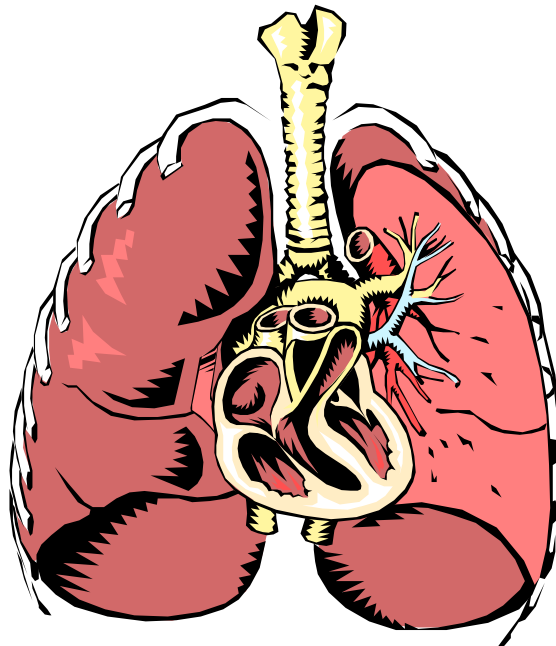




ALVIN COMMUNITY COLLEGE
RESPIRATORY CARE
Program Information and Application



2012-2013



ALVIN COMMUNITY COLLEGE 3110 Mustang Road Alvin, Texas 77511-4898

Respiratory Care
281-756-5610 Office
281-756-5606 Fax
dflatland@alvincollege.edu

Dear Respiratory Care Applicant:

Thank you for your interest in our Associate Degree Program in Respiratory Care. Respiratory Care is the Allied Health Profession that cares for patients with deficiencies and abnormalities of the cardiopulmonary system. The respiratory therapist sees a diverse group of patients ranging from newborn and pediatric patients to adults and the elderly. Disease states or conditions often requiring respiratory care include asthma, emphysema, chronic obstructive lung disease, pneumonia, cystic fibrosis, infant respiratory distress syndrome, and conditions brought on by shock, trauma or postoperative surgical complications. In addition to working in hospitals, respiratory therapists have job opportunities in home care, rehabilitation agencies, nursing homes, emergency transport teams, sleep centers, pulmonary function laboratories, outpatient clinics and physicians offices.

Our respiratory care program is two-years in length and upon completion, awards an Associate in Applied Science Degree with a major in Respiratory Care.

According to the U.S. Bureau of Labor Statistics, employment of respiratory therapists is expected to increase faster than average over the next decade, primarily because the aging baby boom generation will increase the number of older people who tend to suffer the most from respiratory conditions like pneumonia and COPD and who often have respiratory complications due to heart disease and other common diseases of aging. While U.S. employment in general is forecast to increase by 15 percent, the need for RTs will grow by up to 26 percent! With demand for RTs on the rise, salaries are following suit. According to the 2010 study from Respiratory Care Advance Magazine, the projected average annual earnings of RTs working in the U.S. is \$59,132. In this study, therapists just beginning their careers reported average annual earnings of \$46,800.

Enclosed is information that describes the program, and provides a listing of prerequisite courses and admission requirements. Application for admission to the program should be made through the program office before June 15 for admission to the Fall class.

Sincerely,

A handwritten signature in black ink, appearing to read 'Diane Flatland'.

Diane Flatland, MS, RRT-NPS, RCP, LP
Director
Respiratory Care Program

Associate in Applied Science Respiratory Care Degree Program

Course Number	Course Title	Lecture Hrs.	Lab Hrs.	Credits
Prerequisite Courses				
ENGL 1301	Composition & Rhetoric I	3	0	3
BIOL 2401	Anatomy & Physiology I	3	3	4
BIOL 2402	Anatomy & Physiology II	3	3	4
		9	6	11
FIRST YEAR				
First Semester				
RSPT 1166	Practicum-Respiratory Care Therapist	0	8	1
RSPT 1207	Cardiopulmonary Anatomy & Physiology	2	1	2
RSPT 1331	Basic Respiratory Care Fundamentals II	2	3	3
RSPT 1325	Respiratory Care Sciences	3	0	3
RSPT 1429	Respiratory Care Fundamentals I	3	3	4
		10	15	13
Second Semester				
Elective	Visual and Performing Arts/Humanities Core	3	0	3
RSPT 1266	Practicum-Respiratory Care Therapist I	0	20	2
RSPT 2317	Respiratory Care Pharmacology	3	0	3
RSPT 2210	Cardiopulmonary Diseases I	2	1	2
RSPT 2414	Mechanical Ventilation I	3	2	4
		11	23	14
Third Semester				
RSPT 1267	Practicum-Respiratory Care Therapist II	0	15	2
RSPT 2305	Pulmonary Diagnostics	2	3	3
RSPT 2314	Mechanical Ventilation II	2	2	3
		4	20	8
SECOND YEAR				
First Semester				
BIOL 2420	Microbiology	3	3	4
RSPT 2239	Advanced Cardiac Life Support	1	4	2
RSPT 2355	Critical Care Monitoring	3	0	3
RSPT 2266	Practicum-Respiratory Care Therapist III	0	16	2
RSPT 2310	Cardiopulmonary Disease II	2	2	3
		9	25	14
Second Semester				
PSYC 2301	General Psychology	3	0	3
RSPT 1191	Special Topics in Respiratory Therapy	0	4	1
RSPT 2131	Simulations for Respiratory Care	0	2	1
RSPT 2135	Pediatric Advanced Life Support	0	3	1
RSPT 2267	Practicum-Respiratory Care Therapist IV	0	18	2
RSPT 2166	Practicum-Respiratory Care Therapist V	0	8	1
RSPT 2353	Neonatal/Pediatric Cardiopulmonary Care	3	0	3
		6	35	12
Total Credits Required for A.A.S. Respiratory Care				72

