

**El Paso Community College**  
**Syllabus**  
**Part II**  
**Official Course Description**

<b>SUBJECT AREA</b>	<u>Respiratory Care Technology</u>						
<b>COURSE RUBRIC AND NUMBER</b>	<u>RSPT 2260</u>						
<b>COURSE TITLE</b>	<u>Clinical - Respiratory Care Therapy/Therapist II</u>						
<b>COURSE CREDIT HOURS</b>	<table style="margin-left: auto; margin-right: auto; border-collapse: collapse;"> <tr> <td style="text-align: center; padding: 0 10px;"><b>2</b></td> <td style="text-align: center; padding: 0 10px;"><b>0</b></td> <td style="text-align: center; padding: 0 10px;"><b>12</b></td> </tr> <tr> <td style="text-align: center; padding: 0 10px;"><b>Credits</b></td> <td style="text-align: center; padding: 0 10px;"><b>Lec</b></td> <td style="text-align: center; padding: 0 10px;"><b>Lab</b></td> </tr> </table>	<b>2</b>	<b>0</b>	<b>12</b>	<b>Credits</b>	<b>Lec</b>	<b>Lab</b>
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<b>Credits</b>	<b>Lec</b>	<b>Lab</b>					

**I. Catalog Description**

Provides a health-related work-based learning experience that enables the student to apply specialized occupational theory, skills, and concepts. Direct supervision is provided by the clinical professional. A grade of "C" or better is required in this course to take the next course. **Prerequisite: RSPT 2261. Corequisite: RSPT 2358. (0:12). Professional Practice Insurance required.**

**II. Course Objectives**

This section is designed as an adjunct mechanism to help prepare you for proficiency in your clinical work. Students should review these objectives and correlate them with their didactic material for understanding. It is important that you do independent reading and practice clinical procedures in order to attain knowledge and to become clinically proficient in the listed areas.

During the course of this clinical, the student will be able to:

- A. Perform no less than four (4) to no more than six (6) complete cardio-pulmonary patient assessments on general floor care patients, using established Respiratory Care Program patient assessment criteria. At least two patient assessment must be that of a geriatric patient.
- B. Depending on the number of hospital rotations, develop the ability to complete sixteen to twenty (16 to 20) Respiratory Care procedures as scheduled by the clinical instructor..
- C. Apply the theory of his/her occupation as a whole while developing clinical skills.
- D. Identify problems or changes in standards and devise practical solutions or modifications.
- E. Complete and explain important concepts as stated in the objectives.
- F. Interact with patients and visitors in a professional manner.
- G. Completion of required number of clinical hours (24 per week). Five percent of the total clinical hours per semester may be substituted for meeting the objectives by attending outside activities that would increase or enhance the degree of desired progress.

**During the hands-on portion of clinical, the student will be able to complete the following clinical objectives with 100% accuracy and minimal assistance from the clinical instructors:**

- A. Describe the importance of disinfections and sterilization procedures.
- B. List the advantages and disadvantages of the various types of disinfections and sterilization procedures.
- C. Describe the methods of disinfecting or sterilizing respiratory therapy equipment by means of:
  - 1. Chemical disinfections
  - 2. Pasteurization
  - 3. Steam autoclave sterilization
  - 4. Ethylene oxide sterilization

