El Paso Community College

Respiratory Care Manual

Procedures & Guidelines

REVISED FOR 2026-2027

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El Paso Community College
Respiratory Care Technology Program

Guideline and Procedures

On behalf of the respiratory care faculty at El Paso Community College, we welcome you to the respiratory care technology program. We are pleased that you have selected EPCC for your respiratory care education. Our health care program had a long tradition of providing quality respiratory care education. After successful completion of the respiratory care technology program, you will be awarded an Associate in Applied Science (AAS) degree. Upon graduation from El Paso Community College, you will be eligible to take the national board for respiratory care (NBRC) exam.

The respiratory care technology program is accredited by the committee on accreditation for respiratory care (CoARC), www.coarc.com. El Paso Community College respiratory care graduates pass the NBRC exams at or above the state average. Our graduates are well-prepared to enter the workforce and are recognized as excellent and safe practitioners by the community and employers. Graduates' express appreciation for quality education and an awarding career with diverse employment opportunities.

The student manual is intended to provide you with information and guidance regarding the respiratory care program curriculum and procedures. Please familiarize yourself with it and keep it available as a reference throughout the year. Students are advised to keep the manual, course guides, and course syllabi in a permanent file for future reference when continuing their education or moving to another licensure jurisdiction. If you have additional questions or need clarification on any topic pertaining to your role as a respiratory care student at EPCC, please contact the program instructional coordinator, clinical coordinator, or the Dean of Health Careers and Technical Education, Math & Science. In addition to the student manual, make sure to review important and useful resources that can be found on the EPCC online catalog. https://www.epcc.edu/Academics/Catalog

It is the student's responsibility to see that these requirements are met, and failure to do so may subject the student to dismissal from the program, or a delay in completing the program. Again, welcome and thank you for choosing El Paso Community College respiratory care program for your education.

Program Contact Information

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CTE, Math & Science
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El Paso Community College
Respiratory Care Technology Program

Coordinators and Full-Time Faculty

On behalf of the Respiratory Care Faculty and the Health Careers and Technical Education, Math & Science Division, we very sincerely offer this manual to you, our Respiratory Care student. All contents in this manual will serve as your guidelines for final entry into the program and will be discussed during this new student orientation. At the end of the orientation session, you (the student) will sign the acknowledgement page, and fill out the student information page found at the end of this manual and return the signed page to the Program Director or designee.

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Any part of this Manual may be changed or updated by the Program Director and/or Clinical Coordinator without notice to enhance the achievement of the Program.

Accreditation

The respiratory care technology program of El Paso Community College is currently fully accredited by the Commission on Accreditation for Respiratory Care (CoARC). Initial curriculum as well as updates to the EPCC respiratory care technology program are/have been approved by the Texas Higher Education Coordination Board (THECB).

The commission on Accreditation for Respiratory Care (CoARC) is currently in the process of revising the 2025 Accreditation Standards for the profession of respiratory care. This comprehensive review and revision process occurs as an integral part of the CoARC's ongoing mission to serve the public by promoting high quality respiratory care education through accreditation services.

The mission of the Commission on Accreditation for Respiratory Care education is through accreditation services. The purpose for their guidelines is to provide direction and detailed information for accreditation of educational programs in respiratory care and its associated program options.

The CoARC accredits entry into respiratory care professional practice degree programs at the associate, baccalaureate, and master's degree level in the United States and internationally. The CoARC also accredits professional respiratory care degree programs offering certificates in polysomography.

The CoARC and its collaborating organizations cooperate to establish, maintain, and promote educational standards of quality to prepare individuals for respiratory care practice, and to provide recognition for degree-granting, postsecondary educational programs that meet the minimum requirements outlined in the accreditation standards for the profession of respiratory care (the "standards"). The accreditation process is initiated every 10 years to maintain the criteria for sponsorship as identified in the standards.

Accreditation decisions are based on CoARC's review of information contained in the application and self-study report, the report of site visit evaluation teams, the annual report, and any added requested reports or documents submitted. Programs that have successfully undergone the review process are granted accreditation status by the CoARC, which provides public recognition of achievement. The CoARC delegates to its commissioners the responsibility for assuring that accreditation actions follow fair procedures and follow the accreditation standards. CoARC has final decision-making authority for all accreditation actions.

Manual Information

AY 2026-2027

Purpose

This manual is intended to provide you with information and guidance about the respiratory care program curriculum and procedures. Please familiarize yourself with it and keep it available as a reference while in the program. No rule or statement is intended to discriminate.

Student Responsibilities

Each student is responsible to review the information presented in this manual and following the college and program procedures. **Failure to read this information will not be considered an excuse for non-compliance.** This manual builds upon the college information found on the EPCC online catalog. The EPCC college catalog can be accessed on the college home page website (www. epcc.edu). Make sure to use the online catalog important and useful resources.

Students are recommended to keep the manual, course guides, and course syllabi in a permanent file for future reference when continuing their education or moving to another licensure jurisdiction.

El Paso Community College Online Catalog:

Prior to the respiratory care program entrance, you are strongly encouraged to review the following on the online college catalog:

- Drug-Free for EPCC Students
- Honors Program
- Directory Information
- Financial aid
- Student Services and Resources
- Equal Opportunity Statement
- Attendance and Course Pursuit
- Weapons on Campus
- Academic Counseling Services
- Student Rights and Responsibilities
- Students Conduct and Discipline

Mission, Vision, and Ethical Practice

RSPT Mission Statement

EPCC Respiratory Care Technology Program is student-driven and community-focused to provide educational opportunities and support services. The program prepares students to expand their career paths by helping them to become ethical and competent individuals to meet the challenges of the national board examinations and, thereby, becoming respiratory care practitioners.
The respiratory care technology program will continually assess the need for training and will initiate and improve program curricula and experiences to help meet the changing needs of the student as well as the needs of the community.
Program academic policies apply equally to students and faculty regardless of clinical location where instruction occurs.

RSPT Vision Statement

EPCC Respiratory care technology program vision statement is as follows:

- To value service by dedication in meeting the ever-changing educational needs of our students.
- To respect recognition of individual dignity by promoting trust and cooperation.
- An innovation that has an open environment for climate fostering collaboration, improvement, and the advancement of ideas.
- Stewardship within the program manages sustaining resources for the common good.
- Integrity with procedures, practices, and actions reflecting responsible behavior.

RSPT Ethical Practice Statement

El Paso Community College respiratory care technology program is accredited by CoARC. The standards and curriculum of the respiratory care program are formulated and implemented to promote excellence in health care. The following practices shall be adhered to by EPCC respiratory care technology program in recruitment activities; objectivity and the presentation of accurate information shall be the goal.

Philosophy and Goals

RSPT Philosophy and Goals

The respiratory care faculty believe, support, and function according to the overall stated philosophy of the El Paso Community College. The El Paso County Community College District does not discriminate based on race, color, national origin, religion, gender, age, disability, veteran status, sexual orientation, or gender identity. The program curriculum integrates and

correlates theory practice with educational experiences. Treating each course as a part of the given whole is progress toward completion of the respiratory care technology program.

To prepare graduates who demonstrated competence in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains of respiratory care practice as registered respiratory therapists (RRTs).

- To value access and success for all respiratory care students by providing an educational environment by teaching excellence and innovation techniques.
- To value partnership and collaboration with existing affiliated agencies and strive to establish new affiliations that are mutually beneficial for students.
- To engage in ongoing planning and assessment aimed at the continued excellence of education and training of respiratory care students.
- Provide a standard of excellence in the education of students seeking a career in respiratory care. Provide effective, innovative and alternative instructional methodologies in the implementation of a quality educational program.
- Coordinate an effective system for the recruitment of students into the respiratory care program.
- Continue efforts towards student retention, program completion, and student skill development.
- Provide guidance and promote effective administration, management and support services for the respiratory program, students, and faculty.
- Provide a laboratory setting that meets federal, state, community, and accreditation safety standards.
- Provide medical equipment to meet state, community, and accreditation requirements that will contribute to the development of competent graduates.
- Maintain our curriculum to meet the changing requirements of the coordinating board, workforce education course manual (WECM), the commission for accreditation of respiratory care programs, national board for respiratory care exam matrices, the American association for respiratory care and the community Dacum analysis.
- Provide clinical faculty that are competent in the use of clinical equipment, medications, and procedures in the hospitals' general floors and critical care areas.
- To support an environment that promotes collaboration and a culture that is open, inquisitive, positive, and focused on success in educating respiratory care students.

Codes of Ethics

The Respiratory Care Practitioner, in the conduct of their professional activities, shall be bound by the following ethical and professional principles.
Respiratory Care Practitioners shall:

- Demonstrate behavior that reflects, supports objectivity, and fosters trust in the profession and 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 treat, including the right to informed consent and/or 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.
- Follow state or federal laws that 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 the positive evolution of the profession and healthcare in general through. improvement of the access, efficacy, and cost of patient care.
Refrain from indiscriminate and unnecessary use of resources, both economic and natural, in their practice.

Program Learning Outcomes

RSPT Outcomes

Upon completion of the EPCC respiratory care program, the graduate will be able to perform the following competencies either in a hospital or other health care agency, as directed by a physician qualified to order respiratory care procedures.

- Providing patient care is essential to respiratory care procedures.
- Interact with the public and health care providers utilizing verbal and non-verbal communication skills.
- Maintain all documentation needed within a respiratory care department.
- Participate in those quality improvement activities required of a respiratory care department.

- Apply patient confidentiality and medical ethics education to daily performance.

Exercise discretion and judgment in the performance of the following respiratory care procedures:

- Gas pressure and flow regulation.
- Oxygen therapy.
- Aerosol generators (SVN).
- Incentive spirometry.
- Aerosol medication delivery (HHN and MDI).
- Calculation of drug dosages.
- Auscultation.
- Chest physiotherapy.
- Intra-pulmonary percussion ventilation (IPV).
- Vital signs.
- Pulse oximetry.
- Hand hygiene.
- Intermittent positive pressure breathing (IPPB).
- CPAP/BIPAP initiation.
- Manual ventilation.
- Artificial airway insertion.
- Suctioning.
- Extubation.
- Tracheostomy care.
- Ventilator initiation.
- Arterial puncture.
- Electrocardiogram.
- Neonatal patient ventilator system care.
- Pronning

Program Requirements

Background checks

To ensure that health care facilities are following their accreditation guidelines, all students enrolled in specified health-related education courses and programs are required to undergo a background clearance. The administration of El Paso Community College conducts criminal background checks. If the student has been convicted of a crime or has a record of abuse, the Dean of Health Career and Technical Education, Math & Science will perform an evaluation to determine whether the crime or founded abuse warrants prohibition of participation in a clinical education experience. Criminal convictions or documented history of abuse may delay or prevent the student from taking part in clinical education experience. Students unable to participate in clinical education will be unable to complete the respiratory care program.

Clinical participation

1. Clinical I – Respiratory care therapy/therapist / RSPT 1360
2. Clinical II – Respiratory care therapy/therapist / RSPT 2362
3. Clinical III – Respiratory care therapy/therapist / RSPT 2361
4. Clinical IV – Respiratory care therapy/therapist / RSPT 2461

Successful completion of these clinical courses requires the passing of the clinical components as well as performing well in all laboratory exercises, and didactic courses. The students will have access to course material and laboratory equipment to include supplies. The student will be evaluated at each clinical site, laboratory exercises and course work. Students who do not obtain pre-program requirements will be prohibited from admission or enrollment in specified programs/courses for a period of one-year.

NOTE: Students who withdraw from health-related coursework for one semester or longer must repeat background checks testing upon re-enrolling in health-related courses/programs. Medical health insurance is mandatory in order to take part in any of the clinical sites.

NOTE: Students are responsible for all costs associated with background checks, including any required repeat checks.
To initiate your background clearance, go to www.elpasoex.com (American Databank) and follow the process listed on the web page. Make sure you select only the option(s) that you need at that time; it will affect your cost. Your clearance will be sent directly to the Dean of your program at the college. Background checks the following items:

1. Social Security Number Verification
2. Criminal Search (7 years or up to 5 criminal searches)
3. Violent Sexual Offender and Predator Registry Search
4. OIG List of Excluded Individuals/Entities
5. GSA List of Parties Excluded from Federal Programs
6. US Treasury, Office of Foreign Assets Control (OPAC), List of Specially Designated Nationals (SDN)
7. State Exclusion List (http://www.hhsc.state.tx.us/OIE/exclusionlist/exclusion.asp)

Guideline and Procedure for Drug Screening

EPCC respiratory care program associates with various health care providers, and the purpose for drug screening is to meet the clinical affiliate's standards of providing a safe, efficient, productive drug free and alcohol-free environment. The procedure seeks to balance respect for individual privacy with the need for the respiratory care program to meet the clinical affiliate requirement of a safe, productive, drug and alcohol-free workplace.

Definitions:

A. Abuse is any use of alcohol or a legal drug, which impairs individuals' faculties (other than use of a legal drug for proper purpose in accordance with applicable medical directions).
B. Alcohol is ethanol, isopropanol, or methanol.
C. Clinical affiliate is the health care organizations that have an affiliation agreement with the EPCC respiratory care program to provide experiences with or related to patients/clients for the application and reinforcement of theoretical program content.
D. Clinical rotation is the scheduled experience that provides direct learning situations in which students directly care for patients/clients with a relevant setting, under the supervision of a qualified instructor.
E. Controlled substances are any drug or chemical substance whose possession and uses are regulated.
F. Positive results mean a confirmed positive test by the drug-testing laboratory that also has reviewed and certified as positive by the IOG of America Data Bank and the Dean of Health Career and Technical Education, Math & Science.
G. Prescription medication is any drug or medication lawfully prescribed by a physician for an individual.
H. Program Dean is the administrative person who has the responsibility for the administration of the respiratory care program.

Students must present themselves to the clinical affiliates free from the use of all illegal drugs, free from the use and effects of alcohol, and aware of the effects of prescription medication. Students enrolled in respiratory care program at EPCC are required to submit to drug screens. This procedure supplements, but doesn't supplant, the general student conduct code of the college, and any requirements of a clinical affiliate. Therefore, students in respiratory care program must comply with any and all guidelines and procedures created and implemented by the college and any clinical affiliate at which the student will be completing his or her clinical rotations.

Completing Substance Abuse Test:

A. Go to the vendor's website at "www.elpasoex.com" and complete the on-line application for substance abuse testing.
B. Once American Databank has received your online background check order, they will email you an electronic authorization form and an approved LabCorp or Quest Laboratories location (please note it may take 24-48 hours before you will receive the emailed chain of custody form).
C. You will need to print out the authorization form and schedule an appointment with a LabCorp or Quest Laboratories location closest to you.
D. Make sure you bring your printed authorization form and photo identification to the appointment.
E. If you have other questions, please contact American Databank at **1-800-200-0853**.

- All students and applicants who wish to be considered for acceptance into the respiratory care program and/or hospital must complete the drug screening test.
- The hospitals and health care facilities will not allow any student to work within their institution without a drug screen test. Your college and the hospital have a duty to provide a safe and healthy environment. Mandating a drug screening test requirement is one of the methods they use to ensure this for everyone.

All communication received by the college relevant to student drug and/or alcohol test results are confidential. Students will have access to their test results.

Instructor/student ratio

One instructor will supervise 6 or less students in clinicals in compliance with CoARC guidelines.

Respiratory Care Licensure

Texas Department of State Health Services
Respiratory Care Practitioners Certification Program
Professional licensing and certification unit
1100 West 49th Street
Austin, Texas 78756-3183
Phone #: (512) 834-6632
Fax: (512) 834-6677
E-mail: resp@dshs.state.tx.us
Internet: http://www.dshs.state.tx.us/respiratory

Professional Licensing and Certification Unit - Texas Medical Board (TMB) Transition

Update from Texas Medical Board on transfer of program

IMPORTANT INFORMATION REGARDING SENATE BILL 202

Below is valuable information about Senate Bill 202, which was recently enacted by the 84th Texas Legislature and which is effective on September 1, 2015. The provisions of the bill have significant impact on several licensing programs within the Department of State Health Services (DSHS) Professional Licensing and Certification Unit.

The bill transfers the licensing program to the Texas Medical Board (TMB): respiratory care practitioners. A transition plan is being completed between the two agencies to include a date for transition as soon as practical on or after September 1, 2015. Key dates, which may be subject to change, are:
September 1, 2015 – TMB accepts new complaints on all new license/certification types. For more information on filing a complaint, visit:
http://www.tmb.state.tx.us/page/complaints

October 7, 2015 – TMB will begin accepting all applications for new licenses/certifications.

In the fall, TMB will be issuing formal notifications to all existing licensees and certificate holders with other information on renewals. Current active licenses and certificate holders do not need to do anything at this time regarding these changes. Please continue to renew following your normal schedule.

December 20, 2015 – Last day that licensees will be able to renew using the DSHS renewal systems.

January 4, 2016 – The TMB is tentatively scheduled to begin processing the registration/renewal of existing licenses/permits. Due to this transition, if a current license or permit expires in December, January or February, the license/permit holder will be given until February 28, 2016, to complete their registration (including fingerprint results) with the TMB before the license/permit becomes delinquent. It is important to note that as required by SB 202, the fingerprint background check will have to be completed prior to registration. Information on the fingerprinting process can be found on each occupations page under the Renewals section of the TMB website.

To read, download, or print SB 202, please visit http://www.capitol.state.tx.us/ and enter SB 202 in the search field. To learn more about the Texas Medical Board, please visit www.tmb.state.tx.us.

DSHS will continue to provide updates about this transition as more information becomes available. DSHS is committed to assuring that the daily work in support of all programs continues. Please know that DSHS will work closely with TMB to ensure a successful transition and to minimize the impact on license holders, stakeholders, and the public. Transferred occupational regulatory program from the Department of State Health Services (DSHS) to the Texas Medical Board (TMB). Respiratory Care Practitioners will now be regulated by the TMB and occupation's respective board/advisory committee. Current rules in effect for the occupational program will continue to be in effect until amended by TMB, as directed by S.B. 202.

Following law passed by the 84th Legislature (SB 202), all Respiratory Care Practitioner, applicants who apply after August 31, 2019, will also have to successfully pass the JP exam. This includes applicants applying for a temporary certificate. Temporary certificate holders who have passed the JP exam will not have to pass the exam again when applying for their full certificate.

Students must "be graduates of an accredited respiratory care program in order to apply for respiratory care licensure.

A. Students who are not enrolled in the clinical portion or have not completed the clinical portion of their respiratory care education program within the preceding 12 months may not be employed by a health care facility to provide limited respiratory care services. unless they hold a temporary permit.
B. Students in a non-traditional accredited respiratory care education program may be considered as being engaged in the clinical portion of their education program during its entire duration. For the purposes of this section, non-traditional shall mean those respiratory care education programs recognized as non-traditional education systems by the committee on accreditation for respiratory care or its successor organization.
C. A clinical student who is employed by any clinical affiliate or health care facility, agency or organization to provide limited respiratory care services should provide his or her employer, on a semi-annual basis, verification that he or she is a bona fide student in an approved respiratory care education program. Acceptable verification shall be a letter on program letterhead with the original signature of the program director attesting to the student's bona fide status as an active student in the clinical portion of that program or that the student has completed the clinical portion of the course within the preceding 12 months and is actively pursuing a course of study leading to graduation from the program.
D. Limited respiratory care services provided by an employed respiratory care student must be supervised by a practitioner certified under this Act. Students may not perform invasive procedures related to critical respiratory care.
E. Students who are within 30 days of graduation may apply to the department for a temporary permit in accordance with code 140.206 of this title (relating to application requirements and procedures). A person who holds a temporary permit may perform any and all respiratory care procedures which he or she has been trained to perform.
F. All persons who apply to become certified or permitted as a practitioner, all persons who believe they are exempt under the act and this chapter, and all other persons who are interested in practicing respiratory care need to be aware that:
    a. The penalty provisions under the Texas Occupations Code 604.351 state that a person who commits an offense if the person knowingly violates a provision of the act and commits a class B misdemeanor, and
    b. A person who does not hold a certificate or temporary permit under this chapter as a respiratory care practitioner or whose certificate or permit has been suspended or revoked may not use in connection with the person's practice or employment the words "respiratory care", "respiratory therapist", "respiratory care practitioner", "certified respiratory care practitioner", "or the letters "RCP", or abbreviations, or insignia indicating or implying that the person is a respiratory care practitioner.

Grounds for Denial revocation, or suspension

Texas code states, the board of respiratory care has the express authority to review the felony conviction of an applicant and may deny licensure to any applicant who has been convicted of a felony, which relates to the practice of respiratory care. Any applicant is a person who has filed an application with the board and possesses all the statutory requirements for the granting of a license. People who have not yet completed the pre-requisites for filing an application are not applicants. The board has a statutory authority to review the felony conviction of a respiratory care student who has neither completed the respiratory care program approved by the board nor filed an application with the board.

