RESPIRATORY THERAPY HANDBOOK 2018-2019

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

DIVISION OF NURSING, ALLIED HEALTH, LIFE AND PHYSICAL SCIENCES
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**LETTER TO THE STUDENT**  
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Dear Respiratory Therapy Student:

Congratulations on your selection of Respiratory Therapy. We look forward to supporting and directing your educational pursuit of this dynamic health care career. Respiratory Therapy is a rewarding profession and one that can bring you great pride and personal satisfaction. Please know that we extend an enthusiastic welcome to you and we are looking forward to your success. The Respiratory Therapy curriculum is designed to provide you with the knowledge and clinical competencies required for meeting the health care needs of patients with cardiopulmonary disorders. We expect a transformation of dedicated students into competent and professional respiratory therapists. Students are encouraged to prepare for a challenging program of study that requires consistent discipline, focus, and scholarly work. Consider this “a new day and a new opportunity”.

The faculty and I take great pride in the diversity of our student population. Our diverse student population has contributed significantly to the community and resulted in outstanding personal performance by University of the District of Columbia Community College (UDCCC) Alumni. Graduates of our program have, and will continue to make significant contributions to the respiratory therapy profession. In keeping with that standard, I wish you abundant academic success and personal satisfaction in your career choice during your matriculation. It is our hope that during your progression through the program, you will acquire our passion for respiratory therapy. As faculty and students we are “partnering for excellence in respiratory therapy”.

In closing, again I welcome you to Respiratory Therapy at the University of the District of Columbia Community College and may all of your educational and professional aspirations become reality.

Sincerely,

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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 (UDCCC). 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 policies on the same subject. The UDCCC Undergraduate Catalog; Division of Student Affairs’ Student Handbook; Division of Student Affairs, Info at a Glance; Registrar’s Office Schedule of Classes for each semester’s registration; and the UDCCC Website http://cc.udc.edu provide information regarding the general policies for undergraduate students at UDC. Students are responsible for using these public documents to enhance their academic experiences and are held accountable for policy adherence.

The Associate Degree Respiratory Therapy Program is within the University of the District of Columbia Community College, 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 (CoARC).

Every effort has been 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 of time required to obtain an Associate of Applied Sciences Degree in Respiratory Therapy. Students are responsible for posted changes that become effective prior to the publication of the next Respiratory Therapy Student Handbook. Therefore, students are advised to read the Respiratory Therapy notices posted in Building 53 on the 8th floor near the Respiratory Therapy classrooms (807, 808), and the faculty offices on 9th floor rooms 904 and 905. Additional program materials may be obtained on display racks outside the department’s secretary’s office, room 811 and 616.

B. HISTORICAL PERSPECTIVE

The University of the District of Columbia (UDC) 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.

The University of the District of Columbia Community College (UDCCC) 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 city, 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 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 the University of the District of Columbia (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 the three former post-secondary institutions: the Washington Technical Institute (WTI), the District of Columbia Teachers Colleges (DCTC), and
Federal City College (FCC). Between 1976 and 1978, the administrators and faculties of the three institutions achieved the consolidation of the administrative services and academic programs of the predecessor institutions.

The Respiratory Therapy Program at the former Washington Technical Institute 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 the Washington Technical Institute. Thus was created the twenty-one month associate degree program.

In 1994, with the mandated elimination of the summer offering, the program again evolved, this time into a six semester format. This format was comprised of a two semester pre-clinical division followed by a four 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 71.

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

The Respiratory Therapy Program at the UDC is completing its 47th year of existence and will be graduating its 46th class of therapists in the spring of 2019.

The University of the District of Columbia created the Community College in 2009-2010.

Washington, D.C. and its metropolitan suburbs have savored the expectation of having this program provide their hospitals and other health agencies with the area’s much needed qualified practitioners. Graduates of the program continue to perform well on the job and on the National Board for Respiratory Care credentialing examination.

The program’s, full-time faculty, is stable and totals three. 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 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 the staffing of several hospitals in the city 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 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 the Department of Nursing, Allied Health, Life and Physical Sciences of the Community College. The Department includes the Associate Degree programs in Nursing, Mortuary Science and Respiratory
Respiratory Therapy, as well as professional training in biology, chemistry and physics. The Program Director for Respiratory Therapy consults with the Chairperson for the Division of Nursing, Allied Health, Life and Physical Sciences, and reports to the Dean of Academic Affairs.

