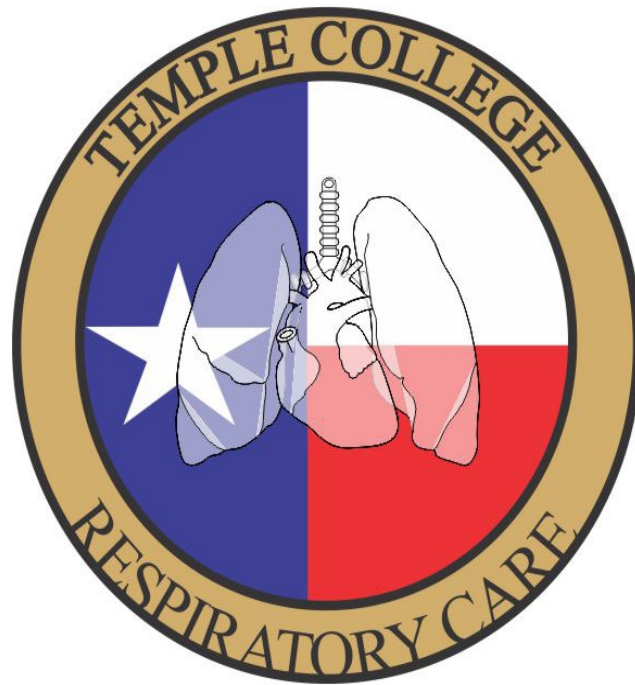


**TEMPLE COLLEGE
DIVISION OF HEALTH PROFESSIONS
DEPARTMENT OF RESPIRATORY CARE**



***STUDENT
HANDBOOK***

2024-2025

UPDATED 05/01/2024

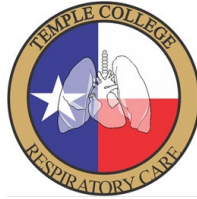
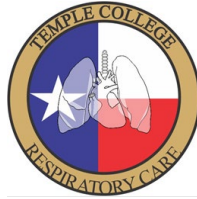
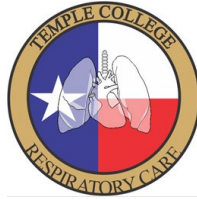


TABLE OF CONTENTS

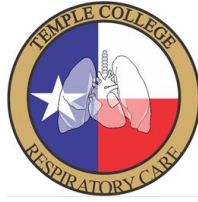
INTRODUCTION	5
PURPOSE	6
DEPARTMENTAL HISTORY	6
DEPARTMENTAL PHILOSOPHY	7
ACCREDITATION	8
TECHNICAL STANDARDS	9
PURPOSE	9
AARC Statement of Ethics and Professional Conduct	11
AARC Respiratory Care Scope of Practice	12
RESPIRATORY CARE SCOPE OF PRACTICE	13
ADMISSION REQUIRMENTS	14
TRANSFER STUDENTS	16
EQUAL EDUCATIONAL OPPORTUNITY	17
SEXUAL HARASSMENT	17
TITLE IX	17
MENTAL HEALTH COUNSELING	17
DEPARTMENTAL GOALS	18
https://catalog.templejc.edu/content.php?catoid=25&navoid=1028	18
FOR APPROXIMATE COSTS	18
REFER TO THE TEMPLE COLLEGE ONLINE CATALOG	18
https://catalog.templejc.edu/content.php?catoid=25&navoid=1005	18
SCHOLASTIC REQUIREMENTS	18
CLASSROOM/LABORATORY ATTENDANCE POLICY	19
MAKE-UP EXAM POLICY	20
WEATHER	20
CLASS ASSIGNMENT POLICY	20



CLINICAL SIMULATION CENTER - STUDENT USERS	21
PRE-CLINICAL REQUIREMENTS.....	22
REMEDIATION POLICY	24
CRIMINAL BACKGROUND CHECK REQUIREMENTS.....	26
CRIMINAL BACKGROUND CHECKS AND DRUG SCREENS.....	27
CHANGE IN HEALTH CONDITION	29
GRADUATION REQUIREMENTS.....	29
PROGRAM GRADUATION REQUIREMENTS	29
CLINICAL PERFORMANCE EVALUATIONS.....	30
CLINICAL ROTATIONS.....	31
ADDITIONAL PROGRAM EXPENSES	32
PRE-GRADUATION EXPENSES.....	34
POST GRADUATION EXPENSES	34
ATTENDANCE POLICY FOR CLINICAL COURSES.....	34
CLINICAL INSTRUCTOR / ROTATION SITE PHONE NUMBERS	36
COMPLIANCE WITH HIPAA PRIVACY	38
WHAT ARE WE PROTECTING?	38
HOW DO WE LEGALLY USE PHI?	39
HIPAA PRIVACY RULE REQUIREMENTS.....	39
USES AND DISCLOSURES OF PROTECTED HEALTH INFORMATION	41
THE FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT (FERPA).....	41
STUDENT DISMISSAL POLICY	43
ACADEMIC ADVISING	43
ACADEMIC INTEGRITY	44
TEMPLE COLLEGE SUBSTANCE ABUSE PREVENTION POLICY.....	45
CAMPUS AND CLINICAL PARKING	45
ACCOMMODATIONS.....	45
PERSONAL PROTECTIVE EQUIPMENT	46
WORKPLACE PRACTICES.....	46



EDUCATION	47
HEALTH AND SAFETY	47
SCHOOL RELATED ACCIDENTS AND INCIDENT REPORTS RULES	47
PROCEDURE FOR ACCIDENT/INCIDENT REPORTING	48
GRIEVANCE PROCEDURES	49
PURPOSE AND SCOPE:	49
INTERPRETATION OF COVERAGE:	49
PROFESSIONAL ORGANIZATIONS	49
STUDENT EMPLOYMENT	50
STUDENT CONDUCT IN LEARNING ENVIRONMENTS	50
SUMMARY	51
PEOPLE ASSOCIATED WITH THE PROGRAM	52
ADVISORY COMMITTEE	54
ACKNOWLEDGEMENTS	56
RECEIPT OF DRUG/ALCOHOL ABUSE POLICY	56
STUDENT CLINICAL PERSONAL INFORMATION RELEASE AUTHORIZATION FORM	57
SOCIAL MEDIA POLICY	58
DEFINITIONS:	58
POLICY STATEMENTS:	59
TESTING POLICY	62
HEALTH STATUS RELEASE FORM	63
DECLINE OF MEDICAL TREATMENT	64
STUDENT ACKNOWLEDGMENT AND UNDERSTANDING BACKGROUND CHECK/DRUG/ALCOHOL SCREENING	65
PROTECTED HEALTH INFORMATION, CONFIDENTIALITY, AND SECURITY AGREEMENT	66
TEMPLE COLLEGE	68
DEPARTMENT OF RESPIRATORY CARE	68



DEPARTMENT OF RESPIRATORY CARE

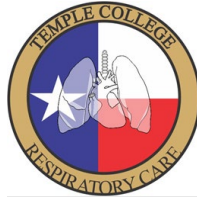
INTRODUCTION

The Respiratory Care Program is sponsored by the Department of Respiratory Care at Temple College. Education in respiratory care is challenging and also very rewarding. Working in an allied health profession requires a great deal of personal discipline and a commitment to personal growth and development of a professional image. The knowledge and skill base which is essential for a student to progress from being a non-healthcare person to one who is functional in such a setting benefits the student along with the patient, their family and the whole healthcare system. Since respiratory care is an essential part of medicine, the respiratory care practitioner's role on the health care team is vital. Temple College has developed this program based on the need for competent practitioners in the field. The program is designed such that cognitive learning, skill development and appropriate behaviors are learned and reinforced by a diverse classroom, laboratory, and simulation experiences. Complementing these activities is a broad base of extensive clinical practice, allowing hands-on work in our various clinical affiliates. Respiratory Care practice competencies begin in the Clinical Simulation Center and are sharpened through actual hospital experience.

Many disciplines need to be cultivated in a respiratory care student:

- Actively engage in the education process.
- Be responsible for one's own actions.
- Consistently perform to the limit of one's abilities.
- Adhere to the standards of professional ethics.
- Recognize the patient as the first priority.
- Follow program guidelines as outlined in this manual and other official sources, as appropriate.
- Be respectful and civil in all interactions with instructors, classmates, healthcare personnel, and healthcare consumers.

Finally, it is vitally important that study activities are done with focus, intensity, and consistency. All of the course work builds on itself, and whatever is learned the first semester will be expected to be retained, refined and added to by the program's end.



PURPOSE

The purpose of the manual is to help with understanding details about the program and be informative regarding important facets that impact students as they matriculate through the program. It is important to understand Departmental policies that apply to students in various phases of the curriculum.

There may be times when changes are made. These are to be expected. Any organization will find it necessary to make changes as conditions arise and situations warrant. Suggestions for improvements are always encouraged.

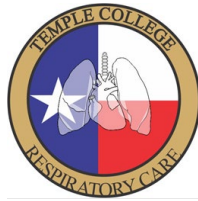
It is hoped, that each student develops a standard of excellence that both the individual and the Program are proud of with the goal of improving patient care. Students should strive to become as competent as possible in the limited time, 21 months, of intense study afford. There is much to learn and many skills to master before program completion. It is hoped that this manual will assist students in making a satisfactory adjustment to their chosen career.

This manual will be discussed during various orientation sessions at various points in the curriculum. Please direct questions to an instructor in class or if the topic seems too sensitive or confidentiality is a concern, then contact an instructor and the matter(s) may be discussed in private. At times it is possible that policy violations may be serious enough to jeopardize a student's position in the program, so please take heed and become familiar with the contents of this manual.

The department reserves the right to bar enrollment/re-enrollment of a student in the program if policy violations warrant; however, this may or may not affect enrollment in other TC courses. Finally, everyone should keep in mind that the contents of the manual are and will not be discriminatory to any protected class. Extraordinary circumstances may develop that require the alteration of a rule or rules. This will be determined as a given situation warrants. The program faculty and college administration will make the determination in such circumstances.

DEPARTMENTAL HISTORY

The Respiratory Therapy Program was organized in the Fall of 1972, with initial funding provided by the Central Texas Regional Education Foundation. Later that Fall, approval was sought by the College from the Texas State Coordinating Board and in January 1973, formal recognition was sought from the Texas Education Agency.



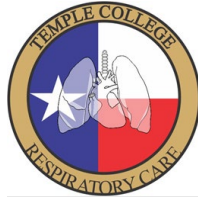
The first students were accepted in the spring of 1973. It was started under the leadership of Marie Saunders, PhD, RN, MT, then, Coordinator of Allied Health Education at the Temple VA Center. At that time the VA was intent on training several types of health care providers and allocated financial and space resources to then Temple Junior College in order to start several types of programs (LVN, Medical Records, Medical Lab Technician and Respiratory Therapy). Back then the College did not house any of its health-related programs on the campus proper. For several years all of the programs were housed in Building 29 (now a parking lot) and subsequently in other areas at the VA Center. In the late 70's the LVN program moved on campus and the Respiratory and Lab programs were given space in a newly renovated building that was remodeled just for those two programs in 1978, and again later in 1984. So, for many years these programs were housed at the VA until the agency decided it needed more space for other activities, and the old buildings were demolished. At the same time the College determined that the programs needed better homes and planning began and by January, 2004 most of the non-nursing health related programs were moved into the Health Sciences Center on the East Campus.

