



INSTRUCTIONAL PACKAGE

RES 253
Advanced Clinical Studies I

Effective Term
Fall 2021

INSTRUCTIONAL PACKAGE

Part I: Course Information

Effective Term: Fall 2021

COURSE PREFIX: RES

COURSE TITLE: Advanced Clinical Studies I

CONTACT HOURS: 18 Clinical

CREDIT HOURS: 6

RATIONALE FOR THE COURSE:

RES 253 is a clinical course that further expands your clinical experience by integrating clinical and classroom theory. In RES 253, you will demonstrate the ability to apply current and previously acquired clinical skills to patients in current clinical rotations in a professional matter. You will perform basic respiratory care procedures in a safe and effective manner, as well as, demonstrate communication skills to deliver an appropriate respiratory care plan. Furthermore, continue to develop skills from previous clinical application courses.

COURSE DESCRIPTION:

This course includes clinical instructions in advanced patient care practice.

PREREQUISITES/CO-REQUISITES:

Respiratory Care Clinical courses RES 152, 154, and 249. Required prerequisite courses must be completed with a grade of "C" or better.

REQUIRED MATERIALS:

Optional: Dana Oakes, Pediatric and Neonatal Pocket Guide to Respiratory Care 9th ed.

Please visit the [BOOKSTORE](#) online site for most current textbook information. Use the direct link below to find textbooks.

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

ADDITIONAL REQUIREMENTS:

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.

[myHGTC](#) and [college](#) email access.

Data Arc account for clinical time clock, procedure checklist, and clinical assessment evaluations.

CLASSROOM ETIQUETTE:

2021-2022

As a matter of courtesy to other students and your professor, please turn off cell phones and other communication/entertainment devices before class begins. If you are monitoring for an emergency, please notify your professor prior to class and switch cell phone ringers to vibrate.

When on experiential rotations, students are expected to abide by the policies of that institution.

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Guiding Principal for Clinical Policies: The clinical policies for the Respiratory Care Program are established to promote professionalism, ethical behavior and to promote patient safety with minimum disruption to the clinical facility. Course and program rules and regulations, as well as college ones, change as the need arises. Students are expected to follow current policies as directed.

Criminal Background:

Students may be required to submit to criminal background checks or drug screening before entering a clinical site. If for ANY reason a student is not allowed to attend all clinical sites for training, the student will be unable to complete the clinical course and will be dropped from the program.

Clinical Handbook Policies and Procedures

1. Attendance:

- a. It is the student's responsibility to be at their clinical assignment as scheduled. Clinical schedules will not be changed without approval of the Director of Clinical Education. All scheduled clinical time (whether in the hospital or outside of the hospital) is subject to all clinical policies.
- b. Clocking In & Out: It is the student's responsibility to accurately account for clinical time completed. Students are required to log in and out of Data Arc using ONLY approved Respiratory Department computers designated for Data Arc access. Students are not allowed to clock in/out on personal devices.
- c. Students unable to report to clinic on any given day for any reason they must notify the Director of Clinical Education/Program Director (leave a voicemail on office phone) and the assigned hospital at least 30 minutes prior to the beginning of the shift. It is the student's responsibility to notify the hospital and Director of Clinical Education.
- d. **No clinical absence is excused** unless student has written documentation for the absence student will not need to make up the missed day.
- e. With and without written excuse students will still incur clinical documentation grade of zero "0" for daily grade and 5% graded deduction for the day.
- f. If students are missing written excuse, then student will be required to make up their clinical day before the final grades are due. If student does not make up the day, then they will receive an incomplete "I" as their final grade. The student will be able to proceed to the next semester until the day is made up.

Grand Strand (843.692.1506) (843.692.1510)

Loris (843.716.8604) (843.716.8604)

Waccamaw (843.777.1156) (843.652.1025) (843.652.1846)

Conway (843.347.1565)

Seacoast (843.366.3604) (843.366.3605)

Georgetown (843.527.7400) (843.527.8064)

Apria (843.357.3520)

Clinical Faculty Contact Numbers

2021-2022

Roxanne Neumann: Office (843.839.1064) email [roxanne_neumann_email](#)

Sheri Tanner: Office (843.839.1102) email [Sheri Tanner_email](#)

