



***St. Louis Community College –  
Forest Park***

**Respiratory Care Program**

**Student Handbook**

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## INTRODUCTION

This student handbook is designed to be utilized by students in the respiratory care program who have questions about the program. It is to be used as a reference guide for students concerning their responsibilities while in the program. **It is extremely important that you read and understand the policies found in this handbook.** All academic policies apply to all students and faculty regardless of location of instruction. For STLCC information, the [STLCC Student Guide](#) as well as [this link to policies and procedures](#) can assist students.

## PROGRAM MISSION

The Respiratory Care program functions under the organization of St. Louis Community College and therefore adheres to the mission statement of the college – to expand minds and change lives.

The Respiratory Care program is designed to provide a strong foundation in the technical application and theories of respiratory care as well as fundamental knowledge in liberal arts and basic science. The mission of the program is to graduate students with the Standards of an Accredited Educational Program for the Entry into Respiratory Care Professional Practice from the Commission on Accreditation for Respiratory Care (CoARC). These standards can be found at [CoARC's website](#).

## PROGRAM GOAL

The overall goal of the Respiratory Care program is 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).

## LEARNING OUTCOMES

Upon completion of the program, the student will...

1. evaluate data to assess the cardiopulmonary status of a patient and appropriateness of prescribed respiratory care.
2. develop respiratory care plans in a variety of settings and modify if necessary.
3. initiate appropriate therapeutic interventions, monitor patient responses, and modify therapy to achieve goals.
4. promote cardiopulmonary wellness, disease prevention and management, and patient/family/community education.
5. perform diagnostic and therapeutic procedures in a safe and effective manner.
6. apply problem-solving strategies in the patient care setting.

7. demonstrate effective oral and written communication skills.
8. conduct themselves in an ethical and professional manner.

### **ACCREDITATION INFORMATION**

The Respiratory Care Program (Program #200050) offering an Associate's in Applied Science (AAS) degree at the Forest Park campus located at 5600 Oakland Avenue, St. Louis, MO is accredited by the [Commission on Accreditation for Respiratory Care](#).

### **BOARD EXAMINATION INFORMATION**

Individuals who successfully complete the program are eligible to take the Therapist Multiple Choice (TMC) and Clinical Simulation Exam (CSE) administered by the National Board for Respiratory Care (NBRC). To obtain the NBRC Certified Respiratory Therapist (CRT) credential, graduates must pass the TMC with the low-cut score. In order to obtain the NBRC Registered Respiratory Therapist (RRT) credential, graduates must first pass the TMC at the high-cut score before then passing the CSE. More information can be found at the [NBRC's website](#).

### **FACULTY INFORMATION**

Faculty members are available to meet with students during regularly scheduled office hours and by appointment.

The hours of each faculty member will be posted outside the office prior to the beginning of each semester. Students are expected to exercise courtesy and patience when an instructor is involved in a conference with another student or instructor, or is on the telephone. The instructor will see you as soon as the situation allows.

Instructors will schedule appointments with students at either the student's or instructor's request. If the student is unable to keep the appointment, the student is expected to notify the instructor as soon as possible.

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## ACADEMIC INFORMATION

### Grading

The following grading scale is used in all respiratory care didactic, lab, and clinical courses:

Grading Scale:	<b>93.0 – 100%</b>	<b>A</b>
	<b>84.0 – 92.0%</b>	<b>B</b>
	<b>75.0 – 83.0%</b>	<b>C</b>
	<b>70.0 – 74.0%</b>	<b>D</b>
	<b>00.0 – 69.9%</b>	<b>F</b>

**A score of 75%, (a grade of “C”), or better, is required to pass each course and continue in the Respiratory Care program.**

### Attendance Policy for Class and Lab

Due to the concentrated nature of the program, students are expected to be present for, and participate in, all scheduled learning experiences. Students need to schedule personal matters so there is not a conflict.

Arriving late, or leaving early, is disruptive to the learning of others.

- If you are late to class or lab or leave early you will be considered tardy. **Two tardies will constitute one (1) absence.**
- Lecture Policy:
  - For 16-week courses, if a student is absent more than two times the number of times that course meets in a week for lecture, the student will incur a 5% deduction in the overall grade for each absence after the allowed amount. (Example, for a course that meets twice a week, the student is allowed to miss class four times before a deduction)
  - For an 8-week course, the student is allowed to miss the number of times the course meets in a week for lecture. Every absence after that will lead to a 5% deduction in the overall grade for the course. (Example, for a course that meets twice a week, the student is allowed to miss class two times before a deduction.)
- Live Virtual Lecture Course Attendance Policy:
  - In order to counted as “attended” for online sessions, students must be on time and present during the entire session on their own device. One device cannot be shared by multiple students.
  - Students will be asked to share their video and participate in discussion throughout the session. If the student is unable to show that they are “in attendance” during these check-in times of the lecture, the student will be counted as absent for that day.
- Asynchronous Online Course Attendance Policy
  - For courses that do not meet “live” online, students must complete and submit homework assignments, take quizzes and tests, participate in the discussion board by contributing original and valuable comments, submit writing assignments, and/or

email the instructor with course-related questions or comments. Simply logging into Canvas does not constitute attendance. Please refer to the [Attendance Policy and Procedures](#) for additional information.

- Lab Policy
  - Lab is mandatory and material missed cannot be made up; therefore, it is extremely important to attend all lab sessions.
  - There may be a lab pre-lab checklist that students must complete to enter the lab each week. These items may include, but are not limited to watching videos, completing online assignments, posting to discussion boards, etc. The pre-lab checklist items are meant to prepare the student for lab time. If students do not complete the pre-lab checklist, they will not be able to enter lab and will be asked to leave which will lead to an absence.
  - For 16-week courses, if a student is absent more than two times the number of times the lab meets in a week, the student will incur a 5% deduction in the lab grade for that course for each absence after the allowed amount. (Example, if a lab meets once a week, a student can miss twice before a deduction will be given.)
  - For an 8-week course, if a student is absent more than the number of times the lab meets in a week, the student will incur a 5% deduction in the lab grade for that course for each absence after the allowed amount. (Example, if a lab meets once a week, a student can miss one lab before a deduction will be given.)

