



COLLEGE OF HEALTH PROFESSIONS AND WELLNESS

Department of Respiratory Therapy

Student Handbook
2022-2024

**Jacksonville State University College of Health Professions & Wellness
Department of Respiratory Therapy
Student Handbook**

**JACKSONVILLE STATE UNIVERSITY
COLLEGE OF HEALTH PROFESSIONS AND WELLNESS
DEPARTMENT OF RESPIRATORY THERAPY**

**JSU South Complex
1701 Pelham Road South, 2nd Floor
Jacksonville, Alabama 36265-1602
Phone: (256) 782-8496
www.jsu.edu/respiratory**

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DISCLOSURE

The policies and requirements of JSU Department of Respiratory Therapy are constantly being reviewed and are subject to revision by the College of Health Professions and Wellness. This is necessary in the light of developing technology and changes occurring in the profession. Therefore, the policies and requirements as set out in the latest catalog and Undergraduate Student Handbook of JSU Department of Respiratory Therapy will be applicable to all students, regardless of what the policies were on the date of entry into JSU Department of Respiratory Therapy programs.

LICENSE TO PRACTICE

Students should be aware that final determination for license eligibility is made by the Alabama State Board of Respiratory Therapy. Although, the graduates of the JSU Respiratory Therapy Program are eligible for the credentialing exams administered by the National Board for Respiratory Care, each state determines license eligibility. JSU or the Department of Respiratory Therapy has no control over the decision of these entities. The following may affect your eligibility to obtain a license: conviction of a criminal offense; drug/alcohol abuse or treatment for dependency of the alcohol/illegal chemical substances; arrest/conviction of driving under the influence of drugs/alcohol; treatment of mental illness, inclusion on a state or federal abuse registry, and disciplinary action by a licensing board or the military.

Students with questions regarding their eligibility are encouraged to contact the licensing board for clarification. <http://www.asbrt.alabama.gov/>

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NON-DISCRIMINATION STATEMENT

Jacksonville State University does not discriminate on the basis of sex in the educational programs or activities that it operates. JSU is required, by Title IX of the Education Amendments of 1972 and the Department of Education regulations to implement Title IX, not to discriminate in such a manner. This requirement to not discriminate in educational programs and activities extends to employment by the university and to admission thereto. This may include sexual harassment, sexual misconduct, domestic violence, dating violence, stalking and other conduct that is addressed in our "Sex-Based Harassment and Misconduct Policy." Anyone with knowledge of this type of conduct is asked to immediately report such incidents to the University Police Department at (256) 782-5050 or the Title IX Coordinator at (256) 782-5769. If an individual wishes to keep the information confidential, the individual speaks with a counselor at the Counseling Services office at (256) 782-5475 or a medical provider at JSU's Health Center (256) 782-5310. For more information about Title IX or to report a concern, please visit the JSU Title IX webpage at www.jsu.edu/titleix.

Jasmin Nunez, Title IX Coordinator
Angle Hall,
Suite 301-A;
(256) 782-5769;
titleix@jsu.edu

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1. BACKGROUND OF THE DEPARTMENT OF RESPIRATORY THERAPY

The JSU Respiratory Therapy Program was started at the request of area Respiratory Therapy Directors needing graduates trained to enter the clinical workforce. The program received approval from the Alabama Commission on Higher Education (ACHE) and approval of intent from the Commission on Accreditation for Respiratory Care (CoARC) in 2015.

Graduates of this program earn a Bachelor of Science in Respiratory Therapy (BSRT) degree. The traditional, entry-into-practice program admitted the first students in Fall 2017, once it received Provisional Accreditation status from CoARC. The first cohort graduated in May 2019. The program admits one cohort per year each fall semester.

In January 2020, the current space for the Department of Respiratory Therapy was dedicated. Our faculty provides a high-quality, cost-efficient program to train students to become competent, professional, advanced-level respiratory therapists. We utilize up-to-date equipment and supplies to prepare the graduates to enter the workforce.

In January 2016, the RRT-BSRT Bridge Program, or degree advancement option, began. This option allows practicing therapists with an associate degree to advance their education to the baccalaureate level. The program is 100% online.

The Department of Respiratory Therapy at JSU continues to work to Reach, Engage, and Discover ways improve our program to better meet the needs of our students, faculty, and community, following JSU's overall strategic plan to ensure we remain a top option for respiratory education in our region.

2. ACCREDITATION INFORMATION

Jacksonville State University is accredited by the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) to award baccalaureate, masters, educational specialist, and doctoral degrees. Degree-granting institutions also may offer credentials such as certificates and diplomas at approved degree levels. Questions about the accreditation of Jacksonville State University may be directed in writing to the Southern Association of Colleges and Schools Commission on Colleges at 1866 Southern Lane, Decatur, GA 30033-4097, by calling (404) 679-4500, or by using information available on SACSCOC's website (www.sacscoc.org).

The Jacksonville State University Respiratory Therapy Program is approved to award a Bachelor of Science degree in respiratory therapy and holds Provisional Accreditation from the Commission on Accreditation for Respiratory Care (www.coarc.com).

The program received approval by the Alabama Commission on Higher Education in September 2015 to award a Bachelor of Science in Respiratory Therapy. The Program

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received Provisional Accreditation from the Commission on Accreditation for Respiratory Care (CoARC) in June of 2017.

This status signifies that a program with an Approval of Intent has demonstrated sufficient compliance with the Standards (through submission of an acceptable Provisional Accreditation Self Study Report (PSSR) and any other documentation required by the CoARC, as well as satisfactory completion of an initial on-site visit), to be allowed to admit students. It is recognized as an accredited program by the National Board for Respiratory Care (NBRC), which provides enrolled students who complete the program with eligibility for the Respiratory Care Credentialing Examination(s). The program will remain on Provisional Accreditation until it achieves Continuing Accreditation.

2.1. Commission on Accreditation for Respiratory Care

Commission on Accreditation for Respiratory Care
1248 Harwood Road
Bedford, TX 76021-4244
Tel: (817) 283-2835
Fax: (817) 354-8519
www.coarc.com

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3. MISSION STATEMENT

Our mission is to prepare competent clinical therapists and future leaders for the field of respiratory care.

4. VISION STATEMENT

Empowering exemplary therapists to provide care for anyone, at any age, with competence and compassion.

5. CORE VALUES

Professional values serve as a foundation for clinical practice.

- 5.1. Professionalism
- 5.2. Integrity
- 5.3. Compassionate Care
- 5.4. Clinical Knowledge
- 5.5. Student-centered learning
- 5.6. Excellence
- 5.7. Communication and Collaboration
- 5.8. Diversity and Inclusion

6. DEFINITIONS OF CORE VALUES

- 6.1. Professionalism** – is inclusive of attributes, beliefs, and communication that are characterized by respect for others, integrity, responsibility, accountability, courage, humility, advocacy, and an innovative spirit which demonstrate the caring nature of a therapist.
- 6.2. Integrity** – is a quality that encompasses honesty, truthfulness, and indicative of a person who displays morality and good character. It is doing the right thing, even when no one is watching.
- 6.3. Compassionate Care** – is an attribute which represents fundamental actions by all therapists, respiratory faculty, and students characterized by supportive, protective quality care in all dimensions of the individual including physical, emotional, mental, and spiritual.
- 6.4. Clinical Knowledge** – encompasses the inclusive total of the philosophies, theories, research, and practice wisdom of the discipline. As a professional discipline this knowledge is important for guiding the safe practice of clinicians.
- 6.5. Student-centered learning** – Student-centered learning includes multiple learning experiences and instructional approaches which shift the focus from the instructor to the student. Instructors guide learning which is designed to address student learning needs, interests, goals, cultural differences, and career

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aspirations while affecting desired program outcomes. Student-centered learning allows the individual student to have an active role in the teaching/learning relationship.

6.6. Excellence – is reflected in evidence-based teaching and learning achieved by both faculty and students where exemplary scholarship, service, teaching, and practice are valued by all stakeholders in the academic and practice environments.

6.7. Communication and Collaboration – consist of collaborative relationships and community partnerships among students, faculty, patients, and other stakeholders to facilitate the delivery of coordinated patient-centered care. Effective communication is an essential component of professional teamwork and collaboration.

6.8. Diversity and Inclusion – compose the totality of attracting both students and faculty from a variety of backgrounds and ethnicities to create a multicultural community of learners. It is not enough to only attract, but also to authentically include all cultures within the academic and practice milieus to promote delivery of culturally sensitive and compassionate care.

7. GOALS OF THE DEPARTMENT OF RESPIRATORY THERAPY

“To prepare graduates with demonstrated competence in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains of respiratory care practice as performed by registered respiratory therapists (RRTs).”

“To prepare leaders for the field of respiratory care by including curricular content that includes objectives related to acquisition of skills in one or more of the following: management, education, research, and advanced clinical practice (which may include an area of clinical specialization).”

7.1. Desired Outcomes:

Upon completion of the Jacksonville State University Department of Respiratory Therapy programs, the student will:

- 7.1.1.** Demonstrate competence in comprehending, applying, and evaluating clinical information specific to his/her role as a respiratory care practitioner.
- 7.1.2.** Demonstrate technical proficiency in skills required to fulfill the role as a respiratory care practitioner.
- 7.1.3.** Demonstrate personal behaviors consistent with professional and employer expectations for the respiratory care practitioner.

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8. DEPARTMENT OF RESPIRATORY THERAPY – FACULTY AND STAFF

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9. PROFESSIONAL SCHOLAR'S CODE

9.1. Introduction

The academic community of student and faculty at the College of Health Professions and Wellness (CHPW) strives to develop, sustain, and protect an environment of honesty, trust, and respect. Students within the system receive the benefits of the academic pursuit of knowledge, free from the obstacles of academic dishonesty. The Professional Scholar's Code demands that students act with integrity in all their endeavors. Exhibiting honesty in academic pursuits and reporting violations of the Professional Scholar's Code will encourage others to emulate integrity in the healthcare profession. Every student who approaches their studies with honesty and forthrightness suffers when another student attains an unfair advantage through academic dishonesty. Most importantly, the safety of patients is jeopardized when students are dishonest in completing program requirements. The respiratory therapy profession is one of highest distinction that promotes honest and integrity. The JSU Department of Respiratory Therapy requires that students and faculty to comply with the standards of conduct deemed appropriate for the profession by the Commission on Accreditation for Respiratory Care (CoARC), the American Association for Respiratory Care (AARC), the National Board for Respiratory Care (NBRC), and the Alabama State Board for Respiratory Therapy (ASBRT).

9.2. Dissemination and Clarification

All students and faculty in the Department of Respiratory Therapy shall be informed of the Professional Scholar's Code upon registration and/or employment in the department and thereby assume the responsibility of abiding by the spirit of honesty in their academic pursuits. The establishment of a Professional Scholars' Code is not intended to be an indication that academic dishonesty behavior is commonplace at this institution. The Professional Scholars' Code is a method of reaffirming the existing code of honor which has prevailed at this department since its inception.

9.2.1. The Scholars' Code shall be part of the student handbooks and Faculty/Staff Policy and Procedures Manual. It is the responsibility of students, faculty, and staff to be familiar with this policy. Students and faculty must indicate acknowledgement of this policy via the attachment upon admission or hire. This document will be placed in individual's file.

9.2.2. It shall be the responsibility of each faculty member to inform students of the Professional Scholars' Code as part of the course orientation (live or electronic) at the beginning of every semester, through the course syllabus/notebook or other effective means. Faculty shall support the

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principles of academic integrity and fairness through course policies and procedures.

- 9.2.3.** The appropriate officials and offices shall conduct an orientation for all students and incoming faculty to familiarize these individuals with the provisions of the Scholars' Code prior to attending classes or teaching.

9.3. Violations of Professional Scholar's Code

Any action by students revealing dishonesty is considered a violation of the Professional Scholar's Code. Actions of this nature should be reported to the course faculty and/or department head.

9.3.1. Violations of Academic Honesty

Though the following list does not include all the possible violations of the Professional Scholars' Code, it is indicative of the types of actions which must be prohibited in order to maintain academic integrity at this University.

- 9.3.1.1. Dishonesty on an examination, problem solution, exercise, or assignment which is offered by the student in satisfaction of course requirements or as extra credit is a violation of the Professional Scholars' Code. Dishonesty occurs when a student gives, receives, makes, or uses unauthorized assistance. Dishonesty includes but is not limited to the following: using notes or cheat sheets, copying another individual's work, having another person take an examination for the student, giving false reasons for absence or tardiness, or improper use of electronic equipment. These actions violate the principles of the Professional Scholars' Code.
- 9.3.1.2. Plagiarism is the act of passing off the ideas, works, and writings of another as one's own. Its most blatant form consists of copying verbatim the work of another without citation. This most obvious type of plagiarism requires a degree of premeditation and careful planning, but plagiarism can be the result of carelessness, negligence, or ignorance of acceptable forms of citation. An act of plagiarism includes copying of another person's ideas or words, interspersing one's own words within another's work, paraphrasing another's work (using ideas or theory but rewriting the words), fabricating sources of data, and other uses of another's ideas or words without acknowledgement (A.T. Still University, Student Handbook, 2008). It is incumbent on each student to learn the proper forms of citation and to exercise due caution in the preparation of papers and assignments. If there are questions regarding how to apply the Professional Scholars' Code in a particular situation, the student should request immediate clarification from the instructor.

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- 9.3.1.3. The submission of commercially prepared papers, reports, or themes in satisfaction of course requirements are prohibited. The use of another's academic work wholly, or in part, as a means of satisfying course requirements is also prohibited. Falsifying or misrepresenting the results of a research project or study is a violation of the Professional Scholars' Code.
- 9.3.1.4. Examinations, practical exercises, and problem solutions, whether administered in the classroom or given in a take-home or remote/virtual form should be the work of the individual who submits them. Unless it is intended to be a take home test, the exercises shall not be removed from the classroom/lab/computer lab. **STUDENTS SHALL NOT SHARE TEST INFORMATION/EXAM QUESTIONS WITH ANY OTHER STUDENTS DURING OR AFTER THE ADMINISTRATION OF AN EXAMINATION.**
- 9.3.1.5. Group work and other forms of collaboration may be authorized by an instructor for a specific assignment. The presumption remains, however, that unless otherwise permitted and specified by the instructor, all academic work is to be an individual effort. In this spirit, the Professional Scholars' Code prohibits both the giving and receiving of unauthorized assistance.
- 9.3.1.6. Audio or visual recording of lectures, presentations, or laboratory demonstrations by students is permissible within strict guidelines as outlined in the Audio and Visual Recording Policy. Noncompliance with the audio/visual recording guidelines is a violation of the Professional Scholars' Code.

A student at the College of Health Professions and Wellness who submits an examination or other work certifies that the work is their own and that they are unaware of any instance of violation of this code by himself/herself or others.

9.4. Suspected Violations of Professional Scholar's Code

- 9.4.1. Students suspected of violating the Professional Scholar's Code will be notified verbally and in writing.
- 9.4.2. The student has the right to seek advice from his/her Academic Advisor, or the RT Program Director.
- 9.4.3. The student may admit the offense or refute it and offer written evidence supporting the denial. Written evidence must be provided within three (3) working days. Faculty will employ diligence in assuring due process.
- 9.4.4. Faculty will consider the nature of the offense; evidence presented by the student and decide regarding consequences.

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9.4.5. Consequences for students found guilty of violation of the Professional Scholar's Code may include, but are not limited to additional assignments, zero credit for an assignment, failure of course, or dismissal from program.

9.4.6. Should the student wish to appeal the faculty decision, the student should follow the 'Student Appeal and/or Grievance Procedure' as outlined in the student handbook.

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10. CHPW STANDARDS FOR PROFESSIONAL BEHAVIOR

10.1. Introduction

The academic community of students and faculty at the College of Health Professions and Wellness (CHPW) strives to develop, sustain, and protect an environment of professionalism. The Standards for Professional Behavior demands that students and faculty display professionalism in all their endeavors. Exhibiting professionalism in academic pursuits and reporting violations of the Standards for Professional Behavior will encourage others to emulate professionalism in the healthcare profession. Every student and/or faculty who approaches their studies or nursing student/faculty role with professionalism suffers when another student/faculty behaves in an unprofessional manner that reflects negatively on the CHPW and the profession.

10.2. Dissemination and Clarification

All students and faculty/staff in the Department of Respiratory Therapy shall be informed of the Standards for Professional Behavior upon registration and/or employment in the Department and thereby assume the responsibility of abiding by the spirit of professionalism in their academic pursuits. The establishment of a Standards for Professional Behavior is not intended to be an indication that unprofessionalism is commonplace at this institution.

10.2.1. The Standards for Professional Behavior shall be part of the student handbooks and Faculty/Staff Policy and Procedures Manual. It is the responsibility of students, faculty, and staff to be familiar with this policy. Students and faculty must indicate acknowledgement of this policy via the attachment. This document will be placed in individual's file.

10.2.2. It shall be the responsibility of each faculty member to inform students of the Standards for Professional Behavior as part of the course orientation (live or electronic) at the beginning of every semester, through the course syllabus/notebook or other effective means. Faculty shall support the principles of professionalism through course policies and procedures.

10.2.3. The appropriate officials and offices shall conduct an orientation for all students, incoming faculty, and staff to familiarize these individuals with the provisions of the Standards for Professional Behavior prior to attending classes or teaching or assuming an employee role within the College of Health Professions and Wellness.

10.3. Unprofessional Behavior

Unprofessional behavior is the improper conduct by a student, faculty, or staff which infringes on the reasonable freedom of others, or which is otherwise

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detrimental to the proper conduct of Jacksonville State University, the Department of Respiratory Therapy, and clinical agency partners. The Department of Respiratory Therapy is dedicated to maintaining excellence and integrity in all aspects of its professional conduct. Violations within these areas will be processed appropriately without regard to the sex, race, color, religious affiliation, national or ethnic origin, age, veteran status, or disability of any of the participants.

Professional behaviors such as accountability, promptness, responsibility, honesty, and respect are expectations of all students, faculty, and staff. As representatives of the healthcare profession and Jacksonville State University, students, faculty, and staff are expected to maintain these professional behaviors within the classroom, online educational platforms, clinical activities, and communities it serves. Professional decorum is expected in all interactions with administration, faculty, staff, classmates, vendors, clients, families, visitors, and all clinical healthcare partners and their associates.