Respiratory Care Degree Program

281-756-5660

Degree: Associate Degree of Applied Science (A.A.S.)

Length: 21 months

Purpose: The Respiratory Care Department offers a two-year program that prepares individuals for an allied health specialty in the clinical care and management of respiratory disorders. The graduate will possess advanced, intensive-care skills to assess, monitor and evaluate adult, pediatric and neonatal patients on mechanical ventilation. Respiratory therapists practice in a variety of settings, including intensive care units, neonatal/pediatric special care areas, general hospital floors, emergency/trauma units, extended care and rehabilitation facilities, and the home care environment. Respiratory Care courses consist of classroom, laboratory and supervised hospital experience. Graduates of the associate degree program may become Registered Respiratory Therapists (RRT) by passing the Entry Level Exam and the Advanced Practitioners Exam. Texas, along with many states, requires that respiratory care practitioners obtain a state license to practice respiratory care. The program is affiliated with several community hospitals including Ben Taub, Texas Children's, Memorial-Hermann, Methodist, Saint Luke's Episcopal Hospital, and eleven other clinical affiliates.

The program is fully accredited by the Committee on Accreditation for Respiratory Care (CoARC), 1248 Harwood Rd., Bedford, TX 76021, www.coarc.com.

Admission Requirements:

- To be considered for admission to the respiratory care program, the applicant must:
 - be a high school or GED graduate.
 - make application to ACC and fulfill the admission requirements, including THEA.
 - make application to the respiratory care program.
 - submit official transcripts of all previous college work to ACC Registrar's Office.
 - applicants are required to demonstrate an understanding of the responsibilities and duties of the profession through observation and discussion with a practicing therapist. Contact the director for details.
 - score 19 or higher on ACT composite or minimum combined math/verbal SAT score of 900 and complete BIOL 2401, BIOL 2402 and ENGL 1301 with a grade no lower than a "C" prior to admission and test scores must be within 5 years of the time of application. (**Please note:** Individuals who hold a Bachelor's degree or higher are exempt from taking the ACT/SAT.)
 - complete a physical examination form which includes TB skin test, and immunizations upon acceptance to the program.
 - criminal background check and drug screen conducted as a condition of full acceptance.
 - not currently be on suspension or academic probation from ACC or another college or university.
- Any science or respiratory care course completed more than five years prior to the student being accepted may not satisfy requirements for a degree in respiratory care.
- Transfer students must complete the following:
 - meet the above admission criteria.
 - have a cumulative GPA of 2.0 or higher on all courses being transferred into the respiratory care curriculum.
 - provide the ACC Registrar's Office with an official transcript from each institution attended.
 - provide the Respiratory Care Department with a copy of transcript from each institution attended.
 - provide the Respiratory Care Department with a description and/or syllabus of each respiratory course being considered for transfer.
 - not currently be on suspension or academic probation from another college.
 - credit will be given for support courses equivalent to those included in the respiratory care program at ACC as determined by examination of the syllabus of the transfer course. A grade of C or higher must have been earned in transfer courses.
 - Must complete a minimum of 24 semester hours at ACC in order to be considered a graduate.
- Program begins in August.

Alternate Enrollment:

- Alternate enrollment applies to those respiratory care personnel who are licensed and have not completed the associate degree.
- Respiratory care professionals with at least two years' full-time experience in the field will have the opportunity to challenge respiratory care courses. These courses must be challenged in sequence unless permission is otherwise granted by the program director.

Progression Policies:

- Respiratory care students will abide by the admission and curriculum requirements of the Respiratory Care Department at the time they are admitted or re-admitted to the program.
- Once a student has enrolled in the respiratory care program, all respiratory care courses must be completed in the proper sequence as shown in the catalog and degree plan, or must have the approval of the program director.
- No grade below a C in a respiratory care or academic course will be acceptable for progression.
- A student will be terminated from the program if clinical performance is unsatisfactory as determined by the clinical instructor and the program director. This action may be taken at any time during the semester or at the end of the semester.
- A student who makes a D or F in any science/respiratory care course may repeat that course once in order to obtain a C or better.
- A student requiring hospitalization or sustaining an injury will be required to obtain a written statement from his/her physician verifying that the health status of the student is adequate for performance in the clinical agency. A student may not be allowed to return to the clinical area if he/she must be on medications which may interfere with the ability to perform satisfactorily.
- A student who is pregnant must present a physician's statement giving evidence of her ability to perform the work required.
- Students must complete the program within four years after initial acceptance.

