and Ventilation Management the following Fall semester in order to maintain their clinical competencies in the cognitive and psychomotor skills before progressing to the final semester **regardless of whether the student previously passed these courses.**

Any second year student who fails the final semester for any reason (academic or non-academic) must return during the subsequent Fall semester and repeat Critical Care and Ventilation Management and the Seminar II in order to maintain their clinical competencies in the cognitive and psychomotor skills before progressing to the final semester regardless of whether the student previously passed these courses.

Note* Any continuing or transfer student who, upon successful completion of any clinical course work in any given semester, has a lapse of one or more semesters shall be required to repeat the subsequent clinical rotations to maintain their clinical course work and competencies regardless of whether the student previously passed these courses.**

E. REQUIREMENTS FOR GRADUATION

Degree Requirements

1. The Associate Degree requires 72 semester hours, the final 15 of which must be in residence at the Community College.
2. Completion of all courses identified on the Program of Study, **within four (4) years of initial enrollment**, with a minimum grade of "C" in each.

Community College-Wide Requirements

Respiratory Therapy majors must meet the Community College-wide requirements. (Refer to University Catalog)

Major (Resp. Therapy) Requirements:

Performance on Comprehensive Exit Examination

As part of their seminar I and II course requirements, students must achieve a passing score on the Exit Examinations in order to graduate from the Program.

F. ACADEMIC INTEGRITY

Honesty

Students at UDC-CC assume the obligation to maintain standards of academic integrity. Violation of academic obligations includes unethical practices and acts of academic dishonesty, such as cheating, plagiarism, falsification, and the facilitation of such acts. Cheating includes the actual giving or receiving of any unauthorized aid or assistance or the actual giving or receiving of any unfair advantage on any form of academic work. Plagiarism is the use of another's ideas or words, or both, as if they were one's own. Students are subject to dismissal from a degree program for unethical practices and acts of academic dishonesty. A plea of ignorance of the policy will not be accepted. If it is determined that a student has violated the Academic Integrity Policy, the student may be suspended from the University (See 2019-2022 University Catalog).

Academic honesty is expected and required for retention in the Respiratory Therapy Program. Any student found to be dishonest on exams, course work, or clinical work, based on concrete evidence, will be dismissed from the Respiratory Therapy Program. Reasons for dismissal will be a part of the student's Respiratory Therapy record. Any student who is found cheating will not receive credit for the course.

Code of Conduct

All students majoring in Respiratory Therapy at UDC-CC will be expected to follow a code of conduct consistent with the high standards established and practiced within the medical and health science professions. Certain types of behavior have been identified as causes for immediate permanent dismissal from the Respiratory Therapy Program if practiced by Respiratory Therapy students. These include:

- Dishonesty, such as cheating, plagiarism or knowingly furnishing false information to the Community College.
- Forgery, alteration, or misuse of university documents, records or identification.
- Violation of any law of the land.
- Disruption of class by use of abusive or obscene language.
- Insubordination, including but not limited to failing to follow or carry out an instructor's instructions, leaving class without permission, or engaging in actions or inactions that undermine the instructor's authority.
- Fighting at a clinic site or on university premises.
- Being intoxicated or under the influence of illegal drugs while on clinical assignment or on Community College/University premises.
- Vandalism or stealing.
- Sleeping while on duty at a clinical assignment.
- Leaving a clinical assignment or room/area without the instructor's permission.
- Falsifying clinical records.
- Failure to notify the designated clinical personnel of absence or lateness.
- Violation of any duly established rule and/or regulation of the agency used for clinical courses.

Code of Ethics

Students are expected to follow the Code of Ethics as adopted by the American Association for Respiratory Care (AARC). The following AARC Code of Ethics is accepted by the Program as

constituting the professional conduct standard expected of Respiratory Therapy students and practitioners. (Revised 04/15).

<https://www.aarc.org/resources/professional-documents/whitepapers/professionalism/>

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 the scope of accepted and responsible practice.
- Respect and protect the legal and personal rights of patients they care for, including the right to informed consent and refusal of treatment.
- Divulge no confidential 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, and refuse to conceal illegal, unethical 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 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.
- Refrain from indiscriminate and unnecessary use of resources.
- Encourage and promote appropriate stewardship of resources.
- Work to achieve and maintain respectful, functional, beneficial relationships and communication with all health professionals. It is the position of the American Association of Respiratory Care that there is no place in a professional practice environment for lateral violence and bullying among respiratory therapists or between healthcare professionals.

Sexual Harassment and Racial Discrimination

UDC-CC is committed to providing a work and academic environment that encourages intellectual and academic excellence and promotes the emotional wellbeing of its students, faculty and staff. Sexual harassment is inconsistent with this objective and contrary to the College's policy of equal employment and academic opportunity. The College's policy on sexual harassment and racial discrimination is designed to address and resolve complaints, support complainants, protect confidentiality and preclude retaliation against complainants and those who cooperate with an investigation. Sexual harassment of even one person by any other person is an institutional problem and the College administration wants to know about it so that prompt and appropriate action can

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be taken to protect the victim and ensure that no further incidents occur. The prompt reporting of harassing conduct will result in a thorough investigation and when appropriately established, will result in discipline of the harasser. Incidents of sexual harassment or racial discrimination should be reported initially to Thomas Redmond, Assistant General Counsel, tredmond@udc.edu, 202-274-5622, serving in the role of interim Compliance Officer/Title IX Coordinator. His office is located on the Van Ness Campus, building 39, 3rd Floor, Office Suite 301-A.

Filing a complaint

Persons who believe they have been discriminated against (including sexual harassment) may file a complaint by contacting the EEO/AA Compliance Officer in the Office of Talent Management in Building 39, 2nd floor, telephone: (202) 274-5442.

Students are referred to the anti-bullying policy and have the option to fill in the student complaint forms which are available on the programs website <https://www.udc.edu/cc/programs-majors/respiratory-therapy-aas/>

G. PROGRAM OF STUDY

Progression through the Program will occur as outlined in the Program of Study.

