



**THE OHIO STATE
UNIVERSITY**

**SCHOOL OF HEALTH AND
REHABILITATION SCIENCES**

**DIVISION OF RESPIRATORY THERAPY
STUDENT HANDBOOK**

2022- 2023

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I. INTRODUCTION

Purpose & Audience

This handbook outlines the requirements for students in the professional Respiratory Therapy Education Program at The Ohio State University. It is a companion volume to the School of Health and Rehabilitation Sciences' Student Handbook and the University's Code of Student Conduct. It is intended for Ohio State University undergraduate students pursuing a Bachelor of Science in Respiratory Therapy. This handbook is revised annually, and the most recent edition replaces all previous editions. The RT Education Program reserves the right to implement revised or newly created policies at any time it determines them to be necessary.

The Respiratory Therapy Division was established in 1971 to prepare hospital department managers, community college faculty, clinical specialists, and future professional leaders for the developing allied health field called "inhalation therapy." More than 620 alumni have led the development of the profession now known as respiratory care. As respiratory care has continued to evolve, the mission of the division has evolved also. As the responsibilities of therapists and the scope of licensing and registration examinations have expanded, the undergraduate curriculum has expanded, transferring the preparation of managers and educators to the Masters degree level.

Respiratory care has expanded within and beyond the traditional hospital setting with long term acute care, sub-acute care, home care, and nursing home care as primary examples. Health promotion and disease prevention, especially smoking cessation and prevention, and cardiopulmonary fitness, are part of the scope of practice of many therapists. The roles of therapists have expanded, especially in community hospitals, where respiratory therapists are often multi-competent professionals with responsibilities beyond the traditional scope of practice. Therapists who work in these hospitals may perform electroencephalograms, sleep disorder diagnostics, peripheral vascular perfusion studies as well as other non-respiratory services.

The **MISSION** of the Respiratory Therapy Division is to impact the advancement of the profession through leadership in teaching, research, and service. Specifically.....

- Provide a model undergraduate respiratory care educational program and develop graduate studies for respiratory therapists.
- Engage all faculty and students in research and scholarly activity.
- Provide state and national leadership for the respiratory care profession and professionally related community outreach activities.

It should be a goal of every OSU student and alumnus to assist in the evolution of the profession. The Respiratory Therapy Division, curriculum, and this Student Handbook have been developed with this ideal in mind.

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III. FACULTY EXPECTATIONS

Commitment.

Students are expected to dedicate the time and energy necessary to successfully complete all academic assignments and projects, to learn what is required to become a competent respiratory therapist, and to achieve the goals of the program.

Attendance.

Students are expected to attend all respiratory therapy classes, laboratories, and clinical sessions. Penalties apply to unexcused absences.

Professional Demeanor.

Students are expected to project a professional image as outlined in the SHRS Student Handbook, including appearance, confidence, respect and courtesy, self-control, initiative, dependability and reliability, honesty, punctuality, and responsibility.

Ethical Concern.

Students are expected to consider foremost the well-being and safety of their patients, to obey all pertinent laws and regulations, and to abide by the HRS and University Student Codes.

Academic Integrity & Competency.

Students are expected to master each major subject in the curriculum.

Laboratory Competency.

Students are expected to rehearse and satisfactorily demonstrate the skills necessary for competent and safe clinical practice in pre-clinical laboratory simulations.

Clinical Competence.

Students are expected to demonstrate the knowledge, skills, and attributes of the advanced respiratory care professional.

Course Grades.

Students are expected to earn C- or better grades in all courses required for graduation.

IV. ESSENTIAL FUNCTIONS & PROFESSIONAL EXPECTATIONS

Any student who cannot meet each of the Essential Functions with or without accommodation cannot be enrolled in the Respiratory Therapy education program.

- If a student believes they may require accommodation(s) in order to meet these requirements, they must have their need for accommodation validated through the OSU [Office for Disability Services](#) (150 Pomerene Hall, 614-292-3307). ODS works jointly with students and the Respiratory Therapy Division to explore accommodation options.
- Accommodation(s) may not be possible in some cases, and it may not be possible to provide some accommodations on short notice.
- Students are responsible for informing their instructors about needs for accommodation for courses or clinical rotations. Accommodation requests must be made in a timely fashion to permit adequate time to arrange the accommodation.

The Essential Functions for the Respiratory Therapy Division are the skills and competencies required of a respiratory therapist student who is expected to:

- Assess patients' need for respiratory therapy by interviewing patients, performing limited physical examinations, reviewing existing clinical data, and recommending the collection of additional pertinent data.
- Perform cardiopulmonary diagnostic procedures, calculate test results, determine reliability, perform quality control, and evaluate implications of test results.
- Evaluate all clinical data to determine the appropriateness of the prescribed respiratory care, to participate in the development of the respiratory care plan, and to provide care using clinical patient care protocols.
- Select, assemble, and check for proper function, operation, and cleanliness of all equipment used in providing respiratory care.
- Be responsible for the transportation, set-up, calibration, maintenance, and quality assurance of respiratory care and pulmonary function testing equipment.
- Initiate and conduct therapeutic procedures, evaluate treatment efficacy, and modify prescribed therapeutic procedures to achieve one or more specific objectives in acute care, intensive care & life support, continuing care, and rehabilitation settings.