Excused absences (that will not count against the student) include:

- Medical emergency/hospitalization of the student
- Military duty
- Funeral leave for an immediate family member
- Jury Duty
- Verified Covid-19 Positive Test

The student will be required to present official documentation to the Program Director as soon as possible for an absence to be excused.

## **SCHEDULING COMMITMENT**

The Respiratory Care Program is designed as a five-semester continuing curriculum. All respiratory care courses **MUST** be taken in sequence outlined in the Recommended Academic Plan that is on the website. It is recommended to take the general education courses prior to the program if possible. Anatomy and Physiology II must be completed with a “C” or higher prior to the first semester of the program. All science and math courses must be completed with a “C” or higher to graduate from the program.

All respiratory classes and labs are held Monday-Friday during the day hours. Clinical rotations mirror an 8.5-hour or 12.5-hour shift at the hospital. Most affiliates begin the dayshift between 6:00-7:00am. Clinical is generally scheduled Monday-Fridays with the actual days varying with the course and the student’s individual schedule. The DCE holds the right to schedule students on weekends, evenings, or outside of the normal college schedule if necessary. Students are not allowed to make requests for certain days and/or locations.

## PROGRAM PROMOTION

A student in the Respiratory Care program must receive a satisfactory (minimum “C”) rating in Respiratory Care didactic, laboratory, and clinical courses in order to promote through the program. If a student receives less than a “C” grade in any respiratory care course, the student will be placed on academic probation and the student will not be able to move forward in the program until that course(s) have been completed with a “C” grade or higher. Students who fail 3 or more courses in a semester will be dismissed from the program and will not be eligible for re-entry to the program. Students with 2 or more “F” grades in a semester will be dismissed from the program and will not be eligible for re-entry to the program. Students must also attain a “C” grade in all math and science general education courses to graduate from the program.

In each combined respiratory care course that has didactic and lab, the student must obtain a 75% or higher grade in the didactic and lab portions to pass the course. A student with <70-74% didactic or lab grade will have an automatic “D” in the course. A student who has <70% didactic or lab grade will have an automatic “F” in the course.

Lab grades may consist of assignments, quizzes, lab competencies and a final lab practicum. Students must receive “satisfactory” ratings on all required lab competencies. Students are given three total attempts to pass a laboratory competency. If a student fails to receive a “satisfactory” laboratory rating on a competency after three attempts, the result will be a course failure, **regardless** of the didactic or overall laboratory grade. If a student misses a performance evaluation due to an absence or receives an “unsatisfactory” on their first attempt, it will be up to the student to arrange a time for making up the evaluation in question. Students will not be permitted to complete any other performance evaluations until all previous ones are satisfactorily completed. Failure to satisfactorily complete a performance evaluation in a timely manner may cause a student to receive point deductions for any subsequently missed performance evaluations.

In each respiratory care clinical course, an “unsatisfactory” rating on any skill competency (after two previous unsuccessful attempts) will result in a course failure, **regardless** of the overall clinical grade.

## **Transfer Students**

Students transferring from another respiratory care program must follow all admission policies and procedures required of the college and the program. Transfer of general education courses will be completed through the transfer evaluation process during the time of application to the college. No respiratory care courses will be allowed to be transferred.

## PROGRAM PROBATION POLICIES

A student in the Respiratory Care program will be placed on probation if any of the following occur:



## Academic Probation

- If the student withdraws from any respiratory didactic, lab, or clinical course for any reason.
  - The student must repeat and pass the course(s) with a “C” or higher to move forward in the program. All courses remaining in the program must be passed with a “C” or higher. If the student withdraws or fails any course after re-entry to the program, the student will be dismissed from the program.
  - If a student withdraws from 3 or more courses in a semester with a failing grade, the student will not be eligible for re-entry to the program.
  - If a student withdraws from 2 or more courses in a semester with standing “F” grades, the student will not be eligible for re-entry to the program.
- If the student does not obtain the minimum “C” grade in any respiratory didactic, lab, or clinical course
  - The student must repeat and pass the course(s) with a “C” or better in order to move forward in the program.
  - If the student fails 3 or more courses in a semester, the student will not be eligible for re-entry to the program.
  - If the student receives 2 or more “F” grades in a semester, the student will not be eligible for re-entry to the program.

If a student is placed on academic probation, the student may be allowed to re-enroll in the course(s) the next time offered to move forward in the program. If the student desires to reenter the program, the student must understand and abide by the following policies.

- **Reentry is not guaranteed.** Faculty reserves the right to deny or approve re-entry based on curriculum changes and space availability. If any course failed is updated, the student must pass the new updated course in the program. If the program is revised and there is a new curriculum, the student must submit a “Program Change” form and abide by the curriculum of the new program. Students reentering the program will be accepted only when the maximum number of students allowed in the respiratory program would not be exceeded. Students who withdrew (with a passing grade) from the Respiratory Care program due to circumstances beyond their control will have first priority.
- Students seeking reentry to the program must make an appointment with the Respiratory Care Program Director prior to the midterm of the following semester after the semester of withdrawal/dismissal.
- To reenter the program, the student must pass with a “C” or higher an independent study course taken the semester prior to readmission. During this independent study course, the student will review material in the program up to that point. Proficiency testing in knowledge must be demonstrated at a 75% or higher in this course to be readmitted the next semester into the program. All performance evaluations completed during this course must be passed with a “satisfactory” rating to pass the course.
- Students seeking to reenter the program will also be given an *individualized* plan which may include but is not limited to immunizations, BLS, retaking the course(s) failed,

auditing courses, visiting the academic support center, and repeating background checks and drug tests. If these requirements are not completed by the due dates given, the student will be permanently dismissed from the program.

- Students seeking reentry must be in good academic standing in the college, having achieved a GPA of 2.5 or better (based on a 4-point scale) in all previous college work at St. Louis Community College.
- Students that encountered a major health problem that caused them to miss an extended period of time and thus were withdrawn from the program need to do the following based on the illness.
  1. Physical Illness – the student must present to the Program Director a statement from his/her physician (on attending physician's letterhead) stating that the student is physically able to continue the program.
  2. Mental Illness – the student must present to the Program Director a statement from his/her psychiatrist (on psychiatrist's letterhead) stating that the student is mentally able to continue the program.
- Only one reentry is allowed. If a student withdraws from or fails any course after reentering the program, the student will be permanently dismissed from the respiratory care program. **All respiratory care courses must be completed within 3 years.**

### **Academic Probation Due to GPA**

When the student's total college grade point average falls below 2.50, the student will be given one semester to achieve the 2.50 average. If, at the end of that semester, the deficiency is not made up, the student will be permanently dismissed from the program.

