



Waco, Texas

RESPIRATORY CARE TECHNOLOGY PROGRAM
STUDENT HANDBOOK

McLennan Community College**Respiratory Care Technology Program • Student Handbook****Program policies apply to all students and faculty.***McLennan Community College does not discriminate on the basis of gender, disability, race, creed or religion, color, age, or national origin.*

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Financial aid – Students are encouraged to meet with a representative from the MCC Financial Aid office explain to the students how to plan for costs (tuition, fees, books, etc.) incurred during semesters in which the student is not a full time student (< 12 credit hours) during the summer, as well as in general. A variety of financial assistance programs are available (scholarships, grants, loans and work study opportunities). For questions regarding financial aid call: 254-299-8689. The respiratory care curriculum is rigorous and consists of six semesters of a full time course load. Students are discouraged from working full time while enrolled in the program.

Program accreditation: The McLennan Community College Respiratory Care Technology Program is accredited by the Commission on Accreditation of Respiratory Care (CoARC), 1248 Harwood Road, Bedford, Texas 76021-4244, (817) 283-2835. Graduates are eligible for credentialing exams for the Certified Respiratory Therapist (CRT) and Registered Respiratory Therapist (RRT) administered by the National Board for Respiratory Care (NBRC). A copy of the letter from and the Commission for Accreditation of Respiratory Care Programs (CoARC) is included in the addendum to establish that the program is accredited.

Brief program history –The program was first accredited in 1981 as a one year certificate program. In 1996 the program expanded to include a two year associate's degree in respiratory care. The Certificate program was phased out in 2000 when the criteria for admission to the credentialing exams were revised by the NBRC to require a minimum of an associate's degree as entry level. Development of the curriculum is based on the role of the CoARC, the National Board for Respiratory Care (NBRC), the Texas Higher Education Coordinating Board and the Workforce Education Course Manual (WECM). Local industry plays an important role in developing and reviewing the program curriculum.

Admission to the program as a limited enrollment Health Sciences Program is based on completion of prerequisites with an overall GPA in those 5 prerequisites of 2.75. Minimum requirements for admission:

- a. By the application deadline (October 30) – completed or enrolled in the prerequisite courses. Achieve at least a C in each of the prerequisites with an overall grade point average in the prerequisite courses of 2.75. All of the prerequisite courses must be completed for admission to the program.
- b. All applications for the Respiratory Care Technology Program will be reviewed by the Program Admissions Committee according to admission criteria. Applicants will be ranked according to a points system. Current admission criteria may be obtained by contacting the program director (254-299-8426).
- c. Meeting the minimum admission criteria does not guarantee admission to the program.

Program curriculum

Curriculum - Approved by the Texas Higher Education Coordinating Board.

First Year

Fall Prerequisites

- ENGL 1301 Freshman Composition I
- MATH 1314 College Algebra or MATH 1342
- RSPT 1371 Introduction to Respiratory Care
- BIOL 2404 Anatomy & Physiology
- RSPT 1227 Applied Physics for Respiratory Care

Spring

- RSPT 1266 Practicum – Respiratory Care
- RSPT 1340 Advanced Cardiopulmonary Anatomy and Physiology
- RSPT 1410 Respiratory Care Procedures I
- RSPT 2317 Respiratory Care Pharmacology

Summer

- RSPT 1260 Clinical – Respiratory Care
- RSPT 1411 Respiratory Care Procedures II
- RSPT 2310 Cardiopulmonary Disease

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Second Year

Fall

- RSPT 1267 Practicum – Respiratory Care
- RSPT 2258 Respiratory Care Patient Assessment
- RSPT 2414 Mechanical Ventilation
- RSPT 2305 Pulmonary Diagnostics
- PHIL 2306 Ethics

Second Semester - Spring

- RSPT 1241 Respiratory Home Care/Rehabilitation
- RSPT 2233 Respiratory Care Case Management
- RSPT 2353 Neonatal/Pediatric Cardiopulmonary Care
- RSPT 2266 Practicum – Respiratory Care
- PSYC 2301 General Psychology

Summer

- RSPT 2230 Examination Preparation
- RSPT 2267 Practicum – Respiratory Care

Program goals - To prepare students as competent registered respiratory therapists (RRT).

Upon completion of this program, the student will demonstrate the:

- Ability to comprehend, apply, and evaluate the clinical information relevant to their role as a registered respiratory therapist. (Cognitive)
- Technical proficiency in all skills necessary to fulfill the role of the registered respiratory therapist. (Psychomotor)
- Personal behaviors consistent with professional and employer expectations for the registered respiratory therapist. (Affective)

Degree plan – the degree plan is included in the addendum.

Weekly schedule – An example of a course schedule for each semester emphasizes class work, labs, clinical courses and study that accounts for about 50 hours/week in each of the four long semesters. An example of a schedule is included in the Addendum

Instructional Program:

- Didactic (cognitive) – classroom instruction
- Campus lab (transition from the classroom to the bedside – cognitive, psychomotor and affective skills are emphasized)
- Clinical (cognitive, psychomotor and affective skills are developed at clinical assignments)
- Students enrolled in the Respiratory Care Technology Program gain a wide variety of experiences through rotations at clinical sites in central Texas. Students are supervised in the clinical setting at all times by qualified clinical staff. Students complete approximately 1000 clinical hours during their two years of enrollment. Students will gain experience working with state-of-the-art equipment during their clinical rotations, including short rotations in special clinical areas. It is the student's responsibility to arrange for transportation to the clinical sites.
- The students' clinical schedule includes 6:30AM to 3:00PM and 2:30PM to 11:00PM shifts.
- Travel to clinical assignments which are as far as 60+ miles, emphasizes the need for dependable transportation.
- Evaluation includes – classroom exams (cognitive), lab skills (psychomotor, cognitive and affective) and clinical (psychomotor, cognitive and affective); the clinical affective evaluation includes these major categories, which are further described in the pertinent clinical syllabi– Dependability, Communication, Interpersonal, Clinical Competence and Professional Development.

Remediation Plan – Clinical Practicums

When a student consistently struggles to apply psychomotor & cognitive skills to successfully complete a mastery competency, the clinical instructor will nominate the student for remediation. The instructor will request remediation via the E-Value Daily Evaluation form. Selecting the “Yes” remediation button at the bottom of the form generates an electronic notification to the Program Director, Director of Clinical Education, and the remediation faculty. The “Yes” response also requires clinical instructor comment. The comment should include the specific procedure being requested, i.e, ABG sampling, Trach Care, etc. The clinical instructor will visit with the student regarding the requested remediation and instruct the student to contact the remediation faculty.

The student will make an appointment with the remediation faculty. The student is responsible for reviewing the procedure *prior to* meeting with the faculty.

The remediation faculty will work with the student in the RC lab. Once remediation is complete, the faculty will follow up with e-mail notification to the requesting instructor, Program Director, and Director of Clinical Education.

Remediation Plan – Academic Courses

When a student is struggling in the classroom, the faculty will respond, proactively. If a student consistently performs poorly on the daily Individual Readiness Assessment quizzes (IRAs) or scores lower than 80% on the first exam or subsequent exams, the faculty member will contact that student by email, requiring that the student make an appointment with the teacher to discuss their preparation for class (IRAs) or to review the exam. If the student does not respond to the request for a meeting with the faculty, the teacher will refer the student to the MCC Success Coaches. The Success Coaches of McLennan Community College are committed to building growth-oriented relationships that inspire students to achieve academic and personal success. While helping students develop intellectually, emotionally, and socially, we will serve as guides for sustainable success and empower students to connect to MCC and their community.

Uniform –the clinical dress code. See the policy and procedure.

Books – building your personal library. The faculty places emphasis on required and recommended textbooks for the courses. The textbooks, including costs, for each course are posted on the MCC Bookstore web site prior to the beginning of each semester.

Provider courses, CPR – BLS for the Health Care Provider is required before the first clinical course. The student must provide a copy to the Program Director and no one else.

Immunizations – an immunization record is provided to each student to be completed by the week before the first clinical course. Immunizations must be current for varicella, measles, mumps, rubella, diphtheria/tetanus, seasonal flu and Hepatitis B.

Criminal background – the procedure for obtaining a criminal background check is explained in the program policy and procedure for the criminal background check. The student will pay the screening costs on-line. After enrollment in the program, the applicant must receive a negative report for a drug screen and must undergo a criminal background check before clinical courses begin.

A criminal background may prohibit a student from participating in clinical course work and therefore from completing the program. A criminal background may prohibit a graduate from obtaining a license to practice respiratory therapy in Texas.

<http://tmb.state.tx.us/page/licensing-other-license-types>

Drug Screen - the procedure for obtaining a drug screen is explained in the program policy and procedure for the drug screen. After enrollment in the program, the applicant must receive a negative report for a drug screen and must undergo a criminal background check before clinical courses begin. The student will pay the screening costs on-line. See the program policy and procedure for the drug screen.

Program costs – each student is provided an estimate of program costs. The document includes estimates for tuition, fees, books, uniforms, CPR, immunizations, stethoscope and uniforms/shoes. An example is included in the Addendum.

Official MCC E-mail Communication Policy (E-XXXI-b)

- All students are provided an official e-mail address.
- MCC student e-mail addresses will be the **only** e-mail authorized to communicate official college information or business.
- Students are expected to read and, if needed, respond in a timely manner to college e-mails. It is suggested that students check college e-mail daily to avoid missing time-sensitive or important college messages.
- Students may forward college e-mails to alternate e-mail addresses; however, MCC will not be held responsible for e-mails forwarded to alternate addresses.
- A student's failure to receive or read official communications sent to the student's assigned e-mail address in a timely manner does not absolve the student from knowing and complying with the content of the official communication.
- The official college e-mail address assigned to students can be revoked if it is determined the student is utilizing it inappropriately.
- College e-mail must not be used to send offensive or disruptive messages nor to display messages that violate state or federal law.

Use of College e-mail must comply with the following policies:

- "Responsible Use of College Computing Resources" (E-XXXI); and
- "General Conduct Policy" (E-VIII).

Signature Documents: The following documents are described and are signed by each student for the students' program records. Also see program policies and procedures. A copy of these documents is included in the addendum.

1. Eligibility for credentialing and licensing
2. Liability statement
3. Confidentiality
4. Cheating and plagiarism
5. HIPAA

What does a respiratory therapist do? Essential functions (essential requirements and technical standards) and entry-level competencies are described.

Each student enrolled in the Respiratory care Technology Program must demonstrate the following abilities:

Technical Standards

- Observation – The student must be able to participate actively in all demonstrations, lab exercises, and clinical experiences in the professional program component and to assist and comprehend the condition of all patients assigned.
- Communication – Using the English language, the student must be able to communicate effectively, tactfully and sensitively with patients in order to elicit information, assess nonverbal communications, and be able to effectively transmit information to patients, fellow students, faculty and staff, and all members of the health care team.
- Motor – The student must have sufficient motor (physical) function to elicit information from patients by appropriate therapeutic maneuvers; be able to perform basic tests; possess all skills necessary to carry out therapeutic and diagnostic procedures; be able to interpret appropriate examinations and procedural results; and be able to execute motor movements reasonably required to provide general care and emergency treatments to patients.
- Intellectual/Conceptual Integrative and Quantitative Abilities – The student must be able to measure, calculate, reason, analyze, evaluate, and synthesize. Problem solving, the critical skill demanded of health practitioners, requires all of the aforementioned intellectual abilities.
- Behavioral and Social Attributes – The student must possess the emotional health required for full utilization of the student’s intellectual abilities; the exercise of good judgment; the prompt completion of all responsibilities, attendant to care of patients; and the development of mature, sensitive and effective relationships with patients, fellow students, faculty and staff, and all members of the health care team.
- Students must also be able to tolerate expected workloads, function effectively under occasional stressful situations, adapt to changing environments, display flexibility, and learn to function in the face of uncertainties inherent to clinical problems as displayed by various patients. Compassion, integrity, concern for others, interest, and motivation are personal attributes that each student should possess.