Some of the activities required of students in respiratory therapy include performing chest compressions during cardiopulmonary resuscitation, deflating a bag while securing a face mask, identifying labels on medication vials, recognizing monitor alarms, obtaining arterial blood using a syringe and needle, using computer keyboards, communicating by telephone, travel between patients' rooms, and in emergency situations, therapists must respond and react quickly under stress. See "Technical Standards Self Evaluation" at https://ckm.osu.edu/sitetool/sites/hrsrespiratorytherapypublic/documents/RT_Essentials.pdf for a self-test.

- Act as an assistant to the physician with special procedures such as bronchoscopy, invasive cardiovascular monitoring, insertion of chest tubes, etc.
- Demonstrate professional attributes of a member of the health care team including appropriate levels of confidence, cooperation, empathy, independence, initiative, judgment, maturity, organizational skills, ethics, and dependability;
- Respect and obey all pertinent laws and regulations and abide by the Code of Ethics;
- Maintain confidentiality and accuracy of patient records and communicate relevant information to other members of the health care team;
- Project a professional and healthful image, including: appearance, courtesy, respect, self-control, honesty, punctuality, and responsibility.

V. GOALS & OUTCOMES OF THE UNDERGRADUATE CURRICULUM

The **GOALS** of the undergraduate major in Respiratory Therapy are:

1. 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) and as professional members of the health care team as defined by the “Essential Functions and Professional Expectations.”
2. To prepare leaders for the field of respiratory care by including curricular content that includes objectives related to acquisition of skills in one or more of the following:
 - Contribute to the health care team's knowledge and understanding of the science of respiratory care by promoting evidence-based medicine, research, and clinical practice guidelines.
 - Assume expanded or specialty roles in respiratory therapy or cardiopulmonary care, or assume titled positions related to education or management.
 - Enroll in and be successful in graduate studies related to respiratory care or health sciences, administration, or education.

The expected **OUTCOMES** of the undergraduate major in Respiratory Therapy include at least 90% of graduates:

- Earn the credentials Certified Respiratory Therapist (CRT) and Registered Respiratory Therapist (RRT) or equivalent specialty credentials in pulmonary function technology, polysomnography, or neonatal-pediatrics.

- Provide positive responses on New Graduate Satisfaction Surveys,
- Obtain a post-graduate respiratory therapy related position,
- Receive positive responses on Employer Satisfaction Surveys,
- Declare leadership activities on alumni surveys, including job titles, professional service activities, continuing education, research, and community service.

VI. THE ACADEMIC PROGRAM

Schedule of Courses. The Respiratory Therapy curriculum plan for students enrolling in the RT major courses Autumn Semester, 2022 is presented below. Tentative class, lab, and clinical assignments for each semester are available for Au'22 through Sp'24 "For Current Students" at <http://go.osu.edu/respiratorytherapy> These are for planning purposes and are subject to change. The link to the curriculum guide is provided [here](#).

Begin Professional Coursework

YEAR 3					
Autumn	Credits	Spring	Credits	Summer**	Credits
RT 4320 Resp Health & Disease	4	RT 4489 Clinical Phase 1	2	RT 4589 Clinical Phase 2	8
RT 4400 Basic Resp Care	5	RT 4475 Mechanical Ventilation	5	HTHRHSC 5300	3
RT 4410 Clinical Resp Care	4	RT 4500 RT for Special Populations	5	Total	11
RT 4430 Eval of Resp Function	5	RT 4515 Intensive Resp Care	3		
Total	18	HTHRHSC 5510	2		
		Total	17		
YEAR 4					
Autumn	Credits	Spring**	Credits	Notes	
RT 4689 Advanced Clinical 1	2	RT 4789 Advanced Clinical 2	5	**Terms below full-time credits.	
RT 5525 Teaching/Learning RT	2	RT 5520 Issues in Resp Care	2		
RT 5600 Resp Care Research	2	RT 4593 Individual Studies	3		
RT 4895 Seminar	1	Total	10		
RT 4593 Individual Studies	2				
HTHRHSC 5500	4				
HTHRHSC 4200	3				
Total	16				

Program and Related Costs. In addition to tuition and fees, estimates of extra program costs are listed below.

	<u>JUNIOR</u> <u>LEVEL</u>	<u>SENIOR</u> <u>LEVEL</u>
Books	\$400	\$400
Uniforms / Clinical Clothing	80	25
Equipment / Instruments:	70	0
Malpractice Insurance	0	0
National Boards	0	125
Vaccinations / Immunizations	150	25
Travel for clinical training (estimates)	617 miles (@ .405/mi =\$250)	1234 miles (@ .405/mi = \$500)
Total	\$975	\$1075

To participate in clinical courses, students are required to purchase a stethoscope (approximately \$70), a white clinic jacket (approximately \$25 each) and enough scrub suits (approximately \$36 each). Students will need a clinic jacket for Resp Ther 4410, Autumn Semester. Medical liability and malpractice insurance is provided by OSU.

