



INSTRUCTIONAL PACKAGE

RES 154

CLINICAL APPLICATIONS II

Effective Term

Spring/2018

# INSTRUCTIONAL PACKAGE

## PART I: COURSE INFORMATION

Effective Term: 2018

COURSE PREFIX: RES

COURSE TITLE: CLINICAL APPLICATIONS II

CONTACT HOURS: 0-12-4

### **RATIONALE FOR THE COURSE:**

1. Present a case presentation to integrate clinical and classroom theory.
2. Demonstrate the ability to apply current and previously acquired clinical skills to patients in current clinical rotations in a professional manner.
3. Apply course material to successfully pass Respiratory Care credentialing exams.
4. Perform basic respiratory care procedures in a safe and effective manner.
5. Demonstrate communication skills to deliver an appropriate respiratory care plan.
6. Continuous development of skills from previous clinical applications courses.

### **COURSE DESCRIPTION:**

This course includes practice of respiratory care procedures in the hospital setting. This healthcare setting course will allow the student, working a long side a licensed healthcare professional, to observe daily routines of the Respiratory Care professional and work to become proficient with current assigned therapeutic procedures covered in the laboratory setting. The Student will be required to maintain physician contact and skills check of all therapeutic procedures covered in RES 154.

### **PREREQUISITES:**

General Education courses BIO 210, 211, 225, MAT 120, ENG 101, PSY 201, and HUM. Respiratory Care Program first semester courses RES 101, RES 121, RES 246, and RES 152. *Required prerequisite courses must be completed with a grade of "C" or better.*

### **Required Textbooks and Materials**

Mosby's Respiratory Care Equipment, J. M. Cairo, 9<sup>th</sup> edition.

Wilkins' Clinical Assessment in Respiratory Care, 7<sup>th</sup> edition.

Respiratory Simulations, Oakes

Classmate

Dana Oakes, Pocket Guide to Respiratory Care 9<sup>th</sup> ed. and ABG Pocket Guide 2<sup>nd</sup> ed.

Please visit the Bookstore online site for most current textbook information. Use the direct link below to find textbooks.

[Barnes and Noble Book Store](#)

Enter the semester, course prefix, number and section when prompted and you will be linked to the correct textbook.

### **MATERIALS/TOOLS REQUIRED:**

Scrubs, Shoes, Watch and Stethoscope

Optional: hemostats, scissors, and pocket pulse oximeter

## **TECHNICAL REQUIREMENTS:**

### **Access to Desire2Learn (D2L), HGTC's student portal for course materials**

- WaveNet and D2L email access
- Data Arc account for clinical time clock, procedure checklist, and clinical assessment evaluations.
  - PRIOR TO GRADUATION, EACH STUDENT MUST TAKE AND PASS A SERIES OF COMPREHENSIVE SECURE NBRC RESPIRATORY CARE EXAMS. THE FEES FOR THE EXAMS WILL BE INCLUDED IN TUITION COSTS.
  - You must score 75% or greater on each of these exams.
  - THIS FEE INCLUDES THE COST OF THE DATAARC SYSTEM.

## **METHODS OF INSTRUCTION:**

This course will be presented primarily through assigned clinical activities of a specified nature. Supervision will be provided by Horry Georgetown Technical College instructors and/or clinical instructors/preceptors. Evaluation will be according to procedures specified in other parts of this syllabus. Evaluation procedures are to be considered an addendum to the Clinical Procedures Manual for Director of Clinical Education to provide final grade.

## **CLASSROOM ETIQUETTE:**

It is recognized that personal communication devices, including smart phones, can play a fundamental role in both education and urgent personal connections (for example, a school calling about a sick child). For this reason, use of such devices is permitted in the classroom, with specific reservations:

1. Please set all devices to 'silent' or 'vibrate' during instructional time.
2. Use of devices during testing is NOT allowed.
3. Please limit use of devices to urgent personal connections and educational purposes directly related to the course material being discussed.
4. If you receive an urgent text/call during class that requires immediate attention, please quietly excuse yourself from the classroom to respond to the call.
5. Please refrain from using 'ear buds' or continually using the device as a learning distraction. Professor retains the right to disallow the use of such devices should the policy become a distraction.
6. When on experiential rotations, students are expected to abide by the policies of that institution.

