



Department of Respiratory Care

Bachelor of Science in Respiratory Care

The Department of Respiratory Care where following your passion and
commitment creates a better tomorrow!

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The Department of Respiratory Care

The Department of Respiratory Care is dedicated to clinical and academic excellence in teaching, research, service and patient care. The Department of Respiratory Care is dedicated to the philosophy and goals of the School and University.

As an academic health science center and university based program, the Department of Respiratory Care Faculty must make an appropriate contribution in the areas of research, service and patient care. With respect to research and scholarship, the department conducts and publishes original research studies, participates in the publication of textbooks and chapters, abstracts, and invited presentations based on original research. Service activities include participation on local, state and national professional boards and committees, community service, university service activities and continuing education. Patient care activities include hospital and clinic based practice and patient education in areas such as ALS, COPD, Intensive Critical Care, Pulmonary Rehabilitation and Tobacco Cessation Education. Patient care is integral to departmental teaching, research and service activities.

CORE VALUES:

Academic and Clinical Excellence	Leadership
Compassion	Loyalty
Honesty / Integrity	Respect
Hard work	Service
Innovation / Creativity	Supportive
Knowledge	Team work and collaboration

The Respiratory Care Program

The Respiratory Care Program is professional program designed to provide students with an outstanding education in preparation for a satisfying professional career as well as to provide a foundation for leadership in management, education, research and clinical practice. The overall purpose of the program is to provide a high-quality education that is relevant and professionally sound to meet the respiratory care leadership needs in the health care community. It is a primary objective of the program to educate professional and competent respiratory therapists who demonstrate leadership ability and clinical excellence.

The Department of Respiratory Care strives to select applicants who have the ability to become competent respiratory therapist. As an accredited respiratory care program, the curriculum adheres to the guidelines of the Committee on Accreditation for Respiratory Care. The Department of Respiratory Care has the freedom and responsibility for the selection and evaluation of its students, the implementation and evaluation of its curriculum and the determination of who should be awarded a degree.

Admission and retention decisions are based satisfactory academic achievement and non-academic factors which insure the student can complete the essential functions of the academic program required for graduation. The Department of Respiratory Therapy has the responsibility to the public to assure that its graduates can become fully competent and compassionate respiratory therapists capable of doing right and no harm.

It is the philosophy of the Department of Respiratory Care there are certain standards, essential tasks and professional behavior required for an advanced level respiratory therapist. Therefore, to successfully progress and complete the professional component of the program all students must possess, demonstrate and achieve these essentials. It is the student's responsibility to make certain he/she can adequately perform the academic and clinical requirements.

It will be necessary to work with all members of the health care team identifying and solving the problems that relate to respiratory diseases and disorders of the cardiopulmonary system. The respiratory therapist must be able to think critically, communicate effectively, demonstrate judgment and provide self-direction. The Respiratory Care Program is designed to offer the student planned learning experiences and to provide knowledge, skills and attitudes that will culminate in successful employment of the graduate as a respiratory therapist.

Program Goal:

Graduates of the program will be prepared to function as competent advanced level respiratory therapists.

Standards:

- a. Upon completion of the program, all students will demonstrate the ability to comprehend, apply and evaluate information relevant to the role of the advanced level respiratory therapist.
- b. Upon completion of the program, all students will demonstrate technical proficiency in all skills necessary to fulfill the role of the advanced level respiratory therapist.
- c. Upon completion of the program, all students will demonstrate personal behaviors consistent with professional and employer expectations for the advanced level respiratory therapist.

Accreditation

This respiratory therapist program in the Department of Respiratory Care has received accreditation by the Committee on Accreditation for Respiratory Care (CoARC). Students successfully completing all program requirements are eligible to sit for the examinations given by the National Board for Respiratory Care (NBRC) and state licensure. These include the Certified Respiratory Therapist (CRT) and the Registered Respiratory Therapist (RRT) examinations.

General Program Policies and Regulations

See the UTHSCSA Catalog for additional information.

Students are expected and responsible to abide by all provisions in the General Regulations and Requirements and general academic policies in the in the [UTHSCSA Catalog](#) and the *Board of Regents' Rules and Regulations*. Violations of regulations, requirements and policies may result in disciplinary actions or dismissal.

Board of Regents' Rules and Regulations are located at <http://www.utsystem.edu/bor/rules>

Conduct and Ethics

Students are expected to conduct themselves in a dignified manner at all times. Conduct must conform to the ethics of the profession and instill patient confidence in the students' abilities as a health care practitioner. Each student is expected to conform to the professional code of ethics as outlined in this handbook.

Irresponsible, unprofessional, or unethical behavior as determined by the instructor or failure to follow the instructions of a clinical instructor during clinical practice may result in dismissal from the program. All hospital regulations are to be followed by students when undergoing clinical training in a facility.