DEPARTMENTAL PHILOSOPHY

The faculty believes that in order for students to develop to their full potential there must be a curriculum that is responsive and responsible to students and the field of respiratory care. The department stresses cultivation of learning, intellectual curiosity, moral and ethical commitment, technical competence, and a high degree of interpersonal communication skills. Each of these skills/qualities is essential if students are to become successful healthcare practitioners.

All students have the capability to learn. What is often challenging for respiratory care students is the limited time allocated for actual respiratory care classes. There are actually 21 months of programmed RC courses. This means that once students begin the respiratory care course work it is incumbent on them to work hard to assimilate, what for most is a new culture and knowledge/skill base. Respiratory care practitioners must often function independently. Given this circumstance it is crucial that students act professionally and take responsibility for their own actions. The student's dedication to the learning process during the two years of study is extremely important and is the major key to success. The faculty is dedicated to assisting students in this process

In order to become a professional, the practitioner must be responsible to the chosen field. This is accomplished through one's intellectual integrity and curiosity. The ability to ask appropriate questions, investigate, and follow-through in a mature way is the mark of a true professional. In short - it is simply being responsible.



The nature of healthcare demands an ethical and moral approach to the profession. To properly care for persons whose health is impaired depends on the expertise and wisdom of practitioners who value patients' rights. Good manners, courtesy, and respect for the rights and feelings of others are essential elements that keep the professional foundation solid.

Contemporary health care often involves utilization of highly technical equipment in the care of seriously ill patients. The degree of knowledge and skill necessary to safely employ this equipment requires the student to remember facts, apply operational principles, and exercise judgment in clinical situations.

Interpersonal communications skills are essential to every facet of healthcare. Respiratory care practice demands attentive listening. Students and practitioners alike must focus their attention on those with whom communication is intended. Communication is both verbal and nonverbal and can provide information, perspective and encouragement to others in all of its forms.

ACCREDITATION

Temple College is accredited by the Commission on Colleges of the Southern Association of Colleges and Schools (SACS) to award associate degrees. Contact the Commission on Colleges at 1866 Southern Lane, Decatur, Georgia 30033-4097 or call 404-679-4500. It is important to note that the Commission is only to be contacted if it appears there is significant non-compliance with a requirement or standard by Temple College.

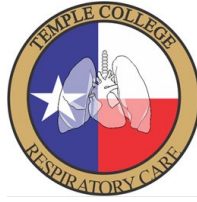
The Respiratory Care Program at Temple College is accredited by the Commission on Accreditation for Respiratory Care (CoARC). Accreditation for schools offering respiratory programs is important because it allows graduates of those programs to sit for national credentialing examinations, whereas they could not otherwise.

CoARC may be contacted in the following ways:

Internet: www.coarc.org (there is a link on the Programs website)

Phone: 817-283-2835

Mail: Commission on Accreditation for Respiratory Care
264 Precision Blvd.
Telford, TN 37690

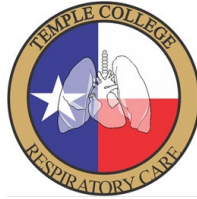


TECHNICAL STANDARDS

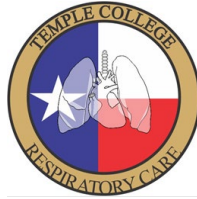
PURPOSE

To provide students/applicants with an understanding of the physical demands, communication skills and cognitive level required for the program. These standards are based on tasks which are performed by Respiratory Therapists on a regular basis.

Standard	Issues	Examples of Required Activities
Critical Thinking Skills sufficient to make clinical judgment.	Critical Thinking	Assess patients' physical and psychosocial needs in a variety of clinical settings by utilizing interpretation of written, verbal and sensory observations to determine appropriate therapies for patient care.
Problem solving skills appropriate to adjust therapies in response to patient needs	Problem Solving	Adjust therapeutic interventions to meet the needs of patients in a variety of settings
Interpersonal skills sufficient to allow appropriate interaction with individuals and groups from a variety of cultural and socioeconomic backgrounds.	Interpersonal Relationships	Interacting with patients, families, co-workers and others to create and maintain professional relationships
Written and verbal communication that is appropriate to create clear and concise dialogue in a clinical setting	Communication	Communicate effectively with patients, physicians, families and other staff members to assure appropriate patient care.
Physical abilities appropriate to maneuver in small	Mobility	Move safely in a patients' room. Safely maneuver equipment and apply equipment to patients in a variety of situations often in



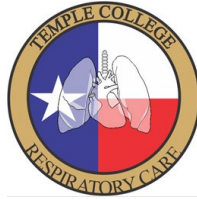
spaces while maneuvering equipment		confined spaces. Perform CPR including chest compressions and intubation
Gross and fine motor skills appropriate to perform patient care procedures to national standards which include safety and efficiency	Motor Skills	Safely care for patients by manipulating machine controls and equipment. Occasionally crouching, squatting or bending to obtain/evaluate equipment and patients: assist patients from lying to sitting and or standing positions; hand eye coordination sufficient to perform an arterial blood gas puncture and suctioning
Appropriate physical strength and endurance to be able to access patient as well as perform therapies on patients for extended periods of time	Strength and Endurance	Transporting patients and equipment within a facility; standing or being mobile in clinical settings for 6 hours or more; strength to perform intubation and assist in moving of patients in beds on stretchers and wheelchairs. Constant standing walking and lifting of up to 20 pounds
Auditory ability sufficient to monitor and assess health care needs of patients	Hearing	Hear monitor alarms, equipment audible alarms, voices with background noise and through protective equipment, calls for help
Tactile ability appropriate for assessment of physical health conditions	Tactile	Be able to palpate patient pulses. Perform didactic and therapeutic percussion and physical assessment of the chest
Ability to deal effectively with stressful situations and maintain a professional and positive interactions with others	Temperament	Perform procedures on patients who are in pain due to a variety of reasons. Maintain a sense of professional behavior when under stress



AARC Statement of Ethics and Professional Conduct

Demonstrate behavior that reflects integrity, supports objectivity, and fosters trust in the profession and its professionals.

- Promote and practice evidence-based medicine.
- Seek continuing education opportunities to improve and maintain their professional competence and document their participation accurately.
- Perform only those procedures or functions in which they are individually competent and which are within their scope of accepted and responsible practice.
- Respect and protect the legal and personal rights of patients, including the right to privacy, informed consent, and refusal of treatment.
- Divulge no protected information regarding any patient or family unless disclosure is required for the responsible performance of duty as authorized by the patient and/or family, or required by law.
- Provide care without discrimination on any basis, with respect for the rights and dignity of all individuals.
- Promote disease prevention and wellness.
- Refuse to participate in illegal or unethical acts.
- Refuse to conceal, and will report, the illegal, unethical, fraudulent, or incompetent acts of others.
- Follow sound scientific procedures and ethical principles in research.
- Comply with state or federal laws which govern and relate to their practice.
- Avoid any form of conduct that is fraudulent or creates a conflict of interest, and shall follow the principles of ethical business behavior.



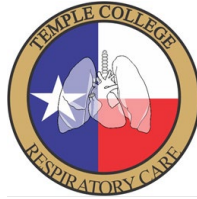
- Promote health care delivery through improvement of the access, efficacy, and cost of patient care.
- Encourage and promote appropriate stewardship of resources.
- Work to achieve and maintain respectful, functional, beneficial relationships and communication with all health professionals.

It is the position of the American Association of Respiratory Care that there is no place in a professional practice environment for lateral violence and bullying among respiratory therapists or between healthcare professionals.

AARC Respiratory Care Scope of Practice

The practice of a respiratory therapist is directed by a licensed independent practitioner and is determined by state licensure laws where applicable. The practice typically focuses on:

- Patients across the age spectrum – neonatal through geriatric.
- Direct and indirect patient observation and monitoring of signs, symptoms, reactions, general behavior and general physical response to respiratory care and diagnostic interventions.
- Implementation of respiratory therapy procedures, medical technology, and diagnostic procedures necessary for disease prevention, treatment management, and pulmonary rehabilitation.
- Utilization of protocols, guidelines, pathways, and policies driven by evidence-based medicine, expert opinion, and standards of practice.
- Participation in research to evaluate interventions and technology to determine their ability to improve patient outcomes.
- Facilitation and direction of patient rehabilitation programs and the development of disease and care management plans.



- Provision of patient and family education activities to promote knowledge and understanding of the disease process, medical therapy and resources available to assist in the care of the patient.
- Facilitation of health care student learning.
- Support of public education activities focused on the promotion of cardiopulmonary wellness and prevention that is sustainable.

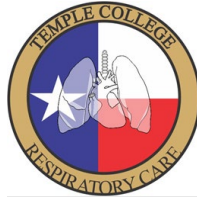
RESPIRATORY CARE SCOPE OF PRACTICE

Respiratory Therapists are health care professionals responsible for the care of patients with deficiencies and abnormalities of the cardiopulmonary system. The scope of practice crosses all patient, client and resident populations and care sites including, but not limited to various in-patient and outpatient settings (e.g. acute care, urgent care, long-term care, sub-acute care, skilled nursing facilities), physician's offices, sleep labs and clinics, vendor and industry venues, and the patient's home.

9425 N. MacArthur Blvd., Ste 100, Irving TX 75063 T 972.243.2272 W www.aarc.org
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The responsibilities of a respiratory therapist include, but are not limited to:

1. Performance and collection of diagnostic information:
 - a. Pulmonary function testing
 - b. Interventional diagnostics
 - c. Sleep studies
 - d. Noninvasive and invasive diagnostic procedures
 - e. Blood gas and other pertinent laboratory analysis
2. Patient assessment:
 - a. Physical examination
 - b. Diagnostic data interpretation
3. Application of therapeutics to respiratory care:
 - a. Medical gas therapy
 - b. Humidity therapy
 - c. Aerosol therapy
 - d. Artificial airway insertion, management, and care
 - e. Airway clearance
 - f. Invasive and non-invasive mechanical ventilation



- g. Vascular catheter insertion, management, and care
- h. Extracorporeal Life Support (ECLS)

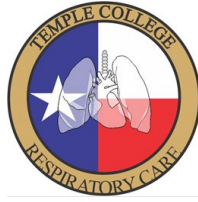
- 4. Assessment of therapies
- 5. Disease management of acute and chronic diseases
- 6. Collaborative support of hemodynamics
- 7. Discharge planning and case management
- 8. Provision of emergency, acute, critical and post-acute care, including:
 - a. Patient and environmental assessment
 - b. Therapeutic interventions
 - c. Patient land and air transport

ADMISSION REQUIRMENTS

ADMISSION CRITERIA TO THE TEMPLE COLLEGE RESPIRATORY CARE PROGRAM INCLUDES THE FOLLOWING:

A completed portfolio to be submitted to the Respiratory Care Department by the third Wednesday in June. The portfolio should contain the following:

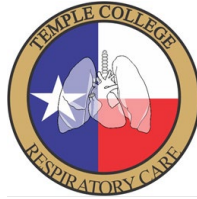
- 1. Make application and be accepted to Temple College.
- 2. Submit all records, official or unofficial to the Department of Respiratory Care by the third Wednesday in June.
 - They should include the following:
- 3.
 - a. Record of Information Session attendance.
 - b. A completed and signed Tour Form
 - c. TSI or similar scores denoting a passing level of performance for college level work. Some students may be exempt from testing based on several waiver factors such as military service or high TAKS scores.
 - d. TEAS (latest version) test scores of at least a combined average of 62% overall score.
 - e. Copies of all relevant transcripts, such as:
 - 1) High School
 - 2) College/University
 - 3) Military Service
 - 4) Other (proprietary schools)



- f. Academic transcripts showing a final grade of C or above for the program's prerequisites:
 - 1) ENGL 1301 Composition I
 - 2) BIOL 2401 Human Anatomy and Physiology
 - 3) A 3-credit hour Social or Behavioral Science courseand corequisites:
 - 1) BIOL 2402 Human Anatomy and Physiology
 - 2) Elective in Lang, Phil, Cult or Creative Arts
 - g. Two letters of reference from someone who has direct knowledge of the perspectives' work, academic performance and character, and not just a relative or close friend. These letters should be sent directly to Debbie Parten/Temple College RSPT Dept.-Health Science Center, 2600 1st St., Temple, TX 76504 or the writer can email them directly to debbie.parten@templejc.edu.
 - h. A completed Health and Immunization record with at least one of the three Hepatitis B inoculations completed. The other two shots must be complete prior to the start of clinical rotations.
 - i. Completed interview evaluations from the interviews by at least three different panel members.
 - j. A matrix is compiled with all the above factors assigned a numerical value and scores tabulated to determine suitability for admission.
 - k. Up to 25 candidates may be offered seats in a new cohort which begin in the fall of any given year.
3. Letters of notification will usually be mailed by the end of the week following the interview process.
4. Other factors important in consideration for admission to the Respiratory Care Program:
- (1) Students must not be on academic probation or suspension when applying for the program.
 - (2) Students must have at least a 2.5 grade point average

After students are accepted into the program, they will be asked to have a background investigation done on themselves within 30 days prior to the first clinical rotation day. A pre-entry physical exam will be required; including Tuberculosis screening and appropriate immunizations. The physical exam should also verify the candidate's good physical and mental health.

Students must make at least a "C" in all respiratory care courses in order to continue in the usual sequence described in the course outline. Liability insurance for clinical practice is purchased through the college at approximately \$28. The cost is assessed



as part of the fee for the first clinical course (RSPT 1360) and covers the student for the rest of the program.

At the end of the first year, a comprehensive exam, in RSPT 2560, is required, in order to move forward in the program. **Students must pass this exam with a 70% or better to remain in the program.** Students making less than 70 will receive remediation and retest. If the student makes less than 70, on the retest, they are dismissed from the program and not a candidate for readmission.

Students who complete all required course and clinical requirements must also complete a comprehensive exit exam in RSPT 2632. Students must achieve a passing score of 70 or higher to complete the program. Students making less than 70 will receive remediation and retest. If the student makes less than 70, on the retest, they are dismissed from the program and not a candidate for readmission.

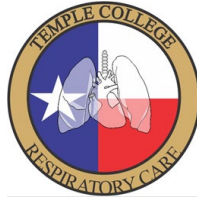
After completing the above, the student receives an Associates of Applied Science in Respiratory Care. That student is then eligible to take the national credentialing exams. The therapist multiple choice exam has a low cut and a high passing score. The low cut is awarded the Certified Respiratory Therapist credential (CRT). Students who make the high cut score are also awarded the CRT credential but they are also eligible to take the computer simulation exam (CSE). Upon passing the CSE the student is then a Registered Respiratory Therapist (RRT).

Candidates that have earned either credential must apply to the Texas Medical Board (TMB) for a license to practice respiratory care in Texas. The TMB awards the Respiratory Care Practitioner (RCP). Once a graduate has either credential, CRT or RRT, and RCP from the TMB they are eligible for employment.

Students are encouraged to become student members of the American Association for Respiratory Care, Texas Society for Respiratory Care, and the Association for Respiratory Care Students - a TC student club. Each of these organizations will aid the student in becoming more familiar with the field of respiratory care.

TRANSFER STUDENTS

Students applying to enter the Respiratory Care Program at Temple College must meet the basic admission requirements as listed above. The Respiratory Therapy Program reserves the right to assess transfer credits that count toward the AAS degree at Temple College. The Respiratory Therapy faculty will review and evaluate all transfer credits applicable to a Respiratory Therapy major, and will indicate which courses the student must complete in order to fulfill degree requirements. Transfer students must be in good academic and clinical standing with the transferring program. The college confers degrees to those students who complete all degree requirements according to



the Respiratory Therapy program of study. Acceptance of transfer students from other Respiratory Therapy programs depends on space availability. Transfer students will also have to complete a written exam (passing $\geq 70\%$) and/or a clinical simulation in the lab to assess their competence level and placement.

EQUAL EDUCATIONAL OPPORTUNITY

It is the policy of Temple College that all persons shall receive equal opportunities in admission or access to, or treatment or employment in, its programs and activities, without regard to race, religion, color, disability, sex, age, national origin, or veteran status. These benefits include but are not limited to such matters as housing, financial assistance, recruitment, and any type of personnel service.

SEXUAL HARASSMENT

It is the policy of Temple College that sexual harassment of students, employees at Temple College and clinical affiliates and their employees is unacceptable and will not be tolerated. The Temple College Board of Policies and Administrative Regulations should be referred to for policy and procedure statements addressing sexual harassment concerns and issues.

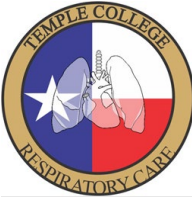
TITLE IX

Temple College does not discriminate against any student on the basis of pregnancy or related conditions. Absences due to medical conditions relating to pregnancy will be excused for as long as deemed medically necessary by a student's doctor and students will be given the opportunity to make up missed work. The Temple College Title IX Deputy Coordinator for Pregnancy Services is Adrian Sora, (254) 298-8328, One College Center, Room 1473.

Students who are requesting services related to pregnancy must disclose their need to their respective instructor and submit a signed diagnostic statement to the Temple College Title IX Deputy Coordinator for Pregnancy Services prior to or immediately upon learning of medical need. See the Temple College Board of Policies and Administrative Regulations for more information.

MENTAL HEALTH COUNSELING

Temple College has a licensed counselor available to students in need of counseling or referral services. To schedule an appointment, please go to <https://www.templejc.edu/resources/mental-health-counseling/> or call (254) 298-8318. All services provided are confidential.



You may visit the Circle of Support Resource Center in Room 803 of the Arnold Student Unit Building or go on the TC website, Circle of Support page and fill out a form requesting services. For additional help, see the numbers below:

Suicide Prevention Lifeline: 1-800-273-8255 or text HELP to 741741

Local Mental Health Crisis Lines: 1-800-888-4036 (Temple); 1-800-841-1255 (Round Rock)

Domestic Violence Hotline: 1-800-799-7233

Covid-19 Mental Health Support Line: 1-833-986-1919

DEPARTMENTAL GOALS

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

COURSE DESCRIPTIONS CAN BE FOUND IN THE TEMPLE COLLEGE ONLINE CATALOG

<https://catalog.templejc.edu/content.php?catoid=25&navoid=1028>

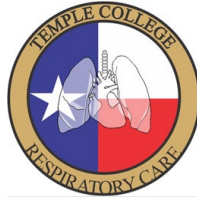
FOR APPROXIMATE COSTS

REFER TO THE TEMPLE COLLEGE ONLINE CATALOG

<https://catalog.templejc.edu/content.php?catoid=25&navoid=1005>

SCHOLASTIC REQUIREMENTS

Students must maintain a "C" or better course grade in all respiratory care classes in order to continue in the program on schedule. In all other supporting classes, the student must maintain at least an overall "C" average. **Failure to maintain academic requirements may temporarily or permanently discontinue the student's progress in the program. Re-admission to the program is not guaranteed,** but depends on the availability of available training slots at the time the student desires re-entry. Re-admission is also contingent upon review and evaluation of the student's grades, performance and remediation while previously enrolled in the program, as well as work completed since that time. In these situations, the Department Chairman and Faculty



will meet to approve the student's readmission into the program and determine needed course requirements.

A grade of "D" in any Respiratory Care course will mean that:

- *The student's progress in the program will be halted until the course is repeated successfully the next year.*
- *If a student receives 2 "D" grades in any two respiratory care courses or repeats the same course and receives a "D" on the second attempt the student will be dropped from the program and ineligible for readmission into the Temple College, Respiratory Care Program.*
- *The student must sign a waiver statement to the effect that; should satisfactory academic progress not be maintained; the student may be dropped from the program.*

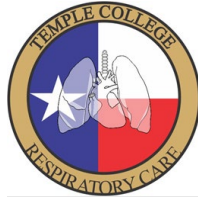
A grade of "F" in any Respiratory Care course will result in the student being dropped from the program and ineligible for readmission into the Temple College, Respiratory Care Program.

CLASSROOM/LABORATORY ATTENDANCE POLICY

Learners are subject to being dropped from their courses due to a lack of regular attendance. Most classes at Temple College have regularly scheduled/assigned meeting times, while others are taught in a distance education format via the internet. For classes that have regularly scheduled/assigned meeting times, regular attendance implies that learners are expected to be physically present in the classroom during those regularly scheduled/assigned times, regardless of the method by which the assigned work for the class is completed.

See Temple College Board of Policies and Administrative Regulations for specific details.

Also, there will be special attendance guidelines for clinical rotations and laboratory classes in addition to regular attendance required to meet the guidelines set by each class.



Note: It is the student's responsibility to drop a class if he/she is unable to continue attending the class. Students not dropping a class may earn an unsatisfactory grade in such a class.

MAKE-UP EXAM POLICY

When a scheduled exam is missed, the student is to report to the instructor on the first day of return to class. The student will have the opportunity to explain the reasons for the absence and arrangements made for any make-up examinations - usually at the Testing Center in One College Center. Make sure to consult with your instructor regarding time and place of make-ups. Some instructors may impose a time limit for the make-up to be done. So as not to exceed this possible limit and lose test points, make arrangements with your instructor as soon as possible. Make-up exams will be of similar content as the original exam, but may consist of different test items.

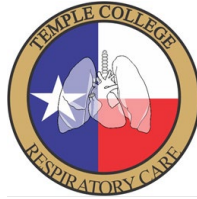
"Raw" scores only will be recorded for make-up exams; i.e., no throw-outs or possible extra or bonus points allowed. There are no make-ups allowed for unscheduled "pop" tests.

WEATHER

We have faculty and students from a very large area drive to the campus and clinical locations. It may be extreme weather in one area and fine in another. It is up to the student to decide if the student will be in danger due to storms, flooding or icy road conditions. **DO NOT ATTEND IF YOU BELIEVE YOU WILL BE IN DANGER.** Absences for extreme weather conditions will be waived at the discretion of the Program Director. All students should sign up for Leopard Alert so they will be notified in the case of the college cancelling or delaying class. Students can sign up for leopard alerts at the following address <http://www.templejc.edu/resources/leopard-alert/index.php> Clinical instructors will notify students if they need to cancel clinical for any reason. If the college or instructor cancels clinical no points will be deducted according to the Attendance Policy; however, there may be an assignment for the missed time.