## **PLAGIARISM & CHEATING:**

Refer to the College catalog & Student handbook (<http://www.hgtc.edu/documents/policys/Chapt9.pdf>). The student may be assigned a failing grade for the course, or may be required by the professor to withdraw from the course and/or the respiratory care program. Such actions are deemed to be unprofessional behavior within this program and will not be tolerated.

## **PART II: STUDENT LEARNING OUTCOMES**

### **PROGRAM LEARNING OUTCOMES:**

1. Perform in an ethical and professional manner during all aspects of clinical, classroom and working environments demonstrating Affective Behavior.
2. Demonstrate knowledge and application of appropriate respiratory care in the clinical setting (Cognitive-Knowledge)
3. Demonstrate proficiency in technical and clinical skills applicable for a Registered Respiratory Therapist (Psychomotor-Skills)

4. Exhibit professional attitudes and behaviors appropriate for the Registered Respiratory Therapist (Affective-Behavior)
5. Successfully pass credentialing examinations offered by the National Board of Respiratory Care (NBRC).
6. Seek employment as Respiratory Care Therapists.

#### **COURSE LEARNING OUTCOMES:**

- **Administer Intermittent Positive Pressure Breathing. (Psychomotor Skills)**
- **Administer postural drainage. (Psychomotor-Skills)**
- **Administer chest percussion. (Psychomotor-Skills)**
- **Evaluate an artificial airway. (Cognitive-Knowledge)**
- **Maintain an artificial airway. (Psychomotor-Skills)**
- **Perform sterile suction and Closed Ballard suctioning. (Psychomotor-Skills)**
- **Administer suction. (Psychomotor-Skills)**
- **Administer medical gas therapy. (Psychomotor Skills)**
- **Administer Low Flow Oxygen Therapy. (Psychomotor Skills)**
- **Administer High Flow aerosol therapy with cool large volume nebulizers. (Psychomotor Skills)**
- **Administer oxygen through a nasal cannula. (Psychomotor Skills)**
- **Administer oxygen through a venture mask. (Psychomotor Skills)**
- **Administer oxygen through simple mask. (Psychomotor Skills)**
- **Administer oxygen through a partial rebreathing mask. (Psychomotor Skills)**
- **Administer oxygen through a nonrebreathing mask. (Psychomotor Skills)**
- **Administer aerosol therapy with small volume nebulizers. (Psychomotor Skills)**
- **Administer aerosol therapy with cool large volume nebulizers. (Psychomotor Skills)**
- **Administer aerosol therapy with heated large volume nebulizers. (Psychomotor Skills)**
- **Administer aerosol therapy with cool mist oxygen tents. (Psychomotor Skills)**
- **Administer Lung Inflation Therapy. (Psychomotor Skills)**
- **Administer incentive spirometry treatment including patient instruction and follow up. (Psychomotor Skills)**
- **Perform patient assessment including inspection: Palpation, percussion, auscultation, and evaluation of radiograph, laboratory, and other diagnostic materials. (Psychomotor Skills)**

#### **TOPICAL OUTLINE**

- I. Chest Physiotherapy
- II. Lung Inflation Therapy
- III. Medical Gas Therapy
- IV. Patient Assessment & Monitoring
  - a. Chest Examination
  - b. Arterial Blood Gas
  - c. Relating Other Data to Patient Condition
  - d. Infection Control Policies.

#### **COURSE LEARNING OUTCOMES AND ASSESSMENTS**

Module I

Material Covered: Chest Physiotherapy

Lung Expansion Therapy Devices (Mosby's) Chapter 7

## Respiratory Procedures (Oakes) Chapter 10

### Assessments:

- Case Study/Quizzes/Presentations
- Skill Check
- Lab Competency
- Clinical Performance
- Clinical Sheets

### Learning Outcomes: (Cognitive-Knowledge) **see green outcomes**

- 1. List & Describe the Goals, Indications, Contra-Indications & Hazards of Chest Physiotherapy**
2. Identify the major components of pneumatically and electrically powered percussors.
3. Describe the theory of operation of devices that enhance clearance of airway secretions by producing high-frequency oscillations to the lungs and chest wall.
4. Discuss how mechanical insufflator-exsufflator devices can enhance airway secretions in patients with respiratory muscle weakness or paralysis.