Scholastic Dishonesty

Any student who commits an act of scholastic dishonesty is subject to discipline, as prescribed by the UT System Rules and Regulations of the Board of Regents. Scholastic dishonesty includes but is not limited to cheating, plagiarism[1], collusion, the submission for credit of any work or materials that are attributable in whole or in part to

another person, taking an exam for another person, and any act designed to give unfair advantage to a student or the attempt to commit such act.

[1] Optional addition: Plagiarism--All academic work submitted to fulfill course requirements is expected to be the result of each student's own thought, research, and self-expression. A student will have committed plagiarism if someone else's work is reproduced without acknowledging its source. Examples of sources that must be acknowledged include any verbiage, ideas, or other direct quotes from published articles, chapters of books, computer programs, graphic representations, research papers, and other kinds of work from a source not generated as part of the public domain.

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Requests for Accommodation for Disabilities

Information on requesting accommodations for disabilities is available in the [UTHSCSA Catalog](#). Students who wish to request accommodations for disabilities should meet with Dr. Pat Brewer, Assistant Dean for Student Affairs--SAHS, to complete a Student/Resident Request for Accommodations under the Americans with Disabilities Act form (Form ADA-100). The form and additional information may be obtained at <http://www.uthscsa.edu/eeo/request.html>

Grades, Promotion, Advancement and Dismissal

All respiratory care courses are taught in a sequential manner and each professional course in the program serves as the prerequisite for the subsequent course. Therefore, courses must be taken in the planned sequence.

If a student earns a grade lower than **C**, the student may not be permitted to register for subsequent courses or semesters, and the student may be subject to dismissal from the program. (Refer to current [UTHSCSA Catalog](#) for more information).

Standards of Performance for Respiratory Care Courses

90 - 100 = A

80 - 89 = B

75 - 79 = C

70 - 74 = D

below 70 = F

Failure to successfully complete a respiratory care course with a letter grade of "C" or better may result in the student being suspended or dismissed from the program.

Unless otherwise described in a given course syllabus, the minimum satisfactory grade for course credit is 75% (a letter grade of "C"), and all stipulated segments of a course must be passed by this standard.

Examination Administration

All examinations given by the Department will be monitored by faculty or staff at all times. Students will be seated in such a manner as to minimize the opportunity for observation of other students' examinations. No breaks will be allowed once an examination period has begun, and students may not leave the room during an exam until they are finished taking the examination, except in the event of an emergency, which will be judged by the faculty or staff monitoring the exam on a case by case basis.

If a student turns in an examination without answering all questions, he or she will NOT be given an opportunity to finish the examination after leaving the room.

Only marks made on the Scantron sheet will be used to compute a grade on all Scantron-graded examinations; even if a student marks the answer correctly on his/her examination.

Programmable calculators and cell phones will **NOT** be allowed during examinations.

Examination Reviews

At the discretion of the faculty, during review of any examination given within the curriculum, no other papers or books will be allowed on the student's desk. No writing implements of any kind will be allowed. No note taking or recording of any kind will be permitted. This includes written note taking, and/or recording with audiotape, videotape, or any other

form of electronic or mechanical recording. Violation of this policy is a form of cheating and will constitute Scholastic Dishonesty and will be referred to the Assistant Dean of Student Affairs for review and possible disciplinary action. (Refer to current [UTHSCSA Catalog](#) for more information under Student Conduct and Discipline)

Incomplete Assignments and Make-up Examinations

All assignments are to be turned in as specified on the course syllabus. Assignments not turned in to the faculty when due will result in a "0" for that assignment or a reduction in points as stated in the course syllabus.

Students given an incomplete "I" in a course must have the mechanism for resolving the incomplete agreed upon with the course faculty by the first week of classes in the subsequent semester. The agreement must be in writing and must include the signature of the student and the instructor. (Refer to current [UTHSCSA Catalog](#) for more information)

As a general policy, make-up exams will **not** be given for missed exams. A request for a make-up exam should be directed to the individual course faculty. In cases of serious illness or accident, a make-up exam may be considered, but it may be different from the original exam.

Deficiencies, Remediation, Probation and Dismissal Policy

Student status in the Respiratory Care Program is made by the Committee on Allied Health Studies (CAHS). The CAHS consists of the Department Chair and members of the department's faculty. The CAHS reviews student's progress and performance and may decide to a) continue a student in the program, b) recommend placing the student on probation, or c) recommend dismissing the student from the program.

Continuation in the Respiratory Care Program is dependent on the following requirements:

- Satisfactory progress in removing any conditions imposed at the time of admission, if applicable.
- Maintaining a minimum grade point average of 2.5 (C) or 75% in all respiratory care courses taken while enrolled in the program.
- Satisfactory professional behavior

A student may be placed on a remediation learning contract.