Application form:

A. Specific information regarding personal data, social security number, birth month and day, place of employment, other state licenses and certifications held, misdemeanor and felony convictions, educational and training background, and work experience.
B. A statement that the applicant has read the Act and these sections and agrees to abide by them.
C. A statement that the applicant, if issued a certificate or temporary permit, shall return the certificate or temporary permit and identification card(s) to the department upon the revocation or suspension of the certificate or temporary permit.
D. A statement that the applicant understands that fees submitted are non-refundable.
E. A statement that the applicant understands that materials submitted become the property of the department and are non-returnable (unless prior arrangements have been made).
F. A statement that the information in the application is truthful and that the applicant understands that providing false information of any kind may result in the voiding of the application and failure to be granted a certificate or permit, or the revocation of a certificate or permit issued.

Title 25, Texas Administrative Code: Subchapter E Chapter 140, and adopted to be effective April 07, 1986, 11TexReg 1461; amended to be effective repeal 123.1-123.16, new 25 TAC, Chapter 140.201, Subchapter E, Health Professions Regulation, Amended to be effective November 04, 2010, new 25 TAC, Chapter 140.217

N95 Fit Testing

Respiratory care students must be fit tested for the N95 respirator mask prior to starting clinical rotations. Proof may be obtained from your regular laboratory competency during the first semester, or you may sign a waiver assuming all associated risks with the use of the N95 respirator mask. After proof of clearance has been proven, you are cleared to perform respiratory care therapy within the clinical setting.

Admission Procedures

AY 2026-2027

Statement of Integrity and Moral Conduct and disclosure of Information

Integrity and moral conduct are crucial to the practice of respiratory care. The behavior and continued commitment of respiratory care students must prove acceptable moral, ethical, and legal values. The student clinician's handbook is linked: https://www.epcc.edu/Academics/Health/Documents/Student_Clinician_Handbook.pdf

Admission

El Paso Community College (EPCC) reserves the right to deny acceptance of any health care program per program requirements. Students in health care programs must follow all procedures created and implemented by EPCC and its clinical affiliates. Students are advised that any and all health care facilities associated with EPCC may deny admission to or remove any student placed in the facility if, at the discretion of the health care facility, the admission of the student or the continued presence of the student would present or continue a risk to the health care facility or any of its patients or employees.

General Information

Applicants for specialized admissions must satisfy minimum criteria to be eligible for ranking. The following is required of all applicants wanting to enroll in the Respiratory Care Technology Program.

- Submit all previous college/university official transcripts (transliteration of all foreign coursework required) prior to ranking.
- Must have a high school diploma or GED. Submit social transcripts to El Paso Community College admissions office (P.O. Box 20500, El Paso, Texas 79998).
- Applicants must be fully accepted by EPCC as an academic credit student.
- Must have successfully completed the TSI assessment test.
- Attend a health career orientation session or complete it online at http://.epcc.edu/HCO/Pages/default.aspx.
- Submit specialized admissions application form and pay a $10.00 fee.
- All academic and specialized ranking courses listed on the degree plan must be completed with a "C" or better. https://www.epcc.edu/Academics/Catalog/program-map?programID=985
- EPCC cumulative GPA of 3.0 is required.
- Students are not allowed to repeat previously passed courses more than once. Students should meet with a counselor to figure out how a repeat course(s) may affect his/her academic, pre-requisite, specialized admissions or transferability of courses. It is the student's responsibility to check with the office of student financial services to inquire how a repeat course(s) may affect their financial aid or veteran assistance.

Three (3) Mandatory Courses

Mandatory courses are those courses that a student must have successfully completed prior to ranking. Applicants who do not satisfactorily complete mandatory courses will not qualify for eligibility to be ranked for a program.

- BIOL 2404 Anatomy and Physiology
- RSPT 1201 Introduction to Respiratory Care
- RSPT 2317 Cardiopulmonary Pharmacology Minimum Grade C

Mandatory courses have no substitute. All mandatory courses must be successfully completed with a minimum grade of "C" or better to qualify for ranking.

Three (3) Ranking Course

Ranking courses are courses within the degree plan in which performance most reliably predicts future ability to perform successfully in the program. It is highly recommended that all ranking courses be completed prior to ranking to be competitive. Ranking courses cannot be substituted.

- BIOL 2404 Anatomy and Physiology
- RSPT 1201 Introduction to Respiratory Care
- RSPT 2317 Cardiopulmonary Pharmacology

Processing of Pre-Program Specific Requirements

It is highly recommended that the applicant complete the pre-program specific requirements at least two (2) weeks prior to the ranking date. The applicant must complete specialized admissions requirements for qualification and ranking. There is a scheduled ranking date for this program. Normal processing may take a few days or a few weeks depending on document type and individual circumstances. If documents have been received, but not processed, then the student will be coded as ineligible for that ranking due to insufficient time for confirming and processing the information.

Pre-Program Specific Requirements

Applicants for specialized programs must also meet pre-program specific criteria prior to qualifying for ranking. The following is needed by all applicants:

- Background Clearance must be completed by each student prior to enrollment in clinical courses. The student will not be able to go to the clinical areas/health care facilities until cleared. For further information, please ask a health counselor or call the program instructional coordinator. Website, http://.elpasoex.com. You will receive a letter from the Dean, Health Career and Technical Education, Math & Science division after the background check is reviewed. Note: A background check must be repeated at student's expense if the student is not enrolled in a health-related program for one or more semesters.

- Current CPR Certification at the professional level (must be from the American Heart Association-Health Care Provider only) and must include AED. Any on-line CPR courses are not acceptable.
- HIPAA training website http://www.epcc.edu/hipaa/Pages/default.aspx.
- Immunizations and titters must be completed. Students must complete hepatitis B vaccination series of 3 and blood titer (can take 4 to 6 months to complete). Second, if a student has started the hepatitis B series by ranking deadline (Summer semesters), he/she may be cleared for ranking or registration with the understanding that the series must be completed on time prior to starting clinical courses. Documentation for starting the series must be on file.
- Tuberculosis screening and/or testing is done annually, or a chest x-ray and questionnaire is done annually.
- Two doses for measles, mumps, and rubella (MMR) vaccinations and blood titer are completed.
- Two doses for the varicella vaccination and blood titer are completed.
- Tetanus/diphtheria and pertussis (Tdap) are completed.
- Influenza is needed (or completed declination form). Note: If declined, student will have to wear a mask in clinical settings (annually).
- Meningitis or booster for bacterial meningitis is needed for all entering students under the age of 30 years old. The term entering students includes new students to EPCC, transfer students, and returning students. Students must provide proof of a first meningitis immunization or booster to admissions and the registration department at any campus. The meningitis immunization must be administered at least 10 days before the start of the semester and must have been administered within the last five years. Visit the link http://www.epcc.edu/Registration/Pages/default.aspx of the admission and registration EPCC web page for additional information. Provide a copy of the meningitis documentation to your program coordinator.
- A complete physical exam by a physician, nurse practitioner, or physician assistant licensed in the United States (http://www.epcc.edu/InstructionalPrograms/Documents/ReportHealthEvaluation/.pdf).
- A completed physical technical standards form.
- Program orientation.

Program specific material should be uploaded to COMPLIO (https://www.complio.com/) you are going to have to set up and account and upload all the necessary documents. If you have any issues, please contact COMPLIO 1-800-200-0853. You will have to pick three packages; 1. Respiratory Care Student for 12-month subscription, 2. background and 3. drug screen in order to be able to upload all of the required documents.

Post Specialized Admissions

Students are responsible for the following requirements after accepting a seat in the program.

- Students need to complete community wide orientation and must be updated annually online at http://www.epcc.edu/cwo.
- **Liability insurance** is a professional practice insurance that is needed for all clinical and selected laboratory courses, which is paid through tuition and covered by the college.
- **Students must attend program orientation held before the beginning of the Semester.**
- Specialized equipment and/or laboratory supplies must be bought at student's expense in accordance with course syllabus. Detailed information will be provided by the instructional coordinator.
- Substance abuse screening will be needed for each student enrolled in a health career program that utilizes clinical components effectively during the summer semester. For further information, please ask a health counselor or call the program instructional coordinator. Note: Substance abuse screening may not be completed for more than three (3) months prior to the first clinical education course. The web site is found at http://www.elpasoex.com.
- Uniforms must be bought at student's expense by course syllabi. Detailed information will be provided by the program instructional coordinator.
- Students oversee their own transportation to off campus clinical/learning sites.
- Textbooks and other course material must be bought at student's expense in accordance with course syllabus.
- Surgical masks will be needed for clinical rotations, face shields, and hemostats.
- You must have a computer for hybrid classes. **Hybrid** classes will be conducted via Zoom, Blackboard Ultra, or Microsoft Teams, you will need a camera and microphone for these courses.

Other Information

- CPR, ACLS, PAL, and NRP are available through the EPCC continuing education division. Please see the current continuing education course schedule or call (915) 831-7831 for more information.
- Physical examinations must be current in the program.
- For the dental clinic, medical sonography, or physical therapy call (915) 831-4017 to make an appointment if needed.

EPCC contracts with http://www.elpasoex.com (Complio) to manage background checks, and drug testing. It is the student's responsibility to buy background checks, drug testing, and meet the associated deadlines. Students that do not purchase their background check, and/or drug testing requirements will not be allowed to enter the program. Students are responsible for all financial liabilities associated with not meeting these requirements.

Respiratory Care Program Admission

Before enrolling in any RSPT course, the student must successfully complete **ALL** prerequisite science courses and go through the ranking process. An enrolled student who does not meet course prerequisite requirements may not be allowed to register until next ranking in the Summer. Specialized courses are offered only once per year. Therefore, a grade of less than 78% in any required course is considered a failing grade, and the student will have to wait until the course is offered again. Students are encouraged to contact the Respiratory Care Technology Counselor, an Allied Health Counselor and/or Faculty Advisor to plan their program of study to qualify for re-entry. Class size is limited to 20-24 students.

The following procedures are established for processing applicants into the El Paso Community College respiratory care technology program.

Admission to El Paso Community college, official acceptance for program enrollment, and placement on a numbered program/class list will be granted upon successful completion of the respiratory care admission procedure, which is as follows:

1. Submit a completed application for admission and indicate possession of a high school diploma or equivalent.
2. Successful completion of the college's entrance testing requirements.
3. Complete a mandatory Health Careers Orientation, live or online, as suggested by the counselor. The information with available dates can be found in the information packet provided by the program counselor.
4. Satisfy the immunization and physical exam requirements, and present written proof. The student will be provided with the proper form for the physical by the program counselor. Be sure to review the form to ensure all required information is included to avoid a return trip to your physician. Information on clinics and locations can be obtained from the program instructional coordinator.
5. Satisfactorily complete a background check and a substance abuse screen through the college.
6. Possess a current CPR card from the American Heart Association.
7. Complete the community wide hospital orientation and HIPAA requirements online. This is done yearly.
8. Attend a pre or a post ranking program specific mandatory orientation.

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Remediating Status:

- Students who have sent an application to the respiratory care technology program but have not completed one or more of the admission requirements outlined above.
- Students with a remediating status are not ranked and are put on the waiting list until all the above requirements have been satisfied.

Ranking status:

Students who have all the admission requirements completed and are waiting to be accepted into the respiratory care technology program. The top 22 students on the ranking list will be selected.

Acceptance Status:

Students at the top of the ranking pool will be offered entry into the program and are required to respond to the admission office if they are interested in enrolling in order to avoid cancellation of their application. Students who refuse an acceptance offer will be removed from the pool of the date admissions receives notice of their intent not to enroll. Students who do not reply to the confirmation request sent out by Admissions Department to confirm their intent by the designated date will be removed from the ranking pool. Students will be ranked based on GPA, mandatory & ranking courses as well as:

1. Attendance at a mandatory general orientation session.
2. Completed health history and immunization.
3. Clearance background and substance abuse screening.
4. Current certification in an American Heart Association Health Care Provider (CPR) course for the professional rescuer (documentation of current CPR certification and drug screening testing must both be submitted).

Applicants will meet with a counselor/advisor where they will be provided with information and assistance regarding entrance requirements, academic planning, and scheduling. Transfer students who want credit for previous coursework must provide the admissions office with an official transcript of each college and/or university attended.

Entrance Testing

All students must complete entrance testing prior to being accepted to the college. Acceptable entrance tests include Texas Success Initiative (TSI) assessment requirements or completion of approved college coursework. Students should submit test scores of their official college transcripts to the admissions office for consideration of an entrance test waiver.

The Texas state legislature mandates that institutions assess all entering undergraduate students for readiness to enroll into college-level course work in the academic areas of essay, reading, math, and writing assessment, and to provide individualized developmental education programs to those students not demonstrating this readiness. The Texas higher education coordinating board (THECB) requires the reporting of developmental progression and outcome of all students engaged in developmental education. Refer to EPCC catalog or see your counselor for more information.

Texas Success Initiative (TSI) Course Placement

Minimum TSI assessment scores for respiratory therapy program include the following:

Essay (PTSE) - 5
Reading & Writing (PTER) – 940
Math (PTMT)- 940

Official TSIA2 assessment scores are valid for (2) years and only the highest test score will be the one used for qualification and ranking.
Official TSIA2 scores must contain all four (4) subject areas (essay, reading, math, and writing). Posting TSI assessment scores will take between 24 to 48 hours. TSIA2 assessment test must be completed at least 48 hours prior to ranking date.
Note: A minimum required testing score for TSIA2 assessment and/or program specific criteria may be adjusted if secondary ranking is necessary to fulfill enrollment requirements.

Previous College Experience

Admission assessment requirements may be waived based on prior courses taken (successful completion of basic math or above and college composition I), credits earned, and grades received. Please have official transcripts sent to the admissions office for determination of the assessment waiver.

Credit Transfers:

The coursework completed at another institution may be considered for transfer if it meets the content, course hours, and satisfactory grades. The request for transfer of credit needs to occur prior to program entrance.

Educational Plan:

Students should discuss course availability with an academic counselor or the instructional coordinator. It is the student's responsibility to understand and complete all degree requirements.
Graduation requirements for the respiratory care technology program are listed below along with any pre-requisites. To earn a degree, students must complete all coursework and attain a minimum of a "C" in each course. A minimum 2.75 cumulative GPA is required for graduation. Course may be taken before beginning program sequence.

Pre-requisite requirements are subject to change at any time and from year to year. Applicants must meet current pre-requisite requirements in effect at the time of application.
Pre-requisite Semester:

- BIOL 2404 Intro to Anatomy & Physiology
- HPRS 1206 Essentials of Medical Terminology
- RSPT 1201 Introduction to Respiratory Care
- MATH 1314 College Algebra
- CHEM 1311 General Chemistry I Lecture
- CHEM 1111 General Chemistry Lab

First Semester:

- RSPT 1240 Cardiopulmonary Anatomy & Physiology
- RSPT 1360 Clinical-Respiratory Care Therapy/Therapist I
- ENGL 1301 Expository English Composition H
- RSPT 1410 Respiratory Care Procedures I
- RSPT 2317 Respiratory Care Pharmacology

Second Semester

- RSPT 2210 Cardiopulmonary Disease
- RSPT 2362 Clinical-Respiratory Care Therapy/Therapist II
- PHIL 2306 Introduction to Ethics
- RSPT 1411 Respiratory Care Fundamentals II

Third/Summer Semester

- RSPT 2355 Critical Care Monitoring
- RSPT 2360 Clinical-Respiratory Therapy/Therapist III
- RSPT 2414 Mechanical Ventilation
- RSPT 2358 Respiratory Care Patient Assessment

Fourth Semester

- RSPT 2361 Clinical-Respiratory Care Therapy/Therapist IV
- RSPT 2358 Respiratory Care Patient Assessment
- RSPT 2453 Neonatal/Pediatric Cardiopulmonary Care
- RSPT 2130 Prep exam

Electives: PSYC 2301, PSYC 2314, SOCI 1301
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National Board of Respiratory Care

Credentialing

To apply for the NBRC exam, a graduate must provide proof of graduation when applying for the examination, either electronically via the Electronic Eligibility Database

(EED) or by submission of an official transcript or certificate of completion/graduation by the candidate. The student will be eligible to sit for the exam as soon as proof of graduation is submitted to the NBRC.
Graduates will have 3 months to complete the CRT and 3 years to complete the RRT examinations following the Certification date. The CRT is a pre-requisite for the RRT. Individuals who do not earn the RRT credential within 3 years will be required to retake and pass the CRT exam for re-credentialing in order to be eligible for the RRT exam.

NBRC Licensure:

Entry into the practice of respiratory care in the United States is regulated by the licensing authority within each state. To ensure public protection, each state requires a candidate for licensure to pass an examination (NBRC) that measures the competencies needed to perform safely and effectively as a beginning licensed entry-level respiratory care practitioner. There are two practice levels, CRT and RRT.
The exams are computerized. Respiratory care technology graduates may practice respiratory care under student status until they have passed the CRT exam and have been issued a permanent license by the state where they are practicing. Other states may have different requirements. Completion of the respiratory care technology program at EPCC does not guarantee that you will be allowed to sit for NBRC (CRT) exam, that you will pass the exam, or that you will be granted a license to practice respiratory care.

Preparation:

The best preparation for success on the NBRC exams is to maximize learning opportunities and test taking skills throughout the program. The respiratory care program has designed many opportunities for this learning but cannot learn for students. Coming prepared to class and getting involved in collaborative learning and other projects will promote the development of a knowledge base and critical thinking skills. Students should strive to learn the maximum, rather than just skinning by with minimum knowledge and preparation for class and clinical activities. The respiratory care program will be providing tests and evaluation situations that encourage application and analysis of knowledge. These are like the knowledge tested on the NBRC exams. Students need to attend all course test review sessions to improve understanding of testing and the development of test taking skills. Study groups also offer support and assist in the development of test taking skills. Taking a review course and planning study review sessions prior to the exam are also critical for building confidence and preparation. The NBRC exams should be taken immediately after graduating. Students must attend the seminar that will be available at the end of their last semester.

Processing:

Before your graduation date, there will be an average of 1 - 2 weeks for processing paperwork for licensure. For most graduates this means minimizing average time for

employment opportunities. The Texas Department of Public Health phone number is (915) 281-0254, web site http://www.texas.state.tx.us/licensure, and address is Austin State Office Building 321 East 12th Street. The national board for respiratory care (NBRC) website is www.nbrc.org.

Program Procedures

Program Structure

The program is composed of 3 essential components of instruction. Furthermore, each part is related to and works in tandem with the other components throughout the school year. The 3 components are:

- Classroom theory.
- Laboratory practice.
- Clinical practice.

Accommodation:

El Paso Community College is committed to giving equal opportunities to all students. Students with disabilities are encouraged to contact the coordinator of developmental education for assistance. A handbook is available that identifies services that EPCC provides to students who may need academic and/or physical accommodation. All students' needs or requests are deal with in a confidential manner. Any applicant who needs accommodation in taking a placement test, because of disability must obtain written documentation from the coordinator of developmental education and give it to the instructor who is administering the test. Accommodation which can be provided include extended time for testing, a taped version of the test, or private room to minimize distractions, and a scribe to record answers.
It is the student's responsibility to schedule testing periods in the Testing Center when indicated. Students are strongly encouraged to take their tests at the same time the class is testing. Students who need extended time are encouraged to start developing time management skills to be finished when class resumes. Students testing at separate times during the class will receive a different test. In addition, students are not allowed to leave the testing area until the classroom testing period has started. Students testing at separate times during the class may receive a different test. Students are not allowed extended time beyond the accommodation prescription. Students are not allowed breaks during accommodation testing.

Activity Restrictions:

Students with activity restrictions will be counseled according to the physically technical standards for health professionals. Students must not have lifting restrictions and be able to fill out a technical standard form for the respiratory care program. Students unable to

meet this guideline will need to request an accommodation plan through the Center for Students with Disabilities.

Advisory Committee Representative:

The student class president will be a representative for the respiratory care program and will be notified by the program's instructional coordinator to serve on the respiratory care advisor board.

APA Reference Style:

APA format is used for respiratory care research assignments including resource documentation. The current APA citation manual can be found in the EPCC academics/libraries/reference/APA style manual on-line.

Classroom Component

This component comprises most instructions in the theory of respiratory care. There are essentially two respiratory care theory classes running con-current throughout the academic year.
Respiratory care classes are held Monday through Friday and are based on syllabi. The exception is the summer session, 2nd year. Didactic respiratory care classes are scheduled 5 days per week for the first 4 weeks of the semester.

