



Department of Respiratory Care Student Handbook 2011- 2012

Welcome to the Department of Respiratory Care

Dear Respiratory Care Student,

Welcome to the Department of Respiratory Care!

This is a special time for you, the faculty, staff and current students. You have made the perfect decision choosing to seek your professional education in Respiratory Therapy at the University of Texas Health Science Center at San Antonio. We are all excited you are here and hope you strive for the same success that the current students have already experienced.

The next eighteen months will be exciting, thought-provoking and inspiring. Your focused effort will be required to succeed. It is important you actively participate and become involved in classes and the community. You and your class have been carefully selected from a group of applicants because your qualities are unique. You compliment the Core Values of the Department of Respiratory Care; compassion, leadership, honesty, integrity, innovation, and collaboration. You will succeed with dedication and hard work.

We know you have what it takes to succeed in the Respiratory Care Program. There will be times you will be challenged or pushed to the limit. This program will require you to commit to be successful. There will be times you may believe you have sacrificed things you may have otherwise taken for granted; sleep, social life, free time, or relaxation. It is important you take time to exercise, sleep, socialize and participate in activities you enjoy to keep you whole. These activities keep your mind focused, recharged and flourishing for the activities in class, clinic, and community. Maintaining a "life – balance" is the key to your success! Remember many groups of students have gone before you and though the effort was challenging, the rewards were wonderful! It is only when you are challenged that you find out just how good you are and how great you can become.

It is important to maintain a positive outlook, keep your eyes on the goals, focus, work hard, make new friends, and develop new relationships. Remember to have some fun along the way. On behalf of the Faculty and Staff of the Department, I extend a warm WELCOME HOME to each of you.



De De Gardner, MSHP, RRT, FAARC
Interim Chair
Department of Respiratory Care

Department of Respiratory Care

Vision Statement:

The Department of Respiratory Care will sustain national recognition as a leader in respiratory care clinical practice, education, research and service.

Mission Statement:

The Department of Respiratory Care will create an educational environment that fosters critical thinking, the development of clinical competence, and the promotion of the respiratory care profession.

Motto:

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

The School of Health Professions Values – C⁶

Credibility

Demonstrated through honesty, integrity, reliability and trustworthiness

Competence

A commitment to the highest standards of performance

Collaboration

Working together for the common good

Creativity

Challenging what is to achieve what can be

Compassion

Committed to caring

Community

Mutual respect for the unique contributions of all

Vision

We INSPIRE and EMPOWER people to create healthier communities.

Mission

The School of Health Professions promotes the mental, social, and physical well-being of communities, including those along the Texas-Mexico Border, through excellence in education, research, patient care, and partnerships.

Faculty and Staff of the Department of Respiratory Care:

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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 the student 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 Goals for Faculty:

Faculty Goals focus on the three aspects of the Health Science Center: Teaching, Research, and Service.

- Goal 1: Demonstrate excellence in teaching of assigned courses, which is measured by satisfactory course evaluations, and student's performance on exams.
- Goal 2: Develop an area of research that contributes to the field of Respiratory Care, and publish a minimum of one paper and one abstract per year.
- Goal 3: Serve the Department and University by actively participating on departmental and university committees.
- Goal 4: Serve the professional respiratory care societies and medical community by participating in educational symposiums, faculty practice and projects, health fairs, and serving in leadership positions.

Program Goal for Students:

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

Standards upon completion of the Respiratory Care program:

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

Respiratory Care Program Objectives:

Graduates of the Bachelor of Science in respiratory care program will be the critical care specialists and will be able to:

- 1. Perform an accurate and comprehensive patient examination and evaluation to determine the therapy necessary.
- 2. Determine and implement comprehensive evidence based care plans based on the patient's examination, diagnosis, and abilities.
- 3. Implement and manage respiratory therapy safely and effectively
- 4. Critically evaluate and apply evidence based guidelines in practice of respiratory therapy.
- 5. Communicate effectively with patients, family members, students, and other members of the health care team and community.
- 6. Provide consultation or expert opinion to the health care team to
- 7. Perform effectively in different roles (basic care practitioner, critical care practitioner, educator, supervisor or manager, consultant, etc.) in a variety of health care environments with persons of diverse cultural backgrounds.
- 8. Practice respiratory therapy in compliance with state and federal laws and the AARC Code of Ethics.