CLASS ASSIGNMENT POLICY

Students will be informed in writing/D2L and or the Microsoft Teams app of the due date for all class assignments. As much as possible, students are directed to go to the D2L link for particular courses and watch their TC Webmail for updates. **When absent from a class, it is the student's responsibility to request assignments and materials from the instructor.** Grade penalties will usually be assigned in the amount



of ten points per day for assignments submitted after the due date or as otherwise specified in a course syllabus. Generally, class assignments submitted later than one work-week late will not be accepted and a grade of zero will be recorded for that assignment. Exceptions to the late assignment policy may be allowed in extreme circumstances.

CLINICAL SIMULATION CENTER - STUDENT USERS

All persons should wash their hands before touching the simulator manikins. Gloves should be worn for all patient care procedures that actually would require gloves.

Ink will permanently stain the simulator manikins' skin. Ink pens or felt tip markers should not be used in the simulator rooms or in any other setting that puts them in close proximity to a manikin.

Users should not write notes on their gloves because the ink may transfer to the manikins' skin and a permanent stain will result.

Photocopy papers should not be placed on, under, or near the manikins in order to prevent the risk of ink transfer. Iodine or other staining medications should not come into contact with the manikins.

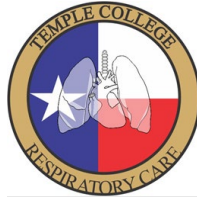
Food and drinks are not permitted in the ambulances or ambulance bay, at the nurses' station, in the major treatment rooms, Respiratory Care Lab, Operating Room, Scrub Room, the Sim Center control rooms or in any of the adjoining hallways.

Do not spill fluids over any component inside simulator manikin torsos, since this could damage the unit and might also present a possible electrical hazard for the operators.

Simulators should be operated only by personnel who have been trained by the Simulation Program Director or his/her designee.

Do not attempt to repair or troubleshoot a malfunctioning manikin. Request help from the Simulation Center Director or his/her designee.

The manikin chest must be kept dry. Special attention should be taken when using the IV arm, urinary system, or bleeding control module.



If a training session involves administration of drugs and/or fluids into the IV arm, empty the arm immediately following the training session.

Do not introduce any fluids except airway lubricant in small amounts into the manikin's esophagus or trachea.

Facility users are asked to report any damage to equipment or operating problems to the Simulation Program Director.

Facility users are expected to leave the Simulation Center in order. Please dispose of any trash in appropriate containers and ensure that flow of medical gases to all equipment is turned off completely.

Facility users are responsible for following Standard Precautions. Sharps and syringes are to be disposed in appropriate containers. Anyone sustaining a needle-stick or any other type of injury must complete an injury report.

PRE-CLINICAL REQUIREMENTS

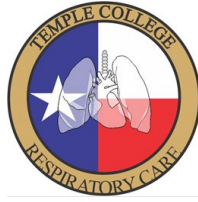
Prior to assignment to any of the program affiliate hospital for clinical training; each student must complete or provide the following:

Malpractice Insurance Coverage: This coverage is purchased through the college and is included as part of the required fees for the initial clinical course. Payment of this fee provides coverage for the student for the duration of training provided that the student continues on track.

Physical Examination: Each student is required to obtain a physical examination prior to clinical assignment. A copy of the completed physical using departmental forms provided, will be placed in the student's file.

Proof of immunization for any and all vaccines recommended by the CDC for healthcare workers.

TB Skin Test: Each student is required to have a current (within 6 months) tuberculin skin test and must provide the results of that test prior to clinical assignment. Students who have positive skin test reactions must provide a current chest x-ray report. The Department of Respiratory Care must have a copy of your TB skin test **each year**.



Students who do not provide proof of the TB skin test will not be allowed in clinical rotation and therefore will not be able to finish the program.

Basic life support (BLS) Students are required to have a BLS card from an **American Heart Association** provider. No other provider cards will be accepted. A copy must be on file with the department's secretary prior to clinical rotations. BLS cards are good for two years and a current card must be on file through all clinical rotations. Any student with an expired card will not be allowed at any clinical site. Any unexcused clinical rotations will result in a 10-point deduction from the student's clinical final grade

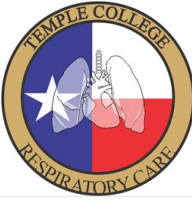
Pre-clinical Personal Disclosure Statement: Each student is required to complete a Preclinical Disclosure statement which requires the student to provide certain employment, educational and personal information. This information is provided only to aid the program faculty in determining the student's suitability for admission to the clinical training sites (in addition to the required criminal background check). All information provided is held in strict confidence, and the completed form is maintained in the student's file. Deliberate misrepresentation or omission of pertinent information on this form may subject the student to possible disciplinary action, including expulsion from the program.

The student should also be aware that the Texas Medical Board (TMB) will perform a background check on each applicant who applies for the Temporary Permit to practice during the last term in the program. It is imperative that a student disclose any information that could be a concern to the TMB, the program or its clinical affiliates.

Criminal background checks and/or drug testing are required and/or administered at any time by Temple College or any health care facility associated with Temple College. Permission for the criminal background check must be given by the student. Failure to give permission could result in dismissal from the program. **It may be necessary to dismiss students from the program if they are barred from practicing at any healthcare facility.**

Personal Health Insurance Coverage: The program strongly recommends that each student provide adequate health insurance coverage for themselves since neither the clinical affiliate hospitals nor Temple College is responsible in case of injury or illness to the student.

Hepatitis-B Immunization/Immunizations: The program requires each student to obtain the full series of three immunization shots for protection against the Hepatitis-B



virus. Students who do not wish to obtain this protection will not be admitted to the program. Students must provide an up to date immunization record. Students must complete the series of immunizations prior to the start of clinical rotations. Students **will not** be allowed in clinical rotation until completion of immunizations.

Seasonal Flu Vaccine: The seasonal flu shot is required for clinical rotation. The Department of Respiratory Care must have a copy of your flu shot, on file, **each year** you are in the program. Students who do not provide proof of the seasonal flu shot will not be allowed in clinical rotation and therefore will not be able to finish the program.

Release of Information Forms: Since accurate and timely feed-back is required by the program from former students and employers of program graduates, each student is required to sign a release of information form to be executed as required following their tenure as students of the program. All information requested will be used for official program evaluation purposes and will be held in strict confidence. Information requested of employers will in no way jeopardize or otherwise affect any present or former student's employment status.

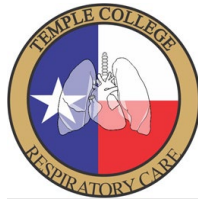
Affiliate Orientation: Each student must attend a formal orientation program for each affiliated healthcare institution or agency prior to clinical assignment to the facility. The program will schedule these sessions and inform the student as to the date, time and location.

REMIEDIATION POLICY

Since Respiratory care curricula are generally considered difficult it is not uncommon for some students to have difficulty in the program. Difficulties arise from many sources. Some students may have trouble with home life, transportation, various physical ailments, etc. Some students have academic difficulties if they do not apply themselves efficiently to their reading/written assignments. Likewise, they sometimes have difficulties with more hands-on, clinically related activities.

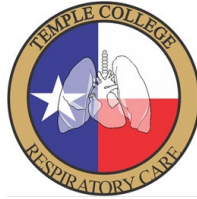
With those issues notwithstanding it is still the task of the program to prepare students well enough to enable them to pass the credentialing exams and make them employable as beginning respiratory care practitioners. To that end it is incumbent upon the program to help students attain a satisfactory level of performance.

If a student receives a second D or F grade on any examination during any semester, students are required to meet with the instructor and determine the cause of the poor performance. If such an assessment yields a satisfactory cause



and a plan is put forward to correct the low performance then that is all that is required. A third unsatisfactory grade will result another meeting with the concerned instructor and mandatory remediation session(s) with faculty required.

Much the same is true of clinically based performance that is substandard. If students are not able to satisfactorily perform clinical tasks they are required to remediate in the Sim Center with the Director of Clinical Education. Such performance is determined by feedback from clinical sites and if in the pre-rotation segment of a clinical course they are likewise required to spend extra time in the Sim Center with the DCE or designee.

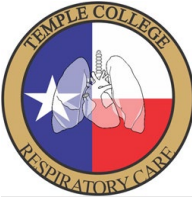


CRIMINAL BACKGROUND CHECK REQUIREMENTS

All clinical affiliates now require all students to complete a criminal background check prior to gaining access to its facilities. Students who have been convicted of the following offenses **will not** be allowed onto any clinical property as a student and thus will not be allowed to complete clinicals or the program:

CONVICTIONS DISQUALIFYING STUDENT REGARDLESS OF DATE

Murder	Capital murder
Manslaughter	Criminally negligent homicide
Unlawful restraint	Kidnapping
Aggravated kidnapping	Continuous sexual abuse of young child or children
Indecent exposure	Indecency with a child
Improper relationship between educator and student	Improper photography or visual recording
Sexual assault	Aggravated assault
Aggravated sexual assault	Intentional, knowing, or reckless injury to child, elderly individual, or disabled individual
Intentional, knowing, or reckless abandonment or endangerment of child	Deadly conduct
Terroristic threat	Aiding suicide
Prohibited sexual conduct (incest)	Agreement to abduct child from custody
Violation of certain orders in family violence case	Violation of protective order preventing hate crime
Sale or purchase of child	Arson
Robbery	Aggravated robbery
Burglary	Online solicitation of minor
Money laundering	Medicaid fraud
Cruelty to animals	Compelling prostitution
Causing sexual performance by a child	Possession or promotion of child pornography
Any other offense for which registration as a sex offender is required	



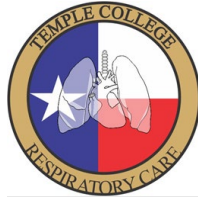
**CONVICTIONS DISQUALIFYING STUDENT
IF IN THE LAST FIVE (5) FULL CALENDAR YEARS**

Assault punishable as a Class A misdemeanor or felony	Theft punishable as a felony
Misapplication of fiduciary property of financial institution punishable as a Class A misdemeanor or felony	Securing execution of a document by deception punishable as a Class A misdemeanor or felony (not tampering with government record)
False identification as peace officer	Disorderly conduct

Students are required to use Castlebranch.com as the agency for performing background checks. To complete the application, please log onto their website and follow the directions. The following website will allow a potential student to get an idea if they will get a license: <https://tmb.state.tx.us/page/licensing-other-license-types>
Background checks must be completed no more than 30 days prior to the start of clinicals.

CRIMINAL BACKGROUND CHECKS AND DRUG SCREENS

All applicants admitted to the allied health programs at Temple College must submit to a criminal background check (CBC) and drug screen. This policy is based on The Joint Commission standard, which requires healthcare organizations to verify criminal background information on students who provide care, treatment, and services to patients/clients during clinical activities. Each Temple College Program has different criteria, but adheres to the overall procedure outlined in this policy. The cost of the CBC is a student responsibility and is non-waiver able and non-refundable. The CBC will be performed only by CastleBranch®, an external vendor contracted by Temple College Health Sciences programs to carry out deep background checks and drug screen tests. Student eligibility for clinical activities at clinical affiliated institutions is based on successfully passing the CBC and drug screen. Failure to pass either the drug screen or background check will result in a student’s inability to participate in clinical activities and thus prohibits successful completion of clinical courses which, in turn, prohibits program progression. For students in the Department of Respiratory Care, a background check and drug screen are done in January of any given year which is approximately 30 days prior to entering into clinical training at healthcare sites.