## Module II

### Material Covered: Lung Inflation Therapy

### Lung Expansion Therapy Devices (Mosby's) Chapter 7

### Respiratory Procedures (Oakes) Chapter 10

### Assessments:

- Case Study/Quizzes/Presentations
- Skill Check
- Lab Competency
- Clinical Performance
- Clinical Sheets

### Learning Outcomes: (Cognitive-Knowledge) **red outcomes / see green outcomes**

- 1. Describe two types of machines used to administer intermittent positive-pressure therapy (IPPB).**
  - 2. List the indications and contraindications for IPPB.**
  - 3. Explain the clinical need for IPPB.**
  - 4. Describe the clinical goals of IPPB.**
  - 5. List the hazards and complications with administering IPPB.**
  - 6. Identify the frequency of administering IPPB.**
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- 1. List & Describe the Goals, Indications, Contra-Indications & Hazards of Lung Inflation Therapy**
  - 2. Identify the various equipment used to deliver lung inflation therapy. (IS, IPPB/Metaneb, Thera Pep, PAP Therapies(CPAP, IPAP, EPAP, BiPAP)**
  - 3. Define the 3 types of atelectasis (Passive, Resorptive, Lobar)**
  - 4. Select the appropriate lung inflation modality based on patient presentation.**

## Module III

### Material Covered: Aerosol Therapy

### Humidity and Aerosol Therapy Chapter 6

### Respiratory Procedures (Oakes) Chapter 10

### Assessments:

- Case Study/Quizzes/Presentations
- Skill Check
- Lab Competency
- Clinical Performance

- Clinical Sheets

Learning Outcomes: (Psychomotor-Skills) **see green outcomes**

1. **List & Describe the Goals, Indications, and Contraindications & Hazards of Humidity & Aerosol Therapy.**
2. **Demonstrate how to properly administer bland aerosol therapy with cool large volume nebulizers.**
3. **Demonstrate how to properly administer medication aerosol therapy with various aerosol devices.**
4. Explain how pneumatic, ultrasonic, and vibrating mesh aerosol generators work.
5. **Select the appropriate aerosol delivery device based on specific respiratory patient conditions.**

Module IV

Material Covered: Medical Gas Therapy

Administering Medical Gases: Regulators, Flowmeters, and Controlling Devices Chapter 4

Assessments:

- Case Study/Quizzes/Presentations
- Skill Check
- Lab Competency
- Clinical Performance
- Clinical Sheets

Learning Outcomes: (Cognitive-Knowledge) **see green outcomes**

1. **List & Describe the Goals, Indications, Contra-Indications & Hazards of Medical Gas Therapy**
2. **Demonstrate the ability to calculate the duration flow of oxygen utilizing the following clinical information: Tank Size, Tank Pressure and Gas Flow Rate.**
3. **Select the appropriate medical gas therapy based on patient presentation.**
4. Describe the effects of hyperbaric oxygen therapy.
5. List the indications and contraindications of nitric oxide therapy.
6. Describe the appropriate use of mixed gas (e.g., heliox, carbogen) therapy.
7. **Demonstrate the ability to calculate the duration flow of Heliox utilizing the flow conversion factors for a (80/20) & (70/30) Heliox mixture.**

Module V

Material Covered: Patient Assessment and Monitoring

Interpretation of Electrocardiogram Tracings Chapter 11

Assessments:

- Case Study/Quizzes/Presentations
- Skill Check
- Lab Competency
- Clinical Performance
- Clinical Sheets

Learning Outcomes:

1. Explain the principles of electrocardiography.
2. Identify the major components of an electrocardiograph.
3. Demonstrate the correct placement of electrodes on a patient to obtain a 12-lead electrocardiogram.
4. List and describe the most common arrhythmias encountered in clinical electrocardiography.

## **PART III: GRADING AND ASSESSMENT**

### **EVALUATION OF REQUIRED COURSE MEASURES**

Students' performance will be assessed and the weight associated with the various measures are listed below.

The following will be evaluated to obtain a grade in the clinical course requirements:

Cognitive (20%)	Quizzes, tests, case studies, and presentations, etc. Students must achieve 70% or better on the NBRC CRRT and RRT self-assessment exams.
Psychomotor (30%)	All course required <b><u>Skill Check Assessment</u></b> and <b><u>Laboratory Competency Practical Examination</u></b> must be completed. All check-offs are worth 30% of the student's clinical grade.
Affective (50%)	Development of appropriate attitude is as important as skill and knowledge development. Affective evaluation will focus on attention on the development of professional behaviors.