- If a student makes a grade of D or F on a course examination other than the final examination,.
- The Learning contract or plan will be created to determine the deficiencies that need to be corrected.
 - The tasks and responsibilities outlined for the student
 - The deadlines for completion, criteria for evaluation, and evaluation methods will be determined. (Remediation tasks and evaluation criteria do not have to be identical to the original tasks and criteria.)
 - The student's individual examination grade will not be changed. (It is anticipated that the results of successful remediation will be evident when the comprehensive final examination is taken.

A student may be placed probation

- Violating provisions listed in the "Guide for Professional Conduct" in the *UT Health Science Center Student Guide (SHP section)*. These provisions relate to the intellectual, ethical, behavioral, and attitudinal attributes necessary to perform as a respiratory therapy student and health care provider. (Refer to current [UTHSCSA Catalog](#) for more information)
- Unsatisfactory progress toward correcting academic or clinical deficiencies.
- Violating the HIPPA codes.
- Violating the AARC Code of Ethics.

Definition of Probation

Probation is defined as failing to adhere to standards of professional conduct, judgement, or ethical behavior as found in the *UT Catalog in the SHP section*.

Notification of students on probation

Students will be notified at the time of the incident causing the student to be placed on academic probation. A letter will inform the student and the Associate Dean of the School of Health Professions the student is being placed on academic probation, but will be removed from the probation once they have raised the grade point average or corrected specifically stipulated unprofessional behaviors within a specific time frame.

Students on probation may be subject to dismissal from the program. This is determined on a case by case basis.

Notification of students going off probation

At the completion of each semester, the CAHS will review all student records and contact, in writing, each student on probation. The student and the Associate Dean of the School of Health Professions will be informed in writing that the student has been removed from academic probation and will commend them on their improved performance.

A student may be dismissed from the program

Students may be dismissed from the program due to failure to rectify issues concerning academic performance or professional behaviors. Students may be dismissed, suspended dropped from the program and refused readmission at any time. The student may be dismissed for violating provisions listed in the "Guide for Professional Conduct" in the *UT Catalog in the SHP section*. These provisions relate to the intellectual, ethical, behavioral, and attitudinal attributes necessary to perform as a respiratory therapy student and health care provider. (Refer to current [UTHSCSA Catalog](#) for more information)

Notification of students being dismissed from the program

If a student is to be dismissed from the program, they will be counseled by the CAHS prior to the dismissal. Following this documented counseling session the student will receive a letter from the Chair stating the reasons for the dismissal. This contact will take the form of a certified letter, mailed to the student's home address, with copies sent to the Associate Dean of the School of Health Professions, the Registrar and the student file. A student may appeal the decision of dismissal by following the Appeals Procedures found the [UTHSCSA Catalog](#) and *SHP section*.

Appeal Process for Academic and Disciplinary Issues

Procedures for appealing the decision to dismiss a student for academic or disciplinary issues are describe in the *UT Catalog in the SHP section*.

Withdrawing from a Course

Courses in the Respiratory Care Program follow a sequence that builds a foundation of knowledge and skills. The sequence is integrated and mandatory courses be taken in the determined sequence. To withdraw from a course, a student must have **permission** from the faculty member, and Chair of the Department. The student is cautioned to withdraw from a course as it may delay enrollment in subsequent courses until the course is taken again. If a student withdraws from a course the grade granted is a W.

Withdrawing from the Program

A student may withdraw from the program by submitting a written request to the Department Chair. This request must be approved by the Dean or Associate Dean of the School of Health Professions. In order to withdraw, the student must complete a Clearance Form and submit it for proper signatures from various personnel throughout the UT Health Science Center Campus. An Exit interview must be scheduled with the Associate Dean of the SHP.

Procedure for Readmission

A student who fails a respiratory care course, withdraws from a respiratory care course, or does not proceed to the next respiratory care course may be eligible for readmission or reinstatement at the first available opportunity and must petition the CAHS to reenter the program. The following procedure is required:

1. At the time the student fails, or withdraws and does not proceed in sequence, the Department Chair will complete a special student counseling form giving the reasons for the failure or reasons for the student withdrawal from the course. The form will be signed by the student. One copy will be given to the student and one copy will be placed in the student's record.
2. An exit interview with the Department Chair is required as part of the official procedure for exiting the program.

3. At least two months prior to the beginning of the semester in which the student wishes to reenter, he/she must submit a letter of intent to the CAHS. Requests for readmission should be submitted to the Registrar's Office.
4. If remedial work was requested in guided studies of general courses, results of such classes must be included in the request for readmission. If medical conditions were involved, written verification of good health and ability to function safely in a clinical crisis situation is required.
5. The decision regarding reentry will be subject to the policy on reinstatement to the Respiratory Care sequence and approval of the CAHS.
6. The student will be informed in writing of the decision.

Class Hours

The program provides classroom study, laboratory study and observation independent study, and seminars. Classes generally meet on a daily basis from 8:00 a.m. to 5:00 p.m. Courses are arranged on a set schedule and sequence. When necessary, the Department reserves the right to adjust class schedules, times and program sequencing, to include the possibility of evening classes.