Students are responsible for their own transportation, parking, meals, etc while on clinical assignments. In addition, students are required to have health insurance as a condition of enrollment at OSU and are strongly encouraged to subscribe to the University's Student Health Insurance Plan, if not already covered by other health insurance.

Financial Aid. All OSU students may be eligible for aid offered through the University's Student Financial Aid Office, Lincoln Tower, 1800 Cannon Drive, 292-0300. Some scholarships, grants, fellowships, and literary prizes are offered nationally and locally for students within the profession. The Ohio Society for Respiratory Care, the American Lung Association of Ohio, the American Respiratory Therapy Foundation, and the Cystic Fibrosis Foundation have provided financial aid specifically for respiratory therapy students. Some hospitals offer scholarships for respiratory therapy students. Further information may be obtained from your academic advisor or Program Director.

Registration, Scheduling and Advising. Upon enrollment in the Respiratory Therapy Division, students are assigned a faculty academic advisor who will assist in planning and monitoring their progress throughout the program. During the first semester, students should complete an outline of university degree requirements form and review it with their advisor.

Students who have previously earned a bachelor's degree should consult with their advisor at the beginning of their first semester to decide between a second bachelor's degree or a post-baccalaureate certificate of study. To earn a certificate a student must complete all program prerequisites and requirements as specified in this Handbook. To earn a second bachelor's degree a student must also complete all GE requirements in effect at the time of enrollment in the School of Health and Rehabilitation Sciences. Students should consult with their academic advisor before deciding.

Students will receive registration materials (personal access codes and scheduling "window" times) via OSU e-mail accounts and at their local address from the OSU Office of the

University Registrar. Information on registration can be found at the University Registrar's website www.buckeyelink.osu.edu Drop/add forms, petitions and other information can be obtained from the SHRS Student Services Office. To facilitate future registrations, students should notify the Respiratory Therapy Division as well as the Office of the University Registrar of any address changes.

Grading Policies.

Attendance. Penalties apply to unexcused absences and excessive late arrivals. Final course grades will be reduced 1% for each unexcused absence or excessive late arrival. Faculty keep attendance records and students must present a reason for their absence.

When students must miss a class, laboratory or clinical session, there are several things they must do. First, contact both their instructor or the clinical site; it is always easier to be excused before a class than afterwards. Second, read over another student's notes; third, check your mailbox for any handouts. Finally, make an appointment to see the instructor for clarifications, questions, etc. or make arrangements to make up missed clinical time.

Grading Scale. This grading scale will be employed in all graded respiratory therapy courses:

A = > 93%	B+ = 87-89%	C+ = 77-79%	D+ = 67-69%
A- = 90-92%	B = 83-86%	C = 73-76%	D = 61-66%
	B- = 80-82%	C- = 70-72%	E = 60%

Examination Scoring. Faculty use a criterion referenced grading system and do not Acurve examination results. Based upon the results of item analysis, an instructor may delete one or more items from an examination. All objective-type Respiratory Therapy examination scores will be uniformly determined in the following manner:

$$\text{Net \%} = \frac{\text{RAW SCORE}}{\text{NUMBER ASKED minus NUMBER OF DELETED ITEMS}} \times 100$$

Minimal Competence. To assure competency, it is imperative that each respiratory therapy student demonstrate a satisfactory level of performance (>70%) on each examination and on each major project, SOAP, paper, or other method of evaluation that is administered by the faculty. Failure to achieve a minimum passing score on a major examination will necessitate repeating an equivalent evaluation covering the identical content area and objectives. In the event that any student has two scores below 70 in one semester, the student must visit the services of the [Dennis Learning Center](#) for academic coaching and provide evidence to the Program Director.

Make-up Testing. Consistent with the expectation that students master each major subject, and in the event of an unsatisfactory score, the method of make-up testing shall be an equivalent evaluation at the discretion of the instructor of the course and shall be administered within two weeks following the initial unsatisfactory evaluation.

In Respiratory Therapy courses that have four or more major evaluations, a maximum of two make-up evaluations will be permitted. Examples of major evaluations are midterms, lab practicals, and final exams. In courses that have less than four major evaluations, a maximum of one make-up evaluation will be permitted. The initial failing grade shall be utilized to compute the student's final course grade.

In the event that a student utilizes all make-up opportunities and fails another major evaluation in a course:

- the maximum grade that can be achieved for the course is a D+;
- the course must be repeated before further progression in RT courses.

Late Assignments. Unless prior arrangements have been approved by the course professor, the value of late assignments will be reduced 10% per day.