ACT TESTS AT ALVIN COMMUNITY COLLEGE
(Note SAT not given at Alvin Community College)

November 30	Residual
December 10	National
January 11, 2012	Residual
January 18, 2012	Residual
February 1, 2012	Residual
February 11, 2012	National
February 15	Residual
February 29, 2012	Residual
March 7, 2012	Residual
March 8, 2012	Residual
April 4, 2012	Residual
April 14, 2012	National
June 9, 2012	National

It is highly recommended that applicants take the "National" ACT or the SAT.

Both "Residual" and "National" tests have the same content; they differ in transferability to other colleges. Test scores come back in 2-4 weeks, and the National test scores can be transferred to other colleges.

Test dates and times are subject to change. Contact the Testing Center at 281-756-3526 for more information.

To register for ACT testing at ACC, please visit our website at <https://app.alvincollege.edu/testing>.

The Continuing Education Department at ACC offers ACT Prep Classes. Please call 281-756-3787 for details.

If you have learning or test-taking disabilities, ask to discuss testing accommodations at the time you sign up for the ACT test. Information on test dates, testing centers, sample tests, and study materials are available at www.act.org.

Retest Restriction – If a student tested previously via Residual or any other non-national testing, the retest should be taken on a national test date. If this is not possible, a **minimum of 60 days** must elapse before another Residual test may be taken. **If the 60-day time limit is violated, the retest scores will be cancelled automatically.** No refund will be made for such cancelled retests.

2011 Test Dates. To register visit the SAT website at www.collegeboard.com.

U.S. Registration Deadlines		
2011 Test Dates	Test	Regular Registration Deadline (postmark/submit by)
December 3, 2011	SAT & Subject Tests	November 8, 2011
January 28, 2011	SAT & Subject Tests	December 20, 2011
March 10, 2012	SAT	February 10, 2012
May 5, 2012	SAT & Subject Tests	April 6, 2012
June 2, 2012	SAT & Subject Tests	May 8, 2012

**ALVIN COMMUNITY COLLEGE
RESPIRATORY CARE
APPROXIMATE COST**

Semester

	In/Out of District Tuition*	Fees+	Textbooks	In/Out of District Total
Prerequisite Courses	\$669.00/1131.00	\$40.00	\$320.00	\$1029.00/1491.00
Fall	763.00/1309.00	197.00	350.00	1310.00/1856.00
Spring	810.00/1398.00	105.00	250.00	1165.00/1753.00
Summer	507.00/ 843.00	100.00	75.00	682.00/1018.00
Fall	810.00/1398.00	177.00	300.00	1287.00/1875.00
Spring	716.00/1220.00	350.00	280.00	<u>1346.00/1850.00</u>

TOTAL (Including prerequisite courses)

\$ 6819.00/9843.00

Additional Costs

Student Supply Kit (with stethoscope)	184.00
Student Supply Kit (without stethoscope)	154.00
Background Check	48.50
Drug Screen	39.00
Malpractice Insurance (\$17.00/yr)	34.00
Physical Exam (TB test, Hepatitis Vaccine)	100-200.00
Scrubs, Lab coat, etc.	95.00
Parking Fee (\$15.00/yr)	30.00
TB Test (for second-year)	15.00
TSRC District Meeting (in February)	40.00
Diploma Fee	35.00
Graduation Cap and Gown	30.00
DataARC Fee	65.00
Various Seminars Throughout the Year	20.00-50.00/ea
ACC Respiratory Care Polo Shirt	20.00
Temporary License (TDH)	55.00
Kettering Seminar	285.00

Optional Costs

TSRC Membership (\$15.00 renewal)	25.00
AARC Membership (\$40.00 renewal)	50.00
Graduation Pin	28.00-85.00

* Based on prescribed curriculum sequence and in-district tuition.

+ Fees: Includes lab fees for science and respiratory care courses.

THESE ARE APPROXIMATE COSTS AND ARE SUBJECT TO CHANGE WITHOUT NOTICE!

National Boards (must take all three [3])

Entry Level	\$ 190.00
Advanced Practitioner	190.00
Clinical Simulations	<u>200.00</u>
	\$ 580.00

Alvin Community College Respiratory Care Policy for Criminal Background Screening

The purpose of this policy is to:

1. Comply with clinical affiliates who may require a student background check as a condition of their contract
2. Provide early identification of students who may have difficulty meeting Texas Department of Health – RCP Programs eligibility for licensure requirements
3. Promote and protect patient/client safety

Conduct of Criminal Background Check

Background checks will be conducted as a condition of full acceptance into Respiratory Care program. The results will be accepted for the duration of the student's enrollment in the Respiratory Care program if the participating student has not had a break in enrollment at the college and if the student has had no disqualifying allegations or convictions while enrolled. Alvin Community College will designate the agency selected to do the criminal background screening. Results of the background check will be sent directly to the program director at each college. The student will pay the cost of the background directly to the agency. The student will sign a form indicating knowledge of this policy and their belief that they do not have any criminal history that would disqualify them from clinical rotations.