The Respiratory Care Program and the Faculty will:

1. Prepare Respiratory Therapists who excel in the areas of evidence based critical care and clinical practice, critical thinking, service and professionalism.
2. Contribute to the body of knowledge by incorporating scholarly activities with education and consultation in the community, patient care and performing research.
3. Prepare graduates to be critical care therapist, educators, managers and researchers.
4. Model professionalism through leadership in professional associations.
5. Model life-long learning and development by advancing academic credentials, achieving promotion and tenure, and continual advancement of clinical skills
6. Facilitate exceptional academic and clinical performance through innovative teaching strategies, active learning and use interactive technology
7. Develop staff to enable the department and faculty to operate with optimal efficiency
8. Evaluate, improve and expand programs through reviewing education models, innovative curriculum delivery and community needs.
9. Communicate with the school, university and public about the respiratory therapy program and its professional impact upon the community.

Adopted by the Department of Physical Therapy Student
Handbook 2010 – 2011 page 12.

History and Accreditation Status

Planning for the Respiratory Care Program began in the early 1990's when the city of San Antonio determined it wanted a higher level critical care respiratory therapist. This program was started in 1994 with 16 students; they were awarded their Bachelor of Science Degree in August of 1996. In May of 1998, the Department of Respiratory Care moved into the new Allied Health/Research Building on the north campus of the UT Health Science Center – now known as the Greehey Research Campus. This building was created with the state of the art technology for classroom and laboratory instruction, as well as the capability to provide distance education to sites throughout South Texas.

In 1997, the Advanced Standing Program was initiated to provide an avenue for respiratory therapists who are credentialed to obtain a bachelor of science degree. We have graduated 44 advanced standing students.

In 2001, the Laredo Extension Campus Respiratory Care program began with two students and grew to graduating 14 students. In 2010 the extension campus respiratory care program closed to house all education in San Antonio.

In January of 2012 the Respiratory Care program will move into a new home on the 3rd floor of the Medical School. This will provide physical and closer working relationship with University Hospital and the VA.

Accreditation

The Department of Respiratory Care has received national accreditation by the Commission on Accreditation for Respiratory Care ([CoARC](#)). The next CoARC site visit will take place in 2018. Students and or the public can file any comments or complaints regarding the respiratory therapy program by contacting the Commission on Accreditation for Respiratory Care at 1248 Harwood Road, Bedford, Texas 76021-4244 or call 817-283-2835.

Students successfully completing all program requirements are eligible to take the National Board for Respiratory Care ([NBRC](#)) Certified Respiratory Therapist (CRT) and the Registered Respiratory Therapist (RRT) examinations and to obtain a license/certification to practice respiratory therapy in Texas through the [Texas Department of State Health Services](#).

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.htm>

Excess Hours.

Students who have reached or exceeded the maximum number of credit hours, will be required to pay non-resident tuition, beginning fall 2008, regardless of residency status. See "[Excess Hours](#)" in the "[General Academic Policies](#)" section of the UTHSCSA Catalog on page 358.

Conduct and Ethics

The Department of Respiratory Care 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.

Academic Integrity

The Department of Respiratory Care views academic dishonesty (cheating) as a serious breach of personal conduct. Caring for patients requires the highest level of personal integrity and honesty. Evidence of academic dishonesty will be regarded as evidence of a lack of personal integrity and will reflect significantly on the student's professional character. All cases of academic dishonesty will be investigated as appropriate. Any form of academic dishonesty may result in dismissal from this program.

