BROOKDALE COMMUNITY COLLEGE

Respiratory Care Student Handbook SEPTEMBER 2019



Respiratory Care Program Health Science Institute

THIS PAGE INTENTIONALLY LEFT BLANK



Dear Student:

Welcome to the Brookdale Community College (BCC) Respiratory Care Program. This handbook has been prepared to help you become familiar with the Respiratory Therapy Program. It contains the policies and procedures* that delineate the rights and responsibilities of Brookdale Respiratory Care students.

It is the responsibility of each student to review this handbook and to refer to it as needed during his or her enrollment. All statements in the Brookdale Respiratory Care Student Handbook are announcements of present policies and guidelines and are subject to change. The Brookdale Respiratory Care Student Handbook also serves as a supplement to the College Catalog and to the College Student Handbook.

There has never been a better time to enter Respiratory Care. The current job market offers opportunity and variety. Most importantly, the work is satisfying and provides a vital service. The faculty, staff, and I are committed to helping you achieve your professional goals. Our very best wishes for your success in the Respiratory Care Program.

Sincerely,

Jayne Edman, Ed.D., RN, CNE Dean of the Health Science Institute

*Brookdale Community College reserves the right to modify this Handbook at any time. Notification of amendments, modifications or changes will be sent to your Brookdale email.

Contents

LEGAL LIMITATIONS TO LICENSURE	1
ACCREDITATION	
EDUCATION POLICIES	
Nondiscrimination Policy	2
Information About Reporting Discrimination/sexual harassment	
Safety and Security	
Disability Services	
Family Educational Rights and Privacy Act of 1974 (FERPA)	3
Student Files	
Financial Responsibility	3
ACADEMIC AND TECHNICAL STANDARDS	
CURRICULUM	5
Philosophy	
Program Learning Outcomes	
Program Outcomes	
•	
Program Purposes/Goals	6
Program Purposes/Goals Catalog Information: Curriculum	
Program Purposes/Goals Catalog Information: Curriculum	
Catalog Information: Curriculum	7
Catalog Information: Curriculum CLINICAL LABORATORY REQUIREMENTS	7
Catalog Information: Curriculum CLINICAL LABORATORY REQUIREMENTS CastleBranch	7 11 11
Catalog Information: Curriculum CLINICAL LABORATORY REQUIREMENTS CastleBranch Physical Examination	
Catalog Information: Curriculum CLINICAL LABORATORY REQUIREMENTS CastleBranch Physical Examination Criminal History Background Check	
Catalog Information: Curriculum CLINICAL LABORATORY REQUIREMENTS CastleBranch Physical Examination	
Catalog Information: Curriculum CLINICAL LABORATORY REQUIREMENTS CastleBranch Physical Examination Criminal History Background Check Drug Screen	
Catalog Information: Curriculum CLINICAL LABORATORY REQUIREMENTS CastleBranch Physical Examination Criminal History Background Check Drug Screen Malpractice Insurance Health Insurance	
Catalog Information: Curriculum CLINICAL LABORATORY REQUIREMENTS CastleBranch Physical Examination Criminal History Background Check Drug Screen Malpractice Insurance	
Catalog Information: Curriculum CLINICAL LABORATORY REQUIREMENTS CastleBranch Physical Examination Criminal History Background Check Drug Screen Malpractice Insurance Health Insurance Cardiopulmonary Resuscitation Certification	
Catalog Information: Curriculum CLINICAL LABORATORY REQUIREMENTS. CastleBranch. Physical Examination Criminal History Background Check Drug Screen Malpractice Insurance. Health Insurance Cardiopulmonary Resuscitation Certification Photograph.	
Catalog Information: Curriculum	

Rules for Examination	
Testing Center Policy and Rules	
Incomplete Grade	16
CLINICAL LABORATORY REQUIREMENTS	17
CLINICAL EVALUATION	
COLLEGE LABORATORY REQUIREMENTS	
COMPUTER LABORATORY REQUIREMENTS	
REMEDIATION/REFERRALS	19
READMISSION FOR DISMISSED STUDENTS	19
READMISSION FOR STUDENTS WHO VOLUNTARILY WITHD	RAW19
COMPLAINTS	20
Chain of Command:	
APPEAL PROCESS	20
SERVICE/WORK STUDY	22
FITNESS FOR DUTY POLICY	22
HEALTH POLICY	
Post Exposure Blood and Body Fluid Procedure and Process	23
Post-Exposure Communicable Disease Change in Health Status	
CHAPERONING POLICY	24
SOCIAL MEDIA POLICY	26
REGISTRATION	
Clinical Scheduling Travel Requirements	
EMAIL	20

PINNING	
ACCREDITATION	28
GRADUATION	28
FACULTY	29
LIBRARY	29
SELF-ASSESSMENT EXAMS	29
LICENSURE	29
PROFESSIONAL ACTIVITIES	29
AARC CODE OF ETHICS	29
GROUP STUDY	
SCHOOL CLOSINGS	31
ILLNESS	31
BULLETIN BOARDS	

LEGAL LIMITATIONS TO LICENSURE

New Jersey State Board of Respiratory Care Requirements

Applicants to the Respiratory Therapy Program need to be aware that the Board of Respiratory Care requires the following questions to be answered on the application for a license to practice professional respiratory therapy.

1) Are you licensed in any other state(s)? YES \Box NO \Box

if yes, what state(s)?_____ Attach copy of license(s).

2) Has your license ever been revoked or suspended in any other state? YES \Box NO \Box

if yes, please explain on a separate sheet of paper.

3) Have you ever been summoned, arrested, taken into custody, indicted, convicted, or tried for or charged with or pleaded guilty to the violation of any law or ordinance or the commission of any felony or misdemeanor (excluding traffic violations) in this or another state or in a foreign country? YES □ NO □

if yes, provide a copy (as appropriate) of court's judgment, arrest warrant, or bill of indictment and/or release from parole or probation. Also provide a complete explanation on a separate sheet of paper.

4) Have you ever served in the armed forces of the United States? YES \Box NO \Box if yes, what type of military discharge did you receive?

5) Professional references:

ACCREDITATION

The Brookdale Community College Respiratory Care Program is accredited by

Commission on Accreditation for Respiratory Care 1248 Harwood Road Bedford, TX 76021 – 4244 Phone (817) 283.3835

For program complaints contact Executive Director tom@coarc.com

EDUCATION POLICIES

Brookdale Community College's Respiratory Care Program is congruent with the college-wide policies for non-discrimination, reporting information about discrimination/sexual harassment, maintaining safety and security, and providing disability services and accommodations. Any differences in Family educational Rights and Privacy Act of 1974 (FERPA) or the maintenance of student files policies are justified by the purpose of the Radiologic Technology Program.

Nondiscrimination Policy

 Brookdale is an Equal Opportunity Affirmative Action Institution. No person in whatever relationship with the College, shall be subjected to discrimination or harassment on the basis of race, creed, color, nationality, national origin, ancestry, age, sex/gender (including pregnancy), marital status, civic union status, domestic partnership status, gender identity or expression, familial status affectional or sexual orientation, atypical hereditary cellular or blood trait, genetic information, liability for service in the Armed Forces of the United States, disability (including perceived physical, mental, and/or intellectual disability) or other protected categories or activity (i.e. opposition to prohibited discrimination or participation in the complaint process). Sexual harassment is a form of unlawful gender discrimination and, likewise, will not be tolerated.

Information About Reporting Discrimination/sexual harassment

1. Any student, who feels he/she has been the victim of discrimination or sexual harassment, should bring these concerns to the attention of the designated Section 504/ADA and Title IX Coordinator for all student matters. Specific information is located in the college academic catalog or contact the office of the VP for Student Success, located in MAC 106, or phone (732) 224-2215.

Safety and Security

1. As is required by the Higher Education Authority Act, Brookdale annually publishes a Safety and Security Report which is available for review on the Police Department web site at <u>www.Brookdalecc.edu/campus-safety</u>. The website provides information including campus alerts crime statistics or how to report an incident.

Disability Services

Brookdale Community College, in compliance with federal and state laws, ensures that no qualified student with a disability is excluded from participating in, or is denied the benefits of, the services, programs, and activities at Brookdale. Students enrolled in the Respiratory Care Program must be able to meet the essential standards with or without reasonable accommodations. Brookdale offers individualized and reasonable accommodations and/or services to qualified persons through the Office of Disability Services. Students needing information about accommodations are encouraged to contact the Director of Disability Services at (732) 224-2739 or located in MAC 111. Students with Disability Alert Forms are responsible for giving them to the instructor. They are responsible for discussing the accommodations they are entitled to if the provision of the accommodation(s) does not jeopardize the integrity of the course. They are responsible for requesting accommodations in a timely manner. Students must remind their professors a week before each examination to allow them and/or Disability Service Office staff to plan for testing accommodations. Students with disabilities must maintain the same responsibility for their education as other students. These responsibilities including maintaining the academic integrity of the courses and following the Student Conduct Code.

Family Educational Rights and Privacy Act of 1974 (FERPA)

FERPA provides for the confidentiality of student records. Brookdale reserves the right to release or not to release, Directory Information at the discretion of appropriate officials. Directory Information may include a student's name, address, telephone number, field of study, participation in activities, weight and height of athletic team members, dates of attendance, degrees, awards, and most recent educational institution attended e-mail address, class schedule, class roster and photographs. As a member of the Brookdale community (student, parent, faculty, and staff), FERPA will also designate the types of information that can be accessed, and how the information can be obtained. The Respiratory Care program does share information with clinical affiliates in compliance with rules, policies, and protocols of the clinical affiliate and that apply to its employees.

Student Files

The Respiratory Care program maintains a file of each active student, separate from the College record. The student departmental file contains information related to the admission requirements, letters to the student, clinical evaluations and notes on program progression. Records of inactive students will be archived and retained for a period of five years. After five years student files will be destroyed.

Financial Responsibility

Brookdale Community College assumes no responsibility for the personal financial arrangements of the student. Financial aid and counseling is available at the College. Refer to the Financial Aid. Information about scholarships is available through the Brookdale Foundation at <u>https://www.Brookdalecc.edu/advancement/Brookdale-foundation/available-scholarships/.</u> Tuition is set annually by the Brookdale Board of Trustees and is approved by the Monmouth County board of School Estimate. Tuition and fees for the current academic year are available at the Brookdale website at https://www.Brookdalecc.edu/admissions/tuition-fees/.

In addition, students entering the Respiratory Care Program should anticipate \$2000.00 in expenses for items such as, but not limited to: criminal background checks, health screenings, and uniforms. Textbooks and required course materials are approximately \$2000.00 more over the course of the program.

ACADEMIC AND TECHNICAL STANDARDS

The purpose of this section is to inform students of the academic and technical standards deemed to be essential to the profession. This list is not exhaustive. Additional or more specific functions might be required.

- Utilize both visual and auditory monitoring equipment safely and effectively
- Assess and record changes in patient status using visual, auditory, and tactile senses
- Troubleshoot patient/equipment systems

• Effectively and appropriately communicate and relate with patients, their families, and members of the health care team using oral and/or written means

• Possess strength and mobility sufficient to support and transport patients as well as equipment

• Perform respiratory care procedures while wearing personal protective equipment (mask, gown, gloves, etc.)

- Safely and effectively prioritize workload
- Perform CPR (bag and mask ventilation, chest compressions)
- Utilize intellectual ability to adapt to changing patients' conditions

CURRICULUM

Philosophy

The faculty believes that Respiratory Therapy is the application of scientific knowledge and principles to clinical problems of respiratory care. It involves a problem-solving approach to the treatment, management, diagnostic evaluation, and care of patients across the lifespan.

The respiratory therapist assumes primary responsibility for all respiratory care modalities. A respiratory therapist may be required to exercise considerable independent clinical judgment in the respiratory care of patients. Accountable for providing care that meets legal and ethical standards, the respiratory therapist functions as a member of the health care team and collaborates with other disciplines.