Unsatisfactory Results

A student with a significant criminal background screen will be ineligible to enroll in the respiratory care program. A significant criminal background screen means a conviction for any matter listed in the Texas Occupations Code, [*TDH Rule 123.13*](#). All criminal background information will be kept in confidential files by the investigating agency and the program director will have access to these files. A student who is convicted of a criminal offense while enrolled in the program must report the offense to the program director within three days of the conviction.

Students with unsatisfactory results may petition the Texas Department of Health to determine their eligibility for licensure. The required paperwork may be obtained in the Respiratory Care office.

Student Rights

Students sign a release form that gives the program director the right to receive their criminal background information from the agency. If the student believes his or her background information is incorrect, the student is responsible for providing the evidence of the inaccuracy of the information to the investigating agency. The student will not be able to enroll in the respiratory care program until the question is resolved. The inability to participate in a clinical experience could prevent a student from meeting course objectives and result in failure of the course.

TITLE 25

PART 1

CHAPTER 140

SUBCHAPTER E

RULE §140.213

HEALTH SERVICES

DEPARTMENT OF STATE HEALTH SERVICES

HEALTH PROFESSIONS REGULATION

RESPIRATORY CARE

Certifying or Permitting Persons with Criminal Backgrounds to be Respiratory Care Practitioners

(a) Criminal convictions which directly relate to the profession of respiratory care.

(1) The department may suspend or revoke any existing certificate or permit, disqualify a person from receiving any certificate or permit, or deny to a person the opportunity to be examined for a certificate because of a person's conviction of a felony or misdemeanor if the crime directly relates to the duties and responsibilities of a respiratory care practitioner.

(2) In considering whether a criminal conviction directly relates to the occupation of a respiratory care practitioner, the department shall consider:

(A) the nature and seriousness of the crime;

(B) the relationship of the crime to the purposes for certification as a respiratory care practitioner. The following felonies and misdemeanors relate to any certificate or permit of a respiratory care practitioner because these criminal offenses indicate an inability or a tendency to be unable to perform as a respiratory care practitioner:

(i) the misdemeanor of knowingly or intentionally acting as a respiratory care practitioner without any certificate or permit under the Texas Occupations Code, §604.352;

(ii) any misdemeanor and/or felony offense involving moral turpitude by statute or common law;

(iii) a misdemeanor or felony offense under various titles of the Texas Penal Code:

(I) offenses against the person (Title 5);

(II) offenses against property (Title 7);

(III) offenses against public order and decency (Title 9);

(IV) offenses against public health, safety, and morals (Title 10); and

(V) offenses of attempting or conspiring to commit any of the offenses in this subsection (Title 4);

(C) the extent to which any certificate or permit might offer an opportunity to engage in further criminal history activity of the same type as that in which the person previously has been involved; and

(D) the relationship of the crime to the ability, capacity, or fitness required to perform the duties and discharge the responsibility of a respiratory care practitioner. In making this determination, the department will apply the criteria outlined in Texas Occupations Code, Chapter 53 the legal authority for the provisions of this section.

(3) The misdemeanors and felonies listed in paragraph (2)(B)(i) - (iii) of this subsection are not inclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the Act and these sections.

(b) Procedures for revoking, suspending, suspending on an emergency basis, or denying a certificate or temporary permit to persons with criminal backgrounds.

(1) The department shall give written notice to the person that the department intends to deny, suspend, or revoke the certificate or temporary permit after hearing in accordance with the provisions of the Administrative Procedure Act, Chapter 2001, Texas Government Code, Texas Occupations Code, Chapter 53.

(2) If the department denies, suspends, suspends on an emergency basis, or revokes a certificate or temporary permit under these sections after hearing, the department shall give the person written notice:

(A) of the reasons for the decision;

(B) that the person, after exhausting administrative appeals, may file an action in a district court of Travis County, Texas for review of the evidence presented to the department and its decision;

(C) that the person must begin the judicial review by filing a petition with the court within 30 days after the department's action is final and appealable; and

(D) of the earliest date the person may appeal.

Source Note: The provisions of this §140.213 adopted to be effective December 16, 2007, 32 TexReg 9131

Respiratory Care

POLICY FOR DRUG SCREENING

PURPOSE

- Promote And Protect Patient/Client Safety
- Comply With Clinical Affiliates Drug Screen Requirements
- Detect Illegal Drug Use

DEFINITION

Non-Negative Drug Screen: A non-negative drug screen means a medically acceptable drug test, approved by Alvin Community College, the results of which indicates the use of illegal drugs.