Academic Dishonesty

Any student who commits an act of academic 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: Using, or attempting to use, unauthorized material or information as study aids in any academic exercise. Visually or verbally receiving or giving information before, during or after tests, quizzes or examinations, when not specifically allowed by the instructor, is a form of unauthorized assistance and is defined as cheating. Aiding and abetting others in their pursuit of academic dishonesty is also prohibited, as is providing false information in connection with any inquiry regarding academic integrity.

Plagiarism: Presenting as one's work the work of someone else without properly acknowledging the source. Plagiarism is theft — using words and ideas of another person as if they were one's own. Exact copying should be enclosed in quotation marks and be appropriately documented in footnotes or end notes that indicate the source of the quotation. Paraphrasing is also plagiarism.

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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Counterfeit work: Turning in work as one's own that was created, researched, or produced by someone else. Turning in a report of another's research, submitting a paper researched or written by someone else, having someone else take a test, and submitting joint projects as solely one's own, are all forms of counterfeit work and are unacceptable.

Falsification of Academic Records: Knowingly and improperly changing grades on transcripts, grade sheets, electronic data sheets, related documents, academic reports, tests and projects is an act of academic dishonesty.

Falsification of Data or Creation of False Data: Reporting untrue data in research or experimental procedures.

Theft: Communicating all or any part of tests, lab practical exams or answer sheets, specifically prepared for a given course and as yet not used or publicly released by the instructor of a course, and theft of completed tests constitutes academic dishonesty. This includes retaining, possessing, using or circulating previously given examination materials. Stealing, destroying, modifying, defacing or concealing library, computer or laboratory materials with the purpose of depriving others of their use is also a form of theft. This constitutes intentionally obstructing or interfering with another student's academic work.

Unauthorized Reuse of Work: Turning in the same work to more than one class without consent of the instructors involved constitutes academic dishonesty.

¹ Adapted from the *Student Handbook of Trinity University* and *University Principles and Safeguards of Northwestern University*.

Sexual Harassment & Misconduct

The Department of Respiratory Care and the HSC views all acts of sexual harassment as a serious breach of personal conduct on the part of the individual(s) concerned. Since the practice of Respiratory Therapy involves touching patients, it is particularly important that this be done professionally and in a manner which will not leave the actions of the therapist open to misinterpretation. During the course of training, students are expected to practice on each other. This will often involve touching each other. At all times, it is essential that this be done professionally with appropriate care and consideration for the dignity of the person involved. The issue of sexual harassment will be addressed specifically during the early part of the program.

Definitions

Sexual Misconduct. Sexual misconduct includes unwelcome sexual advances, requests for sexual favors, or verbal or physical conduct of a sexual nature directed towards another individual that does not rise to the level of sexual harassment, but is unprofessional and inappropriate for the workplace or classroom.

Sexual Harassment. Sexual harassment, includes unwelcome sexual advances, requests for sexual favors, verbal or physical conduct of sexual nature when:

1. submission to such conduct is made either explicitly or implicitly a term or condition of employment or student status;
2. submission to or rejection of such conduct is used as a basis for evaluation in making personnel or academic decisions affecting that individual; or
3. such conduct has the purpose or effect of unreasonably interfering with an individual's performance as an administrator, faculty member, staff, resident, fellow or student, or creating an intimidating, hostile or offensive environment.

Examples. Examples of behavior that could be considered sexual misconduct or sexual harassment includes, but are not limited to:

1. physical contact of a sexual nature including touching, patting, hugging, or brushing against a person's body;
2. explicit or implicit propositions or offers to engage in sexual activity;
3. comments of a sexual nature, including sexually explicit statements, questions, jokes or anecdotes; remarks of a sexual nature about a person's clothing or body; remarks about sexual activity; speculation about sexual experience;
4. exposure to sexually oriented graffiti, pictures, posters, or materials; and/or
5. physical interference with or restriction of an individual's movements.