Physical Standards:

- ⊗ Lift up to 50 lbs., carry up to 25 lbs. and push or pull up to 250 lbs., (the weight of equipment on wheels).
- ⊗ Stoop to adjust equipment, kneel to perform CPR, crouch to locate and plug in equipment and reach up to 5'6" above the floor to attach and operate equipment on the wall.
- ⊗ Handle, retrieve, store and move large and small equipment.
- ⊗ Grasp and maintain the grasp of syringes, laryngoscopes and endotracheal tubes
- ⊗ Stand for prolonged periods of time, working extended hours of 12 hours or more; walk for extended periods of time to all areas of a health care facility.
- ⊗ Feel to palpate pulses, for arterial puncture and to sense body temperature; manipulate dials and controls (knobs) on various types of equipment.
- ⊗ Hear verbal directions, pagers (voice messaging), as well as gas flow through equipment; hear breath sounds and heart sounds through a stethoscope.
- ⊗ See patient conditions such as skin color, use of accessory muscles of breathing, or a mist from a nebulizer; see waveforms and other digital displays of patient measurements (e.g., blood pressure, heart rate and rhythm, blood oxygen saturation, etc.) on bedside monitors. Distinguish colors.
- ⊗ Smell smoke, fumes and other odors.
- ⊗ Typing up to 60 WPM, usually on a computer keyboard.
- ⊗ Use a calculator as well as solve simple math problems without a calculator.

The work environment requires the respiratory therapist to work:

- ⊗ Alone and independently, work with others and work around others, entailing verbal and face-to-face contact.
- ⊗ In confined areas, able to accommodate temperature changes and noise.
- ⊗ Around and with electrical and pressurized equipment.
- ⊗ In spite of fatigue

McLennan Community College provides equal opportunities to all individuals and does not discriminate against any individual regardless of race, color, religion, national or ethnic origin, gender, disability, age, veteran status, genetic information, sexual orientation, gender identity, pregnancy, or other legally protected category in its educational programs, activities, or employment. <http://www.mclennan.edu/employees/policy-manual/docs/E-XXXIV.pdf>

Respiratory Care Technology Program skills and simulation lab – the students develop clinical skills in the Respiratory Care Technology Program skills and simulation lab, practicing on high and low fidelity manikins.

RSPT program officials

- Vice president of Instruction – Fred Hills, PhD
- Dean of Workforce Education – Glynnis Gaines, MS
- Program Director – Donna Mendoza, BAT, RRT, RCP
- Director of Clinical Education – Marighny Dutton, BSRC, RRT, RCP
- Medical Director - Rodney Richie, MD, FACP, FCCP

Attendance Policies

Classroom Attendance Policy:

Regular and punctual attendance is expected of all students. Clinical instructors will maintain a complete record of attendance. Students will be counted absent from class meetings missed, beginning with the first official day of classes. Students, whether present or absent, are responsible for all material presented or assigned for a course and will be held accountable for such materials in the determination of course grades.

Absence from 25 percent of scheduled lecture and/or laboratory meetings will be taken as evidence that a student does not intend to complete the course. Unless the instructor has reason to believe the student will complete the course, the student will be withdrawn from the course with a grade of W. The instructor may reinstate the student if the instructor is satisfied that the student will resume regular attendance and will complete the course.

If the student's 25 percent absences are reached after the official drop date, the instructor may assign a W, if the student is passing and requests to be withdrawn. However, if a student who is not passing reaches the 25 percent point after the official drop date, the student will receive an F. In extenuating circumstances, the instructor may assign a W to a student who is not passing.

Each absence will count toward attendance requirements. Students will be permitted to make up classes and assignments missed due to absences caused by

1. Authorized participation in official college function.
2. Personal illness.
3. Illness or death in the immediate family.
4. Observance of a religious holy day.

The instructor has the prerogative of determining whether a student may make up work missed due to absences for other reasons. It is the student's responsibility to inform the instructor of the reason for the absence and to do so in a timely fashion.

Infectious and environmental hazardous materials and safety compliance

Infectious and environmental safety is explained during first-year student orientation, prior to the beginning of clinical rotations. This on-campus session describes the Materials Safety Data Sheets (MSDS), Hazardous Materials Labeling, Personal Protective Equipment (PPE), Emergency Medical Plan, Internal Emergency Codes, Fire Safety, Hospital Utility Systems (water, electrical, equipment), and Biohazard Disposals, including Sharps Containers. Students also attend hospital-sponsored orientation sessions in which the Infection Control and Safety Departments expound upon institutional-specific details regarding infectious hazards and safety.

Clinical Rotations:

The goal of the clinical portion of this program is to introduce the student to skills necessary to become a competent, effective respiratory therapist. The clinical courses are designed with ample time for students to complete assignments each semester.

Clinical Attendance Policy

Regular and punctual attendance is expected of all students. Clinical instructors will maintain a record of attendance for each rotation. If a student misses a clinical day, he/she must present documentation of the reason for the absence to a committee of respiratory care faculty. If the student cannot provide documentation to meet the course requirements for absences, the student may be withdrawn from the course.

Students must "Time In" and "Time Out" on designated computers. Students may not clock in via cell phone or personal computer. Students may not clock in via hospital computers that have not been previously approved. Clinical Instructors will assess the IP addresses each day during the Daily Evaluation.

Students will be permitted to make up class work and assignments missed due to absence caused by:

1. Authorized participation in official college function.
2. Personal illness.
3. Illness or death in the immediate family.
4. Observance of a religious holy day.

Students should NOT come to campus or clinic, when sick! Return only when:

- Afebrile (fever-free) for 24 hours
- No vomiting for 24 hours
- No diarrhea for 24 hours

If a student is ill when he/she reports to the clinical site and/or if the student is febrile, the faculty may dismiss him/her. The student will be considered, "absent" for the day. The student will appear before the Attendance Committee to discuss additional clinical time (ACT). If the student objects to being dismissed, he/she may present the concerns to the attendance committee.

The attendance committee will be composed of the clinical faculty member, the Program Director, and the Director of Clinical Education. **The committee has the prerogative of determining whether or not a student may make up work missed due to absences for other reasons.** If the student accrues more than 16 total hours absence, he/she will receive "Unsatisfactory" Rotation Evaluation and may receive "No Credit" in the course.

Absence Policy:

All missed clinical hours (regardless of reason) must be rescheduled and completed before the end of the semester. If a student does not complete the required clinical hours by the end of the semester he/she will be awarded an "I" for the course.

All absences must be "**Notified**". A "**Notified**" absence is defined as: the student providing timely notification by phone (text notification is NOT acceptable) of the clinical absences to the following:

- 1) Assigned clinical site's phone,
- 2) Assigned clinical instructor's phone, and
- 3) Mrs. Dutton's' office voice mail (254) 299-8132, **prior to the start** of the clinical assignment assigned time. Also see other requirements noted on the clinical schedule.

Failure of the student to notify the clinical affiliate, the instructor, **AND** Mrs. Dutton's voice mail of that clinical absence **within 1 hour and 1 minute** of the assigned start time is defined as a "**Non-Notified**" absence. "**Non-notified**" absences for any clinical assignment are strictly prohibited and will automatically result in an unsatisfactory Affective Evaluation for that rotation and thus jeopardize the student's enrollment in the course. The student will also be marked as "Unsatisfactory" on the E-Value Daily Evaluation with explanation from the Clinical Instructor. The student must contact the Attendance Committee for appointment.

Student Responsibilities following an absence:

FIRST absence: student should contact Mrs. Dutton to present documentation and schedule Additional Clinical Time (ACT).

SECOND absence: student should request a meeting with the Clinical Attendance Committee. During the meeting, the student will explain the absences, present documentation, and discuss the possibility of ACT. Students will also sign a contract, indicating that he/she understands that with one more absence the Rotation Evaluation will be marked, "Unsatisfactory" and he/she may receive "No Credit" in the course.

Daily Evaluation of Absence: In the **E-Value Affective section**

Absence will be marked as "Unsatisfactory". The clinical instructor will also enter an E-Value "Sick Day" with explanation re: the absence and proper notification.

Rotation Evaluation of Absences: In the **E-Value Affective section:**

- 1 absence during a rotation should be ranked as "Area of Concern" - Student must contact Mrs. Dutton.
- 2 absences during a rotation should be ranked as "Needs Improvement" - Student must meet with the Attendance Committee.
- 3 or more absences during the first rotation should be ranked as "Unsatisfactory" and student may receive "No Credit" in the course. Student must meet with the Attendance Committee.

Three absences is considered excessive. Depending on the situation the student may receive "No Credit" for the course with 3 or more absences.

End of Semester Evaluation of Absences:

NOTE: If the student has no other Absences during the second rotation, the student will receive "Satisfactory" for the second (Final) rotation.

If the student has an additional absence during the second rotation, absences will be considered "cumulative".

Absences from first and second rotation will be added together to determine end-of-semester evaluation.

Follow these examples,

First Rotation	Rotation Evaluation	Second Rotation	Total Absences	End Of Semester Evaluation
1 absence	Area of Concern	0 absences	0	Satisfactory
2 absences	Needs Improvement	0 absences	0	Satisfactory
3 absences	Unsatisfactory	0 absences	0	Satisfactory

1 absence	Area of Concern	1 absence	2	Needs Improvement
2 absences	Needs Improvement	1 absence	3	Unsatisfactory

1 absence	Area of Concern	2 absences	3	Unsatisfactory
2 absences	Needs Improvement	2 absences	4	Unsatisfactory

NOTE:

- Time for which the student is paid as an employee by a clinical affiliate cannot be used as clinical time.
- Additional clinical time does not remove clinical absences.
- If student is absent from the pre-arranged ACT day, he/she will go through the Attendance Committee again. Missed ACT days are considered an additional "absence".
- Leaving the clinical affiliate site will result in an absence. The student must receive authorization from the assigned clinical instructor prior to leaving the facility. If the student leaves the clinical site without notification or authorization, this will be considered a non-notified absence and the student will receive an unsatisfactory evaluation.

Tardy Policy:

Students are expected to be at the clinical assignment on time. The student will be tardy when the student arrives at a clinical assignment after the assigned time. The student must notify the clinical instructor immediately when he/she arrives at the clinical site. If the student arrives an hour after the assigned time, the student will be counted absent, be dismissed from the clinical assignment and additional clinical time will be required.

Daily Evaluation: In the **E-Value Affective section**

Tardy will be marked as “Unsatisfactory”. The clinical instructor will also post comments explaining the tardy.

Rotation Evaluation of Tardy: In the **E-Value Affective section:**

1 tardy during a rotation should be ranked as “Area of Concern”.

2 tardies during a rotation should be ranked as “Needs Improvement”.

Student must meet with the Attendance Committee.

3 tardies during a rotation should be ranked as “Unsatisfactory”.

Student must meet with the Attendance Committee.