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

D. MISSION AND GOAL OF THE PROGRAM
The University of the District of Columbia 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. These programs will prepare graduates for immediate entry into the workforce, for the next level of education, for specialized employment opportunities, and for lifelong learning.

The mission of the UDCCC, Department of Nursing, Allied Health, Life and Physical Sciences is to provide exemplary educational experiences to an ethnically diverse population with a particular emphasis on the needs in the District of Columbia. The Department provides an intellectually challenging and nurturing environment that fosters the development of competent and compassionate practitioners who will assist individuals on the continuum from wellness/illness, dying, death, and care of human remains. Students are assisted in the development of critical thinking skills, problem solving, technical, and social skills through active participation in classroom and practicum experiences.

MISSION OF THE RESPIRATORY THERAPY PROGRAM

The mission of the Respiratory Therapy Program is to prepare competent practitioners to meet the Respiratory Therapy health-related needs of the diverse citizenry of the District of Columbia and for society at large by preparing graduates with the cognitive, psychomotor and affective competencies of Registered Respiratory therapists. Graduates are able to practice in a variety of settings and attend to respiratory health needs of all age groups across the health care continuum from wellness to critical care. The undertakings of Department of Nursing and Allied Health and the Respiratory Therapy Program follow and are inextricably linked to the College Mission.

The goal of the Respiratory Therapy Program is to prepare graduates with the cognitive, psychomotor and affective competencies of Registered Respiratory therapists by creating a learning environment that fosters critical thinking through experiential leaning, problem-based learning and hands-on clinical practice.

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 of the UDCCC currently offers The Associate in Applied Sciences Degree in Respiratory Therapy.

The Associate in Applied Science in Respiratory Therapy prepares graduates to take the National Board of Respiratory Care (NBRC) Entry Level, Certified Respiratory Therapist (CRT), examination which States utilize in granting licensure to practice Respiratory Therapy. Further, it prepares students to take the advanced practice, Registered Respiratory Therapist (RRT), examination, which is identified nation-wide 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 the Community College does not guarantee admission into the Respiratory Therapy program coursework. Admission to the program is limited to 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.

Students who intend to pursue a career in Respiratory Therapy must first be enrolled in the Community College as regular students and complete prerequisites of 17 semester hours earning a minimum grade of ‘C’ in each course and a cumulative grade point average (CGPA) of 2.5 or higher to be considered for admission to the Respiratory Therapy program sequence.

Prerequisite Courses:

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<th>Course Title</th>
<th>Credit Hrs.</th>
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<tr>
<td>INDT 101</td>
<td>First Year Seminar</td>
<td>1</td>
</tr>
<tr>
<td>RSPT-170</td>
<td>Introduction to Health Science</td>
<td>2</td>
</tr>
<tr>
<td>MATH-101</td>
<td>College Level Math I</td>
<td>3</td>
</tr>
<tr>
<td>ENGL-111</td>
<td>English Composition I</td>
<td>3</td>
</tr>
<tr>
<td>BIOL-111</td>
<td>Anatomy and Physiology I Lecture</td>
<td>3</td>
</tr>
<tr>
<td>BIOL-113</td>
<td>Anatomy and Physiology I Lab</td>
<td>1</td>
</tr>
<tr>
<td>BIOL-112</td>
<td>Anatomy and Physiology II Lecture</td>
<td>3</td>
</tr>
<tr>
<td>BIOL-114</td>
<td>Anatomy and Physiology II Lab</td>
<td>1</td>
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<tr>
<td></td>
<td>Total</td>
<td>17 Credit Hours</td>
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Admission to the Respiratory Therapy Program
Admission to the program is competitive, and space is limited. Interested students will submit a separate application to the Respiratory Therapy Program. This application may be obtained from program faculty in early December in rooms 616 and 811. Applications must be received by the department no later than Friday, the first week of March, 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 GPA and prerequisite requirements, applications require two essays, two letters of recommendation, a current official transcript, a valid CPR from the American Heart Association (Health Care Provider) certification valid for two years, and a criminal background check. Applicants must also complete the HESI admission exam and complete an in-house writing sample and faculty interview.