### **Clinical Probation**

If the student receives an Unsatisfactory (U) on any part of a clinical evaluation, the student must meet with the Program Director and Director of Education to discuss improvement. If the student continues to receive unsatisfactory scores in subsequent evaluations, the student will be placed on clinical probation with a written action plan. If the student does not improve, the student will be permanently dismissed from the program.

Students dismissed from a clinical site by the clinical preceptor or supervisor/manager of the department must meet with the DCE to discuss the implications of this decision. Depending on the reason, a failure of the clinical course and/or program dismissal may occur.

### **Attendance Probation**

If a student receives a grade deduction in a respiratory care course due to absences and/or punctuality, the student will be placed on attendance probation for the remainder of the program. If the student receives a grade deduction in any respiratory care course for the remainder of the program, the student will be permanently dismissed from the program.

## **Affective Behavior Probation**

Students are expected to adhere to the STLCC conduct code and the [Professional Conduct and Ethics](#) as written in this handbook. Please keep in mind that students in respiratory training are involved in learning situations which deal with human lives. The responsibility we have to those under our care demands that we adhere to certain rules and regulations. Honesty, integrity and ethical conduct are essential.

Therefore, any act of misconduct may lead to disciplinary action ranging from verbal discussion, written action plans, and permanent dismissal from the program. The faculty, therefore, reserves the right to recommend disciplinary action of any student. Please see the [Professional Conduct and Ethics](#) for examples of behavior that could lead to disciplinary action.

## **ACADEMIC APPEALS PROCEDURE**

A student's alleged violation of his/her rights and alleged violation of a student's responsibilities, as outlined in the student fact finder, are subject to redress or disciplinary action in accordance with the student appellate process. In all cases where the dispute involves a purely academic matter, the student appellate process will not be applicable. Academic matters will be handled through the academic appeals process.

### **Step 1**

Within 10 working days of an alleged violation(s) of academic rights, the student must make a verbal or written request for an individual conference with the faculty member to clarify the alleged violation(s) and request a remedy. In the case of a final grade, the request for a conference must be made in writing within 10 working days of the first day of class of the following semester (fall or spring). Within 10 working days of receipt of the student's request, the faculty member must hold the conference with the student.

### **Step 2**

To pursue Step 2 if the matter is not resolved at Step 1, within 10 working days of the conference with the faculty member, the student must file a written notice of the academic appeal and request a conference with the appropriate department chair/program coordinator. The student will present to the department chair/program coordinator in writing the allegations, the student's position on the facts of the situation and the student's suggested remedy. The department chair/program coordinator will provide a copy to the faculty member within three working days, confer with the student within 10 working days of receipt of the request, investigate the situation, and respond in writing to the student and faculty member within 10 working days of the conference.

### **Step 3**

To pursue Step 3 if the matter is not resolved at Step 2, within 10 working days of the response from the department chair, the student or the faculty member must file a written appeal with the appropriate dean and provide copies of the original allegation and responses. Within five working days, the dean will investigate the situation and confer with the student and faculty member. The dean will respond in writing to the student and faculty member within 10 working days of the conference.

#### Step 4

To pursue Step 4 if the matter is not resolved at Step 3, one of the two options below must be followed.

- a. In appeal cases not involving a final grade, within 10 working days of receipt of the written response from the dean, the student or faculty member must appeal in writing to the vice president for academic affairs and provide copies of the original allegations and written responses. The vice president for academic affairs will investigate the situation, confer with the student or faculty member within 10 working days, and respond in writing to the student and faculty member within 10 working days of the conference. The vice president for academic affairs' decision will be final.
- b. When the appeal involves a final grade, within 10 working days of receipt of the written response from the dean, the student or the faculty member must file a written request, providing copies of the original allegations and written responses, with the vice president for academic affairs for a hearing of the campus Academic Appeals Hearing Committee. Within 10 working days of receipt of the student's or faculty member's request, the vice president for academic affairs will designate the Hearing Committee and provide the committee with the original allegations and written responses. The committee will have 15 working days to conduct the hearing. The committee's decision will be final.

### **Violation of Student Rights**

Step 1: A student who believes his/her rights, as specified above, have been violated by a college employee will first make an informal appeal to that employee's immediate supervisor.

Step 2: If an acceptable resolution is not reached, the student may continue informal appeals through organizational channels ending with a written decision from the appropriate vice president/director, Student Affairs.

Step 3: If an acceptable solution is not reached at Step 2, the student may, within 10 days after the date of the written decision, submit a written appeal to the chairperson of the Student Appellate Hearing Committee. The written appeal will state the circumstances pertaining to the case, the justification for appeal and the remedy sought. The committee may render a decision on the written petition, request further information and documentation, or conduct a hearing.

➤ **For more information regarding the appeals process, please go to the STLCC Board Policies G. 13 and G.18**

## CLINICAL INFORMATION

### **Dress Code**

Students must uphold the dress code during all clinical rotations. Failure to comply may result in a reduction in the clinical grade, removal from the clinical site, clinical probation, or program termination.

1. White lab coat that does not go past the fingertips when placed at the student's side
  - This may not be required at all facilities; therefore, the student should wear it on the first day and ask or check the clinical site fact sheet
2. Caribbean blue scrub tops purchased from the Forest Park Bookstore
3. Caribbean blue scrub pants that match the scrub top in color and brand. These are also found in the bookstore.
4. Appropriate colored shoes in clean, good condition.
  - No canvas style shoe (Toms, Sketchers, etc.), sandals, or loafers allowed.
  - All shoes must have a back and no heel.
5. College identification badge must be worn and visible at all times and hospital ID badge when provided. This is provided by the College Activities office for free.
6. Tattoos-
  - Any tattoo that is deemed offensive, inappropriate, and/or unprofessional will need to be covered during clinical experiences at all times
    - These decisions are subject to the discretion of program faculty and/or each individual clinical site
7. Jewelry –
  - No dangling jewelry
  - No visible body piercing will be allowed except simple small post earrings (two pair max)
8. Fingernails should be short and well-manicured.
  - No artificial nails or gel nails are allowed due to the possibility of microorganism transmission.
  - Nail polish must be neat and of appropriate color – no fashion extremes permitted
9. Hair that is longer than shoulder length should be pulled back
  - Hair accessories are to be plain and inconspicuous (to promote patient safety).
  - No fashion extremes permitted
10. It is recommended to refrain from using cologne due to the potential reaction from patients who have hypersensitive airways.