- D. List the indications for and hazards of suctioning.
- E. Perform tracheal suctioning (N-T, tracheal, open or closed system) procedure without assistance.
- F. Perform the procedures required for routine care of artificial airways used in tracheostomy patients.
- G. Perform four (4) pulse oximetry (setup or by spot checks) for measurements with minimal assistance.
- H. Perform two (2) initial oxygen tent or pup tent setups and four (4) checks according to the protocols prescribed for a patient.
- I. List and explain the conditions that indicate the need for aerosol administration
- J. List and describe the potential hazards associated with aerosol administration.
- K. Assemble and/or change four (4) equipment setups necessary for the delivery of aerosol therapy.
- L. Administer four (4) pediatric aerosol medications according to the procedure prescribed for a patient (hand-held, USN, mask tx's, or blow-by).
- M. Administer two (2) MDI's according to the procedure prescribed for a patient.
- N. Perform the steps involved in preparation, implementation, and termination of IPPB treatments.
- O. List and explain the conditions that indicate the use of IPPB therapy.
- P. Administer IPPB therapy to a patient according to the procedure prescribed.
- Q. Describe the physiologic principles underlying lung expansion therapy.
- R. Describe the indication and contraindication for each lung expansion modality. Identify hazards and complications associated with the various modes of lung expansion therapy.
- S. Compare and contrast the key functional components of lung expansion equipment.
- T. Outline the primary responsibilities of the RCP in planning, implementing, and evaluating lung expansion therapy.
- U. Describe the importance of bronchial hygiene.
- V. Perform chest percussion and postural drainage procedure as prescribed for a patient. PEP therapy may be substituted for PD and P.
- W. Discuss the selection and indications for other bronchial hygiene therapy, including:
  1. Directed coughing and related expulsion techniques.
  2. Positive expiratory pressure (PEP, flutter valve, acapella) therapy.
  3. Vest therapy.
- X. Cite the general goals, specific indications, and contraindications for chest physical therapy.
- Y. Describe the importance of initial and ongoing patient assessment of the planning and implementation of chest physical therapy.
- Z. Differentiate among the underlying principles, relative efficacy, and methods of application of the following modes of chest physical therapy:
  1. Therapeutic positioning.
  2. Chest percussion and vibration.
  3. Cough and related expulsion techniques, i.e. flutter valve, PEP, acapella.
  4. Breathing retraining.
  5. Conditioning exercises.
- AA. Identify the major complications and adverse effects of chest physical therapy, including their treatment implications.
- BB. Demonstrate proper technique of chest percussion/vibration using pneumatic and/or electric percussors/vibrators on various patients, including proper body mechanics.
- CC. Describe the indications for the collection of an arterial blood gas sample.
- DD. Identify the hazards and possible complications of an arterial stick.
- EE. Perform two (2) to six (6) punctures of arterial samples with minimal assistance.
- FF. Discuss the importance of blood gas analyzer maintenance.
- GG. Perform one (1) spirometry tests in a PFT lab or at bedside with minimal assistance.
- HH. Describe how to perform cardiopulmonary resuscitation (CPR) for adults, children, and infants.
- II. Describe how to evaluate the effectiveness of CPR.
- JJ. Perform two (2) cardiac compressions, and/or two manual bagging on patients having a life-threatening event.
- KK. Describe the physiologic effects of hyperbaric oxygen therapy.
- LL. Perform one (1) initial adult ventilator setup using the following guidelines:

1. Verify the physician's orders.
2. Select appropriate equipment.
3. Maintain medical asepsis.
4. Assemble and test equipment.
5. Adjust ventilator controls to specific physician orders.
6. Monitor the vital signs and assess the cardiopulmonary status.

**III. THECB Learning Outcomes (WECM)**

As outlined in the learning plan, apply the theory, concepts, and skills involving specialized materials, tools, equipment, procedures, regulations, laws, and interactions within and among political, economic, environmental, social, and legal systems associated with the occupation and the business/industry and will demonstrate legal and ethical behavior, safety practices, interpersonal and teamwork skills, and appropriate written and verbal communication skills using the terminology of the occupation and the business/industry.

**IV. Evaluation**

Students will be evaluated on their performance of procedures on a daily basis. They will also be evaluated by clinical rotation by the assigned faculty member at each hospital. Students will be evaluated in the areas of attendance, appearance, timeliness, communication skills, comprehension, written assignments, clinical proficiency, and professionalism.

Grade Distribution

A.	Completion of clinical objectives.	35%
B.	Clinical rotation evaluations by clinical instructor at the end of each hospital rotation.	35%
C.	Patient Assessments.	15%
D.	Comprehensive performance objectives (16 to 20) evaluation	<u>15%</u>
		100%

Grading Scale

- 90 - 100 = A
- 80 - 89 = B
- 75 - 79 = C
- Below 75 = F or I
- Grades averaging 74.5 will be rounded off to the next whole number.

NOTE: If a situation arises which faculty or clinical instructors feel is detrimental to the development of a student, a written counseling form will be completed. The first incident may result in a deduction of 2 - 5 points from the final semester clinical education grade.

**V. Disability Statement (American with/Disabilities Act [ADA])**

EPCC offers a variety of services to persons with documented sensory, mental, physical, or temporary disabling conditions to promote success in classes. If you have a disability and believe you may need services, you are encouraged to contact the Center for Students with Disabilities to discuss your needs with a counselor. All discussions and documentation are kept confidential. Offices located: VV Rm C-112 (831-2426); TM Rm 1400 (831-5808); RG Rm B-201 (831-4198); NWC Rm M-54 (831-8815); and MDP Rm A-125 (831-7024).

**VI. 6 Drop Rule**

Students who began attending Texas public institutions of higher education for the first time during the Fall 2007 semester or later are subject to a 6-Drop limit for all undergraduate classes. Developmental, ESL, Dual Credit and Early College High School classes are exempt from this rule. All students should consult with their instructor before dropping a class. Academic assistance is available. Students are encouraged to see Counseling Services if dropping because exemptions may apply. Refer to the EPCC catalog and website for additional information.