*"Students, who consistently are unable to meet the clinical objectives, use unsafe methods of delivering patient care, who show inadequate preparation in caring for patients, or who demonstrate unprofessional conduct in the clinical area may receive an unsatisfactory clinical evaluation. An unsatisfactory clinical evaluation constitutes failure of the course and immediate withdrawal from the program."*

#### Evaluation

<b>Quizzes/ Presentations/ Mock Test</b>	<b>10%</b>
<b>Skill Check -</b>	<b>10%</b>
<b>Case Study related to clinical checkoffs</b>	<b>20%</b>
<b>Clinical check offs</b>	<b>20%</b>
<b>Data Arc (ADL, Site, Preceptor &amp; Affective Evals)</b>	<b>20%</b>
<b>Clinical Sheets</b>	<b>20%</b>
<b>TOTAL</b>	<b>100%</b>

***\*Students, for the specific number and type of evaluations, please refer to the Instructor's Course Information Sheet. .***

#### DataArc

DataArc is a database-tracking system that monitors and collects information of students' clinical performance. Clinical evaluation forms and check-offs can now be completed online and directly sent to the students' instructors for review. Each therapist has a login and password that allows him or her to enter the system. In addition, each facility has a generic login that allows a therapist to enter data even if he or she is not in the system. It is preferred that all evaluators have an individualized login/password. Below are instructions:

1. Go to DataArc
2. Mouse over Allied Health, Click on Respiratory Care
3. Type the log in and password provided
4. You should now be on the Clinical Instructor/student page navigation page
5. In the light blue box at the top of the page, click on the desired evaluation
6. For Clinical Instructors Select "Add"
7. Complete evaluation

## Evaluation Process

Every respiratory care student will be issued a list of competencies at the beginning of his or her clinical instruction course (RES 152). The clinical competencies are on the Data Arc system. If the competency is listed on the pick-list, he or she is allowed to perform the activity. Clinical competencies are a three-step process:

1. Complete the clinical competency in the lab
2. Score a “satisfactory” form a qualified RCP in the clinical setting
3. Score a second “satisfactory” score from a qualified RCP in the clinical setting.

## Summary Performance Evaluation

### The following will be used to evaluate the clinical/lab performance:

- **Satisfactory** – Completion of first attempt (90-100%) agrees with HGTC grading scale ready for clinical application with minimal supervision. Performed procedure accurately, or was able to correct performance without injury to the patient or decreasing effect of therapy being given.
- **Minor-Unsatisfactory** – Completion of first attempt (85-89%) needs to review fundamental concepts or requires re-evaluation of minor deficiency (s) (ex. Forgets to wash hands during the Follow-up stage. Must be re-evaluated on this step not the whole procedure).
- **Unsatisfactory performance** – Completion of first attempt (<80%) not ready for clinical application. Requires remediation under one of the following categories.
- **Major-Unsatisfactory** – Completion of 1st attempt (No grade must repeat check-off) requires additional supervised clinical practice and complete re-evaluation of the procedure.

--Completion of 2<sup>nd</sup> attempt Check-off with a Satisfactory = 75%

--Completion of 2<sup>nd</sup> attempt Check-off with Minor Unsatisfactory or Major Unsatisfactory = 0%

## Evaluation List

The following list of competencies will be evaluated for RES 154, additional list will be evaluated through a progression of the clinical courses of the Respiratory Care program at Horry Georgetown Technical College as the student masters each list and modality. This list is available on the DataArc system. For this course RES 154, the following will be evaluated by the three criteria: observation, performed with assistance, and performed unassisted via clinical lab and score a “satisfactory” by two Respiratory Care Practitioners (RCP) in the clinical setting.