- Attendance in the respiratory care classes is critical, as there is no make-up of lectures missed.
- Students must demonstrate understanding of the concepts and principles of respiratory care prior to practicing lab exercises.
- Faculty information, student expectations, class rules, course objectives, grading scales, course calendars, and any other pertinent course information are outlined in the course syllabus for each course.
- Students must pass didactic courses in order to remain in clinical practice.
- Students have equivalent access to course material, laboratory equipment and supplies, and academic support services when more than one section of classes or labs are applicable.

Assignments:

It is the student's responsibility to submit assignments by the date/time due according to the instructor's syllabus. Students who are absent from class may decide with the instructor to have the assignment emailed or dropped off at campus by someone else on the day the assignment was due. Prior to sending an email assignment, request a receipt to ensure delivery, it is the student's responsibility to retain a copy of the submitted assignment.

Behavior:

Students are expected to follow guidelines established by El Paso Community College. Examples of expected behaviors for students in the classroom, lab, and clinical setting will be provided. Students are expected to exhibit mature and professional behavior at all times, which includes the following:

- Active participation in class activities.
- Offering assistance to others without prompting.
- Speaking to others in a calm, courteous, and polite manner.
- Encouraging others.
- Listening quietly and attentively in class.
- Being quiet during testing.

Examples of behaviors that are disrespectful and unprofessional for others include the following:

- Arriving late to class, clinical, or leaving when class is in section.
- Talking to classmates during lectures, AV presentations, and conferences.
- Use of cell phones during class – text messaging, receiving, and or making calls.
- Displaying hostility.
- Using confrontational words or body language.
- Invading personal space of others.
- Following a student in their car, home, etc. uninvited.
- Threatening or stalking an individual.

Students displaying disrespectful and/or unprofessional behaviors, or in violation of the EPCC student conduct procedures, will be removed from the area and referred to the Dean of Health Career and Technical Education, Math & Science to determine program continuation.
https://www.epcc.edu/Academics/Health/Documents/Student_Clinician_Handbook.pdf

Blood-Borne Pathogen Training:

Each student will receive blood-borne pathogen information online during community wide orientation (CWO) at the beginning of each academic calendar year. Documentation is maintained by the program to provide evidence of student's competency in this area.

Cell Phones:

The use of cell phones is prohibited in the classroom lecture, laboratory exercises, and patient care areas during clinics. All cell phones and/or beepers must be set to silent or turned off during the classroom, and laboratory exercises. Students may not use cell phones during test periods. Cell phones or unauthorized electronic devices out during testing will be considered cheating. Texting is not acceptable in class, lab, or clinical patient care settings. Cell phones are not to be used on the clinical floor as they interfere with cardiac monitors and cause added noise on the units. Cell phones may not be used

during assigned patient care areas in clinical times. This means students are not to make or receive any cell phone communications (voice, messages, text messages, etc.) during patient care. Any exceptions need to be approved by clinical instructor and will only be granted for short-term emergent situations.

Children:

Children are not allowed in class, lab, or clinical areas. Children who are left unattended in any environment on the campus grounds will be considered unsupervised, and at risk. Legal intervention may occur on the part of the college. Students who are having difficulty with arranging childcare around course responsibilities will be referred to by the EPCC counselor for help.

Class Attendance and Absence:

Students will be expected to attend class since many clinical applications and activities are used in the classroom to help and broaden learning. Classroom experiences are interrelated with lab and clinical, and absence from one area will make the student less effective in another area. If a student must be absent, the student handles obtaining the missing information. If the student misses a test, arrangements to make up for the test must be made with the instructor. The course syllabus will address the number of tests a student is allowed to take. Students are not allowed to make-up missed quizzes or graded class activities. Attendance/tardy records will be kept.

Class Cancellations:

Listen to the local radio or television stations or check the EPCC website under announcements for official cancellations of El Paso Community College classes or through "Tejano Alert". EPCC will be identified, specifically in the broadcast. Please do not call the stations or EPCC as all are busy receiving other calls. Late arrivals are an option for stormy days when more time is needed to track a storm's intensity, clear the parking lot etc. Be aware that the radio and TV announcements will indicate the time of the late start. For example, an announcement saying, "Scheduled classes schedule will begin at 9 a.m." indicates a two-hour delay. A one-hour means classes will start at 8 a.m. You will need to continue listening to future announcements, because the college may cancel classes for the day if the storm worsens, winds pick up, etc. EPCC will make the decisions regarding adjusted class hours for late starts. Students are always advised to use their own discretion before venturing out when road conditions may be hazardous.

Class Attendance with a Clinical Failure:

Students who have received failure (clinical, incomplete requirements etc.) and are unable to attend clinical are encouraged to continue to attend the theoretical portion of the class to facilitate future course success. Students are required to attend class to meet financial aid attendance requirements or if in the process of a grade appeal. Students attending class are able to participate in class activities including testing.

Clinical Requirements:

Prior to participating in the clinical portion of any health program, students must submit the following evidence.

Health Requirements:

- Two (2) Measles, Mumps, and Rubella (MMR) immunizations with positive antibody blood titer results.
- Tetanus, Diphtheria and Pertussis (TDAP) within the last ten (10) years.
- Two-step Mantoux (TB) test or QuantiFeron Gold blood test (updated annually and/or current for the semester).
- Annual Flu vaccination to be completed in August or September each year.
- Three (3) Hepatitis B vaccine series with documented positive surface antibody blood titer results.
- Varicella (Chicken Pox) vaccine with positive blood result.
- Covid vaccinations

Other Requirements:

- CPR completed by American Heart Association Health Care Provider level.
- Confidentiality agreement.
- EPCC picture identification.
- Uniforms, supplies and equipment, as applicable.
- Online community wide orientation (CWO) completed annually.
- Online health information portability and accountability act (HIPAA) training completed annually.
- Attendance at clinical orientation.
- Computer for online classes
- Surgical Masks for clinics/ N-95
- Eye Goggles

Computer Usage:

The mission of the respiratory care program and the academic computing services (ACS) departments are to provide high quality support and facilities designed to allow access to and foster the appropriate use of technology within the limits of its resources, as well as

responding to the needs of the students, faulty, and staff. Alone with the computers available in the respiratory care lab, El Paso Community College provides ACS computer labs at each campus where you can work on assignments and projects, access the internet, e-mail, and campus smart start. You must have a valid EPCC ID card.

Course-Related Problems:

Students are encouraged to maintain open, on-going professional communication with classroom, clinical, and laboratory instructors. Students experiencing problems with an instructor are to discuss the problem with the instructor. Students experiencing course problems must discuss their concerns with the instructor who is involved in course, which the student is enrolled in. If further assistance is needed to resolve the issue, the students and faculty members(s) will meet with the Dean of Health Career and Technical Education, Math & Science. If the problem continues to remain unresolved, the student may follow up concerns with the Vice President or Instruction and Student Success.

Drug Screening:

In order to ensure that health care facilities are in compliance with their accreditation guidelines, all students enrolled in specified health-related educational courses and programs are required to undergo a substance abuse screening. Students in health care programs must comply with all guidelines and procedures created and implemented by the college and any clinical affiliate at which the student will be completing his or her clinical rotation. Students must present themselves to the clinical affiliates free from the use of all illegal drugs, free from the use and effects of alcohol, and aware of the effects of prescription medication. Students enrolled in a health care program at the college are required to submit and successfully pass pre-clinical clearance drug screening (refer to Drug and Illegal Substance Screening Procedure). Students who fail to obtain clearance will be prohibited from admission or enrollment in specified program/courses for a period of one-year.

NOTE: Substance abuse screening should be completed no more than 3 months (90 days) prior to beginning clinical.

NOTE: Students who withdraw from health-related coursework for one semester or longer, are required to repeat substance abuse screening upon re-enrolling to health-related courses/programs.

NOTE: Students are responsible for all costs associated with substance abuse screening, including any required repeat checks.

To initiate your substance abuse screen clearance, go to www.elpasoex.com (American Databank) and follow the process listed on the web page, make sure you select only the

option(s) that you need at that time; it will affect your cost. Your clearance will be sent directly to the Dean of your program at the college.

Emergencies:

In case of an emergency, students may be reached by the dean's office personnel to receive the needed information and make contact with the program instructor who will reach the student in the assigned area.

Fundraising:

Students must receive approval from Campus Life for all fundraising activities. Solicitation of donations for personal activities (graduation, review seminars, pictures, lab supplies, etc.) will not be approved. Money left over from fundraising activities by a graduating class will be donated to the upcoming class unless specified for a specific donation to a program/college.

Gifts:

Due to the professional nature of the clinical, classroom, and lab experience, students are not to give, or to receive any gifts to or from faculty, staff, patients and/or family members.

Grading:

Respiratory care students will be evaluated in theory and clinical areas. The evaluation is combined from both areas. All courses having a clinical lab component are graded as follows:

- The theory component will be assigned a letter grade based on the respiratory care scale as described below.
    - The clinical laboratory component is based on a grading scale using clinical competencies.
    - Theory and clinical lab components are interdependent co-requisites, i.e., if a student receives a failing grade in either component, the grade recorded for the course is an "F".

Grading Scale:

93 to 100	= A
86 to 92	= B
78 to 85	= C
70 to 77	= D
Below 70	= F or I

1. Theory grades are based upon examinations and/or other assignments.

2. The number of examinations given during a term is decided by individual instructors.
3. Students must earn a grade of at least a "C" on all courses to be eligible for graduation. All pre-requisite courses must be passed with a minimum of a "C" to progress in the respiratory care program.
4. Students are encouraged to keep track of their own grades by adding the total points from each test that you have corrected and dividing it by the total possible points.

Example: Total test points = 50
Your score = 45
45 divided by 50 = 90%

Grades are rounded to the next whole number. For example, a student who earns a grade of 77.8 is awarded a C grade as he/she has earned 78% in entirely. If a student is at 80% or below, the student should initiate a conference with the assigned remedial instructor, or the classroom instructor. There are no options for extra-credit work or repeating exam or paperwork to raise course grades.

Graduate Job References:

Students are expected to contact the faculty member directly to request a job reference. Faculty members will consider providing a written reference upon a student's request to a potential employer. No phone references will be given.

Graduation Requirements:

Students are eligible to graduate when they have fulfilled the following requirements.

1. Completed all program requirements.
2. Maintained a cumulative grade point average of 2.75 or better within the program.
3. Completed all required courses with a minimum grade of C or above.
4. Paid all fees and other financial obligations to EPCC.
5. Returned all library materials.
6. Filed a graduation application form by the posted deadline.

Immunizations:

Clinical coordinators or instructional coordinator will contact students regarding outstanding documentation. Students must have immunizations completed by the identified due date. If a student does not have their immunizations complete, they will be withdrawn from the course. Ongoing students are required to have current immunizations and CPR card throughout the program. Students are not allowed to attend clinical orientation without current documentation.

- Immunizations and Titers – The following must be completed:
  - Completed Hepatitis B vaccination series of 3 and Titer (can take 4-6 months to complete)/if a student has started the Hepatitis B series by ranking deadline (June 11), he/she may be cleared for ranking or registration with the understanding that the series

must be completed in a timely manner prior to starting clinical courses. Documentation for starting the series must be on file.

- Tuberculosis Screening and/or testing (completed) (done annually), or chest x-rays and questionnaire (annual).
- 2 doses - Measles, Mumps and Rubella Vaccinations (MMR) (completed) and Titer.
- 2 doses- Varicella Vaccination and Titer (completed).
- Tetanus/Diphtheria and Pertussis (Tdap) (completed).
- Influenza is required (or completed declination form) (NOTE: If declined, will have to wear a mask in clinical) (done annually).
- Meningitis or booster
  (Effective January 1, 2012, a Bacterial Meningitis is required for all entering students under the age of 22. The term entering students includes new students to EPCC, transfer students, and returning students. Students must provide proof of an initial meningitis immunization or booster to Admissions and Registration Department at any campus. The meningitis immunization must be administered at least 10 days before the start of the semester and must have been administered within the last five years). Visit the link (http://www.epcc.edu/Registration/Pages/default.aspx) of the Admission and Registration EPCC web page for additional information. Provide a copy of the meningitis documentation to your program coordinator.
- Covid-19 vaccinations

Internet and Email:

El Paso Community College provides computing and networking resources to students. You are encouraged to use computers, software packages, and electronic mail for educational or college related activities and to facilitate efficient exchange of useful information. Use of the equipment and networks must conform to the procedures of the college and access may be denied to any student who does not follow these requirements.

Name Change:

Students are required to complete required paperwork in the admissions offices ASAP and notify the respiratory care instructional coordinator when their name is changed. This must be done on time as changes in student's names affect clinical site computer clearance, background checks, and necessary licensure application information.

EPCC Blackboard:

Students are expected to check EPCC Blackboard often for program messages. EPCC Blackboard will be a means of communication with all students enrolled in respiratory care.

Performance Improvement Plans:

Performance improvement plans (PIP) are initiated by the faculty when a student is at risk for course or program failure. Students will meet with the program faculty to review the objectives that are not being met and the remediation required. Students will be required to fulfill the remediation outlined in the plan. Students must successfully meet the objectives to pass the course. Students will receive a copy of the PIP for reference. A copy will also be maintained in the student's folder throughout their program of study.

Plagiarism:

When completing any assignment, if you obtain information from a resource, it is expected that you will cite the reference. When using a reference, you may not copy from the source. You need to paraphrase the information in your own words. Plagiarism is a violation of honor or ethics codes and can result in disciplinary action from a person's school. Plagiarizing is a serious offense and can result in program termination. Students are plagiarizing if they:

- Use direct quotes without quotation marks and textual citation of the material.
- Paraphrase without crediting the source.
- Present another's ideas as their own without citing the source.
- Submit material developed by someone else as their own (this includes purchasing or borrowing a paper, or assignment for which so much help has been received that the writing is significantly different from their own.

Plagiarism is when a student presents the work of someone else as if it were their own, new, and original effort. Self-plagiarism or recycle fraud is a special form of plagiarism in which a student submits their assignments as original work, which has been previously submitted in another course, or submits an assignment previously submitted in another section of the current course. Self-plagiarism/recycle fraud violates the expectation of originality of work product and constitutes plagiarism. Additional examples of plagiarism include, but are not limited to, the following:

- Using text from a source without the use of quotation marks.
- Recycling previously submitted essays or assignments from previous semesters.
- Paraphrasing information without citing the original source.
- Copying information from the textbook without paraphrasing, citing the source, and/or using quotation marks.

Misrepresentation is any other action that violates the philosophical cornerstones of academia. Examples of misrepresentation include, but are not limited to, the following:

- Submitting a paper or assignment for which so much help has been received that the writing is significantly different from the student's own.
- Purposefully allow another student to copy their work and submit that work as their own.

The consequences for academic misconduct are as follows:

First offense:	The student will receive a "0" for the given assignment or exam and will speak with the classroom instructor to discuss the student's actions. The student will not be allowed to redo or make-up the assignment or exam. Documentation of the offense will be given to the Dean and a copy placed in the student's academic file. An act of academic misconduct also nullifies any and all opportunities for extra credit.
Second offense:	If a student commits another act of academic misconduct, the student will receive a "0" for the given assignment and a final grade of "F" for the course. Again, documentation of the offense will be given to the Dean and placed in the student's academic file.

Professional Organizations:

There are a variety of professional organizations to which a respiratory care student may belong. While enrolled in the respiratory care program, students are encouraged to become active members of the American association of respiratory care (AARC). Students may also become members of Texas society for respiratory care (TSRC).

Program Completion Time:

All core respiratory care coursework must be completed each semester. If you do not successfully complete the core courses, the student will not be allowed to enroll in respiratory core courses, the student will not be allowed to enroll in respiratory core courses, only support courses may be taken and the student will need to re-track into the program.

Program Failure:

Students who fail out of the program because of theory grades may re-apply to the program within space availability for admission. The students will need to begin the program from the course failed. Students who failed out of the program because of behavioral, clinical, or classroom misconduct may not have this option (i.e., HIPAA violation).

Program Re-entry:

Re-entry is a possibility, not a guarantee. Students are strongly encouraged to remain in the program sequence once they enter core respiratory care coursework. Students who do not progress through the curriculum on a continuous basis are re-entry students. Students are evaluated on re-entry into the program. A circumstance that requires students to start and stop in sequence is a re-entry. Students must follow the re-entry guidelines in order to obtain re-entry approval.

Approval of re-entering the program is based on space availability in the desired course. First time ranking students have priority (provided they do not turn down the acceptance letter).
There is no guarantee when a seat will become available on a course; therefore, students are strongly encouraged to take the first available seat for entry. Students, who are not offered a program seat and are unable to complete the program within the identified time limits, will have to re-apply to the program and repeat respiratory care coursework.
Program Re-Entry guidelines link attached: Form FB-11
https://www.epcc.edu/Administration/InstitutionalEffectiveness/PoliciesandProcedures/FB-11.pdf

Social Media:

Social networking sites (i.e., Facebook, Myspace, Twitter) are useful avenues for student communication and study groups and can be used to access the latest medical news. We support the responsible use of these resources and expect all users to show the same level of ethical and professional conduct, as is needed in face-to-face or written communications.
When accessing Facebook, you represent, warrant and agree that no materials of any kind submitted through your account will violate or infringe upon the rights of any third party, including copyright, trademark privacy, publicity or other personal or proprietary rights, or contain libelous, defamatory or otherwise unlawful material. Any violation of these types of usage terms involving the EPCC respiratory care program will result in appropriate disciplinary action, which may include removal from the program.

Study Time:

A grade of 2.8 "C" must be kept in all courses in order to graduate. Approximately three hours preparation/study time is recommended for each hour spent in the classroom. Students are encouraged to make academic performance a primary goal while enrolled in the program. Students may be employed after class hours, after clinical hours, on weekends, or over breaks. Work hours should be scheduled recognizing too many work hours may cause a student to be unsuccessful. The financial repercussions of failure must be considered.

Testing Procedure:

1. All unit tests are scheduled and cannot be taken early. Test items will be taken from materials such as audiovisuals, lectures, discussion, assigned readings, handouts, and workbook. Students manage all material covered during scheduled extended or rescheduled lectures and lab for time lost related to severe weather days, instructor absence, etc. Quizzes may be unannounced.
2. Please bring the following for every test:

a. Please bring two sharpened pencils. This will avoid the need to sharpen pencils during the test. Sharpening pencils during a test is disruptive to others who are testing.
b. Please bring your block eraser.
c. Bring 2 ink pens, in case 1 runs out of ink.
d. Calculator.

3. All books and papers are to be placed at under the desk prior to testing. Purses must be under the desk. Cell phones must be turned off and put away. Only the answer sheet and test are allowed at the student's desk. Tests are timed. These will be announced at the beginning of the test and strictly adhered to. Tests will begin as scheduled (on time) with no extra time allowed for those late.
    a. Since your answer sheet will be scored by machine, it is absolutely necessary that you mark your answer correctly to avoid errors in the grade you receive.
    b. On your answer sheet print in the appropriate spaces your name, the name of the examination, and the date.
    c. Keep the marked part of your answer sheet covered at all times. No talking with fellow students while testing is in progress. Try to avoid changing your answer. If you leave the testing room, it is assumed you are finished testing, and your test will be picked up. You will not be allowed to change any answers after this time. It is the student's responsibility to make sure the test is complete before turning the test in. Under no circumstances will the test be returned to the student. Please plan ahead and take care of any personal needs before the test begins (restroom, Kleenex, drinks, etc.).
    d. Mark only one response per item, unless otherwise instructed.
    e. If students have questions concerning a test item, they will be expected to stay in their chairs and raise their hands to receive aid from the instructor. Only questions about possible typographical errors will be answered. All other questions will be answered at the discretion of the individual instructor.
    f. Clarifications and typographical errors will be noted on the chalkboard (to avoid disturbing everyone). Check the chalkboard during the test and before you submit your test.
    g. Your score on this test will be the number of answers you have marked correctly. Try to answer every item, but do not spend too much time on any one item. Try to avoid changing your answers. No gum "smacking" or hard candy "chewing" during testing, as they may be disruptive to others.
    h. When you are ready to send your test, place a vertical ink line through every correct response. Occasionally, the correcting machine will inadvertently mark a correct answer as incorrect. Placing this vertical ink line ensures you will receive credit for the item. If you change your mind or accidentally put the ink mark through the wrong space, this needs to be corrected before sending your test. If necessary, erase the original pencil mark, and then mark your choice. Put the ink mark in the correct space. Show this to your instructor. He/she will note the answer you want in the margin and will initial it.

i. If the instructor decides a student is cheating as evidenced by the student's actions, the test will be picked up, and the student will be given an "F" for the course.
j. When they finished testing, the student is to quietly and promptly leave the testing room after turning in the test and answer sheet. Once the test is submitted, under no circumstances will the test be returned. Be sure you have completed the entire test.
k. The instructor will identify when the test may be reviewed. If the student is absent when the test is returned, he/she may only see their grade. No grades will be given over the phone, to protect confidentiality.
l. When test results are returned, books, papers, pens, and pencils must be placed under your desk. Questions regarding scoring or test items must be presented at that time. If no questions are raised, the student agrees that the score is correct.
m. If a test item is identified as invalid when analyzing the completed test, the instructor will delete the item. It is the instructor's prerogative to allow students with the "best" answer to retain the point or delete the test item totally if considered and unreliable question.
n. Faculty will not pull multiple tests for students at the end of the semester to review prior to finals as this undermines a comprehensive student review.