### **Other Required Supplies**

The student must have the following during all clinical rotations:

- Black pen and small notebook
- Watch with second hand
- Four-function calculator
- Stethoscope

Temporary parking stickers can be obtained from some of the affiliates. The student should inquire about such stickers at the start of each rotation.

## Clinical Attendance Policies

1. Clinical attendance is documented in Trajecsys. The student must clock-in and clock-out in Trajecsys from within the Respiratory Care Department at their clinical site. This must be done on a computer within the department or with a GPS enabled phone.
  - If a student uses a phone and the GPS location is disabled and/or does not match the dropped GPS pin location of the respective Respiratory Care Department it will count as a missed clock
  - If a student fails to clock in or out, a **blue missed clock card** must be filled out and turned into the DCE.
  - After two missed clocks, each missed clock will result in a tardy.
2. Tardy = 1-19 minutes late to clinic
  - Two tardies = 1 absence (this absence does NOT have to be made up)
3. Absence = not attending clinic OR  $\geq 20$  minutes late to clinic or leaving  $\geq 20$  minutes early from clinical
  - If a student is more than 1 hour late or leaves 1 hour early, the absence must be made up.
4. All absences must be made up regardless of cause.
  - Students will reschedule any and all clinical time missed with the clinical site using a **yellow makeup card**.
  - The student can makeup an 8.5-hour shift with either one 8.5-hour shift or by adding two 4-hour shifts to two already scheduled 8-hour shifts. The student CANNOT schedule a shift that is less than 8 hours.
5. Excessive absences (more than the allowed number) will result in a **5% deduction** in the cumulative grade for each clinic day missed. The number of allowed absences for each course is as follows:
  - RC 170 Clinical Practice I: 1 absence allowed
  - RC 190 Clinical Practice II: 2 absences allowed
  - RC 230 Clinical Practice III: 2 absences allowed
  - RC 260 Clinical Practice IV: 2 absences allowed
6. Excused Absences
  - The following conditions are accepted as excused absences:
    - Medical emergency/hospitalization of the student
    - Military duty
    - Funeral leave for an immediate family member
    - Jury duty
    - Verified Covid-19 Positive Test

- The student will be required to present official documentation to the Director of Clinical Education as soon as possible, in order for the absence to be excused
- Excused absences must be made up.

#### 7. Call-In Procedure

- A student who is not able to attend a clinical day must inform the clinical affiliate a minimum of **one hour** before the departmental shift start time.
  - It is advised that the student request the name of the individual taking the message so that if there is confusion about whether or not a student called in, the student has verification
- The student is also required to email the Director of Clinical Education AFTER the call to the hospital and inform the DCE of the absence as well as the name of the person that received the call-in at the site.
- A “time exception” must be placed in Trajecsys to account for the missed hours of the shift
  - Failure to place a time exception will result in automatic point deductions and count as a missed clock
  - A comment needs to be placed that includes the person whom the student spoke with and the time that they did so
- If a student fails to inform the clinical site and/or the Director of Clinical Education that he or she will not be able to come to clinical, the student will receive a minimum **5% deduction, up to 10% deduction** in the cumulative grade.

## Workload

### A. Amount:

1. The workload will be assigned to the student by the clinical preceptor or designated employee.
2. The workload assigned will be at the student’s appropriate level of experience.
3. SERVICE WORK STATEMENT  
Respiratory care students must not be substituted for paid staff during clinical time. This is to assure that students gain experience, complete the required competencies and skill sets, and are not used simply for backlog work in the absence of appropriate paid staff.

### B. Breaks:

1. The student is entitled to breaks and lunch as per affiliate employee regulations.
2. The student cannot leave the hospital complex during the clinical day.

### C. Studying:

1. Studying while at the clinical site is allowed only by permission of the clinical preceptor.
2. Studying should only be done when there is downtime and no therapy is being given at that time.

## Grading for Clinical Courses

The grade for a clinical course is determined by the student's completion of requirements for the clinical site and the clinical application class. The grading scale is as follows:

Grading Scale:	<b>93.0 – 100%</b>	<b>A</b>
	<b>84.0 – 92.0%</b>	<b>B</b>
	<b>75.0 – 83.0%</b>	<b>C</b>
	<b>70.0 – 74.0%</b>	<b>D</b>
	<b>00.0 – 69.9%</b>	<b>F</b>

**A score of 75%, (a grade of "C"), or better, is required to pass each course and continue in the Respiratory Care program.**

Clinical grades will be computed using the following (see each clinical syllabus for variations)

1. Clinical evaluations of the student will be completed by the Clinical Preceptor at the clinical facility
  - These evaluations must be reviewed by students on Trajecsys in order to receive a grade and complete the clinical course.
  - All evaluations from all sites in a semester will be averaged for the evaluation grade.
  - Grading: An average is obtained by adding up each score on an evaluation and dividing it by the number of areas on the evaluation:
    - Exceeding Expectations = 100%
    - Performing as Expected = 90%
    - Unsatisfactory = 0%
2. The student's ability to become proficient at the objectives and complete performance evaluations.
  - All performance evaluations must be completed by the end of the program. If any evaluations are not done, the student will obtain a "F" grade in RC 260 Clinical Practice V and will not be able to graduate on time.
3. The completion of all required assignments which includes but not limited to: time logs, daily log sheets, physician interaction logs, and clinical site and instructor evaluations.
4. A clinical applications class will be held on campus or online. The clinical application portion of the student's grade is based on attendance, participation, case presentations, case studies, assignments, simulation, research papers, etc.



Students who are withdrawn from the program, for any reason, will be required to demonstrate proficiency of knowledge and skills as deemed necessary by the Director of Clinical Education PRIOR to being placed back into clinic.