Consensual Relationships

It is the policy of the Health Science Center that the following romantic or sexual relationships are strongly discouraged.

1. between a faculty member and a student, resident, post-doc or fellow who is enrolled in the faculty member's course or who is otherwise under the supervision of the faculty member, or
2. between a supervisor and a person under his or her supervision.

Every consenting romantic and sexual relationship between a faculty member and a student, resident, post-doc or fellow, or between supervisor and employee may potentially evolve into a sexual harassment case with serious implications, either from a subsequent change of attitude by the parties involved or from a contemporary complaint from a disadvantaged third-party. Faculty members exercise power over students, residents, post-docs or fellows, as do supervisors over employees, whether in evaluating them, making recommendations for their promotion or future employment, or conferring other benefits. Others may be adversely affected by the relationship in that it places the faculty member or supervisor in a position to favor or advance one individual's interest at the expense of others.

As provided in the American Association of University Professors policy on consensual relationships, faculty are expected to be aware of their professional responsibilities in their relationships with students and "avoid apparent or actual conflict of interest, favoritism, or bias." These relationships are viewed as damaging to the University environment and therefore are strongly discouraged. Complaints concerning consensual relationships by non-participating individuals whose work or school environment is adversely affected by the behavior will be treated as third-party sexual harassment or sexual misconduct complaints.

Adopted from the HSC HOP <http://www.uthscsa.edu/eo/harassment.asp>

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. Lisa McDougle, 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/eo/request.html>

**An academic institution and/or clinical site is required to provide accommodation only if the student discloses a known disability. If an accommodation is not needed, the student is not required to disclose the disability. The decision belongs to the student.

Students must meet the objectives of the class and/or clinical course in order to pass. Objectives do not change for a student with a disability – only the manner in which they are met.

Core Performance Standards

Essential eligibility requirements for participation in the respiratory care program: Respiratory therapy is a practice discipline, with cognitive sensory, affective and psychomotor performance requirements. The Core Performance Standards in the table below identify essential requirements for participation in the respiratory care program.

Activity	Standard	Examples of Necessary Activities
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		(not all inclusive)
Critical Thinking abilities	sufficient for clinical judgment	Identify cause and effect relationships in clinical situations and exercise independent judgment and think under pressure.
Interpersonal skills and abilities	Sufficient to interact with individuals, health care members, families, and people from a variety of social, economical, cultural and intellectual backgrounds	Be able to establish rapport with patients, their families, and other health care providers. Have the emotional strength to regularly deal with death and dying.
Communication skills and abilities	Sufficient for verbal and written interactions with others	Explain treatment procedures, patient education and teaching, document actions and patient responses to therapy.
Mobility	Sufficient time walking to move from room to room, long periods of time standing and maneuver in small spaces	Move around a patient room, work space and treatment areas administer cardiopulmonary resuscitation, move bedridden patients and heavy equipment (over 70 pounds). Walk briskly to emergency situations.
Motor skills	Gross and fine motor abilities sufficient to provide safe and effective	Calibrate and use equipment, manipulate small pieces of equipment and typing documentation in the electronic medical records.
Hearing	Auditory ability sufficient to monitor and assess health needs	Hears monitor alarms, emergency signals, hears breath and heart sounds
Visual	observation and assessment necessary	Observes patient responses to therapy, evaluate computerized graphically displayed patient information.
Tactile	physical assessment, provide therapy	Perform physical assessments related to therapeutic intervention, e.g., intubation and drawing arterial blood gases

*Adapted from: SREB Council on Collegiate Education for Nursing, March (1993). *The American with Disabilities Act: Implications for nursing education.*

Advancement, Grades, Promotion, 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 (75%)**, 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 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.