4. Many of the test questions are application or situational items. Application test items are at a higher level of learning than recall or knowledge test items. Recall test items are often very black and white or concrete (e.g., where is the stomach located)? Higher level questions require students to apply knowledge and interpret the best answer in the situation. This is what respiratory care practice is in application of general knowledge to a specific situation. In the clinical situation, one applies many pieces of information or facts to make decisions. Testing in this manner will help you be successful in clinical as well as in future respiratory care courses and the state board exam. NBRC exams are primarily application items.

<u>Withdrawal Procedure:</u>

The college recognizes that unforeseen circumstances may result in a student needing to take time off from the program. Non-progression in the program may result in difficulty with content retention and application upon re-entry and financial aid. Therefore, the following procedure is implemented to promote student awareness of the need to proceed in program sequence as expediently as possible.

A. A student who chooses to withdraw from school should discuss these intentions with their respiratory care counselor. The student must complete the withdrawal and clearance form at the counseling office prior to the designated withdrawal date for the term. It is the student's responsibility to work with counseling to withdraw from coursework. Students failing to complete the withdrawal process will receive an "F" in the courses they remained enrolled in.
B. Tuition refund eligibility is based upon the length of enrollment and the number of credit hours for which the student is registered. Students, who must withdraw for reasons of

personal health, as verified by a physician, may receive a "W" for the term in which they are registered and will follow the standard tuition refund procedure.

C. Students who drop after three-fourths of the length of the course (the withdrawal date) will receive a failing grade on their records for the work not completed satisfactorily.
D. Students who withdraw from the program will be subject to the program rules in effect at the time of ceasing to pursue program progression.

Workload:

A full-time respiratory care student should plan on attending classes on campus and clinical experiences at local health agencies for approximately 25 to 30 clock hours per week.
Respiratory care students who must be employed for salary and who are enrolled in more than 9 credit hours per term are advised to work no more than 8 clock hours per week. It is expected that students will arrange their work schedules and daycare schedules around their class and clinical schedules.

Clinical and Laboratory Procedures

Laboratory and Clinical Components

Students are encouraged to work on any respiratory care related subjects or equipment outside of normal class times. The lab can be used for tutoring and remedial training, practice from the program coordinator, or any of the other faculty members.
Tutoring is available outside of regular class and laboratory hours. If the student needs personal assistance with lab equipment, remedial instruction or tutoring, it is the student's responsibility to make prior arrangements with an instructor.
Clinicals are routinely held every Wednesday, Thursday, and Friday at scheduled hospitals throughout the community for 12-hour days, or as assigned by clinical instructor. Students are expected to practice respiratory care on real patients, under direct supervision of an EPCC clinical faculty member, or designee. Attendance in clinical is critical and stringently monitored, as there is no make-up of days missed, and students must focus, specifically on completion of clinical objectives throughout the semester. All students will have an opportunity to practice at each assigned hospital throughout the academic year. Each student must receive clearance from the clinical coordinator before the start of clinical rotations.

Attendance and Absence:

Students are expected to attend all lab and clinical practice. These experiences are interrelated, and absence from one area will make the student less effective in other areas. Repeated absences and tardiness will jeopardize status in the program. Attendance at physician lectures and mandatory seminars is also required.

Orientation:

Each student must attend a mandatory general orientation session prior to the start of the respiratory care program. Once in the program, students must attend mandatory clinical orientations (hospital and college). Students will not be allowed to progress into clinical if these orientations are missed due to delinquent immunization or background checks. Students missing mandatory orientations for other reasons may progress into clinical with Dean's approval only. Dean's approval will be decided based on submitted documentation by the student and coordinator. Immunizations and background checks must be current for students to attend clinical orientations.

Clinical Assignments

Students will be assigned to groups prior to the beginning of clinical rotations each semester. The clinical rotation schedule will be made available to each qualifying student as part of the student clinical workbook. Groups may change every semester and are subject to change anytime as deemed necessary by the clinical coordinator. An EPCC respiratory care instructor assigned to that hospital will always supervise students. Each student will have a day-by-day area assignment for each hospital rotation. It is acceptable for students to be assigned to a staff credentialed therapist, as necessary.

Clinical Objectives

Objectives are listed in the course syllabus to identify the competencies that need to be mastered. Students are expected to complete a minimum of 85% of the objectives each semester. A student orientation to clinical rotations will be scheduled every academic semester.

Lab/Clinical:

Students will be expected to attend the clinical/lab portion of each course since this is where the student gains competency to applying those principles learned in the classroom and lab. Students may be required to stay overnight for clinical assignments. Travel and lodging are at the students' own expense. Students are not to be in the clinical setting outside of scheduled hours.

Clinical Absence:

Students are required to notify the designated personnel (as directed by your clinical instructor) prior to the start of the clinical shift. No call or show behavior exists when students do not report for clinical at the designated time and fail to contact the instructor. No call or show behavior makes up patient abandonment and is a serious situation. Students who are absent and fail to call in by the start of the shift are on immediate

program suspension and will be required to meet with instructional and clinical coordinators to evaluate continuation in the program.
Students are encouraged not to miss clinical hours. If a total of 10% of clinical hours is missed the student may be dismissal from the respiratory care program. All missed clinical time cannot be made up.
https://www.epcc.edu/Academics/Health/Documents/Student_Clinician_Handbook.pdf

Students Responsibilities for Clinical

- Students should arrive on time and depart when dismissed by the clinical instructor.
- To adhere to EPCC and all hospital and respiratory care departmental guidelines and procedures.
- To assist the respiratory care department and its practitioners whenever possible.
- To actively seek opportunities to complete semester course objectives.
- To ensure evaluations are discussed and appropriate signatures are gathered at the end of each clinical rotation.
- To perform necessary research for assigned case study presentations and patient assessments.
- To always adhere to program dress code when present at a clinical site. This includes unscheduled clinical hours for completion of special projects. Students who are not adhering to dress code may be asked to leave by any authorized respiratory care department personnel or nursing supervisor.
- To exhibit professional behavior through oral communication and appearance when representing EPCC.
- It is recommended to rea the student clinical handbook, available via this link and on the EPCC website: https://www.epcc.edu/Academics/Health/Documents/Student_Clinician_Handbook.pdf

Clinical Evaluation

Each student will receive a clinical evaluation at the end of each assigned rotation. The clinical evaluation serves the following purposes:

- To determine whether a student can perform the assigned competences.
- To determine the degree of background knowledge and clinical ability the students bring to the clinical setting.
- To determine the degree of progress reached by each student at frequent intervals.
- To determine the student's ability to recall and apply didactic theory to the practice of respiratory care modalities.
- To discover learning difficulties of students, individually, and as a group interaction.

- To determine individual student strengths and weaknesses to provide remedial and advanced assignments.

Supervision by Clinical Instructors

The clinical instructor:

1. Must ensure the students are not without supervision throughout their clinical rotation. The degree of supervision may vary depending on student performance and evaluation. EPCC will provide faculty for primary supervision.
2. Must ensure that, in his/her absence, the primary supervisor of students will be a preceptor appointed by the shift supervisor under the direction of the Department Director and in cooperation with the college faculty.
3. Must communicate the needs of the students so that Practitioners assigned to the areas where students are also assigned will:
    a. Allow students to observe therapy
    b. Participate, with students, in the delivery of therapy.
    c. Allow the student to perform therapy under his/her supervision.
    d. Verify and evaluate the daily experiences of students.
    e. Communicate with the instructor regarding the progress and concerns.
4. Clinical evaluation is based upon performance according to course objectives. Grading is on a pass/fail basis. It is mandatory that a student pass clinic to pass the course. Each student is to be evaluated according to the clinical proficiency tool and will be given a written evaluation if he/she is doing unsatisfactory work in any area. Student performance improvement plans will be initiated for students exhibiting patterns of performance/behavior that could lead to clinical failure. Any student, who consistently receives an overall unsatisfactory evaluation or has been involved in a critical incident, will be considered unsafe and may receive an "F" for the course. Failure in clinical or theory will result in repeating both components of the course concurrently.

Student Feedback

1. You will be asked to fill out various programs and college evaluations and surveys throughout the year. These tools are especially important as they provide feedback used to improve student services as well as program components.
2. The clinical faculty will fill out your evaluation and discuss your clinical performance at the end of every rotation.

Supervision by Clinical Instructors

The clinical instructor:

1. Must ensure that students are supervised throughout their clinical rotation. The degree of supervision may vary depending on student performance and evaluation. EPCC will provide faculty for primary supervision.

2. Students must not be used to substitute agencies staff during clinical phases of the program.
3. Must ensure that, in his/her absence, the primary supervisor of students will be a preceptor appointed by the shift supervisor under the direction of the Department Director and in cooperation with the college faculty.
4. Must communicate the needs of the students so that Practitioners assigned to the areas where students are also assigned will:
    a. Allow students to observe therapy
    b. Participate, with students, in the delivery of therapy.
    c. Allow the student to perform therapy under his/her supervision.
    d. Verify and evaluate the daily experiences of students.
    e. Communicate with the instructor regarding the progress and concerns.
5. Students must be checked off in the respiratory lab prior to performing any procedure in the clinical setting. Instructor will be assessing activities for student's ability to perform skills accurately and safely.
6. Must ensure that students comply with hospital department policy as related to beginning and ending of shift, charting, "hand off" reporting and reporting critical values.
7. Must ensure that students follow Program policy as it applies to attendance. Clinical instructors must provide detailed instruction before allowing the student to practice.
5. Must ensure that students follow hospital department policy as related to beginning and ending of shift, charting, "hand off" reporting and reporting critical values.
6. Must ensure that students follow Program policy as it applies to attendance.
7. Must ensure that established hospital departmental policies and procedures are followed for initiating and completing all therapeutic procedures.
8. Must actively look for, promote and encourage hands-on learning opportunities for the students to master the objectives of the course.
9. Must give the students timely feedback about their clinical performance through review and discussion of special written assignments and clinical performance.
10. Must promote a positive learning environment by promoting oral communication and teamwork with the department staff, nurses, physicians and other health care professionals.
11. Should expect of the student no more or less than the instructor expects of himself.
12. Must display professional behavior, appearance and work ethics during all clinical activities.
13. Must acquaint all students with the course requirements including specific course objectives, means of attaining them, and methods of evaluation.
14. Must identify mutual expectations on a day-to-day basis.
15. Must use teaching methods that are appropriate to reach students of various learning styles and allow the students to continually assess their progress.

16. Serve as an academic advisor and provide appropriate leadership and supervision in student activities.
17. Ensure evaluations are completed and discussed with the student in an equitable and timely manner and turned into the Clinical Coordinator by DUE DATE.
18. Ensure student is signed off for satisfactory completion of objectives by the end of the rotation.

Standards of Interaction

The respiratory care student is a guest of the hospital administration and the department. As a guest, the student is expected to behave in a manner consistent with the behavioral standards generally accepted by employees of the hospital. The students will:

1. Adhere to standards of attendance, punctuality and dress code as described previously.
2. Discourage spouses, children and other relatives from visiting or disrupting the student's time during any clinical or clinical-related activity unless it is an emergency.
3. Comply with policies related to departmental paperwork procedures, computer charting, coffee breaks, lunch breaks, and all other standard operating procedures. Not arbitrarily criticize any hospital or departmental policies. The student may offer positive suggestions, by bringing them to the attention of the clinical instructors in private.
4. Maintain confidentiality of patient records at all times. All patient information is privileged and confidential. Respect patient rights and privacy.
5. Complete ALL handwritten documentation with black ink. Patient documents cannot be copied, faxed, or photographed. Devices with photographic and/or recording capabilities may be confiscated.
6. Discuss physician issues, case studies, patient issues or visitor issues in a private and confidential manner when deemed necessary, for educational purposes only.
7. Discuss and offer suggestions regarding procedures or patient care in a tactful manner and in private with the clinical instructor. Random and inappropriate criticism is unprofessional.
8. Exhibit behavior that is consistent with the American Association for Respiratory Care Codes of Ethics, included in this packet.

Evaluation and Feedback

1. You will be asked to fill out various program and college evaluations and surveys throughout the year. These tools are especially important as they provide feedback used to improve student services as well as program components.
2. The Clinical Faculty will fill out your evaluation and discuss your clinical performance at the end of every rotation.

Leaving Clinicals Early:

Students are not allowed to leave the clinical area prior to the end of the scheduled clinical day for non-emergent personal reasons (work, babysitters etc.), as this is not acceptable in practice. Students who cannot attend for the scheduled shift will be considered absent for the shift.

Tardiness:

Any student showing a pattern of tardiness or absenteeism in the program will be put on a performance improvement plan. Tardiness and absences will be recorded and kept in the student file. Notify the clinical instructor at least 1 hour before starting time if unable to attend clinics.

Clinical/lab Cancellations:

EPCC makes every effort to post school delays or cancellations for broadcasting on news and radio stations in a timely manner. Due to the early hours of clinical rotations, this information may be broadcast after the student is in route to their location. Therefore, students are recommended to use their own discretion before venturing out when road conditions may be hazardous. In addition, students are encouraged to use a phone tree in clinical for current updates from the instructor. Students are expected to call their clinical instructor/site if they are going to be late to clinical due to inclement weather.
The following guidelines apply to college cancellations related to inclement weather for clinical rotations in the district:

1. If EPCC cancels classes, clinical is canceled for that day. Students who have arrived at a clinical site are not allowed to stay in clinical if the college has cancelled.
2. If the college cancellation occurs after the clinical day has started, the clinical instructor will work to release students in a timely manner from the clinical area without disruption to client care.
3. Students may be required to make up a cancelled clinical day at the discretion of the instructional coordinator. Clinical hours may be made-up using one of the following methods:
    a. Re-schedule date to complete an additional clinical shift at the clinical site.
    b. Schedule a lab day at the college.
    c. Written assignments based upon clinical objectives for the course.
4. In the event a student is unable to attend clinical due to weather, the student will be required to follow the instructor's guidelines for clinical absence.

Instructor Absence:

When the clinical instructor is absent from the assigned clinical area, the following procedure will be followed:

1. The instructor will notify the clinical site that the clinical experience has been canceled for the day. The instructor may notify the students in advance if the absence is expected.
2. In the event the instructor could not notify the students, the clinical instructor will deliver the message to the students upon arrival to the clinical site.
3. Students may not remain in the clinical area without instructor's supervision. Therefore, every attempt will be made to re-assign students to an alternative assignment to meet clinical objectives. Alternative assignments include:
    a. Attending an outlying area.
    b. Join another clinical group.
    c. Complete an alternate independent assignment.
    d. Learning activities assigned on campus.
4. Students who do not attend or complete the alternative assignments will be considered absent from clinical.
5. If arrangements have not been made for an alternative assignment, students are to return home and will make-up the clinical hours upon review by the clinical coordinator. Clinical hours may be made-up using one of the following methods:
    a. Re-schedule date to complete an additional clinical shift at the clinical site.
    b. Schedule a lab day at the college.
    c. Written assignments based upon clinical objectives for the course.
6. In the event an instructor will be absent for a prolonged period, a qualified substitute will be assigned to the clinical site, or the students will be reassigned to another clinical group.

Lab Requirements:

The health lab setting must be an environment that promotes professional student interaction and respect as students strive to meet established competencies. Students will be required to wear their navy-blue scrubs. Undergarments (or lack thereof) must not be visible to others in the environment. Students who are inappropriately attired, will be asked to leave the lab setting to change clothes and will be counted as absent for lab time missed.

Lab Equipment:

Students are responsible to purchase the required lab equipment prior to the first lab day. Students not prepared for lab will be documented as absent for that lab day. Each student should purchase their own lab equipment for successfully demonstrating skill competencies.

Lab Requirements:

1. Students are expected to complete the assigned activities prior to the lab experience. These activities are designed to help you apply critical thinking skills. Students

unprepared for lab may be given an absence for the lab day and must complete the assignments at another time.

2. It is expected that you will spend time practicing in the respiratory care lab (room B-301) outside of scheduled class time. Faculty is available to work with students on upcoming skills at the end of class/lab practice days. It is inappropriate for students to not practice during class/lab practice days and then expect faculty to work with them at the last minute prior to skill return.
   Faculty will assign student times for return demonstration. Students who are not on time for their return demo will have their name and partner's name (if applicable) placed at the end of the list for that day. This prevents tardiness from affecting other students' schedules.
3. Lab procedures must be passed with 100% accuracy (pulse, respiratory rate, and blood pressure will need to be within 2 of the instructor). Have your equipment assembled and be ready to start when it is your turn. When you finish the procedure, put your equipment away in its proper place. Having equipment ready and replacing it will be a part of the criteria for passing a procedure. All return demos are to be done in a role-playing manner. Utilize body mechanics, side rails and communication as if you were in clinical. If you recognize you've made an error, verbalize this to your instructor and then correct the error. Self-recognition of errors will be taken into consideration when determining if a procedure needs to be redone.
4. Only one laboratory demonstration may be performed per day. If return demonstration isn't satisfactory, it may not be repeated until further practice is done. The next opportunity to re-test will be the next lab day.
5. You will be allowed three opportunities to test out on each skill. All skills must be passed successfully each semester. If you are unsuccessful in testing out on any skill required for that semester, you will not be allowed to go into clinical and will receive an "F" for the course.
6. Professionalism is expected within the lab setting, e.g., be courteous to others, respect others' privacy and confidentiality, no use of profanity or aggressive behavior, and be mindful of personal hygiene as you will be working closely with others, etc.
7. No cell phones in the lab. If a call is made or received the student will be asked to leave and will need to schedule a re-test for the next lab day.
8. All lab days are considered part of clinical. An absence or tardiness on a lab day is counted as a clinical absence/tardiness. Students are responsible to obtain information missed from another student.

<u>Clinical Requirements:</u>

1. Have evidence of a current physical examination (within one year of the start of clinical) including proof of 2 MMR (Measles, Mumps, and Rubella) immunizations, Tdap (require if a tetanus has not been given in the last 10 years), a two-step Mantoux (TB) test, and influenza vaccination. Yearly flu vaccines, HINI and fit testing for the N95 respirator mask will also be required. (Refer to guidelines for a two-step TB test on the

immunization form). It is recommended that students receive the Hepatitis B series and meningitis vaccine.
2. Possess current American Heart Association Health Care Provider level CPR certification.
3. Sign all confidentiality agreements.
4. Obtain an EPCC picture identification card and EPCC parking permit.
5. Purchase the official EPCC respiratory care uniform and required clinical equipment.
6. Pass a background check.
7. Pass a drug test,
8. Evidence of health information portability and accountability act training.
9. Attendance at all mandatory clinical orientation activities (computer training, etc.).

Students are not allowed to attend clinical experiences (orientation) if immunizations are not current. Students missing clinical orientation because of incomplete immunization records or not cleared with background check, will not be allowed to progress into that clinical rotation and will be administratively withdrawn from the course, and will count as an absence.

Clinical Appearance:

1. Hair must be worn back (cannot be falling in the student's face or patient care field), clean, elegantly styled and be of a conservative style and color. Extreme hair colors or styles are not permitted. No ribbons. While beards for the male student are not encouraged or discouraged, it is recognized that during observation of certain experiences all facial hair must be covered.
2. Nails should be short so as not to injure the patient. No acrylic nails or tips. A light-colored neutral shade of nail polish may be worn.
3. Necklaces may not be worn with the uniform. Hospital procedure may designate areas where no rings may be worn. One plain band (ring) is the only band jewelry that is recommended.
4. Only dime size or smaller post earrings that are plain are acceptable. Loop earrings and gauges with decorations or dangling objects are not permitted. Only one pair of earrings may be worn. Pierced jewelry in the nose or eyebrow or other visible areas is not permitted. All visible tattoos must be covered when possible.
5. Name badges are to be always worn when in the role of a respiratory care student.