2. Procedure for Excused Clinical Time

- a. If you are unable to attend or will be tardy for your clinical assignment, call R. Neumann Office #843-839-1064 or S. Tanner #843-839-1102 and leave your name and reason for absence or tardy on the voice mail. The time you called is recorded by the machine. Immediately after you have left your message, notify the hospital and department of your circumstances. Option 2: please leave message on Remind App with detailed explanation. Both the Director of Clinical Education/Program Director and the hospital must be notified 30 minutes prior to your scheduled shift.
- b. If you need to leave clinic for ANY reason, you must attempt to contact the Director of Clinical Education or Program Director. If you are unable to contact them, then have the shift supervisor (Not your clinical Preceptor) call 843-839-1064/843-839-1102 to leave a message on the voice mail that you have been given permission to leave clinic and the reason. Students are expected to be in clinic for the FULL time.
- c. **If you arrive at the wrong clinical site, please go home if you are unable to make it to the assigned clinical site in time. Do not stay at the wrong clinical site. You must contact the DCE or PD immediately using Remind or calling their office phone number. An absence will incur, and student will need to arrange a makeup day in the future with a 5% deduction from their overall grade for each occurrence.**
- d. Failure to notify the Director of Clinical Education/Program Director and hospital as stated above will result in an unexcused tardy/absence and will lower the student's final clinical grade by 10 points on the first incident. The second incident will result in an "F" grade for the clinical course. (Rationale: All students are expected to communicate with the individual that is responsible for the clinical schedule and with the hospital supervisor. All students are expected to complete the FULL TIME for each rotation unless excused by the Director of Clinical Education or Program Director)
- e. The student's overall grade will be lowered by 5% for each incident. All absences except medical reasons will incur the 5% deduction for 1st absence, 10% deduction for 2nd absence, and "F" grade for all absences thereafter.
 - i. 1st absence – 5% deduction from overall grade
 - ii. 2nd absence – 10% deduction from overall grade
 - iii. 3rd absence – Removal from course and "F" grade

3. Allowable Missed Clinical Time

- a. All missed clinical time are unexcused except for medical reasons or student is currently in isolation/quarantine for COVID19 rule out or exposure.
- b. The program will adhere to the most up to date HGTC Covid19/DHEC protocols for missing clinical time. See [CDC Covid19 Isolation Procedure](#). All Covid Related absences must be made up before the end of the current semester.
- c. If students miss 2 consecutive days of clinical student will be removed from the course resulting in an "F" for the semester. The student will not be allowed to reenroll into the program per HGTC attendance policy.
- d. Any absence beyond the allowed time for the semester will result in an "F" grade. Under extenuating circumstances, the DCE may allow the student to miss up to a total of 20% of the total hours. The student is responsible for documenting in writing to the DCE's satisfaction, the extenuating circumstances. The DCE is under NO obligation to accept the student's documentation or extend the student the additional 10% in allotted absences. The student should also understand that arriving to lab late or leaving lab early counts towards the allotted hours of time missed. Once the student exceeds the hours of absences, the student will be terminated from the course. Students withdrawn from a course due to excessive absences will receive a grade of Withdraw ("W") up to the 2/3 point

of the semester. Thereafter, a Withdraw ("W") or Withdrew Failing ("WF") will be assigned dependent upon his/her academic status at the time of last date attended.

- e. Clinical attendance records are maintained in the Data Arc system and begin on the first day of class for both new and returning students, regardless of when he/she registers during the five-day registration and add/drop period at the beginning of each term.
 - f. The student's overall grade will be lowered by 5% for each excused incident beyond the 10% of clinical time students can miss. The Program Director will have the final decision over determining whether the situation has extenuating circumstances and warrants a grade adjustment.
 - g. Specialty Rotations: Students are responsible for attending at the assigned clinical time in specialty rotations. Failure to do so will result in a 26% reduction in the student's overall final grade.
2. Tardiness
- a. Students not clocked by the scheduled time as shown on the clinical schedule, are considered tardy.
 - i. If a student is later than 15 minutes, that constitutes 1 unexcused absence, and the student will not be allowed to attend clinic for that day.
 - ii. Three (3) excused tardies are equal to 1 absence. An excused tardy will be deducted from the allowable time that can be missed. Each excused tardy beyond the allowable time that can be missed, will result in a 2.5% reduction in the student's overall final clinical grade.
 - b. Failure of the student to follow the procedure for "Excused clinical time" will result in an unexcused tardy.
 - i. Two (2) unexcused tardies will be considered an unexcused absence within a semester and will lower the final grade by 10 points. Any additional unexcused tardy during the semester will constitute an unexcused absence. See (Page 1; 2.C.III) (Example: 2 unexcused tardies = 1 unexcused absence; 2 unexcused absences = "F" grade for the clinical course)
3. Consequences of Students being asked to leave Clinic
- a. Should a student be asked to leave ANY clinical rotation by their preceptor for ANY reason, the student will receive an unexcused absence and their final grade will be lowered by 10 points on the first event. The second unexcused absence will result in an "F" grade for the course.
4. Switching Clinic Schedule
- a. Students are not allowed to switch their clinic schedule without written approval via email from the DCE or Program Director.
 - b. If a switch is made and no approval is given the following consequences will occur:
 - i. 1st offense – 5 pts deducted from final clinic grade and verbal warning for all parties involved
 - ii. 2nd offense – 10 pts deducted from final clinic grade and written warning for all parties involved
 - iii. 3rd offense – 20 pts deducted from final clinic grade and written warning for all parties involved
5. Classroom/Clinic/Lab Attire: Should be consistent with all locations.
6. Dress Code
- a. All students must be properly attired in clinic as determined by the HGTC dress code (Hospital dress code supersedes HGTC policies):
 - b. All Students
 - i. Clean "pewter" scrubs properly fitted (Not tight fitting) (Scrubs must be monogrammed with HGTC logo and program name. Drawstrings should be tucked in pants, optional- only white undershirts are permitted)
 - ii. Black or White, comfortable all leather, low cut shoes, closed back
 - iii. Properly groomed appearance
 - c. Appropriate Hospital ID badge.
 - d. A legible HGTC Student picture ID badge visible always. HGTC insignia must always be visible.
 - e. Jewelry (optional) one ring per hand, one thin/narrow necklace less than 19" long.