Respiratory illness occurs when there is a change or compromise in the cardiopulmonary status. Respiratory care returns individuals to cardiopulmonary health or enables them to function optimally. Respiratory care occurs in many settings, including hospitals, longterm-care facilities, laboratories, and the home.

Congruent with the philosophy and goals of Brookdale Community College, the faculty also believes the educational process accounts for differences in student aptitude and cognitive style, clearly specifies expected competencies, and provides objective measures of achievement by which student progress can be assessed and outcomes ensured.

Based on these fundamental premises, the respiratory therapy program at Brookdale Community College strives to provide learning experiences that are student centered and competency based. A student-centered curriculum recognizes that differences in cognitive styles among students necessitate access to alternate learning resources beyond those traditionally provided and understands that faculty members are skilled facilitators and managers of the learning process. The faculty believe that learning is a lifelong process during which the learner continues personal and professional growth.

Finally, respiratory therapy education for technical practice is best accomplished in the community college. This provides the opportunity for traditional and nontraditional students to pursue an associatedegree education in respiratory therapy. The environment for this education should be rich in resources and services that promote personal as well as professional growth.

Program Learning Outcomes

On completion of the respiratory therapy program at Brookdale Community College, graduates will:

- 1. Assess, analyze, implement, and evaluate respiratory care.
- 2. Perform respiratory quality control activities.
- 3. Apply basic principles of management in the care of groups of patients.
- 4. Exhibit therapeutic communication skills.
- 5. Incorporate ethical/legal considerations into the respiratory action plan.
- 6. Practice as a member of a diverse interdisciplinary health care team.

- 7. Continue personal and professional growth.
- 8. Incorporate principles from the social sciences, biologic sciences, and humanities into their practice.
- 9. Practice within the limits and scope of a licensed respiratory therapist.

Program Outcomes

- Graduate students who perceive that their practice reflects the program competencies (cut scores of 3 or more on the graduate survey).
- 2. Graduate students who indicate satisfaction (cut scores of 3 or more on the graduate survey) with their preparation.
- 3. Graduate students whose employers indicate satisfaction (cut scores of 3 or more on the employer survey) with their preparation.
- 4. Graduate classes that achieve a program completion rate of 70%.
- 5. Graduate classes that achieve a 70% job placement rate.
- 6. Graduate classes that pass the entrylevel examination on first testing with an aggregate pass rate of 80% or above.
- 7. Maintain full accreditation by the Committee on Accreditation for Respiratory Care (COARC).

Program Purposes/Goals

- To prepare graduates possessing knowledge and skills required for the role of a registered respiratory therapist.
- 2. To provide students with a program of learning that fulfills the requirements of an associate degree in respiratory therapy.

- 3. To help provide for the health care needs of the community by graduating individuals eligible to practice respiratory therapy.
- 4. To provide a broad-based humanistic experience for the purpose of effecting self-actualization and ongoing personal development as a health care participant and a member of the community.

Catalog Information: Curriculum RESPIRATORY CARE PROGRAM, A.A.S.

This program prepares students for entry-level positions in respiratory care. Students work with patients in the treatment, management and control of problems and abnormalities associated with the cardiopulmonary system. Graduates work closely with patients, doctors, and nurses to provide diagnostic testing, therapeutics, education, rehabilitation, monitoring, life support and other specialized methods of treatment. Clinical learning experiences are required of all students. Upon completion of the program students are eligible to sit for the National Board of Respiratory Care (NBRC) Examination. After successful completion of this examination and application to the Respiratory Care Board, the graduate is also eligible for state licensure as a Certified Respiratory Therapist. Once licensed, graduates are eligible to take the Advanced Practitioner Examinations to become a Registered Respiratory Therapist (RRT). This program is accredited by the Commission on Accreditation for Respiratory Care (www.coarc.com), 1248 Harwood Road, Bedford, Texas 76021-4244 (817)283-2835. Specific admission criteria for the program are outlined in the <u>Admission and Registration</u> section of this catalog. Separate policies exist for the Respiratory program including grading. These policies can be found in the Respiratory Therapy Student Handbook.

Graduates of this program will be able to:

- Assess, analyze, implement and evaluate respiratory care
- Perform respiratory quality control activities
- Apply basic principles of management in the care of groups of patients
- Exhibit therapeutic communication skills
- Incorporate ethical/legal considerations into the respiratory action plan
- Practice as a member of a diverse interdisciplinary health care team
- Continue personal and professional growth
- Incorporate principles from the social sciences, biologic sciences and humanities into their practice
- Practice within the limits and scope of a licensed respiratory therapist

Requirements

General Education - 24 credits as follows:

- <u>BIOL111 Anatomy and Physiology I</u>Credits: 4
- <u>BIOL112 Anatomy and Physiology II Credits: 4</u>
- BIOL213 Microbiology Credits: 4
- ENGL121 English Composition: The Writing Process Credits: 3
- <u>PSYC106 Introduction to Psychology II</u> Credits: 3
- <u>Humanities</u> Credits: 3
- •
- ENGL122 English Composition: Writing and Research Credits: 3
- or
- <u>SPCH115 Public Speaking</u>Credits: 3

Career Studies - 45 credits as follows:

A grade of "C" or higher must be earned in all career studies courses in order to complete this program.

- <u>HESC105 Medical Terminology</u> Credits: 3
- RESP161 Cardiopulmonary Anatomy and Physiology Credits: 3
- RESP162 Fundamental Skills in Respiratory Care Credits: 7
- RESP163 Cardiopulmonary Pathophysiology Credits: 4
- RESP164 Patient Assessment and Diagnostics Credits: 6
- RESP165 Advanced Life Support and Emergency Care Credits: 2
- RESP261 Neonatal & Pediatric Respiratory Care Credits: 2
- <u>RESP262 Adult Critical Care Credits:</u> 7
- <u>RESP263 Subacute Respiratory Care Credits: 2</u>
- RESP264 Respiratory Care Practice Credits: 7
- RESP265 Issues in Respiratory Care Credits: 2

Credits required for degree: 69

Suggested Sequence - Respiratory Care Program A.A.S. Degree

The following sequence is an example of how this degree can be completed in two years. This sequence is based on satisfaction of all Basic Skills requirements and prerequisites and presumes a Fall Term start date. An individual's program may vary depending on transfer institution, career objectives, or individual needs. See your counselor for other options and to monitor your progress. Students must satisfy specific requirements in order to be admitted to this program. See Admission to Health Science Programs, <u>Admission and Registration</u> section of this catalog.

The following degree requirement must be taken prior to admission to program:

• <u>HESC105 - Medical Terminology</u> Credits: 3

Semester 1 - Fall Term

- <u>RESP161 Cardiopulmonary Anatomy and Physiology</u> Credits: 3
- RESP162 Fundamental Skills in Respiratory Care Credits: 7
- <u>BIOL111 Anatomy and Physiology I</u> Credits: 4
- ENGL121 English Composition: The Writing Process Credits: 3

Total credits: 17

Semester 2 - Spring Term

- <u>RESP163 Cardiopulmonary Pathophysiology</u> Credits: 4
- <u>RESP164 Patient Assessment and Diagnostics</u> Credits: 6
- <u>BIOL112 Anatomy and Physiology II</u> Credits: 4
- <u>RESP165 Advanced Life Support and Emergency Care</u> Credits: 2

Total credits: 16

Semester 3 - Fall Term

- <u>RESP261 Neonatal & Pediatric Respiratory Care</u> Credits: 2
- <u>RESP262 Adult Critical Care</u> Credits: 7
- <u>BIOL213 Microbiology</u>Credits: 4
- <u>PSYC106 Introduction to Psychology II: Personality & Social Aspects</u> Credits: 3

Total credits: 16

Semester 4 - Spring Term

- <u>RESP263 Subacute Respiratory Care</u> Credits: 2
- <u>RESP264 Respiratory Care Practice</u> Credits: 7
- <u>RESP265 Issues in Respiratory Care</u> Credits: 2
- •
- ENGL122 English Composition: Writing and Research Credits: 3
- or
- <u>SPCH115 Public Speaking</u> Credits: 3
- Humanities Credits: 3⁽¹⁾

Total credits: 17

Sequence Notes:

This degree may take longer than two years to complete. The above sequence is an example of how this degree can be completed in two years. Although not required to be taken prior to beginning the program, general education courses may be taken before starting clinical courses or during the summer terms.

⁽¹⁾One course is recommended from the <u>Cultural & Global Awareness</u> knowledge area.

Advanced Placement in Respiratory Therapy

Certified Respiratory Therapists and persons with previous experience in Respiratory Therapy may be eligible for Advanced Placement. Applicants for Advanced Placement must have met all criteria for Allied Health admission and have completed all program requirements in order to be eligible for graduation. The process and criteria for Advanced Placement are available by request from the Allied Health Office.

RESP-161 Cardiopulmonary Anatomy and Physiology (cr3) (3:0)

This course is one of two courses offered in the first term of the Respiratory Care Program. The student will utilize principles and methods of scientific inquiry to explore the structure and function of the cardiopulmonary system. In addition, the students will use appropriate mathematical concepts and operations to interpret data applied to static and dynamic characteristics of the lungs and vascular systems, oxygen and carbon dioxide transport, acid-base balance, ventilation-perfusion relationships as well as regulation and control of respiration. (Prerequisites: Admission to the program and HESC 105; Corequisite: RESP 162; Prerequisites or Corequisites: BIOL 111 and ENGL 121)

RESP-162 Fundamental Skills in Respiratory Care (cr7) (4:9)

This course is one of two courses offered in the first term of the Respiratory Care Program. In this course, the student will study the theory and clinical application of patient assessment, humidity and aerosol therapy, pharmacology, oxygen therapy, intermittent positive pressure and techniques of bronchial clearance. In addition, the principles of infection control and techniques of transmission prevention will be covered. Students will practice skills in the college laboratory and will care for groups of patients in a clinical setting. (Prerequisites: Admission to the program and HESC 105; Corequisite: RESP 161; Prerequisites or Corequisites: BIOL 111 and ENGL 121)

RESP-163 Cardiopulmonary Pathophysiology (cr4) (4:0)

This course provides the basis for therapeutic management by introducing the student to the structural and functional abnormalities leading to pathology of the cardiopulmonary system. Using a problem solving approach, the students will apply knowledge of cardiopulmonary disease and diagnostics to clinical case scenarios. In addition, extrapulmonary conditions that can result in respiratory impairment will be discussed. (Prerequisites: RESP 161 and RESP 162; Corequisites: RESP 164 and RESP 165; Prerequisites or Corequisites: BIOL 112)

RESP-164 Patient Assessment and Diagnostics (cr6) (3:9)

This course addresses cardiopulmonary assessment and diagnostic procedures. Additional topics include laboratory studies, electrocardiographs, pulmonary function studies, invasive and non-invasive blood gas monitoring, sleep studies, radiographic interpretation and invasive and non-invasive techniques of airway clearance and sampling. Students will practice skills in the college laboratory and will care for groups of patients in a clinical setting. (Prerequisites: RESP 161 and RESP 162; Corequisites: RESP 163 and RESP 165; Prerequisite or Corequisite: BIOL 112)

RESP-165 Advanced Life Support and Emergency Care (cr2) (2:0)

This course introduces the student to triage and the stabilization of patients with life threatening conditions and the procedures performed in the emergency department. Emphasis is placed on skills required to perform and document a problem oriented history and physical; formulate a differential diagnosis; order and interpret the tests necessary to confirm or rule out a primary diagnosis and educate the patient and family. The student will also be introduced to disaster preparedness and emergency management in unique environments. (Prerequisites: RESP 161 and RESP 162; Corequisites: RESP 163 and RESP 164; Prerequisites or Corequisites: BIOL 112)

RESP-261 NEONATAL AND PEDIATRIC RESPIRATORY CARE (CR2) (2:0)