The CBC and Drug Screen for Temple College - Health Professions - Respiratory Care includes the following package contents:

Package TV70

- Statewide Criminal TX
- Nationwide Healthcare Fraud and Abuse Scan
- Drug Test
- Nationwide Record Indicator with SOI
- Social Security Alert
- Residency History
- Package cost \$84.00
- Additional Information

The package includes a statewide search within the state of Texas. If additional counties are found associated with a particular name outside the state of Texas they will be searched for no additional charge.

The package includes researching records under the current name and any additional names someone has used, if applicable.

For the drug test CastleBranch has contracted with Quest Diagnostics to perform a Controlled Substances Ten Panel Urine and Expanded Opiates

Background checks must be completed no more than 30 days prior to the start of clinicals.

Substances tested:	Methaqualone
Amphetamines (1000 ng/mL screen)	Opiates
Barbiturates	Oxycodones (100ng/mL)
Benzodiazepines	Phencyclidine
Cocaine Metabolites	Propoxyphene
Marijuana Metabolites (50 ng/mL)	Creatinine
Methadone	Specific Gravity

To get started a student should log in to <https://castlebranch.com> and create a My CB account. Each student is given initial login information. Once an account is created a student may create their own secure password to access that account that enable them to monitor order status, view progress, view results, respond to alerts, and complete requirements.

Students should not start this process until instructed by the director of clinical education. The CBC and drug screening must be done no longer than 30 days prior to the start of clinical rotations.



CHANGE IN HEALTH CONDITION

If a student has any significant change in health or a health condition that may affect or be affected by school performance, he/she will be required to obtain a Health Care Provider (to include physicians, nurse practitioners and physician's assistants) release. The release must specify that the student is able to return unrestricted to classroom and clinical activities. Examples of these conditions include but are not limited to: infectious diseases, and physical injuries. This request may be made at the discretion of the instructor or director. The student's health care provider may write a release note, as long as it specifies the nature of the problem, and an unrestricted return to both classroom and clinical activities. In some cases, clinical agencies may be consulted regarding restrictions placed on students who provide direct patient care, especially related to providing for patient safety.

GRADUATION REQUIREMENTS

All courses specifically state the required objectives, goals, and outcomes of each course, which will lead to all terminal objectives being met and the program's mission accomplished.

PROGRAM GRADUATION REQUIREMENTS

- Successful completion of all clinical and program competencies.
- Successful completion of all RSPT coursework with a minimum of a "C" in each course.
- Successful completion of all required general education courses.
- Successful completion of a comprehensive exam following the summer semester.
- Successful completion of a comprehensive exit exam.
- Successful completion of all required clinical performance evaluations.



CLINICAL PERFORMANCE EVALUATIONS

The following is a list of minimum skills which must be completed prior to graduation from the Temple College Respiratory Care Program. These skills will be assessed throughout the program in the classroom, simulation center and in the clinical setting by faculty and adjunct faculty.

Procedures Required for Graduation:
Handwashing/ aseptic technique
Chest physical exam
Vital Signs
Lung Expansion
Airway Clearance
IPPB
MDI/DPI Therapy
PEP Therapy
Incentive Spirometry
Chest Physiotherapy
Manual (BVM) Ventilation/Transport
Mask CPAP/Bi-Level Therapy
Endotracheal Intubation Assist
Endotracheal Intubation
Tracheal Extubation/Decannulation
Tube Cuff Pressure Management
Suction – oropharyngeal/nasopharyngeal
Suction-ET tube/tracheostomy tube
Trach Care
Set-up/Initiation of Mechanical Ventilation – adult
Set-up/Initiation of Mechanical Ventilation/ neo/pedi
Ventilator Management/adult
Ventilator Management/ neo/pedi
Bedside PFT/ Ventilator Weaning Parameters



Bronchoscopy Assist
Chest physical exam
Vital Signs
Aerosol/Humidity/oxygen therapy
Small Volume Neb Therapy

CLINICAL ROTATIONS

One of the traditional strengths of the Respiratory Care Program at Temple College is its strong record of clinical training. As a student you are afforded numerous opportunities to observe and practice procedures at a wide variety of clinical training sites. Since the Program presently is affiliated with nine different facilities and students rotate through all nine it is possible for you to develop a high level of competence in most areas of respiratory care practice given that they immerse themselves in their clinical assignments.

As a student you fulfill your assignments at various facilities and typically work with a preceptor assigned by the facility and/or the clinical faculty. To that end it is important for you to gain as much experience with actual respiratory care practice as possible, but at the same time it is important that affiliates not schedule staff to be off when students are assigned as substitutes for staff respiratory therapists. It is important that you communicate with your TC faculty assigned to that facility if you have any questions regarding this policy.



ADDITIONAL PROGRAM EXPENSES

These expenses are in addition to tuition, fees and textbooks required each semester. See the current Temple College Catalog for Tuition and Fee expenses.

SPRING SEMESTER, FIRST YEAR

Uniforms: Many sources available

Scrubs:

Black scrubs are required in the classroom after 1st week of class. Black scrubs will be worn at all times while on campus or clinical sites. RC patches are required. They are available at the TC Bookstore. They are to be sewn on the left sleeve, 2 fingers above the seam. Joggers may be worn if they fit appropriately...not too tight.

Shoes:

Lace-up shoes of the student's choice. Shoes should be kept clean and only used for clinical rotations. Open toe shoes, crocks with holes are not allowed in clinical rotations.

Stethoscope:

Student's choice. Stethoscopes may be purchased through many different vendors, stores and internet. Single or double tube is acceptable.

Wristwatch:

Each student must have a wristwatch with a second hand and be able to visualize numbers clearly.

Name Badges:

Each student must go to Admissions and Records, and request a TC Student ID Badge, with Respiratory Care on it along with your name that identifies you as a student. There is no charge for this service. Then bring the badge to the Department and we will modify it so you can wear it in the hospitals. As a student, some clinical sites will require the student to wear a name badge for that clinical site and will be issued during orientation. **Name badges must be returned to the Director of Clinical Education prior to graduation.** Further information will be provided prior



to clinicals. *The Seton system has a \$10.00 fee which can be returned at the end of the program.*

Ink Pen:

In those institutions which require manual charting, the student will be required to have a pen with black ink. The program recommends an inexpensive retractable black ball-point pen.

Clinical Records:

Platinum Planner: Students will be required to purchase a subscription to the Platinum Planner database through RSPT 1410. We will use it to track your performance in labs, clinicals, etc. One of the great values to you is that in having this system you will have access to it for a few years after graduation and can use the print-outs to market yourself because you will be able to generate hardcopy of your school experiences.

Notebook: Each student will be required to have a full-sized clinical notebook or a digital record. These will be issued by the Department at no charge to the student. These are used as additional clinical records along with patient SOAP notes and information.

Optional Items:

Students may bring calculators and/or small pocket notebooks or reference books. It is recommended that the student not bring purses, jewelry, or other valuable items into the clinical setting. It is often difficult to find a secure place to store these items safely. The student may wish to consider some method of carrying a small amount of money (for lunch, etc.).



PRE-GRADUATION EXPENSES

Texas Medical Board (TMB)	
Temp Permit App - within 30 days of graduation	\$ 55
RCP License	\$125
Graduation Cap, Gown & Tassel (approximately)	\$ 29

Any of the prices above are subject to change as they are not Temple College resources and we have no control over the prices.

POST GRADUATION EXPENSES

NBRC/AMP TMC Exam	\$190
NBRC/AMP/CSE EXAM	\$200

ATTENDANCE POLICY FOR CLINICAL COURSES

Attendance and active participation during clinical courses provide each student with unique opportunities to gain knowledge and perfect their skills in the practice of Respiratory Care. In addition, it is only in this setting that the student can learn to function as a competent, contributing member of the health care team. Excessive absenteeism or frequent tardiness is disruptive to the overall delivery of respiratory care services to the patient, and therefore reduces the overall quality of care. All students enrolled in clinical courses are expected to be present and punctual for each of the assigned clinical rotations.

Absenteeism Policy:

1. In order to provide adequate clinical experience for the student and to meet the requirements of the program's credentialing agencies, it is the program's policy that **no absences from pre-clinical or clinical rotation dates will be allowed without penalty. This includes pre-clinical laboratory days since that time is also dedicated to the necessary equipment and clinical skills needed by the student.**



2. **Each student will be allowed to make up two missed days total (from pre-clinical or clinical day) provided those absences are considered excused. No show, no call clinical days are considered unexcused and will result in a 10-point deductions from the final clinical grade.**
3. **Each clinical day absence which is not made up in the prescribed fashion will result in a 10-point deduction from the student's final semester grade average.**
4. It is the student's responsibility to contact the facility and the instructor well in advance in order that Arrangements can be made with the hospital for make-up dates.
5. All make up days must be coordinated through a program faculty member and arrangements must be made with the appropriate site and supervisor. **It is the student's responsibility to schedule make-up days.**
6. It is also the responsibility of the student to request a meeting with the Program Director and/or Clinical Coordinator when they accumulate more than three absences from clinical during the semester.
7. **Except in extreme circumstances (illness, jury duty, military duty, etc.) students who accumulate excessive absences can receive a failing grade for the course.**

Partial Day Absenteeism Policy

1. **Unless otherwise indicated, the official ending time for each clinical day is 3:00 PM (1500 hours) however, the clinical instructor at each institution can determine a dismissal time other than the official time.**
2. No student should leave prior to the dismissal time chosen by that instructor. For this reason, **it is strongly advised that students not schedule appointments for times earlier than 1500 hours on scheduled clinical days.**
3. **Students who leave early must do so only after informing their instructor** of the reason for requesting early dismissal. The time of dismissal should be recorded in Platinum Planner. Failure to do this will



cause the student to be charged with a full day of absence requiring a full makeup day.

4. Any time missed will have to be made up to avoid a grade penalty.
5. It is the student's responsibility to keep track of all missed clinical time and to make arrangements with their instructor for make-up times.

Tardiness Policy

1. At the designated reporting time the student should enter their start time in Platinum Planner.
2. Students who realize that they are going to be more than seven minutes tardy should contact the instructor through TEAMS. Faculty phone numbers are listed at the bottom of the clinical schedule.
4. Students should speak directly to their instructor or text message; it is not recommended that voicemail or third-party messages be left. E-mails will not be sufficient.
5. Upon arrival, tardy students should contact their instructor/team leader immediately so that they can be given an assignment.

In order to provide adequate clinical experience for the student and to meet the requirements of the program's credentialing agencies, it is the program's policy that **no absences from clinical rotation dates will be allowed without penalty**. This includes pre-clinical laboratory days since that time is also dedicated to the necessary equipment and clinical skills needed by the student.