7. Personal Protection Equipment
 - a. Students will be provided with PPE at the beginning of each clinical rotation per semester. For example, surgical mask, N95 mask, goggles, or face shield.
 - b. It is the student's responsibility to don and doff all PPE before entering any treatment area where aerosol medications will be administered, or humidified aerosols are present.
 - c. It is the student's responsibility to request replacement PPE as needed. Please ask clinical site for supplies first then PD or DCE will provide if clinical site is unable to provide.
 - d. All PPE must be appearing clean, no makeup, dirt, etc. on the inside or outside of mask. If the PPE is soiled students should replace with a clean mask.
 - e. Students should keep all reusable PPE in a clear plastic bag with name on front of bag.
8. Current DataArc packet and clinical objectives/policies.
9. Consequences of Dress code violation and being unprepared for Clinic
 - a. Students must adhere to the dress code and have a stethoscope, watch (with second hand or digital read-out), safety glasses and clinical pocket guide while in clinic. These items are essential to function effectively and safely in the clinical environment. Students who violate the dress code and who do not have required equipment in clinic are unprepared and will be given one (1) warning. Any future infraction will result in the student being dismissed from the clinical rotation and will be given an unexcused absence with a lowering of the final grade by 10 points. A third infraction will constitute a second unexcused absence, resulting in an "F" grade for the clinical course.
 - b. The attire should be neat, clean, without wrinkles, and properly fitting with skin-colored undergarments. No visible cleavage, chest hair, stomach skin, or back showing.
 - c. Clinic Attire: The attire should be neat, clean, without wrinkles, and properly fitting with skin-colored undergarments. The attire consists of a collared shirt/polo and neutral color dress slacks. A lab coat is required in the clinic setting unless the clinical instructor does not require it. Pants must not drag on the floor. No visible cleavage, chest hair, stomach skin, or back showing.
 - d. Lab Attire: Uniform should be loose fitting for ease of mobility in the laboratory setting. The attire should be neat, clean, without wrinkles, and properly fitting with skin-colored undergarments. No visible cleavage, chest hair, stomach skin, or back showing. At times there will be exceptions to this policy in the laboratory setting to accurately palpate on a lab partner. Proper draping will be instituted as appropriate. Clinic attire is required for laboratory practical competency examinations and when guest lecturers are present.
 - e. Shoes: Skid resistant or non-slip shoes with enclosed toe and heel
 - f. Identification: Student identification must be worn in every clinical setting on the left front bodice/collar of the shirt. Students must wear the HGTC Student ID Badge and/or an Institutional ID Badge in any health care agency, which requires and provides it.
 - g. Jewelry: A wristwatch with a second hand is required. No more than two rings may be worn on the hand. If medically needed, a medical alert bracelet/necklace may be worn. Visible body piercing including tongue stud/ring, clear nasal stud, gauges, or brow jewelry is to be removed prior to patient care and not worn while in uniform.
 - h. Tattoos: A visible tattoo must be covered during a clinical experience.
 - i. Hair: Hair must be neat, clean, and maintained so as not to contaminate the patient or the caregiver. Extreme hair colors, hairstyles and hair ornaments are not allowed while in uniform. Beards and mustaches must be well groomed and kept clean.
 - j. Fingernails: Nails must be kept short enough so as not to injure the patient. Clear or light-colored nail polish may be worn if it is neat and without designs. Artificial nails harbor yeast and bacteria and are, therefore, not allowed.
 - k. Cosmetics/Fragrance: Cosmetics are to be worn in moderation and be consistent with the expected appearance of a healthcare professional. Scented perfumes, powders, after-shave lotions, colognes,

and antiperspirants/deodorants may cause allergic reactions in some individuals and are not to be worn. Lotions and deodorants must be limited to those bearing light or no scent