This course covers the theory and principles of respiratory care applied to infants and children in the acute and subacute care setting. Topics include development of the

pulmonary system, diseases and disorders, respiratory management including PALS and NALS protocols, and special considerations in the management of infants and children. (Prerequisites: RESP 163, RESP 164 and RESP 165; Corequisite: RESP 262; Prerequisites or Corequisites: BIOL 213 and PSYC 106)

RESP-262 ADULT CRITICAL CARE (CR7) (3:12)

In this course, the student will study the principles of adult intensive care. Topics include the initiation, maintenance, monitoring and withdrawal of mechanical ventilation, airway management, and principles of hemodynamic monitoring. The selection and maintenance of ventilators and other equipment used in the critical care unit will also be discussed. The student will practice skills in the college laboratory and work with diverse groups of patients in a clinical setting. (Prerequisites: RESP 163, RESP 164 and RESP 165; Corequisite: RESP 261; Prerequisites or Corequisites: BIOL 213 and PSYC 106)

RESP-263 SUBACUTE RESPIRATORY CARE (CR2) (2:0)

This course is designed to prepare the student to work in alternative care settings including physician group practices, skilled nursing facilities, rehabilitation centers, sleep labs and home care agencies. Classroom discussions will include concepts of pulmonary rehabilitation, exercise testing, practices and principles of respiratory care in the home, discharge planning, reimbursement issues, patient education, and respiratory therapy in skilled nursing facilities. (Prerequisites: RESP 261 and RESP 262; corequisites: RESP 264 and RESP 265; Prerequisites or Corequisites: Humanities course and ENGL 122 or SPCH 115)

RESP-264 RESPIRATORY CARE PRACTICE (CR7) (2:15)

In this course the student will develop and implement patient care plans, manage and prioritize care for groups of patients in all areas of clinical practice. Specific topics include preparation for the national exams and discussions of leadership skills and management styles. Students will demonstrate communication skills by researching, preparing, and presenting a case study. (Prerequisites: RESP 261 and RESP 262; corequisites: RESP 263 and RESP 265; Prerequisites or Corequisites: Humanities course and ENGL 122 or SPCH 115)

RESP-265 (E) ISSUES IN RESPIRATORY CARE (CR2) (2:0)

The course provides a forum for the student to explore current issues in respiratory care. A wide range of topics are discussed from philosophical, theoretical, ethical, social, economic, historical, research, and professional points of view. Students will analyze issues, describe influencing factors, and propose resolutions and strategies, including the impact on respiratory care. (Prerequisites: RESP 261 and RESP 262; Corequisites: RESP 263 and RESP 265; Prerequisites or Corequisites: Humanities course and ENGL 122 or SPCH 115)

RESP-265: ISSUES IN RESPIRATORY CARE (CR2) (2:0)

This course provides a forum for the student to explore current issues in respiratory care. A wide range of topics are discussed from philosophical, theoretical, ethical, social, economic, historical, research, and professional points of view. Students will analyze issues, describe influencing factors, and propose resolutions and strategies, including the impact on respiratory care. (Prerequisites: RESP 261 and RESP 262; Corequisites: RESP 263 and RESP 264; Prerequisites or Corequisites: Humanities course and ENGL 122 or SPCH 115)

CastleBranch

Brookdale Community College is contracted with CastleBranch, an external vendor, to provide background screening and compliance tracking services. The compliance documents the student submits to CastleBranch to be eligible for clinical placement are the annual health clearance form immunization form immunization titers, and proof of CPR training.

CastleBranch is compliant with the Family Education Rights and Privacy Act. It is the students' responsibility to remain in compliance with all clinical requirements throughout the year. CastleBranch will send email alerts to students as requirements approach their due dates. It is the students' responsibility to attend to these emails immediately, so records do not become non-compliant. The student pays the cost of the background screening and the compliance tracking directly to CastleBranch.

Physical Examination

A physical examination is required before any clinical course. The physical examination report will affirm that each student is able to meet the demands of the program without compromising the patient or themselves. This physical exam may be conducted by a physician/nurse practitioner/physician assistant of the student's choice.

Medical clearance documentation must include documentation of vaccinations. Tuberculosis screening must be done annually. Flu vaccine status must be updated each semester.

The documentation will be reviewed initially upon entrance to the program and prior to each semester until program completion. Incomplete forms will not be accepted. Students who do not submit a completed Annual Health Clearance form and/or the required Immunization Documentation form by the required due date will not be permitted to attend clinical laboratory.

Criminal History Background Check

Clinical agencies mandate criminal history background checks for all individuals engaged in patient care, and all students must undergo criminal history background checks. These checks are conducted by an external vendor, and the information is sent to the College and to clinical agencies. Agency personnel will evaluate the information they receive and, in their sole discretion, make the final determination as to each student's ability to continue to engage in patient care in their agency. If a student is denied clinical placement by any clinical agency due to criminal history information, that student will be dropped from the program.

If a student is convicted of a crime of any type after beginning the program, the student must notify the office within one business day of the conviction and may not attend any clinical laboratory without receiving clearance from the Institute dean.

Drug Screen

Clinical agencies may require evidence of a negative drug screening before the start of the clinical experience. You will be notified if the agency requires this, and given the information to obtain this screen prior to starting clinical. These screenings are conducted by an external vendor, and the information is sent to the College and to the clinical agency. Agency personnel will evaluate the information they receive and, in their sole discretion, make the final determination as to each student's ability to engage in patient care in their agency. If a student is denied clinical placement by any clinical agency due to drug screening test results, the student will be dismissed from the program.

Malpractice Insurance

Students entering the respiratory therapy program are required to carry malpractice insurance through the College.

Health Insurance

All students are required to carry personal health insurance. All students are financially responsible for medical treatment if illness, injury clinical exposure or questions of fitness for duty occur while enrolled in the Respiratory Care Program.

Cardiopulmonary Resuscitation Certification

Students are required to maintain current CPR certification—either American Heart Association CPR for the Healthcare Provider or American Red Cross CPR for the Professional Rescuer. Proof of CPR certification must be submitted to the Health Sciences Administrator. CPR certification must reflect dates between July 1 and August 15. Renewal will also occur during these dates regardless of the date on the previous certificate.

Photograph

A passport photograph must be submitted to the office before class starts in order to participate in clinical laboratory.

Student contact information

Students must maintain current contact information with the Brookdale Health Science Institute office. If changes occur to personal contact information such as name address, telephone number or alternative email address students must notify the Health Science Associate in writing. The Health Science Institute is not responsible for delay or failure in receiving information due to incorrect contact information. In addition the student should file a "Change of Data" form with the Admissions Office.

Demographic Data Form

Each student is required to accurately complete a Demographic Data Form each term. This data is anonymous and is used only in the aggregate to generate program statistics.

ACADEMIC PROGRESS POLICY

A student program plan is completed by each student with a designated counselor/advisor. Students are referred to the counselor/advisor whenever there are individual needs. Planning should ensure that respiratory therapy courses are completed in the prescribed sequence and that pre-requisite and co-requisite courses are completed within the guidelines stated in the College catalog.

Program Requirements

- 1. The Respiratory Care Program consists of a prescribed set of Respiratory Care and general education courses. The Respiratory Care courses are sequential and may be taken only by those students accepted into the Respiratory Care Program.
- 2. Students must complete all Respiratory Care courses and graduate within three consecutive calendar years or must repeat the program in its entirety.
- 3. Students who self-drop or who are dismissed from the program will be readmitted under the current curriculum.
- 4. Students may only self-drop once from respiratory courses during the respiratory program.
- 5. A grade of C or better must be earned in all Respiratory Care courses in order to pass the course. Respiratory Care course work includes classroom experiences, College laboratory, and clinical laboratory.
- 6. Students who have been dismissed from the program due to course failure may apply once for readmission.
- 7. Students who have been dismissed from the program due to clinical failure will be readmitted only upon approval of the Dean of the Health Science Institute after consultation with faculty and evaluation of the student's record.
- 8. Students who are out two terms or more must validate clinical skills as

prescribed by the faculty before readmission.

- 9. Transfer students must validate clinical skills as prescribed by the faculty before admission.
- Students must complete all National Board of Respiratory Care (NBRC) self-assessment examinations administered during the program. These results are included in course grades.
- 11. Students must sign and adhere to the Fitness for Duty Policy. A failure to sign this policy or a violation of the policy can result in the student being assigned a grade of F and being dismissed form the program.
- 12. Students must adhere to the Health Policy. Failure to meet the parameters of this policy can result in the student being assigned a grade of F and being dismissed from the program.
- 13. Students must retain a copy of all papers except Respiratory Care plans.
- 14. Students are responsible for all written/verbal information that is shared in scheduled classes.
- 15. Students are expected to submit all written assignments on the date they are due. Should personal matters interfere with a student's ability to comply with this requirement, the student is expected to contact the faculty member prior to the due date, giving due cause for the delay and stating in writing a date when the required work will be submitted and have the faculty member assign a new deadline.

- 16. Students who do not hand in written assignments by the new deadline will be assigned a grade of 0.
- 17. Students must adhere to testing schedules. Should a student not be able to comply with this requirement, the student must contact the classroom instructor to request a postponement and establish a new deadline. It is faculty discretion to grant an extension on a test. If a student does not contact the instructor to reschedule a test, or if a student does not comply with a new deadline, the instructor will assign a grade of 0.
- 18. Students are encouraged to seek assistance promptly from the respiratory therapy faculty when and if they experience any degree of academic or clinical difficulty. If personal matters are interfering with academic or clinical efforts, the classroom or clinical instructor should be kept informed.
- 19. Students who have disability alert forms should see their instructor about accommodations. These students must take their exams on the same day the exam is scheduled for the class.
- 20. Students may not take printed material from faculty supplies without permission. If the student has been absent from class in which printed material was distributed, the student should see the faculty member to obtain the material. If the student knows in advance that he or she will not be able to attend a class, he or she should have a classmate get an extra copy.
- Students may not be on clinical units outside of scheduled clinical hours and may not use their agency badges to access clinical facilities outside of scheduled clinical hours. Unauthorized use of agency badges will result in immediate dismissal from the program.

- 22. Students will conduct themselves in a professional manner at all times in the clinical agency. The use of the clinical agency is a privilege.
- 23. Students must check their e-mail daily during the semester.
- 24. Every student is expected to exhibit professional conduct with all faculty members, administrators, and staff in all classes and in the office and with all hospital personnel in all agencies. Students who display unprofessional conduct will be dismissed from the program. The definition of professional conduct is at the discretion of the Dean with faculty consultation.
- 25. Students should use care when referring to their program on social networking sites. It is the students' responsibility to be aware of Federal and State laws regarding privacy and confidentiality of information.
- 26. No photographs, video, or recordings can be taken at any clinical site by any picture-taking device, including cell phone, camera, video, etc.

Classroom Participation

- 1. The entire faculty view attending class as an integral part of the program and a critical step toward successful completion of each course.
- 2. It is expected that each student attend all classes, report for class on time, and not be in the College laboratory or the testing center during class time.
- **3.** All students must attend classroom and clinical orientation sessions.

Grades

1. The grading system for the Respiratory Care Program is structured as follows:

$$A = 94 - 100$$

 $A = 90 - 93$
 $B + = 87 - 89$

B = 84 - 86B- = 81 - 83 C+ = 78 - 80 C = 74 - 77 D = 65 - 73

F = 64 and below

- 2. A grade of C is required in order to pass all Respiratory Care courses. Students who do not earn a grade of C must repeat the course before progressing to the next Respiratory Care course.
- 3. Criteria for the achievement of grades for each respiratory therapy course are established by the faculty teaching that course and are announced at the beginning of each term.
- 4. The weight of each examination and assignment is stated in the course grading policy.
- 5. In order to complete a respiratory therapy course successfully, students must:
 - a. Complete all course assignments including College laboratory skills.
 - b. Sit for all unit exams.
 - c. Achieve a pass grade on the clinical laboratory evaluation.
 - d. Pass a cumulative final examination with a grade of 74% or better (0.5 will round up to the next numerical grade and 0.4 will round down to the next lower numerical grade: for example, 91.5 will round up to 92 and 91.4 will round down to 91).
- 6. Clinical laboratory evaluations must reflect a satisfactory level of performance and a pass grade in order to achieve credit for any respiratory therapy course.
- 7. Students who fail clinical laboratory may not sit for the final examination.