Evidence of unprofessional behavior can result in verbal/written warning, prescriptive educational assignments, reduction in course grade, clinical or course failure, or dismissal from the respiratory therapy program and/or Jacksonville State University. Unprofessional behaviors include, but are not limited to, the following:

- 10.3.1.** Unsafe practice (acts of commission or omission) that places a client in serious jeopardy.
- 10.3.2.** Falsification of records (academic, clinical medical records, records of attendance or completion of course objectives).
- 10.3.3.** Being under the influence of any substance that impairs performance as outlined in The Impairment and Substance Abuse Policy.
- 10.3.4.** Academic dishonesty (lying, cheating, and plagiarism; may also be considered a violation of the Scholar's Code).
- 10.3.5.** Distribution (physically or verbally) of actual or summarized test questions, assignments, papers, or any graded activities.
- 10.3.6.** Physical or verbal altercations.
- 10.3.7.** Incivility or willful harassment, sexual harassment, abuse, or intimidation (physical, non-physical, verbal) of administration, faculty, staff, classmates, vendors, clients, families, visitors, and all clinical healthcare partners and their associates.
- 10.3.8.** Willful expressions of disrespect (physical, non-physical, verbal) of administration, faculty, staff, classmates, vendors, clients, families, visitors, and all clinical healthcare partners and their associates related to race,

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cultural values/practices, religious beliefs, sexual orientation, physical/mental disabilities, and socioeconomic status.

- 10.3.9.** Violation of confidentiality as outlined by HIPAA, FERPA, and confidentiality agreements with clinical partner agencies.
- 10.3.10.** Theft of property
- 10.3.11.** Rudeness, disruptive behavior, and/or lack of professional decorum in the classroom, online educational platforms, clinical practicum, and all communication/interaction settings that include, but are not limited to, face-to-face meetings, postal mailings, email, text messaging, facsimile (fax), social media, and video/audio recordings. This includes a pattern of late arrivals to class/clinical site or repetitive absences from class, clinical, and online platforms.
- 10.3.12.** Unprofessional or inappropriate dress in the classroom, clinical practicum, clinical or simulation laboratory, and College of Health Professions and Wellness and/or University functions. This includes failure to wear ID badge in clinical areas.

10.4. Suspected Violations of Standards for Professional Behavior

- 10.4.1.** Students suspected of violating the Standards for Professional Behavior will be notified verbally and in writing.
- 10.4.2.** Suspected faculty/staff violations will be managed by the Dean/Associate Dean and referred to Human Resources, if necessary.
- 10.4.3.** The student has the right to seek advice from his/her Academic Advisor, Program Director, or the Director of Student Services for their own program.
- 10.4.4.** The student may admit the offense or refute it and offer written evidence supporting the denial. Written evidence must be provided within three (3) working days. Faculty will employ diligence in assuring due process.
- 10.4.5.** Faculty will consider the nature of the offense; evidence presented by the student and make a decision regarding consequences.
- 10.4.6.** Consequences for students found guilty of violation of the Standards for Professional Behavior may include, but are not limited to additional assignments, zero credit for an assignment, failure of course, or dismissal from program.
- 10.4.7.** Should the student wish to appeal the faculty decision, the student should follow the 'Student Appeal and/or Grievance Procedure' as outlined in the student handbook.

11. PROFESSIONALISM IN SOCIAL MEDIA AND ELECTRONIC COMMUNICATION

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11.1.1. The purpose of this policy is to help clarify how best to protect the personal and professional reputations and privacy of our institution, employees, students, clinical partners, and patients. This policy is not intended to supersede any present or future policy of Jacksonville State University (JSU) regarding professional expectations, information technology, electronic communication, or social media.

Employees and students in the Department of Respiratory Therapy are liable for all forms of communication. The same laws, professional expectations, and guidelines for interacting with employees, students, parents, alumni, donors, media, clinical partners, and other university constituents apply to all forms of communication.

11.1.2. Definition of Social Media: For the purposes of this policy, social media is defined as any form of online publication or presence that allows end users to engage in conversations in or around the content of an internet website. Examples include, but are not limited to, Instagram, LinkedIn, Twitter, Facebook, YouTube, blogs, and wikis. The absence of, or lack of explicit reference to a specific social media site, does not limit the extent of the application of this policy.

11.1.3. Definition of Electronic Communication: any electronic transfer of signs, signals, writing, images, sounds, data, or intelligence of any nature transmitted in whole or in part via electronic device. This includes, but not limited to, cellular phones, computers, texting devices, facsimile (Fax), data storage devices, or video and voice recordings.

11.1.4. Protect confidential and proprietary information: Do not post confidential or proprietary information about JSU, the Department of Respiratory Therapy, students, employees, clinical partner agencies, patients, or alumni. Employees and students must follow applicable federal requirements such as FERPA and HIPAA regulations. Employees and students who share confidential information do so at the risk of disciplinary action, up to, and including termination/dismissal from the program. All HIPAA and FERPA regulations apply to social media and electronic communications.

11.1.5. Protect Institutional Voice: When utilizing social media and electronic communication, identify your views as your own. It should be clear that you are not speaking for JSU and/or the JSU Department of Respiratory Therapy.

11.1.6. Faculty and student interaction: Faculty may implement and encourage the use of social media in their courses but may not require a student to join or participate in a social media site. Required interaction outside of the classroom must occur within a university-approved format. Faculty may accept connections to students in social media contexts at their

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discretion but may not initiate this connection without prior approval from the appropriate Department Head and Dean.

11.1.7. Prohibited communication: Faculty, staff, and students are prohibited from making any reference to clinical activities in social media forums and electronic communication. Attempts to avoid explicit identification of a clinical partner agency, associate, agency location, patient, or JSU entity should not be perceived as a guarantee of anonymity or compliance with HIPAA, FERPA, or this policy. For example, avoiding the use of a patient's or clinical agency's specific name does not guarantee compliance with this policy. Communication related to clinical activities, as described above, can result in disciplinary action, up to, and including termination/dismissal from the program.

Violations of this policy also result in a violation of the Professional Scholar's Code and will be handled in accordance with that policy.

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12. BACHELOR OF SCIENCE IN RESPIRATORY THERAPY

TRADITIONAL, ENTRY-INTO-PRACTICE PROGRAM TRACK (BSRT)

(56 Semester Hours prerequisite or general education requirements)

Suggested Plan of Study. The following list of courses is not intended to be a substitute for individual advisement by an Academic Advisor.

Course	Title	Credits
Area I (6 Semester Hours)		
EH 101	English Composition I	3
EH 102	English Composition II	3
Area II (12 Semester Hours) *		
Literature		3
Literature		3
Fine Art		3
EH 141	Oral Communication	3
<i>*Minimum of 3 hours of literature and 3 hours of fine art required. A 6-hour sequence of either literature or history is required.</i>		
Area III (11 Semester Hours)		
BY 101/103	Introduction Biology I / Lab	4
CY 115	Concepts of General Chemistry	4
MS 112	Precalculus Algebra	3
Area IV (12 Semester Hours) **		
History		3
History		3
PSY 201	Principles of Psychology	3
SY 221	Intro to Sociology	3
<i>** Minimum of 3 hours of history required. A 6-hour sequence of either literature or history is required.</i>		
Area V (21 Semester Hours)		
BY 263	Anatomy and Physiology I	4

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BY 264	Anatomy and Physiology II	4
BY 283	Health Microbiology	4
MS 204	Basic Statistics	3

12.1. Upper Division Respiratory Courses Traditional, Entry-Into-Practice Track

(65 Semester Hours program specific courses)

Course	Title	Credits
First Semester (14 Semester Hours)		
RT 299	Respiratory Therapy Introduction	0
RT 301	Fundamentals of Respiratory Care I	3
RT 306	Patient Assessment	3
RT 310	Cardiopulmonary Anatomy and Physiology	3
RT 315	Respiratory Care Pharmacology	1
RT 320	Clinical I	1
RT 322	Respiratory Therapy Lab I	2
Second Semester (14 Semester Hours)		
RT 326	Fundamentals of Respiratory Care II	2
RT 330	Airway Management and Resuscitation	2
RT 335	Pathology for Respiratory Care	3
RT 340	Research	3
RT 345	Clinical II	2
RT 347	Respiratory Therapy Lab II	2
Third Semester (9 Semester Hours)		
RT 351	Ventilatory Support I	2
RT 356	Respiratory Critical Care Monitoring	3
RT 360	Clinical III	2

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RT 362	Respiratory Therapy Lab III	2
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Fourth Semester (13 Semester Hours)		
RT 401	Ventilatory Support II	2
RT 405	Neonatal and Pediatric Respiratory Care	3
RT 411	Pulmonary Diagnostics	3
RT 415	Clinical IV	3
RT 417	Respiratory Therapy Lab IV	2
Fifth Semester (15 Semester Hours)		
RT 420	Pulmonary Disease Management	3
RT 425	Respiratory Therapy Education	3
RT 430	Respiratory Therapy Leadership	2
RT 435	Clinical V	4
RT 440	Advanced-Level Exam Review	3

TOTAL 121 Semester Hours

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12.2. Description of Respiratory Therapy Courses - (RT) –

Traditional Program, Entry-Into-Practice Track

Junior – Fall
RT 299 Respiratory Therapy Introduction
An introduction and orientation to the traditional BSRT program. The course is designed to welcome the student to the program and give guidance on how to navigate the courses, specific program requirements, and outline next steps in starting the professional phase of the program. Grades: Pass/No credit.
RT 301 Fundamentals of Respiratory Care I – 3 hrs
A study of respiratory care treatment modalities and equipment. Emphasis is placed on understanding application to patient situations, assessment of care, and principles of operation of equipment. Infection control issues will be included. Students will discuss the pathophysiology, health promotion and disease prevention aspects of each modality.
RT 306 Patient Assessment – 3 hrs
A study of patient assessment skills and procedures used in the evaluation of the respiratory patient. Emphasis will be on patient care procedures, physical assessment, laboratory assessment, communication skills, and documentation. Professionalism, ethics, and civic responsibilities of the respiratory therapist will be discussed.
RT 310 Cardiopulmonary Anatomy and Physiology – 3 hrs
A study of the structure and function of the respiratory system. Physiology of the respiratory, cardiac, and renal systems will be discussed. Emphasis will be on how each control the body's acid-base status and the effects of respiratory therapeutic modalities on each system.
RT 315 Respiratory Care Pharmacology – 2 hrs
A study of pharmacological agents used in the treatment of cardiopulmonary disease and critical care. Emphasis will be on drugs used to influence the respiratory, cardiovascular, nervous, and renal systems.
RT 320 Clinical I – 2 hrs
Practical application of respiratory care performed under supervision at clinical sites. This course serves as an introduction to the hospital environment. Proficiency evaluations of selected respiratory care procedures will be completed.
RT 322 Respiratory Therapy Lab I – 2 hrs
Relevant laboratory practice/activities based on content covered in first semester courses in the upper division respiratory therapy program.

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Junior – Spring
RT 326 Fundamentals of Respiratory Care II – 2 hrs
This course is a continuation of RT 301. It is designed to continue the progression from basic respiratory care modalities to more advanced therapy and equipment. Emphasis will continue to be on understanding application to patient situations, assessment of care, and principles of operation of equipment.
RT 330 Airway Management and Resuscitation – 2 hrs
A study of the selection, application, maintenance, and discontinuance of various artificial airways. Emphasis will be on intubation, extubation, tracheostomy care, and suctioning. The role of the respiratory therapist in a cardiopulmonary arrest will be covered in accordance with American Heart Association Advanced Cardiopulmonary Life Support (ACLS) guidelines.
RT 335 Pathology for Respiratory Care – 3 hrs
A study of the diseases affecting the respiratory system commonly encountered by practicing respiratory therapists. The pathophysiology, clinical signs and symptoms, diagnosis, management, and prognosis of acute and chronic pulmonary diseases will be discussed.
RT 340 Research – 3 hrs
A study of clinical research methods and concepts related to respiratory care. Emphasis is on an overview of the research process and how to critically evaluate published and empirical research. (Writing Intensive Course)
RT 345 Clinical II – 2 hrs
Practical application of respiratory care performed under supervision at clinical sites. Proficiency evaluations of selected respiratory care procedures will be completed including basic and advanced modalities. Students will prepare and present case studies relevant to this patient population.
RT 347 Respiratory Therapy Lab I – 2 hrs
Laboratory practice/activities involving content covered in courses during the second semester of the upper division respiratory therapy program.
Junior – Summer
RT 351 Ventilatory Support I – 2 hrs
A study of the basic physics, theory, and methods commonly used in mechanical ventilation. Emphasis will be on patient management and assessment. Invasive and non-invasive ventilation will be discussed, including advanced oxygen delivery systems.
RT 356 Respiratory Critical Care Monitoring – 3 hrs
A study of advanced cardiopulmonary monitoring used in critical care. Emphasis will be on ventilator waveform analysis, capnography, and hemodynamic monitoring.
RT 360 Clinical III – 2 hrs

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<p>Practical application of respiratory care performed under supervision at clinical sites. Proficiency evaluations of selected respiratory care procedures will be completed including advanced modalities and mechanical ventilation. Students will prepare and present case studies relevant to this patient population.</p>
<p>RT 362 Respiratory Therapy Lab III – 2 hrs</p>
<p>Laboratory exercises/activities relevant to course content taught in the third semester of the respiratory therapy program</p>
<p>Senior – Fall</p>
<p>RT 401 Ventilatory Support II – 2 hrs</p>
<p>This course is a continuation of RT 351. A study of advanced mechanical ventilation. Adult, pediatric, and neonatal ventilation will be discussed. Emphasis will be on patient management and assessment.</p>
<p>RT 405 Neonatal and Pediatric Respiratory Care – 3 hrs</p>
<p>A study of respiratory therapy involving infants and children. Emphasis will be on patient management and assessment in basic and intensive care settings. Developmental anatomy and physiology, pharmacology, disease management and prevention, health promotion, oxygenation, and resuscitation will be discussed. Relevant lab exercises will be included.</p>
<p>RT 411 Pulmonary Diagnostics – 3 hrs</p>
<p>A study of diagnostic testing and measurements used in providing care for respiratory patients. Emphasis will be on pulmonary function testing, bronchoscopy, sleep studies, and other special procedures commonly encountered by the practicing respiratory therapist.</p>
<p>RT 415 Clinical IV – 3 hrs</p>
<p>Practical application of respiratory care performed under supervision at clinical sites. Proficiency evaluations of selected respiratory care procedures will be completed including advanced mechanical ventilation, special populations, and diagnostics. Students will prepare and present case studies relevant to this patient population. (Writing Intensive Course)</p>
<p>RT 417 Respiratory Therapy Lab IV – 2 hrs</p>
<p>Relevant laboratory exercises/activities related to the content covered in the courses required in the fourth semester of the respiratory therapy program.</p>
<p>Senior – Spring</p>
<p>RT 420 Pulmonary Disease Management – 3 hrs</p>
<p>A study of the respiratory therapist's role in pulmonary rehabilitation, home care, and patient education and motivation in preventative care. Reimbursement issues will be discussed. This course will also provide an overview of the growing need for quality palliative care. The scope of palliative care and current end-of-life issues will be introduced. Focus will be on the common pathology processes often seen in respiratory practice.</p>

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RT 425 Respiratory Therapy Education – 3 hrs
A study of general educational and instructional methods and techniques. Emphasis will be on patient education and health promotion. The student will learn how to write learning objectives, how to evaluate patient education, how to prepare and present a topic for an in-service presentation, and how to present a lecture in a classroom and in the laboratory environment.
RT 430 Respiratory Therapy Leadership – 2 hrs
A study of management of a respiratory therapy and cardiopulmonary department. Emphasis will be on regulatory agency and accreditation standards related to respiratory therapy, departmental budgeting, quality assurance, human resource issues, conflict resolution, and staff training.
RT 435 Clinical V – 4 hrs
Practical application of respiratory care performed under supervision at clinical sites. This course prepares students to perform as advanced-level respiratory therapists. Proficiency evaluations of selected respiratory care procedures will be completed. Emphasis will be on advanced mechanical ventilation in adults, pediatrics, and neonates; special procedure areas may be assigned.
RT 440 Advanced-Level Exam Review – 3 hr
This course is designed to assist students in preparing for the Therapist Multiple-Choice and Clinical Simulation Exams offered by the National Board for Respiratory Care (NBRC).

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13. ADMISSION TO THE UPPER DIVISION OF RESPIRATORY THERAPY FOR STUDENTS – TRADITIONAL, ENTRY-INTO-PRACTICE TRACK

**The term "admitted, admission, accept or acceptance" refers to assessment of select criteria for Traditional, Entry-Into-Practice Respiratory Therapy coursework as defined in the JSU Undergraduate catalog.*

13.1. Requirements in Core Requirement Courses:

- 13.1.1.** Advisement for the upper division begins in the pre-respiratory therapy student's freshman year with academic advisement provided each semester.
- 13.1.2.** The grade point average for entry into the upper division ("Core Requirement GPA") is computed based exclusively on the courses that are used to satisfy the core requirements. Only courses for which a grade of "C" or above has been earned are acceptable to meet the core requirements. If a course is failed, it can be repeated. Once a passing grade has been earned in a particular course, that course cannot be repeated to earn a higher grade. For any particular core requirement, if the transcript shows more than one course completed that is approved to meet that requirement, the course with the higher grade is used.
- 13.1.3.** Transfer credit from another institution for prerequisite courses must consist of the same or greater number of semester hours designated in this catalogue for credit in each transfer course. See section two (2) related to guidelines for transfer students.
- 13.1.4.** The Department of Respiratory Therapy may use discretion regarding core requirement courses.
- 13.1.5.** All core requirements must be completed prior to entering the upper division for those students applying for fall semester admission.
- 13.1.6.** An ACT® composite score is a component of the ranking system utilized for admissions to upper division. A minimum of 18 on the ACT® composite score is required to apply to the BSRT program. An SAT® (Critical Reading and Math) score can be utilized for admission ranking using the following ACT/SAT concordance chart:

ACT	SAT	SAT Range
36	1590	1570-1600
35	1540	1530-1560
34	1500	1490-1520
33	1460	1450-1480
32	1430	1420-1440
31	1400	1390-1410
29	1340	1330-1320

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28	1310	1300-1320
27	1280	1260-1290
26	1240	1230-1250
25	1210	1200-1220
24	1180	1160-1190
23	1140	1130-1150
22	1110	1100-1120
21	1080	1060-1090
20	1040	1030-1050
19	1010	990-1020
18	970	960-980
17	930	920-950
16	890	880-910
15	850	830-870
14	800	780-820
13	760	730-770
12	710	690-720
11	670	650-680
10	630	620-640
9	590	590-610

13.2. Guidelines for Transfer Students

13.2.1. All transfer credits must be validated in writing through the Registrar's office. Requests for admission into the upper division may be filed only after the student has been accepted into the University and the transfer credits have been evaluated by the Registrar.