10. Chewing Gum or Tobacco: Neither of these products is allowed during clinical experiences. The uniform may not smell of smoke upon arrival to the clinical area. Smoke odors embedded in clothing are as offensive as smoking.
11. Required number of procedures for Graduation
 - a. Students will be required to complete a minimum number of documented procedures prior to graduation from their Respiratory Care Program. The requirements are listed on DataArc in the Daily Log section.
 - b. Preparation and Objectives for Clinical Rotations
12. For the student to receive effective clinical training, the program will provide clinical objectives to guide the student in becoming more clinically competent.
 - a. All students are required to read and understand the stated clinical objectives prior to starting ANY clinical rotation. All students are required to complete one (1) Rotation Reporting Form for each specialty rotation within 4 days after completing the rotation. Students should work diligently in accomplishing these objectives and take the initiative for their learning seeking out opportunities to improve their knowledge and skill with the direction of their assigned clinical instructor.
 - b. Rest and Alcohol use: To promote patient safety, all students should have adequate rest prior to the clinical assignment. Students must also refrain from alcohol use at least 8 hours prior to the clinical assignment.
13. Professional Clinical Conduct
 - a. Students should conduct themselves in professional and safe manner while in the hospital. The student will remain with the assigned clinical instructor until the end of the shift or until reassigned by the hospital supervisor or program faculty. Should at any time the student be instructed to leave the clinical site by the hospital preceptor, the student is responsible to contact the program director immediately and coordinate a time to discuss the clinical incident with both the program & clinical director. Additionally, the student will not be allowed to return to clinic until the outcome of the faculty & student meeting is resolved.
 - b. If at any time the student perceives that there is an unsafe or threatening environment in which they are unable to resolve, the student should politely request to be excused and report the circumstances to hospital supervisor and the program faculty.
 - c. Refusal to complete/participate in assigned task by clinical preceptor. Student will have 5 points deducted for their final grade. The student will be written up for each occurrence. Second occurrence 10 points will be deducted from their final grade. Third occurrence will result in the student being given "F" for the final clinical grade.
14. DataArc Clinical Record Keeping System DataArc Website
 - a. INTRODUCTION
 - i. DataArc is an Internet based clinical record keeping system. The reason for implementing a standard tracking and performance evaluation system is to provide you, the student, with a standard set of clinical objectives and performance evaluations. This helps to ensure that performance standards are high and consistent for all students.
 - ii. What are the students responsible for?

The students will be responsible for:

 - i. Using only approved Respiratory Department computers designated for Data Arc Access for clocking in and out of their clinical rotations
 - ii. Submitting daily log forms and confirming that your clinical instructor has validated the form
 - iii. Complete a minimum of 6 Clinical Site Evaluations per semester to receive credit on clinic grade.
 - iv. Surveys as requested by the program faculty

- v. Preceptors complete 6 Affective (Student) Evaluations
- b. Once at the Data Arc web site you will need to enter your "log on name" and "password" to enter the system. This is done as a safety mechanism, so your data remains confidential.
- c. What will you gain by using the Web Based Clinical Tracking Program? An up to date look at your clinical progress as you progress through each semester in the following areas:
- d. Time Clock - Time clock records track the student's attendance and hours of clinical practice. Students should review their time reports on a frequent basis and report any errors to the program faculty.
- e. Daily Log - tracks the student's number of observations and performances done daily in the clinical setting. At the end of your clinical training this can be printed and placed in your portfolio for future employers to see the number and variety of clinical procedures you have observed and performed.
- f. Daily Logs will not be accepted after 10 days from the clinical rotation. All daily logs must be entered in Data Arc.
- g. Daily Logs will only need to be hand validated and uploaded to D2L for specialty rotations and if the preceptor does not have their password on hand.
- h. Failure to upload a daily log in Data Arc will incur an absence for each log not submitted. After 2 missed daily log entries student will be required to makeup those days with proper documentation. After 3 missed daily logs, students will be given an "F" for their overall daily and course grade then removed from the course.
- i. Students must send a message on Data Arc regarding the matter above statement letter "g".
- j. Competency Evaluations - provides a complete listing of completed competencies. Each competency is referenced and follows Clinical Practice Guidelines when applicable to provide students and clinical faculty with current information. Competencies also provide the student with a series of knowledge questions that may be asked by the Clinical Instructor to confirm your understanding of the procedures performed.
- k. Preceptor Evaluation - provides the student the opportunity to evaluate their clinical instructor they were assigned to. In the event of a negative preceptor encounter the student should complete an Evaluation Alert evaluation.
- l. Clinical Site Evaluation- provides the student the opportunity to evaluate the clinical site and the environment in which their learning took place. HGTC students are required to complete 1 Clinical Site Evaluation for each clinical area attended per semester.
- m. Students are required to complete a minimum of 6 Clinical Site Evaluations per semester in order to receive credit on clinic grade.
- n. Affective (Student) Evaluations: For each day of clinic rotation, the student must have 1 Affective evaluation completed. For each evaluation not completed by the beginning of Final Exams, the student Affective evaluation portion of the clinical grade will be reduced by 5 points for each missing Affective evaluation. Students are required review each **Affective Evaluation per clinic rotation in order to receive credit on clinic grade.**
- o. Action to be taken if clinical faculty do not Validate or complete the requested evaluations:
 - i. If a hospital staff member fails to validate a student's record or complete an evaluation after the initial request, the student will request 1 more time verbally or by written note. If the instructor still does not follow through the request within 2-3 days, the student will send a DataArc message to the DCE/PD noting the date and instructors name of the validation and/or evaluation were requested. The student will not be penalized if they follow the above action.
- p. Back-up procedures if DataArc cannot be accessed:
 - i. If for ANY reason DataArc cannot be accessed the student should complete a paper "Student Daily Log" and have the instructor sign to validate the record.
 - ii. **The student must create a daily log in DataArc** and submit the paper copy to the Director of Clinical Education (DCE)/Program Director within 4 days of the occurrence to