Laboratory Performance. Students will be required to perform procedures in a laboratory environment that simulates the clinical environment. Satisfactory laboratory evaluations are essential prerequisites to performing procedures on patients. These procedures are components of most courses and are graded. All lab procedures must be performed satisfactorily to successfully complete the course. Laboratory evaluations are scheduled in advance, and they are always preceded by instruction, demonstration and supervised practice. Students should consider their laboratory evaluations as seriously as a midterm examination; study and practice are strongly encouraged. Policies on make-up testing apply. The competencies expected in each course are:

Cylinder Safety & Transport	4400	Tracheostomy & Stoma Care	4500
Pulse Oximetry	4400	Home Ventilators	4500
Oxygen Therapy	4400	Airway Cuff Management	4475
Hyperinflation/PAP Therapy	4400	Weaning Parameters	4475
Medicinal Aerosol Therapy	4400	Endotracheal Extubation	4475
Bland Aerosol / Humidity Tx	4400	Ventilator Preparation &	
Dry Powder Inhaler	4400	Application – Adult	4475
Metered Dose Inhaler	4400	Patient-Ventilator Check	4475
Bronchopulmonary Hygiene	4400	Ventilator Circuit Change	4475
Mask CPAP	4400	Noninvasive Ventilation	4400
Endotracheal suctioning	4410	Initiation of Infant Ventilation	4500
BLS-CPR	4410	Intubation – Infant	4500
Diagnostic Spirometry	4430	Intubation – Adult	4515
Arterial Puncture	4430	Fluid-Filled Pressure	
Radial Artery Cannulation	4430	Monitoring System	4515
Arterial Line Sampling	4430	Bronchoalveolar Lavage	4515

Incomplete Course Grades. Incomplete (I) final course grades shall be reported to the Registrar's Office if satisfactory performances have not been demonstrated by the time that the Office of Records requires that grades be submitted. Since some academic courses are prerequisite to clinical courses, an Incomplete may affect a student's clinical assignments and progress. If satisfactory performance levels have not been demonstrated by the sixth week of the subsequent academic semester, the incomplete (I) shall be changed automatically to failure (E), and the student will be subject to academic disciplinary action.

General Academic Standards & Graduation Requirements. To be eligible for graduation, students must complete the General Education (GE) requirements in effect at the time of their enrollment at OSU and complete each specified course, or its approved equivalent, listed on the curricular academic program. Minimum grades as listed below must be earned. Although the minimum number of credit hours required for graduation from SHRS is 120 semester hours, the Respiratory Therapy major requires 137 credit hours.

The School's policies on Academic Standards, Warnings, Probation and Dismissal are in the HRS Student Handbook. In the context of the School's policies, the Respiratory Therapy Division has categorized the courses in the curriculum as listed below. Failure to meet these grade levels will subject students to review by the Executive Committee of the School for academic warning or probationary action. A student on probation, whose record continues to deteriorate, will be warned that disenrollment from the program is likely if the record does not improve.

Category I - student must achieve C- or better, or S.

HTHRHSC 2500	Biology 1113	Physics 1200
HTHRHSC. 5300	Chemistry 1210	Physics 1201
HTHRHSC 5370	EEOB 2520	Psychology 1100
HTHRHSC 5500	English 1110	Resp. Ther. 4895
HTHRHSC 5510	Mathematics 1148	Resp. Ther. 4593
HTHRHSC 5900	Microbiology 4000	Statistics 1450
Anatomy 2300		

Category Ia - student must achieve C- or better, or S, before progressing in divisional or other sequential courses.

Resp. Ther. 4320	Resp. Ther. 4475	Resp. Ther. 5525
Resp. Ther. 4400	Resp. Ther. 5500	Resp. Ther. 5600
Resp. Ther. 4410	Resp. Ther. 5515	
Resp. Ther. 4430	Resp. Ther. 5520	

Category Ib - students are subject to disenrollment if course grades are less than C- or S.

Resp. Ther.4489, Resp Ther. 4589 Resp Ther. 4689 Resp Ther. 4789

Transfer Credit. Students who have earned credits in Respiratory Therapy from accredited collegiate programs will receive transfer credit and may earn additional credit by examination for academic courses or by documentation of equivalent clinical experiences, either in school or on-the-job. See <http://go.osu.edu/respiratorytherapy> for additional information.

The Senior Project. The Senior paper is written under Respiratory Therapy 4593, "Individual Studies." Students usually enroll for 5 credit hours distributed during 2 semesters of their Senior year. Honors students substitute HRS 4693 H. The primary purpose of the Senior paper and Respiratory Therapy 4593 is to provide a significant writing experience in the major. Additionally, this course provides an in-depth learning in a relevant subject area, experience in time management, analytical thinking, developing proposals, action plans, and evaluations, and in presentation. Senior papers also provide an opportunity for students to contribute to their profession.

For the basis of their Senior Paper, and with the assistance and guidance of a faculty project advisor, students may elect a research, development, or service project. For a research project, the scientific method is followed to investigate or test a hypothesis; a development project creates a tangible product such as an audiovisual program, a model, or other materials; and a service project provides a needed community service. Regardless of the project type, students perform a literature review, write a proposal, conduct the project including analysis of data, submit a draft of their paper to their advisor, utilize feedback to revise their paper, provide a poster presentation to their peers and faculty, and critique the presentations of their peers.