Adult Floor Therapies Competencies	
X-Ray Interpretation	Mucous Clearance Adjuncts
<b>Hyperinflation Therapy</b>	ABG Analyzer Quality Assurance
Incentive Spirometry	<b>Radiology Testing</b>
Intermittent Positive Pressure Breathing	Lung Scan
<b>Bronchial Hygiene</b>	Computed Tomography Scan
Chest Physiotherapy	Magnetic Resonance Imaging

## Clinical Competency Performance Criteria

1. Confirmation
2. Equipment and Patient Preparation
3. Patient Assessment
4. Implementation of Procedure
5. Monitoring
6. Follow-up



7. Affective Communication, Performs Procedure in a Timely Manner, Safety Precautions, and has Rational Judgement and Explains Relationship Between Theory And Clinical Practice
8. Demonstrates Knowledge of Fundamental Concepts

### **Affective Evaluations**

Affective evaluations are the third part of the clinical evaluation process. They represent the instructors' overall view of the student's ability to communicate, confidence and independence, initiative and cooperation, maturity, professional ethics, organization and theory application. Points for the observed level of performance are assigned. Guidelines for outstanding behavior are outlined in the Student Handbook, Policies and Procedures of the Respiratory Care program.

**5= Exceptional.** Ready for clinical application with minimal supervision. Always arrives on time and prepared. Always exhibits concern for the dignity and welfare for patients and team members; prevents conflict of interest; always takes measures to deal with conflict effectively. Demonstrates a superior understanding of the concepts, facts, and theories specific to the situation. Can perform the skill with confidence, without error and greatly exceeding standards. Seldom requires assistance. Plans ahead, always works efficiently and manages time wisely.

**4= Above Average.** Regularly arrives on time and prepared. Consistently displays concern for dignity and welfare of patients and team members; prevents conflict of interest; seeks assistance when conflict arises. Demonstrates a complete and thorough understanding of the concepts, facts, and theories specific to the situation. Can perform the skill with confidence and above the expected standards. Requires minimal assistance. Completes assigned tasks in a timely fashion, and seldom needs direction.

**3= Acceptable.** Rarely absent but informs appropriate personnel; Is seldom late or unprepared, but notifies appropriate personnel. Generally displays concern for dignity and welfare of patients and team members; avoids conflict of interest; and recognizes conflicts as they arise. Demonstrates a general knowledge of the concepts, facts, and theories specific to the situation. Carries out the skill without significant error and meets the accepted standards most of the time. Requires occasional assistance. Completes assigned tasks, needs occasional direction.

**2= Below Average.** Is periodically late or unprepared. Sometimes neglectful of patients or team members dignity or welfare; occasionally fails to recognize conflict of interest; needs direction in avoiding conflict. Demonstrates an incomplete understanding of the concepts, facts, and theories specific to the situation. Makes non-critical errors when performing the skill and barely meets the expected standards. Inconsistent in completing tasks and needs help in prioritizing work. Requires frequent prompting or assistance.

**1 = Unacceptable.** Absent repeatedly and neglects to inform appropriate personnel; student is frequently late and unprepared. Is negligent or inconsiderate of patients or team member's dignity or welfare; or demonstrates conflict of interest; or provokes conflict. Demonstrates no understanding of the concepts, facts, and theories specific to the situation. Cannot perform the skill or is in danger of harming the patient. Needs constant assistance. Rarely completes assigned tasks, wastes time and needs constant assistance and direction.

**N/A Not Applicable-** Objective not applicable to this clinical setting

**N/O Not Observed-**Objective Not Observed to the extent that a rating is appropriate

\*designated safety criteria elements that the student must receive a 4 to pass the course regardless of the average score

\*\*designated *behavioral foundational elements in clinical practice* that the student must receive a 4 to pass the course regardless of the average score

## GRADING SYSTEM:

Purpose:

To provide information to each student concerning the calculation of grades and to assure consistency and fairness in assigning grades. The Respiratory Care Program grading policy is different than the Horry Georgetown Technical College grading policy.

Policy:

1. A grade of "C" or better must be achieved in all required respiratory care program courses in order for a student to progress through the program. A final grade of less than 75 is not passing in the Respiratory Care Program and does not meet the requirements for progression within the program.

GRADING SCALE:

100-90 = A

89-80 = B

79-75 = C

74-69 = D

68 - 0 = F

2. Each student must demonstrate safety and competence in required laboratory skill check assessments and laboratory competency practical examinations. Each course with a laboratory component includes skill check assessments that must be mastered within the course.

Skill Check Assessment:

The student is required to successfully complete each skill check assessment for the course prior to the final laboratory competency practical examination or per the instructor's schedule. The course instructor will announce the due date of the skill check assessments in the course calendar informational sheet. Failure to complete a skill check assessment will not allow the student to complete the laboratory competency practical examination, which will result in failure of the course.