CLINICAL INSTRUCTOR / ROTATION SITE PHONE NUMBERS

TC Faculty

David Fry - office - 254-298-8929

TEAMS

Pamela Riegel - office - 254-298-8905

TEAMS



Donny Sims – office – 254-298-8928
TEAMS

Scott & White Hospital - Temple:

Team Leader – 254-724-7774

Respiratory Care Department (Report Room): 254-724-9584

Baylor-Scott & White McLane Children's

Department/Therapist cell 254-935-4705

Baylor-Scott & White Continuing Care Hospital (CCH)

Department/Therapist cell 254-215-0940 or 254-215-0910

Baylor-Scott & White Health Care Round Rock

Respiratory Care - 512-509-9672

Coryell Memorial Hospital:

Hospital Switchboard: 254-865-8251. Ask for Respiratory Care

Department at ext. 296; speak with Paul Rambeau RRT or the therapist on duty.

Advent Community Hospital:

Respiratory Care Department: 254-519-8373 or 254-519-8117

Hospital Switchboard: 254-526-7523

St. David's Georgetown Hospital:

Respiratory Care Report Room: 512-942-4560

Providence

254-751-4287

Hillcrest

254-202-5771

Seton Medical Harker Heights

Charge Therapist - 254-690-0975

Director, Respiratory/Sleep Lab – Kim Pittaluga RRT - 254-680-6356



Students should speak directly to their DCE, Pam Riegel, if available at that rotation site. If not available the student must call the TC instructor by cell phone to inform them of the situation. In the event the instructor cannot be reached for some reason and after attempts to do so have not succeeded, then the student should attempt to call one or both of the other TC instructors. Students should also leave a message with a respiratory care staff member, especially if early in the morning, or later in the day with the departmental secretary or other contact person. The student should also leave a number at which they may be contacted upon the instructor's return. Failure to follow this policy may result in the student being credited with an unexcused absence. If the student anticipates an extended period of absence due to illness, injury, etc., then the instructor should be contacted as to the anticipated length of the absenteeism period.

COMPLIANCE WITH HIPAA PRIVACY

Health Insurance Portability and Accountability Act of HIPAA Privacy Rules. The Privacy Rules set national standards for the use and disclosures of patient information. In this session we cover the basics. All students will receive more training as required from the various clinical sites.

WHAT ARE WE PROTECTING?

We have always been very careful to protect the patient's information, but now it is federally Protected Health Information or PHI. PHI includes:

- All patient identification (name, addresses, social security, date of birth, etc.).
- Medical Records
- Billing documents
- Faxes and emails containing the above
- The spoken word regarding the patient



HOW DO WE LEGALLY USE PHI?

Here are a few reminders of how you can use and disclose PHI:

- To treat the patient.
- For payment for our services.
- For health care operations like quality assurance.
- For communications with the patient.
- With a written authorization from the patient (Medical Records does this).
- With the patient's permission, we can also provide status reports to family/friends.
- We can provide patient name and a general condition report, unless the patient has asked that this information not be shared.
- To meet public health and government requirements.

HIPAA PRIVACY RULE REQUIREMENTS

For health care providers, the Privacy Rule requires activities, such as:

- Notifying patients about their privacy rights and how their information can be used.
- Adopting and implementing privacy procedures.
- Training employees so that they understand the privacy procedures.
- Designating an individual to be responsible for seeing that the privacy procedures are adopted and followed.
- Securing patient records containing individually identifiable health information so that they are not readily available to those who do not need them.

Q. HOW DOES HIPAA BENEFIT PATIENTS?

It established appropriate safeguards that healthcare providers and others must achieve to protect the privacy of health information.

It holds violators accountable, with civil and criminal penalties that can be imposed if they violate patient's privacy rights.



It enables patients to find out about certain disclosures of their information that have been made. It generally limits release of information to the minimum reasonably needed for the purpose of the disclosure. For example, lab employees seldom need access to the entire patient records to do their jobs.

It generally gives patients the right to examine and obtain a copy of their own health records and request corrections.

It empowers individuals to control certain uses and disclosures of their health information.

Q. CAN HEALTH CARE PROVIDERS ENGAGE IN CONFIDENTIAL CONVERSATION WITH OTHER PROVIDERS OR WITH PATIENTS?

Yes. The HIPAA Privacy Rule is not intended to prohibit providers from talking to each other and to their patients. The Privacy Rule recognizes that oral communications often must occur freely and quickly in treatment settings. The Privacy Rule also recognizes that overheard communications in these settings may be unavoidable and allows for these incidental disclosures.

Q. DOES THE HIPPA PRIVACY RULE REQUIRE HOSPITALS AND DOCTORS' OFFICES TO BE RETROFITTED TO PROVIDE PRIVATE ROOMS AND SOUNDPROOF WALLS TO AVOID ANY POSSIBILITY THAT CONVERSATION IS OVERHEAR?

No, the Privacy Rule does not require these types of structural changes to be made to facilities.



Q. MAY PHYSICIAN OFFICES USE PATIENT SIGN-IN SHEETS OR CALL OUT THE NAMES OF THEIR PATIENTS IN THEIR WAITING ROOMS?

Yes. We may use patient sign-in sheets or call our patient names in waiting rooms, so long as the information disclosed is appropriately limited. For example, the sign-in should not display medical information that is not necessary for the purpose of signing in such as: social security number, diagnosis, problem or complaint, why seeing physicians today or insurance information.

USES AND DISCLOSURES OF PROTECTED HEALTH INFORMATION

For uses of protected health information, our policies and procedures identify the persons or classes of persons who need access to the information to carry out their job duties, the categories or types of protected health information needed, and conditions appropriate to such access. Of course, where protected health information is disclosed to, or requested by, health care providers for treatment purposes, the minimum necessary standard does not apply.

THE FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT (FERPA)

The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. Â§ 1232g; 34 CFR Part 99) is a Federal law that protects the privacy of student education records. The law applies to all schools that receive funds under an applicable program of the U.S. Department of Education. FERPA gives parents certain rights with respect to their children's education records. These rights transfer to the student when he or she reaches the age of 18 or attends a school beyond the high school level. Students to whom the rights have transferred are "eligible students."

- Parents or eligible students have the right to inspect and review the student's education records maintained by the school. Schools are not required to provide copies of records unless, for reasons such as great



distance, it is impossible for parents or eligible students to review the records. Schools may charge a fee for copies.

- Parents or eligible students have the right to request that a school correct records which they believe to be inaccurate or misleading. If the school decides not to amend the record, the parent or eligible student then has the right to a formal hearing. After the hearing, if the school still decides not to amend the record, the parent or eligible student has the right to place a statement with the record setting forth his or her view about the contested information.

- Generally, schools must have written permission from the parent or eligible student in order to release any information from a student's education record. However, FERPA allows schools to disclose those records, without consent, to the following parties or under the following conditions (34 CFR Â§ 99.31):

- School officials with legitimate educational interest;
- Other schools to which a student is transferring;
- Specified officials for audit or evaluation purposes;
- Appropriate parties in connection with financial aid to a student;
- Organizations conducting certain studies for or on behalf of the school;
- Accrediting organizations;
- To comply with a judicial order or lawfully issued subpoena;

Appropriate officials in cases of health and safety emergencies; and State and local authorities, within a juvenile justice system, pursuant to specific State law.

Schools may disclose, without consent, "directory" information such as a student's name, address, telephone number, date and place of birth, honors and awards, and dates of attendance. However, schools must tell parents and eligible students about directory information and allow parents and eligible students a reasonable amount of time to request that the school not disclose directory information about them. Schools must notify parents and eligible students annually of their rights under FERPA. The actual means of notification (special letter, inclusion in a PTA bulletin,



student handbook, or newspaper article) is left to the discretion of each school.

STUDENT DISMISSAL POLICY

A student is subject to a delay or dismissal from the program (with right of appeal) for any of the following:

Failure to maintain academic standards; i.e., grades of D or F in any respiratory care course. A grade of D will cause the student to stop out for one year. Such a student will be allowed one retake of a course. In the event the student receives a final course grade of D again, they will be dismissed from the program. A failing grade of F will result in the student's being dismissed from the program and will not be allowed back into the program. It is important for students to also understand that if they fail (i.e., a score of less than 70%) on the retake of the Final Exit Examination during the last clinical course, RSPT 2362, they will likewise not be allowed to graduate and they will receive a D grade for the semester in that course and will have to stop out for one year and then repeat RSPT 2362. Students must also pass a comprehensive exam, at the end of the Summer session in RSPT 2560, with a grade of 70 or above.

Unprofessional, unethical, dishonest or insubordinate behavior.

Gross negligence in the performance of respiratory care.

Deliberate misrepresentation or omission of pertinent information on any application forms.

Fraudulent enrollment into the Respiratory Care Program.

Academic integrity

ACADEMIC ADVISING

Our mission is to create a relationship of shared responsibilities between staff, faculty and students through integration of social, educational and career plans. Students are empowered to take charge of their education through realistic self-evaluation. Academic advising services are available to help students make decisions and to promote their success and well-



being. Services include career counseling, educational planning, transfer advising, and preliminary degree audits. Educational planning includes assisting students in deciding on a college major and providing course scheduling advice. Referral services for personal counseling are also available. Advisors provide information on Texas Success Initiative requirements and advise students on appropriate options. Advisors use a variety of tools to locate information on majors and careers, including reference materials and the Internet. Students who plan to transfer to a senior college or university to complete a bachelor's degree will work in collaboration with advisors to determine the steps necessary for transfer.

ACADEMIC INTEGRITY

Students are referred to the Temple College Board of Policies and Administrative Regulations for general information regarding academic policies at the College. The Respiratory Care Program supports and endorses the College policies regarding academic work. It can be a complicated and sometimes confusing issue, but it is expected that students will act in an ethical manner. Each student is charged with the responsibility of maintaining scholastic integrity. Students must adhere to faculty instructions and contractual terms for computer software packages used at Temple College. A student may use a software product for educational purposes only and may use the software only on the College computers. A student may not make copies of software (or documentation) or disassemble or decompile software. No instruction will be provided for software which is not properly acquired.

In preparing written assignments, students often find it helpful to include excerpts from material written by others. To avoid any possibility of plagiarism, the student should give full credit to the author, whether fellow student or resource writer, for any such material that is included.

Unless part of an assignment to pool resources, sharing of knowledge on an examination or other such written and/or oral assignments is not only unethical, but in most cases penalizes students by giving an unfair estimate of their preparation and progress. Violation of instructions concerning exams, term projects or research papers, illegitimate possession of examinations, possessing crib notes during an examination whether used or not, illegitimately obtaining information during an



examination from another examination paper or another student, assisting others to cheat, alteration of grade records, illegal entry or presence in any office are all properly within the area of student-faculty relations and as such are subject to such recommendations as the faculty may propose. Most often a grade of 0 would be assessed for any such assignment found to be in violation of the above terms.

TEMPLE COLLEGE SUBSTANCE ABUSE PREVENTION POLICY

Temple College is committed to a policy of prevention of the use of any controlled substance by students while they are engaged in College and College-sponsored activities. Temple College has informed members of the Central Texas area, the State government and the Federal government that it is striving to maintain a safe, healthful, and drug free environment. To that end, Temple College has adopted a student substance abuse prevention policy in an effort to decrease the danger of alcohol or drug abuse and the potential for any occurrence which may adversely impact the quality of teaching or learning at the College or in any of the College instructional programs, no matter where the activity occurs.

A policy statement: "Annual Notice of Drug and Alcohol Abuse Prevention," is published annually in the Temple College Board of Policies and Administrative Regulations.