- 8. Calculators may not be used in the testing center or in any classroom testing situation in any course.
- 9. Students may not use a bilingual dictionary in any testing situation except RESP 161.

Retesting

Students may not retest on unit or final examinations.

Dismissal

- 1. Students whose course grade does not reflect a C will fail the course and will be dismissed from the program.
- 2. Students who do not earn a pass grade in clinical laboratory fail the course. They will be assigned a grade of F and will be dismissed from the program.
- 3. Students who self-drop after the College withdrawal date will be assigned a grade of F and will be dismissed from the program.
- 4. Medical withdrawals must meet College policy.
- 5. A grade of below 74 in any course automatically results in dismissal from the respiratory therapy program.

Academic Integrity

Any violation of academic integrity will result in immediate dismissal from the program. This includes challenge students. Students who are dismissed from the program for violation of academic integrity may not attend clinical laboratory nor sit for any examination and are not eligible for readmission. Violations of academic integrity include, but are not limited to, cheating (the student's exam will be confiscated), giving or receiving information related to examination questions, and plagiarism. Such behaviors are also violations of the Brookdale Community College Student Conduct Code. The student will be referred to the Dean of Academic Services/Director of Student Life and

Activities for disciplinary action under College Regulation 6.3000R.

Rules for Examination

Whether or not examinations are given in the testing center or in the classroom, the following rules apply.

- 1. Students must not leave their seats during the examination.
- 2. Positively no communication between students during the examination is permitted.
- 3. If there are necessary questions or if there is a need for any additional material, they may be written on paper provided by instructor or staff.
- 4. If there is any need for calculations or notes, they may be written on the back of the answer sheet.
- 5. Students may not share information about an examination with other students.
- 6. Honesty is the responsibility of each student at all times.
- 7. Examinations may not be taken in the testing center during scheduled classes.
- 8. If an examination is taken in the testing center, any grade that is received from testing center staff is tentative. Examination results are posted by course faculty.
- 9. When an examination is given in the computer lab, any staff member has the authority to terminate an individual's testing.
- 10. Cell phones are not allowed during examinations.
- 11. Individual faculty may establish additional rules for examinations at their discretion.

Testing Center Policy and Rules

- 1. Present your Brookdale I.D. card.
- 2. Bring a #2 pencil.

- 3. Request a test by course instructor name, course code, course number, and unit number only.
- 4. The last request for exams is two hours before closing.
- 5. Tests must be turned in promptly at closing time.
- 6. Request only one (1) test at a time.
- 7. No children or pets allowed.
- 8. No food, drinks, or smoking allowed.
- 9. Leaving the testing center while taking a test is not permitted.

Cheating in the Testing Center is:

- 1. Possessing materials not provided by the test center staff.
- 2. Leaving the test center for any reason while taking a test.
- 3. Talking to anyone other than the test center staff.
- 4. Copying from anyone's test paper.
- 5. Sharing aids such as pencils, calculators, erasers, etc.
- 6. Sitting in an unassigned seat.

Any of these actions will result in the following:

- 1. The test assistant will take away your test materials.
- 2. You will be asked to leave the test center.
- 3. Your instructor will be informed of your actions.
- 4. You may receive a zero on the exam.

Incomplete Grade

- 1. An incomplete grade may be granted in rare circumstances.
- 2. Incomplete work for a course must be completed by Friday of the first full week of the next term.
- 3. If incomplete work is not finished, the student will be assigned a grade of F.

CLINICAL LABORATORY REQUIREMENTS

- 1. Students must meet the criminal history background check and drug screen as outlined on the Clinical Laboratory Requirements page.
- Students are required to participate in all scheduled clinical laboratory learning experiences including agency specific orientations and learning activities related to (but not limited to) HIPAA, asepsis, infection and biohazard control and disposal of hazardous waste.
- 3. In the event a religious holiday falls on a clinical day, the student is responsible for making up the time.
- 4. Opportunities to make up absences are available by scheduling a clinical session with another clinical group.
- Students are responsible for making arrangements with the appropriate clinical instructor with whom they are making up the absence one week in advance of the desired experience. There is limited provision for clinical make-up the last week of each term.
- 6. When a student is unable to complete the required clinical laboratory experiences in the time provided, the student's situation will be reviewed by the respiratory therapy faculty in conjunction with the Dean of Science & Health Science to determine the feasibility of an incomplete.
- Students who miss more than two (2) clinical days will receive a grade of F. A student may not make up more than two (2) clinical days in any term.
- Only excused (instructors/staff have been notified) absences may be made up. Students who do not notify faculty/staff of their inability to attend clinical laboratory will receive a grade of F.

- 9. Faculty are authorized to exclude a student from participation in clinical laboratory sessions when the student is unprepared, when the student is tardy, when performance falls below a competent level, when patient safety is jeopardized, when the Fitness for Duty policy is violated, when the student does not meet agency health standards, for unprofessional behavior, or when the student does not comply with agency policies.
- 10. In the above situations, participation in clinical laboratory experiences will be discontinued until there is evidence that the student's progress meets the criteria for competent clinical performance.
- 11. If a student is deemed to be unsafe, the student will be excluded from clinical laboratory, may not self-drop, and will be assigned a grade of F.
 This is applicable at any time during a term. Behaviors that may result in immediate dismissal include, but are not limited to:
 - a) determination by the clinical faculty that the student is unsafe;
 - b) performing acts beyond the scope of respiratory therapy practice;
 - c) unauthorized use or distribution of equipment or drugs;
 - d) falsification or alteration of Agency documents;
 - e) client abuse, neglect, or abandonment;
 - f) felonious acts, including moral turpitude;
 - g) violation of ethical principles, resulting in harm to another;
 - h) violation of the Fitness for Duty policy.
- 12. If an agency refuses to allow a student to continue in clinical laboratory, the student will be assigned a grade of F and will fail the course.

- 13. Students who have been dismissed from the program may attend the rest of the classes in the course for which they are currently registered, if they so choose, but may not take examinations nor attend clinical laboratory.
- 14. Changes in the clinical schedule may have to be made during the term due to unanticipated conflicts, agency requests, etc.
- 15. All clinical scheduling is at the discretion of the Dean of Science & Health Science.

CLINICAL EVALUATION

Clinical evaluation is an educational as well as an evaluative process. A method, as objective as possible, will be used to evaluate clinical competence. Since self-discovery and growth are crucial to the process of learning, the evaluation tool will provide individuals with a method of assisting them to realistically appraise their strengths and weaknesses.

The clinical evaluation will:

- 1. be measurable,
- 2. demonstrate progression through the program,
- 3. reflect practice-based competencies,
- 4. encourage students to participate in the evaluation process.

The clinical evaluation tools focus on the achievement of competencies. The method of evaluation is identified in each course syllabus. Students are responsible for previously taught skills and components of a skill, e.g., asepsis, and for practicing in a manner that never jeopardizes patient safety. **Behaviors that jeopardize patient safety will result in clinical failure.** Each instructor will record weekly progress notes related to the competencies. Clinical laboratory is a learning as well as an evaluative situation. Students will be evaluated only after they have had an opportunity to practice the behavior.

COLLEGE LABORATORY REQUIREMENTS

- 1. Each respiratory therapy course includes learning experiences in the College laboratory that are designed to develop the student's competence in the performance of respiratory therapy skills.
- 2. After a period of practice, student performance of designated skills is assessed by college laboratory personnel.
- 3. Students must demonstrate a satisfactory level of performance for each skill in the college laboratory setting before clinical laboratory practice of the skill can be implemented.
- 4. Prior performance of a skill in the clinical setting does not excuse the student from college laboratory testing.
- 5. A record of individual student skill mastery is maintained in the College laboratory.
- 6. Mastery of technical skills for a particular unit will be completed prior to the scheduled unit test.
- Students who have not completed college laboratory requirements for a particular unit within the time frame designated in the respective course packet will not be allowed to participate in clinical laboratory.
- 8. It is the student's responsibility to notify the clinical instructor when skills testing is behind schedule.
- 9. If student fails a skill, student will schedule a meeting with faculty for remediation before re-testing out on skill.

COMPUTER LABORATORY REQUIREMENTS

1. The Health Science Institute computer lab is primarily for health science students. It is available for student use except if a class is scheduled to use the room. The key is available Monday through Friday, 9:00 a.m. to 4:30 p.m. in room MAS 120

- 2. Unprofessional behavior will result in the loss of the right to use the lab.
- 3. No food or drink is allowed at any time in the computer lab.

Voluntary Withdrawal

- 1. Students may withdraw by procedure according to College policy.
- 2. Students who voluntarily withdraw must notify their instructor.
- 3. Students who voluntarily withdraw after the College withdrawal date will be assigned a grade of F and will fail the course.

REMEDIATION/REFERRALS

- 1. Faculty are authorized to refer a student to a counselor as soon as a problem develops and for any violation of a policy, so that students can receive timely intervention.
- 2. It is the student's responsibility to contact a counselor for appropriate intervention as soon as the student is notified of a referral.
- 3. A laboratory assistant is available in the department lab to reinforce classroom instruction, facilitate study groups, and provide assistance related to equipment and technology.

READMISSION FOR DISMISSED STUDENTS

- 1. Students may only self-drop once from respiratory courses during the respiratory program.
- 2. Students who have been dismissed from the program due to classroom failure and who have withdrawn from the program may apply **once** for readmission.
- Students who are eligible for readmission must send a letter or email to the Health Science Administrator requesting readmission.

- 4. Students who have been assigned a grade of F (Unsatisfactory) because of clinical failure and who have been dismissed from the program may be readmitted **only** upon approval of the Dean of Science & Health Science after consultation with faculty and evaluation of the student's record.
- 5. Students who have been dismissed from the program and have been readmitted must repeat the entire course, including all components of the course.
- 6. Students who have been dismissed from the program and have been readmitted must repeat the entire course including all components of the course.
- 7. Students who have been dismissed may have their clinical placement determined by the Dean of the Health Science Institute.
- 8. Faculty may request validation of skills at any time.
- 9. All readmissions are contingent on the availability of space.
- 10. Students who are dismissed for violations of academic integrity are not eligible for readmission.

READMISSION FOR STUDENTS WHO VOLUNTARILY WITHDRAW

- 1. When a student postpones registering for a term or has voluntarily withdrawn from a course, the student must withdraw from the program.
- 2. Students who have voluntarily withdrawn from the program and who apply for readmission must request readmission in writing through the Health Science Institute administrator.
- 3. Students who have voluntarily withdrawn from a course and from the program and have been readmitted must repeat the entire course, including all components of the course.

- 4. Faculty may request validation of skills at any time.
- 5. Students who withdraw from the program for health reasons must present a health clearance.
- 6. All readmissions are contingent on the availability of space.

COMPLAINTS

- 1. If a student has a concern or a complaint they are encouraged to resolve those issues with the appropriate channels. Faculty believes that every attempt should be made to resolve complaints at the lowest level possible.
- 2. Faculty reserves the right to bring in another faculty member to a meeting discussing student concerns or complaints. Likewise, students may elect to invite a third party to listen during these meetings.
- 3. The Health Science Institute requests the following the chain of command sequence below when dealing with issues and concerns:

Chain of Command:

Classroom issue \rightarrow Course faculty \rightarrow Program Coordinator \rightarrow Department Chair \rightarrow Dean Health Science Institute Clinical issue \rightarrow Clinical faculty \rightarrow Course faculty \rightarrow Program Coordinator \rightarrow Department Chair \rightarrow Dean Health Science Institute College Lab issue \rightarrow Skills Lab personnel \rightarrow Laboratory Coordinator \rightarrow Course faculty \rightarrow Program Coordinator \rightarrow Department Chair \rightarrow Dean Health Science Institute

APPEAL PROCESS

1. Students who wish to explore problems that have not been resolved

to their satisfaction can initiate the appeal process.