In general, the 5 credits usually follow this sequence:

Semester #1	Semester #2
Autumn	Spring
2 credits	3 credits
Propose & Conduct	& Document

VII. THE CLINICAL PROGRAM.

All SHRS Policies outlined in the Student Handbook apply to clinical education. Clinical experiences provide the opportunity for students to apply what they have learned, to perform the skills they have acquired, to practice their profession under supervision, and to develop as respiratory care professionals. The clinical program consists of almost 1000 clock hours of patient contact in acute care hospitals, long term acute and extended care facilities, laboratories, clinics, and patient's homes. Clinical rotations are designed for students to observe and practice methods of treatment and use equipment in real clinical settings.

Some of the physical competencies that are required by the curriculum include: moving adult patients and equipment, performing chest compressions during cardiopulmonary resuscitation, deflating a bag while securing a face mask, reading labels on medication vials, hearing alarms, using computer keyboards, and communicating by telephone. These competencies require mobility, manual dexterity, strength, vision, hearing, and speaking. Students who may require special accommodations should consult with the Office of Disability Services on campus to determine appropriate and reasonable accommodations.

Experiences include patient assessment, performing diagnostic electrocardiograms, pulmonary function tests, and arterial blood gas analysis, providing respiratory care and ventilatory life support, and patient monitoring. Students develop skills to assess patient needs, implement appropriate therapy, and evaluate patient outcomes.

The Senior clinical practicum provides experiences beyond entry level in cardiopulmonary rehabilitation, neonatal/pediatric care, cardiopulmonary diagnostics, adult intensive care, long term acute and continuing care, polysomnography, education, and administration.

Clinical Affiliates

The Respiratory Therapy Division affiliates with a variety of healthcare organizations for clinical education. While junior-year clinical experiences are usually concentrated among several local sites, elective experiences for seniors may be available at our affiliates throughout Ohio and the United States. Students must not complete clinical coursework while in an employee status at a clinical affiliate.

Academic & Clinical Prerequisites

Each clinical course has specific academic and clinical prerequisites that must be completed prior to receiving clinical assignments. Students must be in good academic standing and compliant with other clinical requirements to progress to clinical experiences. If students receive an Incomplete in an academic course, they should make every effort to complete the course requirements as soon as possible so that clinical experiences can proceed as scheduled.

Professional Liability Insurance

The affiliation agreements with the hospitals require medical liability and malpractice insurance coverage for participation in the clinic rotations. Medical liability and malpractice insurance is being provided by The Ohio State University for all undergraduate students at no additional cost to students.

Student Health and Screening Requirements

A satisfactory health evaluation by the University's Student Health Center or a private

physician is required of all new students. An annual drug test and background check are also required (specifics provided by the program at the time testing is required). Some clinical sites require verification of student's health and immunization records. Students must be fully compliant with all immunizations and tests prior to the start of clinical experiences and maintain ongoing compliance throughout the clinical program. Compliance with immunizations is determined by Student Health Services. Some clinical facilities offering elective experiences may have student health requirements that are in addition to those required of all students. Any associated expenses are the responsibility of the student.

Students are required to have personal health insurance to participate in clinical education. Students are strongly encouraged to subscribe to the University's Student Health Insurance Plan, if not already covered by other health insurance. Each student must submit proof of health insurance coverage to the Director of Clinical Education prior to beginning of clinical experiences. Insurance coverage must be in effect through graduation.

Clinical Costs and Transportation

Students are responsible to pay for their own housing, meals, and parking while in an assigned clinical facility. Each student is responsible for his or her own transportation to clinicals and is accountable individually for tardiness or absence when carpools are utilized.

Treating Patients in the Clinical Setting

Due to the inherent risks associated with providing care for some hospitalized patients with infectious diseases, respiratory therapy students must follow Standard Precautions (gloves, masks, gowns, eye shields) when there is any potential for contact with body fluids.

Students should not attempt to provide a treatment or to use equipment they have not been trained to apply on a patient in the clinical setting. Students who feel uncomfortable about attempting an assigned task should always consult a clinical instructor/preceptor or course instructor for assistance and/or supervision. Students who manipulate equipment or attempt treatment using methods and skills for which they have not received training or certification by Division faculty will be held personally liable should an accident or injury occur. Students shall not receive any form of remuneration in exchange for work they perform during programmatic clinical coursework.

Student Responsibilities in Clinical Affiliates (From Affiliation Agreements)

1. Students shall perform services for patients only when under the supervision of a registered, licensed, or certified therapist.
2. Students shall purchase professional liability insurance from a private firm and provide proof of insurance coverage to the **SCHOOL**.
3. Students shall provide evidence of a health status report and/or a negative 2-step tuberculin test (PPD) or negative chest x-ray taken within twelve (12) months prior to the clinical practice period.
4. Students shall possess health insurance either through the **SCHOOL** or an

individual policy and provide proof of insurance coverage to the **SCHOOL**.

5. Students shall provide their own transportation to and from the **FACILITY** as well as any maintenance, meals or lodging during the field practice.
6. Students agree to abide by the existing rules, regulations, policies, and procedures of the **FACILITY** as provided to the student.