End of Semester Evaluation of Tardy:

NOTE: If the student has no other tardies during the second rotation, the student will receive “Satisfactory” for the second (Final) rotation.

If the student has an additional tardy during the second rotation, tardies will be considered “cumulative”. Tardies from first and second rotation will be added together to determine end-of-semester evaluation.

Dismissal from Clinical Site: Students who are dismissed from the clinical area for specific reasons (e.g., no name tag, dress code violation, hygiene, illness, etc) shall receive an absence that will require appearance before the attendance committee. Student should contact the Director of Clinical Education immediately upon dismissal to schedule an appointment.

BAD WEATHER POLICY

- If MCC cancels classes, all clinical assignments are canceled and faculty and students should stay home.
- If MCC opens late, faculty and students should report to their clinical assignments at the stated time; e.g., if MCC opens at 10:00 then clinical assignments will start at 10:00 and end at the normal time. The same guideline applies if MCC closes early.
- If MCC remains open, students may be excused from their clinical assignments if the school district in which their clinical assignment occurs closes; the same guideline applies if the school district opens late. In this case (MCC remains open), the student must call their clinical assignment facility and Mrs. Dutton's office phone to notify them that they won't be attending due to the weather. It is OK if students can safely attend their clinical assignments when the school district closes (not when MCC closes).
- If a student chooses to stay home and not attend their clinical assignment, even when the school district and MCC are open, the student must make the appropriate phone calls and they will be required to make up the missed day.
- Students will not be required to make up missed clinical days when MCC closes classes or when a school district where the clinical assignment occurs closes.

Conduct

- Classroom – see MCC Highlander Guide Student handbook
- Clinical – The student’s conduct is expected to be positive, mature, responsible and professional. The students are expected to be courteous and respectful at all times.

Affective Behavior Criteria

The student is expected to develop behaviors of a professional respiratory therapist. Students are required to adhere to affective behavioral criteria that include the following:

- **Dependability**
 - ⊗ Adheres to attendance guidelines
 - ⊗ Adheres to punctuality guidelines
 - ⊗ Adheres to preparation guidelines
 - ⊗ Proper notification of absences
- **Communication skills**
 - ⊗ Adheres to minimal standards in verbal and non-verbal language skills
 - ⊗ Adheres to minimal standards in written communication skills:
 - ❖ Legibility,
 - ❖ Accuracy, and
 - ❖ Content
- **Interpersonal qualities**
 - ⊗ Participates in teamwork
 - ⊗ Adheres to standard, acceptable conduct
 - ⊗ Adheres to a standard, acceptable attitude
- **Clinical Competence** - Adheres to a minimal, standard, acceptable competence by:
 - ⊗ Follows instructions and directions.
 - ⊗ Adequately planning, organizing, and completing assignments
 - ⊗ Develops the ability to complete patient care assignments without direct supervision.
 - ⊗ Correlates standards of care and therapeutic goals with patient care objectives to maximize patient care outcomes.
 - ⊗ Determines appropriate patient care plan from pertinent patient data.
 - ⊗ Recommends modification of patient care plan, when necessary
 - ⊗ Uses common sense, exercises good judgment, ensures patient safety.
 - ⊗ Seeks help when necessary.
 - ⊗ Exhibits self – confidence and understands limitations.

- **Other competencies** that reflect clinical competence, include the student:
 - ⊗ Follows instructions and directions, developing clinical skills with minimum amount of coaching.
 - ⊗ Plans, organizes, and completes assignments on an acceptable schedule.
 - ⊗ Develops the ability to complete patient care assignments without direct supervision.
 - ⊗ Correlates standards of care (applies the AARC Clinical Practice Guidelines when the AARC-CPGs are applicable) and therapeutic goals with patient care objectives, evaluating appropriateness of prescribed care to maximize patient outcomes.
 - ⊗ Identifies and analyzes pertinent patient care data to determine an appropriate patient care plan to maximize patient care outcomes.
 - ⊗ Recommends modification of the patient care plan when necessary.
 - ⊗ Uses common sense and exercises good judgment to ensure patient and others' safety and well-being in the context of patient care guidelines and standards of care.
 - ⊗ Recognizes a clinical management problem that is unfamiliar and seeks help.
 - ⊗ Demonstrates self-confidence, understands his/her limitations, attempts to perform those clinical skills for which the student is prepared, and seeks assistance when the patient care assignment exceeds his/her current level of preparation

Professional Conduct

- Resourceful and uses time to facilitate learning.
- Follows dress code guidelines and personal hygiene is acceptable.
- Accepts guidance.
- Takes responsibility.
- Exhibits concern for the welfare and dignity of the patient.
- Ensures patient confidentiality.
- Exhibits an active interest in subject related activities.
- Cooperative, flexible, and open to suggestions.
- Composed under stressful conditions.
- Solves problems, overcomes obstacles, and considers alternatives to complete clinical objectives.
- Considers professional membership to be productive and relevant.
- Considers participation in professional activities to be productive and relevant.
- Self-directed and self-motivated.

Accountability and Accepting Responsibility

- Performs promptly all assigned tasks and paperwork as specified.
- Always follows established department and school policies.
- Always utilizes the procedure taught by the MCC instructor or assigned clinical instructor.
- Performs all work or assignments as designated.
- Always is prepared by bringing all necessary materials (pens, calculator, scissors, stethoscope, watch) to the clinical site.
- Always reports for clinical assignments and classes **on or before the designated time.**
- Leave all work areas neat and clean.
- Always informs the clinical faculty at the earliest available opportunity of absences, tardiness or any circumstance which requires the student to leave his/her assigned clinical duties / clinical assignment or the facility.
- Always arrives on time to scheduled activities (clinical conferences, teaching rounds, clinical affiliates.)
- Demonstrates the level of achievement required by each instructor in each course.
- Seeks remediation with MCC instructors if required achievement is not demonstrated early in the course.
- Always attempts to conserve and protect hospital and school supplies and equipment.
- When in doubt, asks the clinical instructor.
- **Accepts full accountability and responsibility for performance and evaluation, regardless of attending circumstances.**
- Personal business and doctor's appointments are to be scheduled after class and clinical hours.

Accepting Constructive Guidance

- Constructive guidance is offered to facilitate learning.
- Students should accept constructive guidance without emotional display.
- Constructive guidance should be heeded, and any behavioral deficiencies corrected promptly.

“Best Clinical Practice” strategies:

- Obtain clinical staff or MCC instructor authorization prior to proceeding to other unassigned clinical areas (This specifically includes CPR situations.)
- Participate in “Report” without talking unless conveying pertinent patient information.
- Follow E-Value competency guidelines during “check-off”.
- Be attentive and respectful to instructors and physicians.
- Follow HIPAA guidelines to protect patient privacy. Discussion of patient's condition, name, diagnosis, or prognosis should be limited to the respiratory care department. Do not discuss patient care in public areas, hallways, elevators, cafeteria, or other areas off the clinical site.
- Always arrive on time to planned clinic days as well as other physician lectures, orientations, presentations, and meetings.
- Maintain professional behavior at all times. Avoid slang and trash talk.
- Ask permission to make personal calls during your break. All personal calls should be made on personal cell phones rather than hospital or departmental phones.
- Students must send a request to the clinical instructor when he/she is ready to be evaluated at the Mastery level.
- Be prepared for the “check-off” procedures by reviewing all steps prior to the evaluation.
- Check E-Value reports often to ensure mastery of all required competencies according to schedule. Procrastination will lead to unnecessary stress.
- Respect your fellow student's privacy when he/she is being “checked off”.
- All clinical days will be held as scheduled. Early release is not an option.
- Obtain clinical instructor permission before leaving the clinical site, i.e. going to your car.
- Chart the patient care you provided but not patient care provided by another student.
- Leave cell phones turned off, with your personal belongings in the department. Cell phones are not permitted in patient care areas, including nurses' stations, corridors, and elevators.

Communication with Faculty, Hospital Personnel, and Other Students

- ALWAYS be courteous and respectful when relating to faculty and hospital personnel.
 - ⊗ Be respectful of hospital employees or others duties and workload.
 - ⊗ Profanity, abusive, or disrespectful language anywhere in the hospital is unacceptable.
 - ⊗ Students may address faculty and staff as "Mr., Miss, Mrs., Ms, or Dr."
 - ⊗ Unkind and false comments are unacceptable.
- Always use tact in handling difficult situations, remain calm and reserved.
- Always cooperate with instructors, hospital personnel and other students for the betterment of patient care.
- Support the "Health Care Team" concept by avoiding negative comments about other areas of health care (e.g., nursing department, other hospital, etc.).
 - Any problems a student may encounter during the clinical assignment may be discussed with the MCC faculty.
- Professionalism requires that students put aside personal concerns during clinical duties.
 - Do not discuss personal problems with patients or hospital staff.
- The student is not to seek free medical advice during the clinical assignment.
- Maintain excellent communications with the clinical instructor.
- The clinical instructor should know the student's location at all times.
- **NO** personal phone calls or visits are to be made or received at the clinical affiliate. If an emergency call is necessary, the family of the student should know to route this call to the College Respiratory Care office, 299-8347, where the student schedules are posted. Every effort will be made to locate the student through the Director of Clinical Education. If an emergency occurs after hours, the students may be contacted through the hospital switchboard; ask for the respiratory therapy dept. supervisor.
- If a visit to a hospitalized friend is desired, it must be made at other times than during the scheduled clinical period, and not in the MCC student uniform.
- Eating & chewing gum is not permitted in the clinical areas.
 - The cafeteria at each hospital is open to the Respiratory Care students.
 - Lunch and break times will be taken at the convenience of the clinical affiliate only after notification of the clinical instructor.
- The student will inform the McLennan Community College Respiratory Care faculty of problems during the clinical experience especially if these problems preempt the student's completion of their assignments.

- The student will adhere to clinical facility policies, including no-smoking, parking and dress code policies.
- Never argue with instructors or other hospital staff.
- Never exhibit anger with any students, patients, family members, faculty or staff.
- Students must accept and adhere to constructive guidance from faculty, instructors, or staff without emotional displays.

Unforgivable behaviors:

The following behaviors will result in immediate dismissal from the clinical assignment and the student will not return to subsequent clinical assignments until the student has met with the Program Director for counseling. These types of behaviors are unacceptable and will not be tolerated. This list is not all inclusive.

1. Physical abuse.
2. Verbal abuse.
3. Sexual harassment.
4. Any type of verbal or nonverbal behaviors that are intimidating.
5. False documentation.
6. Accessing medical records that are not pertinent to patient care, e.g., family, friends, neighbors, or anyone else that the student has no business accessing.

In the event that the student fails to adhere to the criteria outlined for performance and behaviors during the clinical assignments, a counseling session will be convened; a verbal or written counseling will be issued (depending on the nature and/or severity of the behavior). If the counseled behaviors reoccur, the student is subject to specified penalties or termination from the program, which will be based on faculty recommendations.