- 2. Students who are in the appeal process may not attend clinical laboratory nor sit for any examinations until the appeal is resolved.
- 3. The College appeal policy is detailed in the College Student Handbook and on the College Website.

Appeal Process for Dismissal Due to Clinical Failure

A student who is dismissed from the respiratory therapy program because of unsafe clinical performance or failure to achieve clinical competencies at the indicated level may appeal the decision if he or she believes that the faculty member has inconsistently applied department policy or the faculty member has rendered a decision without considering all the pertinent facts. **The evaluation of the merit of these facts is solely within the clinical judgment of the faculty member.** Only the lack of consideration of facts is a reason for appeal.

The burden of proof is on the student, who must be prepared to substantiate his or her argument with information.

STUDENT GRADE APPEAL PROCESS

Suggestions for Students from Students and Faculty

The College appeal process is detailed in the College Student Handbook.

In order to begin the appeal process, you should first review the entire Grade Appeal Process. You'll be best prepared if you are aware of all steps in the process. Since this is a formal process, it is important that you keep copies of all records and activities relative to this appeal and be properly prepared to present your appeal. Below are suggestions from students and faculty to assist you in the process.

- Gather any pertinent data. This may include:
 - Course syllabus
 - Any addenda (such as handbooks) supplied by the faculty if applicable to the course
 - Copies of any/all tests, quizzes or papers in your possession which are relevant to your appeal
 - Copies of any/all notices and/or correspondence between you and the faculty member relevant to the grade in dispute.
- Organize your thoughts and write a list of reasons why you feel the appeal should be honored. Be factual. Have someone proofread your work. Please remember that an appeal is not a forum for personality disputes but for legitimate situations where there is a dispute.

SERVICE/WORK STUDY

Students are never primary instructors or instructors of record of record for any of the curriculum. Students shall not receive any form of remuneration for any work they perform as part of their clinical education.

FITNESS FOR DUTY POLICY

It is expected that students will come to class, college laboratory, and clinical laboratory in a condition fit for the competent and safe performance of their duties and that such a fit condition will be maintained throughout scheduled time. The objectives of this policy are to identify the impaired student and ensure safe, competent patient care and performance.

Faculty are held accountable for ensuring that students are fit for duty and for taking prompt, appropriate, and decisive action whenever a student appears to be impaired.

- 1. When a faculty member ascertains that a student is having performance problems and substance abuse is suspected, the instructor will:
 - a. Observe and document deficiencies in the student's performance.
 - b. Confront the student with specific observed indicators of the student's substandard performance. Examples of indicators may include but not be limited to:
 - i. Absenteeism and/or tardiness.
 - ii. Drowsiness or lassitude.
 - iii. Smell of alcohol on the breath/body.
 - iv. Inability to complete clinical assignments.
 - v. Slurred/incoherent speech or speech pattern different from normal speech.
 - vi. Unusual aggressive behavior (verbal/physical).
 - vii. Unexplained change in mood.
 - viii. Change in appearance.
 - ix. Lack of manual dexterity.

- x. Lack of or decreased coordination in body movement.
- xi. Inappropriate responses to stimuli verbal/non-verbal.
- xii. Unexplained work-related accident or injury.
- xiii. Inattentiveness to work.
- c. If the student's observed behavior or performance raises any questions about the student's fitness to perform the clinical assignment safely, the instructor will:
 - i. Stop the student's participation in clinical assignment immediately.
 - ii. Interview the student regarding observations and ask for an explanation.
 - Seek concurrence from a second health professional that the student is unfit for duty.
 - c. Concurrence of two health professionals will result in the student being sent home with a clinical absence.
 - d. If applicable, an arrangement will be made for someone to drive the student home. The student must leave the clinical environment.
 - e. Faculty will notify the Dean of Health Sciences as soon as practical that the student was removed from clinical for a suspicion of substance abuse
 - f. Schedule a meeting with student and Dean of Health Sciences to discuss behavior and/or signs of impairment; establish expectations and limits for future behavior of student.
 - g. Any student who withdraws or is dismissed from school in order to obtain treatment may re-apply to the program one time. The student must apply in writing to the Dean of Health Sciences. If the student qualifies for readmission, the student will be informed of any requirements which must be met in order to re-enter the

program and of special conditions which might be required.

- 2. If the student disputes the faculty finding of unfit for duty, he or she should request **immediate** drug/alcohol screening. The student is responsible for all costs associated with the screening. The student must agree to release the results of the screening to Brookdale Community College Dean of Health Sciences.
 - a. Any student with a positive screening will be dismissed from the program and referred for appropriate counselling.
 - b. If the results of the test indicate a negative test for alcohol or drugs, the student shall meet with the Dean of Health Sciences to discuss the circumstances surrounding the impaired clinical behavior. Based on the information presented during this meeting, the faculty in consultation with the Dean of Health Sciences, will make a decision regarding the student's return to the clinical setting. If returned to the clinical setting, the student must make-up any absences incurred.
- 3. If the student is in the classroom or other College property and is deemed unfit and/or using alcoholic beverages, illegal or un-prescribed controlled chemical substances the instructor will follow the steps outlined in the college-wide Student Conduct Code. The event will be reported to the Director of Conduct and/or Brookdale police. Students will be reported to the local authorities for any illegal activities.
- 4. Habitual impairment or unwillingness to seek treatment is cause for dismissal from the program without readmission.

HEALTH POLICY

A student who is injured or who has a health issue in clinical laboratory must immediately report the incident to the instructor, who will complete a clinical site incident report. If the injury occurs in a hospital, the student will be seen in the hospital emergency room at no expense to the hospital. The decision to send the student to the emergency room will be made by the instructor, but the student has the right to refuse care.

College incident reports and records related to clinical incidents will be released to the hospital, if requested, for use by the hospital in any legal or regulatory proceeding which may involve the College, the student, or the agency. If a student is injured in the College laboratory, an incident report must be submitted to the Dean of Science & Health Science.

The respiratory therapy program will include clinical work performed in hospitals and other facilities and will include direct care or exposure to clients with a variety of illnesses and diseases, including the handling of and/or contact with human body fluids. Therefore, students should understand that they may or will be exposed to disease-carrying bacteria and microorganisms and come in contact with patient situations that could be hazardous to individuals who are pregnant.

Students who have a latex allergy must inform their instructor at the beginning of each semester and are responsible for providing appropriate gloves if necessary. Students who have special physical or allergic needs must provide medical documentation. After hospitalization, surgery, or childbirth, students must submit medical clearance to the clinical instructor. Faculty may request medical clearance at any time from a student.

Post Exposure Blood and Body Fluid Procedure and Process

The primary means of preventing occupational exposure to HIV and other blood borne pathogens is in the strict adherence to infection control standards, with the assumption that the blood and other body fluids of all individuals is potentially infectious. The routine use of barrier precautions when anticipated contact with blood or body fluids, immediate washing of hands or other skin surfaces after contact with blood or body fluids, and careful handling/disposing of contaminated sharp instruments or other equipment during and after use is recommended. Student responsibilities include:

- Annual review of Infection Control/Blood borne Pathogens module on Learning Harbor.
- 2. Utilize appropriate barrier precautions during the administration of care to all individuals.
- Utilize appropriate safety devices for the handling/disposing of contaminated sharp instruments or other equipment.
- 4. Immediately report accidental exposure to blood or body fluids.
- 5. Initiate immediate intervention of the management of accidental exposure to blood or body fluids
 - a. Immediately wash the area with soap and water
 - b. Immediately report the incident to instructor and/or supervisory personnel
 - c. Complete appropriate documentation according to agency standards and provide a copy of the report to the Dean of Health Sciences. Another copy will be kept in the student's file.
 - d. Submit an Incident Report.
- 6. Decisions regarding post-exposure management, prophylaxis, and follow-up will be at the discretion of the individual and his/her health care provider.
- 7. The injured party will be financially responsible for treatment, prophylaxis and follow-up care resulting from the incident. Typically, an ED follow-up is not required unless emergency care is deemed necessary (i.e. sutures).

Post-Exposure Communicable Disease

In the event that a student is exposed to a reportable confirmed communicable disease during their clinical rotation, the student will be notified as being an individual who may have been in contact with the case during the infectious period of disease. Notification may come from either the college or the clinical agency's occupational health department. The student will receive post-exposure prophylaxis information. Decisions regarding post-exposure management and follow-up will be at the discretion of the individual and his/her health care provider.

Change in Health Status

1. In the event of a change of student's health status, or any change in functionality of the student in the clinical setting, the student must notify their clinical faculty member immediately.

2. In the event of a temporary condition which may limit mobility and/or dexterity (e.g. cast, crutches, wheelchair) the student may be asked to withdraw from the program until such condition is corrected. The program reserves the right to refuse students when the safety of patient care provided may be compromised.

3. Before being permitted to return to clinical, the student must submit, to their clinical instructor a statement from their health care provider stating the student is physically and mentally/emotionally able to provide care to patients without restrictions.

CHAPERONING POLICY

When students are performing procedures that are patient sensitive, the student should talk with the instructor to receive guidance and to determine if the presence of another individual is advisable. The instructor may, at any time and at his or her sole discretion, require that another individual be present during any patient interaction.

COLLEGE LABORATORY

- 1. Only authorized persons will be allowed in the laboratory.
- 2. Children are not allowed in the laboratory under any circumstances.
- 3. Students will be permitted to work in the laboratory only when an instructor is present.
- 4. All accidents, no matter how minor, **MUST** be reported to the instructor and an incident report filed and submitted to the Dean.
- 5. Eating, drinking, and smoking are not permitted in the laboratory.
- 6. The Centers for Disease Control guidelines MUST be followed at all times.
- 7. Hands must be washed thoroughly before leaving the laboratory.
- 8. Lab coats must be worn at all times in the College laboratory.
- 9. The College laboratory will be open daily for the testing and practicing of skills.
- 10. All skills included in the respiratory therapy curriculum must be tested and passed in the lab before they can be performed in the clinical area by the student.
- 11. Students must sign up in advance to be assessed but may use the lab for practice whenever it is open.
- 12. All testing (check-offs) must be done through the lab instructor.
- 13. Please notify the lab instructor at 732.224.2421 if a student is unable to keep a scheduled appointment, so other students may be scheduled.
- 14. Students more than ten minutes late for an appointment will forfeit their time.
- 15. Students who do not keep appointments will have lab

appointments scheduled for them by the lab instructor.

- 16. Students **MUST** have practiced a skill and be well prepared in the performance and theory of the procedure before signing up to do a check-off.
- 17. Each student is expected to put all equipment away and straighten up the work area after completion of an exercise, a practice session, or a check-off.
- 18. Practice of skills in the lab will include the use of mannequins along with instructional supplies appropriate to the skills.
- 19. Skill testing in the lab will be done as follows: The evaluator, using the appropriate check-off list, will observe the student performing the designated skill. Each item on the skill checklist will be marked off as whether observed or not observed and satisfactory or unsatisfactory. Questions may be asked as needed to assure the tester of the student's understanding of the procedure. No teaching will be done during an evaluation.
- 20. Students having serious difficulty finding time for the lab should apprise the lab instructor of this problem as soon as possible to avoid falling behind in their skills.
- 21. Students who do not dispose of needles and syringes in SHARPS CONTAINERS (per CDC guidelines) will be failed for that skill.
- 22. Students not testing may not interrupt instructors during a test nor observe another student testing.