Illegal Drugs: Illegal drugs include those drugs made illegal to possess, consume, or sell by Texas and Federal statutes. An illegal drug also includes those drugs taken by an individual which **exceed the prescribed limits of a lawful prescription or the taking of a prescription drug prescribed for another person.**

DRUG SCREENING PROCEDURE

Drug screening is conducted on all student applicants prior to acceptance into the program and a non-negative drug screen will bar admission to the program for a minimum of 12 months. The results of the drug screen are generally accepted for the duration of the student's **uninterrupted** enrollment in the program unless allegations are made to support reasonable cause that the student is not free of illegal drug use; with reasonable cause the student may be required to submit to further drug screening at his/her own expense. Alvin Community College will be responsible for designating and approving the drug screening procedures. The student must complete drug screening at the scheduled time. An unscheduled drug screen will result in an additional expense to the student and conducted at a time and place designated by the college. The student must pre-pay for the drug screen as directed by the Program. The student is required to complete a release directing the company/agency conducting the drug screen test to send the results directly to the Program Director.

The results reported by the company/agency conducting the drug screen is final unless the student with a non-negative drug screen, **within 10 days of learning of the non-negative drug screen**, requests review of the results from the company/agency who originally administered the drug screen. Once the company/agency reports their review finding, the results are final and not appealable.

POLICY

When the college determines that a student has a non-negative drug screen, the student is not allowed to attend any clinical agency/rotation for a minimum of twelve months and may affect his/her re-admission to the program. The student with the non-negative drug screen is required to withdraw from the clinical course and all concurrent health, nursing or allied health programs. Prior to returning to the program, the student must re-apply and be accepted to the program (including re-testing), have a negative drug screen, and provide satisfactory documentation to the college of successful drug counseling and treatment, all at the expense of the student. When a student with a non-negative drug screen is accepted back into the program he/she will be subjected to unannounced random drug screening at their expense.

**Alvin Community College Respiratory Care Program
Technical Standards for Respiratory Care**

General Job Description

Qualified applicants are expected to meet all admission criteria as well as essential functions. **Students requesting reasonable accommodations to meet these criteria must inform the Program Chair in writing of the need for accommodations at the time of admission. The student is expected to contact the ADA counselor in the new ESC (Enrollment Services Center) to file the appropriate forms documenting the need for accommodations.**

FUNCTIONAL ABILITY CATEGORY	REPRESENTATIVE ACTIVITY/ATTRIBUTE	EXAMPLES
GROSS MOTOR SKILLS	<ul style="list-style-type: none"> • Move within confined spaces • Sit and maintain balance • Stand and maintain balance • Reach above shoulders • Reach below waist 	Function in an ICU environment: move about in an ICU room in order to perform procedures on the patient. Must also read patient chart, equipment settings, and/or equipment displays. Sit to record findings. Change equipment settings above head and below waist, plug electrical appliance into wall outlets.
FINE MOTOR SKILLS	<ul style="list-style-type: none"> • Pick up objects with hands • Grasp small objects with hands • Write with pen or pencil • Key/type • Pinch/pick or otherwise work with fingers • Twist • Squeeze with finger 	Lift medication vials to eyes to read. Squeeze medication vials to empty. Squeeze Ballard suction catheter button. Grasp hold and read small instruments such as volume measuring devices. Write in patient chart. Record patient data in record. Change settings on equipment by turning knob and observing change.
PHYSICAL ENDURANCE	<ul style="list-style-type: none"> • Stand in-place for prolonged periods • Sustain repetitive movements • Maintain physical tolerance for 8 or 12 hour periods • Ability to perform activities day, afternoon, evening and night. 	Stand and perform repetitive procedure(s) on patients such as Chest Physical Therapy and CPR. Repeat this procedure periodically throughout an 8-hour shift.
PHYSICAL STRENGTH	<ul style="list-style-type: none"> • Push and pull 25 pounds • Support 25 pounds • Lift 25 pounds • Carry equipment/supplies • Use upper body strength • Squeeze with hands 	Assist patient from bed to chair. Hoist patient up in bed. Move patient from stretcher to bed and back. Carry medications, pulse oximeter, stethoscope or other equipment to patient room. Push ventilator or other heavy equipment from respiratory care department to patient room. Move other equipment such as Pulse Oximeter, IPPB or IPV machine. Lift equipment from bed height to shelf height above chest level.
MOBILITY	<ul style="list-style-type: none"> • Twist • Bend • Stoop/squat • Move quickly • Climb • Walk 	Turn to change settings on monitor while standing at patient bedside. Bend to change equipment settings on floor, at knee level, waist level, chest level, eye level, above head. Gather equipment and manually resuscitate patient without delay. Make rapid adjustments if needed to ensure patient safety. Make way to patient room if an emergency is called using stairs.