Laboratory Competency Practical Examination

A minimum of 75% and all critical elements must be achieved to pass the laboratory competency practical examination. 2 attempts will be given for the competency. Repeat competency will be awarded a maximum of 75%. Students will only be allowed to try the competency one time per day. Failure to pass the competency within **two** attempts will result in dismissal from the program.

Each student must demonstrate safety and behavior competence in designated criteria to successfully pass the Clinical Education Course. Students who do not pass a Clinical Education Course will be removed from the program.

Grades earned in courses impact academic progression and financial aid status. Before withdrawing from a course, be sure to talk with your instructor and financial aid counselor about the implications of that course of action. Ds, Fs, Ws, WFs and also negatively impacts academic progression and financial aid status.

The Add/Drop Period is the first 5 days of the semester for **full term** classes. Please refer to the academic calendar for deadlines for add/drop ([Academic Calendars](#)). You must attend at least one meeting of all of your classes during that period. If you do not, you will be dropped from the course(s) and your Financial Aid will be reduced accordingly.

## EVALUATION OF REQUIRED COURSE ASSIGNMENTS

Students' performance will be assessed and the weight associated with the various measures are listed below:

#### LATE ASSIGNMENTS:

1. A maximum of one (1) scheduled exam may be made up at the discretion of the course instructor. Any subsequently missed exams will receive a grade of zero (0).
2. Makeup examinations will be taken in the testing center on campus or a location designated by the instructor.
3. A 10% overall deduction will be applied to the makeup examination score for missed examinations unless faculty are notified in advance (more than 12 hours) or medical documentation is provided.
4. Late Homework assignments will have a deduction of ten points of the total assignment grade.
5. Homework assignments will not be accepted after 5 days of the due date.
6. Quizzes are taken in class and cannot be made up if missed.

#### **PART IV: ATTENDANCE**

Horry-Georgetown Technical College maintains a general attendance policy requiring students to be present for a minimum of eighty percent (80%) of his or her classes in order to be eligible to receive credit for any course. At a minimum, a student may be withdrawn from a course(s) after he or she has been absent in excess of ten percent (10%) of the total contact hours for a course.

##### **Attendance for Face-to-Face Courses:**

Students are expected to attend a minimum of 80% of all classes and 100% of all clinical/lab hours/days per Respiratory Care course per semester.

After the allowed number of absences, the student will be dropped from the course with a W or a WF. There are no excused absences.

An absence is defined as missing greater than 10 minutes of classroom time or leaving class early with more than 10 minutes remaining.

##### **Classroom Tardy:**

A classroom tardy is defined as missing up to 10 minutes of classroom time.

Three tardies will be counted as one (1) class absence.

##### **Clinical Education Attendance:**

The student in clinical rotations is expected to adopt the working hours of the clinical supervisor.

Completion of full clinical hours is required to pass the clinical rotation. No more than 10% of the clinical hours may be made up at the discretion of the Respiratory Care Program Director and faculty clinical instructor.

Clinical absences in excess of 10% of the total hours required or failure to make up the allowed 10% will result in a grade of "unsatisfactory" for clinical and a failing grade for the course.

A clinical education tardy is defined as missing any of the first 10 minutes of scheduled clinical education.

The student is expected to attend the clinic during regularly scheduled hours of operation. In some instances, this may require late/ evening, weekend hours and holidays.

The student will report to the clinic prior to the designated start time as established by the faculty instructor. If for some reason the student is unable to arrive at the clinic by the designated start time, the student must notify the faculty clinical instructor prior to the start of clinic.

Attendance throughout the Clinical Education Experience ensures maximum student participation in professional growth and development. Absences for non-emergency nature can limit the student's

educational experience in the clinic. No student may have any unexcused absence during a clinical education experience.

An unexcused absence is when a student is not present during a scheduled clinic day and has not obtained prior permission from the faculty clinical instructor. The faculty clinical instructor will determine the reasonableness of the excuse.

Students should schedule all non-emergency appointments (dentist, doctor, other) outside of clinical hours. Students are not to leave clinical sites early for work. Work schedules must not interfere with clinical time. In the event of a conflict, the clinical takes precedence.

Clinical Schedules are dependent on the clinic and clinical instructor schedules.