## **Supervision During Clinical**

All students are responsible to the following personnel:

- The director, manager, supervisor, and/ or chief therapist
- The clinical preceptor or their designee
- The Director of Clinical Education
- Any director of a specialty area
- All physicians and hospital administrators

### Authority:

1. The extent of authority over the student that any of the above-mentioned personnel, except the Director of Clinical Education, can exert on the student is limited to counseling, suspension from the clinical affiliate, and coordination of the workload.
2. If any of the personnel listed in section A-1 feels that a student has committed a violation of these regulations or has committed an offense that should result in the student's suspension/ dismissal from a program, he or she may bring this matter to the Director of Clinical Education and the Program Director.
3. Clinical Preceptor:
  - a. The clinical preceptor is an employee of the hospital who satisfies the job description of that position and who is responsible to coordinate and evaluate the daily performance of the student while in the clinical setting.
  - b. Any concern regarding a clinical preceptor should be presented to the Director of Clinical Education
  - c. Any concern regarding a clinical preceptor will be handled by the management of the affiliate and the college.
4. Director of Clinical Education
  - a. The DCE is a full-time faculty member of the College who is responsible for the coordination of all clinical affiliates, the content, quality and evaluation of the clinical phase of the program.
  - b. Any concern regarding the DCE should be presented to the Program Director.

## **Clinical Affiliates and Site Leads**

### **Barnes Jewish Hospital**

Himanshu Kumawat

### **St. Louis Children's Hospital**

Lisa Cracchiolo

Kristen Lohman

### **St. Louis University Hospital**

Pat Brennan

### **Cardinal Glennon**

Brian Eggemeyer

### **Depaul Health Center**

Derek Scheidemantel

### **St. Joseph's St. Charles**

Tim La' Ferney

### **St. Joseph's Lake St. Louis**

Emily Maiuro

### **Mercy Washington**

Denise King

### **Missouri Baptist Medical Center**

Claudia Claudio

### **St. Clare Health Center**

Kevin McAllister

### **St. Luke's Hospital**

Chastity White

### **Christian Northeast Hospital**

Suzanne Bent

### **Mercy STL Hospital**

Camilla Simon

### **Ranken Jordan**

Gabe Wood

## **STUDENT REGULATIONS**

### **Confidentiality / HIPAA**

A mandatory training and evaluation of understanding of the Health Insurance Portability and Accountability Act (HIPAA) is required of all students prior to entering clinical rotations. All students must acknowledge their responsibility under applicable state and federal laws and the Affiliation Agreements between the College and Clinical Facility to keep confidential any information regarding the facility's patients. Students must not reveal to any person or persons, except authorized clinical staff and associated personnel, any specific information regarding any patient. Any violation of HIPAA may lead to disciplinary action up to dismissal from the program.

### **Technical Skills and Competencies**

The graduate's performance in the clinical facility requires demonstration of the knowledge, ability, and initiative to perform as a Respiratory Therapist. To achieve the necessary requirements for issuance of an Associate in Applied Science degree in Respiratory Care, the graduate must meet technical skills and competencies with or without reasonable accommodations. Please see [Appendix A](#) for the Respiratory Care Technical Skills and Required Competencies.

### **Professional Conduct and Ethics**

Students are expected to adhere to the STLCC conduct code. Also, keep in mind that students in respiratory training are involved in learning situations, which deal with human lives. The responsibility we have to those under our care demands that we adhere to certain rules and regulations. Honesty, integrity and ethical conduct are essential.

Therefore, any act of misconduct may lead to disciplinary action ranging from reprimand up to and including dismissal from the program. The faculty, therefore, reserves the right to recommend disciplinary action, including dismissal of any student for any of the following types of misconduct:

- Failure to comply with the rules and regulations of St. Louis Community College and the Respiratory Care Program as stated in this handbook. This includes adhering to due dates.
- Failure to comply with the rules and regulations of the affiliating health care facility regarding individual conduct.
- Failure to comply with the rules and regulations and code of ethics of the respective professional organization.
- Abuse or inconsiderate treatment of patients and/or their loved ones.
- Divulging any information, including idle conversation, concerning patients, their records, personnel records of employees, or other confidential information belonging to the affiliating health care agency.
- Theft or misappropriation of property belonging to the school, health care facility, patient, or classmate.
- Use or unauthorized possession of narcotics or other controlled drugs not specifically prescribed by a physician while on the premises of the school or affiliating health care facility.

- Use, intoxication, or unauthorized possession of any intoxicating beverage while on the premises of the school or affiliating health care facility.
- Cheating, plagiarism, copying, or allowing others to copy on examinations or assignments.
- Falsifying documentation.
- Inability to exhibit professional behaviors in all interactions with classmates, faculty and others
- Inability to arrive to class, lab, and/or clinical prepared and ready to learn.
- Inability to respect others, regardless of race, age, sex, religion or cultural orientation
- Dishonorable, unethical, or unprofessional conduct likely to deceive, defraud, or harm the public.
- Failure to comply with the policy regarding use of cell phones in class, lab, and clinic.

### **Academic Integrity for Online Exams**

All online exams will be accessed through the ProctorU.

- The student must have everything off of their desk except the allowed resources for that exam. Students are never allowed to use phones, tablets, notes, books, other people, etc.) The only allowable resources (depending on the exam) will be a four-function basic calculator and a whiteboard.
  - If a calculator is allowed, the student may only use a basic four-function calculator.
  - If a whiteboard is allowed, the student must have a one-sided desk-sized whiteboard and show the proctor that it is clear before starting the exam. The student must erase it at the end and show the proctor it is clear at the end of the exam.
- The student may not read the questions out loud during the exam.
- The student must keep his/her face in view during the entire exam.

### **Consequences for Not Following Policies**

First Violation of These Policies:

- The student will receive at a minimum a 5% deduction or up to a 100% deduction (grade of zero) in the exam grade, depending on the violation.

Second Violation of These Policies:

- The student will receive a more severe deduction in the exam grade, up to 100% deduction (grade of zero).
- Depending on the violation, the student may be placed on academic probation.

Third Violation of These Policies:

- The student will receive a zero score on the exam.
- The student will be placed on academic probation (if not already done so).
- If the student was on academic probation for not following these policies, the student will be dismissed from the respiratory care program.