CAMPUS AND CLINICAL PARKING

Students must follow all policies for parking on campus (see Temple College Board of Policies and Administrative Regulations) and at all clinical locations. This includes displaying a current student parking sticker and not parking in visitor or staff parking at any time.

ACCOMMODATIONS

Students needing accommodations can seek assistance with accommodations from the Temple College Coordinator for Student Accommodations, Misty Reid at misty.reid@templejc.edu or (254) 298-8335.



REQUIRED/RECOMMENDED PRACTICES FOR PROTECTION AGAINST OCCUPATIONAL EXPOSURE TO AIDS, HBV, TB AND OTHER POTENTIALLY COMMUNICABLE DISEASES

The Centers for Disease Control has made recommendations to protect workers from communicable diseases. These precautions are prudent practices that apply to preventing transmission of these microorganisms and should be used routinely. The program wholeheartedly endorses these recommendations and will expect all students to adhere to them at all times.

PERSONAL PROTECTIVE EQUIPMENT

Use gloves where blood, blood products or other bodily fluids will be handled.

Use gowns, masks, and eye protectors for procedures that could involve more extensive splashing of blood or body fluids.

Use pocket masks, resuscitation bags or other ventilation devices to resuscitate a patient to minimize exposure that may occur during emergency mouth-to-mouth resuscitation. Employers should place these devices where the need for resuscitation is likely.

WORKPLACE PRACTICES

Always observe Universal Precautions during all patient care situations.

Wash hands thoroughly after removing gloves and immediately after contact with blood or body fluids.

Use disposable needles and syringes whenever possible. Do not recap, bend or cut needles. Place sharp instruments in a specially designated puncture resistant container located as close as practical to the area where they are used. Handle and dispose of them with extraordinary care to prevent accidental injury.



Follow general guidelines for sterilization, disinfection, housekeeping and waste disposal. Use appropriate protective equipment. Place potentially infective waste in impervious bags and dispose of them as local regulations require.

Clean up spills (blood, sputum, etc.) immediately using aseptic technique according to hospital policy.

EDUCATION

Know the modes of transmission and prevention of these infections.

Other Requirements/Recommendations for Disease Prophylaxis

Treat all blood and body fluids as potentially infectious.

Get the HBV series vaccinations (Required) of all Health Professions students.

All students must have all vaccinations, including a TB skin test prior to entry into the clinical phase of the curriculum (Required).

DPT

Measles

HEALTH AND SAFETY

SCHOOL RELATED ACCIDENTS AND INCIDENT REPORTS RULES

- Accident school coverage is only provided by Temple College for the student while attending class or clinicals.
- When an incident occurs, notify a clinical instructor as soon as possible and then notify program faculty.
- An incident report is written documentation of the facts concerning injury to patient or student.
- Fill out a form as soon as possible no matter how trivial the incident may appear to be at the time before you leave the clinical site or simulation center. Should the incident occur, at a clinical site the student must complete an incident form for Temple College and the clinical facility.



- In addition to the incident form, submit a summary of the incident to be kept in the student's program file.
- Personal injuries and illness requiring medical treatment becomes the financial responsibility of the student.

The College's insurance policy can change at any time due to the type of coverage and company insured with.

PROCEDURE FOR ACCIDENT/INCIDENT REPORTING

Responsibility	Action
Student	<ul style="list-style-type: none"> • Notifies clinical instructor or supervisor (in the absence of instructor) as soon as possible after incident (within 24 hours). • Notifies program faculty as soon as possible. TC incident form must be filled out within 24 hours of incident. • Clinical instructor or program faculty will direct student to proper place to seek treatment dependent upon severity of injury. • Gives fully completed incident form to appropriate person. (facility form to radiology supervisor and school form to program director) • Gives incident summary to program faculty, as well as a copy of the incident form. • Arranges payment for personal injury or sickness.
Clinical Instructor	<ul style="list-style-type: none"> • Assists student in filling out appropriate forms. • Advises the student to seek medical attention if injured. • Reports documentation to clinical coordinator or program director.
Program Faculty	<ul style="list-style-type: none"> • Assists student in filling out forms. • Files summary in student program file. • Reports documentation to Program Director. • Provides student with school accident form.
Program Director	<ul style="list-style-type: none"> • Reviews all documentation.



GRIEVANCE PROCEDURES

PURPOSE AND SCOPE:

1. To provide the individual student opportunity to be heard in grievances involving alleged acts of unlawful discrimination on the basis of gender, disability, race, color, age, religion, national origin, or veteran status. (Type I Grievance)
2. To provide the individual student the opportunity to be heard in grievances involving alleged errors in the interpretation, application, or lack of application of stated policy or violations of stated policy. (Type II Grievance)
3. To provide the individual student opportunity to be heard in grievances that do not fall within the Type I or Type II grievance definitions. For sexual harassment issues, please see the Sexual Harassment Policy in the Temple College Board of Policies and Administrative Regulations.

INTERPRETATION OF COVERAGE:

Where a dispute exists concerning the application of these procedures, the President of the College will make final judgment on the question. See Temple College Board of Policies and Administrative Regulations for eligibility and procedures.

PROFESSIONAL ORGANIZATIONS

All students enrolled in respiratory care courses are encouraged to join the following:

- American Association for Respiratory Care (AARC) \$25.00
- Texas Society for Respiratory Care (TSRC) free with AARC membership
- Association of Respiratory Care Students (ARCS) at TC (\$25 for 21 months)



Compete for membership in Lambda Beta the national honor society for respiratory care students. Selection for Lambda Beta is made toward the end of school and is based upon being in the top 25% of your graduating class and the recommendation of the faculty.

Membership in any of these organizations is optional; but, participation in them is highly recommended.

STUDENT EMPLOYMENT

Temple College has no set policy regarding the number of hours a student may work at a part-time or even a full-time job after school hours. This will vary with each student and his/her course load. If possible, however, it is strongly recommended that the student not work more than 24 clock hours in any one week during any semester. There are, of course, exceptions, however, experience has demonstrated that students who exceed 24 hours per week often have difficulty with their academic work and may sometimes find themselves in trouble with grades. The program understands that often students must work in order to continue their education, however, it is best to strike a balance between work that is absolutely necessary and school.

Students may work for a clinical site as a student therapist. The student however cannot receive monetary compensation for clinical hours. Hours worked for a clinical affiliate cannot be substituted for clinical hours.

STUDENT CONDUCT IN LEARNING ENVIRONMENTS

Classroom, lab, and clinical activities are an essential part of the respiratory care program. Students are expected to come prepared and participate fully. Refer to the Disruptive Behavior policy and the Student Conduct and Responsibilities in the Temple College Board of Policies and Administrative Regulations for further information.

Due to the confidential nature of some material, visitors are not permitted in the classroom, lab or clinical during class activities. In addition, students are expected to maintain confidentiality outside the classroom. Unattended children are not allowed at any College location at any time.



SUMMARY

This manual has dealt with policies which apply to Temple College students of the Department of Respiratory Care. Students should take their education seriously and show an interest in order to make the most of the opportunity to learn. It is the sincere hope of the college that the student will make use of the numerous talents of the faculty and counselors in those instances where a need arises.

If you have any questions or comments concerning general college policies or the Departmental policies, please speak to one of the faculty. The faculty is here to help.

It is the policy of Temple College to offer all educational and employment opportunities without regard to race, color, national origin, sex, age or handicap.



PEOPLE ASSOCIATED WITH THE PROGRAM

COLLEGE ADMINISTRATION

Christa Ponce, PhD
President, Temple College

Susan Guzman-Trevino, PhD
Vice President of Academic
Affairs

Jeff Fritz, MED, NRP, LP
Dean, Health Professions-Health
Sciences

DEPARTMENT OF RESPIRATORY CARE

Juan Sanchez, MD
Medical Director

David Fry, MS, RRT, RRT-CPFT
Professor & Department
Chair/Program Director

Pamela Riegel, BSRC, RRT-
NPS, RRT-CPFT
Professor/Director of Clinical
Education

Donald Sims, BS RRT
Assistant Professor

Debbie Parten
Administrative Assistant

CORYELL MEMORIAL HOSPITAL - Gatesville

Paul Rambeau, MSHA, RRT-
NPS, ACCS
Director, Cardiopulmonary

ADVENT HEALTH – Killeen

OPEN

ST. DAVID'S GEORGETOWN HOSPITAL - Georgetown

Tiffany Davilla, RRT-ACCS
Director, Cardiopulmonary and
Intensive Care

SCOTT & WHITE HOSPITAL - Temple

Jeremy Smitherman, MS, RRT,
RCP
Director, Cardiopulmonary

Angela Wallis, BS, RRT
Manager, Respiratory Care

Tammy Dudeczka, RRT, CPFT
Assistant Director,
Pulmonary/Wound Care/HBO



**MCLANE CHILDREN'S
HOSPITAL-TEMPLE**

John Shannon MHA, RRT
Manager Transport Team and
Respiratory Care

Sowmya Kallur, MD
Pediatric Critical Care Medicine

**BAYLOR SCOTT & WHITE-
Hillcrest**

Cember Boxley, BSHCA, RRT-RCP
Manager, Respiratory Therapy &
Respiratory NICU

PUBLIC MEMBER

Cheri DeWilde

SETON-HARKER HEIGHTS

Kim Pittaluga, RRT-NPS
Director Respiratory Care and
Sleep Lab



DEPARTMENT OF RESPIRATORY CARE ADVISORY COMMITTEE

Mr. Manuel Alcozer, Attorney
Michalk, Beatty & Alcozer, L.P.
Chair & Community representative

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Dept. of Respiratory Care
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Baylor Scott & White

Cember Boxley, BSHCA, RRT-RCP
Manager, Respiratory Therapy &
Respiratory NICU
Baylor Scott & White-Hillcrest

John Shannon MHA, RRT
ECMO Specialist
Manager McLane Children's

Cheri DeWilde
Public Member



ACKNOWLEDGEMENTS

RECEIPT OF DRUG/ALCOHOL ABUSE POLICY

I hereby acknowledge receipt of Temple College Department of Respiratory Care policy governing the use or abuse of drugs and alcohol.

The purpose of the policy is to provide a safe working and educational environment for patients, students, and staff. I also understand that prior to clinical rotations I will be required to a drug screening. I also understand that that I will be subject to additional drug screenings based on reasonable suspicion that I am under the influence of drugs or alcohol.

I agree to be bound to this policy, refusal from additional testing (upon reasonable suspicion) or a positive test will affect my ability to participate in additional clinical rotations. Failure to complete clinical rotations will make it impossible to complete the program and will result in dismissal from the program.

I hereby authorize any physician, laboratory, hospital, or medical professional retained by Temple College or any clinical affiliate to conduct such screening. Additionally, I release Temple College, the Department of Respiratory Care and the faculty from any claim or liability arising from such screenings. Including to the liability of test, accuracy, testing procedure, or disclosure of results.