Science courses can be no older than five to seven 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 seven 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.
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 indicates 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/UDCCC Students planning to change their majors to Respiratory Therapy will adhere to the following procedure:

1. Receive academic counseling from an advisor.
2. Be in good academic standing with a cumulative GPA 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

<table>
<thead>
<tr>
<th>Respiratory Therapy Faculty Name</th>
<th>Office and Telephone</th>
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<tr>
<td>Professor Lori Taylor</td>
<td>Bldg 53, Rm 904 – 274-5864</td>
</tr>
<tr>
<td>Professor Vicki Rosette</td>
<td>Bldg 53, Rm 905 – 274-6543</td>
</tr>
<tr>
<td>Professor Michael Olaniyi</td>
<td>Bldg 53, Rm 905 – 274-5922</td>
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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 the community college of the university 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. **CREDIT BY EXAMINATION FOR UNIVERSITY/COMMUNITY COLLEGE COURSES**

The faculty is committed to validating prior education through the credit by examination process to facilitate advanced placement of students. Students may receive credit by examination for specific courses with approval of the department offering the course in keeping with university policies. The University of the District of Columbia Undergraduate Catalog states the following:

Students may receive credit for course work upon successful completion of an examination and approval of the department chairperson and school dean. Students seeking credit by examination must receive prior permission from the chairperson of the department offering the course. Once the appropriate forms are completed and signed, full-time students must pay the per credit hour fee. Part-time students must pay any additional tuition and pay the per credit hour fee.

E. **CREDIT BY EXAMINATION FOR RESPIRATORY THERAPY COURSES**

The University policy for the Credit by Examination must be followed. The additional guidelines for challenging Respiratory Therapy courses through the Credit by Examination process have been developed to facilitate smooth progression for Respiratory Therapy students:

1. Students follow the procedure for credit by examination according to University guidelines as well as follow the program of study for Respiratory Therapy to avoid problems with faulty sequencing of courses, omissions or duplications in completing the program of study.
2. Students will meet with the instructor of the course to discuss the requirements and receive detailed instructions with information sheets to assist in completion of the Credit by Examination process.
3. If a student decides to do credit by examination, an examination fee is charged. This fee is charged to any student seeking examinations in lieu of enrollment in specific courses. Once permission has been granted from the faculty and
chairperson, a fee of $5 per course credit hour, plus the tuition, is charged. The examination cannot be administered prior to payment of the fee and tuition.

4. Clinical courses may not be taken by examination.

F. 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 student may repeat a Respiratory Therapy course only once.
- A course from which a student withdraws is considered an attempt, and may be repeated only one time.
- Only one Respiratory Therapy course may be repeated during a student's progression through the Respiratory Therapy program of study.
- A grade of D or F on any two respiratory therapy courses will result in automatic permanent dismissal from the program.

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 UDCCC and students find it necessary to take courses at another academic institution, they must first obtain written permission from the Program Director, the Division Chairperson, 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” of 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 then one (1) respiratory therapy course may be repeated in the above fashion. Thus, any subsequent grade below a “C” in a second respiratory course will automatically result in dismissal from the program.
Respiratory Therapy - Handbook

- Professional conduct that does not adhere to the AARC Statement of Ethics and Professional Conduct, or the Code of Conduct for UDCCC Respiratory Therapy students is grounds for immediate dismissal from the program.
- Any verified instance of cheating or academic dishonesty.
- Any incident where continuing in the program would be detrimental to the health of the student or to others.
- 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.

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, she/he is not dismissed from the Community College and is 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, 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. 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.

Demonstration of competency shall require direct patient contact and thus, shall require repeating Principles and Practice of Respiratory Therapy II (20181-172) 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.

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 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 passes these courses.

G. REQUIREMENTS FOR GRADUATION

Degree Requirements
   a. The Associate Degree requires 72 semester hours, the final 15 of which must be in residence at the Community College.
   b. Completion of appropriate Community College-Wide requirements.
   c. Completion of all courses identified on the program of study, within four 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/Community College Catalog)

Major (Respiratory 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 National Board for Respiratory Care (NBRC), Written Registry Self-Assessment Exit Examinations in order to graduate from the program.