HEARING	<ul style="list-style-type: none"> • Hear normal speaking level sounds • Hear faint voices • Hear faint body sounds • Hear in situation when not able to see lips • Hear auditory alarms 	<p>Listen to patient breath sounds to determine if patient is breathing. Listen to heart sounds to determine if heart is beating. Determine the intensity and quality of patient breath sounds in order to help determine a diagnosis. Hear audible alarms such as a ventilator alarm. Hear overhead pages to call for emergency assistance.</p>
VISUAL	<ul style="list-style-type: none"> • See objects up to 20 inches away • See objects up to 20 feet away • Use depth perception • Use peripheral vision • Distinguish color • Distinguish color intensity 	<p>Read patient chart to determine correct therapy. Visually assess patient color to assess for hypoxia. Read settings on monitors and other equipment. Visually assess for changes. Confirm settings visually such as with ventilator display.</p>
TACTILE	<ul style="list-style-type: none"> • Feel vibrations • Detect temperature • Feel differences in surface characteristics • Feel differences in sizes, shapes • Detect environmental temperature 	<p>Assess patient by feeling for patient pulse, temperature, tactile fremitus, edema, subcutaneous emphysema.</p>
SMELL	<ul style="list-style-type: none"> • Detect odors from patients • Detect smoke • Detect gases or noxious smells 	<p>Assess for noxious odors originating from the patient or environment (example gas leak or smoke).</p>
READING	<ul style="list-style-type: none"> • Read and understand written documents 	<p>Read and interpret physician orders, physician, therapist and nurses notes. Read from a computer monitor screen. Gather data reasonably accurate, and in a reasonable amount of time to ensure safe and effective patient care relative to other care givers.</p>
MATH COMPETENCE	<ul style="list-style-type: none"> • Read and understand columns of writing • Read digital displays • Read graphic printouts • Calibrate equipment • Convert numbers to and/or from the Metric System • Read graphs • Tell time • Measure time • Count rates • Use measuring tools • Read measurement marks • Add, subtract, multiply, and/or divide whole numbers • Compute fractions • Use a calculator • Write numbers in records 	<p>Read and interpret patient graphics charts and graphic displays. Perform basic arithmetic functions in order to calculate minute ventilation, convert temperature, correctly place graduated tubing, and other functions.</p>

EMOTIONAL STABILITY	<ul style="list-style-type: none"> • Establish appropriate emotional boundaries • Provide emotional support to others • Adapt to changing environment/stress • Deal with the unexpected • Focus attention on task • Monitor own emotions • Perform multiple responsibilities concurrently • Handle strong emotions 	Provide for safe patient care despite a rapidly changing and intensely emotional environment. Perform multiple tasks concurrently, example: delivery of medication or oxygen in one room while performing an arterial blood gas in another such as in an emergency room environment. Maintain enough composure to provide for safe and effective patient care despite crisis circumstances.
ANALYTICAL THINKING	<ul style="list-style-type: none"> • Transfer knowledge from one situation to another • Process information • Evaluate outcomes • Problem solve • Prioritize tasks • Use long-term memory • Use short-term memory 	Evaluate different sources of diagnostic information to help arrive at a patient diagnosis. Evaluate priorities in order to provide for the most appropriate care. Appropriately evaluate data in order to notify physician and nursing when necessary.
CRITICAL THINKING	<ul style="list-style-type: none"> • Identify cause-effect relationships • Plan/control activities for others • Synthesize knowledge and skills • Sequence information 	Evaluate different sources of diagnostic information to help arrive at a patient diagnosis and treatment. Evaluate data in order to formulate an appropriate action plan.
INTERPERSONAL SKILLS	<ul style="list-style-type: none"> • Negotiate interpersonal conflict • Respect differences in patients, fellow students, and members of the healthcare team. • Establish rapport with patients, fellow students, and members of the healthcare team. 	Communicate effectively with disagreeable patients, family doctors, and nurses and other staff in order to attempt to meet therapeutic goals for the patient.
COMMUNICATION SKILLS	<ul style="list-style-type: none"> • Teach • Explain procedures • Give oral reports • Interact with others • Speak on the telephone • Influence people • Convey information through writing 	Communicate effectively and appropriately with doctors, nurses, patients, family, and other staff in order to provide for most effective and efficient patient care.

APPLICATION CHECKLIST

For June 15th application

	<u>Deadline</u>
_____ Prereqs and ACT/SAT	June 15
_____ ACC Application	June 15
_____ Respiratory Care Application	June 15
_____ Observation Form	June 15
_____ Acknowledgment of Drug Screen	June 15
_____ Tech. Stand. Acknowledgement	June 15
_____ HepB (first shot)	April 15
_____ HepB (second shot)	May 15
_____ Transcripts	June 15
_____ Release for Crim. Background	June 15
_____ Recommendations (2)	June 15
_____ Essay	June 15

**Submit this form by the
application deadline
showing completion of
each requirement.**

FOR RESPIRATORY CARE OFFICE USE (DO NOT WRITE IN THIS SPACE)

App rec'd ____/____/____ Sat or Interview or
 Act _____ Info mtg ____/____/____ Accepted ____/____/____
 Pre-Req HS/GED ____/____/____ GPA _____ TASP ____ yes Transcripts ____ yes Xfer or Return

3110 Mustang Road
 Alvin, Texas 77511-4898
 (281) 756-5610

ALVIN COMMUNITY COLLEGE
 RESPIRATORY CARE PROGRAM
 APPLICATION FOR ADMISSION

(Please print in ink or type)

Last Name _____ Social Security No. _____

First Name _____ Middle Name _____

Suffix (Jr., II, etc) _____ Other last names you have had _____

Mailing Address _____
Street, PO Box, rural route, etc City State Zip

Permanent Address (If different) _____
Street, PO Box, rural route, etc City State Zip