University of the District of Columbia Respiratory Care/Therapy Program of Study- Revised 2/2025

PREREQUISITES:

Required and must be completed before Admission to the Program

IGED 120C	Foundation Quantitative Reasoning	3
IGED-110C	Foundation Writing in the Arts & Humanities	3
BIOL-111C	Anatomy and Physiology I – Lecture	3
BIOL-113C	Anatomy and Physiology I – Laboratory	1
BIOL-112C	Anatomy and Physiology II – Lecture	3
BIOL-114C	Anatomy and Physiology II – Laboratory	1
RSPT-170C	Introduction to Health Sciences	2
FSEM-101C	First Year Seminar	1
	TOTAL	17

FIRST YEAR–FALL SEMESTER (This begins the professional phase of the program)

RSPT-171C	Principles and Practice of Respiratory Therapy I	4
RSPT-173C	Ventilation and Gas Exchange Physiology	2
CHEM-105C	Fundamentals of Chemistry – Lecture	3
CHEM-106C	Fundamentals of Chemistry – Lab	1
IGED 220C	Discovery Quantitative Reasoning	3
	TOTAL	13

FIRST YEAR - SPRING SEMESTER

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RSPT-172C	Principles and Practice of Respiratory Therapy II	4
RSPT-274C	Acid-Base and Hemodynamic Physiology	3
RSPT-271C	Respiratory Therapy Pharmacology	3
RSPT-250C	Introduction to Mechanical Ventilation	3
	TOTAL	13

FIRST YEAR- SUMMER SEMESTER

ELECTIVE	Psychology or Sociology Elective (May be taken any time, even before entry into the program)	3
IGED 111C	Foundation Writing in the Natural & Social Sciences (May be taken any time, even before entry into the program)	3
	TOTAL	6

SECOND YEAR- FALL SEMESTER

RSPT-270C	Critical Care and Ventilator Management	4
RSPT-273C	Cardiopulmonary Diagnostics	3
RSPT-276C	Respiratory Disease Management	3
RSPT-280C	Respiratory Therapy Seminar I	1
RSPT-269C	Neonatal/Pediatric Respiratory Therapy	1
	TOTAL	12

SECOND YEAR- SPRING SEMESTER

RSPT-277C	Adjunctive Respiratory Therapies	3
RSPT-278C	Respiratory Therapy Clinical Preceptorship	3
RSPT-290C	Respiratory Therapy Seminar II	1
BIOL-245C	Clinical Microbiology Lecture (May be taken anytime)	3
BIOL-244C	Clinical Microbiology Lab (May be taken anytime)	1
	TOTAL	11
	TOTAL SEMESTER HOURS	72

H. RESPIRATORY THERAPY PROGRAM COURSE DESCRIPTIONS

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RSPT-170C Introduction to Health Sciences - 2 Credits, (2 hours lecture)

The student will be introduced to the contemporary systems of delivering and paying for medical care, the roles of the members of the health care team, communication within the health care setting, medical terminology, professional ethics, hospital records, and legal considerations. This course is available to all Community College students prior to application to the Program.

FIRST YEAR COURSES

RSPT-171C Principles and Practice of Respiratory Therapy I - 4 Credits

(2 hours lecture, 3 hours lab, 5 hours clinical)

Topics include the chemistry and physics of medical gases, and their application and therapeutic delivery with an emphasis on oxygen administration modalities. Assessment of the patient and an introduction to infection control are included. Laboratory skills are developed in non-invasive assessment techniques, medical gas administration and the principles of humidity/nebulization therapy, which are then translated to the clinical setting. Prerequisites: MATH 101, ENGL 111, BIOL 111/113, BIOL 112/114. Co-requisites: RSPT 170, RSPT 173, CHEM 105/106.

RSPT-173C Ventilation and Gas Exchange Physiology - 2 Credits (2 hours lecture)

This course discusses the normal physiology of the pulmonary system. It includes the physics of gas flow, the mechanics of breathing, the effects of static and dynamic lung characteristics on ventilation, ventilation-perfusion relationships, gas diffusion and transport. Prerequisites: MATH 101, ENGL 111, BIOL 111/113, BIOL 112/114, RSPT 170. Co-requisites: RSPT 171, CHEM 105/106, or approval of instructor.

RSPT-172C Principles and Practice of Respiratory Therapy II - 4 Credits

(2 hours lecture, 3 hours lab, 14 hours clinical)

This course focuses on the following principles: pharmacologic aerosol therapy, bronchial hygiene therapy, airway management, hyperinflation therapy and gas monitoring techniques. CPR management in the hospitalized patient builds on the student's Basic Life Support Certification. Laboratory and clinical experiences develop competency in the application of these principles. Prerequisites: RSPT 170, RSPT 171, RSPT 173, CHEM 105/106. Co-requisites: RSPT 271, RSPT 274.

RSPT-271C Respiratory Therapy Pharmacology - 3 Credits (3 hours lecture)

This course discusses the pharmacokinetic and pharmacodynamic phases of drug action and the calculation of drug doses. Special focus is given to an in-depth study of drugs used to treat the respiratory system. Additional emphasis is placed on critical care and cardiovascular drug classes, neuromuscular blocking agents, and drugs affecting the central nervous and renal systems. Prerequisites: RSPT 170, RSPT 171, RSPT 173, CHEM 105/106. Co-requisites: RSPT 172, RSPT 274.

RSPT-274C Acid-Base and Hemodynamic Physiology - 3 Credits (3 hours lecture)

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This course builds on the ventilation and gas exchange physiology and chemistry courses with an emphasis on physiologic acid-base balance and blood gas interpretation. Additional content explores the cardiovascular and renal systems as they relate to both homeostatic and pathologic acid base and hemodynamic regulation. Prerequisites: RSPT 171, RSPT 173, CHEM 105/106. Co-requisites: RSPT 172, RSPT 271, or approval of the instructor.

SUMMER COURSEWORK

RSPT-250C Introduction to Mechanical Ventilation - 3 Credits

(2 hours lecture, 3 hours lab, 7 hours clinical)

This course provides a transition from general floor therapy to the intensive care unit. Students are introduced to the common modes and equipment utilized in providing ventilatory support to hospitalized adult patients. Laboratory and clinical assignments offer a “hands-on” experience preparing students for assuming ventilatory care responsibilities in subsequent clinical courses. Prerequisites: RSPT 172, RSPT 271, RSPT 274. Co-requisite: RSPT 269.

RSPT-269C Neonatal/Pediatric Respiratory Therapy - 1 credit (1-hour lecture)

This course presents normal prenatal development followed by assessment of the neonate. Perinatal lung disease and intervention is included with emphasis on management of neonatal ventilation. Respiratory care procedures unique to the pediatric population are included in preparation for subsequent clinical placement. Prerequisites: RSPT 172, RSPT 271, RSPT 274. Co-requisite: RSPT 250.

SECOND YEAR COURSES

RSPT270C Critical Care and Ventilator Management - 4 Credits

(3 hours lecture, 14 hours clinical)

This course builds on the student's basic ventilatory care skills to develop expertise in the management of critically ill patients. Emphasis is placed on the therapist's role as a critical care team member stressing advanced ventilatory options. Prerequisites: RSPT 250, RSPT 269. Co-requisites: RSPT 273, RSPT 276, RSPT 280.