Attendance

Attendance is required for all clinical assignments. Students are expected to be present in the clinical facility, dressed appropriately and ready to participate in the clinical activities at the time, and for the duration, specified by the Director of Clinical Education and the clinical faculty.

Hours of Attendance

Most clinical rotations are scheduled within a 7:00 AM to 5:00 PM time frame. However, so that students' opportunities are well matched with appropriate patients and procedures in the rotations, other schedules may be required. Some clinical days may start earlier than 7:00 AM or extend later than 5:00 PM. Evening or night rotations may also be required.

Absences

The faculty recognizes that a student may infrequently find it necessary to be absent from a clinical activity, due to unforeseen problems or illness. Provided that all clinical objectives are completed, absences may be excused for **legitimate reasons** up to 10% of the scheduled time for each clinical rotation.

If a student must be absent from a clinical assignment, he/she must notify the clinical instructor at the clinical facility and the Division office **at least 15 minutes before** the scheduled time to give the clinical facility time to reassign patient care to other students or staff. Failure to follow this procedure will result in an **UNEXCUSED ABSENCE**; the day missed will be rescheduled at the convenience of the clinical preceptor, and "Unsatisfactory" ratings for "Dependability" and "Communication" may result. Students must report the reason for any absence to the faculty member responsible for the clinical course as soon as they return to classes. Failure to make-up rescheduled clinical time before the last regularly scheduled clinical assignment for the semester will result in an "Unsatisfactory" rating for attendance.

Tardiness

Students who are more than 15 minutes late for a scheduled clinical activity must notify the clinical instructor at the clinical facility that they will be delayed. Failure to follow this procedure may result in the student being sent home; the day will be recorded as an unexcused absence; the day missed will be rescheduled at the convenience of the clinical preceptor; and "Unsatisfactory" ratings for "Dependability" and "Communication" may result.

Professional Apparel and Appearance

Students are expected to maintain a neat and clean professional appearance while in any clinical setting. Whenever in a clinical area, including those occasional instances in which classes or laboratory sessions are scheduled at a clinical facility, students may be required to

wear a short white lab jacket with an identification badge and the School patch affixed on the breast pocket. Some clinical rotations will require business casual dress. Blue jeans, short skirts, open-toed or open-backed shoes and mid-riff baring shirts are always considered inappropriate in every clinical facility. Appropriate apparel for many clinical rotations includes surgical scrubs, purchased by the student. Students will need to wash hands and arms up to the elbow which prohibits wearing long sleeves.

For safety reasons, long hair must be restrained. Cultural or religious head coverings may not be loose or flowing and allow for proper use of stethoscope and face masks. For infection control, fingernails must be clean and short; artificial nails are specifically prohibited. Students should not wear an excessive amount of jewelry or rings which may cause transmission of bacteria between patients or ineffective hand washing. For the student's protection, pierced earrings should be limited to non-dangling post styles, and loose-fitting necklaces should be kept under clothing. Other forms of visible body piercings and visible tattoos are discouraged in the clinical environment and may be prohibited at individual clinical facilities. Excessive use of cologne, perfume or make-up is discouraged; many patients with hyperactive airways are allergic to colognes and perfumes.

When assigned to patient care areas, a stethoscope is required. Other items including scissors, a ball point pen, a small pocket notebook, a small penlight flashlight, and a pocket calculator are sometimes valuable, but these are not required. Students who do not follow these guidelines are considered not prepared for their clinical experience and may have to leave the clinical facility for the day. This would be considered an unexcused absence, subject to the policies described above.

Cell phones are strictly prohibited in clinical rotations. Permission to carry a cell phone during clinical rotations will only be granted in cases of emergency and is at the discretion of the clinical coordinator.

Clinical Confidentiality

Records and personal information regarding patients are STRICTLY CONFIDENTIAL. No student should ever privately or publicly disclose any information about individual patients to anyone including the patient himself. Students must always be on guard as to when and where it is appropriate to discuss questions about individual patients. Health Information Privacy and Portability Act (HIPPA) guidelines must be followed in every clinical rotation. HIPPA training must be completed prior to clinical rotations in Respiratory Therapy 4400 and 4430 (Jr).

Students who are questioned by a patient or relative about the treatment or condition of a patient should never attempt to answer but direct the person requesting the information to the patient's physician or appropriate hospital personnel. Discussion of patient status, pre and post-clinical care, etc. should be limited to conferences, reports, and case presentations as assigned.

Clinical Evaluation and Grading

To satisfactorily complete clinical courses, students are required to:

1. Attend clinical sessions as scheduled.

2. Demonstrate a minimum of a "Satisfactory" rating of clinical competence for specific procedures.
3. Complete the clinical activities designated for the course.
4. Pass written examinations.
5. Complete course assignments.
6. Achieve a minimum of a "Satisfactory" rating of professional behaviors.

Letter grades are determined from written examination scores, course assignments, ratings of clinical competency and professional behaviors.

Respiratory Therapy 4689 and Respiratory Therapy 4789 are graded on a Satisfactory/Unsatisfactory basis. There are three components considered when determining these clinical course grades: the attendance record, the clinical objectives, and affective evaluation.