Class Attendance

In keeping with the Core Values of Compassion, Integrity and Knowledge, the Department of Respiratory Care has adopted a policy of academic integrity and professionalism. One of the fundamental goals of the Department is for all Faculty and Staff to role model professional behavior and to expect professional behavior and part of the students. One aspect of professional behavior involves punctual attendance to all classes, labs and clinical rotations, timely notification of unavoidable absences. This requires a commitment to the qualities of honesty, trust, fairness, respect and personal responsibility, all of which are valued by this Department.

Class attendance is a reflection of your professional behavior and is **expected** by the faculty. Refer to each instructor's syllabus regarding class attendance.

Therefore, do not schedule Doctor appointments during class or clinical time.

Use of Recording Devices in Courses

Recording of lectures and other learning activities in this course by any means, e.g., video, audio, etc., is not permitted unless approved by the instructor or required for compliance with the Americans with Disabilities Act (ADA).

Illness or Injury of Student While Attending Classes

Illness or injury while in the classroom or clinical area must be reported to the professor or instructor present. Students who are pregnant should inform the Director of Clinical Education who will inform the instructor so that no assignment will be made involving exposure to radiation or other hazards. See the website and clinical syllabi for complete information regarding needle sticks and splashes.

Absences on Religious Holy Days

A student shall be excused from attending classes or other required activities, including examinations and assignments, for the observance of religious holy days and travel for such observances. Examinations, assignments, or other required activities must be taken or completed within a reasonable time before or after the absence (ordinarily within one week after the absence.)

Written notification of planned absences must be given to the instructor of each class from which the student will be absent. The deadline for notification is 14 days before the absence or the first class day for religious holy days that occur within the first two weeks of the semester.

An instructor may respond appropriately if the student fails to satisfactorily complete the assignment or examination within a reasonable time (ordinarily within one week after the absence). Each instructor should inform the student, at

the time the student notifies the instructor of a planned absence, of the deadline for completion of the missed assignment or examination.

Leave of Absence

Students may request a leave of absence for a maximum of one calendar year. The request must be submitted in writing to the Chair of the Department. This request must describe the conditions or circumstances causing the leave of absence. In the event of a "lengthy" illness, each case will be reviewed individually with regard to time lost, time available for completion and content of objectives to be covered. Any such absence may require documentation by a physician in writing.

Professional Dress, Demeanor, and Conduct

Students must dress at all times in a manner consistent with a professional image while on campus and in the clinical settings. Appropriate attire for the clinical setting is specified in the clinical course curriculum. In addition, the student's conduct and behavior must reflect the character of the Department of Respiratory Care, The School of Health Professions, The University of Texas Health Science Center and the profession of Respiratory Care.

Correspondence Between Students and Faculty

1. **ALL STUDENTS MUST USE AND FREQUENTLY CHECK THEIR UTHSCSA E-MAIL ACCOUNT AS ASSIGNED BY THE UNIVERSITY.**
NO CORRESPONDENCE WITH FACULTY USING PRIVATE E-MAIL ADDRESSES WILL BE PERMITTED.
2. A schedule of office hours will be noted in each faculty member's course syllabus and outside the office door.
3. Students are responsible for checking blackboard courses at DAILY for announcements/notices.
4. Students will be assigned to a faculty advisor in the fall semester of their junior year. Times for student conferences will be posted. Each student must meet with his or her advisor formally at least once per semester during the academic year during a scheduled advisement period. One advisement session will be scheduled during each semester. A student advisement report form will be completed and signed by both the faculty member and student following a formal conference.

Change of Contact Information

A student's current address, e-mail address and telephone number must be on file with the Registrar and Department **at all times**. It is the responsibility of any student enrolled in the Respiratory Care Program to inform **both** the Registrar's Office and the Department of any change of address or phone number within one week on the web at <http://inside.uthscsa.edu>. Students are responsible for official notices from the University e-mailed to his/her campus e-mail address or mailed to his/her local address. (The Department has a form students can complete as well.)

Release of Student Information

Students must sign a release form (attached) requesting letters of reference for scholarships, grants or employment, enrollment verification, etc. Additional forms are available in the Department.

Student grades are NOT permitted to be given out over the telephone.

Membership in the Professional Organization

One key attribute of a professional is participation in international, national and state associations and societies which influence the direction, education and practice of the members of a profession. In order to develop this aspect of professionalism, the student will be expected to maintain active student membership in the **American Association for Respiratory Care while a student in the program**.

State and National Credentialing

1. Certification is the entry level respiratory care practitioner. The Certified Respiratory Therapist (CRT) examination is given by the National Board for Respiratory Care (NBRC) and is required of all graduates in order to obtain state licensure. The CRT examination is required to be completed during the spring semester of the senior year. The examination fee is \$190.00.
2. Registration as an advanced respiratory care practitioner. The Registered Respiratory Therapist (RRT) is a requisite part of successful integration into the profession. The NBRC requires that the graduate has successfully completed the CRT examination prior to sitting for the registry examination. The RRT examination is completed during spring semester of the senior year. The examination fee is \$390.00.