RSPT-273C Cardiopulmonary Diagnostics - 3 Credits (2 hours lecture, 3 hours laboratory)

This course includes the techniques involved in blood gas analysis, as well as the diagnostic measures of EKG'S, radiographic interpretation, bronchoscopy, pulmonary function studies, and polysomnography. Laboratory skills include the application, calculation and interpretation of diagnostic pulmonary analysis. Equipment familiarity will be stressed as well as calibration and quality control procedures to reinforce the didactic content. Prerequisites: RSPT 250, RSPT 269. Co-requisites: RSPT 270, RSPT 276, RSPT 280.

RSPT-276C Respiratory Disease Management - 3 Credits (3 hours lecture)

This course includes the study of the etiology, pathophysiology, clinical manifestations and management of pulmonary disease processes, exploring in detail the medical management of conditions manifesting in pulmonary dysfunction. Prerequisites: RSPT 250, RSPT 269. Co-requisites: RSPT 270, RSPT 273, RSPT 280.

RSPT-280C Respiratory Therapy Seminar I - 1 Credit (3 hours seminar)

The goal of the course is to prepare the student for the self assessment evaluation examination given by the National Board for Respiratory Care. Objectives will be met by small group exam review and analysis, computer programmed instruction, and frequent testing. Passing of an exit exam is required prior to progressing to the final semester of the Program. Prerequisites: RSPT 250, RSPT 269. Co-requisites: RSPT 270, RSPT 273, RSPT 276.

RSPT-277C Adjunctive Respiratory Therapies - 3 Credits (3 hours lecture)

This course emphasizes the sub-specialty areas of Respiratory Care, to include, but not limited to pulmonary rehabilitation, home care, smoking cessation, transport, hyperbarics, ECMO, metabolic and exercise testing, nitric oxide, heliox, partial liquid ventilation, and assisting with thoracentesis, cardioversion, chest tube insertion and management. Prerequisites: RSPT 270, RSPT 273, RSPT 276, RSPT 280. Corequisites: RSPT 278, RSPT 290.

RSPT-278C Respiratory Therapy Clinical Preceptorship - 3 Credits

(142 hours clinical) minimum of 42 hours clinical and 100 hours of preceptorship

This course allows for reinforcement of skills and the development of judgment and independence as the student assumes greater Respiratory Care responsibilities. Additional critical care experience will solidify ventilator management acumen. Specialized clinical rotations in the areas of diagnostic pulmonary functions, EKG's, hemodynamics, sleep lab, home care, and pulmonary rehabilitation are provided. Prerequisites: RSPT 270, RSPT 273, RSPT 276, RSPT 280. Co-requisites: RSPT 277, RSPT 290.

RSPT-290C Respiratory Therapy Seminar II - 1 Credit (3 hours seminar)

This is a seminar course in which the National Board for Respiratory Care advanced practice examination matrices are explored. The methodical review of all areas of respiratory care services provides the framework with emphases on specific competencies necessary for passing the advanced National Board Examinations. Passing of an exit exam is required prior to graduation. Prerequisites: RSPT 270, RSPT 273, RSPT 276, RSPT 280. Co-requisites: RSPT 277, RSPT 278.

III. GENERAL INFORMATION

A. STUDENT EXPENSES (Approximate, estimated - subject to change)

1. Required fees and tuition as designated in the UDC-CC class schedule.
2. Textbook costs of approximately \$650.00 per semester, somewhat less in later semesters, as some books are used for more than one course.
3. Uniform and equipment costs of approximately \$250.00 (total).
4. Personal liability insurance yearly for each student is covered by the University.
5. CPR Certification \$75 (one time).
6. Transportation to and from clinical experiences.
7. Expenses related to attendance at MD/ DC Conference by the Sea, in September of 2nd year (\$150).

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8. Meals, parking facilities as determined by the specific clinical area to which the student is assigned.
9. Standardized Respiratory Therapy NBRC-SAE Examination fees. (\$140 = \$40 in November of 2nd year, and \$100 in April of 2nd year).
10. Participation in the 4-day Kettering National Board Exam Review Seminar prior to graduation (\$300).
11. School pin, upon completion of requirements for graduation (\$75.00).

B. HEALTH REQUIREMENTS

Health clearances are required for all students **before** being assigned to the clinical area each year. This screening is available through UDC Health Services (UHS).

- 1. Students are urged to initiate health clearance approximately two months prior to the beginning of the semester.** The staff of the University Health Services Unit includes a physician-medical director, a chief nurse, registered nurses, and support staff. Together they help to maintain and promote a state of optimum physical and emotional health among both students and staff.

Students will contact the UHS regarding the required procedure for health clearance. All students are required to have a health examination prior to Respiratory Therapy clinical placement each year. If so desired, the health examination may be obtained free of charge at the Health Services Unit. All students under the age of 26 are required to show proof of immunizations against measles, mumps, rubella, tetanus, and diphtheria. Students under the age of 19 are additionally required to show proof of immunization against polio. It is recommended that students obtain Hepatitis immunizations. These immunizations may be obtained in the Health Services office. The University Health Services is located on the Van Ness Campus, 4200 Connecticut Avenue, N.W., Building 44, Room A-33. Telephone (202) 274-5030.

2. Accidents and Illness Including Communicable Diseases

When students are injured or becomes ill while assigned to a clinical education site, they will report immediately to their UDC-CC Respiratory Therapy instructor, be seen by an emergency department physician, and report to the UDC-CC Respiratory Therapy instructor the outcome of the emergency room visit including the date the student may return to normal clinical training. Should students be diagnosed as having an illness that requires extended absence or any communicable disease, they must report such health alterations/diseases to the UDC-CC Respiratory Therapy instructor. The UDC-CC Respiratory Therapy instructor will then refer the student to the UHS for clearance to return to the clinical site. If the illness was due to a communicable disease, the physician in charge of the UHS will file reportable disease documentation with the District of Columbia's Department of Health. In the event students are unable to attend a clinical assignment because they are ill, the absences are excused. However, the student is still held accountable for all competencies included in the clinical education course in which the student is enrolled.

Health problems that would interfere with the student's ability to meet program objectives will be considered on an individual basis. Students with health problems must have written documentation from their physician and sign a student release form prior to clinical laboratory experiences. Specific agency health policies must be observed. The form includes the following statement:

I hereby release the Respiratory Therapy Program and UDC/UDC-CC from responsibility for any injury or illness to me (or if I am pregnant, my baby) while attending hospital or other clinical. I understand that risks do exist for me (and if pregnant, my unborn baby) while practicing Respiratory Therapy in the hospital setting and I do assume any and all risks involved.