Students are responsible for maintaining their clinical records and completing evaluations of their clinical rotations. Students are also responsible for completing required forms and returning them to the faculty liaison for the clinical course. **Intentional falsification of clinical experience records will result in academic and professional disciplinary action.**

Chain of Command

In all situations students are governed by University, School, Division and particularly hospital policy. In all cases, students are responsible to their designated clinical instructor/preceptor. All questions and comments regarding the clinical activities, policies or personnel should be directed first to the clinical instructor/preceptor. The next highest authority is the course instructor/coordinator, the Director of Clinical Education, followed by the Program Director.

The Affective Evaluation and Professional Attributes.

The Affective Evaluation of professional behaviors contributes to clinical course grades, and 22 expected professional attributes are defined below.

Student Attributes	O	S	U
Sensitive to and respect for the personal needs of others (Sympathetic, Understanding, Insightful, Perceptive, Considers modesty)			
Compassionate (Empathetic, Sympathetic)			
Tolerant (Accepting, Patient, Non-judgmental)			
Has personal demeanor (Likable, Friendly, Warm)			
Communicates concisely and appropriately (Succinct & direct reporting of patient condition, Not verbose, Communicates appropriate information, Applies confidentiality, Uses appropriate medical terminology)			
Tactful (Diplomatic, Thoughtful, Judicious)			
Flexible in adapting to clinical assignments (Adaptable, Compliant)			
Efficient planning and management of time (Completes assignments on time, Is able to prioritize work)			
Confident in abilities (Self-assured, Poised, Not arrogant)			
Respectful of authority (Follows chain of command, Accepts assignment without complaining, Accepts constructive criticism)			
Controls stress (Maintains composure, Contains emotion in a stressful situation)			
Shows initiative in seeking out new responsibilities (Ambitious, Driven)			
Self-directed (Able to function with minimal supervision)			
Motivated for continued learning (Initiates learning activities which enhances or enriches clinical performance)			
Has sense of humor when appropriate (Witty, able to put people at ease using humor)			
Courteous (Considerate, Polite, Kind)			
Has professional appearance (Well-groomed, Neat, Clean, Adheres to the facility's dress code)			
Honest in interaction with patients and staff (Displays integrity, Forthright, Sincere, Applies discretion)			
Dependable/Reliable (Completes assignments with minimal direction, Trust worthy, Credible, Responsible)			
Punctual (Is on time, Prompt)			
Responsible for actions (Admits mistakes, Is accountable for assigned work)			
Willing to learn (Participates in learning activities which enhances or enriches clinical performance)			

To receive a passing score in a clinical rotation, students must receive a minimal rating of “Satisfactory” in all attributes. An “Unsatisfactory” rating in any attribute on the final evaluation will result in a maximum grade of “D+” for the course.

VIII. DIVISION / SHRS FACILITIES.

Lockers. Lockers are available in the hallway across from room 431 Atwell Hall and will be assigned to each student upon request. Students should contact the division locker coordinator for a locker assignment. Only combination locks allowed.

Laboratories. The Respiratory Therapy Division maintains three teaching laboratories, rooms 428, 436 and 440 Atwell Hall. Room 440 includes a refrigerator, coffee maker, and microwave oven for student use as long as students who use it clean it. The laboratories are available to students at any time when laboratory classes are not in session. Students are encouraged to study and practice in the laboratory!

Computer Lab. SHRS maintains a 26 station student computer lab on the 4th floor and a 6 station lab on the second floor. Students are encouraged to use these facilities whenever available. These labs provide students with access to their e-mail, the University's web page and information systems, and the internet.

Telephones. Students are not allowed personal use of the telephones in the Division, except for educational business such as communicating with clinical faculty, preceptors, and affiliates.

Academic Records. Official University records are maintained in the SHRS Student Affairs Office and the University Registrar. Student files in the Division office contain all the exams and evaluation forms which remain the property of The Ohio State University. To assure confidentiality, students may only access these materials with permission of the faculty.

IX. THE RESPIRATORY CARE PROGRAM AND PROFESSION

Accreditation

The Ohio State University is accredited by the Higher Learning Commission.

<https://www.hlcommission.org/component/directory/?Action=ShowBasic&Itemid=&instid=1584&lang=en>

The Respiratory Therapy baccalaureate program at The Ohio State University, Columbus, Ohio has continued accreditation from the Commission on Accreditation for Respiratory Care (CoARC). Our program number is 200167. To view the CoARC Outcomes please visit [CoARC Outcomes Data](#).

Commission on Accreditation for Respiratory Care

CoARC

264 Precision Blvd

Telford, TN 37690

USA

TELEPHONE: 817-283-2835

FAX TO PLAIN PAPER: 817-354-8519

FAX TO EMAIL: 817-510-1063

www.coarc.com

Respiratory therapists are licensed health professionals governed by 3 organizations: The Ohio

Respiratory Care Board (ORCB) for state licensing, the National Board for Respiratory Care (NBRC) for voluntary credentialing and the American Association for Respiratory Care (AARC) for professional standards and advocacy.