### **Reviewing Exams:**

At the end of the exam, the student will click “submit” and then “OK” to review the exam for a one-time view. The proctor will stay for this time period to ensure students do not copy any exam questions or answers. After each exam, concepts missed by the group will be reviewed in the Discussion Board. If students wish to review the concepts they missed on an exam, they must make an appointment with the instructor. Exam questions and answers will not be shared with students after the one-time view.

### **Mandatory Orientations**

- Prior to beginning the program, each student is required to attend the respiratory care program orientation held in the summer.
- Prior to each clinical rotation, there will be mandatory orientations. If the student does not attend the clinical orientation, the student will not be able to begin the clinical rotation. The student will receive an absence in clinic if the orientation is missed.

### **Criminal Background Checks and Drug Testing**

Students enrolling in the Respiratory Care program should be aware that a criminal background check, random drug test, and name search on government registries which prohibit employment in healthcare professions are required to be **completed prior** to starting the program in the fall. CastleBranch is used to complete these requirements via their [website](#). Background checks are conducted from every state in which the student has resided since the age of eighteen (18) years.

Conviction of offenses in the following areas normally will prohibit the student from participation in the clinical portion of the program.

- Murder
- Sexual offenses
- Arson
- Assault
- Burglary
- Robbery
- *Other offenses as determined by the clinical site*

Students that have a criminal conviction that isn't waived by the clinical sites will be dismissed from the program.

A required drug test is also required to be completed prior to starting the program in the fall. CastleBranch is used to complete these requirements via their [website](#). Positive results on a drug test will also result in dismissal from the program.

Students who are dismissed for a positive criminal background check, drug test or listing on a government registry are not eligible for refund of tuition or lab fees. Students who have concerns regarding their status with the above regulations are encouraged to discuss the matter with the Program Director prior to seeking admission.

### **Health History and Physical Exam Form**

All students must have a health history form (performed by a physician) completed during their first semester before attending clinical. This form can be accessed and then turned back into the CastleBranch student tracking system.

- All students in the Respiratory Care program are required to have proof of vaccination for measles, mumps, rubella, varicella, influenza (completed annually), Hepatitis B, diphtheria, pertussis, and tetanus. All vaccinations must be submitted to the CastleBranch student tracking system. If you cannot locate your immunization records, you will need to have a blood titer done with the lab report.
- Tuberculosis testing is required annually with the following options:
  - A negative blood test can be completed and must be done annually.
    - This is the recommended method
  - TWO-STEP tuberculin skin test via intra-dermal injection must be completed prior to beginning clinical rotations.
    - Two-step process means the student will be injected once, have it read 2-3 days later and then be injected again a few weeks later and once again have it read 2-3 days later
    - Students will need to complete TB testing annually
    - If the student has a positive TB result, a chest x-ray and TB symptom check form is required to be completed after the positive PPD test results.
- Covid-19 Vaccination – due to area hospitals requiring all students, employees, and vendors to be vaccinated against Covid-19, all respiratory care students in the program must provide documentation of full vaccination prior to clinical rotations. Students may choose the one-shot Johnson & Johnson or the two-shot Moderna or Pfizer vaccines. Please note that the mRNA vaccines require 3 weeks between the two shots. Full immunity has been noted two weeks after all three vaccines are completed.
  - The Covid-19 booster is not required by clinical affiliates but is highly recommended to be able to complete clinical rotations without being required to quarantine for close contacts.

### **Personal Health Insurance**

Any accident which may occur on campus or at clinical, which requires medical attention, will be at the student's expense. The insurance offered through the college is ONLY malpractice, not health insurance. If a student does not have health insurance, the student will not be able to attend clinical rotations at sites that require it.

### **Basic Life Support Training**

American Heart Association Basic Life Support (**BLS**) for Healthcare Providers is required prior to the start of clinical rotations. Documentation is to be submitted to the CastleBranch student tracking system. The cost of this training is the responsibility of the student. Training is provided by St. Louis Community College's Continuing Education Department. If the student is unable to pass BLS, the student will not be able to continue in the respiratory care program.

### **Advanced Cardiac Life Support Training**

Certification in the American Heart Association's Advanced Cardiac Life Support (ACLS) is required prior to graduation of the program. Documentation is to be submitted to the CastleBranch student tracking system. The cost of this training is the responsibility of the

student. If the student is unable to pass ACLS, the student will not be able to graduate from the respiratory care program.

## **PROGRAM POLICIES**

### **Illness**

For the protection of patients, peers, and personnel of the health care facility, the student is expected to exercise sound judgment when ill. Any student who is absent three successive days must supply the instructor with a medical release from a physician before being readmitted to class, lab, or the clinical site.

Any student who is under the supervision of a physician or who is taking medications must make this fact known to the instructor. The instructor must be in a knowledgeable position should an emergency arise.

### **Transportation**

It is the student's responsibility to obtain transportation to and from all activities required by the program for successful program completion. Being late or absent due to transportation issues is not acceptable and will not be excused.

**Students may travel up to 120 miles away for clinical rotations.**

### **Employment**

- We ***strongly*** recommend that students in the Respiratory Care program are not employed more than 20 hours a week while in the program.
- Students must set their priorities regarding school and employment.
- A student who is employed must still meet all of the requirements and objectives of the program.
- Being late for a class or clinical experience, or leaving early because of employment, is not acceptable.
- Students must not work a nightshift and then go to clinic the next day. It is also highly discouraged to work nightshifts the night before class and lab.
- Students must not complete clinical coursework while in an employee status at a clinical affiliate. Students shall not receive any form of remuneration in exchange for work they perform incident to their clinical education coursework and experiences.

### **Snow Day Policy**

- When there is a declared snow day from STLCC, all face-to-face class, lab, and clinical courses will be cancelled.
  - For the clinical courses, students will be excused from clinical and do not have to make up that day.
- If there is a late start declared, all morning face-to-face non-clinical courses will start at 0930.

- If the student is already at a clinical site when the decision is made to cancel class, the student has the decision to stay for the remainder of the day or to leave.
- To be notified of closings, go to [STLCC's safety website](#).

### **College/Campus Closed Policy**

Class and lab schedules adhere to St. Louis Community College's academic schedule. Clinical rotations may be scheduled on days/times that St. Louis Community College is closed, including during semester breaks. If any campus closes due an emergency (i.e. power outage), clinical is not cancelled.