Clinical Attire:

A uniform is worn during clinical experiences only. Please do not wear clothes outside of clinical. The uniform must be clean, without wrinkles and must be made of a fabric which properly conceals undergarments. It must always be in good repair and replaced before evidence of wear detracts from the overall general appearance of the student. The uniform must fit in a manner which allows freedom of movement without evidence of excessive pulling or wrinkling. The length and style of the uniform must be appropriate

in dress and/or pant length and physical build of the individual. The student should not wear uniform outside of the clinical setting to avoid pathogen transmission.

The complete uniform will consist of:

1. Navy blue scrubs with EPCC patch on left arm sleeve.
2. Mostly white, grey or black full-grain leather tennis shoes.
3. EPCC name tag and picture ID tag on left breast pocket. A hospital specific name tag may be required, also.
4. Hospital name tags must be returned to the clinical instructor at the end of the rotation. Student failure to do so may result in withholding a grade until the name tag is returned.
5. Stethoscope, student's color choice.
6. Small note pad.
7. Pen (black ink), sharpie marker.
8. Watch with a second hand or a digital watch capable of counting seconds.
9. Calculator.
10. Plain white/black or grey long or short sleeve shirts can be worn under scrub top.
11. Surgical masks for clinics and for campus/ face shield for clinics
12. Medical scissors
13. Surgical masks
14. Goggles

In addition to professional attire, students must conduct themselves in a professional manner in the clinical settings. This includes no gum chewing in the clinical patient care area. Smoking is not allowed on clinical properties. Students are asked not to smoke before or during the day of clinical, as clients often find the smell of smoke intolerable. Students will be asked to leave the clinical area if they smell of smoke, which will be counted as a clinical absence for the day.

<u>Male appearance</u>

- Hair must be combed and cut neatly. Hair length must not exceed the back shirt collar or fall over the face when leaning over. Hair must be secured with pins, hair net or some other device to prevent the above.
- Sideburns, mustaches, goatees and full beards are permissible but must be trimmed neatly and kept clean. All others must be clean-shaven. Conform to traditional hair colors.
- Shoes must be clean.
- Nails must be clean and rounded for safety.
- Good personal hygiene is always necessary.
- Tattoos cannot be visible.
- Jewelry is limited to wedding rings, school rings, wristwatch, and one standard length necklace.

Female Appearance

- Hair length must not exceed the back shirt collar or fall over the face when leaning over. It should be worn in a style that provides personal safety and protection for the patient. Plain bobby pins or plain metal barrettes are permitted to fasten long hair securely. It must be clean and always combed while on duty. Hair in curlers, head scarves, etc., are not permissible while on duty. Conform to traditional hair colors.
- Shoes must be clean.
- Nails must be clean and rounded for safety. No overlays, acrylics, or dark nail polish is allowed.
- Good personal hygiene is always necessary.
- Tattoos cannot be visible.
- Wedding rings, engagement rings, school rings, and watches are permissible.

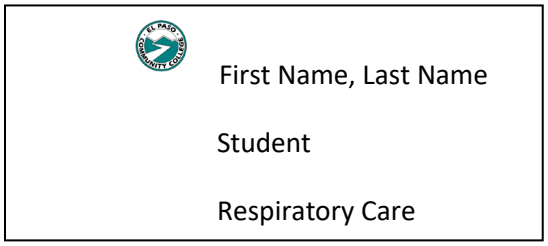
Jewelry

Students are restricted from wearing excessive jewelry.
The following type of jewelry is not allowed:

- Large hoop or dangling earrings.
- Facial jewelry, e.g., brow earrings, tongue or nose rings or studs.
- Multiple earrings on one or both ears.
- Multiple necklaces, chains.
- Cosmetics may be used in moderation and highly scented colognes, perfumes, shaving lotions, etc., are not to be used in excess, as they may be offensive to patients, or cause an allergic response.
- The clinical instructor will determine acceptability of the above.

Standardized Name Tags

Name tags will be teal green with white letters. The student's name and program name will be on the name tag. The college logo will be on the upper left corner. The format for the name tag will be as shown below:



Seminar Attendance

1. Students may be expected to attend local cardiopulmonary seminars/workshops, as determined by the Instructional Coordinator and/or Clinical Coordinator.

Seminars/workshops sponsored by the Texas Society for Respiratory Care may require mandatory attendance and a registration fee.

2. Registration fees and related expenses are the responsibility of the student.
3. Students will be given prior notification of seminars so that they may plan to attend.

Charting Signature:

When documenting for clinics, students will sign their full name followed by **EPCC RCS (El Paso Community College Respiratory Care Student).**

Clinical Records:

No part of a patient's record should be copied, whether permitted by the clinical institution or not. Including copies of patient records in your care plan violates HIPAA guidelines.

Evaluation:

Clinical evaluation is based upon performance according to course objectives. Grading is on a pass/fail basis. It is mandatory that a student pass clinic to pass the course. Each student is to be evaluated according to the clinical proficiency tool and will be given a written evaluation if he/she is doing unsatisfactory work in any area. Student performance improvement plans will be initiated for students exhibiting patterns of performance/behavior that could lead to clinical failure. Any student, who consistently receives an overall unsatisfactory evaluation or has been involved in a critical incident, will be considered unsafe and may receive an "F" for the course. Failure in clinical or theory will result in repeating both components of the course concurrently.

Grading:

Respiratory care students will be evaluated in theory and clinical areas. The evaluation is combined from both areas. All courses having a clinical lab component are graded from the assigned letter based on the respiratory care scale.
The clinical laboratory component is based on a pass/fail basis utilizing clinical competencies. Theory and clinical lab components are inter-dependent co-requisites, i.e., if a student receives a failing grade in either component, the grade recorded for the course is an "F".

General Procedure Information:

A. Invasive procedures, or procedures involving sterile techniques, must be performed under the direct supervision of the clinical instructor or designated respiratory care staff therapist.

B. Procedures performed must be within the scope of practice of a respiratory care practitioner.
C. Students are responsible for documentation immediately following the procedure. The clinical instructor must co-sign all entries.
D. If medications are given under the supervision of a respiratory care staff therapist will co-sign all entries.

Observational Experience:

Throughout the respiratory care program, students are assigned to observational experience in hospital settings, physician's rounds, and community agency. Unless otherwise indicated by the clinical instructor, the student will wear the school uniform.

Transportation:

The student shall be responsible for his/her own transportation to various clinical agencies utilized, and any expenses incurred to attend clinical. No client is ever to be transported in student automobiles.

Consent Forms:

Students are not allowed to sign/witness patient consent forms in the clinical settings.

CPR Certification:

It is required for all EPCC respiratory care students while in the program must carry a current American Heart Association Health Care Provider level CPR card.

Safety and Ethical Practice

Safe and Ethical Practice:

Integrity and moral conduct are crucial to the practice of respiratory care. The behaviors of a health care provider must demonstrate acceptable moral, ethical, and legal values. Students will fail a course or be subject to other disciplinary action when the academic, clinical, or personal performance is determined to be inconsistent with the responsibility and accountability for upholding ethical and professional standards. As a professional program, it is the responsibility of the faculty to determine if action is indicated.

To function within the parameters of safe and ethical practice the student must:

- Comply with the patient's bill of rights.
- Comply with the AARC code of ethics.
- Provide a safe environment for the patient.
- Maintain confidentiality of all information/HIPAA.

- Function within the parameters of the student rules outline in the EPCC respiratory care procedure manual.

Patients' Bill of Rights:

1. The patient has the right to considerate and respectful care.
2. The patient has the right to obtain from his physician complete current information concerning his diagnosis, treatment, and prognosis in terms the patient can be reasonably expected to understand. When it is not medically advisable to give such information to the patient, the information should be made available to an appropriate person in his behalf. He has the right to know, by name, the physician responsible for coordinating his care.
3. The patient has the right to receive from his physician information necessary to give informed consent prior to the start of any procedure and/or treatment. Except in emergencies, such information for informed consent should include but not necessarily be limited to the specific procedure and/or treatment, the medically significant risks involved, and the probable duration of incapacitation. Where medically significant alternatives for care or treatment exist, or when the patient requests information concerning medical alternatives, the patient has the right to such information. The patient also has the right to know the name of the person responsible for the procedures and/or treatment.
4. The patient has the right to refuse treatment to the extent permitted by law, and to be informed of the medical consequences of his action.
5. The patient has the right to consider thoughtful attention of his privacy concerning his own medical care program. Case discussion, consultation, examination, and treatment are confidential and should be discussed discreetly. Those not directly involved in his care must have the permission of the patient to be present.
6. The patient has the right to expect that all communications and records pertaining to his care should be treated as confidential.
7. The patient has the right to expect that within its capacity a hospital must make reasonable responses to request of a patient for services. The hospital must provide evaluation, service, and/or referral as indicated by the urgency of the case. When medically permissible a patient may be transferred to another facility only after he has received complete information and explanation concerning the needs for and alternatives to such a transfer. The institution to which the patient is to be transferred must first have accepted the patient for transfer.
8. The patient has the right to obtain information as to any relationship of his hospital to other health care and educational institutions in so far as his care is concerned. The patient has the right to obtain information as to the existence of any professional relationships among individuals, by name, which is treating him.
9. The patient has the right to be advised if the hospital proposes to engage in or perform human experimentation affecting his care or treatment. The patient has the right to refuse to participate in such research projects.

10. The patient has the right to expect reasonable continuity of care. He has the right to know in advance what appointment times and physicians are available and where. The patient has the right to expect that the hospital will provide a mechanism whereby he is informed by his physician or a delegate of the physician of the patient's continuing health care requirements following discharge.
11. The patient has the right to examine and receive an explanation of his bill regardless of source of payment.
12. The patient has the right to know what hospital rules and regulations apply to his conduct as a patient.

The American Association for Respiratory Care Statement of Ethics and Professional Conduct:

In the conduct of professional activities, the respiratory therapist shall be bound by the following ethical and professional principles. Respiratory therapists shall:

- Demonstrate behavior that reflects integrity, supports objectivity, and fosters trust in the profession and its professionals. Actively maintain and continually improve their professional competence and represent it accurately.
- Perform only those procedures or functions in which they are individually competent, and which are within the scope of accepted and responsible practice.
- Respect and protect the legal and personal rights of patients they treat, 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 that 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 access, efficacy, and cost of patient care.
- Encourage and promote appropriate stewardship of resources.

Examples of infractions of Moral and Ethical Conduct:

1. Disruptive classroom or clinical behavior.
2. Threating, intimidating or coercing faculty or facility personnel on school or clinical premises.
3. Attending clinical with a communicable disease (mumps, shingles etc.).
4. Failure to respect procedures of health agencies used for clinical learning.
5. Breach of patient confidentiality/accessing unauthorized client records including your own.

6. Lying.
7. Falsifying client information.
8. Cheating/plagiarism.
9. Stealing supplies from the respiratory care lab or clinical facilities.
10. Willful neglect or abandonment in care of patients/abusive treatment of clients or visitors.
11. Illegal gain and distribution of drugs.
12. Use of client's medications for self or family.
13. Failing to report a student or health care worker who exhibits one of the above behaviors.

Safe Practice:

In addition to upholding ethical and moral standards, respiratory care students are required to care for their clients in a safe, professional and responsible manner. Students who are beginning the respiratory care program are in the process of learning how to deliver care in a safe and efficient manner. As students' progress in the program, they should evidence greater accountability and consistency in their ability to deliver care in a safe and efficient manner. As student progress, they are held accountable for all previously learned skills in the program. Patterns of substandard/borderline clinical and lab performance and patterns of clinical incidents are considered when evaluating student progression in the program. Examples of unsafe practice include, but are not limited to:

1. Forgetting to check an ID band.
2. Leaving side rails down.
3. Not recognizing an abnormal assessment.
4. Attending clinical not fully prepared, emotionally upset, or ill.
5. Conducting a procedure or treatment without the instructor's permission.
6. Failing to adhere to guidelines when conducting a procedure or treatment.
7. Not checking physician orders in a routine manner.
8. Administering medication without full knowledge of medication.

Hazardous Materials/Waste:

The proper handling, storage, and disposal of hazardous materials and waste products are everyone's responsibility. Contact your instructor immediately if you suspect exposure to or contact with hazardous material. Instructors will provide you with the following information for any areas in which hazardous material is in use:

- Clinical locations for the Material Safety Data Sheets (MSDS).
- Protective clothing/equipment required for handing the materials.
- Proper disposal of used or unwanted materials and waste.

Health Status:

It is the student's responsibility to report changes regarding their health status while enrolled in the program. It is the student's responsibility to immediately report any personal injuries or client injuries (those under the student's care) that occurred while in clinical to their respiratory care instructor. The respiratory care instructor will then assist the student in completing the required facility/agency and EPCC reports.

Incident/Accidents:

All incidents (i.e., drug errors, client falls, etc.) and accidents (student injuries) involving instructors and/or students will be reported according to the following procedure. All reports will be filed in Dean's office, along with the student file.

Instructor reporting procedure at EPCC:

- Emergency guidelines will be followed for emergent care needed.
- All college departments and disciplines follow the safety program outlined in the college procedure on 5.01.05.34.
- The office of risk management and safety (ORMS) investigates and documents safety complaints, incidents, or violations and, if justified, makes recommendations to correct any hazards discovered.
- Incidents involving chemical, biological, medical, or any other hazardous materials will be reported to the EPCC police department and ORMS.
- The Dean of Health Career and Technical Education, Math & Science will receive written and verbal notification of the incident.
- EPCC incident report form will be completed by classroom instructor prior to leaving the area.
- EPCC incident report form (found under forms) will be turned into the Dean of Health Career and Technical Education, Math & Science for review for future action needed.

Procedure for Clinical Sites:

- Emergency guidelines will be followed for emergent care needed.
- The Dean of Health Career and Technical Education, Math & Science and ORMS will receive written and verbal notification of the incident.
- Facility incident report form and EPCC incident report form will be completed by clinical instructor prior to leaving the area.

A copy of the facility incident report form (if allowed), and the EPCC incident report form will be turned in to the Dean of Health Career and Technical Education, Math & Science for review. Students will be responsible for reporting any accident/injuries that occur during class, lab, or clinical activities. Instructor will assist the student in completing the correct forms and taking corrective actions as indicated by the clinical facility or EPCC procedure.

Latex Allergy:

The centers for disease control report that the amount of latex exposure needed to produce sensitization is not known. They report that increasing exposure to latex proteins increases the risk of developing allergic symptoms. Health care providers are at risk of developing latex allergies because they use latex gloves frequently. Latex proteins can fasten to the lubricant powder used in some gloves. When workers change gloves, the protein/powder particles become airborne and can be inhaled. It is therefore recommended that non-latex gloves be used for activities that are not likely to involve contact with infectious materials. If latex gloves are used, exposure to latex can be reduced by wearing powder-free gloves. Always wash hands after removing gloves. Students who have latex sensitivity must submit a release from a health care provider regarding their ability to remain in the program.

Liability Insurance:

The college insurance liability includes coverage for student injuries or claims of injury related to "participation in the program" in the student's role as long as the student has completed related lab competency exercises and is following procedures and acting in a reasonable manner.
In the event a student is injured while conducting them in a reasonable manner during class, lab, or clinical the student must notify an EPCC faculty member prior to leaving the area in which the injury occurred. The EPCC faculty member will assist the student in completing the facility and college forms (EPCC incident report form) and taking corrective actions. The EPCC incident report form must be filed into the program Dean's office.

Emergency Notification System:

The Tejano Alert system is used by EL Paso Community College (EPCC) to keep everyone immediately informed of emergences or similar unexpected events that affect EPCC students, faculty, and staff. This system ensures that you receive critical emergency notifications of disasters, hazardous weather, police emergencies, or other unexpected events affecting the conducting of classes or college business.
The EPCC Tejano Alert system sends a text message to text enabled devices and sends an email notification to any email addresses you have listed when you register for the Tejano Alert system. These messages will provide necessary information and guidelines. The Tejano Alert system is an important part of keeping you informed during emergencies.

Terms of Use:

As a student or employee of EPCC, you authorized EPCC to use the Tejano Alert emergency notification system to keep you informed of emergency conditions in or around EPCC campuses. While registration to the Tejano Alert system is free, your

service provider may charge a fee for delivery of messages or reading of emails based on your current data plan. Contact your service provider to determine if additional charges may apply.

Method of Contact:

The primary method of contact will be your EPCC email accounts. You can add one additional email account and up to two text-enabled devices such as your text-enabled cellular phone. The contact information you provide to be used by this system is confidential and will not be shared with anyone outside of the Tejano Alert emergency notification system.

Fire

When the building alarm sounds, or you are requested to evacuate by EPCC PD or the fire department, your responsibilities are:

- Assuming it is safe to do so, shutting down any experiments, procedures, etc. that should not be left unattended. Extinguish any open flames and shut off any noxious or flammable gas supply valves.
- Secure any valuables. Purses and wallets should be taken with you when you leave.
- Close your classroom, office, or lab door.
- Leave the building via the nearest available exit as soon as possible. Do not attempt to use the elevators, use the stairwells.
- Department heads/supervisors and faculty are responsible for making sure their area is clear.
- Stand well clear of the building (at least 50 feet).
- Do not reenter the building until advised by the EPCC PD officers.
- If you see any problem with any of the fire equipment, please bring it to the attention of the EPCC officers that are on the scene, or telephone EPCC PD office at 831-2200 to report malfunctioning equipment.

Smoking Procedure:

EPCC and all clinical sites are smoke and tobacco-free in compliance with the Texas smoke-free air act. The use of tobacco products is not allowed on any of the EPCC or clinical facility grounds. This includes the use of cigarettes, chewing tobacco, and other forms of tobacco. Students who smoke on clinical grounds will be sent home and penalized according to absent protocol.

Critical Incidents:

A critical incident is a situation or behavior that evidences immoral, illegal or unethical behavior. Persistent errors in safety and judgment are also considered critical incidents. Critical incidents will result in a review of the incident by the Dean of Health Career and

Technical Education, Math & Science, prior to determination of consequences. Critical incidents may result in immediate termination in the program. Examples of infractions of Moral and Ethical conduct include, but are not limited to:

1. Attending clinical with minimal preparation.
2. Leaving the clinical area without completing client's care.
3. Lying about care delivered.
4. Impaired judgment or behavior that indicates possible use of drugs and/or alcohol before or during class, lab, or clinical learning activities.
5. Persistent judgmental errors in performance of care.
6. Administering medication without practitioner supervision.
7. Deliberately physically or verbally harming a person.

When student's performance is deemed unsafe by respiratory care faculty or the health care facility site staff in the clinical area, the student may be removed from that portion of the course and program. The clinical instructor will collaborate with the Dean to determine the disciplinary action warranted.

The program Dean reserves the right to require a medical examination or counseling of any student whose behavior may compromise or does compromise client care and/or safety. Such an examination may provide data concerning the physical and/or mental ability to perform satisfactorily. The cost of such an examination will be paid by the student. The college shall retain the right to prescribe the type and extent of the examination and to specify who shall perform it. Should the prescribed type and extent of the examination be performed by the student's own physician, the college may request a second opinion. This medical examination may be required to continue, progress, and/or re-enter the program.

The hospital and/or local agency have the right to request a drug screen related to a violation of client safety.

The hospital and/or clinical agency have the right to remove a student from their clinical setting for any breach in safety, confidentiality or professionalism.

Clinical Protective Health:

Physical and mental health care are an essential component of well-being and are imperative components for successful performance in the respiratory care program. An alteration or limitation in physical or mental functioning has the potential to influence client/student safety and affect the quality of the care provided by the respiratory care student.

To ensure that client safety is not compromised and to avoid the increased risk of student injury, the clinical instructor, using professional knowledge and judgment, may request the student to leave the clinical setting if the student's physical or mental status is impaired. Physical and mental impairment that potentially may affect student performance in the clinical setting may include, but is not limited to:

- Contagious conditions (i.e., chicken pox, influenza, herpes simplex).

- Immune-suppressed conditions (i.e., chemotherapy).
- Physical limitations (i.e., back/neck injury, fracture, sprain, surgery, elevated risk pregnancy).
- Impairment of judgment/mental functioning (i.e., prescription drug, drug or alcohol use/abuse).
- Cognitive impairment (i.e., anxiety disorder, panic disorder, depression).
- Uncorrected visual/hearing impairment.

When the instructor becomes aware of any of the identified or similar conditions, the following procedure will be initiated.