Degree requirements

1. Grades: Students must maintain a grade point average of 2.00 to meet requirements for an AAS in Respiratory Care. Students must achieve a grade of C or better in each major course in the respiratory care program curriculum. A major course is a course that has the prefix (rubric) of the program (i.e., RSPT courses are major courses for the respiratory care program curriculum.) No more than one major course may be repeated and that course may be repeated only once. (i.e., a student will not be eligible to re-enroll in the program if the student fails two different major courses or fails the same major course twice.) Students have five academic years to complete the curriculum after official enrollment in the first program (major) course.
2. Official degree plan – the official degree plan is in the Addendum
3. Course grading scale:
 - A – 90 to 100%
 - B – 80 to 89%
 - C – 75 to 79%
 - D – 60 to 74%
 - F – less than 60%Students must achieve a course average of 75% or higher to receive credit (pass) for each of the RSPT (program) courses in the program.
4. 5-year requirement Graduation Requirements for the Associate Degree. Each student's course of study leading to an associate degree is determined by the degree requirements in effect at the time the student first enrolls in college-level courses at MCC. From the date of that initial enrollment, the student has five years to complete an associate degree (A.A., A.A.S., A.A.T., or A.S.). After five years, the student will be subject to any new degree requirements that may be in effect when the student next enrolls. Exceptions to these requirements must be approved by the appropriate Dean.

Dress code for clinical courses

It is essential that all students present themselves in the clinical facilities in proper professional dress. The student is required to be in a complete, clean and neat uniform. The patient, physician, and others form their first impression of the student from the student's appearance; therefore, the student's appearance is very important. The student's dress and appearance is always expected to be appropriate.

The student's uniform will consist of the following:

Uniform

- Appropriate solid red top with black pant scrubs. Red top may include black piping or black side panels. A black or white t-shirt may be worn under scrub top. T-shirt must be short sleeve or $\frac{3}{4}$ length sleeve.
- MCC name badge within a badge holder.
- Guidelines for clinical footwear provide a standardized policy and procedure for protective footwear in all clinical areas where there is a danger of foot injuries due to falling or rolling objects, objects piercing the shoe, tripping hazards, or splash from body fluids.

Clinical areas are recognized as high-risk areas for exposure to blood and body fluids. Standards for the footwear of students must be provided to ensure protective footwear is worn to provide protection from potential needle sticks, splashing from blood or other potentially infectious material.

Students must comply with the hospital footwear guidelines.

- Vinyl or leather shoes.
- Shoes must be kept clean and in good repair.
- Shoes must have slip resistant type soles.
- Shoes must be worn with socks or hose.
- Sandal type shoes, clogs or "flip flops" shall **not** be worn in clinical areas.
- Shoes with open heels, open toes, vents in the side, ports, or holes on top shall **not** be worn in clinical areas, i.e. No "Croc" type shoes.
- No shoe jewelry permitted.

Personal Appearance

Students shall maintain a professional appearance.

- Nails must be short and clean. The nails should be shorter than the fingertips when observed from the palm side. Artificial nails or tips are NOT permitted. Regarding nail color: No bejeweling. NO nail polish.
- The student is **not** to chew gum while in clinical areas.
- The student will work closely with the patient, doctor and other personnel. Poor hygiene will create an unpleasant environment. Observe basic personal care, including daily baths, unscented deodorant/antiperspirant, regular shampooing with “unscented shampoo or conditioner”, and brushing teeth. Avoid excessive smoking, which causes offensive breath. Avoid strongly flavored foods, especially foods seasoned with garlic or onions, before going to the clinical area.
- IMPORTANT: Do not use colognes, perfumes, scented powders or lotions, as the odors can precipitate respiratory problems in patients.
- Hair shall be neat and clean. Hair must be pulled back when providing patient care. Males must be clean shaven; no exceptions. Beards and/or mustaches shall be kept neatly trimmed, not scruffy. Don't start or attempt to grow mustaches, beards, goatees, van dykes or other facial hair styles while attending clinical assignments. Appropriate matching colored ribbons or bows may be used to tie hair back. Don't use unnatural hair colors while attending clinical assignments, i.e. no pink, purple, or blue.
- No jewelry may be worn on the uniform. A wedding band or set is the only ring that may be worn. Necklaces or chains must be appropriate (no more than one chain or necklace). No bracelets. No grills.
- Earrings: Select matched pair(s) of small stud or hoop (no larger than quarter size). If two (2) sets are worn, one (1) set must be studs. No more than 2 sets of earrings are allowed.
 - ⊗ Body rings or piercing jewelry should not be displayed during the student's clinical assignments.
 - ⊗ Males are required to remove earrings during clinical assignments.
- Tattoos: No exposed tattoos.
- During clinical practice, coats or sweaters shall not be worn over the scrubs. No hoodies. Appropriate white or black under shirts may be worn to provide additional warmth and must be tucked in the pants.
- The uniform is to be worn only during student clinical practice. Students employed after school hours shall not wear the scrubs, name badge or any other items that identify the student with MCC.
- The **entire** uniform must be worn during clinical.
- The **proper name badge** should be worn appropriately on the upper part of the scrub top; the name badges should not have any pins or decorations on them.
- A **stethoscope** will be required everyday, beginning with the first semester.
- A simple **calculator** and **watch** are also required each clinical day.
- In addition, the student must abide by the dress code guidelines established by the participating clinical affiliates.

The student will abide by the dress code during **all** clinical activities. If the student fails to abide by the dress code guidelines or the student's appearance is not acceptable, the instructor or department head of the clinical facility shall dismiss the student from the clinical area for that day. Good personal hygiene and grooming are expected at all times. The student may be asked to leave the clinical site if he/she smells of cigarette smoke.

Tobacco Use During Clinical Assignments

Patients and colleagues can easily detect smoke odors. Some patients will become ill and/or bronchospastic in the presence of smoke odors. Students are strongly encouraged to refrain from smoking during clinical portion of this program. Under no circumstances will students be allowed to chew or dip tobacco products during clinical hours, including lunch or breaks.

Students may NOT leave the clinical site to smoke. Hospital affiliates enforce strict "No Smoking" policies for everyone. If the affiliate is a non-smoking campus the student will not smoke until he/she leaves clinical affiliate's campus at the end of the day.

Students should refrain from smoking in a car while traveling to the clinical site. Smoke odors are extremely unpleasant after smoking in a small, enclosed area. This policy is similar to that prohibiting the use of perfumes and colognes during clinical. The student's smoking privileges must not jeopardize the patient's health, comfort and well-being. This policy is non-negotiable. Students who smell of smoke will be immediately dismissed from the clinical site and be documented as being absent. The hospital and program expect the student's complete and full compliance to this and all other programs policies and procedures.

Clinical supervision

Clinical instructors (MCC faculty) or hospital staff will supervise students. As the student progresses through the program, less direct supervision should be required as the student achieves higher levels of self-direction. The student is obligated to seek direction from the MCC respiratory care technology program faculty concerning clinical assignments and clinical objectives.

Clinical evaluation

Student evaluations will be scheduled at the end of each day (Daily Evaluation) as well as at the end of each clinical rotation (Rotation Evaluation). The clinical instructor will designate a specific time to complete the evaluation process.

The student will be evaluated regarding completion of competencies (according to E-Value records), patient summary reports, documentation of physician interaction, and organizational skills. The student's behavior will also be assessed (see Daily Evaluation form).

The student's progress throughout the semester will then be rated as

Satisfactory

Area of Concern

Needs Improvement or

Unsatisfactory - requires remediation and/or conference with Director of Clinical Education.

Students receiving Areas of concern, Needs Improvement, or Unsatisfactory are expected to correct the deficiency for the remainder of the clinical course.

Daily evaluations will include:

Satisfactory evaluation is defined as no deficiencies.

The first occurrence of a deficiency results in an area of concern.

The second occurrence of the same deficiency results in needs improvement.

The third occurrence of the same deficiency results in an unsatisfactory.

Rotation evaluations:

Satisfactory rotation evaluation is defined as no deficiencies on any daily evaluations.

The first occurrence of a deficiency results in an area of concern.

The second occurrence of the same deficiency results in needs improvement.

The third occurrence of the same deficiency also results in an unsatisfactory rotation evaluation.

NOTE:

The fourth occurrence of the same deficiency results in no credit in the clinical course. The student must address a plan for improvement, specifying the course of action, while the faculty will identify probable consequences if improvement does not occur. When a student disagrees with the faculty's clinical evaluation or wishes to explain unusual circumstances that may have affected the evaluation, the student is encouraged to do so in writing. The students must acknowledge and sign the evaluation, whether or not the student agrees with it. However, the student is given an opportunity to comment in the area provided.

During the rotation evaluation, the student is responsible for E-Value competency completions. The Clinical Instructor and student will ensure the following documents are complete:

- 1) Patient summary reports each day
- 2) E-Value documentation to include:
 - a. Time Clock
 - b. Daily Evaluations
 - c. Competencies
 - d. Physician Interactions

Evaluation Feedback

To earn "CREDIT" for a clinical course, the student must achieve a satisfactory evaluation in at least one of the 2 rotation evaluations during each clinical course. If a student receives two unsatisfactory evaluations in one clinical course, the student will receive a grade of no-credit. If a student accumulates three unsatisfactory clinical evaluations for three different rotation evaluations, the student will be withdrawn from the program and will be required to wait 5 years before reapplying

In addition, specific unacceptable behaviors may be sufficient grounds for receiving an unsatisfactory semester grade (no-credit), thus jeopardizing the student's enrollment in the program.

Clinical competence

- The student follows instructions and directions, developing clinical skills with a minimum amount of coaching.
- The student plans, organizes, and completes assignments on an acceptable schedule.
- The student develops the ability to complete patient care assignments without direct supervision.
- The student correlates standards of care (applies the AARC Clinical Practice Guidelines when the AARC-CPGs are applicable) and therapeutic goals with patient care objectives, evaluating appropriateness of prescribed care to maximize patient outcomes.
- The student identifies and analyzes pertinent patient care data to determine an appropriate patient care plan to maximize patient care outcomes.
- The student recommends modification of the patient care plan when necessary.
- The student uses common sense and exercises good judgment to ensure patient and others' safety and well-being in the context of patient care guidelines and standards of care.
- The student recognizes a clinical management problem that is unfamiliar and seeks help.
- The student has self-confidence, understands his/her limitations, attempts to perform those clinical skills for which the student is prepared, and seeks assistance when the patient care assignment exceeds his/her current level of preparation

Communication and interpersonal skills

- **Teamwork:** The student participates with other members of the health care team to achieve patient care objectives.
- **Conduct:** The student demonstrates courtesy, respect, tact, and consideration for others.
- **Attitude:** The student demonstrates a friendly and positive attitude, especially under duress.
- Perform promptly all assigned tasks and paperwork as specified.
- Always follow established department and school policies.
- Always utilize the procedure taught by the MCC faculty.
- Perform all work or assignments as designated.
- Always be prepared by bringing all necessary materials (pens, calculator, scissors, stethoscope) to the clinical site.
- Always report for clinic and classes on or before the designated time. Leave all work areas neat and clean.
- Always inform the clinical faculty at the earliest available opportunity of absences or tardiness.
- Always arrive on time to scheduled activities (clinical conferences, teaching rounds, clinical affiliates.)
- Demonstrate the level of achievement required by each instructor in each course.
- Seek consultation with MCC instructors if required achievement is not demonstrated early in the course, so that the instructor may help the student achieve success.
- Always attempt to conserve and protect hospital and school supplies and equipment.
- When in doubt, ask the MCC faculty or hospital staff.
- Accept full responsibility for performance and evaluation, regardless of attending circumstances.
- Personal business and doctor's appointments are to be scheduled after class and clinical hours.
- Constructive guidance is offered to facilitate learning.
- Students should accept constructive guidance to facilitate their learning. Constructive guidance should be heeded, and any behavioral deficiencies corrected promptly.