### **Student Records**

The Respiratory Care program faculty allow access of all my departmental records to official site visitors of the Commission for Accreditation of Respiratory Care (CoARC) for accreditation purposes. This access is for the determination of compliance with established guidelines for the administration of the program. Information is utilized for CoARC visitors to assess the program and provide validity or reports sent by faculty.

### **Cell Phones and Electronic Devices**

No phones are allowed in class, lab or clinic. All phones and devices should be **TURNED OFF** prior to entering the classroom, lab or clinic. **Phones should be checked ON BREAK ONLY**. Smart watches, phones, and devices are not allowed during testing. Failure to follow this policy will be considered a student disruption under STLCC's Student Conduct Code and the Professional Conduct and Ethics Code found in this student handbook.

### **Communication**

Preferred method of communication is e-mail via STLCC e-mail accounts as well as Canvas Announcements. STLCC Respiratory Care students are expected to check e-mail and Canvas routinely and respond to faculty and peers in a timely manner.

Canvas may be used for quizzes, exams, announcements, discussions, submitting assignments, and posting grades. It is the student's responsibility to log into Canvas **daily** to stay updated. Once a quiz or exam attempt is completed in Canvas, the score will not be cleared. The student should make sure to utilize a reliable computer with reliable internet when taking quizzes or exams. A student who does not take a Canvas quiz or exam within the dates it is available will receive a zero.

During the semester the instructor will attempt to respond to all student e-mails within a 24-hour period.

- E-mails received on Fridays or holidays may not be responded to until the next regular working day.
- If a technical problem has occurred, and the student does not receive a response within a 24-hour period, the student should resend the message or call the instructor at her office and leave a message with a phone number for the instructor to return the call.



## **Use of Human Subjects in Training and Health Risks**

For the purpose of becoming proficient in skills required by a respiratory care practitioner, students will be asked to volunteer to act as patients during classroom and lab activities. If a student does not feel comfortable acting as a patient for a particular skill(s), it is the responsibility of the student to communicate with the instructor(s) that they do not give consent for the instructor or students to practice the skill(s) on them. Without this communication, it is assumed that all students give consent for instructors and other students to practice respiratory therapy skills on them. It is also assumed that the student understands the risks involved in receiving these interventions.

## **Accidental Injury and Exposure Policy**

In the event of an injury to a student at school or at the clinical education site the following procedure must be adhered to:

1. If a student is accidentally injured or becomes ill while performing clinical education at a recognized St. Louis Community College clinical site, that student may receive emergency treatment in the facility at his/her own expense, and on conclusion of emergency treatment will be referred to the care of their own physician.
2. An Accidental Injury/Exposure report form will be completed by the Program Director or Director of Clinical Education in all situations.
3. It is the student's responsibility to notify program faculty so the appropriate accidental/injury form can be completed.
4. Direct any questions you may have to your clinical instructor or faculty member.

## **APPENDIX A: RESPIRATORY CARE TECHNICAL SKILLS AND COMPETENCIES**

### **Respiratory Care Practitioner's General Job Description**

- Utilizes the application of scientific principles for the identification, prevention, remediation, research and rehabilitation of acute or chronic cardiopulmonary dysfunction thereby producing optimum health and function
- Reviews existing data, collects additional data, and recommends obtaining data to evaluate the respiratory status of patients, develop the respiratory care plan, and determine the appropriateness of the prescribed therapy
- Initiates, conducts, and modifies prescribed therapeutic and diagnostic procedures such as:
  - administering medical gases, humidification and aerosols, aerosol medications, airway clearance therapy, and cardiopulmonary resuscitation
  - providing support services to mechanically ventilated patients
  - maintaining artificial and natural airways
  - performing pulmonary function testing, hemodynamic monitoring and other physiologic monitoring
  - collecting specimens of blood and other materials
- Documents necessary information in the patient's medical record and on other forms, and communicates that information to members of the health care team
- Obtains, assembles, calibrates, and checks necessary equipment
- Uses problem solving to identify and correct malfunctions of respiratory care equipment
- Demonstrates appropriate interpersonal skills to work productively with patients, families, staff and co-workers
- Functions safely, effectively, and calmly under stressful situations
- Maintains composure while managing multiple tasks simultaneously
- Prioritizes multiple tasks
- Accepts directives, maintains confidentiality, does not discriminate, and upholds the ethical standards of the profession

## Essential Functions: Physical and mental standards

The Respiratory Care Program requires agility and strength sufficient to move from room to room, lift and position patients, maneuver in small places, and perform clinical services. Students must possess gross and fine motor abilities as well as auditory, visual, and tactile acuity, which are required to assess health status and perform effective patient care. To achieve the necessary requirements for issuance of an Associate in Applied Science degree in Respiratory Care, the graduate must meet technical skills with or without reasonable accommodations. Students with disabilities who believe that they may need accommodations are encouraged to contact the Access Office to ensure that such accommodations are implemented in a timely fashion. See the chart below for specific requirements by the Respiratory Care program.

Frequency:     O = Occasionally (1-33%)     F = Frequently (34-66%)     C = Constantly (67-100%)