Examinations are given via the BlackBoard Course Enrolled. It is required all students download the software "LOCK DOWN BROWSER" on to the personal computer. Tests will be administered in the classroom **ONLY on the student's personal computer.**

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 Student Progress Committee (SPC). The SPC consists of the Department Chair and members of the department's faculty. The SPC 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 75% in all respiratory care courses taken while enrolled in the respiratory care 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.*
- *Maintaining a grade point average less than a 2.5 (C) or 75% in all respiratory care courses taken while enrolled in the program.*
- *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 [UTHSCSA 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 probation. A letter will inform the student and the Associate Dean of the School of Health Professions the student is being placed on 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 [UTHSCSA 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 [UTHSCSA 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 Respiratory Care 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 SPC 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/Associate Dean 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 SPC. 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 SPC.
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/dentist/or any other appointments during class or clinical time. Personal illness, immediate family emergency, and natural disasters are reasons for absence.

Student Computer

All students are expected to have a laptop computer with the latest Office and security software. It is the student's responsibility to purchase the laptop through the HSC computer store. Any home laptop computers must be no more than 2 years old.

Blackboard and Peoplesoft

All courses are housed in the Blackboard Learning Management system via the HSC homepage at www.uthscsa.edu. Click on the link at the bottom of the page Blackboard. The Welcome page for Blackboard will open. You will login using your user name and password. A student list of courses that you are enrolled will appear. To have access to Blackboard you must pay for university bill on time.

Students are expected to register for courses via the Peoplesoft system. This system is housed on the www.insideuthscsa.edu webpage. This system has your registration, transcripts and contact information.

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. Starting Spring of 2012 a dress code will be implemented. This will ensure the professional dress is enforced. Students will purchase a Respiratory Care Polo Shirt and/or scrubs to wear on campus and in clinic daily. Students may wear jeans (without tears, holes, or shredding), khaki pants or

shorts (mid-thigh without tears, holes or shredding) with the polo or the scrubs when in class or on campus. Failure to follow the dress code will result in being placed on probation and possible dismissal.

Correspondence Between Students and Faculty

1. Students are responsible for setting up and checking their UTHSCSA Livemail Accounts every day.

NO CORRESPONDENCE WITH FACULTY USING PRIVATE E-MAIL ADDRESSES WILL BE PERMITTED.

2. Students are responsible for using and checking their Blackboard course emails every day.
3. A schedule of office hours will be noted in each faculty member's course syllabus and outside the office door.
4. Students are responsible for checking blackboard courses at DAILY for announcements/notices.
5. 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.

To receive help with your UT Health Science Center email account, see www.uthscsa.edu/computing or contact Triage (Computing Resources help desk) at 567-7777.

If you wish to have your email delivered to an off-campus account, you must go to the Triage office (MED 436.L) with an official picture ID and ask to have your email forwarded. You will need to know the exact spelling of your forwarding address. Alternatively, you can send triage@uthscsa.edu email from your UT Health Science Center account, requesting email forwarding--be sure to include the complete forwarding address. The email routing change takes effect overnight. Once this routing is requested, it is the ***student's responsibility*** to notify Triage of any changes. Do not assume delivery changes have occurred unless you receive an email reply from Triage informing you of the change.

Students who fail to follow these methods for correspondence may be placed on probation.

Change of Contact Information

It is expected ALL student address, e-mail address and telephone number are current and on file with the Registrar and Department of Respiratory Care **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. The student is responsible for making changes to their contact information via the <http://inside.uthscsa.edu>. Students are responsible for official notices from the University e-mailed to the campus e-mail address (livemail account) or mailed to the 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 students maintain active student membership in the **American Association for Respiratory Care while enrolled in the program.**

State and National Credentialing

1. 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 and entry to practice respiratory therapy. The CRT examination is required to be completed during the spring semester of the senior year. The examination fee is \$190.00.
2. 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.