Student employment – All health science programs are conducted on a full time basis; outside employment is discouraged. If the student chooses to work, his/her employment shall not interfere with the program curriculum or clinical assignments. It is entirely the responsibility of the student to arrange his/her work schedule to accommodate the course schedule. The student is not permitted to wear the MCC respiratory care technology program uniform, name tag or other identification while employed.

Student liability insurance – the student pays a special fee for liability insurance that is included for the clinical courses.

Directory/directions for affiliates are posted on BlackBoard for each of the clinical courses.

Medical insurance – students are encouraged to maintain personal medical insurance. The student is financially responsible for all medical expenses incurred while they are a student – school, hospital or home. The clinical affiliates assume no responsibility for illnesses that may have been contracted by the student during a clinical assignment. If a student is ill or injured during a clinical assignment, the student must report to the MCC faculty or hospital supervisor expeditiously.

Students' interaction with patients

- Students are to be reassuring, temperate, and considerate to patients at all times.
- Students must be tactful in handling difficult situations.
- Do not take personally anything the patient may say.
- Do not become angry or disorganized in front of the patient.
- Arguing with patients will not be tolerated.
- Students must not allow personal problems, attitudes, or prejudices to affect the manner in which patients are treated. Students' problems are not the patient's problems.
- Students must maintain a therapeutic (professional) relationship at all times, and must not become overly attached to or emotionally involved with patients
- Students must explain all therapeutic procedures fully to the patient prior to the initiation of therapy.
 - Explain the procedure to the patient.
 - Explain how the patient is to cooperate.
 - Explain, within the limits of the student's understanding, why the patient is receiving the therapy.
- The patient must be treated with respect.
- The patient has a right to know what therapy students are giving him or her, who ordered it, and why the patient is receiving this therapy.
- The patient has the right to refuse any therapy. Any refusal must be recorded on the chart with the reason for refusal, and immediately reported to the student's instructor.
- The patient has the right to the privacy and confidentiality of the medical record.
- Students are NOT, under ANY circumstances, to discuss patients and their problems with friends outside or inside the clinical area. If a student needs to discuss a patient, the student must seek guidance from the instructor.
- Clinical assignments will be made without regard to the sex, disability, creed, or religion color, age, national origin or disease condition of the patient. Therefore, students will be required to provide safe care for any patient assigned to the student's level of responsibility.

Patient safety

- Assure all respiratory care orders.
- Always check all physicians' orders before the initiation of any therapy. Also check for any orders to discontinue therapy.
- If no order can be found, notify the clinical instructor immediately.
- Check all medications prior to administration.
- Check the physician's orders for proper dosage, dilution, frequency, etc.
- Always assure the 7 - R's
 1. The Right Patient
 2. The Right medication.
 3. The Right Dosage
 4. The Right Time of administration
 5. The Right Route
 6. The Right documentation
 7. The patient's right to refuse

- Check the identification of the patient before therapy is administered.
- Check the chart to be sure the order is written for the correct patient.
- Check the wrist identification band to identify the patient.
- ALWAYS consult with the clinical instructor responsible for the care of the assigned patients before any changes in medications, mechanical ventilation parameters or therapeutic regimens are made.
- Do not endanger the patient or fellow students by any actions or failure to act.
- If in doubt, call the MCC clinical instructor or hospital staff.
- Be on the alert for dangerous conditions.
- Report dangerous or potentially dangerous conditions immediately.
- Do NOT try to conceal errors. Immediately report errors to the clinical instructor or MCC instructor.

Optional clinical experiences - Professional activities may be offered at various times during the clinical courses. Each student is eligible to attend such approved events, subject to the following provisions:

- The student has sufficiently completed current/up-to-date clinical objectives.
- Authorization by the Director of Clinical Education is obtained.
- The student submits a written request a minimum of a week prior to the scheduled event.
- The student shall be required to submit documentation of attendance at the optional clinical experience in order to provide credit toward their clinical education.

Professional organizations – TSRC and AARC. Student participation and/or membership in professional and student organizations is always encouraged, but is not mandatory.

American Association for Respiratory Care (AARC) is a national professional organization for respiratory care practitioners, physicians, and students in the field of respiratory therapy. The student is encouraged to become a member of the organization. Membership includes:

- Two monthly journals:
 - ⊗ Respiratory Care - Educational in nature; scientific, peer reviewed.
 - ⊗ AARC Times - Job opportunities, articles of interest, legislative news.
- Reduced fees to AARC sponsored meetings
- Literature from manufacturers

Texas Society for Respiratory Care (TSRC) is a chartered affiliate of the American Association for Respiratory Care. Participation in the organization is not required, but strongly recommended. Included with membership is a newsletter and reduced fees at the TSRC sponsored meetings.

Termination or withdrawal

- For detailed information: <http://www.mclennan.edu/records/withdraw>
- **Voluntary** - It is understood that certain circumstances arise that may force a student to withdraw from the program and possibly from the college altogether. The procedure:
 - ⊗ Meet with the Program Director to discuss any alternatives.
 - ⊗ Meet with counselor in Career Development Services (299-8614).
 - ⊗ Make class changes by clicking on "Add Classes" or "Drop Classes" from the WebAdvisor for Students menu.
- **Other**: All students must achieve a 75% average (a "C") in all RSPT courses. If a course needs to be dropped due to chance of failure, the student may be required to have faculty permission before dropping the course. Students may not continue and may not re-enter if they fail to achieve a "C" or better in more than one course.
- Students are subject to disciplinary action for unacceptable behaviors described in the MCC student handbook ("Highlander's Guide").

MCC policies and procedures as outlined in the Highlander Guide, MCC Student Handbook and the MCC General College Catalog

- Program course descriptions
- Appeals and grievance procedures

Cellular telephones and personal telephone calls

Cell phones are **NOT** permitted in the patient care areas. "Patient care" areas include any location in which patients are treated or other health care professionals work. Examples include (but are not limited to): general floor areas, nurses' stations, specialty care units, patient gymnasiums, sleep labs, etc. Students may **NOT** use cell phones to "study". Cell phones **MUST** be turned **OFF** or on silent (**NOT** on vibrate) when left in the Respiratory Care Department. The health careers secretary will notify a student of an emergency situation (254) 299-8568. No personal phone calls (non-emergency) will be accepted.

SCANS - The Secretary' Commission for Achieving Necessary Skills (SCANS) are incorporated into the learning outcomes and activities for each course. The SCANS competencies and foundation skills are posted on BlackBoard for each course.

MCC Academic Integrity Statement:

The Center for Academic Integrity, of which McLennan Community College is a member, defines academic integrity as “a commitment, even in the face of adversity, to five fundamental values: honesty, trust, fairness, respect, and responsibility. From these values flow principles of behavior that enable academic communities to translate ideals into action.” Individual faculty members determine their class policies and behavioral expectations for students. Students who commit violations of academic integrity should expect serious consequences. For further information about student responsibilities and rights, please consult the McLennan website <http://www.mclennan.edu/students/integrity.html> and your Highlander Student Guide.

Additional Academic Integrity Information:

Academic dishonesty (cheating) of any kind will not be tolerated in this class. **Cheating includes** (but is not limited to): (1) sharing information from exams with students who have not yet taken the exam; (2) examining old exams from this course; (3) borrowing information from another source during the exam, either from a fellow student or from a written source (textbook, notebook, or anatomical parts, i.e. hands); (4) use of any unauthorized assistance in taking examinations; (5) dependence upon the aid of sources beyond those authorized by the instructor in writing papers, preparing reports, solving problems or carrying out other assignments; or (7) videotaping or taking digital pictures of old exams, (6) the acquisition, without permission, of tests or other academic material belonging to a member of the MCC faculty or staff.

The term "plagiarism" includes, but is not limited to, the use, by paraphrase or direct quotation, of the published or unpublished work of another person without full and clear acknowledgment. It also includes the unacknowledged use of materials prepared by another person or agency engaged in the selling of term papers or other academic materials.

All exams are closed book and proctored. If I suspect that a student is cheating, the student will be asked to leave the class, immediately, and will be dismissed from the course with an F for the course grade. The Director of the Respiratory Care Technology Program and Student Discipline Department will be notified, in writing, of the incident. The report becomes a part of the student's permanent record.

MCC Attendance Policy:

Regular and punctual attendance is expected of all students, and each instructor will maintain a complete record of attendance for the entire length of each course, including online and hybrid courses. Students will be counted absent from class meetings missed, beginning with the first official day of classes. Students, whether present or absent, are responsible for all material presented or assigned for a course and will be held accountable for such materials in the determination of course grades.

Please refer to the [Highlander Guide](#) for the complete policy.

ADA Statement:

Disabilities/ADA Statement

Any student who may require special arrangements in order to meet course requirements because of a disability should contact Disability Services as soon as possible to make necessary arrangements. Once that process is completed, appropriate verification from Disability Services will be provided to the student and instructor. Please note that instructors are not required to provide classroom accommodations to students until appropriate verification from Disability Services has been provided. For additional information, please visit mclennan.edu/disability.

Students with questions or who require assistance with disabilities involving physical, classroom, or testing accommodations should contact:

Laura Caruthers, Success Coach, Disability Services
disabilities@mclennan.edu
254-299-8122
Room 249D, Completion Center, in the Student Services Center

TITLE IX

We care about your safety, and value an environment where students and instructors can successfully teach and learn together. If you or someone you know experiences unwelcomed behavior, we are here to help. Individuals who would like to report an incident of sexual misconduct are encouraged to immediately contact the Title IX Coordinator at titleix@mclennan.edu or by calling Dr. Drew Canham (Vice President for Student Success) at 299-8645. Individuals also may contact the MCC Police Department at 299-8911 or the MCC Student Counseling Center at MCC by calling 299-8210. The MCC Student Counseling Center is a confidential resource for students.

McLennan's Title IX webpage (<http://www.mclennan.edu/titleix/>) contains more information about definitions, reporting, confidentiality, resources, and what to do if you or someone you know is a victim of sexual misconduct, gender-based violence or the crimes of rape, acquaintance rape, sexual assault, sexual harassment, stalking, dating violence or domestic violence.

Health Science Division Policy

Drug Screens and Criminal Background Checks

I. Introduction

The Joint Commission on the Accreditation of Healthcare Organizations (JCAHO) now requires background checks and drug screens for health science students whose clinical assignments bring them into contact with patients.

II. Screening Requirements

Drug screens and criminal background checks must be completed within the thirty (30) days prior to a student's initial entry into the clinical assignment portion of his or her respective health science program. For some programs, clinical assignments begin immediately when classes begin for the semester. For other programs, clinical assignments are scheduled for later in the program. Verification of a negative drug screen and a satisfactory criminal background check must be received prior to the first clinical day in the student's program. The results will be acceptable for all clinical rotations during the student's enrollment in the program unless there is a break during that student's enrollment. A break in enrollment (leaving the program) is defined as nonattendance for a portion of a semester or more. Attendance must be verifiable through the College.

III. Cost and Arrangements for Screening

The student will pay all costs of the drug screens and criminal background checks. Students will use the testing agency designated by the College. The student will be responsible for scheduling his or her own time at the agency and will be required to follow all procedures required by that agency for accurate testing. The student will be responsible for ensuring that the results of all testing be sent by the agency directly to the director of the health science program in which he or she is enrolled prior to the first day of their clinical assignment. Students may also be responsible, if instructed to do so by their program director, for picking up the results of all tests and delivering them to the director of the program prior to the first day of clinical affiliation in which he or she is enrolled.