Ohio Medical Board. To be employed to provide respiratory care services in Ohio, a License or Limited Permit from the State Medical Board of Ohio is required. Information on the State Medical Board of Ohio is available on-line <http://www.med.ohio.gov>

The legal scope of practice is defined by Section 4761 of the Ohio Revised Code.

A) "Respiratory care" as employed in Chapter 4761. of the Revised Code, means engaging in respiratory care, as defined in division (A) of section 4761.01 of the Revised Code, as a clinician, an educator, a manager, and/or a consultant, excluding activities related to equipment maintenance, cleaning, and delivery.

(B) "Instructing in the use of medical gases" as it is used in division (A)(2) of section 4761.01 of the Revised Code, means the direct or indirect use of educational material, communicated in writing or otherwise, that explains the clinical indications or contraindications concerning a patient's prescription for a medical gas.

(C) "Administering of medical gases" as it is used in division (A)(2) of section 4761.01 of the Revised Code, means the direct application and quantitative adjustment of a medical gas to a patient regardless of the device used to administer the gas.

(D) "Monitoring and recording the results of medical gases" as it is used in division (A)(2) of section 4761.01 of the Revised Code, means assessing, evaluating and documenting the use of a medical gas, including measurements of fractional inspired concentrations, flow and volume; and a patient's physiologic or clinical response to a medical gas, including invasive or noninvasive sampling of blood or gas samples.

(E) "Any service" as it is used in division (A) of section 4761.01 of the Revised Code, means any practice performed by a competently trained licensed respiratory care professional or permit holder involving the evaluation of cardiopulmonary function, the treatment of cardiopulmonary impairment, the assessment of treatment effectiveness and the care of patients with deficiencies and abnormalities associated with the cardiopulmonary system.

(F) "Aspiration" as it is used in division (B)(1) of section 4761.10 of the Revised Code, means to remove bodily fluids or mucous from the pulmonary airway by means of a suction device. Included suctioning procedures are naso-pharyngeal, oral-pharyngeal, tracheal, and bronchial. Oral suctioning and suctioning of secretions external to the airway will not be considered aspiration as this term is defined in this rule.

The State Medical Board of Ohio will issue a **Limited Permit** to students who are enrolled and in good standing in an accredited respiratory therapy educational program after the student has satisfactorily completed the first clinical practice experience in Spring semester and demonstrated mastery on the Basic Therapy SOAP assignment that semester. OSU respiratory therapy students may be eligible for a Limited Permit at the completion of basic therapy clinical rotations during RT 4489. Academic or professional probationary actions void a Limited Permit. Permits are renewable given evidence of annual progress toward graduation.

National Board for Respiratory Care. The NBRC administers credentialing examinations, including the state licensing exam. Information on the NBRC is available at <http://www.nbrc.org/>

American Association for Respiratory Care. Students are expected to become student members of the AARC which includes membership in the Ohio Society for Respiratory Care. The AARC is on line at <http://www.aarc.org/>

State Authorization

Ohio State academic programs are designed to prepare students to sit for applicable licensure or certification in Ohio. If you plan to pursue licensure or certification in a state other than Ohio, please review state educational requirements for licensure and certification and state licensing board contact information at <http://go.osu.edu/disclosures> for online programs and <http://go.osu.edu/onground> for on-campus programs. Ohio State makes every effort to ensure state licensure and certification information is current; however, state requirements may change. Please contact the applicable licensing board(s) in the state where you may want to pursue licensure or certification before beginning an academic program to verify whether a program meets educational requirements for licensure or certification in the state.



THE OHIO STATE UNIVERSITY

School of Health and Rehabilitation Sciences
Respiratory Therapy Division

Initial only the appropriate boxes and sign below.

I have read the RESPIRATORY THERAPY DIVISION STUDENT HANDBOOK and the SHRS STUDENT HANDBOOK. I understand the policies described, and I accept the responsibilities as conditions of enrollment.

I have read and understand the Respiratory Therapy Essential Functions and Expectations.

I will be able to meet each of the Respiratory Therapy Essential Functions & Expectations **without accommodation**. I also understand that if I am unable or become unable to meet these standards with or without accommodation, I cannot enroll or remain enrolled in the Respiratory Therapy Division education program.

I will be able to meet each of these standards **with accommodations**. I will contact the Office for Disability Services (150 Pomerene Hall, 1760 Neil Ave., 614-292-3307) to have my need for accommodation validated. I will work with both ODS and the Respiratory Therapy Division to examine accommodation options. I understand that in some cases accommodation may not be possible. I also understand that if I am unable or become unable to meet these standards with or without accommodation, I will not be able to major in Respiratory Therapy.

I will NOT be able to meet each of the Respiratory Therapy Essential Functions & Expectations with or without accommodation.

Signature of Student

Date

Printed Name

PRINT THIS PAGE AND UPLOAD TO CARMEN:

Respiratory Therapy Division
431 Atwell Hall, 453 W. Tenth Ave
Columbus, OH 43210-1234

8/05/2022