13.2.2. The articulation agreement of the University with junior colleges in the state establishes the equivalent courses for the advisement of transfer students.

13.2.3. Deficits in transfer credits will be evaluated individually.

13.3. Requirements for Admission Consideration

13.3.1. Students are admitted to the upper division once each year. The upper division normally requires five (5) semesters for completion.

13.3.2. A separate application must be filed to request consideration for admission into the upper division of respiratory therapy. Application deadline is June 1st of each year for fall admission.

13.3.3. A Prerequisite GPA of at least 2.5 is required for consideration for admission into the upper division.

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- 13.3.4.** An ACT® composite score is a component of the ranking system utilized for admissions to upper division. A minimum of 18 on the ACT® composite score is required to apply to the BSRT program.
- 13.3.5.** Students who have English as a second language must present a minimum score of the TOEFL (Test of English as a Foreign Language) exam taken within four years. To be eligible to apply for admission to upper division, minimum scores are: 560 for the TOEFL Written (paper based), 220 for the TOEFL CBT (computer based), and 83 for the iBT (internet based). Students native to countries where English is a commonly used language and/or those who have been living in a country for many years where English is a primary spoken language may request a waiver of this requirement.
- 13.3.6.** The College reserves the right to limit the number of students enrolled in respiratory courses to make the most effective use of the educational resources available.
- 13.3.7.** Criminal background checks and drug screens are required for all respiratory therapy students.

13.4. Early Admission

- 13.4.1.** In certain situations (e.g., for military personnel), students may request approval from the Department Head of Respiratory Therapy for conditional admission prior to the normal admissions processing period for the semester for which the student wishes to enter the traditional, entry-into-practice track. Such a request must be submitted in writing through the Office of Academic Services and must include a detailed explanation of why the exception to policy is necessary. If the request is approved, the Department Head of Respiratory Therapy will provide written guidelines which will outline the student's responsibilities for maintaining the conditional admission status and any additional specific circumstances under which admission will be revoked.
- 13.4.2.** Students may be admitted to the Traditional, Entry-Into-Practice Respiratory Therapy Program as a condition of the Deans' Scholars Program. Students meeting criteria for early admission as a high school senior must maintain a 3.4 GPA to maintain their early acceptance status.

14. RETENTION AND PROGRESSION

- 14.1.** A student must earn a "C" or above in all respiratory therapy courses to progress in the program.
- 14.2.** Failure of the same course twice constitutes dismissal from the program.

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- 14.3.** Failure of two (2) courses in the program curriculum constitutes dismissal from the program.
- 14.4.** Unsatisfactory clinical performance in two courses constitutes dismissal from the program.
- 14.5.** Students that have been dismissed from the JSU Department of Respiratory Therapy are ineligible for re-application.
- 14.6.** For purposes of retention and progression, students who fail clinically and drop or withdraw prior to the academic penalty date established by JSU, will be considered to have incurred a course failure. Should the student drop or withdraw prior to this deadline, the course failure will not be reflected on the student's transcript but will be considered a course failure in the Department of Respiratory Therapy.
- 14.7.** Courses in the program must be taken concurrently in the semester offered. Students that withdraw or drop a course must pause their progression in the program and retrack as described in retracking progression listed below.
- 14.8. Retracking Progression**
- 14.8.1.** An unsuccessful course attempt requires the student to retake that course.
- 14.8.2.** When a student is unsuccessful in a respiratory therapy course, their progression in the program must be paused, as courses are only offered one semester per year.
- 14.8.3.** In addition to retaking the course, the student is required to take a directed study course. This course serves as a review course of concepts, skills, and material covered to that point in the program. It requires the student to take comprehensive exams covering the materials covered in the program. The student may be required to revalidate laboratory and clinical competencies as well.
- 14.8.4.** Once the student retakes and passes the course, and they take and complete the required directed study course, then they will be allowed to continue progression in the program with the following cohort.
- 14.9.** A student's clinical practice must meet established standards, as determined by the faculty, to continue in the program. A student failing to meet these standards will not be allowed to progress in the curriculum.
- 14.10.** A student must comply with all agencies' and JSU Department of Respiratory Therapy requirements. A student failing or refusing to meet this standard will not be allowed to progress in the curriculum

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- 14.11.** Traditional, entry-into-practice, respiratory therapy students must comply with state and federal laws.
- 14.12.** Remediation and revalidation may be required in order to progress in the curriculum.
- 14.13.** Students must comply the regulations related to standardized testing throughout the curriculum to remain eligible for progression and/or retracking.

This policy supersedes all University policies in decisions related to progression and retention in the Traditional, Entry-Into-Practice Respiratory Therapy Program.

15. REQUIREMENTS FOR GRADUATION FOR RESPIRATORY THERAPY STUDENTS

To be considered a candidate for the degree of Bachelor of Science in Respiratory Therapy, the student must:

- 15.1.** Fulfill the specific requirements for this degree as set forth in the University Catalogue.
- 15.2.** Earn minimum of 64 semester hours from a four-year college or university, 32 semester hours of which must be resident work at JSU. This requirement must be met, even if a student has been admitted to advanced standing or has transferred credits.
- 15.3.** Be expected to complete general subject requirements for graduation during the freshman and sophomore years in so far as this is possible.
- 15.4.** Complete 121 semester hours of university work, and must earn a minimum "C" average, 2.0 G.P.A. and attain other standards approved by the faculty.
- 15.5.** A student must earn a minimum "C" or better in each prerequisite and upper division respiratory therapy course.
- 15.6.** At least 65 semester hours of the credit presented for a degree must be in courses numbered 300 and above.
- 15.7.** The EPP Examination is required before graduation. See Tests and Examinations Section of the University Catalog for requirements.
- 15.8.** The student must meet other policy requirements related to progression and completion of the Traditional, Entry-Into-Practice Respiratory Therapy curriculum.

16. ADVISEMENT PROCESS

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It is the student's responsibility to schedule an appointment with their advisor during the published advisement period each fall and spring semester. Each student will be responsible for bringing the following information to advisement at their scheduled time:

1. MyJSU Transcript
2. Any other documents requested by advisor

17. FACULTY/DEPARTMENT OFFICE HOURS

JSU Respiratory Therapy Faculty Office Hours Policy:

The JSU Respiratory Therapy Department is located at the JSU South Complex. All JSU RT courses and labs are offered in the JSU RT Department located on the 2nd floor.

All RT Faculty offices are in JSU RT Department:

Mr. Ed Goodwin, Department Head and Assistant Professor - #226

Mr. Tyler Garth, Lab Coordinator, and Instructor - #227

Mrs. Andres Crawley, Director of Clinical Education, and Instructor - #228

Ms. Tanelle McMillin, Administrative Assistant - #229

The JSU Respiratory Therapy Department's hours of operations follow university guidelines. We are routinely open from 08:30 a.m. to 04:30 p.m. Monday – Friday. Faculty offices are strategically located on the same hall as the RT classrooms and labs. This allows RT Faculty and our administrative assistant to be readily available for students as needed.

Students are encouraged to stop by and meet with faculty and our administrative assistant before and/or classes and/or labs. Each faculty member is available for appointments if needed, either in person or virtually using Microsoft Teams. Students can simply email the faculty member to set up an appointment as needed.

18. ESSENTIAL FUNCTIONS FOR ADMISSION AND PROGRESSION IN THE UPPER DIVISION OF RESPIRATORY THERAPY

**The term "admitted, admission, accept or acceptance" refers to assessment of select criteria for Traditional, Entry-Into-Practice Respiratory Therapy coursework as defined in the JSU Undergraduate catalog.*

Certain physical, intellectual, emotional, professional, communication, interpersonal relationship, and psychomotor skills are required for effective, safe patient care. Students, faculty, adjunct faculty, and clinical associates participating in the respiratory therapy program at Jacksonville State University must be able to perform critical

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essential functions with or without reasonable accommodations. Essential functions include, but are not limited to, the following categories.

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Essential Functions	Clinical Examples
<i>Visual</i>	
<ul style="list-style-type: none"> • Read at various distances • Distinguish colors • Read for prolonged periods of time 	<ul style="list-style-type: none"> • Observe changes in skin condition, breathing patterns, color intensity, rashes. • Use computer screens, read fine print on medication labels, monitor strips, equipment, and syringes. • Observe changes in facial expressions / mood / body language, etc.
<i>Tactile</i>	
<ul style="list-style-type: none"> • Feel vibrations, pulses, textures, temperature, shape, and size 	<ul style="list-style-type: none"> • Palpate pulses and veins. • Determine skin temperature, turgor, and rashes
<i>Hearing</i>	
<ul style="list-style-type: none"> • Person to person report • Telephone communication • Distinguish sounds through stethoscope • Discriminate high and low frequency sounds • Hear in situations when lips are not visible 	<ul style="list-style-type: none"> • Assess/auscultate changes in heart, breath, abdominal, or vascular sounds. • Auscultate blood pressure. • Communicate orally when masks must be worn • Hear auditory alarms (monitors, call bells, fire alarms).
<i>Smell</i>	
<ul style="list-style-type: none"> • Detect body odors and odors in the environment • Detect gas or noxious odors 	<ul style="list-style-type: none"> • Detect odors associated with disease processes. • Identify odor of fires, extremely hot or hazardous materials.
<i>Communication</i>	
<ul style="list-style-type: none"> • Engage in two-way communication, verbally and in writing, interacting effectively with others from a variety of social emotional, cultural, and intellectual backgrounds • Explain procedures; teach patients and families • Work effectively in groups • Discern and interpret nonverbal communication 	<ul style="list-style-type: none"> • Communicate with patients/clients and family regarding the plan of care, discharge instructions, medications, etc. • Read and comprehend physician orders, medication information, chart information (electronic or hard copy). • Document clearly, correctly, and accurately in the medical record. • Maintain confidentiality.

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<ul style="list-style-type: none"> • Communicate effectively by telephone, electronic means, and in group settings • Communicate accurately, professionally, and in a timely manner • Communicate effectively with patients/clients with altered communication patterns or mental disorders 	<ul style="list-style-type: none"> • Present oral reports, reports related to patient's condition. • Clarify physician orders. • Maintain professional communication in high stress or conflict situations, whether in a clinical, classroom, or other setting, and in any format (verbal, written, or electronic). • Refrain from disrespectful verbal or non-verbal behavior or communication in the classroom, clinical setting, or social networking sites.
<i>Motor Function</i>	
<ul style="list-style-type: none"> • Move within confined spaces • Sit or stand and maintain balance • Move, position, turn, transfer, and assist with lifting without injury to self or patient • Coordinate hand/eye movements • Stand, bend, walk, and/or sit for up to 12 hours in a clinical setting performing physical activities without jeopardizing safety of self or patients • Write with pen or pencil • Type on keyboard • Pick up objects • Grasp small objects with hands • Push and pull 25 pounds • Lift 25 pounds • Squeeze with hands • Climb ladder/stool/stairs • Flex, abduct and rotate all joints freely 	<ul style="list-style-type: none"> • Draw up solutions/medication in a syringe. • Take vital signs. • Insert catheters. • Transmit information electronically. • Position patients. • Assist with transfer and ambulation of patients. • Walk without a cane, walker, or crutches. • Respond rapidly to emergency situations. Perform CPR and physical assessment. • Prepare and administer medication via all routes. • Operate a fire extinguisher. • Evacuate patients. • Enter data specific to patients (orders, progress notes, vitals, etc.) via paper chart or electronic chart
<i>Professional behavior</i>	
<ul style="list-style-type: none"> • Convey caring, respect, sensitivity, tact, compassion, empathy, tolerance, and a healthy attitude toward others • Perform safe effective care for clients 	<ul style="list-style-type: none"> • Professional behavior is expected in clinical, classroom, or other settings. • Professional behavior includes acts of omission and commission, verbal, and non-verbal

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<ul style="list-style-type: none"> • Comply with school and health care agency policies • Comply with college Scholar's Code Relate to others in a respectful manner, with zero tolerance for incivility, aggression, or violence • Accept responsibility and accountability for one's behavior • Takes action to protect the public from unsafe, illegal, or unethical practice of others 	<p>communication, written or electronic communication.</p> <ul style="list-style-type: none"> • Complies with professional standards such as the AARC, NBRC, CoARC codes of conduct, legal standards set forth by the Alabama State Board for Respiratory Therapy, and the JSU Department of Respiratory Therapy Scholar's Code. • Show respect for differences in patients, peers, faculty, staff, co-workers. • Establish rapport with patients/clients. • Participate in healthy negotiation when conflict exists. • Refrain from verbal or non-verbal acts of disrespect, incivility, aggression, or hostility. Function effectively in situations of uncertainty and stress. • Immediately notify supervisor of inability to meet expectations or of mistakes. Accept constructive criticism and modify behavior accordingly. • Maintain professional rapport among interprofessional team members.
<i>Reading</i>	
<ul style="list-style-type: none"> • Read and understand written English • Read and comprehend documents essential for patient safety (e.g., medication information, physician orders) 	<ul style="list-style-type: none"> • Read, interpret, comprehend chart information. • Read measurement marks.
<i>Mathematical competence</i>	
<ul style="list-style-type: none"> • Read and understand columns of writing (e.g., flow sheets) • Read/interpret digital displays • Calibrate equipment 	<ul style="list-style-type: none"> • Accurately calculate medication dosages. Consistently demonstrate proficiency in calculation exams. • Accurately chart patient data using graphs or flowsheets

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<ul style="list-style-type: none"> • Convert numbers to and from metric system • Read graphs • Tell time • Measure time • Count rates (e.g., drip rates) • Add, subtract, multiply, divide • Compute fractions • Use a calculator 	<ul style="list-style-type: none"> • Accurately calculate various respiratory therapy calculations commonly used in practice: IBW, minute volume, rate, tidal volume, etc.
<i>Analytical/Critical Thinking</i>	
<ul style="list-style-type: none"> • Effectively read, write, and comprehend English • Consistently demonstrate critical 	<ul style="list-style-type: none"> • Recognize and prioritize patient problems. • Identify and report patient findings suggestive of a change in patient status. • Seek supervision appropriately.

19. ADVANCED-LEVEL EXAM REVIEW

19.1. The Department of Respiratory Therapy utilizes various exam review programs to better prepare graduates to take their credentialing exams offered by the National Board for Respiratory Care (NBRC). Currently, Lindsey Jones University is utilized as an external company that the Department of Respiratory Therapy collaborates with to offer comprehensive TMC (Therapist Multiple Choice Exam) and CSE (Clinical Simulation Exam) preparation assessments, tutorials, and solutions that span the JSU Department of Respiratory Therapy Curriculum. In addition to various online practice tools, students are required to attend a review seminar in their final semester.

Students will receive information regarding proctored exams and remediation requirements from their course faculty.

20. GRADING POLICY

The following represents the grading system used by the University and the basis upon which quality points are earned. The grade point average (GPA) may be determined by dividing the quality points earned by the number of hours attempted.

Transferred grades are accepted according to the letter grade sent by the issuing institution regardless of numerical scale on which the letter grade was based.

20.1. Rounding Policy for Grades

Grades will be rounded to the nearest whole number.

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Example: 59.49 and below = F
 59.5 to 69.4 = D
 69.5 to 79.4 = C
 79.5 to 89.4 = B
 89.5-90.1 and above = A

20.2. Credit Hour Ratio System

The unit of credit at Jacksonville State University is the semester hour. In the respiratory courses, the credit allocations are derived as follows:

Didactic: 1:1

Clinical: (varies by semester)

Laboratory: 2:1

20.3. Grade Point Averages

The following represents the grading system used by the University and the basis upon which quality points are earned. The grade point average (GPA) may be determined by dividing the quality points earned by the number of hours attempted.

A - four quality points per hour (90-100)

B - three quality points per hour (80-89)

C - two quality points per hour (70-79)

D - one quality point per hour (60-69). This grade will not be assigned for EH 098, 099, 101, LS 094, 095, 098, 102, and PHS 099.

NC - No credits (0-69). This grade is assigned only in English 098, 101, LS 094, 095, 097, 098, 104, and PHS 099.

F - No quality points (0-59). Failing grades may not be removed from the academic record. This grade will not be assigned for EH 098, 101, LS 094, 095, 097, 098, 104, and PHS 099.

P - Passing. Grade given for selected courses as specified in course descriptions in the catalog. The grade of P does not affect the G.P.A. The grade of F on a pass or fail course is computed as a regular F grade.

I - Incomplete - no quality points. See University Catalog for details.

W/P - withdrawn passing.

W/F - withdrawn failing (counts as an F)

X - Audit - no credit.

Transferred grades are accepted according to the letter grade sent by the issuing institution regardless of numerical scale on which the letter grade was based.

20.4. Frequency of Student Evaluations / Assessments

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The frequency of course evaluations and/or assessments are determined by each course instructor. The specific assessments are described in the syllabus for each course and shall be provided to the student at the beginning of each semester. Courses may require a minimum of a mid-term and final exam, but many require additional assessments throughout the course. Students should refer to the course syllabus for the specific dates and content involved for each assessment.

20.5. Dismissal from the RT Major

The Dean of the College of Health Professions and Wellness and faculty of the Department of Respiratory Therapy have the authority to request withdrawal of a student from the Respiratory Therapy Program, and to refuse re-admission to any student at any time if circumstances of a legal, moral, physical, or mental health, social, ethical, or academic nature warrant such action.

20.6. Academic Forgiveness and Second Chance

Upper division respiratory courses are not eligible for Academic Forgiveness and/or Second Chance.

21. STUDENT APPEAL AND/OR GRIEVANCE PROCEDURE

An appeal challenges a decision that has been made; a grievance is a complaint seeking a resolution to a specific problem. The same procedure is followed for either.

21.1. Student Initiated Appeals and Grievances

The appeal and grievance procedures are each divided into two phases, an “Informal Phase” and a “Formal Phase.” The Informal Phase is intended to attempt to resolve an issue through meeting and discussion with the faculty member or members involved and the Course Coordinator. Should the student be dissatisfied with the results obtained in the Informal Phase, a formal appeal may be made. In such case, the procedures outlined in the “Formal Phase” shall be followed.