IV. Disqualifications from Clinical Affiliation Participation

A student will not be allowed to participate in clinical affiliations if he or she is found to have a positive drug screen on the Substance Abuse Panel 10 (SAP 10). If the student feels that the positive result is in error, he or she will be able to request a Medical Review through the testing agency and pay an additional fee for that service. The testing agency will have its Medical Review Officer assess the screen and follow through with an appropriate investigation. The student will be responsible for the cost of the medical review. A student will not be allowed to participate in clinical activity in any MCC health science program for twelve (12) months following a verified positive drug screen. The student will then be required to undergo an additional drug screen which must be negative, prior to a clinical assignment, per the stated policy above.

If criminal background checks reveal criminal activity unacceptable to the program's licensing or credentialing agency, any clinical affiliate, or a conviction for any of the offenses listed below, the student may not be permitted to participate in clinical assignments.

Offenses and/or convictions that may preclude students from participating in clinical assignments of MCC health science programs include, but may not be limited to, the following:

1. The conviction of use, possession, or sale of illicit or controlled substances, including the operation of a motor vehicle under the influence of alcohol or illicit substances
2. Criminal sexual misconduct of any kind, including but not limited to criminal sexual conduct in any degree, sexual abuse, prostitution, solicitation, indecent exposure, gross indecency, and/or the attempt of any such offense
3. Acts of violent aggression of any kind, including but not limited to assault, child abuse, vulnerable adult abuse, homicide, kidnapping, malicious destruction of property, robbery, riot, stalking and/or the attempt of any such offenses
4. Offenses involving dishonesty, including but not limited to theft, shoplifting, writing bad checks, robbery or burglary
5. Other offenses as specified by individual licensing/credentialing agencies

Note: Some MCC health science programs may have stricter requirements than others. If a student is denied access to participation in clinical assignments, the student may request reconsideration of the denial from the program director and the health sciences division director.

The student may also appeal a denial through usual college channels in contesting any college decision.

V. "For Cause" Screening (Zero Tolerance)

At any time during classroom, lab, or clinical portions of a health science program, the student is suspected of being under the influence of drugs or alcohol, the program faculty or clinical facility personnel may require the student to be tested for drugs and/or alcohol. If the clinical facility has the capability of doing the screen on site, the facility may use that service. The student is responsible for any cost of the screening. If a student must be dismissed from the clinical facility during a clinical assignment to undergo testing and/or for inappropriate behavior due to possible drug or alcohol influence, the student will be responsible for providing contact information for someone to provide transportation for the student to be taken away from the site and, as necessary, to the college-designated testing agency. Failure by the student to comply with these policies is grounds for dismissal from the health science program in which the student is enrolled. A positive drug or alcohol test is also grounds for dismissal from the program in which the student is enrolled.

VI. Records of Drug Screens and Criminal Background Checks

Records of drug screens and criminal background checks will be kept in a locked file in the office of the director of that student's health science program. It will be accessible only to the program director, the program clinical coordinator, the division director for health sciences, the dean of workforce education, any of the college vice presidents, the president of the college, the college attorneys, and any college judicial panel which may be created to review a student's case.

Impaired Student Policy & Procedure

According to the Allied Health Division policy, *students attending clinical while under the influence of any substance affecting their ability to respond in a reasonable and acceptable manner* is considered inappropriate behavior, unsafe practice and is grounds removal from the clinical environment.

Faculty who suspect any student of attending clinical while under the influence of any substance affecting the student's ability should abide by the following procedure:

1. If the clinical environment is on McLennan Community College campus:
 - a. Faculty or designated professional is required to stay with student throughout the following process.
 - b. If student needs medical evaluation, student will be referred to the Emergency Department of a local hospital and family/friend will be notified of their visit to the emergency room and asked to pick them up following exam. Student will be responsible for charges incurred.
 - c. Have another professional witness student behavior.
 - d. Student should not be allowed to void prior to urine specimen collection.
 - e. Student may not return to the clinical experience for the remainder of the scheduled clinical day.
 - f. Notify Campus Police at 8911 or (254) 299-8911 of the current situation.
 - g. Notify A&D Testing at (254)399-8378 to provide an on-site screening.
 - i. A&D Testing will perform a Rapid Screen and Alcohol Breath Analyzer
 - ii. If the Rapid Screen is positive, A&D Testing will then confirm the results with a lab 12 panel drug screen.
 - iii. A&D Testing will send MCC Allied Health Division an invoice for the services performed.
 - h. For positive results
 - i. Student will be advised to contact director of clinical education and Program Director, by next business day, to schedule an appointment for review of occurrence.
 - ii. Student will call family/friend to pick them up immediately from the clinical environment. Note: Student will be advised that they may not drive themselves.
 - iii. Clinical hours missed will count as an absence.
 - iv. Students will not be allowed to participate in clinical affiliations for 12 months following a verified positive drug screen. Student must follow readmission procedures of program. Students are not guaranteed re-entry into program.

- i. For negative results
 - i. Student will call family/friend to pick them up immediately from the clinical environment. Note: Student will not be advised that they can drive themselves.
 - ii. Clinical hours missed will count as an absence.
 - iii. Student will be counseled by the director of clinical education and program director regarding impaired behavior and subsequent occurrences.
 - j. Notify the director of clinical education of occurrence.
2. If the clinical environment is not on McLennan Community College campus
- a. Faculty or designated professional is required to stay with student throughout the following process.
 - b. If student needs medical evaluation, student will be referred to the Emergency Department and family/friend will be notified of their visit to the emergency room and asked to pick them up following exam. Student will be responsible for charges incurred.
 - c. Have another professional witness student behavior.
 - d. Student should not be allowed to void prior to specimen collection.
 - e. Notify the facility's security department regarding the student.
 - f. Notify A&D Testing at (254)399-8378 to provide an on-site screening.
 - i. A&D Testing will perform a Rapid Screen and Alcohol Breath Analyzer
 - ii. If the Rapid Screen is positive, A&D Testing will then confirm the results with a lab 12 panel drug screen.
 - iii. A&D Testing will send MCC Allied Health Division an invoice for the services performed.
 - g. For positive results
 - i. Student will be advised to contact the director of clinical education and Program Director, by next business day, to schedule an appointment for review of occurrence.
 - ii. Student will call family/friend to pick them up immediately from the clinical environment. Note: Student will not be advised that they can drive themselves.
 - iii. Clinical hours missed will count as an absence.
 - iv. Students will not be allowed to participate in clinical affiliations for 12 months following a verified positive drug screen. Student must follow readmission procedures of program. Students are not guaranteed re-entry into program.
 - h. For negative results
 - i. Student will call family/friend to pick them up immediately from the clinical environment. Note: Student will be advised that they may not drive themselves.
 - ii. Clinical hours missed will count as an absence.
 - iii. Student will be counseled by clinical coordinator and program director regarding impaired behavior and subsequent occurrences.
 - i. Notify director of clinical education of occurrence.

ADDENDUM

1361 Park Street
Clearwater, FL 33756
Phone: 727-210-2350 /Fax: 727-210-2354
WWW.caahep.org



September 24, 2007

Johnette McKown, EdD
President
McLennan Community College
1400 College Drive
Waco, TX 76708

Dear President McKown:

ADD NEW Accreditation letter

The Commission on Accreditation of Allied Health Education Programs (CAAHEP) is pleased to inform you of its vote on September 21, 2007 to award **continuing accreditation** to the Advanced level Respiratory Therapy Program at McLennan Community College.

The recent peer review conducted by the Committee on Accreditation for Respiratory Care (CoARC) and the commissioner's Board of Directors recognizes the program's compliance with the nationally established accreditation Standards. The next comprehensive evaluation of the program, including an on-site review, is scheduled to occur no later than **2016**.

CoARC will regularly monitor the program's compliance with the outcomes assessment thresholds through the Report of Current Status submitted annually by the program as well as other documentation that may be requested (Standard IV.B).

The accreditation standards are established by CAAHEP and The American Association for Respiratory Care; The American College of Chest Physicians; The American Society of Anesthesiologists; and The American Thoracic Society.

The commission commends you and your colleagues for your commitment to continuous quality improvement in education, as demonstrated by your participation in program accreditation.

Sincerely,

A handwritten signature in black ink, appearing to read 'William Horgan', with a horizontal line extending to the right.

William Horgan, CCP
President

cc: Ricardo Solis, EdD, MS, Dean
Douglas Gibson, BA, RRT, RCP, Program Director
David W. Chang, EdD, RRT, CoARC Chair
William W. Goding, MEd, RRT, CoARC Interim Executive Director

**OFFICIAL DEGREE PLAN RESPIRATORY CARE
TECHNOLOGY PROGRAM MCLENNAN
COMMUNITY COLLEGE**

LAST NAME	FIRST NAME	MI	ID #	DATE		
Program Requirements		Course Sub	Final Grade	2 nd Year Fall Semester	Course Sub	Final Grade
RSPT 1227 Applied Physics for Respiratory Care				RSPT 1267 Practicum – Respiratory Care		
ENGL 1301 English Composition I				RSPT 2258 Respiratory Care Patient Assessment		
MATH 1314 College Algebra <u>or</u> MATH 1342 Elementary Statistical Methods				RSPT 2414 Mechanical Ventilation		
RSPT 1371 Introduction to Respiratory Care				RSPT 2305 Pulmonary Diagnostics		
BIOL 2404 Anatomy and Physiology				PHIL 2306 Ethics		
1 st Year Spring Semester		Course Sub	Final Grade	2 nd Year Spring Semester	Course Sub	Final Grade
RSPT 1266 Practicum – Respiratory Care				RSPT 1241 Respiratory Care/Rehabilitation Home		
RSPT 1340 Advanced Cardiopulmonary Anatomy and Physiology				RSPT 2233 Respiratory Care Case Management		
RSPT 1410 Respiratory Care Procedures I				RSPT 2266 Practicum – Respiratory Care		
RSPT 2317 Respiratory Care Pharmacology				RSPT 2353 Neonatal/Pediatric Cardiopulmonary Care		
				PSYC 2301 General Psychology		
1 st Year Summer Semester		Course Sub	Final Grade	2 nd Year Summer Semester	Course Sub	Final Grade
RSPT 1260 Clinical – Respiratory Care				RSPT 2230 Examination Preparation		
RSPT 1411 Respiratory Care Procedures II				RSPT 2267 Practicum – Respiratory Care		
RSPT 2310 Cardiopulmonary Disease						

1. **COURSE SUBSTITUTIONS:** All course substitutions must be approved by the Program Director. BIOL 2401 and BIOL 2402 may substitute for BIOL 2404. There are no course substitutions for ENGL 1301, MATH 1314, MATH 1342, PSYC 2301 or PHIL 2306.

2. **GRADES AND GPA:** Students must maintain a grade point average of 2.00 to meet requirements for an AAS in Respiratory Care. Students must achieve a grade of C (75%) or better in each major course in the respiratory care program curriculum. A major course is a course that has the prefix (rubric) of the program (i.e., RSPT courses are major courses for the respiratory care program curriculum.) **No more than one major course may be repeated and that course may be repeated only once,** (i.e., a student will not be eligible to re-enroll in the program if the student fails two different major courses or fails the same major course twice.) **Students have five academic years to complete the curriculum after official enrollment in the first program (major) course.**

I plan to receive the Associate in Applied Science Degree in Respiratory Care. I understand this degree plan will determine my eligibility for graduation. Students under the TSI (Texas Success Initiative) mandate must meet all TSI requirements.