Clinical Policies and Procedures

Clinical Hours

Clinical rotations in area hospitals begin at 6:30 a.m. and end about 3:15 p.m. or as specified for specialty rotations. Students are expected to provide their own transportation to clinical rotation sites. When necessary, the Department reserves the right to adjust clinical schedules, times to include the possibility of evening clinical rotations as well as clinical rotations outside of the San Antonio metropolitan area.

Clinical Practice

There are no excused absences from clinical practice. Each clinical practice has a requisite number of mandatory clinical hours. Any student not completing the required clinical hours during a given session will not receive a passing grade for that clinical practice. Time for any excused absence must be made up at the discretion of the clinical instructor. Clinical instructors are not required to allow a student to make up missed days. If clinical absences are not made up, a letter grade of "F" or "I" may be given at the discretion of the faculty.

Clinical practice, unless otherwise announced, begins at 6:30 a.m. Students are expected to be prompt and prepared to begin the clinic day at 6:30 a.m. Tardiness delays and hampers all student assignments made for that clinical day. If assignments cannot be arranged because of tardiness the student may be required to make-up a full clinical day.

Any student exceeding four (4) tardies or two (2) unexcused clinical absences may be subject to dismissal from the program.

PROCEDURE FOR NOTIFICATION OF ILLNESS OR LATENESS

1. First, call the clinical instructor/shift supervisor before 6:00 a.m.
2. Identify yourself and tell the clinical instructor/shift supervisor that you will be late or absent.
4. Next, call the Director Clinical Education's office number, 567-8859 and leave a message that you will be late or absent.

Students must demonstrate proficiency in all clinical skills presented in order to pass clinical courses. For all clinical courses, the final exam must be passed at the designated cut score AND a grade of "C" or better must be maintained in order to successfully complete each Clinical Practice course and in order to be allowed to continue in the program.

Professional Liability Insurance Coverage

All entering students are required to purchase and maintain professional liability insurance. Insurance coverage can be purchased through UTHSCSA at registration at a cost of \$14.50 per semester.

Clinical Final Examinations

In the event a student fails the clinical final examination, the student is allowed to make ONE more attempt to pass. In the event the student passes the clinical final exam on the second attempt the student will continue in the program and

earn a "C" as a clinical grade. In the event the student does NOT pass the clinical final exam on the second attempt the student earns an "F" in the clinical rotation and **may be suspended or dismissed from the program**. Students allowed to continue in the program may be required to repeat courses previously passed as determined by the Committee on Allied Health Studies.

Comprehensive End-of-Year Competency Assessment Examination

At the end of the junior year, the student will complete the End of the Year Competency Assessment Examination. The examination will be taken at the end of the summer semester of the junior year as part of the RESC 3029, Clinical Practice II course. A passing score of 75% is required to successfully complete the RESC 3029 course and continue on in the program. In the event a student fails the clinical final examination, the student is allowed to make ONE more attempt to pass. In the event the student passes the clinical final exam on the second attempt the student will continue in the program and earn a "C" as a clinical grade. In the event the student does NOT pass the clinical final exam on the second attempt the student earns an "F" in the clinical rotation and **may be suspended or dismissed from the program**.

Comprehensive End-of-Program Competency Assessment Examination

At the end of the senior year, the student will complete the written registry examination (WRRT) and clinical simulation examination (CSE). The examination will be taken during the spring semester of the senior year as a part of RESC 4029, Clinical Specialization. The examination fee is approximately \$390.00. A passing score and successful achievement of the registry (RRT) credential is required to successfully complete RESC 4029, as well as meet graduation and program completion requirements (see Graduation Requirements). Students who do not successfully complete the RRT examinations will receive an Incomplete ("I") for RESC 4029 and will retake the examination.

Conduct in the Clinical Facilities

In the event of a student's professional behavior in a clinical facility is not appropriate the following procedure will be placed on probation. (See the section on Probation in this handbook or the [UTHSCSA Catalog](#) and *SHP* section.

Immunizations and Tuberculosis Testing

Proof of immunization for tetanus and diphtheria within the last ten years as well as immunizations against measles, mumps and rubella is required of all entering students prior to registration. All students must provide proof of two immunizations against Hepatitis B before the end of the first semester of the program with the third immunization given before the first clinical day of the second semester. All students are required to have a PPD test done within one year prior to initial registration as a student at UTHSCSA. (Refer to current [UTHSCSA Catalog](#) for more information).