1. After gathering sufficient information concerning the physical and/or mental status of the student, the instructor will determine the feasibility of the student remaining in the clinical setting. If it is determined that the student cannot perform at the expected level due to physical illness or limitations and/or mental impairment, the student will be dismissed from the clinical setting.
2. The student will be notified that dismissal from the clinical setting will result in a clinical absence or absences that will be addressed as specified in the program procedure manual.
3. The instructor will notify the Dean of Health Career and Technical Education, Math & Science of student's health status and action taken.
4. Documentation of the student's status and instructor's action will be completed, and a copy will be provided to the Dean.
5. A signed medical release by a physician (MD or DO) will be required at the discretion of the instructional coordinator with consultation with the Dean before the student can return to the clinical setting. Information provided by the physician must include a statement confirming that the student's condition has resolved and no longer presents a client/student safety concern. The student must be able to resume functioning at a level compatible with meeting clinical requirements and achieving clinical competence.

Suspicious Behavior:

Behavior consistent with influence of alcohol or drugs indicates that the student is affected by a drug or alcohol in any detectable manner, whereby the safety of the student, peers, patients, or members of the public, or the student's clinical/class performance, or the safe and efficient operation of the facility or the property of the facility are threatened or impaired. For purposes of this guideline, a student who emits an odor of alcohol or illegal drugs shall be under the influence. Under no circumstances should a student who delivers patient care, meets the public, or performs essential services consume alcoholic beverage and/or mind-altering drugs before reporting to class or clinical.
Students who demonstrate behaviors consistent with influence of alcohol or drugs will immediately be removed from the setting. The students will not be allowed to drive home from clinic. Rather, they will have to call a cab, family member or friend to pick them up. Students are responsible for the cost of any medical evaluations or drug testing requested

by the Dean of Health Career and Technical Education, Math & Science prior to returning to clinical settings.

Exposure Incidents:

Students are to adhere to standard precautions and OSHA blood borne pathogen standards. This includes safe handling and disposing of sharp and contaminated material, and adherence to agency exposure control procedures indicating use of personal protective equipment and timely reporting of exposure incidents. If stuck with a needle or sharp object, or exposed to blood or body fluids during lab, clinical, or program activities, the following steps should be taken:
Immediately wash the affected area with soap and running water (or appropriate first aid) and contact your clinical instructor. Contact instructional and clinical coordinators or Dean if the clinical instructor cannot be reached. The clinical instructor will then contact the appropriate infection control personnel at the clinical agency to verify the recommendations for adherence to current center for disease control (CDC) standards for follow-up testing and post exposure prophylaxis (PEP) treatment. Follow the immediate infection control recommendations of the agency in which the exposure occurred.

- Fill out the EPCC incident report form and the agency incident report form. The original EPCC incident report form, along with a copy of the agency incident form must be filed in student records.
- Follow agency guidelines for follow-up testing and post exposure prophylaxis (PEP) treatment. Students should also notify their health care provider.

It is vital that action be taken immediately, as delays beyond 4 hours may affect treatment outcomes. For further information, see www.cc.gov or http://www.osha.gov/OSHDoc/data_BloodborneFacts/index.html.

Health Related Issues:

If a student is subject to one or more of the following conditions, the college strongly recommends the student submit a medical doctor's written recommendation as soon as possible for continuation in the respiratory theory and clinical courses (Pregnancy, Trauma, Surgery, Mental Health, and Infectious Diseases and Immunocompromised conditions). The college is not responsible for illness, injuries or infectious contacts. Students who have symptoms of a possibly infectious disease should immediately contact their health care provider. Students with diagnosed infectious diseases must notify program instructional coordinator immediately to facilitate notification to appropriate agencies by the Dean. Arrangements will be made for clinical make-up for students who have documented infectious diseases. Students with documented infectious diseases must obtain a release from their health care provider prior to returning to the class/lab/clinical setting. Students who are aware or have reason to believe they have an infectious disease

and intentionally expose health care workers and clients will be immediately terminated from the program.

HIPAA Awareness Education:

The Health Information Portability and Accountability Act of 1996 is a federal law dealing with the privacy and security of health information. Complying with the HIPAA rules is mandatory!

- ✓ There are fines for each violation of HIPAA privacy (and security) safeguards.
- ✓ There are also possible criminal penalties.

It is El Paso Community College's responsibility to provide HIPAA awareness training for all health care students. Students in the respiratory care program will be required to complete HIPAA awareness training (as mandated by the HIPAA Act of 1996) before the first clinical course. Violation of the confidentiality guidelines outlined in this training is a critical incident and grounds for termination in the program. Documentation will be maintained by the program clinical coordinator to verify each student has received this training annually while in the program.

Incident Reports:

Hospital and/or clinical agency incident reports involving any student and a client are to be described in full and signed by the student and clinical instructor. An EPCC incident form for a student injury needs to be completed and filed at the college and accompanied by a copy of the agency incident report if available.

Invasive Procedures:

Students are not allowed to conduct invasive procedures by themselves or other students without direct supervision for any reason while in the program. Students in violation of this procedure will be removed from the program.

Medication and Treatment Guidelines:

The following guidelines are written to ensure students understand their responsibilities and limitations in the administration of medication and delivery of treatments in the clinical settings. Students must adhere to all guidelines of the clinical facility.
General Medication Information

A. Students will administer medications to assigned clients during clinical hours at the discretion of the clinical instructor.
    a. Students may administer medications with clinical instructor supervision. The instructor is responsible for communicating with floor personnel and students regarding medication administration.

The clinical instructor will directly observe the medication that has been prepared and is ready for administration according to the five rights: right drug, right dose, right time, right route, and right client.

b. Prior to administration, all medications are checked with doctor's orders.

B. STAT and PRN medications may be given after the student checks with the clinical instructor.
C. Students may not administer any medication which had been prepared by another person. There are no exceptions to this rule.
D. Prior to the administration of a medication, students are responsible for evidencing fundamental medication knowledge: trade and generic name, usual dosage, action, use, side effects, respiratory implications, and reason the client is receiving.
E. Students are responsible for charting all medications given immediately after admitting. The clinical instructor will co-sign all entries according to facility procedure.
F. Students must report all medication errors immediately to the clinical instructor and assign respiratory care staff to complete the facility incident report form and the EPCC incident report.
G. Students are responsible to review related lab values prior to administration of the medication.
H. Students are to follow medication administration procedures of the institution.

Needle Stick Procedure:

The respiratory care department is committed to providing a safe environment in relation to the usage of sharps container.

A. Needles are never recapped.
B. Needles that have been used for manikin practice are not recapped and are immediately discarded into approved sharps containers, which are available throughout the lab.
C. Students work with needles in the lab only with direct supervision by program faculty.
D. Needleless injection systems and needless guards are utilized wherever possible. Students do not remove used needles from the lab. In the lab, if a needle stick injury occurs when it does not involve the potential of blood borne pathogen transmission, the following steps are taken:
    a. Immediately wash the affected area thoroughly with antimicrobial soap and water.
    b. Contact program faculty who will assist with completion of the program accident form.
    c. Individuals are instructed in the signs/symptoms of infection and encouraged to seek medical advice as appropriate.
    d. Faculty will route the accident form through the Dean. In the clinical setting, agency procedure will be followed.

Pregnancy:

Pregnancy is considered a healthy state. It is a common expectation and practice that women continue work and career activities during pregnancy. The respiratory program encourages students who are pregnant to continue their program of studies in the respiratory care area, if their physician/provider concurs that it is safe for them to do this. A respiratory care student who is pregnant must inform the instructional coordinator of the program in writing. This letter must stipulate:

1. Expected date of delivery.
2. Intent to continue the program while pregnant.
3. A statement releasing EPCC for liability for any complications that may arise.
4. Permission to return to classroom and clinic after delivery.
5. A letter from the health care provider caring for the student during her pregnancy which states that the student may participate fully in the program of studies for respiratory care, including clinical. The letter must also address the lifting and activity limitations for the student. For example, recommending a student lift with assistance is a common preventative recommendation. The statement that the student cannot lift over ten pounds implies restrictions in activity and that clinical activities are a risk to the student and unborn child.

Under all circumstances, it is necessary that students meet the course objectives. If at any time the student must be limited in activities, as determined jointly by the health care provider and student, this limitation must be documented for the Dean of Health Career and Technical Education, Math & Science. In such event, the Dean will determine if the limitation permits satisfactory achievement of course objectives. Any conditions, including those of pregnancy, which prevent the student from meeting course objectives will necessitate the student's withdrawal from the course.

A student in good academic standing, who must withdraw from the course due to conditions of pregnancy, may register for the course when it is offered again. Note that students, who are not immune to MMR and are unable to get a booster during pregnancy, are not eligible for clinical rotations.

Students whose TB test has expired over 1 week are required to obtain a two-step TB test (a two-step TB test can be done within 1-3 weeks of each other but cannot be more than 6 months apart). Students are not allowed to attend clinical orientation or clinical with an expired TB test. A TB gold test can be done in place of the two-step TB test to verify absence of disease. These tests are expensive, and typically not encouraged.

Information

A general student grievance will consist of a complaint by a student who feels unfairly treated by an employee of the college in instances other than those related to student conduct, or scholastic concerns, or sexual harassment. Should a concern arise, every effort should be made to resolve the concern with the person involved. If this is not possible, the student should contact an appropriate campus Dean as soon as possible after the occurrence.

Health Careers Mission

It is the mission of Health Careers and Technical Education, Math, & Science to provide educational opportunities that prepare individuals to improve their personal quality of life and to contribute to their economically and culturally diverse community.

Health Careers Vision

The Health Careers and Technical Education, Math & Science Division is a primary source of population, a local resource for community health care services, and a contributor to medical science research as appropriate for a community college.

Health Careers Philosophy

The Health Careers and Technical Education, Math & Science Division meet the community's need by providing opportunities for individuals to become qualified members of a health care profession or to pursue a career related to math or science. The Division provides quality education utilization state of the art instructional methodologies, equipment, and lifelong learning. The Division of Health Careers and Technical Education, Math & Science offer a variety of state send nationally accredited programs.

Health Careers Goals

- Provide a standard of excellence in the education of students seeking careers related to healthcare, math, or science.
- Provide educational and professional health care services to the community.
- Develop and coordinate an effective system for the recruitment of students into Health Careers and Technical Education, Math & Science courses/programs.
- Improve student retention, program completion and student skill development in Health Careers and Technical Education, Math & Science courses/Programs.
- Provide an on-going systematic faculty and staff development plan which promotes the goals of the Division of Health Careers and Technical Education, Math & Science
- Assist in the planning, and implementation of projects related to border health.
- Promote articulation with secondary and post-secondary institutions.
- Provide competency-based education in Health Careers and Technical Education, Math & Science courses/Programs.
- Support life-long learning and career progression.
- Encourage activities which promote effective utilization of personnel, space, supplies and equipment in expanding and maintaining quality courses/programs.
- Provide a solid foundation in math and science courses which enables student to transfer to upper division coursework at colleges and universities and/or which make graduates who earn an associate degree in a math or science related area of concentration eligible for mid-level positions in business and industry.

Student Academic Honesty:

Academic dishonesty will not be tolerated in any course at the college. Plagiarism and other forms of cheating are examples of such dishonesty and will result in profound consequences. Plagiarism includes, but is not limited to, the following:

- Use direct quotes without quotation marks and textual citation of the material.
- Paraphrase without crediting the source.
- Present another's ideas as their own without citing the source.
- Submit material developed by someone else as their own (this includes purchasing or borrowing a paper or copying a disk).
- Submit a paper or assignment for which so much help has been received that the writing is significantly different.

Cheating includes, but is not limited to, the following:

- Copy another student's exam or homework and submit the work on their own.
- Purposefully allow another student to copy their work and submit that work as their own.
- Refer to a text, notes or other material during an exam without authorization to do so.
- Submit a paper or assignment for which the student has received so much help that the writing is significantly different.
- Possess a test copy and/or test answers.
- Pass test answers to another student before, during or after a test.

Cheating or plagiarism, whether intentional or accidental, is a serious offense. Disciplinary action by the instructor will be initiated.
An instructor who suspects a student of plagiarism or cheating must inform the student of the allegation as soon as possible. If the instructor determines the student has plagiarized or cheated, the instructor may do any or all the following:

1. Assess the exam or project in question with a zero ("0").
2. Reduce the student's grade for the course.
3. Assign the student a grade of "F" for the course or.
4. Refer the student for additional disciplinary action that includes, but not be limited to, probation, suspension or expulsion, provided that the decision on the appropriateness of probation, suspension or expulsion must be made by appropriate college personnel.

In the event of plagiarism or cheating, the instructor must send a written report of the incident and action taken by the instructor to the student, the program instructional coordinator, and the Dean of Health Career and Technical Education, Math & Science. The instructor may request in the written report that additional disciplinary action be taken by the Dean. A decision on the recommendation, if any, will be made by the Dean.

Student Appeal:

If the student believes that the finding of plagiarism or cheating is in error or the penalty imposed by the instructor unjust, the student may appeal the fining to the Dean. The

appeal must be in writing and delivered to the Dean after the student has met with the instructor of the finding or intended disciplinary action.
The written decision of the Dean shall be final, subject to the student's right to file a final grade appeal, except in cases in which probation, suspension, and expulsion are the sanction sought by the instructor. In cases in which probation, suspension or expulsion are the sanctions sought by the instructor the decision on these sanctions may only be made in compliance with the student appeal procedure.

Civility Statement:

As an academic institution, El Paso Community College exists for the transmission of knowledge, the pursuit of truth, the development of students and the general well-being of society. Membership in this academic community places a special obligation on all members to preserve an atmosphere conductive to the freedom to teach and to learn. Freedom to teach and to learn depends on opportunities and conditions in and outside the classroom that fosters respect, integrity, honor, and civil conduct. El Paso Community College defines civility as the act of treating others, as well as ourselves, with respect, dignity, and care. Civility is demonstrated when we are sensitive to the impact that our communications, practices and behaviors have on others, and when we acknowledge each person's self-worth and unique contributions to the community. All members of the college community, students, faculty, and staff, have the right to work and learn in a safe environment which is civil in all aspects of human relations.
Although emphasis is placed on counseling and guidance in cases of misconduct, the college may take disciplinary action and/or civil and criminal actions against a person disrupting college activities in order to ensure the collective good of the community and to protect the rights of its members. The authority of the college includes dismissing a student whose conduct is unsuited to the purpose of the college.

Student Conduct Code:

El Paso Community College students in both credit and non-credit are responsible to conduct themselves in a manner that maintains an educational environment conducive to learning. All EPCC procedures apply to college-sponsored activities which are held either on or off-campus and online.
The EPCC Student Conduct Code becomes effective at the time of acceptance to the college or at the time of enrollment for non-credit classes. Students at EPCC are expected to conduct themselves as good citizens of the college community by respecting the rights and property of others. Any person who commits, attempts to commit, or incites/aids others in committing acts of misconduct may be subject to disciplinary procedures by the college. The following student conduct may be grounds for disciplinary action. This is not an exhaustive list of all behaviors that may be subject to disciplinary sanctions.

A. Obstruction/disruption of learning, teaching, administrative processes, disciplinary procedures, or any college authorized function/activity. Unauthorized occupation/use of (or unauthorized entry into) any college facility.

B. Conduct which threatens or endangers the health/safety of any person on the campus or at any college authorized function/activity including, but not limited to, physical abuse, the threat of physical abuse, sexual abuse, and assault.
C. Knowingly furnishing a false report or false warning that property under college control or supervision may be subject to a bombing, fire, crime, emergency or other catastrophe.
D. Theft, defacement, or damage to property belonging to the College or to any agency/person on the campus.
E. Interference with any lawful right of any person on the campus including the right of access to college facilities.
F. Unlawful use, possession, selling, distributing or purchasing of alcohol or alcoholic beverages, prescription or non-prescription drugs, other controlled substances or drug paraphernalia.
G. Use or possession of firearms, ammunition, dangerous weapons, substances, or materials (except as expressly authorized by the college); or bombs, explosives, or explosive, incendiary devices prohibited by law. Weapons include, but are not limited to knives, guns, firearms, BB guns, or simulations of any such items (devices that appear to be real). A weapon may also include an object designed for use or used in a manner to inflict harm to a human being or animal or to damage property.
H. Off campus conduct which directly and/or adversely disrupts or interferes with the educational or other function of the college.
I. Verbal abuse, humiliation, intimidation, stalking or harassment of any person in the college community.
J. Dishonesty in the program is not acceptable in any form, at any time during the college process. This includes cheating, plagiarism, forgery, and falsification of records, misrepresentation, and lying.
K. Unauthorized use or possession of property belonging to the college or any agency/person on campus.
L. Violation of any local, state, or federal law as evidenced by conviction.
M. Gambling at a college sponsored activity without specific authorization by the administration.
N. Failure to comply with the directives of college personnel acting in the performance of their duties and/or failure to identify oneself with college officials when requested to do so.
O. Disorderly, lewd, indecent, or obscene conduct.
P. Operating a motor vehicle recklessly poses a threat to the safety of others, on campus or at college-sponsored activities off campus.
Q. Violations of college procedures or regulations supplement the student conducts code, which are published in any other official college publication.

Student Counseling Procedure

Student counseling is a procedure used to promote, aid and maintain superior student performance. The main purpose is to provide feedback to the student regarding his/her performance and to specifically identify any deficiencies in his/her performance or behavior that is detrimental to the status of the Respiratory Care Student's clinical performance.

. Faculty will identify deficiencies, unacceptable behavior and/or non-compliance with the standards outlined in this manual. Faculty will also identify corrective action needed and outline the consequences imposed in the event the student fails to correct the violation. All information will be documented on an EPCC counseling form and signed by both students and faculty. A copy will be issued to the student, and a copy will be forwarded to the Division Dean for review.
If the student does not take appropriate corrective action, faculty will schedule a follow up counseling session which will include imposed consequences for student actions and may include a recommendation for administrative withdrawal from the program.

Counseling sessions with each student may be held during each semester to advise the student as to his or her progress in the program.

Guidelines for Students with Disabilities

Students with permanent or temporary verified disabilities are invited to register with the Center for Students with Disabilities where counseling, registration assistance, adaptive equipment and a variety of support services are available. Support services can be arranged for all campus locations. For more information, refer to the College Catalog.
If accommodations are needed to complete program competencies, a plan will be developed to assist students to meet course/program competencies whenever possible. An individualized learning plan will be jointly developed between the student, the faculty member, and a representative from the Center for Students with Disabilities.
To initiate this process, please contact any of the following individuals: a Health Occupations Counselor, the Instructional Coordinator, a representative of the Center for Students with Disabilities, or the Division

Miscellaneous Program Information

Respiratory Care Club

1. Every summer the respiratory care class forms the Respiratory Care Club. This is a student organization, which consists of students in the respiratory care program and is assisted by a faculty club advisor.
2. Respiratory Care club members elect club officers to represent the students during Student Government meetings. The elected officers are the club President, Vice-President, Secretary, & Treasurer.

3. The club organizes fundraisers to help finance certain projects and seminars throughout the school year.
4. The President is also the student representative on the Respiratory Care Technology Program Advisory Committee. The President serves on this committee one year post graduation.

Class Officers:

The respiratory care department supports the nomination of individuals who evidence leadership qualities that will assist with class responsibilities be accountable and professional, and initiative taking in addressing class issues. The following are guidelines for the nominated officers. Qualification of class officers:

1. Cheerful outlook toward classmates, respiratory care faculty and the college.
2. Leadership skills.
3. Integrity, honesty, loyalty, dependability and punctuality.
4. Supportive of classmates, faculty, staff and college.
5. Assertive and willing to express their classmates' concerns.
6. Dedicated to learning.

Role of class president:

1. Represent the entire class.
2. Work with the proper chain of command at the college.
3. Communicate monthly or more with the class advisor.
4. Listen to classmates' concerns; allow them to speak for themselves.
5. Support class officers and classmates.
6. Attend advisory committee meetings.
7. Over sees any fund-raising activities.

Role of Vice President:

1. Collaborate cooperatively with the president.
2. Support the president, class officers and classmates.
3. Assist with tasks delegated by the president.

Role of Treasurer

1. Utilize basic math skills and record keeping skills.
2. Demonstrate creativity when fund-raising activities is planned.
3. Demonstrate assertiveness with classmates regarding collection from fund raising events.

Role of Secretary

1. Utilize basic writing skills.
2. Take minutes at class meetings and faculty class officers' meetings.
3. Post minutes as appropriate for college requirements.

Nominations of class officers:

1. Students may nominate themselves or another student with their permission.

Elections of Class Officers:

A meeting will be held to elect officers. Faculty advisor will be present when elections are held and will count the ballots.

Meetings:

1 All officers must attend any class meeting. Meetings are held once a month, an officer must attend these meetings.
2. All officers must attend the faculty/class officers' meetings.