C. LIABILITY INSURANCE REQUIREMENT

All Respiratory Therapy students enrolled in clinical Respiratory Therapy courses must subscribe to the liability insurance program selected by the University. The subscription fee is currently covered by the University.

D. ADDITIONAL CLINICAL SITE ORIENTATION

Clinical sites may require specific supplemental orientation, or drug screening prior to students' attendance. The Director of Clinical Education will notify students if this is applicable.

E. UNIFORM REQUIREMENTS

Laboratory Attire

1. Laboratory coat (white, full length, long sleeves).
2. Pen with black ink.
3. Pocket size notebook or pad of paper.
4. Stethoscope with dual chest-piece (bell and diaphragm in adult and pediatric sizes).
5. Wristwatch with second hand (preferable with flexible band and waterproof features).
6. Jewelry permitted includes only a plain wedding band and one pair of 8mm or less stud earrings. No bracelets. Earrings will not extend below the earlobe. No other facial piercing is permitted.
7. Optional accessories - Cardigan sweaters (white or navy blue).

Uniforms

Each student will arrive at the clinical site, classroom, and laboratory wearing a black scrub shirt with long black pants, white socks and polished white or black shoes or plain white tennis shoes. The students are required to display their university identity cards while on clinical rotation at all times and it must be visible. The dress code will be observed for **ALL** clinical experiences.

Uniforms must be pressed and wrinkle free when arriving at the clinical site.

Students are responsible for purchasing and maintaining their uniforms. While in uniform, the following are appropriate and required:

1. Conservative hair style (hair above the uniform collar and off the neck).
2. Absence of (or light use) make-up.
3. NO perfume and/or cologne.
4. Jewelry permitted includes a plain wedding band and one pair of 8mm or less stud earrings. Earrings will not extend below the earlobe. No other facial piercing is permitted.
5. Uniform pants are recommended. However, if women wish to wear uniform skirts, the minimum length of uniform skirts is below the knee. Where uniforms are not required,

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students are expected to wear laboratory coats and/or modest street clothes (dress, skirt and blouse, shirt and slacks, or suits).

6. A white or navy-blue sweater may be worn but must be removed when providing direct patient care. A plain white long sleeve turtleneck shirt may be worn under the yellow polo shirt.
7. Good personal hygiene and clean clothing are essential. Offensive body odor is not only objectionable but can trigger asthma attacks in ill patients.
8. Head gear is not allowed except for religious purposes with documented prior approval from the Program Director and the clinical site 21 days before the start of the clinical rotation.

The instructor reserves the right to evaluate personal appearance and behavior of the student and advise the student accordingly. Students may be sent home from clinical for inappropriate uniform.

F. CLASSROOM AND CLINICAL EXPECTATIONS

Classroom Attendance:

As a rule, students missing 30% of scheduled lectures or classroom activities will be advised to withdrawal for the course. Policies for individual courses are developed and enforced by the profession. Students must attend every class except in the case of an emergency. It is the responsibility of the student to notify the instructor why he/she was absent from the class session. In determining whether or not an absence was justified, the instructor may require such evidence as he/she sees fit. A significant portion of the course content may be available from the lecture only; the student should not assume that sufficient knowledge to obtain a passing grade or to meet minimal course objective can be obtained merely by reading the text.

The University expects all students to attend all scheduled sessions on a regular basis. If a student finds it necessary to be absent from class because of illness or other personal reasons, the reason for the absence should be reported to the instructor. This is for the instructor's information only and in no way excuses the absence, nor does it relieve the student of the responsibility for assignments covered during the period of absence. Extenuating circumstances that may force a student to have an extended absence should be documented and reported to the instructor and chair of the department. The instructor will determine the amount of assistance a student will need to complete the course requirements.

Clinical Attendance

UNEXCUSED absences are unacceptable. One unexcused absence will result in a five (5%) percent reduction from the final grade for the course. A student with a second unexcused absence will be advised to withdraw from the course and will not be allowed to return to the clinical for the remainder of the semester. If the additional unexcused absences occur at the end of the semester, the student's final grade will be reduced by additional 5% for each unexcused absence. An excused absence includes illness and/or death in the immediate family. Documentation is required. Absences due to extenuating circumstances will be dealt with on an individual basis at the discretion of the instructor.

Punctuality for Class, Clinical and Laboratory

The student must be in class before the class lecture and/or laboratory begins. Interrupting a class by late arrival is not only rude to the instructor and to the other students but it also demonstrates failure to behave in a professional and mature way. The instructor is not required to allow a student who is late to attend the lecture and/or laboratory. Students must remain in the classroom throughout the entire class time. Wandering in and out of the classroom is very disruptive, and students who leave a class may be denied reentry. Leaving class before the scheduled end time will be recorded as tardy. **Excessive tardiness (3 or more) will result in a three percent (3%) deduction from your final grade.**

Clinical education courses have been designed to provide sufficient patient contact for students to master competencies required within a specific course. Because of the many skills in which the student must become proficient, and the amount of time required for patient interaction, additional time cannot be provided during the framework of the Program to make up assignments missed owing to frequent absences and/or tardiness. Furthermore, absence from and tardiness at the clinical site is evidence of unprofessional behavior which if practiced in the workplace would result in employment termination.

Tardiness is extremely disruptive to the clinical experience, affecting not only other students and the learning environment, but staff and patient care as well. Habitual tardiness (more than 3) will result in a reduction in the final grade for the course in which the student is enrolled of 3% for each tardiness beyond three.

The instructor is not required to allow a student to make up missed laboratory dates. The instructor may take points off for tardiness, not completing exercise(s) on time or give the student an incomplete or failing grade for non-completion of pre-clinical objectives.

G. ADDITIONAL EXPECTATIONS: Classroom/Lab/Clinical

Children

In order to provide an optimum learning environment, students are discouraged from bringing children to class. Children are not permitted to attend any laboratory or clinical sessions.

Smoking

Smoking is not permitted in the classroom, laboratory, or clinical setting.

Inappropriate Behavior

Use of profanity; disrupting course settings with outbursts or verbal threats; irresponsible statements and remarks; or slanderous comments are **unacceptable** at any time. These behaviors may result in removal from the course and dismissal from the Respiratory Therapy Program.

Weapons

Actual or potentially hazardous objects (guns, knives, sharp objects, etc.) are not allowed in the classroom, laboratory or clinical, and will result in immediate dismissal from the Program and criminal charges filed as required by law.

Professional

All students will refrain from unprofessional behavior such as hostility and

Behavior

Anger management issues, while treating others with respect at all times.

Electronic Devices

Permission for use of tape recorders in campus classrooms is at the discretion of the instructor.