UNIFORM POLICY

Students shall dress in a manner that will not jeopardize the safety of the patient or their professional relationship with the patient, e.g., hair must be off the shoulders and away from the face. Agency dress codes must be followed at all times.

The definition of patient safety is at the discretion of the instructor.

Examples of dress code violation include but are not limited to:

- Any body piercings.
- Body tattoos/painting that are visible.
- Artificial nails, acrylics, wraps, gels, or nail jewelry.
- Skirts shorter than three inches above the knee.
- Flip-flops.
- Lack of hosiery or socks.

The uniform consists of:

- Navy scrubs.
- White lab coat.
- White or black sneakers or comfortable shoes.
- Watch with second hand.
- Pen with blue and black ink.
- Stethoscope.
- Scissors.
- Small pocket notebook.
- Name pin (can be obtained from the College Store).

Students shall present a clean and neat appearance to both patients and colleagues. Your appearance reflects you, the College, and the agency. Students whose appearance does not meet the above parameters will be excluded from participation in Clinical Laboratory and must make up the missed time.

SOCIAL MEDIA POLICY

Students should use care when referring to their program on social networking sites. It is the students' responsibility to be aware of Federal and State laws regarding privacy and confidentiality of information. The faculty has adopted the Principles for Social Networking:

- 1. Students must not transmit or place online individually identifiable patient information.
- 2. Students must observe ethically prescribed professional patient boundaries.
- 3. Students should understand that patients, colleagues, institutions, and employers may view postings.
- 4. Students should take advantage of privacy settings and seek to separate personal and professional information online.
- 5. Students should bring content that could harm a patient's and/or coworkers' privacy, rights, or welfare to the attention of appropriate authorities.

6 Tips to Avoid Problems:

- 1. Remember that standards of professionalism are the same online as in any other circumstance.
- 2. Do not share or post information or photos gained through the patient relationship.
- 3. Maintain professional boundaries in the use of electronic media. On-line contact with patients blurs this boundary.
- 4. Do not make disparaging remarks about patients, employers, co-workers or clinical agencies, even if they are not identified.
- 5. Do not take any photos or videos or audio recordings in the clinical environment including the college lab setting.
- 6. Promptly report a breach of confidentiality or privacy.

Students who violate this social media policy do so at the risk of being subject to HIPAA procedure/guidelines and consequences, and do so at the risk of disciplinary action that can be course failure and/or dismissal from the program.

REGISTRATION

Each term, the primary clinical agencies scheduled for each respiratory therapy course will be identified on the bulletin board outside the Health Sciences office. Please do not use the Master Schedule to plan and register for the coming term. An accurate schedule will be posted on the Health Sciences office bulletin board. Experiences in other locations will be announced early in the term so that you may plan your schedules and transportation.

Registration for courses at Brookdale is based upon a priority system in which those students who have earned the most credits are given the earliest opportunity to register, and those who have earned the least number of credits are assigned to register last. The Respiratory Therapy Department abides by this policy. There is no system of priorities that could assure that each student would consistently be able to register for their first choice of clinical sections. No student may change sections after registration.

The Master Schedule identifies the time and location for classes throughout a term. However, this schedule may be adjusted during the first and last weeks of the course. The specific adjustments are posted and announced in advance. Generally though, students should plan to attend classes on campus during the first week of a term. The day identified as Orientation Day is frequently planned for course orientation and beginning instruction in the first unit of a course. During the first week of each term, clinical days may be scheduled for on-campus instruction. In some courses, there are no clinical experiences scheduled for the final week of the term. This time is set aside for students to make up clinical absences or deficiencies and for student/faculty clinical evaluation conferences and testing.

Clinical Scheduling

In planning clinical learning experiences for each respiratory therapy course, the faculty tries to assure that each student is scheduled for the clinical facilities that are most likely to provide a variety of learning situations appropriate to the unit or course content currently being studied. This is the primary consideration in scheduling your clinical experiences.

Because the faculty views scheduling you to be in the right place at the right time to be the priority, there will be occasions when temporary irregularities in your schedule are necessary. These irregularities are usually due to the interdependent relationship that we maintain among the courses in our own program and with other programs that use the same clinical facilities that we do. Another reason for irregularities in your clinical schedule is the fact that limitations in the size of student groups are imposed on us by the hospitals.

The changes that usually result from these factors may include temporary adjustments from a morning to an evening experience or a change from one agency to another for experiences in a particular setting, such as ICU. Occasionally, a temporary adjustment in the days/hours for which you are scheduled may also be necessary.

Given the above priorities and limitations with regard to your clinical schedule, you may be required to make infrequent adjustments. In most instances, you are informed of irregularities prior to registration, so that you can make necessary plans and adjustments in your personal schedule.

The approach to clinical scheduling described above has some limitations over which the faculty has very little control. In some agencies, patients are grouped on hospital units according to the medical specialty to which their pathology is related. Second-year students assigned to these agencies may be scheduled in a different hospital department for each unit of study in order to assure learning exposure to the appropriate type of patient. Although you will usually be scheduled in an optimum location to meet clinical objectives, the selection of actual learning experiences may be limited at a particular point in time. Clinical placement is subject to the discretion of the Dean of Science & Health Science.

Travel Requirements

Although the majority of clinical agencies used by the Respiratory Care program are located in Monmouth County, students should be prepared to travel outside of the county as well for clinical assignments. Students are responsible for travel to and from the clinical agencies and are required to provide their own transportation to clinical experiences.

EMAIL

Instructors can only respond to students' emails through either their Brookdale email address or through CANVAS. Brookdale uses Microsoft Office 365 as the email application for faculty, students, and staff. Students' email address is their username followed by @my.brookdalecc.edu (example jsmith2@my.Brookdalecc.edu). All official Brookdale email communications are sent to this account. Students are expected to access this account at least once per week.

PINNING

At the end of each year, the first-year students sponsor a pinning ceremony honoring the graduating class. In order to participate in the pinning ceremony, students must:

- a) have completed all program requirements or
- b) have completed all but seven (7) credits of the program requirements and be registered for the seven (7) credits of the next semester.

Pinning Guidelines

- 1. Pinning will be student sponsored and student centered.
- 2. Pinning will be held after class and clinical program requirements have been completed.
- 3. Faculty will attend as guests.
- 4. All aspects of pinning must be approved by the Dean of Science & Health Science.
- 5. Only funds earned by the students (and not allocated by the Student

Activities Board) may be used for pinning.

- 6. Pinning must follow the following format:
 - Processional
 - Invocation
 - Master of Ceremonies
 - Guest Speaker
 - Presentation of Pins
 - Farewell Address
 - Benediction
 - Recessional
- 7. A student will pin the first graduate, and that graduate will pin the succeeding graduate, etc.
- 8. The classes will appoint a chairperson and a committee to coordinate the pinning ceremony.

COMPLAINTS

If a student has a concern or a complaint, he/she should send a letter to the Director outlining the issues. A written response will be sent to the student within fifteen (15) working days. Students may also request a meeting with the Director should they wish to personally discuss their concerns. Students may also avail themselves of the Appeal Process explained in this handbook.

PROGRAM OUTCOMES

All program outcomes are available on the CoARC Website – http://www.coarc.com/47.html

ACCREDITATION

The Brookdale Community College Respiratory Therapy Program is accredited by the Commission on Accreditation for Respiratory Care (CoARC), www.coarc.com, 1248 Harwood Road, Bedford, Texas 76021-4244

GRADUATION

Students anticipating graduation must file a Candidacy for Graduation form when registering for the final term. In order to be eligible for graduation, the student MUST

HAVE COMPLETED 67 CREDITS as outlined in the College catalog.

Each student should anticipate the following approximate expenses for graduation:

- 1. School pin—range \$35 to \$180.
- 2. State board fees and expenses— Approximately \$350.
- 3. Review course—approximately \$200 (optional).

FACULTY

Faculty office hours are posted at individual faculty members' desks. Full-time faculty mailboxes are in the Health Sciences office. Messages and assignments can be left there.

Student clinical or classroom problems should be referred first to the individual faculty member with whom the student is working. Other resources include the course faculty, the Department Chair, and the Dean of the Health Science Institute.

LIBRARY

The Library is an invaluable tool for the wise student. Within the course objectives given to each student at the beginning of a term are listed learning experiences such as video tapes, sound film strips, reference material, periodicals, etc. These resources can be found in the Library. Those working in the Library are most anxious to help. Never be reluctant to ask for assistance. The Library is an invaluable and integral part of the program.

SELF-ASSESSMENT EXAMS

At the end of the third and fourth semesters, National Board for Respiratory Care (NBRC) self-assessment exams are administered. Completion of these exams is a program requirement. Test results are sent to the Program Director. These grades will be included in course grades.

LICENSURE

Graduates of the Brookdale Community College Associate Degree Respiratory Therapy Program are eligible to apply for state board licensure as a Respiratory Care Practitioner following satisfactory completion of the National Board for Respiratory Care (NBRC) examination. The graduate will sit for the NBRC entry-level examination following graduation. Successful completion of this exam awards the CRT credential, the New Jersey State license, and allows the graduate to sit for the NBRC's RRT (Register Respiratory Therapist) examination. This test is composed of a written portion and set of clinical simulations. Candidates must pass both the written and clinical simulation exams in order to become RRTs. Exam fees are as follows:

CRT exam	(approx.).	\$190.00
----------	------------	----------

RRT written exam (approx.) \$190.00

RRT clinical exam (approx.)...... \$200.00

Additional costs associated with licensure include:

Application fee	\$125.00
Initial license	\$45.00

Permanent license (two years)..... \$180.00

PROFESSIONAL ACTIVITIES

Respiratory therapy students are strongly encouraged to attend state and national conventions, respiratory care conferences, seminars, and workshops.

AARC CODE OF ETHICS

As healthcare professionals engaged in the performance of respiratory care, respiratory therapy practitioners must strive both individually and collectively to maintain the highest ethical standards and opinions publicly and privately.

The principles set forth in this document define the basic ethical and moral standards to which each member of the American Association for Respiratory Therapy should conform.

The respiratory care practitioner shall practice medically acceptable methods of treatment and shall not endeavor to extend his practice beyond his competence and the authority vested in him by the physician.

The respiratory care practitioner shall continually strive to increase and improve his knowledge and skill and render to each patient the full measure of his ability. All services shall be provided with respect to the dignity of the patient unrestricted by considerations of social or economic status, personal attributes, or the nature of health problems.

The respiratory care practitioner shall be responsible for the competent and efficient performance of his assigned duties and shall expose incompetence and illegal or unethical conduct of members of the profession.

The respiratory care practitioner shall hold in strict confidence all privileged information concerning the patient and refer all inquiries to the physician in charge of the patient's medical care.

The respiratory car practitioner shall not accept gratuities for preferential consideration of the patient. He shall not solicit patients for his personal gain and shall guard against conflicts of interest.

The respiratory care practitioner shall uphold the dignity and honor of the profession and abide by its ethical principles. He should be familiar with existing state and federal laws governing the practice of respiratory therapy and comply with those laws.

The respiratory care practitioner shall cooperate with other healthcare professionals and participate in activities to promote community and national efforts to meet the health needs of the public.

Reprinted by permission of the American Association for Respiratory Therapy, 1720 Regal Row, Dallas, TX 75235.

GROUP STUDY

A technique that many students with experience in the Brookdale Respiratory Therapy Program have found successful in preparing for tests is to meet for informal group discussions to cover the data that have been made available to them, e.g., classroom notes, tapes of lectures, and individual experiences.

Studying in Groups for Examinations and Other Purposes

Adapted from a paper written by Dr. Paul Kazmierski of the Reading and Study Clinic, Rochester Institute of Technology. Studying with several students can be a very effective use of time. The word "can" is emphasized because group study is often a waste of time due to engrossing bull sessions about irrelevant matters, or due to a lack of adequate preparation.