IF YOU ARE GOING TO BE ABSENT FROM CLINICAL, YOU NEED TO COMPLETE THE 3 following steps:

- 1. NOTIFY THE CLINICAL SITE ONE HOUR PRIOR TO THE CLINIC ROTATION START TIME,**
- 2. NOTIFY THE DIRECTOR of CLINICAL EDUCATION by calling 843-839-1064**
- 3. NOTIFY PROGRAM DIRECTOR.**

- GREATER THAN 10 MINUTES LATE TO THE CLINICAL SITE IS CONSIDERED A MISSED DAY OR AN ABSENCE
- LESS THAN 10 MINUTES LATE TO CLINICAL IS CONSIDERED A TARDY. THREE TARDY DAYS IS CONSIDERED EQUAL TO ONE ABSENCE.
- EACH ABSENCE RESULTS IN A 10% DECREASE IN YOUR CLINICAL GRADE.
- ALL MISSED CLINICAL DAYS MUST BE MADE UP PRIOR TO THE END OF THAT SEMESTER IN WHICH THE ABSENCE/S OCCURRED AND MUST BE SCHEDULED BY THE CLINICAL DIRECTOR.
- CLINICAL DOCUMENTATION MUST BE SUBMITTED in Data Arc ON A DAILY BASIS. FAILURE TO DO SO WILL RESULT IN A 5% DECREASE IN YOUR CLINICAL GRADE.
- STUDENTS MUST ALSO ABIDE BY ALL RULES AND REGULATIONS OF ALL CLINICAL SITES AND CONSULT THE COLLEGE CATALOG, IF YOU HAVE QUESTIONS.

## **PART V: STUDENT RESOURCES**

The Student Success and Tutoring Center (SSTC)

The SSTC offers to all students the following **free** resources:

1. **Academic coaches** for most subject areas, **Writing Center Support**, and **college success skills**.



2. **On-line student success and academic support resources.** Visit the SSTC website: [SSTC](#) and visit the student services tab in your WaveNet account to schedule appointments using TutorTrac. For more information, call: SSTC Conway, 349-7872; SSTC Grand Strand, 477-2113; and SSTC Georgetown, 520-1455. Room locations and Live Chat is available on the SSTC website.

## Student Information Center: WaveNet Central (WNC)

WNC offers to all students the following **free** resources:

1. **Getting around HGTC:** General information and guidance for enrollment!
2. Use the **Online Resource Center (ORC)** for COMPASS support, technology education, and online tools.



3. **Drop-in technology support or scheduled training** in the Center or in class.
4. **In-person workshops, online tutorials and more services** are available.

Visit the WNC website: [Wavenetcentral](http://Wavenetcentral). Live Chat and Center locations are posted on the website. Or please call one of the following locations: WNC Conway, 349-5182; WNC Grand Strand, 477-2076; and WNC Georgetown, 520-1473.

### Disability Services:

HGTC is committed to providing an accessible environment for students with disabilities. Inquiries may be directed to Jocelyn Williams, Director of Student Development on the Conway Campus Jaime Davis, Counselor/Advisor on the Georgetown Campus or Jim Ratliff, Counselor on the Grand Strand Campus. These individuals will review documentation of the student's disability and, in a confidential setting with the student, develop an educational accommodation plan.

Note: It is the student's responsibility to self-identify as needing accommodations and to provide acceptable documentation. After a student has self-identified and submitted documentation of a disability, accommodations may be determined, accepted, and provided.

### Title IX Requirements

The South Carolina Technical College System does not discriminate on the basis of race, color, gender, national or ethnic origin, age, religion, disability, marital status, veteran status, sexual orientation, gender identity, or pregnancy in educational programs and activities as required by Title IX. As outlined in the Violence Against Women Act, Horry Georgetown Technical College prohibits the offenses of domestic violence, dating violence, sexual assault, and stalking. Students who believe he or she has experienced or witnessed discrimination including sexual harassment, domestic violence, dating violence, sexual assault or stalking are encouraged to report such incidents to the Title IX Coordinators:

Dr. Melissa Batten, AVP of Student Affairs  
Building 1100, Room 107A, Conway Campus  
843-349-5228  
[Melissa Batten](#)

Jacquelyne Barrett, AVP of Human Resources  
Building 200, Room 212A, Conway Campus  
843-349-5212  
[Jacquelyne Barrett](#)

\*Faculty and Staff are required to report incidents to the Title IX Coordinators when involving students. The only HGTC employees exempt from mandatory reporting are licensed mental health professionals (only as part of their job description such as counseling services).