H. ACADEMIC INTEGRITY

Honesty
Students at UDCCC 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. The actions prescribed whenever a violation of academic integrity is noted begin with the instructor’s written report documenting the academic offense. If it is determined that a student has violated the Academic Integrity Policy, the student may be suspended from the Community College/University (See 2008-2011 University Catalog, p. 19).
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 UDCCC 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.
- Fighting at a clinic site or on university premises.
- Being intoxicated or under the influence of illegal drugs while on clinical assignment or on 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 serving as the professional conduct standard expected of Respiratory Therapy students and practitioners.

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.

I. **PROGRAM OF STUDY**

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

**Associate of Applied Sciences Degree - Respiratory Therapy**

**Program of Study**

**PREREQUISITES**

<table>
<thead>
<tr>
<th>Course Number</th>
<th>Course Name</th>
<th>Credits</th>
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<tbody>
<tr>
<td>MATH-101</td>
<td>General College Math I</td>
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<tr>
<td>ENGL-112</td>
<td>English Composition I</td>
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<tr>
<td>RSPT-170</td>
<td>Introduction to Health Sciences</td>
<td>2</td>
</tr>
<tr>
<td>BIOL-111</td>
<td>Anatomy and Physiology I – Lecture</td>
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<tr>
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<td>Anatomy and Physiology I – Laboratory</td>
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<tr>
<td>BIOL-112</td>
<td>Anatomy and Physiology II – Lecture</td>
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<td>BIOL-114</td>
<td>Anatomy and Physiology II – Laboratory</td>
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<td>INDT -101</td>
<td>First Year Seminar</td>
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**FIRST YEAR–FALL SEMESTER** (This begins the professional phase of the program)

<table>
<thead>
<tr>
<th>Course Number</th>
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<tr>
<td>RSPT-171</td>
<td>Principles and Practice of Respiratory Therapy I</td>
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<tr>
<td>RSPT-173</td>
<td>Ventilation and Gas Exchange Physiology</td>
<td>2</td>
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<tr>
<td>CHEM-105</td>
<td>Fundamentals of Chemistry – Lecture</td>
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<td>Fundamentals of Chemistry – Lab</td>
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<td>General College Math II (May be taken anytime )</td>
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**FIRST YEAR - SPRING SEMESTER**

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<th>Course Name</th>
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<tr>
<td>RSPT-172</td>
<td>Principles and Practice of Respiratory Therapy II</td>
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</tr>
<tr>
<td>RSPT-274</td>
<td>Acid-Base and Hemodynamic Physiology</td>
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<tr>
<td>RSPT-271</td>
<td>Respiratory Therapy Pharmacology</td>
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J. RESPIRATORY THERAPY PROGRAM COURSE DESCRIPTIONS

FIRST YEAR – FALL COURSES

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.

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
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, Co-requisites: RSPT 170, RSPT 171, CHEM 105/106, or approval of instructor.

FIRST YEAR – SPRING COURSES

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

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

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

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

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 – FALL COURSES

270C 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.

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.

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.

280C Respiratory Care 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 the NBRC-CRT Self-Assessment Examination 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.

SECOND YEAR – SPRING COURSES

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.

278C Respiratory Therapy Clinical Preceptorship
3 Credits (16 hours clinical)
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.

290C Respiratory Care 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 the NBRC Written RRT Examination 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 University of the District of Columbia Community College 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)
8. Meals, parking facilities as determined by the specific clinical 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)
12. Course Computer Modules ($200)

B. HEALTH REQUIREMENTS
Health clearances are required for all students before being assigned to the clinical area each year. This screening is available through the 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 twenty-six (26) are required to show proof of immunizations against measles, mumps, rubella, tetanus, and diphtheria. Students under the age of nineteen (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 274-5030. Refer to the UHS Health Handbook 2003-2004 for detailed descriptions of services and hours of operation.