Cellular telephones and pagers are to be turned off during classroom and laboratory experiences. There will be NO texting during class. Cell phones are NOT to be carried in the clinical and must be left with the student's personal belongings. Cell phones may not be used as calculators during examinations.

Clinical

Length of Clinical Experiences

The specific days and hours for the clinical Respiratory Therapy experiences vary with the particular course and the agency providing the Respiratory Therapy experience. Information regarding individual schedules will be given at the beginning of each course.

Relationships

Students will be responsible primarily to the UDC-CC Respiratory Therapy instructor and secondarily to respiratory therapy service employees at the institutions providing the clinical experiences. Students are responsible for reporting significant information to the appropriate person at the clinical sites.

In addition, students will not complete clinical coursework at any hospital affiliate where they are currently employed.

Clinical Agency Policies and Procedures

Students are required to attend orientations to the clinical agencies and must complete designated training for HIPAA, fire, evacuation, safety, and infection control. Evidence of completion is kept in the student file. No student is permitted on the clinical site without verification

In addition, all students are to review the following guidelines listed under the center for disease website at http://www.cdc.gov/ncidod/dhqp/bp_universal_precautions.html to reduce the risk of the transmission of infection in the clinical setting.

Professional Responsibilities

Students are expected to function as accountable, responsible and self-directed individuals.

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Confidentiality

Information and experiences relative to patients and personnel in the agency are to be held in **strict confidence**. Discussion of experiences is limited to individuals involved in patient care.

Unprofessional Behavior

Use of profanity, disrupting clinical settings with outbursts or verbal threats, irresponsible statements and remarks, or slanderous comments are **unacceptable**. These behaviors will result in removal from the clinical site and possible dismissal from the Respiratory Therapy Program.

Unsafe Behavior: Substance abuse (alcohol, illegal drugs and chemicals), unethical respiratory therapy actions and/or sleeping at the clinical site are grounds for immediate dismissal from the clinical site and the Respiratory Therapy Program. These actions seriously jeopardize safety. Students are **strongly advised** not to work more than 20 hours per week. Scheduled work hours should not include the shift or tour of duty immediately prior to assigned clinical experiences. Students are expected to follow the Code of Ethics and function safely in the clinical setting.

Weapons

Actual or potentially hazardous objects (guns, knives, sharp objects, propellant sprays, electronic shocking devices, etc.) are **not** allowed in the clinical settings, and will result in immediate dismissal from the Program and criminal charges filed as required by law.

Electronic Devices

Pagers, cellular telephones, cameras and/or tape recorders are **NOT** allowed in clinical settings.

H. POLICIES REGARDING RESPIRATORY THERAPY PROGRAM COURSES

Theory Courses

A course syllabus will be given to students on the first day of class. This syllabus will include:

1. Heading, course number, title, credit hours, and placement (semester and year)
2. Faculty and office (location, conference hours, and phone numbers)
3. Pre- and/or co-requisite(s)
4. Course description
5. Course objectives
6. Required text and/or a list of required readings
7. Topical course outline
8. Teaching methods or instructional strategies
9. Grading standards (components and percent of final grade)
10. Notification of academic integrity policies to include minimal policy statements on plagiarism and cheating.

Clinical Courses

To become successful as a Respiratory Care Practitioner, it is essential that the student demonstrate proficiency at a variety of identified tasks. Successful completion of each psychomotor competency is required and implies a continued responsibility on the part of the student for maintaining proficiency throughout subsequent clinical rotations.

Each semester students will be responsible for submitting completed clinical case studies and participating in "Journal Club" presentations following the formats provided.

A certain flexibility in each clinical is necessary in order that unique learning opportunities may be facilitated. Therefore, students will be expected to participate in assigned learning experiences that may necessitate variations in clinical time and place, as well as some minimal additional expenses.

Each student will maintain a running record of his/her attendance, and log of performed tasks in the Clinical Competency Skills folder. In addition, a clinical experience summary will be submitted on Blackboard and Data Arc each week.

The following documentation is required prior to attending the clinical site

1. Liability Insurance
2. UDC Health Service Clearance
3. CPR Certification.

Clinical course guidelines will include

1. Clinical assignment(s) and placement(s)
2. Clinical objectives
3. Specific regulations for designated areas
4. Assignment details (Required competencies, written assignments, grading criteria, methods of evaluation, etc.).

Clinical site placement is contingent on the agreement of the participating clinical facility. This facility reserves the right to exclude any student whose behavior, in the sole opinion of the facility, is deemed to be incompetent, unprofessional or detrimental to the hospital or proper rendering of quality patient care. Further, if the clinical instructor, in his/her professional opinion, deems a student to be incompetent, unprofessional or a hazard to patient care and safety may likewise dismiss a student from a clinical affiliation. If the affiliation of a student is terminated by either the clinical facility or the clinical instructor, the student will not be reassigned, and thus will not be able to meet the objectives of the clinical experience.

Testing

- Examinations will be administered during regularly scheduled class/lab periods or, alternatively, during arranged clinical time. At the discretion of the instructor, exams may be administered on Blackboard.

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- Absence from an examination **will not** be excused except for illness attested to by a physician's certificate, or for a cause, which the faculty may approve, by special consideration. When the student's reason for being absent is deemed satisfactory, a specified time and date for make-up examination will be arranged. Arrangements for make-up exams must be completed **before** the date of the exam.
- **Special Tests**
 1. All Respiratory Therapy students are required to pass the NBRC – Therapist Multiple Choice Self-Assessment Examination before enrolling their final semester. This test indicates the achievement of the student in relation to that of other students in Respiratory Therapy programs nationally. Cost to the student is approximately \$50.
 2. Respiratory Therapy students are required to take the NBRC Clinical Simulation Self-Assessment Examination (cost \$70) before exiting the program. A passing grade on the exam is a graduation requirement.
 3. **THE COST OF THESE TESTS (Paid to the NBRC) IS THE RESPONSIBILITY OF THE STUDENT, AND FEES MUST BE PAID PRIOR TO TEST ADMINISTRATION.**

IV. UNIVERSITY STUDENT ACTIVITIES

A. STUDENT RIGHTS AND RESPONSIBILITIES

1. Students should be encouraged to develop the capacity for critical judgment and engage in a sustained and independent search for truth.
2. The freedom to teach and the freedom to learn are inseparable facets of academic freedom. Students should exercise their freedom with responsibility.
3. Each institution has a duty to develop policies and procedures, which provide and safeguard the student's freedom to learn.
4. Under no circumstances should a student be barred from admission to a particular institution on the basis of race, creed, sex or marital status or under status or characteristic protected by District or Federal law.
5. Students should be free to take reasoned exception to the data or views offered in any course of study to reserve judgment about matters of opinion, but they are responsible for learning the content for which they are enrolled.
6. Students should have protection through orderly procedures against prejudiced or capricious academic evaluations, but they are responsible for learning the content for which they are enrolled.
7. Information about student views, beliefs, and political associations, which the instructors acquire in their course work, should be considered confidential and not released without the knowledge or consent of the student.
8. The student should have a right to a responsible voice in the determination of his/her curriculum.
9. Institutions should have a carefully considered policy as to the information that should be a part of student's permanent educational record and as to the conditions of their disclosures.
10. Students and student organizations should be free to examine and discuss all questions of interest to them, and to express opinions publicly and privately.