Incidents in the Clinical Setting

An incident occurring which affects patient, staff well being or the patient's prescribed care will be reported to the clinical instructor and Director Clinical Education immediately. A hospital incident report will then be completed following the policy of that institution. A duplicate of the hospital incident report as well as an explanation from the clinical instructor and student will be placed in the student's clinical file. The student will be placed on **probation. immediately**. Incidents involving gross errors in judgment or practice on the part of the student will constitute **grounds for dismissal** from the program.

Uniform Policy for Clinical Practice

The following guidelines are used to assist the student in adjustments to various hospitals and other health agencies. The policies vary, but in general the rules established by the program will cover the student's responsibility when entering such health agencies. The University of Texas Health Science Center wishes to have its students represent the University in a manner that reflects its goal of high standards of professionalism.

Uniform policies are needed to assure standards, identifying attire and a well groomed personal appearance. The ultimate goal is to protect patient and student/clinician from cross-contamination and to reflect confidence and assurance in patient contact and hospital staff personnel relationships.

1. A white, buttoned (no zipper), long sleeve laboratory coat approximately 3/4 length (mid-thigh) must be worn in the clinical agency. During clinical rotations in which scrubs are allowed, white coats must be worn at all times the student is OUTSIDE the ICU. A program patch will be permanently affixed to the left front pocket.
2. University I.D. cards must be visibly worn at all times.
3. For clinical rotations, students will wear plain navy blue scrubs under their lab coats. Students may wear athletic shoes with scrubs.
4. A watch with a second indicator is required.
5. Stethoscopes, bandage scissors, and hemostats are mandatory beginning in the spring semester of the junior year. A small pocket notebook should be purchased for clinics.

Failure to comply with the above regulations regarding uniform policy will result in the student being dismissed from clinical rotation, placed on probation and until such time as the deficiencies are corrected.

HIPPA and Patient Privacy

As a student at The University of Texas Health Science Center at San Antonio, you have a legal and ethical responsibility to safeguard the privacy of all patients and protect confidentiality and security of all health information. Protecting the confidentiality of patient information means protecting it from unauthorized use or disclosure in any format - oral, verbal, fax, written or electronic/computer. Patient confidentiality is a central obligation of patient care. Any breaches in patient confidentiality or privacy may result in disciplinary action, up to and including a monetary fine imposed by the University Compliance Office, being placed on probation or dismissal from the program.

The laboratory component of some courses may use students as simulated patients. This is particularly true for the patient evaluation, medicine and patient education components. Additionally, the sharing of personal experiences can be a rich resource in the development of students understanding, knowledge and appreciation of disease, health care and impact on peoples' lives.

Practicing the medical history and physical exam places students in close contact and leads to the sharing of personal information and physical findings. Similarly students may use personal experiences in patient role-playing exercises.

All shared and personal medical information and physical examination findings are to be treated with utmost confidentiality, the same as for any patient contact. Failure to protect the confidentiality of any information related to the activities of the course may result in disciplinary action, up to and including dismissal from the program.

Professional Continuing Education and Service

As a part of each clinical course, students will be required to attend at least eight hours per semester of approved professional continuing education and/or service activities. Seminars, lectures, workshops, health fairs, community and civic activities may be submitted to meet this requirement. These hours must be approved by the Chair or Director of Clinical Education.

Outside Employment

The faculty realizes that it may be necessary for some students to work part-time while attending school. This should not be done at the expense of the Respiratory Care Program. It is the student's responsibility to fulfill all school obligations.

If a student appears too fatigued to perform safely in the classroom, clinical setting or laboratory, the professor may dismiss the student from the clinical agency or classroom.

It is not advisable for a student to work from 11:00 p.m. to 7:00 a.m. and then come to class, lab or clinical site as fatigue frequently is a cause for accidents or poor clinical judgment.

Changes in Policy

Additional policies and regulations may be established by the department or by the instructor for a course or any portion of a course. After due and proper notification, students will be expected to comply fully with all regulations.

Grievance Policy – Student Appeals – Chain of Command

Normal communication regarding course or program policy should be:

- First directed to the faculty assigned to the course or clinical instructor if this involves a clinical course.
- If the matter is NOT resolved with the faculty, the student may appeal in writing to either the Director of Clinical Education (in the case of clinical practice) or the Department Chair (in the case of academic course work or policy) within 3 days of meeting with the faculty member.
- The student should set an appointment with the DCE or Chair within 5 days of the written appeal to discuss the matter at hand.
- If the matter is NOT resolved the student may submit a written request to the Dean within 5 days of the meeting with the DCE or Chair.
- Please see the process for appeal the [UTHSCSA Catalog](#) and SHP section.

Student Honors and Awards

The Department honors and awards students by recognizing outstanding achievement, clinical excellence and service.

Academic Excellence Award:

The Department recognizes the student with the highest cumulative GPA in the professional Phase at graduation.

Clinical Excellence Award:

The Department recognizes the student showing superior performance throughout clinical rotations.

Donald Stephenson Endowed Scholarship:

The Department recognizes student academic excellence during the professional program.