receive credit for the clinical day. If the student fails to submit the documentation by the end of the 4th day in which the incident occurred, the student will be considered absent, and no credit will be given for any procedures done on that record. If the student is unable to complete the deadlines above due to extreme circumstances, they should notify the DCE/PD to be given an extension. "Student Daily Log" forms may be downloaded from the college's D2L web site under the Dropbox section of the course.

- q. Failure to successfully Clock in or Out of Data Arc: Students who are unable to log into or out of Data Arc for any reason are required to notify the Director of Clinical Education immediately at 843-839-1064 and complete a paper log sheet.
 - r. Falsification of a DataArc record is viewed as "Academic dishonesty" and the college policies dealing with Academic dishonesty will be applied to this situation.
 - s. Sharing of passwords, entering data for someone other than yourself under their DataArc account is a violation of security. This behavior is unethical and constitutes a fraudulent representation of clinical records. The "Academic dishonesty" applies to these situations.
15. Telephone policy
- a. Hospital phones are not for personal use unless it is an emergency. All cell phones are to be turned to "Silent mode" while in the hospital. Personal use of phones cannot occur in the patient care areas. Hospital policies may supersede this guideline. Failure to adhere to this policy will result in the student being asked to leave clinic and be counted as an unexcused absence. See (page 2, 2G) for consequences of noncompliance.
16. Student Clinical Education and Hospital Employment
- a. Students may not be incorporated into the department work schedules to serve as staff, paid or unpaid. The guiding principle is that student clinical activities are to be closely supervised to ensure that the activities are educational. This is not to say that a student may not assist a staff member in completing their work assignment, but the student cannot accept the staff member's entire workload and not be supervised. To use this practice as a part of clinical training is a direct violation of the Committee on Accreditation for Respiratory Care Standard Section V.C. which states, "All activities required in the program must be educational and students must not be substituted for staff." In addition, it is a violation of the Clinical Affiliate Agreement which states on page 4, the last paragraph "Students must not be substituted for paid personnel to conduct the work of the clinical facility. However, after demonstrating proficiency, students may be permitted to undertake certain defined activities with appropriate supervision and direction".
17. Students found working as a paid hospital employee's while receiving credit for clinic are violating the above principle and will have 26% deducted from their final clinical grade for the semester for each violation. This behavior is also viewed as "Academic dishonesty" because the clinical records are being falsified because of duplicated time.
- 18. Accident Occurring on or off Campus**
- a. Accidents involving Faculty, Staff and Student Workers (work-study, clinical student, or students on a required internship):
 - b. **All exposures of students to blood/body fluids are to be reported immediately to the Employee Health Coordinator or other individual as designated by the specific institution in which the students are exposed.** The student will receive follow up care (first aid, evaluation and prophylaxis as indicated). Student will go to the emergency room at that facility. Post Exposure Protocol will be implemented within one hour following exposure to known or highly suspected HIV positive clients. Immediately call the program director 843-839-1102 and they will inform the department chair, and Dean of Health Sciences about the exposure. The student will be counseled following the event.
 - c. An accident/illness involving faculty, staff or student worker must be reported immediately to the Human Resources Department (843.349.7134) before seeking medical treatment, if possible, so an

accident/incident report can be completed, and Worker's Compensation can be notified. In the event someone in Human Resources cannot be notified, the injured party may contact the College's Worker's Compensation insurance carrier, Compendium Services, to complete an accident/incident report and to receive clearance for treatment at 877.709.2667. If the incident is an emergency, please notify Human Resources as soon as the proper medical attention has been rendered for verification of workers' compensation coverage.