Home phone # (____) _____ - _____ Work phone # (____) _____ - _____

Mobile phone # (____) _____ - _____ Pager # (____) _____ - _____

County of residence _____ E-mail _____

Emergency Notification (spouse, parent, guardian, etc): _____

Address _____ Telephone # (____) _____ - _____
Street City State Zip

Citizenship: U.S. Citizen Permanent Resident Alien International Student

PERMANENT RESIDENT ALIEN INFORMATION

Country of Citizenship _____ Resident Card Number _____

Have you earned a:

HIGH SCHOOL diploma School name/city/state _____
 (from an accredited US High School) Date awarded or expected grad date _____

OR

GED certificate Date awarded _____

Are you currently enrolled in a college or university? YES NO

If yes, name of institution & city/state: _____

List all courses in which you are currently enrolled: _____

COLLEGES / UNIVERSITIES ATTENDED (Vocational, 2-year and/or 4-year)

School name/city/state Major & Degree earned Dates attended

Have you previously enrolled in a respiratory care program? YES NO If yes, fill in below:

Type Institution name City State Dates attended

If you have experienced any of the following circumstances, you must contact the Respiratory Care Program Director to determine whether you will be eligible for licensure as a respiratory care practitioner in Texas.

1. If you have ever been convicted of or received a deferred order, with or without an adjudication of guilt, for any crime other than a minor traffic violation.
2. If within the last five (5) years, you were addicted to, or treated for abuse of, alcohol or any other drug.
3. If within the last five (5) years, you were diagnosed with, treated for, or hospitalized for schizophrenia and/or other psychotic disorder, bipolar disorder, paranoid personality disorder, antisocial personality disorder, or borderline personality disorder.
4. If you have been denied licensure/certification or had disciplinary action taken against me by any governmental authority in any country, state, or province.

I certify that information given on this application is correct and complete. I understand that mis-representation or omission of information will make me ineligible for admission to, or continuation in, the Alvin Community College Respiratory Care Program. If applying on line, signature will be obtained at the information meeting.

Legal signature of applicant

Date

Alvin Community College is an equal-opportunity institution and does not discriminate against anyone on the basis of race, color, national origin, gender, age, disability, religion, or veteran status.

**ALVIN COMMUNITY COLLEGE
RESPIRATORY CARE PROGRAM
PROFESSIONAL OBSERVATION FORM**

As a potential Respiratory Care student, you are required to complete a tour of a hospital Cardio-Pulmonary Department to get an additional perspective on the types of duties respiratory therapists perform. You have been provided with the names, addresses, and phone numbers of three local hospital respiratory care departments to assist you in making the arrangements for your tour. The respiratory department manager's name is listed, and you **must** make your arrangements through them. A hospital tour is an important part of an orientation to the profession and is designed to help prospective students enter the educational process with a more complete knowledge of what they will be exposed to in the clinical area.

Once you have arranged for your tour appointment, please be prompt in arriving to the hospital and **do show up for your scheduled appointment**. Please dress professionally for the tour since you will be accompanying a respiratory therapist in the hospital while patients are treated.

Suggested clothing includes business casual attire: dress slacks and shirt/blouse with collar and shoes or sneakers. A blouse and knee length dress or skirt is also acceptable for women. Please wear socks or stockings (no bare legs/feet). Please do **NOT** wear jeans (blue, black, or any color), shorts, T-shirts, low cut shirts, excessive jewelry, or sandals/clogs/cowboy boots/hiking boots.

Be sure that all clothing and shoes/sneakers are neat, clean, and pressed to show a professional appearance. Long hair should be pulled back and secured. Body piercings should be removed (except two earrings per ear), and any visible tattoos should be covered. Your cooperation in adhering to this dress code is appreciated.

The Respiratory Care Program values the input of current and future students so that necessary program modifications can be addresses. Please complete the attached survey and return it in with your completed application. This survey not only provides feedback to our program, but also serves as documentation that you completed the hospital tour. **Be sure to have your survey signed by a respiratory department representative during your tour.**

Thank you in advance for your helpful cooperation in completing and returning this survey.

Please contact one of the following for your professional observation.

Jeannie Scott, RRT
Memorial Hermann Southeast
281-929-6326

Jim Wise, RRT
Clear Lake Regional Medical Center
281-526-6124

Mike Craig, RRT
Oak Bend Hospital
281-341-3889

Alvin Community College
Respiratory Care
Clinical Observation Survey

Prospective Student Name: _____

Name of Hospital: _____

Date of Observation: _____

Time spent touring department: _____
(2 to 4 hours is recommended)

Name of individual providing observation: _____

Signature of individual providing observation: _____

Observed procedures (place a checkmark in front of the activity observed):

_____ Oxygen delivery

_____ Routine SVN treatment (including patient assessment of vital signs and breath sounds)

_____ MDI or DPI treatment (including patient assessment of vital signs and breath sounds)

_____ Bronchial hygiene therapy (to include CPT, the Vest, or Accapella)

_____ Lung expansion therapy (to include ICS, IPPB, or EzPAP)

_____ Pulmonary function test

_____ Suctioning

_____ ABG puncture and/or analysis

_____ Mechanical ventilation

_____ Emergency department procedure

_____ CPAP/BiPAP/NPPV

_____ Patient education (smoking cessation, etc.)

_____ Cardiopulmonary rehabilitation

Circle the response to the following questions that best describes your observation experience:

1 = completely false

2 = somewhat true

3 = very true

A. I found my hospital tour to be a positive experience that helped me learn more about the respiratory care profession. 1 2 3

B. The individual providing my observation was helpful, friendly, and encouraging about respiratory care as a profession. 1 2 3

C. As a result of my observation, I am still interested in pursuing respiratory care education at ACC. 1 2 3

Please write any additional information that you think would make the observation experience more meaningful. Comments:

Return the survey with your completed application.