When done properly, group sessions have many advantages. First, students are motivated to study before coming to the meetings because they do not like to appear uninformed in front of their friends. Second, they require the student to express himself aloud to others, a situation that often points up a lack of understanding where he thought he had adequate understanding. Third, having to explain something to others is an excellent reinforcement of learning; many people have said that they never really understood something until they were forced to explain it to someone else. Fourth, such participation corrects misconceptions and fills in gaps of knowledge. Fifth, hearing what others have to say offers a new slant on the material.

Let us consider some specific suggestions regarding the structure of group study sessions. Each group, of course, should make their own adaptations when applying these suggestions. Assume, therefore, that five students meet together to study chemistry. Also assume that all five have studied previously and have kept reasonably good lecture notes. Just to make the numbers come out easily, assume that the coming examination covers five chapters of reading and ten class meetings.

Step 1: Person A begins by looking over his lecture notes from the first two class meetings. He then asks a question, based on his notes and the course learning objectives, and selects any other person in the group to answer—the question is stated before the choice of person is made. Person A either agrees with the answer or calls on someone else to give the correct response. This continues for 15 minutes.

Step 2: Person B continues the process, drawing from his notes of the next two lectures. Persons C, D, and E take their turns leading the group. Step 3: After 75 minutes of this, allowing each of the five participants a fair turn, the session is suspended for a 15-minute break.

Step 4: After the break, someone, perhaps Person A, repeats the same approach using the textbook. The group might wish to spend a little more time on the book, since the book usually contains much more content than the lectures. Of course, if the instructor and/or learning program says the exam will be based solely on the book, the group might wish to begin with the textbook and shift to the lecture notes only for a few final minutes. Many variations of this approach are possible, depending on the nature of the course and the anticipated nature of the examination.

Some groups add a little incentive by imposing a fine each time a member misses a question. The proceeds then go towards buying refreshments for the evening.

Group study need not be restricted to the week immediately prior to the examination. Such a group might meet every week or every other week throughout the term. The personal opinion of the author is that group study sessions, when properly used, offer participants an immense advantage both on subsequent tests and in understanding and remembering the course content.

SCHOOL CLOSINGS

When severe weather/emergency warrants delayed openings or closing of the College, announcements will be made on the Brookdale Public Radio Station WBJB-FM 90.5 or WJLK 1310-AM/90.3 and on the college website. Students are strongly encouraged to subscribe to the RAVE alert system which provides text messages related to Brookdale's closing. Students should update their mobile phone number and mobile carrier by clicking on the WebAdvisor icon from the "MyBrookdale" link on the home page.

ILLNESS

If, in the event of illness, you are unable to attend clinical experience, you are expected to notify the instructor and the hospital that morning and leave a message with the Respiratory Therapy Department. Please give your name, identify yourself as a Brookdale student, and state that you will be absent that day. You must also leave a message in the faculty office by calling 732.224.2606.

CentraState Medical Center: 732.431.2000

Community Medical Center: 732.240.8086

Jersey Shore University Medical Center: 732.775.5500

Kimball Medical Center: 732.363.1900

Monmouth Medical Center: 732.222.5200

Riverview Medical Center: 732.741.2700

BULLETIN BOARDS

Bulletin boards are located outside the Health Sciences and Respiratory Therapy faculty offices. Here one finds:

- 1. Notices.
- 2. Schedule changes.
- 3. General Brookdale information.

DIRECTIONS

CentraState Medical Center

Highway 537, southwest of Freehold

From Route 33, make a left on Highway 537 (West Main Street), and travel one mile. The hospital is on the right.

From Route 9, travel north on Highway 537 (West Main Street), and travel approximately one mile. The hospital is on the right.

From the northern shore area, take Highway 537 west through the Freehold business district, then see directions above.

Community Medical Center

Route 37, Toms River

Take the Garden State Parkway south to exit 82A, Route 37 west. Take the first jug handle to Hospital Drive. Cross the highway, and the medical center will be on your left. Proceed one block to the main entrance. The visitors' parking garage will be on your right after turning into the hospital entrance.

Deborah Heart and Lung

200 Trenton Road, Browns Mill

Take the Garden State Parkway to Route 70 west. Proceed on Route 70 west for approximately 19 miles. Look for a sign on the right-hand side for McGuire Air Force Base and Fort Dix. Bear right at sign onto Route 530 west. Proceed on Route 530 west for approximately 6 miles to a Y intersection (Shell gas and McDonald's). At this intersection, bear right. Proceed approximately ½ mile through next intersection. Hospital is on the right-hand side.

Jersey Shore University Medical Center

Route 33, Neptune

From the north, take the Garden State Parkway to exit 100B. Take Route 33 (Corlies Avenue) east for approximately 3 miles. Jersey Shore University Medical Center is on your left.

From the south, take the Garden State Parkway north to exit 100. Take Route 33 (Corlies Avenue) east approximately 3 miles. Jersey Shore University Medical Center is on your left.

From the west, take the New Jersey Turnpike to exit 7A (Shore Points). Follow Interstate 195 east until it becomes Route 138. Follow signs for the exit for Route 18 north to the Neptune/Route 33 East exit. Take Route 33 (Corlies Avenue) east approximately 1 mile. Jersey Shore University Medical Center is on your left.

Locally, Jersey Shore University Medical Center is easily accessible from routes 33, 35, 9, 70, and 18.

Jersey Shore Nursing and Rehabilitation

Route 35, Eatontown

From the north, take the Garden State Parkway south to exit 105. Exit onto Route 36 east. Follow to Route 35 south to jug handle for Industrial Way East. Jersey Shore Nursing and Rehabilitation is located directly across from the Sheraton Hotel.

From the south, take the Garden State Parkway to exit 105. Exit onto Route 36 east. Follow to Route 35 south to jug handle for Industrial Way East. Jersey Shore Nursing and Rehabilitation is located directly across from the Sheraton Hotel.

From the west, take Route 195 east to Route 18 north to the Deal Road East exit. Stay on Deal Road for one mile and take the jug handle for Route 35. Follow Route 35 for one mile and turn right at Industrial Way East. Jersey Shore Nursing and Rehabilitation is located directly across from the Sheraton Hotel.

Monmouth Medical Center

In the triangular area created by Westwood, Bath, and Second avenues, Long Branch

From Highway 36 east, make a right on Broadway just east of Shore Regional High School. Proceed on Broadway to Second Avenue. Proceed for approximately 1 mile.

From Highway 71 to Monmouth College, make a right on Cedar Avenue, then a left at Second Avenue. Proceed for approximately 1 mile.

From Ocean Avenue, travel north on Ocean to Brighton, and make a left. Then make a right on Second Avenue to Bath. Make a left on Bath and then the first right at the first intersection.

Ocean Medical Center

Jack Martin Boulevard, Brick

From exit 91 of the Garden State Parkway, take the right fork after the toll booth. Continue to the third traffic light (Highway 88). Turn left onto Highway 88 and proceed to the next traffic light (Jack Martin Boulevard). Turn left onto Jack Martin Boulevard, and go approximately 1 mile. Hospital is on the right.

Riverview Medical Center

Union Street, Red Bank

Via Route 35, proceed north on Broad Street to the downtown business district. Make a right onto Front Street and make the second left. Riverview will be right in front of you.

HISTORY OF THE PROGRAM

HISTORY OF THE BROOKDALE RESPIRATORY THERAPY PROGRAM

HISTORICAL NARRATIVE

Brookdale Community College was established as part of a statewide network of 19 county colleges in New Jersey. It opened its doors to students on September 29, 1969. The main campus is in Lincroft on the site of the Brookdale Farm, where, in 1915, Kentucky Derby winner Regret was bred. Many College buildings were adapted from the original barns and other existing farm structures.

The 220-acre main campus comprises 22 buildings totaling approximately 8,000,000 square feet. It is fully networked and boasts a state-of-the-art library with an Information Commons. Its \$80 million operating budget is financed by the county, by the state, and by tuition. As a comprehensive community college, BCC offers over 50 associate degree programs and more than 20 certificate options. Current enrollment is over 13,000 full and part-time students.

In 1969 Brookdale was granted correspondent status by the Middle States Association of Colleges and Schools. It received full accreditation in 1972. This accreditation was reaffirmed in 1979, 1989 and 1999.

The Respiratory Therapy Program was initiated in 1971. Its genesis was facilitated, in part, by a large number of technicians with on-the-job training seeking a degree. The first curriculum was written by Craig Scanlan and was based on Tyler's Behavioral model and the Dreyfuss Skills Acquisition Model. Initial specialized accreditation was granted in 1973.

Early in the program an advisory committee was established to provide community input. Individuals from health care agencies that provided clinical experiences for students served on the committee and provided professional input regarding program matters. Today, over 20 health care professionals hold appointments to this committee, which continues to provide a forum for creative, dynamic discussion and an arena for serious deliberation regarding curriculum issues.

In 1989, a total program revision was initiated based on an assessment model. Program outcomes derived from the philosophy were written and threaded through the curriculum. These outcomes, which included learning outcomes, have been assessed on an annual basis since then, with annual faculty reporting on curriculum changes made each year as a result of this assessment. Rehabilitation, home care and issues in respiratory therapy (RESP 265) were also integrated into the new curriculum. New instructional approaches were designed and implemented that fostered critical thinking.

In 1991, licensure was implemented in the state of New Jersey, strengthening the professional status of respiratory therapy. After a short grandfathering period, successful completion of the NBRC entry-level examination was required for licensure and practice. At that time content about licensure was integrated into the issues course (RESP 265).

During the last decade of the last century, a number of content changes were implemented to ensure the curriculum remained current. In the early nineties, a pediatric critical care course was developed and added to the curriculum. Toward the end of this decade, a sub-acute respiratory care course was introduced, which addressed the expanded the role of the respiratory therapist outside of the acute-care arena. Additional content added to the curriculum during the late nineties included content on sleep disorders, rehabilitation, and long term sub-acute-care experiences. Clinical laboratory experiences have been expanded into the adjoining county.

The program enjoys rich opportunities for students' clinical experiences in over eight acute-care facilities as well as long-term care and home care facilities. Hospital personnel are welcoming of the students and provide strong role modeling and enthusiastic support for the program.

After two decades of strong enrollment, in 1995 the applicant pool decreased considerably and classes were not filled to normal capacity of 24 for the next nine years. In September 2004, after nearly a decade of low enrollment, a full class was admitted, and a full class was subsequently enrolled in September 2005.

Advisory Committee input, graduate surveys and employer surveys indicate that graduates are well prepared for entry-level practice. The program has been well supported by the College, and the health care community has indicated its importance to staffing Monmouth County health care agencies.

STUDENT POLICY CONTRACTS

RESPIRATORY THERAPY STUDENT HANDBOOK WAIVER

I hereby certify that I have read each page of the Brookdale *Respiratory Therapy Student Handbook*, that I am fully familiar with the contents of this document, and that I fully understand and have agreed to its terms and provisions. Any questions that I have about the Respiratory Therapy Program and the contents of the Brookdale *Respiratory Therapy Student Handbook* have been fully explained to my satisfaction.

NAME

SIGNATURE _____

DATE _____

INFORMED CONSENT

I understand that the Respiratory Therapy Program will include academic, laboratory, and clinical work performed in the classroom, laboratory, hospital, and other clinical facilities and will include direct care or exposure to clients with a variety of illnesses and diseases and will include the handling of and/or contact with human bodily fluids and tissues. I therefore understand that I may or will be exposed to disease carrying bacteria and microorganisms.