Graduation Requirements

To graduate from the Department of Respiratory Care bachelor's degree program, students must:

- Complete all required coursework with a grade point average (GPA) of 2.0 or better
- Complete all required respiratory care professional courses with a grade of **C** (75%) or better
- Successfully complete the Entry Level CRT and RRT Examinations, given by the National Board for Respiratory Care, or an equivalent departmental examination.
- Successfully complete a comprehensive end-of-program competency assessment
- Hold current certification in Basic Life Support for Healthcare Professionals (BLS), Advanced Cardiac Life Support (ACLS) and Pediatric Advanced Life Support (PALS) and Neonatal Resuscitation Provider course (NRP).

Clinical Policies and Procedures

Clinical Hours

Clinical rotations in area hospitals begin at 6:30 a.m. and end at 3:15 p.m. or 6:30 am and end at 7:15 pm 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 and community service activities 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 Director of Clinical Education (DCE). The DCE and clinical faculty/instructors/preceptors 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 DCE.

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/staff assignments made for that clinical day. If clinical assignments cannot be arranged because of tardiness the student will be required to make-up **two** full clinical days.

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, 567-8855 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.

DataArc Learning Management system

Students are expected to use the Data Arc Learning Management System for the clinic. This system maintains all documentation for clinical activities. The clock hours, the physician contact hours, the competencies, the patient tasks and number of patients cared for in a day, the affective evaluations, the clinical instructor and clinical site evaluations, student resources surveys and graduate surveys.

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.

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

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 for tuberculosis done within one year prior to initial registration as a student at UTHSCSA and every year in the clinical setting. Many hospitals require students have the influenza vaccine. All students will be required to demonstrate proof of this vaccine. (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.

Clinical Final Examinations Comprehensive End-of-Program Competency Assessment Examinations

All clinical courses have comprehensive clinical final examination administered at the end of each clinical semester. 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 SPC.

RESC 4009: The students will complete a Certification Self Assessment Examination (CSAE) for the final exam.

RESC 4019: The student will complete a departmental final exam or the Certified Respiratory Therapist (CRT) examination. The CRT is taken through the NBRC at a fee of \$190.00.

RESC 4029: The student will complete a departmental two part examination that has a multiple choice and clinical simulation examination or the Registered Respiratory Therapy examination (the written registry examination and the clinical simulation examination). These two examinations are taken through the NBRC at \$390.00

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).
2. University I.D. cards must be visibly worn at all times.
3. For clinical rotations, students will wear plain scrubs (Teal blue)) 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 medical history and physical exam on patients 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 16 hours for every clinical semester of approved professional continuing education and/or service activities. Seminars, lectures, workshops, health fairs, writing for a professional journal, community and civic activities may be submitted to meet this requirement. These hours must be approved by the Chair/Program Director or Director of Clinical Education. Expected attendance for the following Professional Development Activities:

Fall 2011

October 22, 2011

Defeat ALS Walk
(Students will volunteer for a variety of service)

November 5, 2010

School of Health Professions – Health Profession Fair
(Students spend two days preparing for the fair in regards to decorations, activity planning and demonstrating to the 2000-3000 students who attend.)

Spring 2011

February 26, 2011
March 8 & 9, 2011

Cystic Fibrosis Tower Climb
Respiratory Care Symposium

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*.

Respiratory Care Student Activities

The Department of **Respiratory Care Student Organization** has been the “soul” of the department. The organization provides an opportunity for students to participate together as one voice across the campus and city. The organization has Class officers for those who are interested in leadership positions to move the organization forward. Each Class of students has had its own class officers. This year there will be the Class of 2011 officers and by September 1, 2010 the Class of 2012 will elect class officers. The class will identify a Faculty sponsor. The class officers will meet with the Chair on a bi-semester basis. Class Presidents are expected to serve on the Department of Respiratory Care Advisory Committee. The Advisory Committee meets one-two times per year.

All students are encouraged to participate in the Respiratory Care Student Organization. The organization participates in the community service activities such as the School of Health Professions Health Fair, community health fairs, volunteer to work the ALS walk and CF tower climb/walk.