2. **Accidents and Illness Including Communicable Diseases**

When a student is injured or becomes ill while assigned to a clinical education site, he/she will report immediately to his/her UDCCC Respiratory Therapy instructor, be seen by an emergency department physician, and report to the UDCCC Respiratory Therapy instructor the outcome of the emergency room visit, including the date the student may return to normal clinical training. Should a student be diagnosed as having an illness that requires extended absence or any communicable disease he/she must report such health alterations/diseases to the UDCCC Respiratory Therapy instructor. The UDCCC Respiratory Therapy instructor will then refer the student to the UDCCC Health Services (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 a student is unable to attend a clinical assignment because he/she is 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 the UDC/UDCCC 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)

Clinical Uniforms
Each student will arrive at the clinical site wearing the black scrub shirt with embroidered UDCCC logo, black pants, white socks and polished white shoes or plain white tennis shoes. Attached to the uniform shirt is a patching displaying the school name and logo. The patch shall be burgundy and gold with black letters and display the words "University of the District of Columbia Community College Respiratory Therapy Student." This 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. Student ID and school patch must be worn on the uniform at all times. 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 of 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, students are expected to wear laboratory coats and/or modest street clothes (dress, skirt and blouse, shirt and slacks, or suit).
6. A white or navy blue sweater may be worn, but must be removed when providing direct patient care. A plain white long sleeve turtle neck 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. Polished shoes are required.

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 (Lecture) Attendance:
As a general rule, students missing thirty percent (30%) of scheduled lectures or classroom activities will be advised to withdraw from the course. Policies for individual courses are developed and enforced by the particular professor.
Laboratory Attendance:
One purpose of the laboratory training is to provide experience that correlates with what the student might expect when in clinical training at the hospital. Students missing laboratory practical exercises are responsible for completion of lab objectives on their own time and, it is at the instructor's discretion to accept demonstration of the late laboratory exercise.

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.

Punctuality for Class and Laboratory:
The student should 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 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 are expected to 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. Excessive tardiness (3 or more) will result in a 3% deduction from your final grade.

Clinical Attendance and Punctuality:
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 work place would result in employment termination.

UNEXCUSED absences will not be tolerated. One unexcused absence will result in a five (5%) percent reduction from the final grade for the course. Any unexcused absences beyond the first will result in additional grade reductions of 5% for each. Students will be advised to withdraw from the course, for more than one unexcused absence. An excuse absence includes illness and/or death in the immediate family. Documentation is required. Excused absences due to other extenuating circumstances will be dealt with on an individual basis at the discretion of the instructor and the Director of Clinical Education.

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.

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 outburst 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 defined by the law.

**Professional Behavior:** All students will refrain from unprofessional behavior such as hostility and 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 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.

**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.

**Professional Responsibilities:** Students are expected to function as accountable, responsible and self-directed individuals.

**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 twenty (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 defined by the 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. 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. 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 a 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.

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 $60) before exiting the program. A passing grade on the exam is a graduation requirement.

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

Student Bill of Rights

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.

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.

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.

**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**

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

The following University grade appeals process was developed by the University Academic Legislative Council (UALC) and is strictly limited to the consideration of the student academic performance:

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 Department/Division Chair.

4. The appeals must identify the basis of the dispute, and include all supporting documentation.

5. Upon receipt of the written appeal, the Chair will hold within 15 working days individual and or joint meetings with the Faculty member and the student.

6. If the Chair is unable to resolve the dispute, the Chair will create a departmental committee to investigate the appeal, by appointing three Faculty Members from...
the academic discipline represented by the course in question. The course Professor will be requested to submit in writing to the committee an explanation of the process by which the disputed grade was awarded.

7. After investigating the case, the committee will forward its recommendation to the Chair within 15 working days. The Chair will then inform both parties of the dispute of his/her decision.

8. If the Chair's decision is not accepted by either party, the student or the course Professor may choose to appeal in writing within (10) working days from receiving the decision, to the School Dean, with a copy to the Department Chair. The Chair will then forward the case to the Dean's Office.

9. The Dean will submit the case to a College wide Academic appeals Committee for consideration and recommendation. This Committee which involves the Faculty and representatives from various departments, as well as student representation, 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 his/her decision.

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.

C. STUDENT ORGANIZATIONS

1. **University of the District of Columbia Student Government Association**

The student Government Association 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 association, the University of the District of Columbia students represent themselves in planning and policy formulation in all areas that affect student life. The Student Government Association (SGA) is responsible for encouraging academic excellence and acts as a liaison between the student body, faculty, and academic administration. The Student Government Association is responsible for the following activities:

2. **Respiratory Therapy Club**

The University of the District of Columbia Community College Respiratory Therapy Club encourages student participation.

a. To provide opportunities for student participation in the development, maintenance, and evaluation of the total Respiratory Therapy Program of the University of the District of Columbia.