APPLICATION RECOMMENDATION FORM

Applicant: _____

Following is a list characteristic which we feel are required for a student to successfully complete a training program in the Respiratory Care Program. We would appreciate your cooperation in completing this form, and returning it to the College at your earliest convenience.

- 3. More than satisfactory
- 2. Satisfactory
- 1. Unsatisfactory
- N/A

ABILITIES/SKILLS	3	2	1	N/A	
Responsibility					Accountable for one's actions
Leadership					Has the capacity to direct the activities of others
Initiative					Motivated to pursue actions independently
Flexibility					Capable of responding or conforming to changing or new situation
Organization					Arranges by systematic planning for optimal efficiency
Self-confidence					Assured in one's abilities & skills
Independent Work					Completes tasks with minimal supervision
Communication-Verbal					Contributes knowledge & opinions in an articulate manner
Written					Expresses self clearly in writing
Stress Response					Maintains composure/able to function
Attitude					Positive approach to work/coworkers
Manual Dexterity					Ability to perform psychomotor skill
Group Interaction Peers/coworkers					Ability to get along with peers and coworkers
Teacher/Supervisor					Ability to get along with teachers and/or supervisors
Maturity					Demonstrates common sense, tact, empathy to patient
Knowledge/Application					Ability to apply theory to practice
Decision Making					Ability to analyze problem/formulate solution
Dependability					Follows through on assignments

Additional information – Use to amplify or add to characteristics rated previously. Please indicate applicant's strengths and those qualities that require further development.

Strengths _____

Qualities that require further development. _____

Relationship to applicant Adviser
 Teacher
 Supervisor
 Other: Please indicate _____

How long have you known the applicant? _____

How well do you know applicant? _____

Do you Highly recommend
 Recommend
 Recommend with reservations
 Not recommend

Signature: _____ Date: _____

Name: _____

Title: _____

Institution: _____

Address: _____

Telephone Number: ____ () _____

Please return this evaluation form to:

Alvin Community College
Respiratory Care
3110 Mustang Road
Alvin, TX 77511-4898

APPLICATION RECOMMENDATION FORM

Applicant: _____

Following is a list characteristic which we feel are required for a student to successfully complete a training program in the Respiratory Care Program. We would appreciate your cooperation in completing this form, and returning it to the College at your earliest convenience.

- 3. More than satisfactory
- 2. Satisfactory
- 1. Unsatisfactory
- N/A

ABILITIES/SKILLS	3	2	1	N/A	
Responsibility					Accountable for one's actions
Leadership					Has the capacity to direct the activities of others
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Additional information – Use to amplify or add to characteristics rated previously. Please indicate applicant's strengths and those qualities that require further development.

Strengths _____

Qualities that require further development. _____

Relationship to applicant Adviser
 Teacher
 Supervisor
 Other: Please indicate _____

How long have you known the applicant? _____

How well do you know applicant? _____

Do you Highly recommend
 Recommend
 Recommend with reservations
 Not recommend

Signature: _____ Date: _____

Name: _____

Title: _____

Institution: _____

Address: _____

Telephone Number: ____ (____) _____

Please return this evaluation form to:

Alvin Community College
Respiratory Care
3110 Mustang Road
Alvin, TX 77511-4898

**ALVIN COMMUNITY COLLEGE
RESPIRATORY CARE**

CONSENT FOR RELEASE OF INFORMATION

_____ (Initial) My signature below indicates that I have read the policy on criminal background screening for the respiratory care program. This form provides my consent for the results of criminal background checks to be released to the Alvin Community College program director. I certify that I do not have any criminal history that would disqualify me from a clinical rotation or prevent me from obtaining respiratory care licensure.

DRUG SCREEN

_____ (Initial) My signature below certifies that I have read, understand and agree to accept the Alvin Community College Health Program's "Policy for Drug Screening". Effective Date of Policy 7/5/05.

**TECHNICAL STANDARDS - ACKNOWLEDGEMENT
PHYSICAL REQUIREMENTS/WORKING CONDITIONS**

_____ (Initial) I acknowledge receipt of the form "Technical Standards for Respiratory Care" outlining the physical requirements of the training program and the duties of the Respiratory Care Program at Alvin Community College.

By my signature below, I confirm my physical ability to fulfill the responsibilities of the program and any positions which I may be offered following graduation with or without reasonable accommodation.

Prospective Student's Name (Print): _____

Prospective Student's Signature: _____

Date: _____