<b>Physical Stamina Required (Description)</b>	Frequency	Specify need for accommodation
<i>Lift</i> - up to 50 lbs. to assist moving patients, supplies, equipment.	F	
<i>Lift</i> - up to 200 lb. when moving patients	O	
<i>Stoop</i> - adjust equipment.	F	
<i>Kneel</i> - manipulate equipment, perform CPR, plug in electrical equipment	O	
<i>Reach</i> - overhead lights, equipment, cabinets, attach oxygen to outlets, stocking	C	
<i>Motor skills, manual dexterity</i> – small and large equipment for storing, moving; apply sterile gloves; take BP; operate computers; perform CPR; utilize syringes, tubes, catheters; set up and maintain sterile field	C	
<i>Stand</i> for prolonged periods of time (to deliver therapy, check equipment and patient; perform surgical procedures).	C	
<i>Climb Stairs</i> to respond quickly to an emergency on another floor when elevators are unavailable or full.	O	
<i>Feel</i> - palpate pulses; perform physical exams; feel arteries or veins for puncture; assess skin temperature.	C	
<i>Push/Pull</i> large wheeled equipment, i.e. mechanical ventilators, wheelchairs, patients, x-ray, equipment, EKG machines, and office equipment.	C	
<i>Walk</i> for extended periods of time.	C	
<i>Walk quickly or run</i> to respond to emergency calls or assist in critically ill patient transports	O	
<i>Manipulate</i> - knobs, dials associated with diagnostic or therapeutic devices; small instruments, syringes.	C	
<i>Respond</i> - verbal directions, alarms, telephone; hear through a stethoscope for heart sounds, lung sounds, and blood pressure.	C	
<i>Assess</i> - patient conditions such as skin color, work of breathing; read small print and calibration on equipment; perceive color.	C	
<i>Communicate</i> - goals and procedures to patients in English.	C	
<i>Communicate</i> - pertinent information (patient assessment, outcome assessments) in English.	C	
<i>Comprehend</i> - typed, handwritten, computer information in English.	C	
<b>Mental Attitude (Description)</b>		
Function safely, effectively and calmly under stressful situations.	C	
Maintain composure and concentration while managing multiple tasks simultaneously.	C	
Prioritize multiple tasks.	C	
Social skills necessary to interact with patients, families, co-workers - of the same or different cultures; respectful, polite, discrete; able to work as a team.	C	
Maintain personal hygiene consistent with close contact during direct patient care.	C	
Display actions, attitudes consistent with ethical standards of the profession.	C	
<i>Exposure to blood borne pathogens</i> – Hepatitis, HIV.	F	

## Respiratory Care Program Required Performance Evaluations

The graduate's performance requires demonstration of the knowledge, ability, and initiative to perform as a Respiratory Therapist as outlined in the general job description. To achieve the necessary requirements for issuance of an Associate in Applied Science degree in Respiratory Care, the graduate must perform all required competencies in lab and clinic with or without reasonable accommodations.

Hand washing and Isolation Procedures	Arterial Puncture
Vital Signs and Pulse Oximetry	OPA Insertion and Manual Resuscitation
Auscultation	NPA Insertion and NT Suctioning
Advanced Physical Assessment	Assisting Intubation
CXR Interpretation	Endotracheal Suctioning
Oxygen Supply Systems	Extubation
Oxygen Administration	Tracheostomy Care
Small Volume Nebulizer Therapy	Initiation/Monitoring Non-Invasive Ventilation
MDI Administration	Initiation of Volume Control
DPI Administration	Initiation of Pressure Control
Humidity and Aerosol Therapy	Initiation of Pressure Support
Chest Percussion and Postural Drainage	Monitoring Mechanical Ventilation
Positive Expiratory Pressure Therapy	Ventilator Graphics Analysis
HFCWO (Vest) Therapy	Spontaneous Breathing Trial
Incentive Spirometry	

## **APPENDIX B: BLOODBORNE PATHOGEN EXPOSURE CONTROL**

It is the policy of St. Louis Community College that faculty, students, and staff will utilize OSHA (Occupational Health and Safety Administration) guidelines to minimize contact with Hepatitis B Virus (HBV), Human Immunodeficiency Virus (HIV), and other bloodborne pathogens. It is also the policy of the College that exposure incidents involving blood or other potentially infectious materials, which occur as a result of College activities, will be reported for appropriate follow up, in accordance with administrative procedures.

Bloodborne pathogens are infectious microorganisms present in blood that can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV), hepatitis C virus (HCV), and human immunodeficiency virus (HIV), the virus that causes AIDS. Those exposed to bloodborne pathogens are at risk for serious or life-threatening illnesses.

Faculty, students, and staff must implement the use of universal precautions treating all human blood and OPIM (other potentially infectious materials) as if known to be infectious for bloodborne pathogens.

Faculty, students and staff must identify and ensure the use of practices that reduce the possibility of exposure by changing the way a task is performed, such as appropriate practices for handling and disposing of contaminated sharps, handling specimens, handling laundry, and cleaning contaminated surfaces and items.

Faculty, students and staff must use personal protective equipment (PPE), such as gloves, gowns, eye protection, and masks to prevent blood or other potentially infectious material from passing through or contacting clothing or skin, eye, mouth, or other mucous membranes. Although this equipment is meant to reduce the risks of exposure, it may not eliminate it.

### **Procedure in Case of Exposure Incident Involving Student in Health Science Programs:**

Any student who has an exposure incident during training or clinical practice should:

1. Notify his/her clinical instructor and assigned faculty member IMMEDIATELY.
2. Follow the clinical site's protocol for bloodborne pathogen exposure incidents. If the student is unaware of the protocol, the student should wash exposed skin with soap and water and/or flush exposed mucous membranes with water and seek further direction from the clinical instructor and assigned faculty member.
3. Complete the clinical site's injury/exposure incident report form.
4. If possible, retain a copy of the clinical site's injury/exposure incident report and submit a copy of the report to the assigned faculty member. If the report includes the names of any clinical site patients, those names should be deleted or blacked-out to protect patient confidentiality, before the report is submitted to the assigned faculty member.
5. Complete a College Bloodborne Pathogen Exposure Incident Report Form carefully and accurately describing the circumstances and details of the exposure and submit that report to the faculty member within two (2) business days of the exposure incident.
6. Read and sign the "Post-Exposure Acknowledgement Form".

7. SEEK MEDICAL ATTENTION FOR IMMEDIATE TREATMENT/TESTING/FOLLOW-UP.  
Students are responsible for all costs associated with their treatment/testing/follow-up.
8. Direct any questions to your clinical instructor or faculty member.

***St. Louis Community College  
Respiratory Care Program***

***VERIFICATION OF READING AND UNDERSTANDING  
STUDENT HANDBOOK***

I have read the “*Student Handbook*” for St. Louis Community College’s Respiratory Care Program. These guidelines were also explained to me verbally by the program faculty. I understand that these guidelines will be adhered to during the program.

I have read the Technical Standards of the Respiratory Care Program and understand that I must meet the technical skills and competencies with or without reasonable accommodations in order to succeed in the Respiratory Care Program.

I understand that any new or changed policies will be made known to me at the beginning of each course or in that course syllabus and that the most current policy will apply. I understand that it is my responsibility to ascertain understanding of the current policies.

I also understand that violation of these policies will jeopardize my standing in the program and may result in dismissal. I agree to keep a copy of the Student Handbook for the Respiratory Care Program for reference.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_