21.1.1. *Informal Phase:* A student wishing to appeal a decision or discuss a grievance or complaint shall, within three (3) working days of the event/issue, arrange to speak with the faculty member(s) and Course Coordinator involved in the issue. If the issue cannot be resolved at this level, the student may initiate an appeal and the resolution procedure then enters the Formal Phase. The faculty member(s) and Course Coordinator shall compile a written report of the issue or issues presented, a summary of the facts, a summary of any attempts to resolve the issue and the ultimate decision made, and submit this report to the Program Director and Associate Dean. If delivered electronically, a paper copy of the record shall be provided forthwith.

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21.1.2. *Formal Phase:* Completion of the Informal Phase by a student is mandatory and shall be completed before an appeal can be made. A student wishing to file a formal appeal of a decision or grievance/complaint must contact the Program Director in writing within three working days of the meeting with the faculty/Course Coordinator. The Program Director shall ensure the student has access to the Appeal/Grievance Process.

21.1.2.1. The student must submit a written account of the relevant issue or issues involved to the Program Director and Associate Dean. Only information presented by the student at this time can be used in any phase of the appeal. The Program Director and Associate Dean shall thereafter meet with the student, review the appeal or grievance as well as the record of the Informal Phase, and attempt to resolve the issue. If the appeal or grievance is not resolved, the student shall be informed of his/her right to meet with the Dean. A student wishing to have an adverse decision reviewed by the Dean of the College shall deliver, within three (3) working days of being informed of the decision, a written request for review to the Office of the Dean, a summary of the proceedings before the Faculty/Course Coordinator, Program Director, and Associate Dean, along with the student's written account, shall be forwarded to the Dean. The Dean shall thereafter set a time and place to meet with the student.

21.1.2.2. If the appeal or grievance is pursued, the student will meet with the Dean. The Dean may, but is not required to, include members of the faculty and staff of the Department of Respiratory Therapy and the University Attorney. Information from the student, faculty, Course Coordinator, Program Director, and Associate Dean will be reviewed. Only information provided in the student's written account and information from the review by the Faculty/Course Coordinator, Director and Associate Dean will be allowed. The decision of the Dean shall be final.

22. FACULTY INITIATED GRIEVANCES

A grievance initiated by faculty or administrators against a student will proceed as follows:

22.1. The student will be notified in writing of the allegation(s) against him/her.

22.2. The student and involved faculty member(s)/Course Coordinator shall meet to discuss the basis of the grievance/complaint. The student will be provided the opportunity to respond to the allegations.

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- 22.3.** After the initial meeting, the student will be allowed three (3) working days to provide, in writing, additional information relevant to the grievance/complaint.
- 22.4.** Faculty Member(s)/Course Coordinator will render a decision in writing, and if the decision is averse to the student shall therein apprise the student of the procedure to appeal the decision, as heretofore set out.
- 22.5.** If the student wishes to appeal, he/she must submit a written account of the relevant issue or issues involved to the Program Director and Associate Dean. The Program Director and Associate Dean shall thereafter meet with the student, review the appeal or grievance, and attempt to resolve the issue. If the appeal or grievance is not resolved, the student shall be informed of his/her right to meet with the Dean.
- 22.6.** A student wishing to have an adverse decision reviewed by the Dean of the College shall deliver, within three (3) working days of being informed of the decision, a written request for review to the Office of the Dean. A summary of the proceedings before the Faculty/Course Coordinator, Program Director, and Associate Dean, along with the student's written account, shall be forwarded to the Dean. The Dean shall thereafter set a time a place to meet with the student. The Dean may, but is not required to, include the faculty and staff of the Department of Respiratory Therapy and the University Attorney. The decision of the Dean shall be final.
- 22.7.** The Dean will notify the Associate Vice President for Student Affairs and the JSU University Judicial Coordinator of a sustained grievance against a student, as appropriate.

23. ATTENDANCE, STUDENT TARDINESS AND ABSENTEE POLICY

An upper division student is held responsible for attending all scheduled classes, labs, and clinicals associated with courses for which he/she has registered. The policy of the Department of Respiratory Therapy is that there shall be no unexcused absences from exams, scheduled labs, or clinical. Students MUST notify the instructor of any intended absence or tardiness PRIOR to class, clinical, scheduled labs, or exams. Faculty will instruct students of method of notification. The faculty will establish the legitimacy of the excuse provided by the student related to tardiness/absence in class, clinical, lab, or exams and the right is reserved to call the physician's office for verification.

23.1. Excused Absences

Students will be permitted an excused absence from class, exams, lab, and clinicals for the following conditions: military, jury duty, approved school-related event, car accident day of shift (with documentation), death/funeral of close kin (parents, grandparents, siblings, spouse), personal court appearance (with

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documentation), major surgery, and documentation of a contagious illness or virus. These absences will not count against the student's grade, but all material missed must be made up before the end of the semester.

23.1.1. Class Attendance

Attendance in scheduled classes is important for success in the course. Student should make every effort to attend all classes. Please refer to your course syllabus, calendar, and faculty for information related to scheduled classes.

23.1.2. Exams

Classroom doors will be locked during testing. Students arriving after the start of an exam will not be allowed to take the exam at that time. Please refer to the course syllabi for make-up exam policy after an excused absence.

23.1.3. Clinical Attendance

The student is expected to attend ALL clinical rotations at their scheduled times. Tardiness or absenteeism is not acceptable. The attendance habits developed in this program will carry over into the student's professional life after completion of the program. The hospitals take note of the attendance patterns of the students, and this is a determining factor regarding potential employees. The attendance policy will be adhered to without exception. Any absence must be reported to the clinical site 30 minutes prior to the scheduled time, (e.g., no later than 6:30 AM for 7:00 AM rotations). The Director of Clinical Education (DCE) must be notified as well. Failure to notify the hospital and DCE will result in the student being placed on probation. The second occurrence may result in the student being dismissed from the program. If the student is going to be absent from clinicals they must:

1. Call the clinical site at minimal 30 minutes before the beginning of the shift and notify them they are going to be out.
2. Get the name of the person at the clinical site that was notified.
3. Call the DCE and leave a voice mail or send a text message or email; leave your name and the reason you are missing clinical. You MUST also leave the name of the person at the clinical site you notified.
 1. A percentage of the clinical grade each semester is derived from clinical attendance. Therefore, any clinical day missed, regardless of cause, may lead to a reduction in the student's clinical grade.
 2. Being tardy three (3) times is considered as one (1) absence, and the student will have to make up an entire day. The student is considered tardy at 10 minutes past the start of the clinical shift. If a student is late 20 minutes or more, the student is considered absent and is dismissed from the clinical site for the entire day.

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3. The DCE must document that each student attends all the clinical time they are assigned each semester. Therefore, all clinical time missed must be made up.
4. All make-up days must be approved through the Director of Clinical Education. The student must make-up time missed within two weeks of the absence, unless otherwise approved by the DCE.
5. If a student fails to attend a make-up day, another absence will be recorded in the attendance record and the student will be placed on probation. Upon the second occurrence of this nature the student will be dismissed from the program. It is the student's responsibility to see that all make-up days are approved through the DCE.
6. Although making up missed clinical time is required, it will not remove the absence from the student's attendance record. The day missed may still adversely affect the student's clinical grade.
7. If the student must leave the clinical site early, the time must be made up within the following week. The student will not be allowed to stay past the designated clinical time to leave early at a future date. Missed hours can only be made up after they are missed.
8. Students are not permitted to contact the clinical sites directly regarding clinical schedule changes, without the DCE approval. They must be coordinated through the Director of Clinical Education. However, students must contact the clinical site and the DCE to get approval to make-up a missed day. Failure to comply will result in an absence for the day(s) affected.
9. Failure to follow the assigned clinical schedule times and locations without prior faculty approval will result in an absence for the day (s) and Clinical Suspension. Upon the second occurrence the student will be dismissed from the program.
10. Any clinical days missed due to disciplinary action may be subject to a reduction in the clinical grade as per attendance policy.
11. All Respiratory Therapy seminars or meetings attended in lieu of clinical days will be documented with a computer log by the student describing the content of the event.
12. When a student does not arrive at the clinical site and does not follow the above procedure prior to the start time, he/she is said to have exhibited unprofessional behavior (no call/no show). Unprofessional behavior of this magnitude may result in a clinical failure and dismissal from the program.

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24. CLINICAL SKILLS LABORATORY POLICY FOR STUDENTS

The following rules of the Department of Respiratory Therapy Clinical Skills Laboratory must be adhered to:

1. No food or drink in lab.
2. No adhesives should be placed on beds, overbed tables, or bedside stands.
3. Dispose of all needles/jelcos in proper container.
4. ABG arms should only be used on designated tables. Artificial blood will stain if leakage occurs.
5. Remove tape from demonstration models (if used).
6. Students are responsible for returning items to designated location after practicing for check offs.
7. Students must have a signed disclaimer on file with the Clinical Associate before participating in check offs or practice.
8. A laboratory schedule will be distributed at the beginning of each semester.
9. All students shall wear appropriate attire and personal protective equipment (PPE) in the laboratory as outlined in the Dress Code Policy for Clinical and Laboratory Settings unless otherwise directed by faculty.
10. Do Not sit on the tables in the laboratory or classroom!

24.1. Lab Checkoff Policy

Each student will have a total of three attempts to successfully complete a checkoff. The first attempt consists of observation by at least one instructor. If the student fails to successfully complete the checkoff, the student will be given feedback and encouraged to practice the procedure again. The second attempt on the same procedure will be with at least two faculty members. If the student fails to checkoff after the second attempt, the student will be scheduled a specific amount of time to come into lab to practice the procedure and they must meet with the program director prior to attempting the third and final chance at the checkoff. During the last attempt on a checkoff procedure, the student must be observed by at least two faculty members. If the student is unable to complete the checkoff on the third attempt, the student will not pass lab and therefore, will not pass the class that the lab is in conjunction with for that given semester.

If there is a consistent pattern of a student constantly failing checkoffs and needing repeat attempts, a meeting with the Program Director will be held to discuss further progression in the Respiratory Therapy Program.

If a student misses a checkoff due to an unexcused absence, it will count as a failed attempt to complete the said checkoff.

25. DRESS CODE FOR CLASSROOM, CLINICAL AND LABORATORY SETTINGS

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The Department of Respiratory Therapy uses many different facilities for clinical experiences. In the clinical areas, the student assumes a role as a member of the respiratory care team, and while in that role must present a professional appearance. The dress code of the College is established to provide a uniform standard for professional appearance of the students. The Director of Clinical Education, in coordination with the facility, will provide guidance with regards to unique clinical area uniform requirements. The student must assume responsibility for meeting the standards of the College dress code and presenting a professional appearance. The Dress Code Policy shall apply to classroom, clinical and laboratory settings unless otherwise directed by clinical/course faculty. Students who fail to meet the dress code standards are subject to removal from the clinical area and will receive an absence for that day.

25.1. UNIFORMS

Student must adhere to the dress code and policy for each site where they are doing their clinical rotations (i.e., protective wear, etc.). In addition, students must wear uniforms which meet standards set forth by this manual.

1. Black Scrubs (Must be purchased at the JSU Bookstore or Scrubs Plus and have the JSU Respiratory logo). No joggers allowed.
2. White Lab coat and black scrub jacket (Must be purchased at the JSU Bookstore or Scrubs Plus and have the JSU Respiratory logo)
3. A Short sleeve or long sleeve white or black T-shirt must be worn under all Scrub tops.
4. Enclosed white or black color shoes (leather sneakers and/or uniform shoes, etc.). The shoe shall be a closed, conservatively styled, shoe with leather uppers. The shoe's upper shall not be suede, patent leather, canvas, or any other artificial fabric. The entire shoe shall be no less than 99% solid color, including the visible edge of the sole. Shoelaces shall be 100% solid color. The heel of the shoe should be one inch or less. Shoes with open toes or open heels are specifically prohibited. Shoes should be always kept clean, including shoelaces.
5. Identification Badge must be always worn in the clinical setting. ID badges must be properly displayed on the uniform by the student so that the student's name and title are clearly visible to patient, faculty, and healthcare staff. Proper display can include wearing ID badge on the right or left chest area of scrub top or lab coat/scrub jacket. ID badges cannot be worn at the waist level.
6. The student must have with them each clinical day a stethoscope, a watch with a second hand, and a calculator.
7. Personal appearance must be kept up each day.
8. Good Personal Hygiene
 1. Beard and/or moustache should be well groomed.

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2. Hair should be kept neat and off the face and collar. If hair exceeds shoulder length, it must be confined while in the clinical area to promote safety and prevent contamination. Hair must be of a natural hair color.
3. Fingernails must be kept clean and must not extend beyond half an inch from the fingertip. Only clear fingernail polish is permitted. (False nails are not permitted)
4. Jewelry is restricted for all students to a watch with a second hand, wedding rings, and one small pair of stud earrings in the ears only. No decorative necklaces, bracelets, program insignia, or other pins are allowed to be worn. Medic Alert jewelry may be worn if necessary. (Medic Alert necklaces that can be tucked under the uniform are preferred).
 - a. Ear gauges and other body modifications/piercings shall not be visible. Devices such as retainers, jewelry, tunnels, or stretching devices associated with ear gauging and body modification/piercing shall not be visible. Upon removal of devices, residual openings greater than 16 gauge (1.29mm or 3/64th inch) shall be covered with undecorated, adhesive bandage such as BandAid© Small Spot bandage or other sized bandage sufficient to cover opening. Clinical and course faculty will determine the appropriateness of the bandage covering. Larger residual openings may require the alternative use of flesh-colored plugs. The alternative use of flesh-colored plugs shall be determined by the clinical and course faculty prior to their use in clinical or laboratory settings. Body modifications that are medically necessary due to deformity or injury are not covered by this policy. The Department of Respiratory Therapy reserves the right to evaluate visible body modifications not covered in this policy for appropriateness in the clinical/laboratory settings. Students should be aware that clinical partner agencies can reserve the right to evaluate visible body modifications and deny clinical experience in their facility. If clinical experience required by the Department of Respiratory Therapy cannot be obtained due to clinical partner agency denial, the student may be dismissed from the program.
5. No perfumes or colognes permitted.
6. Visible tattoos are not permitted. The student must cover the tattoo with a faculty approved bandage.
7. The uniform shall be clean and neatly pressed. Students will be held accountable for the appearance of their uniforms. The Director of Clinical Education has the final authority to determine if a uniform is excessively worn, stained, or otherwise no longer serviceable.
8. Make-up should be natural-looking, and no thick fake eyelashes shall be worn.

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9. If a cultural or individual set of beliefs or circumstances interfere with adherence to the dress code of the Department of Respiratory Therapy, the student should send a request via email to the DCE for an evaluation of the circumstance. Each request will be reviewed on an individual basis.
10. The above uniform policy is to be always followed in the classroom, laboratory and clinical settings. Violation of any of the above policies will result in the student being sent home from the clinical site and will be counted absent.

26. SMOKE-FREE ENVIRONMENT POLICY

Considering health risks and factors related to quality of life for smokers and non-smokers, it is the policy of the College that the environment be designated as a smoke-free environment. NO smoking, vaping, or the use of electronic cigarettes will be permitted within the buildings, clinical agencies or on building/agency grounds at any time. This policy applies to faculty, staff, visitors, and students. All University grounds and clinical agencies are TOBACCO FREE.

27. AUDIO AND VIDEO RECORDING POLICY

The purpose of this policy is to establish the procedures and limitations related to audio/video recording of classroom lectures, presentations, and laboratory demonstrations.

It is the policy of the Department of Respiratory Therapy that students can participate in audio or visual recording of lectures, presentations, or laboratory demonstrations within strict guidelines. Recording of lectures, presentations, or laboratory presentations is exclusively authorized for the purposes of individual or group study with other students enrolled in the same class. Any audio/visual recording or edited portion of the recording shall not be reproduced, transferred, or uploaded to any publicly accessible internet environment such as, but not limited to, social media sites, internet blogs, or live podcasts. Retention of recordings is prohibited. Upon completion of the associated course, students shall destroy all recordings unless specific permission is obtained from the course instructor. Violations of this policy may result in punitive action, including dismissal from the program.

The recording of lectures, presentations, or laboratory demonstrations will be the sole responsibility of the student. Audio/Visual equipment used for recording must not present any disruption of normal class activities. Course instructors reserve the right to deny any recording device deemed to be intrusive, distracting, or otherwise incompatible with normal class activities.

28. CALCULATOR POLICY

The student will be permitted to only use calculators provided by the program during exams and laboratory practice.

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29. GUIDELINES FOR PROFESSIONAL USE OF TECHNOLOGICAL DEVICES IN HEALTHCARE

Technological devices are increasingly an important tool in education and healthcare as a means of accessing information and calculating equations commonly used in healthcare. However, these devices can be inappropriate and unprofessional when utilized in improper forums. The Department of Respiratory Therapy maintains the right to regulate the use of these devices in class, laboratory, and clinical settings as outlined in this policy. For this policy, technological devices are defined as any technological device used for communication, retrieval or storage of information, accessing the internet, or creating photographs/videos. Examples of such devices are, but not limited to cellular phones, or tablet/laptop computers. No cellular phones are to be used in the classroom or lab settings unless approved by the course instructor for educational purposes. Cellular phones or approved technological devices may be used in clinical settings for clinical resource purposes per instructor and agency guidelines and may be accessed in non-patient care areas only. Students are strictly prohibited from using cell phones for personal communication (calls or text messages) in a clinical setting unless explicitly approved by the instructor. Cellular phones or any electronic device shall not be used for taking photographs/videos/recordings of any kind in a clinical setting. The storage of data on any technological device that compromises patient privacy or confidentiality is strictly prohibited. Cellular phones brought into class, lab, or clinical must remain in a non-audible, vibration mode or the OFF position. Emergency calls may be routed through the College office. Staff will forward all emergency messages when possible.

All electronic devices are strictly forbidden in testing or test review settings.

Violations of the above policy may result in, but not limited to, additional assignments, zero credit for a test or assignment, course/clinical failure, or dismissal from the program.

30. BLOOD AND BODY FLUID EXPOSURE POLICY

30.1. Philosophy

The College of Health Professions and Wellness faculty, professional staff, clinical associate/adjuncts, and students adhere to Standard Blood and Body Fluid Precautions. These groups will be referred to collectively as 'individuals' for this policy. One principle of these precautions is to assume that all patients are potential carriers of blood borne disease. In addition, health care workers should assume themselves to be potential carriers. They must exercise caution to protect both patients and health care workers from exposure to blood and body fluids.