- d. In any event, if an accident occurs, proper documentation needs to be completed. An accident report needs to be filled out stating the name of the injured party, the location of the accident, his/her identification number (social or H number), his/her address & phone number, the date & time of the accident, whether there were witnesses, and a brief description of what occurred. Attached is a copy of the Accident/Incident Report form. A copy of the report needs to be distributed to the following departments: Human Resources, the respective Supervisor, and the Dean/Provost of the specific campus.
- e. If you need to go to the doctor's office, the following locations work in conjunction with our Worker's Compensation:

Doctor's Office Sites for Worker's Compensation
Doctors Care - Carolina Forest 200 Middleburg Dr Myrtle Beach, SC 29579 Mon-Fri 8am-8pm Sat/Sun 9am-5pm 843-903-6650
Doctors Care - North Myrtle Beach 1714 Hwy 17 Myrtle Beach, SC 29582 Every day 8am-8pm 843-361-0705
Doctors Care - Strand Medical 1220 21st Ave. Myrtle Beach, SC Every day 8am-8pm 843-626-9379
Doctors Care - Church Street (Hwy 501) 1113 Church St Conway, SC Every day 8am-8pm 843-248-6269
Doctors Care – Georgetown 1068 North Frazier St Georgetown, SC 29440 Mon-Fri 8am-8pm Sat/Sun 9am-5pm 843-545-7200

Part II: Student Learning Outcomes

1. Administer intermittent positive Pressure breathing to a critical care patient.
2. Administer chest physiotherapy to a critical care patient.
3. Administer airway care to a critical care patient.
4. Administer oxygen therapy to a critical care patient.
5. Administer aerosol therapy to a critical care patient.
6. Administer incentive spirometry to a critical care patient.
7. Assess a critical care patient including palpation; percussion; and auscultation; evaluation of radiograph, laboratory, and other diagnostic materials.
8. Perform airway care including assessment, cleaning, and changing artificial airway tubes.
9. Monitor ventilator parameters.
10. Assess ventilator functions.
11. Collect arterial blood through arterial puncture and arterial catheters.
12. Handle collected blood.
13. Analyze arterial blood for blood gas and acid base parameters.
14. Perform an EKG study.
15. Explain basic EKG arrhythmia.
16. Perform respiratory care on standard and critically ill pediatric and neonatal patients including patient assessment, chest physiotherapy, airway care, medical gas therapy, oxygen therapy, aerosol therapy, and mechanical ventilation.
17. Abide by all rules and regulations of the respiratory care program.

COURSE LEARNING OUTCOMES and ASSESSMENTS*:

Module I

Material Covered: Basic Respiratory Care of Critical Care Patients

Dana Oakes, Pocket Guide to Respiratory Care 9th Ed.

Dana Oakes, Neonatal and Pediatric Guide

Assessments:

- Case Study/Tests/Presentations/Lab Competency/TMC Exam
- Clinical Performance/ Skill Check
- Clinical Sheets

Learning Outcomes:

1. Administer intermittent positive Pressure breathing to a critical care patient.
2. Administer chest physiotherapy to a critical care patient.
3. Administer airway care to a critical care patient.
4. Administer oxygen therapy to a critical care patient.
5. Administer aerosol therapy to a critical care patient.
6. Administer incentive spirometry to a critical care patient.
7. Assess a critical care patient including palpation; percussion; and auscultation; and evaluation of radiograph, laboratory, and other diagnostic materials.

Module II

Material Covered: Ventilatory Management – Airway Care

Dana Oakes, Pocket Guide to Respiratory Care 9th Ed.

Dana Oakes, Neonatal and Pediatric Guide

Assessments:

- Case Study/Tests/Presentations/Lab Competency/TMC Exam
- Clinical Performance/ Skill Check
- Clinical Sheets

Learning Outcomes: (Cognitive-Knowledge)

1. Perform airway care including assessment, cleaning, and changing artificial airway tubes.
2. Monitor ventilator parameters.
3. Assess ventilator functions.

Module III

Material Covered: Hemodynamics

ABG Dana Oakes ABG Pocket Guide

Dana Oakes, Pocket Guide to Respiratory Care 9th Ed.

EKG Interpretation "Oakes" Chapter 4

Dana Oakes, Neonatal and Pediatric Guide

Assessments:

- Case Study/Tests/Presentations/Lab Competency/TMC Exam
- Clinical Performance/ Skill Check
- Clinical Sheets

Learning Outcomes: (Psychomotor-Skills) (Affective-Behavior)

1. Collect arterial blood through arterial puncture and arterial catheters.
2. Handle collected blood.
3. Analyze arterial blood for blood gas and acid base parameters.
4. Perform an EKG study.
5. Explain basic EKG arrhythmia.

Part III: Grading and Assessment

EVALUATION OF REQUIRED COURSE MEASURES/ARTIFACTS*:

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

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

Cognitive

Quizzes, tests, case studies, and presentations, etc.

Psychomotor

All course required Skill Check Assessment and Laboratory Competency Practical Examination must be completed. All checkoffs are worth 35% of the student's clinical grade.

Affective

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."