David Shelledy Endowed Leadership Scholarship:

The Department recognizes student leadership and professionalism during the professional program.

David Vines Endowed Clinical Excellence Scholarship:

The Department recognizes student clinical excellence during the professional program.

Scholarships available to All Students

Specific respiratory care scholarships are available to students enrolled in the respiratory care program. For more information contact the departmental office and Ms. Helen Sorenson, Scholarship Chair or Dr. Brewer, Assistant Dean of Student Affairs, School of Health Professions. The information about scholarships will be posted on the bulletin board outside of the Respiratory Care Lab. Other financial aid information and requests should be handled through the Financial Aid Office located in Student Services. (Refer to current [UTHSCSA Catalog](#) for more information).

Health Professions Designated Tuition Scholarships

Purpose – To provide financial aid to Health Professions students with demonstrated financial need

Baptist Health Foundation of San Antonio Scholarships

Purpose – Student financial aid for students in specified programs in the School of Health Professions; in

2008-2009 awards will be made to students in Clinical Laboratory Sciences, Dental Hygiene, Occupational Therapy, Physical Therapy, Physician Assistant Studies, and Respiratory Care

Bennie W. Schreck Scholarship

Purpose – Student financial aid

Caleb Maxwell Endowed Memorial Scholarship in Allied Health

Purpose – To support student scholarships in the School of Health Professions based on academic merit and financial need

Congressman Henry Bonilla Health Professions Scholarships

Purpose – To provide scholarship support to students in good standing from the Texas 23rd Congressional District who may be of any classification and from any of the schools within the UT Health Science Center

David P. Green Family Scholarship Endowment

Purpose – To provide need-based scholarships to students pursuing the health professions at UT Health Science Center and UTSA, with particular emphasis on students who work part-time to help finance their Education

Dorothy Banks Charitable Trust Scholarship

Purpose – Scholarship support for UT Health Science Center students

General Scholarship

Purpose – Not specified

Greg Treibs Memorial Scholarship

Purpose – To provide scholarships to students at UT Health Science Center

Health Science Center Scholarship

Purpose – Not specified

Phyllis & Neil Bowie Student Community Service Award

Purpose – Academic support of students through awards and recognitions

School of Health Professions Competitive Scholarship (Competitive Scholarship¹)

Purpose – To provide scholarships for deserving Health Professions students

¹ By Texas statute, non-resident students who are awarded a “competitive” scholarship of at least \$1000 are eligible to pay resident tuition for the academic year.

Sjoerd Steunebrink Scholarship Endowment

Purpose – To provide scholarships for students, based on proven academic ability and financial need

South Texas Academic Rising Stars (STARS)

Purpose – To provide scholarships for eligible students from the 22-county area served by STARS

For more information, contact:

Patricia Brewer, PhD,
FAARC

Assistant Dean of Student Affairs
School of Health Professions
(210) 567-8800

brewerp@uthscsa.edu

Helen Sorenson, MA, RRT,

Scholarship Chair
Department of Respiratory Care
(210) 567-8857

Sorenson@uthscsa.edu

American Association for Respiratory Care

Statement of Ethics and Professional Conduct

In the conduct of their professional activities, the Respiratory Care Practitioner shall be bound by the following ethical and professional principles. Respiratory Care Practitioners 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 which govern and relate to their practice.
- ❖ Avoid any form of conduct that creates a conflict of interest, and follow the principles of ethical business behavior.
- ❖ Promote the positive evolution of the profession, and health care 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.

American Association for Respiratory Care

Role Model Statement for Respiratory Care Practitioners

- ❖ As health care professionals engaged in the performance of cardiopulmonary care, the practitioners of this profession must strive to maintain the highest personal and professional standards. A most important standard in the profession is for that practitioner to serve as a role model in matters concerning health.
- ❖ In addition to upholding the code of ethics of this profession by continually striving to render the highest quality of patient care possible, the respiratory care practitioner shall serve as a leader and advocate of public respiratory health.
- ❖ The respiratory care practitioner shall participate in activities leading to awareness of the causes and prevention of pulmonary disease and the problems associated with the cardiopulmonary system.
- ❖ The respiratory care practitioner shall support the development and promotion of pulmonary disease awareness programs, to include smoking cessation programs, pulmonary function screenings, air pollution monitoring, allergy warnings, and other public education programs.
- ❖ The respiratory care practitioner shall support research in all areas where efforts could promote improved health and could prevent disease.
- ❖ The respiratory care practitioner shall provide leadership in determining health promotion and disease prevention activities for students, faculty, practitioners, patients, and the general public.
- ❖ The respiratory care practitioner shall serve as a physical example of cardiopulmonary health by abstaining from tobacco use and shall make a special personal effort to eliminate smoking and the use of other tobacco products from the home and work environment.
- ❖ The respiratory care practitioner shall strive to be a model for all members of the health care team by demonstrating responsibility and cooperating with other health care professionals to meet the health needs of the public.