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Individuals are responsible for adhering to the established accidental exposure policies, procedures of the clinical agency, and the College with respect to reporting and documentation of the incident.

30.2. Prevention

Individuals are required to receive the Hepatitis B vaccine series, as indicated in the “Requirements for Hepatitis B Vaccine Policy for Faculty and Students”.

Individuals that present reactions or life threatening complications must provide written documentation from their health care provider to be exempt from this requirement.

Before entering the clinical setting, all individuals are instructed on Standard Blood and Body Fluid Precautions and post-exposure procedures.

30.3. Post-Exposure Protocol

When an individual is directly exposed to or in contact with blood or other potentially infectious materials, the response shall be as follows:

30.3.1. If the potential exposure involves a needle stick, puncture injury, cut, or fluid contact, wash the area with soap and water for at least 15 seconds. In the case of a mucous membrane exposure, rinse the site with copious amounts of water or normal saline solution. Irrigate the eyes with commercially prepared isotonic solution in eye wash stations, if available, or with saline solution or clean water. Flush splashes to the nose, mouth, or skin with water.

30.4. Student and Faculty/Professional Staff/Clinical Associate/Adjunct Exposure

30.4.1. The student must immediately consult his/her DCE and the JSU Student Health Center at 256-782-5310 or 256-782-5309 after business hours). Additionally, the student may consider contacting his/her own health care provider, emergency health care provider or infectious disease specialist regarding the prophylaxis.

30.4.2. Faculty/Professional Staff/Clinical Associate/Adjunct must immediately consult preceptor and the JSU Student Health Center at 256-782-5310 or 256-782-5309 after business hours). Additionally, the Faculty/Professional Staff/Clinical Associate/Adjunct may consider contacting his/her own health care provider or infectious disease specialist regarding the advisability of post-exposure prophylaxis.

30.4.3. The health care provider will make the judgment as to whether the exposure warrants prophylaxis. Coordination of the individual's plan of care

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and follow-up will be the responsibility of the student and the student's health care provider.

- 30.4.4.** Once the clinical faculty /preceptor has notified the agency charge nurse or immediate supervisor, it is recommended that the clinical agency's infectious disease nurse, if available, also be notified. An incident (exposure) report should be completed. If the agency will allow, a copy of the report should be obtained and forwarded to the DCE. If the agency will not provide a copy of the report, the clinical instructor or preceptor should write a memorandum for record to the DCE, summarizing the details of the exposure. The DCE will notify the Dean within three (3) days that an incident has occurred.
- 30.4.5.** Notification of the patient (if the exposure source is known), risk screening of the patient or other diagnostic testing of the patient, if indicated, will be coordinated in accordance with agency policies.
- 30.4.6.** JSU Student Health Center, the exposed individuals' own health care provider, emergency health care provider, or infectious disease specialist will manage the individual's post-exposure baseline and follow-up laboratory tests for bloodborne pathogens. Individuals are responsible for coordinating the release of their initial test results to the health care provider of their choice, if needed. The College is not responsible for ensuring the student's compliance with post-exposure care.
- 30.4.7.** Students and Faculty/Professional Staff/Clinical Associate/Adjunct will be responsible for all costs with regards to their post exposure medical care.

31. HEALTH INSURANCE AND CPR POLICY

All students are required to provide proof of valid health insurance prior to entering the clinical rotations. Health insurance must be maintained active during the entire time in the Respiratory Therapy program. In the event of sickness or injury, students are responsible for all costs related to the provision of medical care, as needed, in the clinical setting.

32. REQUIREMENTS FOR BASIC LIFE SUPPORT (BLS) CERTIFICATION

All students enrolled in the upper division of respiratory must maintain and provide proof of Basic Life Support certification. Each student will be required to take Healthcare Provider BCLS at the beginning of the program. Their card must be good for two years and should not lapse during the student's tenure in the Respiratory Therapy program. (No Exceptions)

33. PHYSICAL EXAMINATION REPORT

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In accordance with affiliate agencies and the JSU Department of Respiratory Therapy requirements, all students upon admission to the Traditional, Entry-Into-Practice Respiratory Therapy Program, and faculty upon hire, are to have a physical examination and subsequent exams while enrolled/employed. The findings are to be reported to the appropriate health forms.

The following procedure outlines STUDENT Initial and annual Health Appraisals and must be completed at the JSU Department of Respiratory Therapy designated facility.

- 33.1.** The “Initial Health Appraisal Form” will be made available to the student in the online orientation to be completed upon acceptance into the program. Thereafter, the “Annual Health Appraisal Form” is to be obtained from the website.
- 33.2.** The student should then be contacted by the designated facility to arrange an appointment for the “Initial Health Appraisal” to be completed. “Annual Health Appraisals” will be conducted at the designated facility determined by the College of Health Professions and Wellness.
- 33.3.** The Initial Health Appraisal must be completed prior to the first day of class for all students.
- 33.4.** Subsequent annual health appraisals must be completed prior to the first day of class as directed by the Director of Clinical Education.
- 33.5.** In an individual elects to have a titer, he or she must assume financial responsibility for the test. If the test reveals a non-immune status, the student must follow the Centers for Disease Control and Prevention (CDC) recommended guidelines.
- 33.6.** The completed health forms will be reviewed by the designated facility medical review officer and healthcare providers. All deficiencies must be rectified, and the student must be cleared by the designated due date.
- 33.7.** Any student who does not comply with the policy stated herein will not be allowed to function in the clinical area until the completed health appraisal is submitted to the Director of Clinical Education. Failure to comply with guidelines may result in course failure and possible dismissal from the program.
- 33.8.** Upon acceptance to the RT Program, the student must complete a physical examination. The physical exam must be completed yearly by the designated facility. Students must provide documentation for the following:
- 33.9.** Measles, Mumps, and Rubella (MMR)

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All students involved in clinical courses must present written documentation of immunity to Measles (Rubeola) Mumps, and Rubella.

- 33.9.1.** Students born in 1957 or later must do one of the following to be considered immune to measles, mumps, or rubella:
- 33.9.1.1. Provide documentation of a physician-diagnoses measles or mumps disease
 - 33.9.1.2. Provide laboratory evidence of measles, mumps, or rubella immunity from a blood sample titer
 - 33.9.1.3. Provide evidence of appropriate vaccination against measles, mumps, and rubella (i.e., administration on or after the first birthday of two doses of live measles and mumps vaccines separated by 28 days or more, and at least one dose of live rubella vaccine).
- 33.9.2.** Students born in 1957 or later without serologic evidence of immunity or prior vaccination should receive 2 doses of MMR, 4 weeks apart
- 33.9.3.** Students born before 1957 should discuss the need for MMR vaccination with the medical staff at the JSU Department of Respiratory Therapy designated facility if they do not have a history of physician-diagnosed measles and mumps disease (or laboratory evidence of immunity from blood sample titer) and do not have laboratory evidence of rubella immunity. These students may be particularly vulnerable in the event of a mumps outbreak.

If blood titers reveal an “indeterminate” or “equivocal” level of immunity, the student will be considered non-immune. Further recommendations related to any of the above categories may be made by the medical staff at the JSU Department of Respiratory Therapy designated facility. As a result, the student may be required to sign a “Low Titer Waiver”.

33.10. Tetanus/Diphtheria/Pertussis (Tdap)

- 33.10.1.** All students involved in clinical courses must present written documentation for Tetanus, Diphtheria, and Pertussis. All students who have completed a primary series of a tetanus/diphtheria-containing product (DTP, DTaP, DT, Td) should receive Td boosters every 10 years.
- 33.10.2.** Students should also be given a 1-time dose of Tdap as soon as feasible (give if TD booster has not been received in the last two years). Provide documentation of the Tdap vaccine. A booster must be received every 10 years.

33.11. Hepatitis B

- 33.11.1.** Provide proof of a 3-dose series of Hepatitis B vaccine at 0-, 1-, and 6-month intervals.

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33.11.1.1.If series occurred prior to acceptance to the program, students should provide evidence of series to designated facility.

33.11.1.2.If series has not occurred or been interrupted, the student should receive series from designated facility.

33.12. Varicella (Chickenpox)

33.12.1. Provide documentation of receiving 2 doses of varicella given at least 28 days apart

33.12.2. Provide documentation from a physician of a history of varicella or herpes zoster or laboratory confirmation of disease

33.12.3. Provide laboratory evidence of varicella immunity

Before a student can receive the varicella vaccine, the Alabama Department of Public Health (ADPH) requires a **negative varicella titer**. The ADPH guidelines state that individuals who receive their first dose of varicella vaccine after the thirteenth birthday must be given two doses at least one month apart. If a blood titer test reveals a non-immune status, the student must follow the Centers for Disease Control (CDC) recommended guidelines and receive two (2) doses of vaccine. This is also a requirement from the clinical affiliates that are used for clinical courses. Students must assume financial responsibility for receipt of the vaccine. Failure to comply with these requirements may result in dismissal from the program.

33.13. Tuberculosis (TB)

33.13.1. Provide documentation of TB screening with negative results (or appropriate treatment, if positive)

33.13.2. Students will be required to obtain a two-step Tuberculin skin test with the first injection administered and read prior to clinicals.

33.13.3. Students must renew their TB skin test on an annual basis.

33.13.4. Students testing positive will be required to comply with the current Centers for Disease Control and Prevention (CDC) recommendations as directed by the facility designated by the Department of Respiratory Therapy. Failure to comply with the CDC requirements will result in dismissal from the program.

33.14. Influenza (Flu)

Influenza is a serious respiratory disease, and it is highly recommended that all healthcare workers submit to yearly vaccinations. Faculty and Students should present proof of vaccination (not mist) or sign the Seasonal Influenza (Flu) Vaccine Declination Form.

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Students must assume financial responsibility for the immunization. Failure to comply with these requirements may result in dismissal from the program

34. ILLNESS, INJURY, PREGNANCY, OR OTHER HEALTH CONDITION

If because of injury, illness, pregnancy, or other health conditions, should a student be unable to perform the essential functions or complete the requirements of a course, the affected student should immediately request a conference with the Program Director and DCE. The availability of any reasonable accommodation will be explored and to the extent feasible implemented. The University reserves the right in such situations to request a physician or other healthcare professional to certify any necessary restrictions.

35. HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT OF 1996

The Health Insurance Portability and Accountability Act of 1996, referred to as HIPAA, was originally enacted to allow employees to maintain their healthcare coverage when changing jobs, but has grown into regulations for the healthcare industry.

Certain types of patient information are referred to as Protected Health Information and are legally protected under the HIPAA Privacy Regulations and must be treated in a special way.

Protected Health Information encompasses almost anything that can be used to identify the patient such as name and address. It also includes identifiers such as birth date, social security number, medical record number, telephone number, or patient account number. Any piece of information that can be used to discover the individual identity of a specific patient or lead to access to the patient's medical information equals **protected health information**.

Under the HIPAA Privacy Regulations, agencies are required to give patients a copy of its written Notice of Privacy Practices at the time of registration for admission or for an outpatient service encounter. This document will disclose how the agency plans to access, use, and disclose the patient's protected health information.

Failure to abide by the HIPAA Privacy Act of 1996 is a violation of the Professional Scholar's Code and is subject to disciplinary action. Disciplinary action will be enforced against persons who do not follow the privacy policies and procedures that are required under the Health Insurance Portability and Accountability Act of 1996.

36. CRIMINAL BACKGROUND CHECKS FOR STUDENTS

All students must have a background check completed by the agency designated by the Department of Respiratory Therapy, prior to beginning the upper division phase. The information obtained from the

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Department of Respiratory Therapy investigation will be shared with the Dean in the College of Health Professions and Wellness, and with the administrative personnel at any/all assigned clinical sites or agencies as required by the policies of these agencies or institutions. The information obtained in the reports rendered to the University shall be kept confidential except to the extent necessary in making admission, employment, and clinical assignment decisions.

Policies mandating criminal background checks are congruent with The Joint Commission (TJC), (TJC Standard HR.1.20.05 requires a criminal background check for staff and students as well as volunteers who work in the same capacity as staff who provide care, treatment, and services.)

Students must be successfully cleared through criminal background checks, healthcare licensing or certification registries and state boards prior to engaging in patient contact.

36.1. Process for Students with Positive Background Checks

- 36.1.1.** If a positive background is detected, the Dean or the Dean's designee will contact the student and ask for the following: 1) written explanation of the occurrence; 2) discussion as to how this situation was resolved or will be resolved; (Be sure to include information specific to the punishment, such as probation, rehab, counseling, etc.)
- 36.1.2.** Upon receipt of the written information from student, the Dean will send information to the BSRT Program Director and may consult with University Counsel. The BSRT Director may meet virtually or in-person to provide a recommendation to the Dean regarding status of the student.
- 36.1.3.** Once the Dean is notified regarding the recommendation, he/she will review the case and communicate with the student. If the student is allowed to continue in the program, the Dean or the Dean's designee must contact agencies to determine where the student can participate in clinical activities. The Director of Clinical Education will track this information each semester and communicate with the student and faculty as needed regarding clinical sites.
- 36.1.4.** Students with questions regarding their eligibility are encouraged to contact the licensing board for clarification. <http://www.asbrt.alabama.gov/>

37. IMPAIRMENT AND SUBSTANCE ABUSE TESTING POLICY FOR STUDENTS

37.1. Philosophy

Jacksonville State University (JSU) Department of Respiratory Therapy is committed to maintaining a drug-free workplace and academic environment. In compliance with Federal law, the University has adopted a University Drug-Free Workplace Policy that prohibits the illegal manufacture, distribution, dispensing, possession, or use of a controlled substance. All Department of Respiratory Therapy students, faculty, and staff must become familiar with and comply with

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this university-wide policy, which applies to behavior that not only occurs on the University campus but also on property owned or controlled by the University and/or a University-sponsored or University-supervised activity at other locations. This policy is accessible on the JSU web site. The JSU Department of Respiratory Therapy Impairment and Substance Abuse Testing Policy, as described below, is intended to compliment the University's Drug-Free Workplace Policy. This policy applies to Department of Respiratory Therapy students, faculty, clinical associates and adjuncts, professional staff, and students at any time and in any location while in a role affiliated with JSU.

37.2. Purpose

For obvious health and safety concerns, students, faculty, and clinical faculty must conduct health care and educational activities fully in control of their manual dexterity and skills, mental facilities, and judgment. The presence or use of drugs or alcohol, lawful or otherwise, which interferes with the judgment or motor coordination of students, faculty, and clinical faculty in a health care setting, poses an unacceptable risk for patients, colleagues, the University, and affiliating clinical agencies.

The Department of Respiratory Therapy recognizes its responsibility to provide a safe, efficient academic environment for students, faculty, and clinical faculty and to cooperate with clinical agencies in providing for the safe and effective care of their patients during the students' clinical experiences in their facilities. Therefore, the following policy has been adopted to:

- 37.2.1.** Prevent substance abuse and/or activities or behaviors a) that are prohibited by the University's Drug-Free Workplace Policy, state or federal laws or b) which may subject the involved student, other individuals, and the University to legal penalties or consequences, or c) which may cause a deterioration of the atmosphere and circumstances under which the care of patients and the educational programs are conducted.
- 37.2.2.** Cooperate with affiliating clinical agencies by requiring students, faculty, and clinical faculty reporting to such agencies to consent voluntarily a) to allow those agencies to drug test the student, faculty, or clinical faculty in accordance with their policies, and b) to disclose any drug testing results to appropriate Department of Respiratory Therapy officials.
- 37.2.3.** Require all students enrolled in clinical courses in the Department of Respiratory Therapy to submit to pre-clinical testing, random testing, and mandatory drug testing based upon reasonable suspicion of substance abuse.

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37.2.4. Require all part time clinical faculty to submit to pre-employment testing and mandatory drug testing based upon reasonable suspicion of substance abuse.

37.2.5. Require all faculty and full-time clinical faculty employed in the Department of Respiratory Therapy to submit to pre-employment testing, random testing, and mandatory drug testing based upon reasonable suspicion of substance abuse.

37.3. Definitions of Terms Used in Policy

Drug Testing means the scientific analysis of urine, blood, breath, saliva, hair, tissue, and other specimens of the human body for the purpose of detecting a drug or alcohol.

37.3.1. Pre-clinical testing means that all students will be tested prior to engaging in any clinical activity and/or patient care.

37.3.2. Pre-employment testing means that all faculty and full/part time clinical faculty will be tested prior to employment in the Department of Respiratory Therapy.

37.3.3. Random testing means that students, faculty, and full-time clinical faculty will be arbitrarily selected for drug testing using a computerized system. This testing can occur at any time during employment or enrollment in upper division program.

37.3.4. Reasonable suspicion testing means that evidence exists which forms a reasonable basis for concluding that it is more than likely that a student, faculty, or clinical faculty has engaged in substance abuse. Facts which could give rise to reasonable suspicion include but are not limited to: the odor of alcohol or drugs, impaired behavior such as slurred speech, decreased motor coordination, difficulty in maintaining balance, marked changes in personality or job performance, and unexplained accidents. Such evidence may come from a professional or expert opinion, layperson opinion, scientific tests, or other sources or methods.

Illegal drug means any drug which is not legally obtainable; any drug which is legally obtainable but has not been legally obtained; any prescribed drug not legally obtained; any prescribed drug not being used for the prescribed purpose or by the person for whom it was prescribed; any over the counter drug being used at a dosage level other than that recommended by the manufacturer, or being used for a purpose other than the purpose intended by the manufacturer; and any drug being used for a purpose or by a person not in accordance with bona fide medical therapy. Examples of illegal drugs include, but are not limited to, stimulants, depressants, narcotic or hallucinogenic drugs, cannabis

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substances, such as marijuana and hashish, cocaine, heroin, methamphetamine, phencyclidine (PCP), and so-called designer drugs and look-alike drugs.

Impaired means that a person's mental or physical capabilities are reduced below their normal levels (with or without any reasonable accommodation for a disability). An impaired student manifests deterioration in the level of function as compared to that previously observed, or the student does not function at a level normally expected under the prevailing circumstances. Impairment may exist in one or more multiple domains, including psychomotor activity and skills, conceptual or factual recall, integrative or synthetic thought processes, judgment, attentiveness, demeanor, and attitudes as manifested in speech or actions. Impairment will include addiction to and/or physical dependence upon chemical substances.