ABC's of exam preparation:

Consider the use of an ABC approach to help in your preparation for NBRC exams. Using this method will help you in your exam preparation. Learn to individualize a road map for success on the NBRC exams.

A- is for approach.

1. Start studying early - Don't cram.
2. Identify study resources
3. Identify support people

B- is for Be Your Own Best Friend

1. Adopt a positive mental attitude
   This is called the "I think I can" approach.
2. Be initiative-taking
   Take the test seriously and act accordingly.
3. Manage your anxiety
   A little anxiety is motivating…A lot is paralyzing.

C - is for content strategy

1. Identify your strengths (i.e., what you know)
2. Identify your weaknesses (i.e., what you don't know)
3. Identify the key content areas for review based on the anatomy (matrix) of the certification exam content described
4. Develop your own individualized strategic study plan

Strategic Study Plan Worksheet

Overview

What is the strategic study plan worksheet?

It is a road map based on the exam content, an outline of the NBRC exam for creating an individualized plan of study.

How will I benefit from creating a strategic study plan for my exam review?

The individualized strategic study plan will promote studying that is both strategic and efficient.

Strategic studying:
This means focused studying on NBRC exam content areas that:

- Have a high number of questions and are self-identified as needing further review.

This means avoiding time spent studying content areas where:

- There are few or no questions.
  and/or
- You already have sufficient content knowledge.

Spending time on these areas is a common pitfall that uses valuable study time without the benefits of increasing your exam score.

Efficient Studying:
This means spending study time wisely on only content that:

- Involves a high number of exams questions.

Efficient studying will help leverage your review towards your goal of answering the greatest number of exam questions right to pass. At the same time, efficient studying will reduce your overall study time (Studying Smart).

What results can I expect from using my individualized strategic plan?

1. To focus your study on content areas that have a high number of questions on the exam
2. To focus on studying content areas that you are unfamiliar with rather than those areas where you already have sufficient content knowledge
3. To increase the number of NBRC CRT and RRT exam questions you answer correctly.
4. To decrease your overall study time

What are the key components of the strategic study plan?

1. Individualized to meet unique needs of each student.
2. Based on the content outline of the NBRC Exam matrix.
3. Based on the strategy component outlined in the review course

<u>Calculations:</u>

Calculating FiO_2
Problems

1. Determine the FiO_2 at an airflow rate of 3 L/min and an oxygen flow rate of 6 L/min.

2. To achieve a FiO_2 of 0.45 at an oxygen flow rate of 3 L/min, what flow of compressed air will be needed?
3. What is FiO2 at an air flow rate of 5 L/min and an oxygen flow rate of 2 L/min?

Equation

$$FiO_2 = \frac{(0.21 \times \text{air flow}) + (\text{oxygen flow})}{\text{Total system flow}}$$

Example: Calculate the FiO_2 at an air flow rate of 4 L/min and an oxygen flow rate of 4 L/min.

Solution

$$\frac{(0.21 \times 4) + 4}{8} = \frac{4.84}{8} = 0.61 \text{ FiO2}$$

Calculating flow rate
Problems
Calculate the flow rate (in L/min) with the following ventilator settings.

1. Inspiratory time = 2.5 second
   Tidal volume = 1500 milliliters
2. Inspiratory time = .7 second
   Tidal volume = 200 milliliters
3. Inspiratory time = 0.5 seconds
   Tidal volume = 75 milliliters

Equation
Flow rate (L/sec) = tidal volume corrected / inspiratory time
Flow rate (L/sec) x 60 = flow rate (L/min)
Example: What is the flow rate at the following ventilator settings?
Tidal volume = 2000 milliliters
Inspiratory time = 1.2 seconds

Solution:
2000 milliliters = 2 L/1.2 sec = 1.67 L/sec, or 1.67 x 60 = 100.2 L/min

Calculating Tidal Volume
Problems
Calculating the tidal volume in milliliters with the following ventilator settings.

1. Flow rate = 6 L/min
   Inspiratory time = 5 seconds
2. Flow rate = 40 L/min
   Inspiratory time = 2.5 seconds
3. Flow rate = 80 L/min
   Inspiratory time = 1.2 seconds

Examples: Calculating the tidal volume at a flow rate of 12 L/min and an inspiratory time of 1 second

Solution

12 L/min/60 = 0.2 L/sec
0.2 x 1 = 0.2 liter, or 200 milliliters tidal volume

Calculating inspiratory time

Problems

Calculate the inspiratory time with the following ventilator settings.

1. Tidal volume = 500 milliliters
   Flow rate = 40 L/min
2. Tidal volume = 45 milliliters
   Flow rate = 8 L/min
3. Tidal volume = 750 milliliters
   Flow rate = 25 L/min

Equation

$$\frac{\text{Tidal volume (liters)}}{\text{Flow rate (L/sec)}}$$

Example: Calculate the inspiratory time with a tidal volume of 450 milliliters and a flow rate of 30 L/min

Solution

$$\frac{0.45 \text{ liters (tidal volume)}}{0.5 \text{ L/sec}}$$

=0.9 inspiratory time

Calculating inspiratory time when desired rate and I:E ratio is known.

Problems

1. Determine the required inspiratory time needed to achieve and I:E ratio of 1:2.5 at a rate of 20 breaths/min
2. At a rate of 70 breaths/min, and an I:E ratio of 1:1, determine the inspiratory time.
3. Determine the inspiratory time needed to achieve and I:E ratio of 1:2 at a rate of 15 breaths/min

Equation

$$\frac{\text{Respiratory cycle time}}{\text{Sum of the I:E ratio}} = \text{necessary inspiratory time}$$

Example: Determine the proper inspiratory time using the following ventilator parameters.

Ventilator rate = 35 breaths/min
Desired I:E ratio = 1:2

Solution

First, determine the respiratory cycle time:
Respiratory cycle = (60 sec/35) = 1.71 seconds
Next, add the two numbers of the desired I:E ratio (1:2 = 3) and divide into the respiratory cycle time:
1.71/3 = inspiratory time of 0.57 second

Corrected tidal volume.
Determining corrected tidal volume
Problems
Determine the corrected tidal volume with the following ventilator settings.

1.	Vt	=	475 milliliters
	PIP	=	45 cm H_2O
	PEEP	=	8 cm H_2O
	Circuit compliance	=	4 ml/cm H_2O
2.	Vt	=	660 milliliters
	PIP	=	20 cm H_2O
	PEEP	=	0 cm H_2O
	Circuit compliance	=	3.8 ml/cm H_2O
3.	Vt	=	150 milliliters
	PIP	=	40 cm H_2O
	PEEP	=	5 cm H_2O
	Circuit compliance	=	1.5 ml/cm H_2O

Equation

Exhaled tidal volume – compressed volume = corrected volume
Compressed volume = (PIP – PEEP) x circuit compliance
Circuit compliance = $\frac{\text{test volume (milliliters)}}{\text{Plateau pressure (cm } H_2O)}$

Example: Determine the corrected Vt of a pediatric patient being ventilated at the following parameters.

Exhaled Vt	=	550 milliliters
PIP	=	32 cm H_2O
PEEP	=	4 cm H_2O
Circuit compliance	=	1.5 ml/cm H_2O

Solution

First, determine the corrected PIP:
32 – 4 = 28 cm H_2O
Next, determine the compression volume:
28 cm H_2O x 1.5 ml/cm H_2O
= 42 milliliters compression volume
Now calculate corrected tidal volume:
550 milliliters – 42 milliliters = 508 corrected Vt

Calculate Mean Airway Pressure

Calculating mean airway pressure

Problems

Calculate the mean airway pressure using the following ventilator settings.

1. PIP = 45 cm H_2O
   PEEP = 3 cm H_2O
   Inspiratory time = 0.5 second
   Expiratory time = 0.7 second
2. PIP = 22 cm H_2O
   PEEP = 5 cm H_2O
   Inspiratory time = 1.2 second
   Expiratory time = 2.5 seconds
3. PIP = 26 cm H_2O
   PEEP = 4 cm H_2O
   Inspiratory time = 0.6 second
   Expiratory time = 2.5 seconds

Equation

MAP = [PIP x (inspiratory time/ total breath duration)] + [PEEP x (expiratory time/total breath duration)]

Example: Determine the mean airway pressure using the following ventilator settings.

PIP = 23 cm H_2O
PEEP = 5 cm H_2O
Inspiratory time = 0.51 second
Expiratory time = 1.53 second

Solution

First, calculate the total breath duration:

0.51 + 1.53 = 2.04 seconds

Next, calculate the MAP using the given formula:

[23 x (0.51 x 2.04)] + [5 x (1.53 x 2.04)]

[23 x 0.25] + [5 x 0.75]

MAP = 9.5 cm H_2O

Calculating time constant (Kt)

Problems:

For each of the following, calculate the necessary expiratory time needed.

1. Compliance = 5 ml/cm H_2O
   Resistance = 80 cm H_2O/L/sec
2. Compliance = 5 ml/cm H_2O
   Resistance = 80 cm H_2O/L/sec
3. Compliance = 40 ml/cm H_2O
   Resistance = 15 cm H_2O/L/sec

Equation

1 Kt = compliance (in L/cm H_2O) x resistance

3 Kt are required for 95 percentage of the tidal volume to exit the lungs.

Example: Determine the necessary expiratory time on a patient with a compliance of 25 ml/cm H_2O and a resistance of 30 cm H_2O/L/sec.
Solution:

First, convert the compliance into L/cm H_2O:
25 milliliters = 0.025 liters.
Next, multiply the compliance and resistance:
0.025 x 30 = 0.75 second (1Kt)
0.75 x 3 = 2.25 seconds of exhalation time is needed.

Calculating expiratory time to achieve desired rate.
Problems:
Determine the necessary expiratory time to achieve the following parameters.

1.	Rate	=	25	
	Inspiratory time		=	0.8 second
2.	Rate	=	75	
	Inspiratory time		=	0.4 second
3.	Rate	=	8	
	Inspiratory time		=	1.4second

Equation:

60/desired rate = total cycle time
Total cycle time – inspiratory time = desired expiratory time

Example: What expiratory time is needed to achieve a rate of 40 with an inspiratory time of 0.5 seconds?

Solution:

Total cycle time = 60/40 = 1.5 seconds
1.5 seconds – 0.5 seconds
Expiratory time = 1 second

Pharmacologic calculations
Definitions:

Solute – The drug that is dissolved in the solvent.
Solvent – The liquid in which the solute is dissolved.
Solution – The combined mixture of solute and solvent
Concentration – The amount of solute per unit of solution

Important facts:

1 milliliter of water weighs 1 gram.
At 1 percent solution and a 1:100 concentration both have 10 milligrams of solute per milliliter of solvent.

Calculating percent solution
Equation:
Percent solution = solution weight (grams) / solvent volume (milliliters) x 100
Example: Determine the percent solution when 100 milligrams of drug is added to 100 milliliters of water.

Solution:

First, convert milligrams into grams.
(0.1/100) x
0.001 x 100 = 0.1% solution

Problems:

1. What is the percent solution when 225 milligrams of solute are added to 100 milliliters of solution?
2. Adding 825 milligrams of drug to 200 milliliters of water results in what percentage solution?

3. What percentage solution results when 2.0 grams of drug are added to 100 milliliters of solution?

State the normal value for each of the following:

- Urine output — Minimum 40 mL/hour, range 40 -60 mL/hour
- Heart rate (Adult) — 60 -100/min
- Intracranial Pressure (ICP) — 5 – 10 mm Hg.
- Diagnostic Chest Percussion — Resonant
- Breath Sounds — Vesicular
- Heart Sounds — S_1, S_2
- Blood Pressure (Adult) — 120/80 mm Hg, range 90/60 – 140/90 mm Hg
- Cerebral Perfusion Pressure (CPP) — 70 – 90 mm Hg.
- Red Blood Cell Count (RBC) — 4 – 6 mill/mim^3
- Hemoglobin (Hb) — 12 – 16 gm/100 mL blood
- Hematocrit (Hct) — 40 – 50%
- White Blood Cells — 5,000 – 10,000/mm^3
- Potassium (K^+) — 4.0 mEq/L, range 3.5 – 4.5 mEq/L
- Sodium (Na^+) — 140 mEq/L, range 135 – 145 mEq/L
- Chloride (CI) — 90 mEq/L, range 80 – 100 mEq/L
- Bicarbonate (HCO_3) — 24 mEq/L, range 22 – 26 mEq/L
- Creatinine — 0.7 – 1.3 mg/dL
- Blood Urea Nitrogen (BUN) — 8 – 25 mg/dL
- Clotting Time — Up to 6 Minutes
- Platelet Count — 150,000 – 400,000/mm^3.
- Activated Partial

Thromboplastin Time (APTT)	24 – 32 seconds
• Prothrombin Time (PT)	12 – 15 seconds
• Thrombin Time	7 – 12 seconds
• Term Infant (Gestational Age)	38 – 42 weeks
• APGAR Score	7 – 10
• Temperature (Infant)	36.5℃
• Heart Rate (Infant)	110 – 160/min
• Respiratory Rate (Infant)	30 – 60 breaths/min
• Blood Pressure (Infant)	60/40 mm Hg
• Birth Weight (Term Infant)	3000 g
• Dubowitz Score	40
• New Ballard Score (NBS)	40
• Blood Glucose (Term Infant)	> 30 mg/dL
• L/S Ratio	30 torr, 3 – 5%
• Pulse Oximetry (SpO_2)	93 – 97%
• Carboxyhemoglobin	1 – 3%
• Mean Arterial Pressure (MAP)	93 – 94 mm Hg.
• Right Atrial Pressure	2 – 6 mm Hg, 4 – 12 cm H2O
• Right Ventricle Pressure	25/0 mm Hg
• Pulmonary Arterial Pressure (PAP)	25/8 mm Hg, Mean 13 – 14 mm Hg.
• Pulmonary Capillary Pressure	8 – 10 mm Hg
• Pulmonary Capillary Wedge Pressure (PCWP)	4 – 12 mm Hg
• Left Atrial Pressure	2- 6 mm Hg
• Left Ventricle	

Pressure	120/0 mm Hg
• Cardiac Output	4 – 8 L/min
• Cardiac Index	2 – 4 min/mm^2
• Pulse Pressure	40 mm Hg
• Systemic Vascular Resistance (SVR)	< 20 mm Hg/L/min, 1600 Dynes/sec/m^{-5}
• Pulmonary Vascular Resistance (PVR)	< 2.5 mm Hg/J/min, 200 Dynes/sec/cm^{-5}
• Endotracheal Tube Cuff Pressure	≤ 20 mm Hg, ≤ 25 cm H2O.
• Pre-term Infant ET Tube Size	2.5 – 3.0 mm
• Term Infant ET Tube Size	3.0 – 3.5 mm
• Adult Male ET Tube Size	8.0 – 9.0 mm
Adult Female	
• ET Tube Size	7.0 – 8.0 mm
• ET Tube Markings for Oral Intubation (Adult)	21 – 25 cm at lips
• ET Tube Markings for Nasal Intubation (Adult)	26 – 29 cm at nares
• Body Humidity	44 mg/L or 47 mm Hg at 37^0C
• PAO_2	Varies directly with patient's FiO_2.
• A-a DO_2 /4 + 4)	5-10 mm Hg on 21%, 25-65 mm Hg on 100% O2 or (Age
• CaO_2	17-20 vol%
• CvO_2	12-16 vol%
• C(a-v) O_2	4-5 vol%
• PaO_2	380 torr or >
• SaO_2	98% Range 95-100%
• V_D/V_T Ratio	20-40%
• $PaCO_2$	40 torr Range 35-45 torr
• PaO_2	97 torr Range 80-100 torr
• pH	7.40 Range 7.35-7.45
• Newborn $PaCO_2$	< 50 torr
• Newborn PaO_2	> 60 torr
• Spirometry	

Calibration Syringe	3.0 Liters Range 2.895 – 3.105 L (± 3.5%)
• Maximum Inspiratory Pressure (MIP)	-80 cm H_2O.
• Maximum Expiratory Pressure (MEP)	+ 160 cm H_2O.
• Spirometry Vital Capacity (VC)	5 – 6 Liters Typical or 80% of predicted or higher
• Spirometry FEV_1	3.5 – 4.0 Liters Typical or 80% of predicted or higher
• Spirometry FEV_1/FVC	70% or greater
• Spirometry $FEF_{200-1200}$	8 L/sec, or 480 L/min, Typical or 80% of pred. or higher
• Spirometry FEF_{25-75}	6 L/sec, or 360 L/min, Typical or 80% of pred. or higher
• Spirometry Peak Expiratory Flow rate (PEFR)	10 L/sec, or 600 L/min. Typical or 80% predicted.
• Spirometry Airway Resistance	0.6 – 2.4 cmH_2O/L/sec
• Spirometry DL_{CO}	25 mL CO/min/mm Hg (STPD)
• Tidal Volume (V_T)	5-8 mL/kg
• Vital Capacity (VC)	65 – 75 mL/kg or 10 X V_T
• Respiratory Rate	12 – 20 breaths/min
• Minute Ventilation (VE)	5 – 6 L/min
• Static Lung Compliance	60 – 100 mL/cmH_2O
• Mean Airway Pressure (Paw) for patients with normal compliance and resistance	5 – 10 cmH_2O
• Mean Airway Pressure (P_{aw}) for patient with ARDS	15 – 30 cm H_2O
• Mean Airway Pressure (P_{aw}) for patients with obstructive disease	10 – 20 cm H_2O

- CPR Breathing Rate (Adult) 10 – 12 breaths/min, or every 5 – 6 seconds.
- CPR Breathing Rate (Child) 20 breaths/min, or every 3 seconds.
- CPR Breathing Rate (Infant) 20 breaths/min, or every 3 seconds.
- CPR Breathing Rate (Newborn) 40 – 60 breaths/min.
- CPR Compression to Ventilation Ratio (Adult) 30:2 both one and two rescue.
- CPR Compression to Ventilation Ratio (Child) 30:2 one rescue 15:2 two rescue
- CPR Compression to Ventilation Ratio (Infant) 30:2 one rescue 15:2 two rescue
- CPR Compression to Ventilation Ratio (Newborn) 3:1 both one and two rescue.
- Smoking history (Pack Years): # of Packs/Day X # of Years Smoked
- Cerebral Perfusion Pressure (CPP): CPP = MAP – ICP, MAP = Mean Arterial Pressure, ICP = Intracranial Pressure
- Estimating Heart Rate (from an electrocardiogram/ECG): 300 ÷ # of large boxes between R waves or 1500 ÷ # of small boxes between R waves
- Mean Arterial Pressure (MAP)
  (2 X Diastolic) + Systolic ÷ 3
- Fick Equation (Cardiac Output):
  $Q_T = VO_2 \div C(a\text{-}v)\ O_2$ (10)
- Cardiac Output (using stroke volume): Q_T = Heart Rate X Stroke Volume
- Cardiac Index: CI = Q_T ÷ BSA = Cardiac Output ÷ Body Surface Area
- Pulse Pressure: Systolic Pressure – Diastolic Pressure
- Stroke Volume Equation: Q_T ÷ Heart Rate
- Systemic Vascular Resistance (SVR): (MAP -CVP) ÷ Cardiac Output
- To convert mm Hg/L/min to Dynes/sec/cm^{-5}: Multiply mm Hg/L/min by 80 (i.e., 20 X 80 = 1600 Dynes/sec/cm^{-5})
- Pulmonary Vascular Resistance (PVR): (MPAP - PWP) ÷ Cardiac Output
- PAO_2: (P_B – PH_2O) x FiO_2 – $PaCO_2$ 0.8
- A – a DO_2: PAO_2 – PaO_2
- CaO_2: (Hb X 1.34 X SaO_2) ÷ (PaO_2 x .003)
- CvO_2: (Hb x 1.34 X SvO_2) ÷ (PvO_2 X .003)
- C(a-v) O_2: CaO_2 – CvO_2
- VO_2: Q_T X C(a-v) O_2 X 10

- Q_S/Q_T: $(A\text{-}aDO_2)$ .003 ÷ $(A - aDO_2)$ .003 + C(a-v) O_2
- SaO_2: PaO_2 + 30 (when PaO_2 is between 40 and 60 torr)
- V_D/V_T Ratio: $PaCO_2 - P_ECO_2 \div PaCO_2$ X 100
- New Minute Volume for Desired PaO_2: Current V_E X Current $PaCO_2$ ÷ Desired $PaCO_2$
- New FiO_2 for Desired PaO_2: Current FiO2 X Desired PaO_2 ÷ Current PaO_2
- PaO_2/FiO_2 Ratio or P/F Ratio: $PaO_2 \div FiO_2$
- Pediatric Drug Dosage (Clark's Rule): ESD = Wt. (lb.) X Normal Adult Dose ÷150
- Amount of drug in milligrams (mg): Drug % X 10 X mL = # of mg of the drug
- Suction catheter size for adults: ID size ÷ 2 X 3
- Exhaled Tidal Volume (V_T): $V_E \div$ f.
- Alveolar Minute Ventilation (V_A): $(V_T\text{-}V_D)$ X f
- Minute Ventilation (V_E): V_T X f.
- Dynamic Compliance: Exhaled Volume ÷ PIP – PEEP
- Static Compliance: Exhaled Volume ÷ Plateau Pressure – PEEP
- Airway Resistance (Raw) estimate: Peak Pressure – Plateau Pressure
- Idea Body Weight Formula Males: 106 lb + 6 lb./in over 5 feet
- Idea Body Weight Formula Females: 105 lb + 5 lb/in over 5 feet
- Work of Breathing: ΔP X ΔV or Change in Pressure X Change in Volume
- Calculating Minimum Flow rate: (Tidal Volume X Rate) X (I+E)
- Rapid Shallow Breathing Index: Respiratory Rate ÷ V_T (L)
- To approximate FiO_2 with a nasal cannula: 20 + (4 X Liter Flow)
- Duration of Flow (Cylinder duration in minutes): Gauge Pressure (psi) X Tank Factor ÷ Liter Flow
- Tank Factors for E cylinder and H cylinder: E = .28 L/psi, H = 3.14 L/psi
- Total Flow: Factor X Liter Flow
- Air – Oxygen Entrainment Ratio: 24%= 25:1, 28%= 10:1, 32%= 6:1, 35%=4.6:1, 36%= 4:1, 40%= 3:1, 60%= 1:1, 70%= 0.6:1, 100%= 0:1
- Air – Oxygen Ratio for various FiO_2: 100 – X ÷ X – 20 (X= FiO_2 setting)
- He/O_2 Mixtures using an oxygen flow meter 80/20 mixture: Actual flow is 1.8 times greater than the L/min on an oxygen flow meter with an 80/20 mixture.
- He/O_2 Mixtures using an oxygen flow meter 70/30 mixture: Actual flow is 1.6 times greater than the L/min on an oxygen flow meter with an 70/30 mixture.
- Volume Lost Through Chest Tubes: Delivered V_T – Exhaled V_T
- Patient's Maximum Heart Rate: 220 – Age in Years

Respiratory Care Math Guidelines

- Memorization of basic equivalents is necessary.
- Use of a basic calculator is allowed.
- Always double check math before moving on to next problem. Does the answer make sense? The correct unit of measurement must be indicated in the answer.