REMARKS: _____

Advisor's Signature **Date**

Student's Signature **Date**

Subject to Change Disclaimer

The policies, regulations, procedures, and fees associated with this program are subject to change without prior notice, if necessary, to keep College and program policies in compliance with State and Federal laws and/or with rules related to the program's accrediting agency.

The College and the program reserve the right to change curricula, rules, fees, and other requirements, of whatever kind, affecting students in any way. The provisions of this document do not constitute a contract, express or implied, between any applicant, student, faculty or staff member and McLennan Community College or this program

McLennan Community College RESPIRATORY CARE TECHNOLOGY PROGRAM GENERAL INFORMATION

The Respiratory Care Technology Program at McLennan Community College is a **two-year associate degree program**; **The McLennan Community College Respiratory Care Technology Program is accredited by the Commission on Accreditation for Respiratory Care (CoARC), 1248 Harwood Road, Bedford, Texas 76021-4244, (817) 283-2835.**

Graduates of the program will be eligible to take the certification exam (CRT) and registry exams (RRT) administered by the National Board for Respiratory Care. The Respiratory Care Technology Program admits one class per year beginning in the Spring semester. Class size is limited and selection of students is based on specific admission criteria.

Employment of respiratory therapists is expected to grow much faster than the average (more than 12%) for all occupations through 2024. This is because of substantial increases in growth of the middle-aged and elderly population, a development that will heighten the incidence of cardiopulmonary disease. Growth in demand also will result from the expanding role of respiratory therapists in case management, disease prevention, emergency care, and the early detection of pulmonary disorders.

Opportunities are expected to be highly favorable for respiratory therapists with cardiopulmonary care skills and experience working with infants.

Although hospitals will continue to employ the vast majority of therapists, a growing number of therapists can expect to work outside of hospitals in home health agencies, physician offices, or nursing homes.

Median annual earnings for respiratory therapists were **\$56,730 in 2014**. Salaries range from \$41,380 to \$78,730. Beginning salaries average \$42,078 to \$47,287.

APPLICATION PROCESS

Application Deadline is **October 30**

Minimum Requirements:

All program prerequisites must be completed with a minimum of a C in each course with an overall grade point average of 2.75 or better in the prerequisite courses.

All applications for the Respiratory Care Technology Program will be reviewed according to admission criteria. The Respiratory Care Technology Program Admissions Committee decides which students will be admitted into the program.

Please note: Meeting the minimum admission criteria does not guarantee admission to the program.

For More Information

Call 254-299-8568 or contact the Program Director at 254-299-8426 or you may also e-mail Donna Mendoza at dmendoza@mclennan.edu to schedule an appointment to discuss detailed information concerning admissions and course advising

The Respiratory Care Technology Program does not discriminate on the basis of sex, disability, race, creed or religion, color, age, or national origin. 6/17/2009

CLINICAL TRAINING

As part of the Respiratory Care Technology Program curriculum, students must complete clinical training in several different central Texas hospitals or health care facilities. Students are supervised in the clinical setting at all times by clinical adjunct faculty or hospital staff. It is the student's responsibility to arrange for transportation to the assigned clinical sites.

Professional liability insurance is required of all students enrolled in a clinical course. The insurance is purchased through the college and the fee is included with other registration costs.

COST

Because various expenses may change, applicants are encouraged to contact the program director for current information about such costs as tuition, fees, books, and uniforms.

FINANCIAL ASSISTANCE

A variety of financial assistance programs are available (scholarships, grants, loans and work opportunities.)

For questions related to financial aid call:
254-299-8698

IMMUNIZATIONS / DRUG SCREENS / BACKGROUND CHECKS

Immunizations must be current for varicella, measles, mumps, rubella, diphtheria/tetanus and hepatitis B. A current TB skin test is required after the student is admitted to the program. Students are also encouraged to have personal health insurance. After enrollment in the program, the applicant must receive a negative report for drug screen and all applicants must undergo a criminal background check before clinical courses begin. Students are also required to have a seasonal flu shot.

CURRICULUM OUTLINE

First Year <u>Prerequisite courses</u> ENGL 1301 English Composition I MATH 1314 College Algebra or MATH 1342 Elementary Statistical Methods RSPT 1371 Introduction to Respiratory Care BIOL 2404 Anatomy and Physiology RSPT 1227 Applied Physics for Respiratory Care Spring RSPT 1266 Practicum – Respiratory Care RSPT 1340 Advanced Cardiopulmonary Anatomy and Physiology RSPT 1410 Respiratory Care Procedures I RSPT 2317 Respiratory Care Pharmacology Summer RSPT 1260 Clinical – Respiratory Care RSPT 1411 Respiratory Care Procedures	Second Year Fall RSPT 1267 Practicum – Respiratory Care RSPT 2258 Respiratory Care Patient Assessment RSPT 2305 Pulmonary Diagnostics RSPT 2414 Mechanical Ventilation PHIL 2306 Ethics Spring RSPT 1241 Respiratory Home Care/Rehabilitation RSPT 2233 Respiratory Care Case Management RSPT 2266 Practicum – Respiratory Care RSPT 2353 Neonatal/Pediatric Cardiopulmonary Care PSYC 2301 General Psychology
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(AAS Degree - 66 hours)

**McLennan Community College
Respiratory Care Technology Program
APPROXIMATE Program Costs
2015-2016**

	McLennan County Resident	Texas Resident	Out of State or International Student
Prerequisites			
Tuition and Fees	1725	1995	2850
Lab Fees	15	15	15
Total	1740	2010	2865
Spring Semester 1st year			
Tuition and Fees	1610	1862	2660
Lab Fees	20	20	20
Special Fees	13	13	13
E value	161	161	161
Total	1804	2056	2854
Summer Semester- 1st year			
Tuition and Fees	1089	1251	1764
Lab Fees	20	20	20
Total	1109	1271	1784
Fall Semester 2nd year			
Tuition and Fees	1610	1862	2660
Lab Fees	20	20	20
Special Fees	13	13	13
TOTAL	1643	1895	2693
Spring Semester 2nd year			
Tuition and Fees	1495	1729	2470
Special Fees	285	285	285
TOTAL	1780	2014	2755
Summer Semester 2nd year			
Tuition and Fees	805	931	1330
Lab Fees	20	20	20
Special Fees	120	120	120
TOTAL	945	1071	1470
Grand Total	9,021	10,317	14,421

Books – Search the MCC web site MCC Bookstore for current book process and for the required textbooks for each course on the degree plan.

<http://www.bkstr.com/mclennanccstore/shop/textbooks-and-course-materials>

Estimate of new books required by semester –

Prerequisites	\$1,027
Spring 1 st year	\$ 201
Summer 1 st year	\$ 243
Fall 2 nd year	\$ 357
Spring 2 nd year	\$ 333
Summer 2 nd year	none
Total for books	\$2,161

Other costs in the first semester -

- Criminal Background Check and Drug Screen - \$80
- Vaccinations – vary ~ \$165
- Uniform – 2 tops and 2 pants, shoulder patch, scissors and shoes - \$175
- Watch with a second hand - \$25
- Stethoscope - \$70 to \$165

There are other costs for supplies – paper, duplicating, travel, etc.

Total estimated costs –

- McLennan County Residents - \$11,747
- Texas Residents - \$13,043
- Out of state or international students - \$17,147

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McLennan Community College

Health Careers

Respiratory Care Technology Program

Date: _____

I understand that although I have been accepted to the Respiratory Care Technology Program at McLennan Community College it is my sole responsibility to determine my eligibility for state licensure and/or national certification or registry. I further acknowledge that I will hold McLennan Community College blameless if I find that I am ineligible to take my licensing or certification examinations.

Student Signature

Program Director's Signature

PROVIDENCE HOSPITAL

EXHIBIT A

I, _____, understand that I will be entering into a clinical rotation in the MCC Respiratory Care Program, at Providence Hospital. I am aware and understand that during such rotation, I may be exposed to various communicable diseases, for which I agree to be solely responsible for any necessary treatment and in consideration of my rotation, I hereby expressly release Providence Hospital from any liability or potential liability to me arising out of such exposure and required treatment and/or damages sustained by me.

By the execution of this document, I waive any claim or potential claim against Providence Hospital; including, but not limited to, claims based on negligence of the Hospital, its agents, servants or employees, or any other person or entity; and, herewith agree to indemnify and hold Providence Hospital harmless from and of any claims brought by any party or parties providing medical care, services or treatments, or any other party of parties claiming by or through me, arising out of such clinical rotation and exposure to communicable diseases.

STUDENT SIGNATURE : _____

WITNESS : _____

DATE : _____

BAYLOR SCOTT AND WHITE HILLCREST MEDICAL CENTER

STUDENT RELEASE

FOR AND IN CONSIDERATION OF the right given to me to participate in the Respiratory Care Program, (the "Program") at **BAYLOR SCOTT & WHITE HILLCREST MEDICAL CENTER**, the undersigned hereby **RELEASES BAYLOR SCOTT & WHITE HILLCREST MEDICAL CENTER**, its Board of Trustees, officers, agents, employees and representatives (all referred to together as "Baylor Scott & White Hillcrest Medical Center"), from any and all claims which I otherwise may assert against Baylor Scott & White Hillcrest Medical Center by reasons of, or arising out of, my participation in the Program, unless the event(s) giving rise to the claim is/are caused solely by the negligence of Baylor Scott & White Hillcrest Medical Center.

I hereby **RELEASE MCLENNAN COMMUNITY COLLEGE**, its Board of Trustees, officer, agents, employees and representatives (all referred to together as "MCC"), from any and all claims which I otherwise may assert against MCC by reasons of or arising out of, my participation in the Program, unless the event(s) giving rise to the claim is/are caused solely by the negligence of MCC.

I understand and agree that I will be provided with access to hospital facilities in which persons having injuries or disease will be present and I understand that the possibility exists that I will contract an infectious disease. I hereby expressly **RELEASE both Baylor Scott & White Hillcrest Medical Center and MCC from any claim for sickness or disease which I may get by reason of my being in the Program, regardless if Baylor Scott & White Hillcrest Medical Center and/or MCC is negligent or not.**

Student

Date: _____

If the student is under eighteen (18) years old, then I, the student's parent or lawfully appointed legal guardian, consent to the above release.

Parent or Legal Guardian

**McLennan Community College
Health Careers**

CONFIDENTIALITY STATEMENT

I understand and agree that in the performance of my duties as a student, I must hold medical information in confidence. Further, I understand, that intentional or involuntary violation of confidentiality may result in my being expelled from the Respiratory Care program.

Date _____

Signature _____

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The College and the program reserve the right to change curricula, rules, fees, and other requirements, of whatever kind, affecting students in any way. The provisions of this document do not constitute a contract, express or implied, between any applicant, student, faculty or staff member and McLennan Community College or this program

Acknowledged:

Student: _____
Printed name

_____ Date: _____
Signature

CHEATING AND PLAGIARISM

Any student found to have committed the following misconduct (acts of dishonesty) is subject to suspension from the Respiratory Care Program. Acts of dishonesty include cheating or plagiarism as defined in the McLennan Community College Highlander's Guide (MCC Student Handbook).

Cheating: "...includes , but is not limited to: (1) use of any unauthorized assistance in taking quizzes, tests, or examinations; (2) dependence upon the aid of sources beyond those authorized by the instructor in writing papers, preparing reports, solving problems, or carrying out other assignments; or (3) the acquisition, without permission, of tests or other academic material belonging to a member of the MCC faculty or staff."