The RCSO also participates in the Intramural sport activities during the fall and spring semesters. The RCSO has participated in soccer, volleyball and flag football.

Respiratory Care Students are invited to participate in the Student Government Association.

Respiratory Care Students are invited to serve on University Committees such as the Parking and Traffic Safety Committee, Campus Health & Wellness Committee, Student Health Advisory Committee, Library committee, Infection Policy and Education Committee and Computing Resources committee.

Respiratory Care students are invited to participate on focus groups or task forces with the Dean or Associate and/or Assistant Deans of the School of Health Professions.

Student Honors and Awards

The Respiratory Care 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 time of graduation.

Clinical Excellence Award:

The Department recognizes the student showing superior performance throughout clinical rotations at time of graduation.

Advanced Standing Student Award

The Department recognizes the Advanced Standing Student showing superior performance in leadership, academics and clinical skills at the time of graduation.

Donald Stephenson Endowed Scholarship:

The Department recognizes students with good academic standing and overcome adversity during the professional program.

David Shelledy Endowed Leadership Scholarship:

The Department recognizes, excellent academic standing, student leadership and professionalism during the professional program.

David Vines Endowed Clinical Excellence Scholarship:

The Department recognizes student clinical excellence in critical care after the completion of RESC 4009 during the professional program.

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 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

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 the 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).

For more information, contact:

Lisa McDougale, PhD
Assistant Dean of Student Affairs
School of Health Professions
(210) 567-8800
mcdougale@uthscsa.edu

Helen Sorenson, MA, RRT, FAARC
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.

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 of Respiratory Care.

<u>General Respiratory Care</u>	<u>Authors</u>
Egan's Fundamentals of Respiratory Care, 9 th edition Mosby's Respiratory Care Equipment	Wilkins, Stoller, Kacmarek Cairo, Pilbeam
<u>Pharmacology</u>	
Rau's Respiratory Care Pharmacology	Gardenhire
<u>Physiology</u>	
Cardiopulmonary Anatomy and Physiology	Des Jardins
<u>Pulmonary Function Testing</u>	
Manual of Pulmonary Function Testing	Ruppel
<u>Perinatal/Pediatrics</u>	
Perinatal and Pediatric Respiratory Care	Walsh
<u>Pulmonary Disease and Critical Care</u>	
Clinical Manifestations and Assessment of Respiratory Disease	Des Jardins, Burton
Respiratory Disease a case study approach To Patient Care	Wilkins, Dexter
Mechanical Ventilation: Physiological and Clinical Applications	Pilbeam
<u>Assessment and Monitoring</u>	
The Only EKG Book You'll Ever Need Clinical Assessment in Respiratory Care	Thaler Wilkins

Recommended Journals and Periodicals

Respiratory Care	Critical Care Medicine
RT Magazine	JAMA
AARC Times	NEJM
Chest (The Cardiopulmonary and Critical Care Journal)	Anesthesia and Analgesia
American Review of Respiratory and Critical Care Medicine	Heart and Lung
Annals of Internal Medicine	Anesthesiology
Advance for Respiratory Care Practitioners	Advance for Managers of Respiratory Care
Respiratory Care Education Annual	

Professional Organizations

American Association for Respiratory Care (AARC)

www.aarc.org

Texas Society for Respiratory Care (TSRC)

www.tsrc.org

Central Region of the Texas Society for Respiratory Care

<http://www.tsrc.org/centralinfo.asp>

Alamo District for the Texas Society for Respiratory Care

American College of Chest Physicians (ACCP or CHEST)

www.chestnet.org

Texas Society for Allied Health Professions (TSAHP)

www.tsahp.org

Association of Schools of Allied Health Professionals (ASAHP)

www.asahp.org

National Board for Respiratory Care (NBRC)

www.nbrc.org

Commission on Accreditation for Respiratory Care (CoARC)

www.coarc.com