Signature

Date

Print Name



**STUDENT CLINICAL PERSONAL INFORMATION RELEASE
AUTHORIZATION FORM**

The Family Educational Rights and Privacy Act of 1974 (FERPA), as amended, affords students certain rights with respect to their education records. Among them are: “The right to consent to disclosures of personally identifiable information contained in the student’s education records, except to the extent that FERPA authorizes disclosure without consent.” To comply with the provisions of the Family Educational Rights and Privacy Act of 1974, an institution must obtain signed consent before it can release student information to a third party. Clinical affiliates may request copies of the following documents as a component of clinical education: Documentation of current CPR Documentation of vaccinations (Tdap, MMR, TB, Hepatitis B, varicella, flu) Documentation of current liability insurance coverage * (will be supplied by Temple College) Documentation of current drug screen/background check Name, date of birth, and social security number for computer access at BSW and other clinical facilities. This will be hand delivered or emailed by encryption. As a condition of reference for employment (students in the program and after graduation), clinical affiliates may request specific information related to clinical attendance/punctuality, clinical work performance, class attendance, and observed work ethic. The above information may be released to clinical affiliates by the program administrators. By signing below, I acknowledge receipt of this notice and consent to the above information being released to any or all of the clinical affiliates in agreement with Temple College and the department of respiratory care. I understand that as an adult student, I may revoke this consent, in writing, at any time to the parties listed above, except to the extent that any previous action has been undertaken, or information released. I understand that all information released is specifically indicated. All other information remains confidential.

Student Name: _____

Signature: _____

Date: _____



SOCIAL MEDIA POLICY

The Respiratory Care Department prepares students for health care that provide services to the public and therefore the school expects high standards of behavior and professional communication to be maintained at all times. Professional behavior and proper etiquette with technology are expected of students while on the campus and off campus while representing Temple College as a student enrolled in respiratory care, volunteering or being involved with a school related project.

Students should remember that their professionalism is reflected in their online presence. Future employers, clinical preceptors and other stakeholders with the school may search social media sites when considering candidates for hire. Students and faculty are agents for Temple College and should conduct themselves in a professional manner at all times while engaging in social media.

DEFINITIONS:

1. Blog: A blog is a website maintained by an individual or organization with regular entries of commentary, descriptions of events, or other materials such as graphics or video. Blogs may provide commentary or news on a particular subject; others function as more personal on-line diaries.
2. Social Media: For the purposes of this Policy "Social Media" is an on-line social structure made up of individuals or organizations that are tied by one or more specific types of interdependency, such as values, visions, ideas, financial exchange, friendship, business operations, professional exchange, etc. Social Media sites operate on many levels, from families up to the level of nations, and play a critical role in determining the way information is exchanged, problems are solved, organizations are run, and the degree to which individuals succeed in achieving their goals. Examples of Social Media sites include, but are not limited to Facebook, MySpace, LinkedIn, Twitter, Instagram or other similar sites.



POLICY STATEMENTS:

1. The use of technology can create potential liability for the student, faculty, and the college. Posting certain information can be illegal, and in violation of existing statutes and administrative regulations that may expose the offender to criminal and civil liability.
2. Students, faculty and staff are liable for anything they post to social media sites and may be subject to discipline by Temple College or litigation.
3. The following actions are strictly forbidden:
 - a. Posting or communicating any patient-related information or information which may potentially identify a particular patient on a social media site or in a blog. Removal of the patient's name does not solve this problem – inclusion of gender, age, race, diagnosis, etc. may still allow the reader to recognize the identity of a specific individual. Violations of this requirement may result in disciplinary action up to and including dismissal from the program, as well as other liability for violation of HIPAA. Students should never publicly make comments about the care of a specific patient, including online. Even acknowledging the care of a patient is an unacceptable disclosure of patient identifying information.
 - b. Disclosing confidential patient information in an inappropriate manner is a federal offense under HIPAA. The penalties include significant fines and/or criminal penalties. The Department of Respiratory Care takes violations of patient privacy seriously and will take corrective action when aware of such a violation. Posting or communicating private academic information of another student, including but not limited to grades, narrative evaluations, or adverse academic actions. The taking of any photographs and/or posting, sharing, or printing of photographs from a patient care area or laboratory environment unless authorized by the relevant institution and faculty is not permitted. Use of Temple College logos, marks, or graphics on social media sites. Posting of confidential or proprietary information about the university,



staff, students, clinical activities, preceptors, patients/clients, or others with whom one has contact. Use of the Temple College's name or the student's program's name to promote a cause, product, political party, or candidate.

4. The following actions are considered unprofessional behavior and violations of these guidelines are subject to disciplinary action:
 - a. Display of vulgar language while on social media sites, in the classroom, or clinical area.
 - b. Display of language or photographs that imply disrespect for any individual or group for any reason (for example: age, race, religion, ethnicity, culture, disability, gender, gender identity, or sexual orientation) with social media.
 - c. Posting of potentially inflammatory or unflattering material regarding a patient, student, faculty member, staff, or administrator.
 - d. Videotaping or audio recording faculty or fellow students and posting these recordings online without the permission of the faculty or fellow student.

5. Suggestions and tips when using social media:
 - a. Be smart about protecting private and confidential information.
 - b. There is no such thing as a "private" social media site. Search engines can turn up post's years after the publication date. Comments can be forwarded or copied. Archival systems save information, including deleted postings.
 - c. If you feel angry or passionate about a subject, it's wise to delay posting until you are calm and clear-headed. Think twice before posting. If you are unsure about posting something or responding to a comment, ask your faculty.
 - d. Future employers hold you to a high standard of behavior. By identifying yourself as a Temple College student through postings and personal Web pages, you are connecting to your colleagues, clinical agencies, and even clients/patients. Ensure that content associated with you is consistent with your professional goals. Employers will conduct Web searches on job candidates before extending offers.



- e. Respect your audience.
- f. Adhere to all applicable College privacy and confidentiality policies.
- g. Monitor comments. You can set your site so that you can review and approve comments before they appear. This allows you to respond in a timely way to comments. It also allows you to delete spam comments and to block any individuals who repeatedly post offensive or frivolous comments.

If a student is accused of violating the Department of Respiratory Care Social Media Policy, the school's Student Misconduct and Appeals Policies will be used to address the charge.

Student Name: _____

Signature: _____ Date: _____



**Temple College
Department of Respiratory Care
TESTING POLICY**

To ensure academic integrity during exams the following guidelines will be in place for all respiratory care courses.

All examinations will be electronic on D2L. Students are welcome to bring their own computers; laptops will be provided for those without a personal laptop. All exams will require Respondus® LockDown Browser or other measures to ensure the academic integrity of the exam. Smart phones and watches are prohibited during any exam. Students should have phones on silence and off of their desk. Ignore all text and/or calls during the exam. Calculators are allowed as long as they are simple and do not store any formulas.

Once you have completed the exam, quietly leave the room. Do not come back into the classroom until all students have completed the exam.

If you are unsatisfied with a question or score, do not attempt to discuss while other students are taking the exam. The proper time and place are in our office or while going over the exam.

If a student misses a test, they will have one week to take the test. All make up test will be taken in the testing center, no bonus questions will be on any make up test, and the student will receive only the raw score. Any student scoring below 70 must meet with the instructor of record in their office to come up with a plan for success.

Signature

Date

Print Name



HEALTH STATUS RELEASE FORM

_____ has been

under medical supervision for the following

date/dates: _____

Nature of illness or

Injury: _____

Student is able to return to classroom and clinical activities without restrictions.

_____ SIGNATURE/CREDENTIALS

_____ AGENCY

_____ DATE



DECLINE OF MEDICAL TREATMENT

I, _____, decline immediate treatment at
(print name)

_____. I will accept total
responsibility for my own medical care.

I, _____, release TEMPLE COLLEGE
(print name)

from all legal restraint involved with this incident.

Student: _____ (signature)

Printed name: _____

Date: _____

Clinical Instructor: _____



STUDENT ACKNOWLEDGMENT AND UNDERSTANDING BACKGROUND CHECK/DRUG/ALCOHOL SCREENING

I, _____, am enrolled in the respiratory care program at Temple College. I have been informed and understand that a hospital, clinic, or similar medical treatment facility may exclude me from clinical placement on the basis of my background check and/or drug screen results. I further understand that if I am excluded from clinical placement, I will not be able to meet course requirements and/or the requirements of graduation.

Individuals who have been convicted of a crime, other than a minor traffic violation, may be ineligible for licensure/registration/certification, even though they successfully complete a program of study. Such issues may also negatively impact options for employment in healthcare related careers. Questions and/or concerns regarding this issue should be addressed with the Program Director.

I release Temple College and its agents and employees from any and all liability in connection with any exclusion that results from information contained in either the background check or the drug screen results.

(Print Name)

(Signature)

(Date)



PROTECTED HEALTH INFORMATION, CONFIDENTIALITY, AND SECURITY AGREEMENT

Protected health information (PHI) includes patient information based on examination, test results, diagnoses, response to treatment, observation, or conversation with the patient. This information is protected and the patient has a right to the confidentiality of his or her patient care information whether this information is in written, electronic, or verbal format. PHI is individually identifiable information that includes but is not limited to, patient's name, account number, birth date, admission and discharge dates, photographs, and health plan beneficiary number. Medical records, case histories, medical reports, images, raw test results, and medical dictations from healthcare facilities are used for student learning activities. Although patient identification is removed, all healthcare information must be protected and treated as confidential. Students enrolled in school programs or courses and responsible faculty are given access to patient information. Students are exposed to protected health information during their clinical rotations in healthcare facilities. Students and responsible faculty may be issued computer identifications (IDs) and passwords to access protected health information.

Initial each individual policy upon review.

_____ 1. It is the policy of the school/institution to keep protected health information confidential and secure.

_____ 2. Any or all protected health information, regardless of medium (paper, verbal, electronic, image or any other), is not to be disclosed or discussed with anyone outside those supervising, sponsoring, or directly related to the learning activity.

_____ 3. Whether at the school or at a clinical site, students are not to discuss protected health information, in general or in detail, in public areas under any circumstances. This would include places such as hallways, cafeterias, elevators, or any other area where unauthorized people or those who do not have a need to know may overhear.

_____ 4. Unauthorized removal of any part of original medical records is prohibited. Students and faculty may not release or make copies of



protected health information. Case presentation material will be used in accordance with healthcare facility policies.

_____ 5. Students and faculty shall not access data on patients for whom they have no responsibilities or a "need to know" the content of protected health information concerning those patients.

_____ 6. A computer ID and password are assigned to individual students and/or faculty. Students and faculty are responsible and accountable for all work done under the associated access.

_____ 7. Computer ID and passwords may not be disclosed to anyone. Student and faculty are prohibited from attempting to learn or use another person's computer ID or password.

_____ 8. Students agree to follow each healthcare facility's privacy policies.

_____ 9. Breach of patient confidentiality by disregarding the policies governing protected health information is grounds for dismissal from school and/or institution.

BY MY SIGNATURE BELOW: • I agree to abide by the above policies and other communicated policies at clinical sites; I agree to keep protected health information confidential. • I understand that failure to comply with these policies will result in disciplinary action. • I understand that the confidentiality and security of protected health information is protected through state and federal laws, an unwarranted disclosure of patient information is in violation of legal authority, and may result in civil and criminal penalties and removal from the program.

_____ Print Name

_____ Signature _____ Date



**TEMPLE COLLEGE
DEPARTMENT OF RESPIRATORY CARE**

By my signature, I acknowledge that I have read and understand the policies contained in the Temple College Respiratory Care handbook. Furthermore, I agree to comply with these policies while I am a student at Temple College. It is a program requirement that a signed signature form be on file in the program office.

_____ Print Name

_____ Signature

_____ Date