- When working out multiple step problems, work out to the thousandths in the early steps. Do not round off until the last step.
- When rounding: 5 or greater rounds up; 4 or less rounds down (Example: 4.56 = 4.6 and 4.54 = 4.5 if rounding to the tenth place).
- When using fractions, always reduce to the lowest term; express as a mixed number if applicable.
- When using Roman numerals, you may use upper- or lower-case letters, but do not mix the two (Example: xii is appropriate, but xii is not).
- When multiplying or dividing decimals be sure to move the decimal in the correct direction (Example: multiply a decimal by 100 by moving decimal to the right, making it larger; divide decimals by moving the decimal point to the left, making it smaller).
- All answers must be labeled correctly to receive credit for that calculation.
- When using a unit to represent volume use mL, do not use cc; its use is no longer allowed.
- With decimals, when the number is less than one, a 0 must be written in front of the decimal point (Example 0.2 mL, not .2 mL) to avoid interpretation errors.
- Do not place a zero after a decimal point (Example use 3, not 3.0) to decrease errors.
- When solving a problem using ratio proportion always compares similar values (Example: 5 mg/1 mL = 10 mg/ x mL). Use ratios to convert between measurements of two different systems. Milliliters is written mL (do not use ml). Gram is written g (gm is no longer used).
- Do not place a period after unit abbreviations (Example: mL, g, mg, mcg, L are to be used. The following should **not** be used: mL., g., mg., mcg, L.).
- Units should never be abbreviated u or U. The word units must be written out. Units are always whole numbers; you don't give a portion of a unit.
- The apothecary system is an approximate measure. The decimal system is much more accurate.
- Do not mix apothecary and decimal values (Example: use 0.5 mg, not ½ mg, and use ½ tab, not 0.5 tab).
- When using micrograms in a problem abbreviate using mcg; the symbol μ is no longer used.
- State time in hours and minutes, not fractions of hours. (Example: 1 hour and 6 minutes, not 1 and 1/10 hours or 1.1 hours).
- Values equal to or greater than 1,000 should be written with a comma (Example: 1,500).
- Any calculations must always to be rounded to tenths if they don't solve to a whole number.

Guidelines and Forms

Student Rights

- All students of the El Paso Community College are entitled to enjoy the basic rights of citizenship which are recognized and protected by the laws of this country and state. Each student is obligated to respect the rights of others. Such environment will enhance the

educational purpose for which the college exists, and the educational programs designed to achieve that purpose.

- No student or prospective student at the college shall be discriminated against because of race, color, religion, gender, national origin, disability, creed, or age may file a written grievance with the Vice Presidents, Associate Vice Presidents, and Deans.
- Academic-related grievances should be submitted in writing beginning with the faculty member and then to the instructional Dean. Appeals may then direct to the appropriate Vice President.
- Student-related grievances should be submitted in writing to the Director of Student Leadership and campus life. Appeals may be directed to the Dean of Students for final disposition.
- All students shall obey the laws, show respect for properly constituted authority, and observe correct standards of conduct.

Types of Prohibit Behavior:

The following types of behavior shall not be prohibited:

1. Harassment of students or employees on the basis of race, gender, national color, disability, creed, or age.
2. Stalking of students or employees.
3. Gambling.

Division Procedure

It is the intent of all disciplines of the Health Careers and Technical Education, Math & Science division at EPCC to comply with the development and implementation of its programs. Discrimination will not be tolerated whether involving students, faculty, staff, or patients.

Students and staff who wish to report potential discriminatory or harassing behavior should initiate contact with the Dean, Health Careers and Technical Education, Math & Science, Rio Grande campus, room A-240, phone 831-4030. Matters which can be managed as informal concerns will be managed as such. Should it be necessary, formal complaints and disciplinary action will be initiated in accordance with the college procedures.

The confidentiality of the reporting individual(s) will be maintained as long as it does not interfere with the ability to results.

Retaliation against anyone reporting discrimination or harassment behavior is prohibited.

Respiratory Care Manual Acknowledgement Form

I, _____ (PLEASE PRINT), hereby acknowledge I have obtained a copy of the current year El Paso Community College respiratory care program procedures and guidelines manual dated Fall semester. In relation to the manual, I hereby acknowledge the following:

1. It is my personal responsibility to read and review the manual.
2. I have, or will, within a reasonable time, read the provisions of the manual. Without limiting the importance of any provision of the manual, I acknowledge that I have or will read the following sections. Please initial entry line next to each specific area to verify reviewing:
   _____ Respiratory care licensure requirements.
   _____ Procedure on disclosure of information.
   _____ Procedure related to drug screening.
   _____ El Paso Community College performance health standards.
   _____ Program procedures and guidelines on accommodations, behavior, attendance, conduct, grading, immunizations, program completion time, program failure, testing, and withdrawal.
   _____ Safe and ethical practice.
   Clinical Requirements
   _____ Program costs.
   _____ EPCC student conduct code.
3. I shall be required to adhere to aid and act in compliance with the provisions of the manual.
4. Any action or statement made in violation of the manual may result in my being removed from the respiratory care technology program.
5. In the event that I have questions regarding the manual and/or any provision therein, I am responsible for directing my specific questions to the program instructional coordinator or the Dean of Health Career and Technical Education, Math & Science.
6. In the event I do not direct questions regarding the manual and/or any provision therein, then it shall be understood that I understand the manual and any and all provision therein as set out in the manual.
7. I am required to obtain and adhere to all updated and revised versions of the manual for each academic year that I am enrolled in the respiratory care program.

Student Signature: _____

Date (you must indicate months, day, and year): _____

Acknowledgement
Regarding
Texas Board of Respiratory Care Licensure Requirements Form

I, _____ (Please Print), hereby acknowledge I have reviewed the respiratory care licensure information included in the EPCC respiratory care program guidelines and procedures manual.
I hereby acknowledge the following:

Texas department of state health services, respiratory care applicants should have successfully completed a respiratory care program accredited by the committee on accreditation for respiratory care (CoARC).

1. The board of respiratory care has the express authority to review the felony conviction of an applicant and may deny licensure to any applicant who has been convicted of a felony, which relates to the practice of respiratory care. An applicant is a person who has filed an application with the licensing board and possesses all the statutory requirements for filing an application, not applicants.
2. The board has a statutory authority to review the felony conviction of a respiratory care student who has neither completed the respiratory care program approved by the board nor filed an application with the board.
3. If I have questions regarding these board of respiratory care guidelines, I may contact the Texas department of state health services of respiratory care at:

Respiratory Care Practitioners Certification Program
Texas Department of State Health Services
Mail Code 1982
PO Box 2018
Austin, TX 78768-2018
E-mail: TMBscreening@tmb.state.tx.us
Telephone (512) 305-7010

4. I have read the above procedures and fully understand that I may be denied licensure by the state board of respiratory care if I have a felony record. With this understanding, it is my decision to enter the EPCC respiratory care program.

Student Print Name: _____

Student Signature: _____

Date (you must indicate month, day, and year): _____

HIPAA / Confidential statement form:

As a student in a health program, contact with confidential and protected health information will occur. This information may be personal, clinical, financial, or other. Information may be computerized (electronic health record), hard copy, or oral in nature.
Examples of confidential information can include, but not limited to health records, employee records, financial records, information distributed to work areas, or any other information found during business. Confidential information includes information learned through discussion in clinical practice on and off campus, from employees and medical staff, patients, and patient families or friends.
Students at El Paso Community College enrolled in a health program shall maintain all aspects of confidentiality. Students are accountable for being aware of the legal implications regarding patient privacy and confidentiality rights as per HIPAA guidelines and regulations. The following guidelines are required:

- Confidentiality of patient information must be protected by the respiratory care student.
- Access to patient information that you are not assigned to for care and/or research is prohibited, including your own personal health information.
- Patient, family, or health related information may not be photocopied or removed from the health care setting.
- Security guidelines for accessing and documenting in the electronic record must be followed.

As a respiratory care student, it is your responsibility to protect the confidential and privacy information you have contact with. You must protect information from loss, destruction, tampering, and inappropriate access and use, including inappropriate disposal.
Any breach of confidentiality or privacy practices represent a failure to meet the legal, professional, and ethical standards and will constitute a violation of this statement. A breach can include any unnecessary, unauthorized, unintentional use or disclosure of confidential information due to carelessness, curiosity or concern, for personal gain or malice, and including informal discussion both in the health care facility, outside the facility, or at the college. Such breaches will result in disciplinary action which may include program termination and civil or criminal penalties from the college, individuals, or affiliated organizations.

Confidentiality Agreement:

As a student in the El Paso Community College health program, I understand the above statements and the expectations that I will maintain the confidentiality of information encountered during study. Further, I understand that a violation or breach of this statement of confidentiality will be investigated and responded to in a manner that may result in suspension/expulsion from the EPCC health program in which I am enrolled. I understand that I could also be subject to disciplinary action that may include fines and/or imprisonment.

Student name (Please print and Date): _____
_____

Signature: _____

Incident Report Form

COMPLETED INCIDENT REPORTS MUST BE RETURNED TO THE DEPARTMENT INSTRUCTIONAL COORDINATOR WITHOUT DELAY

To be filled out by the clinical instructor at the scene of the incident.

Date of Incident: _____ Time of Incident: _____ Program: _____

Name of Person Affected: _____ ID #: _____

DOB: _____ Sex: _____ Indicate status: Student (S), Staff (ST), and Visitor (V)

Home Address: _____

PO Box City State

Home Phone: _____ Exact building location of incident: _____

Did incident occur during class / lab time? _____ was instructor on duty? _____

Witnesses to incident (indicate status): Student Staff Visitor

Name: _____ Address: _____ State: _____

Details of incident (explain what, why, and how):

Date: _____ Person making report: _____ Status: _____
Non-Academic Student Grievances:

Safe and Ethical Practice Acknowledgement Form

A student may be dismissed from the program if he/she fails to demonstrate safe and ethical practice in the classroom, laboratory, or clinical settings. Students exhibiting behaviors in violation of safe and ethical practice will be removed from the area and be required to meet with the instructional coordinator for determination of consequences.
To uphold the parameters of safe and ethical practice the student must:

1. _____ Comply with the patient's bill of rights.

2. _____ Comply with the American association for respiratory care statement of ethics and professional conduct.

3. Provide a safe environment for the patient.

4. _____ To maintain confidentiality of all information/HIPAA.

5. _____ Function within the parameters of the student roles outlined in the program manual.

I acknowledge that I have read the following sections: please initial every line next to each specific area to verify review of these materials and understand the importance of complying with the above parameters within the guidelines and procedures of the program manual.
.
I fully understand my obligations to my fellow classmates and the clients whom I will serve and acknowledge failure to meet these obligations may result in termination in the respiratory care program.

Student name (please print): _____

Student signature: _____

Date (you must indicate month, day, and year): _____

Simulation Lab Confidentiality Agreement

I understand the significance of confidentiality with respect to information concerning simulated patients and fellow students. I will uphold the requirements of the health insurance portability and accountability act (HIPAA) and any other federal or state laws regarding confidentiality. I agree to report any violations of confidentiality that I become aware of to my facilitator or clinical instructor.

I agree to adhere to the following guidelines:

- I acknowledge and understand that photographs and/or video may be made during my training, and I consent to being photographed or videotaped. I, further, understand that my photograph may be used in advertising or training literature or videos, and I consent to such use.
- All patient information is confidential, and any inappropriate viewing, discussion, or disclosure of this information is a violation of El Paso Community College procedures or guidelines.
- This information is privileged and confidential regardless of format (electronic, written, overheard, or observed).
- I may view, use, disclose, or copy information only as it relates to the performance of my educational duties. Any inappropriate viewing, discussion, or disclosure of this information is a violation of college guidelines and may be a violation of HIPAA and other state and federal laws.
- The simulation lab is a learning environment. All scenarios, regardless of their outcome, should be treated in a professional manner. The student running the scenario should have everyone's respect and attention. Situations simulated in the lab are to be used as a learning tool and not to be used for humiliation of fellow students.
- The simulation mannequins are to be used with respect and be treated as if they were live patients.
- No betadine or ink pens near the mannequins.
- Please always keep hands clean.

Student Name (please print): _____

Student Signature: _____

Date (you must indicate month, day, and year): _____

Student-Entry into a Health Career Program

The college provides a procedure for re-entry to the Health Careers Program for students whose program of study has been interrupted. NOTE: This procedure applies to students enrolled in an allied health program only, and students can refer to college procedure: Form FB-7
https://www.epcc.edu/Administration/InstitutionalEffectiveness/PoliciesandProcedures/FB-7.pdf
Faculty member(s) will review the re-entry applications each semester and will prioritize the requests according to the following criteria: Program Re-Entry guidelines link attached: Form FB-11
https://www.epcc.edu/Administration/InstitutionalEffectiveness/PoliciesandProcedures/FB-11.pdf

Application Process and Criteria

1 Students must submit a letter requesting re-entry to the specific program coordinator. The letter must contain:
   - A date and signature
   - The preferred date of re-entry
   - The course requested
   - Student's identification number
   - Current phone number(s)
   - Students MUST provide documentation that the recommendations have been met or that person/family illnesses or situations have been resolved.

2 Students must adhere to the health care degree plan as specified by the EPCC College Catalog for the semester/year that entry/re-entry is sought. If the degree plan is different from the original one under which the student was admitted or if it comes from another institution, it is the student's responsibility to meet the new degree plan requirements, and other requirements, as outlined in the most current program information guide. The student must initiate a revised degree plan with a counselor. It is the student's responsibility to seek evaluation of credits and provide all the transcripts and documents needed to evaluate any prior educational experience. If it is necessary for the student to initiate a new degree plan, this must be done through an Allied Health Counselor, and the student must have that degree plan on record with the Admissions and Registrar's office.

3 After ascertaining that the applicants are qualified, and have completed requirements, if applicable, the program coordinator with rank students within each category by program specific procedures. Students reentering the program will be notified by telephone or in person when a space is available. Mail notification will be sent as needed. Students' entry will be considered based upon completion of prerequisites and space availability.

Ranking for re-entry into the health career programs

1 Ranking priorities for re-entry into the health career programs will be based on:
- Space availability in the course/program, including clinical site availability.
- Student's entry will be based on the completion of the prerequisites for the program/course, GPA, and on whether the students are in good standing with the College.
- Ranking for re-entry will be based on the students' reasons for leaving the program/course, GPA, and conditions specified for re-entry, as identified by the program procedures.

2 The following guidelines are used to determine an applicant's placement for available openings within the program or specific courses:

Category A-1

Students existed in good standing because of documented illness or pregnancy, other documented reasons and/or extenuating circumstances that impacted success.

Category A-II

Nontraditional credit applicant who was passing with a minimum grade or "C" in courses when leaving his/her former program. An adjusted GPA will be used for advanced placement/transfer students.

A non-progressing student that left the program for an extended period, but fewer than three (3) years, with no previous course failures. A student may have recommendations/requirements prior to re-entry.

Foreign graduates requiring courses specified by the licensing or certifying agencies.

Category B-II

Nontraditional credit applicants who have failed the last health care course which they were enrolled in before leaving his/her former program (transfer failing student).

Re-entry Appeal Process

The student may appeal any requirements/recommendations of the program coordinator or any denials or delays in re-entry. If there is not a satisfactory resolution, then they may appeal to the Dean for Health Careers.

Appeals regarding the terms of the requirements given by the program coordinator must be made in writing to the Dean within 30 days of the receipt requirements for entry/re-entry.

1 Appeals regarding the denial, delay or re-entry must be made in writing to the program coordinator within 30 days of the notification. If a satisfactory conclusion is not reached, the student can appeal to the Dean for Health Careers within 15 days of receipt of the notification.

2 Appeals regarding the decision of the Dean must be made in writing to the Vice President of Instruction, within 14 days of receipt of the Dean's decision. The Vice President of

Instruction, upon review of all documentation, will either affirm or reverse the decision of the Dean. The decision of the Vice President of Instruction will be final.

Student Concern Form

NAME: _____ ID Number_____

Address: _____ E-mail Address: _____

Phone: Home _____ Cell _____ Work _____

Wants to be kept confidential Yes □ No □

Notification Made By: Letter _____ Interview _____ Phone call _____ Other _____

Subject of Concern: _____

TYPE OF CONCERN: Grades ___ Tests ___ Procedures __ Teaching Methods __ Other __

Professor/Staff Name: _____ Course/Section: _____ Class Days' Time _____

EXPLANATION OF YOUR CONCERN:

Has the Identified Party been contacted? Yes □ No □ NA □

Has the faculty coordinator been contacted? Yes □ No □ NA □

RECOMMENDED ACTION:

Follow-Up: Faculty/Staff □ ***Coordinator*** □ ***Staff Supervisor*** □ **List Attachments:** _____

For Faculty/Staff: I have met with my dean/supervisor: Yes □ No □ Comments Attached: Yes □ No □

RESOLUTION:

COMMENTS:

Texas Department of State Services
Respiratory Care Practitioner Certification
(512) 834-6632

Application Information

An incomplete application will not be processed until all required fees and documents are received. You may apply online at www.texasonline.
Mail all application materials and fees to:
Respiratory Care Practitioners
PO Box 12197
Capitol Station
Austin, Texas 78711-2197

All fees are non-refundable. After an application is screened, it will be approved, disapproved, or a deficiency may be noted. Applicants which are complete will be approved and a certificate will be sent to the applicant. Those which are disapproved or are incomplete will be sent notices listing the deficiencies or reasons for disapproval.

Check method:

A. Temporary permits for a graduate of an accredited respiratory care education program can be found in 140.207(d) (1) of the rules.
    a. Submit a non-refundable $55.00 application fee (6-month term).
    b. Submit a copy of a high school diploma or high school equivalency, or an associate, baccalaureate, or post-baccalaureate degree from an accredited college or university.
    c. Submit an official transcript or copy of a certificate of completion or degree which clearly indicates completion of a respiratory care education program.
    d. Temporary permit for students enrolled in an accredited respiratory care education program, being within 30 days of completion, which is found in 140.207(d) (1) of the rules.
    e. Applicants who have been awarded a bachelor's or associate degree in respiratory care (RC) may submit a copy of that degree to satisfy both RC education and high school education requirements.