THE UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER AT SAN ANTONIO

Recommended Respiratory Care Texts

This is an abbreviated list of texts and references recommended to respiratory care students. These references are available in the Briscoe Library or in the department.

General Respiratory Care

Egan's Fundamentals of Respiratory Care
Respiratory Care Equipment
Respiratory Care Equipment
Respiratory Care Principles and Practice
The Essentials of Respiratory Care
Respiratory Care: A Guide to Clinical Practice
Clinical Application of Respiratory Care
Foundations of Respiratory Care

Authors

Wilkins, Stoller, Scanlan
Cairo, Pilbeam
Branson, Hess, Chatburn
Hess, MacIntyre, Mishoe
Kacmarek, Mack, Dimas
Burton, Hodgkin, Ward
Shapiro, Kacmarek, Cane, Peruzzi
Wyka, Mathews, Clark

Pharmacology

Respiratory Care Pharmacology
Goodman and Gilman's The Pharmacologic
Basis of Therapeutics
Pharmacology for Respiratory Care Practitioners

Rau
Goodman, Gilman, Rall, Nies, Taylor
Cottrell, Surkin

Physiology

Physiology of Respiration
The Lung
Respiratory Physiology
Pulmonary Pathophysiology
The Normal Lung
Cardiopulmonary Anatomy and Physiology

Comroe
Comroe
West
West
Murray
Des Jardins

Pulmonary Function Testing

Assessment of Pulmonary Function
Pulmonary Function Testing and
Cardiopulmonary Stress Testing
Manual of Pulmonary Function Testing
Pulmonary Function Testing Guidelines and Controversies
Pulmonary Function Testing Indications and Interpretations

Fishman
Madama
Ruppel
Clausen
Wilson

Perinatal/Pediatrics

Neonatal and Pediatric Respiratory Care
Perinatal and Pediatric Respiratory Care
Respiratory Care of the Newborn
Comprehensive Perinatal and Pediatric
Respiratory Care

Koff, Eitzman, Neu
Barnhart, Czervinske
Aloan
Whitaker, Kent

Pulmonary Disease and Critical Care

A Concise Handbook of Pulmonary Diseases
Synopsis of Clinical Pulmonary Disease
Respiration in Health and Disease
Clinical Manifestations and Assessment

Farzan
Mitchell, Petty
Cherniak, Cherniak
Des Jardins, Burton

of Respiratory Disease	
Respiratory Disease	Wilkins, Dexter
Synopsis of Critical Care	Sibbald
Pulmonary Diseases and Disorders	Fishman
Cecil's Essentials of Medicine	Andreoli, Bennett, Carpenter, Plum, Smith
The Ciba Collection	Netter
Mechanical Ventilation	Pilbeam and Cairo

Assessment and Monitoring

Understanding Chest Radiographs	Rau, Pierce
The Only EKG Book You'll Ever Need	Thaler
Clinical Assessment in Respiratory Care	Wilkins
Widmann's Clinical Interpretation of Laboratory Tests	Sacher, McPherson
Monitoring in Respiratory Care	Kacmarek, Hess, Stoller
Clinical Application of Blood Gases	Shapiro, Peruzzi, Templin

Recommended Journals and Periodicals

Respiratory Care
Respiratory Management
AARC Times
Chest
American Review of Respiratory and Critical Care Medicine
Anesthesia and Analgesia
Critical Care Medicine
Heart and Lung
Anesthesiology
Advance for Respiratory Care Practitioners
Advance for Managers of Respiratory Care
Respiratory Care Education Annual

THE UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER AT SAN ANTONIO

Department of Respiratory Care

Release of Information

Name of Student (Please print): _____

I hereby authorize the Department of Respiratory Care at The University of Texas Health Science Center at San Antonio to release information as follows:

Type of letter needed:

- Letter of Recommendation
- Enrollment Verification
- Employer - Credentialing (i.e., CRT eligible, etc.)
- Other (Please write in): _____

To whom should the letter be addressed (i.e., name of supervisor, name of human resources representative, etc.):

Name: _____

Facility: _____

Street Address: _____

City, State, Zip: _____

Date letter needed: _____

Distribution of Letter:

- Student will pick up letter from Department office.
- Department to mail letter directly to facility.

No requests will be processed until you have given us your permission.

Student's Signature

Date

THE UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER AT SAN ANTONIO

Department of Respiratory Care

Change of Address

Name: _____

Old Address: _____

New Address: _____

Phone: Home _____
Cell _____
Work _____
Emergency Contact _____

UTHSCSA E-Mail Address: _____

Effective Date: _____

Signature: _____

Date: _____

Please return this form to the Department of Respiratory Care. It is the responsibility of the student to inform the Department as well as the Allied Health Admissions Office of address/phone number changes. Thank you.