In consideration of being permitted to participate in the Brookdale Community College Respiratory Therapy Program, I, the undersigned, in full recognition and appreciation of the dangers and hazards inherent in the health care field and in particular in the medical facilities where I may be present during my participation in the program, do hereby agree to assume all the risks and responsibilities surrounding my participation in this program or any independent activities undertaken as an adjunct thereto; and, further, I do for myself, my heirs, and personal representative hereby agree to defend, hold harmless, indemnify, and release, and forever discharge Brookdale Community College and any and all of its officers, agents and employees from and against any and all claims, demands, and actions, or causes of action, on account of damage to personal property, or personal injury, disease, or death which may result to me from my participation in this program and my exposure to the risks inherent in the program.

NAME______SIGNATURE_____

DATE _____

FITNESS FOR DUTY CONTRACT

The Brookdale Community College Respiratory Therapy Program has a Fitness-for-Duty Policy. This policy is concerned with performance problems related to substance use (drugs, including alcohol) and the documentation of the same on the permanent health record. Students are required to adhere to this policy: Noncompliance with the policy will result in a diagnostic evaluation including supervised blood alcohol levels, urine studies, and referral for treatment, and may result in dismissal from the Respiratory Therapy Program.

NAME _____

SIGNATURE_____

DATE ______

EXAMINATION CONFIDENTIALITY

I understand that the contents of all examinations are confidential. I agree that I will not share any information related to any examinations nor will I receive any information related to examinations from any individual. Any violation of confidentiality may result in dismissal from the Respiratory Therapy Program.

NAME_____

SIGNATURE_____

DATE _____

BE A PART OF THE	AARC Now!
AC Your Membership	Makes A Difference

ACTIVE MEMBER

An individual is eligible if he/she lives in the U.S. or its territories or was an Active Member prior to moving outside its borders or territories, and meets ONE of the following criteria: (1) is legally credentialed as a respiratory care professional if employed in a state that mandates such. OR (2) is a graduate of an accredited educational program in respiratory care, OR (3) holds a credential issued by the NBRC.

ASSOCIATE OR SPECIAL MEMBER

Individuals who hold a position related to respiratory care but do not meet the requirements of Active Member shall be Associate Members They have all the rights and benefits of the Association except to hold office, vote, or serve as chair of a standing committee. The following subclasses of Associate Membership are available: Foreign, Physician, and Industrial (individuals whose primary occupation is directly or indirectly devoted to the manufacture, sale, or distribution of respiratory care equipment or supplies). Special Members are those not working in a respiratory care-related field.

STUDENT MEMBER

Individuals will be classified as Student Members if they meet all the requirements for Associate Membership and are enrolled in an educational program in respiratory care accredited by, or in the process of seeking accreditation from, an AARC-recognized agency



Membership Application

	the dassifications to the left, then complete the form. All lere indicated as optional. See side 2 for more information on side 2 and type or print clearly. Processing of
You may apply or renew instantly on-line by go	ping to https://secure.aarc.org/membership/
🗆 Active 🛛 Associate (Foreign) 🗌 Associate (Physician)	🗆 Associate (Industrial) 🗌 Special 🔲 Student
Last Name	First Name
Social Security No. (last four digits only)	Home Address
Сіу	State Zip
Phone No. ()	Email Address
Your AARC dues includes membership in your state society. A por You are automatically assigned to a state society based on your h please indicate which state that is here:	orme address. If you wish to be assigned to a different state society,
Work Information: Place of Employment	
Address	City
State Zip	_ Phone No. ()
Preferred Fax No.()	Preferred Email Address
Preferred Mailing Address: 🛛 Home 🗌 Business Have you ever been or are you currenlly in the military? 🔲 Y	
For Student Member (Required)	
School/RC Program	Address
	State Zip
Phone No. ()	Provide the second seco
Expected Date of Graduation Month Year	
Expected Date of Graduation MonthYear Please answer these questions to help us design services and pro Primary Job Responsibility (check one only) Clinical Specialist Director of Clinical Education Diagnostic Technologist Instructor/Faculty/Professor Marketing Nurse Program Director Patient Educator	
Expected Date of Graduation MonthYear Please answer these questions to help us design services and pro Primary Job Responsibility (check one only) Clinical Specialist Director of Clinical Education Diagnostic Technologist Instructor/Faculty/Professor Marketing Nurse Program Director Patient Educator Sales Supervisor/Coordinator	grams that meet your needs.[Optional] Director Disease Manager Medical Director Manager Owner Other Pulmonary Function Technologist Product Management
Expected Date of Graduation MonthYear Please answer these questions to help us design services and proprimary Job Responsibility (check one only) Clinical Specialist Clinical Specialist Director of Clinical Education Diagnostic Technologist Instructor/Faculty/Professor Marketing Nurse Program Director Patient Educator Staff Therapist Student Type of Business DME/HME DME/HME Educational Institution Manufacturer/Distributor/Pharma Military Physician's Office Skilled Nursing Facility	
Expected Date of Graduation MonthYear Please answer these questions to help us design services and pro Primary Job Responsibility (check one only) Clinical Specialis Director of Clinical Education Diagnostic Technologist Instructor/Faculty/Professor Marketing Nurse Program Director Patient Educator Sales Supervisor/Coordinator Staff Therapist Student Type of Business DME/HME DME/HME Educational Institution Manufacturer/Distributor/Pharma Military Physician's Office Skilled Nursing Facility Student Temp Check the Highest Degree Earned MBA PhD EdD DHSc MA BSRT BSRC BS	Agrams that meet your needs.[Optional] Director Madical Director Madical Director Madical Director Owner Other Pulmonary Function Technologist Sleep Technologist/Polysomnographer Sleep Technologist/Polysomnographer Home Health Agency Home Health Agency Home Health Agency Sleep Lab Free Standing Other Sleep Lab Hospital Based Outpatient Facility S MHA MHS MPA MPH MSEd MSN
Expected Date of Graduation MonthYear Please answer these questions to help us design services and pro Primary Job Responsibility (check one only) Clinical Specialis Director of Clinical Education Diagnostic Technologist Instructor/Faculty/Professor Marketing Nurse Program Director Patient Educator Sales Supervisor/Coordinator Staff Therapist Student Type of Business DME/HME DME/HME Educational Institution Manufacturer/Distributor/Pharma Military Physician's Office Skilled Nursing Facility Student Temp Check the Highest Degree Earned MBA PhD EdD DHSc MA BSRT BSRC BS	Agrams that meet your needs.(Optional) Director Medical Director Medical Director Manager Other Other Disease Manager Manager Other Other Sleep Technologist/Polysomnographer Sleep Technologist/Specialist Home Health Agency Long Term Acute Care/Rehab Other Sleep Lab Free Standing Outpatient Facility S MHA MHS MPA MPH MSEd MSN SEd BSN BA AAS AS AS
Expected Date of Graduation MonthYear Please answer these questions to help us design services and pro Primary Job Responsibility (check one only) Clinical Specialits Director of Clinical Education Diagnostic Technologist Instructor/Faculty/Professor Marketing Nurse Program Director Patient Educator Sales Supervisor/Coordinator Staff Therapist Student Type of Business Educational Institution Manufacturer/Distributor/Pharma Military Physician's Office Skilled Nursing Facility Student Temp Check the Highest Degree Earned MBA PhD EdD DHSc MEd MBA MA BSRT BSRC BS BHS BS	
Expected Date of Graduation MonthYear Please answer these questions to help us design services and properties of the properise of the properties of the properties of the properties of the p	
Expected Date of Graduation MonthYear Please answer these questions to help us design services and properties of the properise of the properties of the properties of the properties of the p	Agrams that meet your needs.[Optional] Agrams that meet your needs.[Optional] Director Medical Dir

AARC AN EXCELLENT INVESTMENT

Membership has many personal and professional benefits. The potential savings from

these benefits go well beyond the cost of AARC membership, only a quarter a day!

PLEASE SIGN

I hereby apply for membership in the American Association for Respiratory Care. If approved for membership in the AARC, I will abide by its bylaws and professional code of ethics. I authorize investigation of all statements contained herein and understand that misrepresentations or omissions of facts called for is cause for rejection or expulsion.

A yearly subscription to RESPIRATORY CARE journal and AARC Times magazine includes an allocation of \$11.50 from my dues for each of these publications.

NOTE: Contributions or gifts to the AARC are not tax deductible as charitable contributions for income tax purposes. However, they may be tax deductible as ordinary and necessary business expenses subject to restrictions imposed as a result of Association lobbying activities. The AARC estimates that the nondeductible portion of your dues — the portion which is allocable to lobbying — is 20%.

eauchble portion of your dues the portion which is allocable to tobbying is 20%.
Signature Date
You may apply or renew instantly on-line by going to https://secure.aarc.org/membership/
Membership Fees (U.S. dollars only) Payment must accompany your application to the AARC. Fees are for 12 months. These fees contain the \$12.50 new members processing fe Renewing members (except students) can deduct \$12.50.
Choose One Level of Membership
AARC PRINT MEMBERSHIP (Receive both AARC Times magazine and RESPIRATORY CARE journal) Active \$102.50 Associate (Industrial or Physician) \$102.50 Associate (Foreign) \$137.50 Special \$102.50 Student \$50.00 VALUE! AARC PRINT MULTI-YEAR MEMBERSHIP Active or Associate (U.S. only) or Special fort 2 years \$170 or 3 years \$24
Or
AARC 1+1 MEMBERSHIP (Choose one publication) I want AARC Times magazine or RESPIRATORY CARE journal Active \$96.75 Associate (Industrial or Physician) \$96.75 Associate (Foreign) \$117.50 Special \$96.75 Or
AARC DIGITAL MEMBERSHIP (All publications and other special benefits)
□ Active \$91.00 □ Associate (Industrial or Physician) \$91.00 □ Associate (Foreign) \$102.50 □ Special \$91.00
PLUS UPGRADE 🛛 \$35.00 per year (Includes one free specialty section – please mark your choice below.)
Specialty Sections (Open to all members) E-mail address is required. Membership in AARC Specially Sections connects you to others who practice in your area of respiratory care through an electronic mailing list, monthly ENewsletters, quarterly Section EBulletins, and an information-rich Specialty Section website. Programs created by specially section members are integral to the AARC Summer Forum and AARC Congress.
Adult Acute Care Section \$15.00 Education Section \$20.00 Neonatal-Pediatric Section \$15.00 Diagnostics Section \$15.00 Management Section \$20.00 Transport Section \$15.00 Long-Term Care Section \$15.00 Home Care Section \$15.00 Continuing Care Rehabilitation Section \$15.00 \$15.00 Sleep Section \$15.00 Home Care Section \$15.00
Continuing Care Rehabilitation Section \$15.00 Voluntary PAC Contribution \$
* AARCPAC is a separate aggregated fund. Yoluntary political contributions by individuals should be written an personal checks. Contributions from corporations are illegal and cannot be accepted. The AAR will not favor or disadvantage anyone based upon the amounts of or refusal be make AARCPAC contributions. Contributions to a political action committee are not deductible for federal income tax purposes. ** American Respiratory Care Foundation (ARCF) is a not-for-profit organization formed for the purpose of supporting research, education, and charitable activities in respiratory care. Contributions to the ARCF are tax deductible.
Payment Information
Enclosed is a check for the membership fee I selected plus any specialty section fees plus any contributions to AARCPAC or ARCF for the total amount of
\$ Please make checks payable to the AARC.
Please charge my dues to: 🗆 MasterCard 🗆 Visa 🗆 American Express
Card Number Card Expires Signature
Send this application and fees to: American Association for Respiratory Care 9425 N. MacArthur Blvd., Suite 100, Irving, TX 75063-4706 (if using a credit card) or P.O. Box 650097, Dallas, TX 75265-0097 (if sending a check) Fax: 972-484-2720 • Phone: 972-243-2272
THANKS FOR BEING PART OF THE TEAM
Revised July 2013

Brookdale Community College empowers a diverse community by providing open access to high-quality and cost-effective educational and lifelong learning options with clear paths to personal, educational, and economic success. (Recommended by Collegial Governance in fall 2017; Approved by Board of Trustees on October 17, 2017).