Student means any individual formally enrolled in the JSU Department of Respiratory Therapy in pursuit of the BSRT degree, including credentialed therapists and students taking courses via distance education, regardless of the specific location of the student.

Faculty means any person employed in the faculty role in the JSU Department of Respiratory Therapy.

Substance abuse means (a) the manufacture, use, sale, purchase, distribution, transfer, or possession of an illegal drug while on University or affiliated clinical site premises or while participating in any University or affiliated clinical site-sponsored or related activity, including any respiratory-related course or clinical training activity; (b) the consumption, possession, or distribution of alcohol, unless approved by the University or clinical agency, by any student, faculty, or clinical faculty while on University or affiliated clinical site premises or while participating in any University-or affiliated clinical site-sponsored or related activity, including any respiratory-related course or clinical training activity; and (c) a student, faculty, or clinical faculty's use of alcohol or any drug in such a way that the their performance in any respiratory course, including activities at any clinical site, is impaired.

38. POLICY REQUIREMENTS

38.1. Drug and Alcohol Prohibitions and Duty to Notify of Drug/Alcohol Convictions

38.1.1. Substance abuse as defined in this policy, or a violation of any term of the Jacksonville State University Drug-Free Workplace Policy while engaged in any University affiliated experience is strictly prohibited. All students, faculty, and clinical faculty in the Department of Respiratory Therapy courses or programs are required to abide by these rules when

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reporting to respiratory related courses and clinical experiences and while at clinical agencies (including parking lots and grounds).

38.1.2. Under no circumstance should students, faculty, or clinical faculty participate in courses or clinical activities while they are impaired.

38.1.3. Students who violate these rules will be deemed to be unable to meet the essential qualifications/functions of the curriculum. Students determined to have violated these prohibitions shall be dismissed from the Department of Respiratory Therapy.

38.1.4. A violation by any student of any state or federal statute, or regulation established pursuant to such statute, pertaining to the manufacture, improper possession, sale, use, or distribution of a drug or alcohol is strictly prohibited. Any such violation must be reported to the Department Head of Respiratory Therapy within five days. Such violation, if substantiated, will result in disciplinary action up to and including student's dismissal from the Department of Respiratory Therapy. A student who fails to notify the Department Head of Respiratory Therapy within five days of an administrative action or legal conviction for any such violation shall result in dismissal from the Department of Respiratory Therapy.

38.1.5. Faculty or clinical faculty determined to have violated these prohibitions shall result in termination from the Department of Respiratory Therapy.

38.2. Student, Faculty, and Clinical Faculty's Agreement to Submit to Drug Testing and to Consent to Release of Test Results to Department Head of JSU Respiratory Therapy

38.2.1. The student, faculty or clinical faculty must agree to submit to drug testing prior to being assigned to an affiliating agency, for random testing, and for reasonable suspicion. The individual shall sign a consent: a) to abide by the drug/alcohol policies and drug testing policies of each affiliating clinical agency in which a student is assigned; b) to submit to any drug/alcohol testing (random or reasonable suspicion) required by the Department of Respiratory Therapy and/or the affiliating clinical agency; and c) to release a copy of any and all drug/alcohol test results to the Department Head of Respiratory Therapy. Failure to sign such consent shall be grounds for non-placement at an affiliating clinical agency and shall result in dismissal from the program in the case of the student or termination in the case of full or part time clinical faculty.

38.2.2. A student, faculty, or clinical faculty's failure to submit to a required drug testing, or attempting to tamper with, contaminate, or switch a sample shall result in dismissal from the Department of Respiratory Therapy.

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38.2.3. The cost of all drug/alcohol testing required shall be borne by the person or individual depending on what term we want to use being tested.

38.3. Procedures for Drug Testing Requested by the Department of Respiratory Therapy

38.3.1. Procedure for Pre-Clinical/Pre-Employment Drug Testing Requested by the Department of Respiratory Therapy

38.3.1.1. Drug testing for pre-clinical RT Students will be completed prior to the first day of class and will be arranged by the Department of Respiratory Therapy. The cost of this drug testing may be assumed by the student. Any “non-negative” screening that requires additional testing will be paid by the individual.

38.3.1.2. Drug testing for pre-employment for faculty and clinical faculty will be arranged by the faculty or clinical faculty. The cost of this drug testing will be assumed by the employee. The faculty or clinical faculty will provide a copy of the drug test to the Dean, College of Health Professions and Wellness.

38.3.2. Procedure for Random Drug Testing Requested by the Department of Respiratory Therapy

38.3.2.1. Drug testing for random drug testing will be arranged by the Department of Respiratory Therapy. The cost of this drug testing will be assumed by the student. Any “non-negative” screening that requires additional testing will be paid by the individual. Failure to comply with all aspects of random testing will result in dismissal from the program or termination of employment with the Department of Respiratory Therapy.

38.3.2.2. Upper division students, faculty, and full-time clinical faculty will be arbitrarily selected for random drug testing using a computerized system. Random drug testing can occur at any time. The individuals will be notified by Department of Respiratory Therapy faculty/staff if his/her name is selected and will be required to report immediately for testing as directed.

38.3.3. Procedure for Reasonable Suspicion Drug Testing Requested by the Department of Respiratory Therapy

38.3.3.1. Any student, faculty, or full/part time clinical faculty who demonstrates behavioral changes reasonably suspected to be related to substance abuse as defined herein will be subjected to testing. A decision to drug test based on reasonable suspicion of substance abuse may be made by a faculty/staff member and/or the clinical

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agency. The student, faculty, or full/part time clinical faculty's request to drug test will be documented and may be based on a variety of factors, including but not limited to:

- 38.3.3.1.1. observable phenomena such as direct observation of drug use and or physical symptoms or manifestations of being under the influence of a drug;
- 38.3.3.1.2. erratic behavior, slurred speech, staggered gait, flushed face, dilated/pinpoint pupils, wide mood swings, or deterioration of work or academic performance;
- 38.3.3.1.3. information that a student has caused or contributed to an accident that resulted in injury requiring treatment by a licensed health care professional;
- 38.3.3.1.4. substance abuse-related conviction by a court, or being found guilty of a substance abuse-related offense in another administrative or quasi-legal proceeding.

38.3.3.2. Drug testing for reasonable suspicion will be arranged by the Department of Respiratory Therapy, unless done in cooperation with the affiliating clinical agency. The cost of this drug testing will be assumed by the individual being tested.

38.3.4. Collection and verification process

38.3.4.1. Drug testing will be conducted by a certified collector in accordance with established methods and procedures. Confidentiality of the student, faculty, and clinical faculty as well as the validity of the sample will be protected by the testing facility. The procedure for collection as determined by the collection site, will involve a urine sample, securable urine containers, and chain of custody procedures. This procedure ensures that the samples identified to a student, faculty, or clinical faculty contain materials from that individual, that the samples are protected from tampering, and that the analysis of them is done in accordance with federal guidelines.

38.3.4.2. The test shall screen for the use of drugs whose use is either illegal, or which are prone to abuse (including alcohol), as determined at the discretion of the Medical Review Officer of the testing facility, training hospital, Department of Respiratory Therapy, or for the use of any drugs which are reasonably suspected of being abused or used by the student, faculty, or clinical faculty.

38.3.4.3. Non-negative test results will be confirmed by additional testing. If the test is positive, the entirety of the relevant available evidence, including health history, will be used to determine the presence or absence of substance abuse.

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38.3.4.4. The Medical Review Officer will notify a student, faculty, or clinical faculty who has a non-negative drug test. If the results of the individual's test confirm the presence of a prescribed drug (verified negative) the person will be required to obtain a written statement from the prescribing physician or a Substance Abuse Professional (at the discretion of the Department of Respiratory Therapy) stating that the drug level is within prescribed limits and that the level does not indicate abuse. The prescribing physician or a Substance Abuse Professional must indicate that the drug will not interfere with safe practice in the clinical area. The Medical Review Officer will determine the final status of the drug test. Positive test results shall be communicated to the Dean and documented in the students, faculty, and clinical faculty records in the Department of Respiratory Therapy. A positive substance abuse test shall result in dismissal from the program or termination from the Department of Respiratory Therapy.

38.3.4.5. Failure to submit to any form of required drug testing (pre-employment / preclinical / random / reasonable suspicion) shall result in dismissal from the program or termination from the Department of Respiratory Therapy.

38.4. Confidentiality

38.4.1. All drug testing results will be treated by the Department of Respiratory Therapy as information that is received in confidence and shall not be disclosed to third parties unless disclosure is required by law, the information is needed by appropriate school officials to perform their job functions, disclosure is needed to override public health and safety concerns, or the student, faculty, or full/part time clinical faculty has consented in writing to the release of the information. The College and the University shall have the right to use and disclose the results of drug testing required by this policy in connection with internal academic purposes and in connection with the defense of any student grievance and any claims filed by a student, faculty, or full/part time clinical faculty by his/her personal representative, in any court of law or with any state or federal administrative agency.

38.5. Appeal Process

A student may appeal the college's decision to dismiss or not re-admit a student through the established Student Grievance Procedure.

39. FINANCIAL ASSISTANCE

Information concerning assistance programs, eligibility, and application procedure can be obtained by contacting the Financial Aid Office at 256-782-5006.

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40. SPECIAL DEPARTMENT OF RESPIRATORY THERAPY COSTS

See Traditional, Entry-Into-Practice Respiratory Therapy Program estimated expenses 2021 (see attachments). NOTE: All listed costs are estimates only and are always subject to change

41. STUDENT ORGANIZATIONS

Students in the Department of Respiratory Therapy are eligible to participate in all University student affairs. Student therapists are active in the University Student Government Association, sororities, fraternities, ballerinas, athletics, and the religious life of the campus. The Lambda Beta Society is an organization for senior RT students at JSU who have excelled in academics.

42. STUDENT SERVICES

42.1. Counseling Services

Counseling Services offers personal, educational, and career counseling for JSU students. Personal counseling is conducted in a private setting under the strictest confidence. Counselors are available on an individual or group basis. Counseling Services also coordinate and advise the Peer Educations student group. The Counseling Services office is in the Counseling Center Building and more information can be located at www.jsu.edu/ccservices.

42.2. Testing Services

Counseling Services is the registration site for CLEP, Residual ACT, MAT, CBase, Math Placement, CLA, EPP and other examinations. Many exams are available on a walk-in basis.

More information can be located at www.jsu.edu/studentssuccess/testing/index.html.

42.3. Tutoring and Academic Support

The Student Success Center provides a range of academic support services which include tutoring, Supplemental Instruction (SI), academic workshops, and mentoring. JSU offers FREE tutoring to all students regardless of grade point average or classification. The concept behind tutoring services at JSU is to model high quality, effective, academic skills, provide content-specific supplemental instruction, and create a connection to the institution. Tutors must combine their content knowledge with empathy, honesty, hoar work, humility, and humor. The goal of the Student Success Center is to support the university's mission as a learning-centered institution. Student will need to schedule an In-Person or Virtual Tutoring appointment using JSU Navigate. In-person appointments will take place in the Student Success Center, located at the Houston Cole Library, 2nd Floor (256-782-

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8223). Scheduling information can be found at JSU Student Success - Tutoring and Academic Support

42.4. Career Services

Career Services provides cooperative education to undergraduate and graduate students as well as employment assistance to all students, graduating seniors and alumni. These services consist of employability skills workshops, on-campus interviews, job listings at <https://jsu-csm.symplicity.com>, career fairs, corporate information, resume' editing, and individual counseling concerning job search strategies. Call (256) 782-5482 to schedule an appointment or visit the website at www.jsu.edu/careerservices to learn more about our services.

42.5. Disability Resources

Disability Resources (DR) provides appropriate and reasonable accommodations for students with documented disabilities. It is the goal of DR to ensure that students with disabilities have equal opportunity to achieve their personal academic goals while maintaining the integrity of JSU's academic program requirements. Disability Resources provides reasonable accommodations through a variety of services and programs. Accommodations may include: exam proctoring, special testing procedures, extended time on exams, priority registration, interpreter services, captioning services, readers, note takers, brailled formats, enlarged print materials, alternative formats, and assistive technology. DR is in the Student Success Center on the second floor of Houston Cole Library. More information regarding DR can be viewed at www.jsu.edu/DR/index.html.

42.6. RMC/University Health Center

The RMC/University Health Center is a primary health care facility providing outpatient medical services as well as promoting preventive health measures operating via a joint partnership with Northeast Alabama Regional Medical Center. The Health Center provides outpatient medical services as well as promotes preventive health measures to currently enrolled students, faculty, staff and currently active JSU alumni. Clients are encouraged to make an appointment, but walk-ins are welcome. Services include Primary Care, Urgent Care, Women's Health Care, Men's Health Care, Mental Health Screening, Physicals, Immunizations, Allergy Injections, Medication Management, Laboratory, Attention Deficit Hyperactivity Disorder (ADHD) Treatment, Wellness Check-ups, Health Fairs, Radiology Services (off site), Rehab Services (off site), Referrals

43. EMERGENCY PREPAREDNESS AND INCIDENT RESPONSE GUIDELINES

43.1. Inclement Weather Guidelines

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The following guidelines have been adopted by the faculty to be used in the event of inclement weather (such as snow, ice, tornado potential, or hurricane) which may affect faculty's or student's attendance in class or clinical. The purpose of this policy is to provide a mechanism for deciding whether clinical travel is expected, since official University closings may not be announced until later in the morning. Additionally, this policy has been developed to create, to the extent possible, an environment of safety for faculty, students, and staff in the event of inclement weather while maintaining the vision and operational responsibilities of the Department of Respiratory Therapy. As weather conditions can vary by location, students, faculty, and staff are responsible for evaluating travel safety in their respective locations. The Department of Respiratory Therapy makes no expressed or implied guarantee of travel safety based upon decisions of class or clinical cancellation or non-cancellation.

43.1.1. Inclement Weather Day

- 43.1.1.1. If Jacksonville State University is officially closed, information can be found on JSU's website at www.jsu.edu. It is recommended that faculty, students, and staff register for emergency notifications from the University. However, early clinical rotations may be scheduled to begin prior to closure decisions by the University. Therefore, as related to clinical rotations, please refer to inclement weather instructions outlined in this policy. Due to the unique nature of times and locations associated with clinical education, Department of Respiratory Therapy activities (class or clinical) may be delayed or cancelled even if the University remains open. The Faculty will notify students cancellations.
- 43.1.1.2. The Program Director is responsible for contacting course faculty to discuss inclement weather conditions. By consensus of faculty, a decision shall be made regarding class or clinical attendance. Decisions may be made to continue, delay, or cancel classes and/or clinicals. It is suggested that contacts be initiated at least two hours prior to the beginning of class or clinicals. In the event of clinical cancellation, the DCE will be responsible for contacting students of weather decisions. In the event of delayed or cancelled clinicals, the DCE will notify students via the designated communication method.
- 43.1.1.3. The Program Director is responsible for notifying the Dean/Associate Dean of any decision related to class or clinical cancellation or delay, via text and email.
- 43.1.1.4. On the day of an inclement weather event, faculty that have classes or clinicals must email or text the Dean or Department Head for Respiratory Therapy two hours prior to the beginning of class or clinicals for the following circumstances:
 - i. Inability to safely travel to campus or clinical

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ii. A delay would likely allow for safe travel

43.1.1.5. Students should monitor JSU email accounts and Canvas course announcements in the event of inclement weather. Clinical and/or class cancellations or delays will be posted in these forums and other designated communication methods. Students are responsible for evaluating the safety of travel in their vicinity. Students are responsible for notifying faculty if they are unable to attend clinical because of weather and road conditions.

43.2. Projected Inclement Weather

43.2.1. In the event that inclement weather is projected for the following day, students should be advised that decisions related to clinical and/or class cancellations or delays will be made two hours prior to the scheduled start time and will be posted via JSU email, Canvas announcement, and/or alternative communication methods.

43.2.2. Decisions related to class or clinical cancellation for all College of Health Professions and Wellness activities should be made two hours prior to the scheduled start times. The Dean or Associate Dean will contact faculty via email and/or text of the decision. The Program Director will notify students of the decision via JSU email, Canvas announcement, and/or alternative communication methods. Clinical agencies shall be notified via email.

43.2.3. In order to make-up hours associated with cancelled or delayed clinical days, the DCE may extend future clinical days. Prior to extending future clinical days, faculty must consult with the Program Director or Associate Dean. The DCE shall notify the clinical agency and specific unit of any plans for extended clinical days.

43.3. Severe Weather Warning Procedures

When severe weather procedures are implemented by the Jacksonville State University Director of Safety, the Dean's office will be notified to implement the severe weather preparedness plan. All students, clients, visitors, faculty, and staff will follow the University's plan for the building in which individual classes are located at the time of severe weather. The Safety Officer will schedule a severe weather drill at appropriate intervals.

44. FIRE SAFETY AND FIRE INCIDENT PROCEDURES

The following procedures have been adopted by the faculty to provide guidelines for fire safety and fire incidents. The purpose of this policy is to provide a mechanism for the response and evacuation in the event of a fire.

44.1. Fire Incident Procedures

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- 44.1.1.** Upon the discovery of any fire, it is the responsibility of faculty, staff, and students to notify others in
- 44.1.2.** the building of the immediate danger. The nearest fire alarm should be activated, and the exact location of the fire should be conveyed to anyone in the immediate area. Call University Police Department at 5050.
- 44.1.3.** Upon discretion and consideration of safety, an attempt should be made to extinguish the fire and/or contain the fire to the immediate area. If it is deemed unsafe to remain in the area to extinguish the fire, all individuals should proceed to the nearest evacuation route.
- 44.1.4.** The Safety Officer will schedule fires drills at appropriate intervals.

44.2. Evacuation Procedures

The purpose of evacuation is to provide a safe and orderly exit in the event of a fire incident. While predetermined evacuation routes are provided to guide occupants of the safest route, never go through a fire or dangerous area when safe, alternative escape routes are available. Evacuation should follow the University's plan for the building in which individual classes are located.

44.3. Bomb Threat Procedures

The following procedures have been adopted by the faculty to provide guidelines in the event of a bomb threat on the College of Health Professions and Wellness.