Competency Areas:
Mechanical Ventilation Setup
Mechanical Ventilator Check
NIPPV Setup
ACLS

EVALUATION*

Clinical Documentation	25%
Case Studies/Affective Evaluations	25%
Clinical Competencies	20%
<u>Final Exam</u>	<u>30%</u>
	100%

1. All exams are mandatory and must be completed on date of exam. Exams cannot be made up unless for extenuating circumstances or doctors excuse is provided. Any subsequently missed exams will receive a grade of 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. Final exams cannot be made up. Missing a final exam will result in a failure for the course an "F" will be given for the final grade and removal from the program.
5. The discretion of the professor will decide if an absence is excused only under this circumstance will a makeup exam be allowed.

Missing/Late Assignments:

- Missing daily logs will be considered an absence student will incur an absence.
 1. Will be required to make up the day.
 2. Will be considered an unexcused absence.
- Late homework assignments will have a deduction of ten points of the total assignment grade.
- 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.
- 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.
- All Data Arc documentation will be accepted up to 10 days after the due date. Data Arc documentation will not be accepted after the 10-day courtesy period and a grade of zero (0) will be assigned to that Data portion of the overall grade.

Data Arc

Data Arc is a database-tracking system that monitors and collects information of students' clinical performance. Clinical evaluation forms and checkoffs 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 Data Arc Website

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

Lab Competency and 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. Three attempts can be made to pass the lab competencies and skill check. The course instructor will announce the due date of the skill check assessments in the course calendar informational sheet.

Summary Performance Evaluation

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

Satisfactory – Completion of first attempt (85-100%) Performed procedure accurately or was able to correct performance without injury to the patient or decreasing effect of therapy being given.

Each competency and skill check are considered a pass/failure. If a student makes less than 85% on the first attempt. The student may repeat the competency/skill check two additional times after the first attempt.

Unsatisfactory performance – Completion of first attempt (less than <85%). Requires remediation under the following categories.

- The psychomotor portion of the performance evaluation is a pass/fail grading criterion. After a student's second attempt, if the student does not pass the physical portion with an 85% or greater. Failure of the physical portion of the course will result in failure of the course.
- Failure to complete a critical skill after the second attempt within the psychomotor evaluation will also result as a failure of the course.

Emphasized Clinical Tasks by Semester Note:

Emphasized Clinical Tasks are those procedures the students are learning to perform and will be evaluated on during the semester. Students are expected to perform all procedures that they have been "Checked Off" on with minimum supervision.

Clinical Competency Performance Criteria

Data Arc clinical assessment sheets are available diagnostic competency and are required to evaluate Student's psychomotor, cognitive, and effective evaluation.

Emphasized Clinical Tasks by Semester Note:				
Semester	Class	Course	Emphasized Clinical Tasks	Tasks that may be performed with minimum supervision
Fall	Freshmen	RES 152	Handwashing, Chart Review, Patient Assessment, O2 Therapy, Tanks, Incentive Spirometry, Aerosol/Humidity Therapy, CPR	
	Seniors	RES 253	Mechanical Ventilation, Vent Graphics, NIPPV, Intubation, Home Care, PFT/Interpretation	O2 Therapy, Lung Inflation / IS, Aerosol/Humidity Therapy, Mucus Clearance (P&PD, Flutter Valve), CPR, ECG, ABG analysis, Airway care/Sxn, Mechanical Ventilation, PFT/Interpretation
Spring	Freshmen	RES 154	Medication Aerosol, Lung Inflation Therapy (Easy PAP/IPPB), Aerosol/Humidity Therapy, Mucus Clearance (P&PD, Flutter Valve), PFT/Spirometry, ABG's, SXN, CPR, ECG	Handwashing, Chart Review, Patient Assessment, O2 Therapy, Tanks, Lung Inflation / IS, Aerosol/Humidity Therapy, CPR
	Seniors	RES 254	Adult Ventilator Care, Cardiac Catheterization, Neo/PEDS, Sleep Lab, Emer. Dept., CPR	O2 Therapy, Lung Inflation/IS, Aerosol/Humidity Therapy, Mucus Clearance (P&PD, Flutter Valve), CPR, ECG, ABG analysis, Airway care/Sxn, Mechanical Ventilation, PFT/Interpretation/PALS/NRP/ACLS
Summer	Freshman	RES 249	ABG analysis, Airway care/Suctioning, Mechanical Ventilation Set Up, ACLS	O2 Therapy, Lung Inflation Therapy (Easy PAP/IPPB), Incentive Spirometry, Aerosol/Humidity Therapy, Mucus Clearance (P&PD, Flutter Valve), CPR, ECG, ABG analysis, Airway care/Suctioning

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, 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

***Students who receive a score less than 3 regardless of average affective score will receive a verbal warning for 1st offense, 2nd offense student will receive a written warning and 10% deduction in overall course grade, and 3rd offense student will be removed from clinical rotations with a "F" as the final clinical grade.