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 the 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.

- 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 AND 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

The Division of Nursing, Allied Health, Life and Physical Sciences is happy to present in association with the funds maintained by the UDC Foundations 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 in Building 53, Room 904.

Annye C. Buck Scholarship:
The Annye C. Buck Scholarship is providing 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 Department of Nursing and Allied Health or the Department of Biological & Environmental Sciences.
- Students must have completed at least 24 credits hour at UDC/UDCCC
- Applicants must maintain a G.P.A of at least 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 Department of Health Sciences.

Note: The committee shall consist of faculty representatives from each program area of the Department of Nursing and Allied Health or the Department of Biological & Environmental 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 (ACRF) which are awarded each year at the American Association For Respiratory Care (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 upon entering the final semester in the program.

V. RESOURCES

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 **Disability Resource Center**, located in Bldg. 44, Suite A-39, 202-274-6173, 202-274-6173 (CC campus, Bld 53) 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.

Students are expected and encouraged to utilize the resources of the Disability Resource Center (DRC) to the degree they determine necessary. The DRC provides individualized educational plans for students with documented disability (physical, cognitive or emotional) who requires academic accommodations. Students who need accommodation should contact the Disability Resource Center 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 2006-2008 UDC Catalog, pp. 23-27 for details on resources.

**A. 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. Counseling Services Office and the Peer Mentoring Program provide personal, educational and career guidance.

As an enrolled UDCCC 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 in Bldg 53, Suite 214, 216
Phone: 202/274-6173, 202/274-6183

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.

**B. FINANCIAL AID**

The Financial Aid Office (Building 39, Room 101, Telephone 202.274.5060) 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.

C. EMPLOYMENT
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 Department 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 nursing students due to the intensive nature of the nursing curriculum.

D. LEARNING RESOURCES CENTER (LIBRARY AND MEDIA)
The University of the District of Columbia 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 resources effectively.

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:
   ■ The current faculty of the Respiratory Therapy Program
   ■ 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; physicians, and alumni.
   ■ Respiratory Therapy student leader.

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 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 a Disability 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: "Skill/s 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.

<table>
<thead>
<tr>
<th>FUNCTIONAL ABILITY</th>
<th>ACTIVITIES/SKILLS</th>
<th>SKILL RELATED TO:</th>
</tr>
</thead>
</table>
| 1. Gross Motor Ability | • 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 | • 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 | 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 |
<table>
<thead>
<tr>
<th>Physical Requirements</th>
<th>Examples</th>
</tr>
</thead>
</table>
| Objects with fingers | • Twist knobs with hands  
• Must have adequate manual dexterity as to be capable of maintaining sterility |
| Physical Endurance    | • Stand at patient’s side during procedures  
• Sustain repetitive movements  
• Maintain physical tolerance |
| Physical Strength      | • 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)  
• Able to Push/roll 60 pounds  
• Move heavy object weighing from 10-50 pounds  
• Use upper body strength |
| Mobility               | • Twist  
• Bend  
• Stoop/squat  
• Walk  
• Move quickly  
• Climb ladders/stools/stairs |
| Hearing               | • 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 |
| Visual                | • Visually assess patients  
• See object up to 20 inches away  
• See object more than 20 feet away  
• Use peripheral vision  
• Distinguish color |
| Endurance             | 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. |
| Strength              | Assist patient 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 department to patient room. Move other equipment. Lift equipment from bed height to shelf height above chest level. |
| Mobility              | 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. |
| Hearing               | 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. |
| Visual                | Read patient chart. Visually assess patient color to assess for hypoxia. Read settings and displays on monitors, ventilators and other equipment. Visually assess |
| 8. Tactile | • Distinguish color intensity
• See emergency lights/lamps | patients for changes.
|           | • Feel vibrations
• Detect Temperature
• Feel the differences in surface characteristics
• Feel the differences in sizes, shapes | Assess patient by feeling pulse, temperature, tactile fremetis, edema, subcutaneous emphysema |

| 9. Smell | • 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) |