44.3.1. Receiving a Bomb Threat

- 44.3.1.1. Upon receiving a bomb threat via phone, remain calm and obtain as much information as possible without angering the caller.
- 44.3.1.2. Note the caller's voice (male or female, accent, or speech impediment).
- 44.3.1.3. Note the use of specific slang or phrases.
- 44.3.1.4. Note any background noise (other voices, aircraft, traffic, church bells, ect) that might indicate the caller's location or identity.
- 44.3.1.5. Try to obtain the location of the bomb.
- 44.3.1.6. Attempt to obtain the time of detonation and type of detonator.
- 44.3.1.7. If threat is left on voice message, do not erase.
- 44.3.1.8. Immediately notify University Police Department at 5050 and immediate supervisor.

44.3.2. Evacuation in Bomb Threat Incident

- 44.3.2.1. Upon notification of the University Police Department and immediate supervisor of a bomb threat, activate the nearest fire alarm.
- 44.3.2.2. Evacuate the building using the evacuation procedures for a fire.

44.3.3. Suspicious Package or Object

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- 44.3.3.1. In the event of a suspicious package or object, immediately call University Police Department at 5050.
- 44.3.3.2. Do not attempt to move or disturb the package/object.
- 44.3.3.3. Move away from the object.
- 44.3.3.4. Notify your immediate supervisor. Students should notify any faculty or staff member.

44.4. Suspicious Person Incident

The following procedures have been adopted by the faculty to provide guidelines in the event of a suspicious person.

44.4.1. Suspicious Person Procedures

- 44.4.1.1. While there is no specific definition, a suspicious person can be anyone that raises concerns. Be aware of anyone displaying the following characteristics:
 - 44.4.1.1.1. People in buildings or areas who do not appear to be conducting legitimate business.
 - 44.4.1.1.2. People monitoring areas, buildings, or entrances.
 - 44.4.1.1.3. Unfamiliar people in restricted, sensitive, or private areas.
 - 44.4.1.1.4. People wearing clothing not consistent with the weather conditions (bulky coat in warm weather, etc.).
 - 44.4.1.1.5. Individuals attempting to access utility locations.
 - 44.4.1.1.6. Individuals displaying violent or disruptive behavior.
 - 44.4.1.1.7. Unfamiliar individuals without proper I.D. badges in areas that require such identification.
- 44.4.1.2. In the event of a suspicious person in your area, immediately call the University Police Department at 5050 and give the location of the individual, what he/she is wearing, and brief physical description.
- 44.4.1.3. Do not physically confront the person.
- 44.4.1.4. Do not block the person's access to an exit.
- 44.4.1.5. Do not attempt to detain the person.
- 44.4.1.6. Do not let anyone into a locked building or office.
- 44.4.1.7. If you feel threatened, lock doors, and secure yourself in your space.

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44.5. Active Shooter Incident

The following procedures have been adopted by the faculty to provide guidelines in the event of an active shooter incident at the JSU College of Health Professions and Wellness.

44.5.1. Active Shooter Incident Procedures

- 44.5.1.1. If you witness any armed person(s) on campus, immediately contact University Police Department at 5050 and give the location of the individual, what he/she is wearing, and brief physical description.
- 44.5.1.2. If the person is outside the building, use the following procedures:
 - 44.5.1.2.1. Turn off lights and close and lock doors and windows.
 - 44.5.1.2.2. Do not open for the door for anyone if you do not recognize their voice.
 - 44.5.1.2.3. If you can do so safely, get everyone down on the floor and out of the line of fire.
 - 44.5.1.2.4. If you can safely do so, move to a core area of the building.
- 44.5.1.3. If the person is inside the building, use the following procedures:
 - 44.5.1.3.1. If it is possible to do so, flee the building to a safe location far away.
 - 44.5.1.3.2. Contact the University Police Department at 5050.
 - 44.5.1.3.3. If flight is impossible, lock all doors and secure yourself in your space.
 - 44.5.1.3.4. If you are in a classroom without door locks, use a door wedge and block the door with heavy objects such as a desk or filing cabinet.
 - 44.5.1.3.5. Instruct everyone to get on the floor or under a desk and remain silent.
 - 44.5.1.3.6. Remain in the room until told "All Clear" by University Police.
 - 44.5.1.3.7. Faculty should always have a readily available cell phone in class or lab.

45. EMERGENCY PREPAREDNESS AND PROCEDURES

All emergency operation policies can be found in the JSU student handbook located at: <http://www.jsu.edu/studentaffairs/handbook.html>

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46. JSU DEPARTMENT OF RESPIRATORY THERAPY CLINICAL ROTATION GUIDELINES

The JSU Department of Respiratory Therapy utilizes the skills, training, and guidance of area licensed respiratory therapists to oversee students enrolled in the program while completing their clinical rotation requirements. The therapists are considered clinical preceptors and provide an important part of the learning process for the students while overseeing the patient care provided while in the program.

The JSU Department of Respiratory Therapy Director of Clinical Education serves as the point-of-contact between the clinical agencies and the JSU Department of Respiratory Therapy. The Department Head / Program Director serves as an additional resource to help facilitate the relationships between the Department and our clinical partners.

The JSU Department of Respiratory Therapy Advisory Board is made up of representatives appointed by each clinical partner agency to represent that facility in the guidance of the program.

47. ROLE OF THE CLINICAL PRECEPTOR

- 47.1.** The clinical preceptor holds one of the most important roles in the education of future Respiratory Therapists. The clinical preceptor serves as a bridge from the classroom and lab to the patient.
- 47.2.** Each clinical preceptor plays several roles when working with students. The preceptor can be seen as **teacher**, who provides valuable knowledge and skills; a **role model**, who displays professional behavior that can be imitated; a **leader** who provides guidance; a **team member** who allows the student to take an active role in the patient's care; and an **evaluator** who gives constructive criticism to promote growth.

48. CRITERIA TO SERVE AS A CLINICAL PRECEPTOR

- 48.1.** The Commission on Accreditation for Respiratory Care (CoARC) defines a Clinical Preceptor as the following in the Accreditation Standards for Entry into Respiratory Care Professional Practice.
 - 48.1.1.** An individual, employed by the clinical site, who teaches, supervises, and evaluates students while completing an assigned standard patient load. The assigned student to clinical preceptor ratio cannot exceed 2:1.
- 48.2.** JSU also has the following requirements to serve as a Clinical Preceptor:
 - 48.2.1.** Minimal CRT credential
 - 48.2.2.** Active state license

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In special circumstances, when approved by the Director of Clinical Education (DCE) and the clinical site Respiratory Care Director or Supervisor, a student can precept with other healthcare providers to enhance their clinical knowledge. These healthcare providers may include, but is not limited to, Physicians, Certified Registered Nurse Anesthetists, Nurse Practitioners, Physician Assistants, Anesthesiology Assistants, Registered Nurses, Licensed Practical Nurses, Paramedics, Emergency Medical Technicians, and Laboratory Technicians. Although, students can precept with these healthcare providers, they cannot verify satisfactory completion of a student's required respiratory therapy competency.

49. RESPONSIBILITIES OF THE CLINICAL AFFILIATE AND THE CLINICAL PRECEPTOR

- 49.1. Orient students to the respiratory care department and their assigned unit.
- 49.2. Introduce students to staff members.
- 49.3. Provide instructions for the student in case they are separated from the preceptor.
- 49.4. Explain shift responsibilities and care needed for each patient.
- 49.5. Assess the student's learning needs.
- 49.6. Act as a clinical resource for the student by being familiar with current therapeutic techniques and practicing proper standards of care.
- 49.7. Serve as a role model and encourage students to participate in opportunities to enhance their learning.
- 49.8. Share knowledge and experiences.
- 49.9. Complete an affective evaluation of the student and verify satisfactory completion of the respiratory care competencies.
- 49.10. Contact the Director of Clinical Education regarding any concerning student behavior, attitude or skills that are unacceptable.

50. RESPONSIBILITIES OF THE STUDENT

- 50.1. Complete any specific hospital orientation, when applicable.
- 50.2. Arrive on time and prepared to begin shift.
- 50.3. Be respectful and professional at all times.
- 50.4. Accurately document clinical hours and daily logs.
- 50.5. Perform patient care under the supervision of a clinical preceptor.

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- 50.6. Monitor competency list for completion and verbalize clinical competencies needed with the clinical preceptor.
- 50.7. Notify the appropriate person when tardy or absent in a timely manner.
- 50.8. Adhere to the clinical guidelines, as stated in the JSU RT handbook, for appearance, picture badge, and behavior.
- 50.9. Conform to all the policies and procedures specific to each hospital.
- 50.10. Complete an evaluation of the clinical facility and preceptor.

51. RESPONSIBILITIES OF THE FACULTY/DIRECTOR OF CLINICAL EDUCATION

- 51.1. Establish clinical site contracts and student agreements.
- 51.2. Review learning objectives with students.
- 51.3. Ensure that students meet standards for immunizations, CPR, liability insurance, background checks, drug testing, HIPAA training, and individual hospital orientation.
- 51.4. Complete a clinical schedule to meet the guidelines of each hospital and the requirements of CoARC, the Respiratory Therapy Program, and the university.
- 51.5. Perform clinical site visits.
- 51.6. Facilitate communication between the clinical site, student, and the university.
- 51.7. Ensure that student clinical experience aligns with course objectives.
- 51.8. Initiate disciplinary action when issues arrive.

52. THE CLINICAL PRECEPTOR AND STUDENT INTERACTION

- 52.1. The student and clinical preceptor will work together as a team to perform optimal patient care to all patients. The preceptor shall progress towards allowing the student to provide more and more of the patient's care as the student becomes more confident and competent. As opportunities arise, the clinical preceptor will facilitate interaction between physicians and other health care professionals to enrich the student's clinical experience. The preceptor must review all physician orders prior to a student delivering care to a patient and must countersign all students' charting.
- 52.2. The clinical preceptor should try to develop a relationship with the students that is relaxed, trusting, mutually respectful, informal, collaborative, and supportive.

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52.3. The student should follow the direction of the clinical preceptor. The student must stay with the preceptor during the shift to ensure no experiences are missed. Students must learn to communicate with the clinical preceptor about patient care. The student shall follow all HIPAA rules with respect to patient confidentiality. The student should try to develop a relationship with the clinical preceptors that is relaxed, trusting, mutually respectful, informal, collaborative, and supportive.

53. CLINICAL REQUIREMENTS FROM COARC LISTED IN THE ACCREDITATION STANDARD FOR ENTRY INTO RESPIRATORY CARE PROFESSIONAL PRACTICE

53.1. Standard 4.04: Graduates must be competent to perform all diagnostic and therapeutic procedures of a Registered Respiratory Therapist entering the profession.

53.2. Standard 4.05: Graduates must be able to function proficiently within inter-professional teams and communicate effectively with diverse populations. The curriculum must prepare students to work with, and care for, a variety of populations including, but not limited to, individuals of various ages, abilities, and ethnicities.

53.3. Standard 4.06: Program graduates must exhibit adequate critical thinking skills and be competent in the application of problem-solving strategies in the patient care setting.

53.4. Standard 4.09: The program must be solely responsible for the selection and coordination of clinical sites as well as ensuring that the type, length, and variety of clinical experiences are sufficient for students to acquire all required competencies. Students must not be responsible for the selection of clinical sites; determining which competencies should be mastered at a given clinical site; or the acquisition of clinical instructors at these sites.

54. CLINICAL COMPETENCIES OF THE RESPIRATORY THERAPY PROGRAM

All competencies must be satisfactorily completed in a clinical setting before a student can graduate from the respiratory therapy program. The following lists separates each competency by the semester they are taught in lab.

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Clinical Competencies of the Respiratory Therapy Program
First Semester
Hand Hygiene
Isolation Procedures
Breath Sounds
Vital Signs
Pulse Oximetry
Oxygen Administration (NC, SM, NRB, etc)
Transporting w/Oxygen
Aerosol/Oxygen Therapy (Face Mask, Face Tent, Trach Collar, T-Piece)
MDI/DPI Therapy
Small Volume Nebulizer
Peak Flow Meter (optional)
Arterial Puncture
Second Semester
High Flow Nasal Cannula
Incentive Spirometry
Mucus Clearance Adjuncts (PEP, Flutter, Acapella)
Deep breathing and coughing exercises
Chest Physiotherapy, Chest Vest
IPV Therapy
Cough Assist (OPTION 1)
Intubation (optional)
Extubation
Endotracheal/Tracheal, In-Line and Nasotracheal Suctioning (adults)
Securing Artificial Airway (adults)
Tracheostomy & Stoma Care
Manual Ventilation (adults)
Cuff Pressure Measurement & Management
Noninvasive Ventilation Setup
Noninvasive Ventilation Management
Third Semester
Invasive Ventilation Setup (adults)
Invasive Routine Ventilator Check (adults)
CPAP (invasive)/Weaning/Spontaneous Breathing Trials (adults)

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In-line Medication Administration (adults)
Arterial Line Sampling (OPTION 2)
Fourth Semester
Capillary Blood Gas
Neo/Peds Invasive Ventilation Setup
Neo/Peds Invasive Routine Ventilator Check
Neo/Peds CPAP (invasive)/Weaning/Spontaneous Breathing Trials
Neo/Peds In-line Medication Administration
Neo/Peds Securing Artificial Airway
Neo/Peds Endotracheal/Tracheal, In-Line and Nasotracheal Suctioning
Neo/Peds Manual Ventilation
PFTs (Spirometry)

JSU RESPIRATORY THERAPY CLINICAL CONTRACT SITES

Clinical Affiliate	Address	City	State	Zip
Arlington Rehabilitation Center	1020 Tuscaloosa Avenue	Birmingham	AL	35211
Brookwood Baptist Medical Center	2010 Brookwood Medical Center Dr.	Birmingham	AL	35209
Children's Hospital of Alabama	1600 7th Avenue South	Birmingham	AL	35233
Citizens Baptist Medical Center	604 Stone Ave	Talladega	AL	35160
Coosa Valley Medical Center	315 W Hickory St	Sylacauga	AL	35150
Dekalb Regional Medical Center	200 Medical Center Dr SW	Fort Payne	AL	35968
East Alabama Medical Center	2000 Pepperell Pkwy	Opelika	AL	36801
Erlanger Health System	975 E 3rd Street	Chattanooga	TN	37403
Flowers Hospital	4370 W Main St	Dothan	AL	36305

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Floyd Medical Center	304 Turner McCall Blvd	Rome	GA	30165
Gadsden Regional Medical Center	1007 Goodyear Ave	Gadsden	AL	35903
Grandview Medical Center	3690 Grandview Pkwy	Vestavia Hills	AL	35243
Helen Keller Hospital	1300 S Montgomery Ave	Sheffield	AL	35660
Huntsville Hospital – Main	101 Sivley Rd SW	Huntsville	AL	35801
Huntsville Hospital – W&C	245 Governors Dr SE	Huntsville	AL	35802
Infirmiry Health	5 Mobile Infirmiry Circle	Mobile	AL	36607
Marshall Medical Center North	8000 AL-69	Guntersville	AL	35976
Marshall Medical Center South	2505 US Highway 431	Boaz	AL	35957
Medical West	995 9th Avenue SW	Bessemer	AL	35022
Noland Health – Birmingham	50 Medical Park East- 8th Floor	Birmingham	AL	35235
Princeton Baptist Medical Center	701 Princeton Ave SW	Birmingham	AL	35211
Redmond Regional Medical Center	501 Redmond Rd	Rome	GA	30165
RMC – Anniston	400 E 10th St	Anniston	AL	36207
RMC – Stringfellow	301 E 18th St	Anniston	AL	36207
Riverview Regional Medical Center	600 S 3rd St	Gadsden	AL	35903

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Russell Medical Center	3316 US- 280	Alexander City	AL	35101
Shelby Baptist Medical Center	1000 1st Street N	Alabaster	AL	35007
South Alabama – University Hospital	2451 University Hospital Drive	Mobile	AL	36617
St. Vincent’s Birmingham Hospital	810 St Vincent’s Dr	Birmingham	AL	35205
St. Vincent’s East	50 Medical Park Drive East	Birmingham	AL	35235
Tanner Medical Center-Carrollton	705 Dixie St	Carrollton	GA	30117
University of Alabama Hospital – UAB Main	1802 6th Ave S	Birmingham	AL	35233
University of Alabama Hospital – Highlands	1201 11th Avenue South	Birmingham	AL	35205
University of Alabama Hospital – W&I	1700 6th Ave S	Birmingham	AL	35234
Walker Baptist Medical Center	3400 U.S. 78	Jasper	AL	35501

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Attachment A

Professional Scholars Code Agreement

The students and faculty of JSU Department of Respiratory Therapy recognize that academic honesty and integrity are fundamental values of the profession and this University community as evidenced by the Professional Scholar's Code. Students and faculty at JSU Department of Respiratory Therapy commit to holding themselves and their peers to the high standard of honor required by the Professional Scholars Code. **Any individual who becomes aware of a violation of the Professional Scholars Code is bound by honor to take corrective action** (University of Florida, 2006).

We, the members of JSU Department of Respiratory Therapy, pledge to hold ourselves and our peers to the highest standards of honesty and integrity.

I have read and understand the Professional Scholar's Code. I hereby pledge that on all work submitted at JSU Department of Respiratory Therapy. I will neither give nor receive unauthorized aid in doing any or all assignments.

Student/Faculty Printed Name: _____

Student/Faculty Signature: _____

Date: _____

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Attachment B

Statement of Understanding Advanced-Level Exam Review Policy

I have read the policy in the Student Handbook, and I attended the mandatory in-person orientation to the JSU Department of Respiratory Therapy, where it was explained, and I had the opportunity to ask questions.

I understand that the use of Lindsey Jones University (LJU) and attendance at the Lindsey Jones Review Seminar is a required component of the course and/or other courses as applicable. LJU content mastery scores may impact course grades.

I understand that the practice exams given in fifth semester may count up to a significant portion of the course grade.

Student Printed Name: _____

Student Signature: _____

Date: _____

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Attachment C

Statement of Understanding Regarding Retention Policy

I fully understand that I may only repeat one Traditional, Entry-Into-Practice Respiratory Therapy course.

I have read the Admission Criteria, Retention, and Graduation Requirements for the Respiratory Therapy Program, and I understand the policy as it applies to dismissal from the Respiratory Therapy program.

Student Printed Name: _____

Student Signature: _____

Date: _____

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Attachment D

Evaluation of Dress Code Compliance

I am aware of the dress code requirements of JSU Department of Respiratory Therapy. Because of specific cultural or individual beliefs, I request that the Director of Clinical Education review the implications of my cultural beliefs regarding adherence to the dress code.