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11. Students should be allowed to invite or hear any person of their own choosing, thereby taking the responsibility of furthering their own education.
12. The student body should have clearly defined means to participate in the formulation and application of institutional policies affecting academic and student affairs.
13. The institution has an obligation to clarify those standards of behavior that it considers essential to its educational mission and community life.
14. Disciplinary proceeding should be instituted only for violations of standards of conduct formulated with significant student participation and published in advance through such means as a student handbook or generally available body of institutional regulation. It is the responsibility of the student to know these regulations.

American with disabilities Act (ADA)

Americans with Disabilities Act (ADA) and Section 504 of the Rehabilitation Act of 1973 Policy Statement -The University of the District of Community College is committed to providing accommodations for individuals with disabilities for the academic programs the college offers. This course complies with the ADA in providing accommodation(s) to students with documented disabilities. Students must self-disclose and provide documentation in order to be eligible for accommodation(s). If you are a student with a disability and require assistance or support services, please contact Mr. Rober Vela, at the Counseling & Accessibility Resource Center at 5171 South Dakota Avenue, NE at robert.vela@udc.edu or (202) 274-6173.

Responsibilities

The student is expected to function as a self-directed, accountable individual, responsible for knowing the rules and regulations described in this Handbook and to refer to it for questions regarding policies, procedures, and processes.

B. GRADE APPEAL PROCEDURE

Students must contact the course faculty for initial discussion of grades and follow the established process for dispute of grades. Faculty advisors are available to counsel students regarding the grade appeal policy.

The Respiratory Therapy Program follows the grade appeals policy/process of the University:

1. Any student with a grade dispute must present it in writing to the course professor within one semester from receiving the grade.
2. The professor should let the student know the procedure used in calculating the grade. This procedure must be consistent with the information of the course syllabus.
3. In case the matter is not resolved in step 1 within 15 days from the date that it was first presented to the professor, the student may choose to appeal in writing to the Program Director.
4. The appeal(s) must identify the basis of the dispute and include all supporting documentation.
5. Upon receipt of the written appeal, the Program Director will hold individual and/or joint meetings with the Faculty member and the student within 15 working days.

6. If the Program Director is unable to resolve the dispute within 15 days from the date that it was first presented to the Program Director, the student may choose to appeal in writing to the Division Director.
7. If the Division Director's decision is not accepted by either party, the student or the course student may choose to appeal in writing within ten (10) working days from receiving the decision, to the Dean of Academic Affairs.
8. The Dean will submit the case to a College-wide Academic Appeals Committee for consideration and recommendation. This committee involves the faculty and representatives from various departments as well as student representation. This will be the final step in the appeal process. The committee will submit its recommendation to the Dean within 15 working days from the date of receiving the case. The Dean will inform all parties involved of their decision.

C. STUDENT ORGANIZATIONS

University of the District of Columbia Student Government Association

The Student Government Association (SGA) represents the student body of the University of the District of Columbia and Community College through a system of responsible self-governance and exercises general supervision over student affairs consistent with the mission and goals of the University. Through the SGA, UDC students represent themselves in planning and policy formulation in all areas that affect student life. The SGA is responsible for encouraging academic excellence and acts as a liaison between the student body, faculty, and academic administration. The SGA is responsible for the following activities:

Respiratory Therapy Club

The UDC-CC Respiratory Therapy Club encourages student participation:

- a. To provide opportunities for student participation in the development, maintenance, and evaluation of UDC's total Respiratory Therapy Program.
- b. To provide a vehicle for student identification with peers and leaders within the local and national Respiratory Therapy community.
- c. To provide the means for representation of Respiratory Therapy students in university-wide activities.
- d. To assist students in developing interest in and competencies for participation in professional organizations.
- e. Participation in the annual MD/DC Society for Respiratory Care, Conference by the Sea in Ocean City, MD.
 - i. Each September the 2nd-Year Respiratory Therapy students travel to Ocean City, MD to participate in the annual three-day, MD/DC Society Conference by the Sea

D. SCHOLARSHIPS & HONORS FOR UDC RESPIRATORY THERAPY STUDENTS

- **Annye C. Buck Scholarship**
- **MD/DC Society for Respiratory Care Scholarship**
- **American Respiratory Care Foundation Scholarships**
- **Lambda Beta Respiratory Therapy Honor Society**

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The Division of Nursing, Allied Health, Life and Physical Sciences is happy to present in association with the funds maintained by the UDC Foundation, Inc., a list of available scholarships for students in the Respiratory Therapy major. For detailed information and applications for the scholarships listed above, please come to the Division of Nursing, Allied Health, Life and Physical Sciences Office.

Annye C. Buck Scholarship

The Annye C. Buck Scholarship provides financial assistance to students based on their academic excellence and needs. The level of funding will be determined by the availability of funds. Two scholarships will be awarded each year, one for an Associate degree major and the other for a Baccalaureate degree major.

Criteria: Students must be enrolled with the Division of Nursing, Allied Health, Life and Physical Sciences or the Department of Biological & Environmental Sciences.

- Students must have completed at least 24 credit hours at UDC/UDC-CC
- Applicants must maintain a CGPA of 3.0 or better
- Applicants must be residents of the District of Columbia
- Must be enrolled full-time with at least 12 credit hours in a program of study with the Division of Nursing, Allied Health, Life and Physical Sciences.

Note: The committee shall consist of faculty representatives from each program area of the Division of Nursing, Allied Health, Life and Physical Sciences.

MD/DC Society for Respiratory Care Scholarship

The MD/DC Society for Respiratory Care Scholarship is given annually at the Society's Conference by the Sea to the student in the graduating class with the highest grade point average.

American Respiratory Care Foundation Scholarships

Respiratory Therapy students are encouraged to apply for the American Respiratory Care Foundation Scholarships which are awarded each year at the AARC International Congress. These are nationally competitive scholarships which require the submission of a scholarly paper.