GRADING SYSTEM:

Please note the College adheres to a 10 point grading scale A = 100 – 90, B = 89- 80, C = 79 – 70, D = 69 – 60, F = 59 and below. You must have your Dean's approval if changes in the scale are made.

A grade of "C" or better must be achieved in all required respiratory care program courses 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. This policy is different than the Horry Georgetown Technical College Grading Policy.

GRADING SCALE:

100 - 90 =	A
89 - 80 =	B
79 - 75 =	C
74 - 69 =	D
68 - 0 =	F

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 Is also negatively impact academic progression and financial aid status.

The Add/Drop Period is the first 5 days of the semester for **full term** classes. Add/Drop periods are shorter for accelerated format courses. Please refer to the [academic calendar](#) for deadlines for add/drop. 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.

Part IV: Attendance

Horry-Georgetown Technical College maintains a general attendance policy requiring students to be present for a minimum of 80 percent (80%) of their classes to receive credit for any course. Due to the varied nature of courses taught at the college, some faculty may require up to 90 percent (90%) attendance. Pursuant to 34 Code of Federal Regulations 228.22 - Return to Title IV Funds, once a student has missed over 20% of the course or has missed two (2) consecutive weeks, the faculty is obligated to withdraw the student and a student may not be permitted to reenroll.

Part V: Student Resources



THE STUDENT SUCCESS AND TUTORING CENTER (SSTC):

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

1. **Academic tutors** for most subject areas, **Writing Center support**, and **college success skills**.
2. Online **tutoring** and academic support resources.
3. Professional and interpersonal communication **coaching** in the EPIC Labs.

Visit the [Student Success & Tutoring Center](#) website for more information. To schedule tutoring, contact the SSTC at sstc@hgtc.edu or self-schedule in the Penji iOS/Android app or at www.penjiapp.com. Email sstc@hgtc.edu or call SSTC Conway, 349-7872; SSTC Grand Strand, 477-2113; and SSTC Georgetown, 520-1455, or go to the [Online Resource Center](#) to access on-demand resources.



STUDENT INFORMATION CENTER: TECH Central

TECH Central offers to all students the following free resources:

1. **Getting around HGTC:** General information and guidance for enrollment, financial aid, registration, and payment plan support!
2. Use the [Online Resource Center \(ORC\)](#) including Office 365 support, password resets, and username information.
3. **In-person workshops, online tutorials and more services** are available in [Desire2Learn](#), [Student Portal](#), [Degree Works](#), and [Office 365](#).
4. **Chat with our staff on TECH Talk**, our live chat service. TECH Talk can be accessed on the student portal and on TECH Central's website, or by texting questions to (843) 375-8552.

Visit the [Tech Central](#) website for more information. Live Chat and Center locations are posted on the website. Or please call (843) 349 – TECH (8324), [Option #2](#).

DISABILITY SERVICES:

HGTC is committed to providing an accessible environment for students with disabilities. Inquiries may be directed to HGTC's [Accessibility and Disability Service webpage](#). The Accessibility and Disability staff 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.

STATEMENT OF EQUAL OPPORTUNITY/NON-DISCRIMINATION STATEMENT:

Horry-Georgetown Technical College prohibits discrimination and harassment, including sexual harassment and abuse, on the basis of race, color, sex, national or ethnic origin, age, religion, disability, marital or family status, veteran status, political ideas, sexual orientation, gender identity, or pregnancy, childbirth, or related medical conditions, including, but not limited to, lactation in educational programs and/or activities.

TITLE IX REQUIREMENTS:

All students (as well as other persons) at Horry-Georgetown Technical College are protected by Title IX—regardless of their sex, sexual orientation, gender identity, part- or full-time status, disability, race, or national origin—in all aspects of educational programs and activities. Any student, or other member of the college community, who believes that he/she is or has been a victim of sexual harassment or sexual violence may file a report with the college's Chief Student Services Officer, campus law enforcement, or with the college's Title IX Coordinator, or designee.

*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).

INQUIRIES REGARDING THE NON-DISCRIMINATION/TITLE IX POLICIES:

Student and prospective student inquiries concerning Section 504, Title II, and Title IX and their application to the College or any student decision may be directed to the Vice President for Student Affairs.

Dr. Melissa Batten, VP Student Affairs

Title IX Coordinator

Building 1100, Room 107A, Conway Campus

PO Box 261966, Conway, SC 29528-6066

843-349-5228

Melissa.Batten@hgtc.edu

Employee and applicant inquiries concerning Section 504, Title II, and Title IX and their application to the College may be directed to the Vice President for Human Resources.

Jacquelyne Snyder, VP Human Resources

EEO and Title IX Coordinator

Building 200, Room 212A, Conway Campus

PO Box 261966, Conway, SC 29528-6066

843-349-5212

Jacquelyne.Snyder@hgtc.edu