Plagiarism: "...includes, but is not limited to, the use, by paraphrase or direct quotation, of the published or unpublished work of another person without full and clear acknowledgement. It also includes the unacknowledged use of materials prepared by another person or agency engaged in the selling of term papers or other academic materials."

This policy will be applied in every RSPT course.

Student: _____ Signature: _____
Printed name

Date: _____

Witnessed: _____ Date: _____

HIPAA

Health Insurance Portability and Accountability Act

<http://www.hhs.gov/ocr/privacy/>

- Restrict how protected health information (PHI) is used and disclosed
- Give patients greater access and control over their PHI

PHI use: sharing, applying, utilizing, examining, analyzing PHI within the facility

PHI disclosure: release, transfer, allowing access, or divulging in any other manner of PHI outside the facility

As a student, you have access to patient's PHI; therefore, you should familiarize yourself with HIPAA regulations and follow them.

Failure to comply with HIPAA regulations may result in civil and criminal penalties for the institution and the healthcare worker or student. Violations of patient privacy can result in disciplinary action, including immediate termination of employment/student clinical affiliation.

Protected Health Information (PHI) is all clinical, billing, and demographic information that reasonably identifies a patient. It is personal health information as well as individually identifiable health information.

PHI exists in/on

- verbal discussions
- medical records and chart
- laboratory results/reports
- computer screens

All PHI must be kept private and secure.

Assume that any information that reasonably identifies a patient is PHI. This includes all clinical, demographic, and billing information that relates to

- Provision of health care to a patient
- Physical or mental condition
- Payment for provision of health care to a patient

HIPAA requires written authorization before a patient's PHI may be used or disclosed, with exceptions. No authorization is required for use or disclosure for treatment, payment, or healthcare operations.

Always take reasonable measures to guard PHI

- verbal information
- written information
- faxes, e-mails, texting, social media, etc.

The "minimum necessary" standard requires that only the minimum amount of PHI necessary for your job performance be used or disclosed.

Each health care facility will have written policies regarding HIPAA. Each department will have specific procedures. You should familiarize yourself with and follow both. Each facility will also appoint a Compliance officer.

TIPS:

- Do not discuss PHI with anyone unless it is absolutely necessary to perform your job.
- Do not leave patient information unattended, paper or electronic.
- Do not access information that is not necessary for you to perform your job.
- Report suspected privacy violations to your supervisor.

To de-identify patient information so that it does not identify a patient, you must remove

- Name
- All geographic subdivisions smaller than state
- All elements of dates, except year, including date of birth, admission, discharge, death, and ages >89
- Telephone number
- Fax number
- Email address
- Social security number
- Medical record number
- Health plan number
- License number
- Vehicle identification
- Device identification; serial number
- Photograph of face

End of work day

- Dispose all hand-written notes in designated trash cans
- Do NOT remove hand-written notes, patient load sheets, or other working documents from the department

MCC Policies and Procedures

Subject: Student Grievance Procedure Reference: G-XIII

Source: President Eff. Date: April 24, 1997 Approval Auth.: President

Remarks: Replaces previous policy effective Spring, 1990.

Date: April 24, 1997

Purpose and Scope. These procedures are established to provide the individual student with an opportunity to be heard in grievances involving unlawful discrimination, selective program admission, or other alleged violations of law or college policies. Complaints alleging sexual harassment will be handled in accordance with policy F-V-k,1.

All student grievances will be handled through regular administrative organizational channels or in accordance with other formal policies of the College.

In attempting to resolve a student grievance, the following procedures are to be followed:

**PROCEDURE FOR INFORMAL
GRIEVANCE**

1. A student should first discuss his/her grievance with the teacher, administrator, or other individual directly and immediately involved in the grievance.
2. If after consulting with the individual involved, the student feels that the grievance is still unresolved, he/she may discuss it with the immediate supervisor of the individual involved in the complaint.
3. In the event that resolution of the grievance has not been achieved through use of Steps 1 and 2, the grievance may be discussed with the appropriate Dean or Vice President.
4. If the student has completed the informal procedure and the grievance still exists, he/she may initiate the formal grievance procedure.

PROCEDURE FOR A FORMAL GRIEVANCE

To initiate the formal grievance procedure, the student must submit a request in writing to the President of the College to have the grievance considered by a formal Grievance Committee. The request shall include a description of the nature of the grievance and the redress sought.

2. The President will either approve or disapprove the request. If the request is disapproved, a reason for the disapproval will be communicated to the aggrieved student in writing. If it is approved, the President will appoint a Grievance committee to meet promptly to hear the grievance. The Committee shall be composed of 5 members, two of whom shall be students currently enrolled at the College. Each of the other three members may be either faculty or staff members of the College. The Chairman of the Committee shall be appointed by the President.
3. The Chairman of the Grievance Committee shall call a meeting as soon as possible to hear the grievance matter and to arrive at a recommendation(s) to the President of the College.

Participation in the hearing shall be limited to the committee members, the committee secretary and advisors, the student and any person against whom the grievance has been filed, and to witnesses and legal counsel who may be called or used by either party. The student and the party against whom the grievance was filed shall be afforded the opportunity to call witnesses and cross-examine adverse witnesses. The President may appoint a representative of the college who may also, personally or through counsel, introduce evidence and call and cross-examine witnesses.

All parties shall submit all evidence relating to the alleged discrimination to the Committee prior to or no later than the time of the hearing.

The Committee will prepare a full written report of the proceedings, its findings and recommendation(s), and copies of the report will be sent to the President and to the person bringing the grievance.

A record (taping) of the testimony shall be made and included with the written report of the proceedings forwarded to the President.

4. The President shall accept or reject the recommendation(s) of the Committee or may propose an alternative solution. The President's response shall be made in writing to the grievant.
5. In the event the decision of the President is not acceptable to the grievant, he/she may request a review of the case by the Board of Trustees of the College. Such request shall be made in writing through the President. The matter will be placed upon the Board's agenda and the student may address the Board in accordance with the Board's policies. The record of the proceedings shall be made available to the Board for its review prior to the meeting. The Board shall advise the President and Grievant of its decision either orally or in writing, or of further proceedings or actions, if any, desired by the Board. If the Board takes no action, the decision of the President shall be final.

Clinical Schedule Example

ORIENTATION										PROVIDENCE					HILLCREST					SCOTT & WHITE											
JAN		FEB		MARCH		APRIL		MAY		JUNE		JULY		AUGUST		SEPTEMBER		OCTOBER		NOVEMBER		DECEMBER									
M	W	M	W	M	W	M	W	M	W	M	W	M	W	M	W	M	W	M	W	M	W	M	W								
M 11	W 13	M 18	W 20	M 25	W 27	M 1	W 3	M 8	W 10	M 15	W 17	M 22	W 24	M 29	W 2	M 7	W 9	M 14	W 16	M 21	W 23	M 28	W 30	M 4	W 6	M 11	W 13	M 18	W 20	M 25	W 27
● MEET N GREET 2nd YEARS ● ON CAMPUS ●		● MEET N GREET 2nd YEARS ● ON CAMPUS ●		● MEET N GREET 2nd YEARS ● ON CAMPUS ●		● MEET N GREET 2nd YEARS ● ON CAMPUS ●		● MEET N GREET 2nd YEARS ● ON CAMPUS ●		● MEET N GREET 2nd YEARS ● ON CAMPUS ●		● MEET N GREET 2nd YEARS ● ON CAMPUS ●		● MEET N GREET 2nd YEARS ● ON CAMPUS ●		● MEET N GREET 2nd YEARS ● ON CAMPUS ●		● MEET N GREET 2nd YEARS ● ON CAMPUS ●		● MEET N GREET 2nd YEARS ● ON CAMPUS ●		● MEET N GREET 2nd YEARS ● ON CAMPUS ●		● MEET N GREET 2nd YEARS ● ON CAMPUS ●		● MEET N GREET 2nd YEARS ● ON CAMPUS ●		● MEET N GREET 2nd YEARS ● ON CAMPUS ●		● MEET N GREET 2nd YEARS ● ON CAMPUS ●	
Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	
● Holiday ● Holiday ● Holiday		● Holiday ● Holiday ● Holiday		● Holiday ● Holiday ● Holiday		● Holiday ● Holiday ● Holiday		● Holiday ● Holiday ● Holiday		● Holiday ● Holiday ● Holiday		● Holiday ● Holiday ● Holiday		● Holiday ● Holiday ● Holiday		● Holiday ● Holiday ● Holiday		● Holiday ● Holiday ● Holiday		● Holiday ● Holiday ● Holiday		● Holiday ● Holiday ● Holiday		● Holiday ● Holiday ● Holiday		● Holiday ● Holiday ● Holiday		● Holiday ● Holiday ● Holiday		● Holiday ● Holiday ● Holiday	
Metroplex 10:00 - 11:00										Hillcrest & Scott & White - ON MCC CAMPUS 7:00 am - 3:30 f					Hillcrest & Scott & White - ON MCC CAMPUS 7:00 am - 3:30 f					Hillcrest & Scott & White - ON MCC CAMPUS 7:00 am - 3:30 f											
Hillcrest & Scott & White - ON MCC CAMPUS 7:00 am - 3:30 f										Hillcrest & Scott & White - ON MCC CAMPUS 7:00 am - 3:30 f					Hillcrest & Scott & White - ON MCC CAMPUS 7:00 am - 3:30 f					Hillcrest & Scott & White - ON MCC CAMPUS 7:00 am - 3:30 f											
EPIC TRAINING 8:00 am - 2:00 pm CLD-RTH100 and S&W badges										EPIC TRAINING 8:00 am - 2:00 pm CLD-RTH100 and S&W badges					EPIC TRAINING 8:00 am - 2:00 pm CLD-RTH100 and S&W badges					EPIC TRAINING 8:00 am - 2:00 pm CLD-RTH100 and S&W badges											
Providence 8:00 am - 12:00 f										Providence 8:00 am - 12:00 f					Providence 8:00 am - 12:00 f					Providence 8:00 am - 12:00 f											
EPIC TRAINING 8:00 am - 1:30 pm CLD-RTH200 and S&W badges										EPIC TRAINING 8:00 am - 1:30 pm CLD-RTH200 and S&W badges					EPIC TRAINING 8:00 am - 1:30 pm CLD-RTH200 and S&W badges					EPIC TRAINING 8:00 am - 1:30 pm CLD-RTH200 and S&W badges											
Hill Regional Hosp 9:00-12:1										Hill Regional Hosp 9:00-12:1					Hill Regional Hosp 9:00-12:1					Hill Regional Hosp 9:00-12:1											
Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	Camp	
E	Rehab	Camp	D	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	
D	E	Camp	Rehab	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	
E	E	Camp	GW	Rehab	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	
E	GW	Camp	E	D	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	
GW	D	Camp	E	D	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	
D	E	Camp	D	D	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	
D	E	Camp	E	GW	E	D	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	
E	D	Camp	D	D	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	
D	E	Camp	E	GW	E	D	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	
E	D	Camp	D	D	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	
E	PV	D	E	D	H	E	D	E	D	E	D	E	D	E	D	E	D	E	D	E	D	E	D	E	D	E	D	E	D	E	
E	PV	D	E	D	H	E	D	E	D	E	D	E	D	E	D	E	D	E	D	E	D	E	D	E	D	E	D	E	D	E	