Lambda Beta Membership

UDC boasts a chapter of Lambda Beta which is the National Honor Society for Respiratory Care. Membership in this prestigious society is afforded to those students who graduate in the top 25% of their Respiratory Therapy Program graduating class. Students eligible for this honor have a grade point average of 3.0 or greater upon entering the final semester in the Program.

V. RESOURCES

A. COMMUNITY COLLEGE SUPPORT SERVICES

As a student of UDC-CC it is important to be aware of the Support Services available on the Lamond-Riggs Campus to assist in your success. Support Services at the Community College

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are designed to meet students' academic, administrative, career, social, and emotional needs. Please use the information below to become acquainted with and use, the following Support Services at the Lamond-Riggs Campus. They are all accessible throughout the academic year.

- **Counseling Services:** Please direct emails to Mr. Vela Roberts robert.vela@udc.edu
- **Student Success Center:** (advising services): cc@udc.edu
- **Center for Academic and Career Excellence:** (tutoring services): Get updates by sending an email Coaxum, Raena raena.coaxum@udc.edu
- **Counseling & Accessibility Resource Center:** Please direct emails to Mr. Vela Roberts robert.vela@udc.edu
- **Financial Aid:** (202) 274-6795 (front desk), (202) 274-6060 (fax), finaid@udc.edu
- **Office of Student Accounts:** student-accounts@udc.edu
- **Office of the Registrar:** Ms. Caroline Oyuyo, caroline.oyuyo@udc.edu
- **International Student Services:** Currently enrolled F-1 international students with an urgent immigration issue, please sent email to: International@udc.edu
- **Office of Military and Veteran Student Services:** military@udc.edu or call 202.274.6099
- **Office of Career Services:** career counseling appointment - careerservices@udc.edu, internship and employment opportunities - udc/joinhandshake.com

The Office of the Vice President for Student Affairs has oversight over athletics, student life and services, counseling, health services, student employment, and alumni relations. The Office of Student Life and Services provides student academic, psychological, and social testing and counseling.

The Counseling & Accessibility Resource Center (CARC), located at the Community College on the second floor in room 218, is committed to providing equal and integrated access for individuals with disabilities to all the academic, social, cultural, and recreational programs it offers. We work with students to ensure access to every opportunity for learning and personal growth so that you may participate as fully as possible in campus life. The CARC can be reached at (202) 274-6213.

Students are expected and encouraged to utilize the CARC's resources to the degree they determine necessary. The CARC provides individualized educational plans for any student with a documented disability (physical, cognitive or emotional) who requires academic accommodations. For more information, contact the CARC at (202) 274-6000 (voice) or (202) 274-6152 (TTY for users who are deaf or hard of hearing) as soon as possible to request an official letter outlining authorized accommodations.

The Office of **Student Support Services** provides a variety of services to increase the retention and graduation rates of first-generation college students. See the current or most recent UDC Catalog for details on resources.

B. COUNSELING AND ACADEMIC ADVISEMENT

All students are eligible for counseling through University Services and academic departments.

Academic, career, and personal counseling services are coordinated by the Office of Student Life and Services. The Counseling Services Office and the Peer Mentoring Program provide personal, educational and career guidance.

As an enrolled UDC-CC student, students have access to free professional counseling services at the Counseling and Student Development Center.

The college experience can be great, but it can also be stressful, lonely, and even overwhelming at times. You may be dealing with personal, family, financial, academic, or career difficulties. There are many reasons why students come to the Center. The Center can help with a wide range of services, including individual and group counseling, medication services, substance abuse help, career advice, academic support, and consultation. The Counseling & Career Development Center is located at the Lamond-Riggs campus.

The Respiratory Therapy faculty members are the focal point for academic advisement and counseling of prospective and continuing Respiratory Therapy students. Students are counseled by the faculty. Students should make appointments with faculty advisors for academic counseling to facilitate optimal progression through the Program. This counseling should ideally be completed prior to the regular registration periods. New students, transfer students, and continuing students who are Respiratory Therapy majors are to see their assigned advisor each semester for academic advisement. Frequently used resources are listed in the UDC Student Handbook, and include the Campus Bookstore, Parking Garage, University Police, Public Safety and Emergency Management, International Student Services, and Veteran Student Services.

C. FINANCIAL AID

The Financial Aid Office provides a variety of financial aid options designed to help meet the needs of qualified students. Financial assistance is intended to supplement the maximum efforts of the student and the student's family in their attempts to meet college expenses. Financial aid is any fiscal resource which reduces or eliminates the cost of attending the University. The resources are grants, loans, scholarships or employment through work-study. Financial aid awards may consist of one or more types of aid programs based on your overall eligibility status.

D. EMPLOYMENT

UDC-CC students can count on help to make informed career choices, guidance toward appropriate training and education programs and assistance as they prepare for and conduct the job search. Such programs include valuable information related to careers and jobs, such as:

- Career Net – This computer-based service includes career information and job openings from throughout the nation, plus Internet access.

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- Workshops – On such subjects as career exploration, resume writing and interviewing skills. A Successful Living series also is offered.
- Internet resume services – Posted electronically on the University's web page.
- On-campus job interviewing – Employers with jobs to fill schedule interviews with interested students.
- Career Fair – *This expanding annual event draws dozens of employers in a wide variety of fields. And they are hiring.*
- Office of Career Services - 202-274-6184

College work-study opportunities enable students to work at the University of the District of Columbia Community College within a local or federal government agency or in a nonprofit off-campus organization. Applicants for this work-study must be enrolled students registered for classes. In those situations where employment is necessary, an intensive effort is made to locate jobs which relate to a student's area of study; however, part-time employment or less is recommended for Respiratory Therapy students due to the intensive nature of the curriculum.

E. LEARNING RESOURCES CENTER (LIBRARY AND MEDIA)

UDC or UDC-CC identification and library cards must be presented when receiving instructional services or equipment from the library or media center. Concentrated use of library and multi-media services are essential to optimally meet course objectives. The hours of operation are posted, and students may use the study rooms, typewriters, computers and media viewing equipment according to learning resource center guidelines. Faculty are available to assist students to use the following resources effectively.

American Association for Respiratory Care (AARC): <http://rc.rcjournal.com>

AARC Times Magazine: <http://aarc.org/resources/publications/aarc-times/>

To explore career opportunities and employment trends:

<https://www.onetonline.org/link/summary/29-1126.00>

COPD Digest: <https://www.copdfoundation.org/COPD360social/Community/COPD-Digest.aspx>

VI. RESPIRATORY THERAPY PROGRAM COMMITTEE STRUCTURE

Faculty members meet as a total Faculty Organization (Committee of the Whole) when transacting business of the Respiratory Therapy Program.

A. ADVISORY COMMITTEE

Purposes

The purposes of the Advisory Committee shall be to:

- Support the purposes and objectives set forth by the Respiratory Therapy Program.
- Provide advocacy for Respiratory Therapy programs, both within the university system and the community.
- Serve as consultant to the Respiratory Therapy Program in relation to faculty, students and curriculum.

Membership

The membership of the Advisory Committee shall be:

- Respiratory Therapy student leader
- Graduates of the UDC-CC Respiratory Therapy Program
- The current faculty of the Respiratory Therapy Program
- UDC Administration representative (Division Director, Dean of Academic Affairs, etc.)
- The Respiratory Therapy Medical Directors
- Representatives from the Respiratory Therapy communities of interest in the Washington Metropolitan Area, such as Respiratory Therapists, from the clinical, administrative, business and research sectors.
- Representative(s) from the general public.

B. CURRICULUM COMMITTEE

Purpose

The purposes of the Curriculum Committee shall be to develop, review, and evaluate the curriculum of each Respiratory Therapy level congruent with established standards.

Membership

The membership of the Curriculum Committee for the program shall be the full-time faculty and a Respiratory Therapy student leader.

C. ADMISSION AND PROGRESSION COMMITTEE

Purpose

The purpose of the Admission and Progression Committee is to review all applicants to the Program and recommend those for admission, and to verify each semester that all continuing students have met the prerequisites for progressing to the next level of the Respiratory Therapy curriculum sequence.

Membership

The membership of the Admission and Progression Committee for the Program shall be full-time faculty.

VII. ESSENTIAL FUNCTIONS OF RESPIRATORY THERAPY STUDENTS

Functional Abilities/Core Performance Standards

Please review the list of skills below. If you are unable to meet the standard(s) even with correction (example: eyeglasses, hearing aids) on any of the items below, please list them on the sheet provided.

The Respiratory Therapy Program complies with the American with Disabilities Act (ADA), and consistent with the ADA, the attached Functional Abilities/Core Performance Standards Worksheet provides the framework to relate functional ability categories and representative activities/attributes to any limitations/deficits in functional abilities. These standards shall be used by the Respiratory Therapy Program in combination with the professional scope of

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practice, job analysis, other resources, and expert consultation to make decisions related to the ability of the respiratory therapy student to perform the essential functions of respiratory therapy.

If a prospective student is or becomes unable to meet the required "Functional Abilities/Core Performance Standards," the Respiratory Therapy Program in consultation with an Accessibility Resource Center Specialist will determine, on an individual basis, whether or not reasonable accommodations can be made that would permit the student to meet these "Functional Abilities/Core Performance Standards" and thus, to continue in the Program.

Please note: "Skills related to" under each of the following sections is not intended to be a complete listing of skills but rather as an example of a skill for which that ability is required.

FUNCTIONAL ABILITY	ACTIVITIES/SKILLS	SKILLS RELATED TO:
1. Gross Motor Ability	<ul style="list-style-type: none"> • Move within confined spaces • Sit and maintain balance • Stand and maintain balance • Reach above shoulders • Reach below waist 	Function in an ICU environment: move about in an ICU room in order to perform procedures on the patient. Sit to record findings. Change equipment settings above head and below waist.
2. Fine Motor Ability	<ul style="list-style-type: none"> • Pick up objects with hands • Grasp small objects with hands • Write clearly and neatly with pen or pencil • Type on a keyboard • Pinch/squeeze or pick up objects with fingers • Twist knobs with hands • Must have adequate manual dexterity as to be capable of maintaining sterility 	Lift medications vials to eyes to read. Squeeze Medication vials to empty. Squeeze Ballard suction catheter button. Grasp, hold and read small instruments such as volume measuring devices. Write in patient chart. Change settings on equipment by turning knobs and observing change.
3. Physical Endurance	<ul style="list-style-type: none"> • Stand at patient's side during procedures • Sustain repetitive movements • Maintain physical tolerance 	Stand and perform repetitive procedures on patients, such as Chest Physical Therapy and chest compressions in CPR. Continue tasks throughout an 8-hour shift. Work and complete tasks at a reasonable pace.
4. Physical Strength	<ul style="list-style-type: none"> • Lift 25 pounds • Move light objects up to 10 pounds • Restrain combative client • Carry equipment/supplies • Squeeze with hands (example: use of a fire extinguisher) 	Assist patients from bed to chair. Hoist patient up in bed. Move patient from stretcher to bed and back. Carry medications, pulse oximeter, stethoscope or other equipment to patient room. Push ventilator or other heavy equipment from respiratory

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	<ul style="list-style-type: none"> • Able to Push/roll 60 pounds • Move heavy object weighing from 10-50 pounds. • Use upper body strength 	department to patient room. Move other equipment. Lift equipment from bed height to shelf height above chest level.
5. Mobility	<ul style="list-style-type: none"> • Twist • Bend • Stoop/squat • Walk • Move quickly • Climb ladders/stools/stairs 	Turn to change settings on monitors while standing at patient's bedside. Bend to change equipment settings on floor, at knee level, waist level, chest level, eye level or above head. Gather equipment and manually resuscitate patient without delay. Make rapid adjustments if needed to ensure patient safety. Make way to patient room using stairs in an emergency.
6. Hearing	<ul style="list-style-type: none"> • Hear normal speaking level sounds • Hear faint voices • Hear faint body sounds (example: breath and heart sounds) • Hear auditory alarms • Hear telephones • Hear sounds with stethoscope 	Listen to patient breath sounds to determine if patient is breathing. Listen to heart sounds to determine arrhythmias or if heart is beating. Determine the intensity and quality of patient breath sounds in order to evaluate pulmonary status. Hear audible alarms such as a ventilator alarm. Hear overhead pages and other requests for assistance.
7. Visual	<ul style="list-style-type: none"> • Visually assess patients • See object up to 20 inches away • See object more than 20 feet away • Use peripheral vision • Distinguish color • Distinguish color intensity • See emergency lights/lamps 	Read patient chart. Visually assess patient color to assess for hypoxia. Read settings and displays on monitors, ventilators and other equipment. Visually assess patients for changes.
8. Tactile	<ul style="list-style-type: none"> • Feel vibrations • Detect Temperature • Feel the differences in surface characteristics • Feel the differences in sizes, shapes 	Assess patient by feeling pulse, temperature, tactile fremitus, edema, subcutaneous emphysema
9. Smell	<ul style="list-style-type: none"> • Detect odors from patient • Detect smoke • Detect gas or noxious smells 	Assess for noxious odors originating from the patient or environment (example: gas leak or smoke)