Specific details:

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Attachment E

College of Health Professions and Wellness

Affirmation and Acknowledgement of Risk

I, _____, affirm that I have read my program's Student Handbook and/or Practicum Manual and understand the nature of practicum involving regular engagement in on-site, in-person practicum activities in a health care setting.

_____ I acknowledge that there are certain risks inherent in my participation in this practicum, including, but not limited to risks arising from:

- Driving to and from the practicum site, or while in the course of practicum activities;
- Unpredictable or violent behavior of certain client populations served by the clinical site;
- Exposure to infectious diseases, including tuberculosis or other airborne pathogens (e.g., COVID-19), and hepatitis, HIV or other bloodborne pathogens.

_____ Accepting these risks, I hereby fully release and hold harmless Jacksonville State University (JSU), its Trustees, administrators, faculty, and staff, as well as any affiliate, or associated clinical agency of Jacksonville State University, for any and all claims, damages, costs, causes of action, actions of whatever kind or nature that may directly or indirectly arise out of my participation in clinical training. My release is intended by me and shall be considered a full, complete, and general release for any and all injuries or illnesses, and my hold harmless agreement shall be for all costs and expenses, including court costs, attorney's fees, and litigation expenses, for any claim, demand or suit brought against Jacksonville State University, its Trustees, administrators, faculty or staff, related to any alleged misconduct on my part.

_____ In the event of sickness or injury in any clinical setting to which I may be assigned, working, or attending educational instruction or activity as a Jacksonville State University student, I realize and agree that I am responsible for any and all costs related to the providing of medical care should I become injured, ill or otherwise seek or be required to seek medical diagnostic testing or treatment.

_____ I acknowledge that I have been advised that health (medical and hospitalization) and accident insurance is required by many of the clinical agencies utilized in the nursing program and that I must maintain current insurance and carry evidence of coverage at all times. Furthermore, I understand that I am responsible for all expenses associated with sickness or injury irrespective of insurance coverage or lack thereof.

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_____ I acknowledge that all risks cannot be prevented and could result in my bodily injury, up to and including death, and agree to assume those risks beyond the control of the University faculty and staff. I agree that it is my responsibility to understand and follow the clinical facility's policies and procedures designed to identify and control risks, including safety and security procedures and bloodborne pathogen policies, and to obtain any immunizations which the clinical facility may recommend, or the University require. I represent that I am otherwise capable, with or without accommodation, to participate in this practicum.

_____ I certify that I understand and will follow safe practices as set by our state and federal government, JSU Administration, the College of Health Professions and Wellness, and my clinical facility site.

_____ I acknowledge that participation in this activity is purely voluntary, no one is forcing me to participate, and I elect to participate in spite of and in full knowledge of the inherent risks.

_____ I have fully informed myself of the contents of this affirmation by reading it before I signed it. I am legally competent to sign this affirmation and acknowledgement of risk. I assume my own responsibility of physical fitness and capability to perform the activities involved this practicum/fieldwork/clinical experience. I understand if I have any question as to whether a physical or medical condition would prevent my full participation in this course, I should approach the JSU Department of Respiratory Therapy Department Head, Director of Clinical Education, the course instructor, or the University's Disability Resources who will discuss possible accommodations.

I, _____, **(Print Name)** have executed this affirmation and acknowledgement on this **DATE:** _____.

Student Signature

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Attachment C

Possible Exposure to Bloodborne Pathogens

Release of Liability

I _____ am aware that the Department of Respiratory Therapy requires participation in patient treatment and clinical procedures during the course of the program. I am also aware that as a result of my voluntary participation, I may be exposed to infectious diseases and am participating in the clinical work voluntarily.

I am aware that I am responsible for following the agency policies with regards to reporting and documentation of the exposure incident, regardless of my decision to seek medical attention. I understand that I am responsible for any future financial expenses resulting from my decision not to seek medical evaluation at this time, or any expenses resulting in the future should I elect to change my mind and seek care in the future.

Student Printed Name: _____

Student Signature: _____

Date: _____

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Attachment G

**JSU Department of Respiratory Therapy
HEALTH INSURANCE FORM**

Verification of Medical Insurance for _____ (Semester) _____ (Year)

Student's Name (print): _____

Insurance Company: _____

Name of Insured (name on card): _____

Contract #: _____

Group #: _____

Effective date: _____

I certify that the above information is accurate and true. I am fully covered with medical insurance that extends through the end of this semester. I understand if I purchase insurance with a monthly payment, I will provide JSU Department of Respiratory Therapy with a monthly receipt. If this insurance status changes before the end of the semester, I will notify my course coordinator and will purchase additional insurance immediately.

**I understand I cannot attend clinicals unless I am covered with medical insurance.
Failure to continue insurance until the end of the semester could result in dismissal from the program.**

Student Signature: _____

Date: _____

Verified By: _____

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Attachment H

Seasonal Influenza (flu) for Faculty and Students Declination Form

As a faculty member/nursing student of JSU Department of Respiratory Therapy, I have been advised of the benefits of receiving the flu vaccine.

I understand that are many contributing factors to not being able to receive the influenza vaccine, including but not limited to, the following:

- Concern about side effects
- Allergy to eggs or chicken
- Allergy to Thimerosal, Gentamycin, or Latex
- Possibility of contracting Guillain-Barre Syndrome within 6 weeks of receiving flu shot

I acknowledge that I am aware of the following facts:

- Influenza is a serious respiratory disease that kills an average of 26, 000 people and hospitalizes more than 200,000 people in the United States each year (CDC, 2011).
- Influenza vaccination is recommended for all health care workers to protect clients from influenza disease, its complications and death.
- If I contract influenza, will shed the virus for 24-48 hours before and up to seven (7) days after my symptoms appear. My shedding the virus can spread influenza disease to patients.
- The influenza virus can live on surfaces such as doorknobs and keyboards for 2-8 hours.
- The consequences of my refusing to be vaccinated could result in a life-threatening consequence to my health and the health of those with whom I have contact, including my family, co-workers and clients.
- I understand that I cannot contract influenza from the influenza vaccine.
- I understand that I may be required to wear a mask or any other preventative gear while attending clinical.
- I understand that I may not be able to perform clinicals in certain agencies that require flu shots.

Knowing these facts, I choose to decline the vaccination at this time.

Student Signature: _____

Date: _____

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Attachment I

HIPAA Statement of Understanding

I have read and understand the HIPAA privacy policy. I understand that I am legally responsible for the implementation of these rules in class and clinical areas. I also understand that JSU Department of Respiratory Therapy or the federal government may enforce disciplinary action for any infraction of these rules.

Student Printed Name: _____

Student Signature: _____

Date: _____

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Attachment J

Letter of Understanding Regarding Criminal Background Checks

I have read and understand JSU Department of Respiratory Therapy policies regarding the requirement for criminal background checks. I voluntarily give my consent to the obtaining of one or more necessary reports and the use thereof as outlined in the stated policy.

Student Printed Name (Include Middle Name)

Student Signature

Date

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Attachment K

**JSU Department of Respiratory Therapy
Consent to and Permission for Drug Screening for Students, Faculty or Clinical Faculty**

I have read, understand, and agree to abide by the impairment and substance abuse testing policy guidelines.

I understand that failure to submit to drug screening will result in dismissal from the nursing program or termination of employment with JSU Department of Respiratory Therapy.

I understand that a positive drug screen will result in dismissal from the program or termination of employment with JSU Department of Respiratory Therapy.

I understand that results of my drug screen may be released to clinical agencies.

I hereby release the designated testing agency and its director, Jacksonville State University, and faculty of JSU Department of Respiratory Therapy from any claim in connection with the drug screening guidelines.

I understand that in the event any legal action is taken as a result of the drug screening guidelines, confidentiality may no longer be maintained.

Student or Faculty Signature: _____

Print Name: _____

Date: _____

This form will be maintained by JSU Department of Respiratory Therapy and will be disclosed to appropriate clinical agencies upon their request

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Report of Reasonable Suspicion of Drug/Alcohol Use

To be completed by the student, faculty, or staff member observing suspected substance abuse.

1. Name of student, faculty, or clinical faculty suspected of substance abuse as defined in policy.

2. Reasons why you suspect the student, faculty, or clinical faculty of substance abuse. (Be as specific as possible, including times and dates when incidents occurred or unusual behavior was observed, the identity of any particular substance suspected of abuse, if known, and the names and whereabouts of those witnessing the incidents/behavior.) [Staple additional comments/observations to this document]

NOTE: Some types of information that should be documented if observed or known includes: speech (normal, incoherent, confused, change in speech, slurred, rambling, shouting, using profanity, school coordination (normal, swaying, staggering, lack of coordination, grasping for support); performance (unfair practices, unsatisfactory work); alertness (change in alertness, sleepy, confused); demeanor (change in personality, fighting, excited, combative, aggressive, violent, argumentative, indifferent, threatening, antagonistic); eyes (bloodshot, dilated); clothing (dirty, disheveled); odor of alcohol on breath); other observed actions or behaviors; unexplained absences or tardiness; whether student, faculty, or clinical faculty was found with drugs/alcohol or admitted to use of drugs/alcohol; whether other students, faculty, or staff have complained of the behavior and if so a list of witnesses to the behavior.

3. Based on the information above, it is my opinion that there is reasonable suspicion to believe that this student, faculty, or clinical faculty has engaged in substance abuse as defined in JSU Department of Respiratory Therapy Impairment and Substance Abuse Testing Policy:

Signature of Faculty/Staff Member Approving Drug Test:

Date: _____ **Time:** _____

Printed Name and Title of Faculty/Staff Member:

Printed Name and Signature of Student:

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To be completed by the student, faculty, or clinical faculty to be tested (optional):

Are you taking any medications, or is there any other information you believe might explain your behavior or assist the Medical Review Officer and/or prescribing physician interpreting your test?

The original of this form should be given to JSU Department of Respiratory Therapy Department Head for inclusion in the student, faculty, or clinical faculty's confidential records. It may be disclosed on a "need to know" basis to clinical agencies and/or testing facilities.

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Attachment L

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Attachment M

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Attachment N

Statement of Understanding Regarding Dropping or Failing of Respiratory Therapy Courses

In the event that I voluntarily choose to drop or fail any respiratory therapy course(s), I understand that I am not guaranteed resequencing or placement in the course(s) or the respiratory therapy program.

The failure of two courses in the respiratory therapy program will result in dismissal from the program.

I understand that respiratory therapy courses are only offered one semester per year. If I am unsuccessful in a course, I must pause my progression in the program to retake that course the next semester that it is offered.

In addition to retaking the course, I am also required to take a directed study course. The directed study course will serve as a review course of the material normally covered at that point in the program. The course will require me to take comprehensive exams to provide proof that I have retained the knowledge expected of a successful student at the same point in the program. I may also be required to repeat or revalidate laboratory or clinical competencies based on faculty deemed recommendations.

Once I have successfully retaken the course with a score of "C" or better, and I have completed the required directed study course with a score of "C" or better, I will be allowed to retrack in the respiratory therapy curriculum with the following cohort.

It is recommended that any student that is at risk for course failure should seek the advice of course faculty and adviser.

I also understand that it is my responsibility to drop a course. The College of Health Professions or Department of Respiratory Therapy faculty cannot register/add/drop courses for students.

Failure to submit a Request for Retracking, may result in a student not being considered for retracking in the Respiratory Therapy program.

Student Printed Name: _____

Student Signature: _____

Date: _____

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Attachment O

Statement of Understanding Regarding EPP

I have been advised and fully understand that I must take the ETS Proficiency Profile (EPP). The ETS Proficiency Profile assesses four core skill areas – critical thinking, reading, writing and mathematics – in a single test. I understand the ETS measures proficiency in these areas in the context of humanities, social sciences and natural sciences, and academic skills developed, as opposed to subject knowledge taught, in general education courses.

Failure to comply with these guidelines may prevent graduation as scheduled.

Student Printed Name: _____

Student Signature: _____

Date: _____

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Attachment P

Consent to Release Name to Health Care Agencies

If you would like to have your name and address released to health care agencies for the purpose of recruitment, please complete the form below and sign.

Permission to Release Name and Address

I hereby consent to the release of my name and address to health care agencies for the purpose of recruitment. If I wish to withdraw my name at any time, I may do so by written request.

(Please print)

Name: _____

Permanent Address:

Phone Number: _____

Expected Graduation Date: _____

Student Printed Name: _____

Student Signature: _____

Date: _____

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Attachment Q

**Authorization for Release of Information by Medical Provider
Hold Harmless Agreement Authorization for Use and Disclosure by JSU**

Phone # (256) 782-8496
Jacksonville, AL 36265-1602

Student's Name: _____

Other Name(s) Used: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Student ID #: _____ **SSN:** ____ - ____ - _____

Gender: _____ **Date of Birth:** ____ / ____ / _____

Telephone No.: (____) _____ - _____ **Email:** _____@_____

I hereby authorize and request release to JACKSONVILLE STATE UNIVERSITY JSU Department of Respiratory Therapy my medical records and information of whatever kind and nature relating, without limitation, to my healthcare history.

These protected records shall be released to: ATTN: Mrs. Andres Crawley, JSU Department of Respiratory Therapy, JACKSONVILLE STATE UNIVERSITY, 1701 PELHAM ROAD SOUTH, JACKSONVILLE, AL 36265.

The purpose of this request for release of records is to determine suitability for and compliance with requirements to participate in clinical experiences with patients in my capacity as a student in the JSU Department of Respiratory Therapy program.

I authorize these records to be delivered upon request and upon presentation of a copy of this Authorization for Release. I understand that I have a right to revoke this authorization in writing at any time, except to the extent information has already been released in reliance upon this authorization.

I AM AWARE THAT CLINICAL ENTITIES TO WHICH I AM ASSIGNED MAY REQUIRE, AMONG OTHER INFORMATION, PROOF OF COMPLIANCE WITH REQUIRED IMMUNIZATIONS AND EVIDENCE, AND EVIDENCE OF NEGATIVE TB TESTS AND / OR DRUG SCREENS. JSU DEPARTMENT OF RESPIRATORY THERAPY HAS MY PERMISSION TO RELEASE PROOF OF IMMUNIZATIONS AND EVIDENCE OF NEGATIVE DRUG SCREENS TO CLINICAL AGENCIES WHERE I PROVIDE PATIENT CARE.

I EXPRESSLY RELEASE AND HOLD HARMLESS ANY MEDICAL PROVIDER RESPONDING TO THIS REQUEST FOR MEDICAL RECORDS AND / OR INFORMATION, AND JACKSONVILLE STATE UNIVERSITY, THEIR RESPECTIVE AGENTS, SERVANTS, AND EMPLOYEES, FROM ANY LIABILITY, CLAIM, DEMAND, ACTION OR CAUSE OF ACTION RELATED TO, DIRECTLY OR INDIRECTLY, FULFILLING THIS REQUEST AS SUBMITTED.

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THIS RELEASE IS BEING EXECUTED VOLUNTARILY WITH KNOWLEDGE OF MY RIGHT NOT TO DO SO; HOWEVER, I UNDERSTAND THAT IF I REFUSE, I MAY BE UNABLE TO COMPLETE CLINICAL REQUIREMENTS FOR TRAINING AND, THEREFORE, BE UNABLE TO PARTICIPATE IN OR COMPLETE THE JSU DEPARTMENT OF RESPIRATORY THERAPY PROGRAM.

Dated: _____

Student's Signature: _____

Witness Signature: _____

Print Name: _____

Address: _____

City: _____

State: _____

Zip: _____

FOR JSU DEPARTMENT OF RESPIRATORY THERAPY USE ONLY

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Attachment R

Standards for Professional Behavior Agreement

The students and faculty/staff of JSU Department of Respiratory Therapy recognize that professionalism is a fundamental value of the nursing profession and this University community as evidenced by the Standards for Professional Behavior. Students and faculty/staff at JSU Department of Respiratory Therapy commit to holding themselves and their peers to the high standard of honor required by the Standards for Professional Behavior. **Any individual who becomes aware of a violation of the Standards for Professional Behavior is bound by honor to take corrective action** (University of Florida, 2006).

We, the members of JSU Department of Respiratory Therapy, pledge to hold ourselves and our peers to the highest standards of honesty and integrity.

I have read and understand the Standards for Professional Behavior. I hereby pledge that I will maintain the highest level of professionalism in all settings of which I am representing JSU Department of Respiratory Therapy.

Student Printed Name: _____

Student Signature: _____

Date: _____

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Attachment S

Traditional, Entry-Into-Practice Respiratory Therapy Students Estimated Expenses 2022-2023

Textbooks

Semester 1 \$950.00
Semester 2 \$250.00
Semester 3 \$250.00
Semester 4 \$250.00
Semester 5 \$250.00
\$1950.00

(Estimated costs based upon current new book pricing. Prices may vary and are subject to change. Many books bought in the early semesters will continue to be used throughout the program)

Special Traditional, Entry-Into-Practice Respiratory Therapy Program Costs (NON-REFUNDABLE).

Professional Course Fee (NON-REFUNDABLE)

Semester 1 \$200.00
Semester 2 \$200.00
Semester 3 \$200.00
Semester 4 \$200.00
Semester 5 \$200.00
\$1,000.00

Health Insurance (Required for participation in clinical practicum experiences)

You MUST have active insurance coverage that spans the entire semester enrolled. Each semester proof of health insurance is required. It is the student's responsibility to choose health insurance. *JSU does NOT offer health insurance.*

Initial Health Appraisal (JSU Student Health Center)

Each student is required to have a physical and drug screen at the JSU Student Health Center. Student JSU ID card and health insurance card is required at appointment. Immunizations including two-step TB test, Hep B, MMR, etc., can be done at other agencies, however proof should be provided to the Student Health Center at appointment. Otherwise, two-step TB test and immunizations will be administered during appointment.

Miscellaneous Fees the program:

\$175 for Miscellaneous Equipment (Student Uniforms, Lab coat, stethoscope, shoes, etc)

Other Miscellaneous JSU Fees

Tuition Costs and other university fees information can be found at:

<http://www.jsu.edu/bursar/fees/index.html>

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NOTE: All listed costs are estimates only and are always subject to change

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Attachment T

*****Intentionally left blank at this time***

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Attachment U

STUDENT CLINICAL ROTATION CONTRACT

Student Name: _____

Student Number: _____

I, _____, understand that the primary objective of Jacksonville State University – Respiratory Therapy program is to prepare program graduates to perform competently, safely, and professionally. In order to achieve this objective, it is necessary that each student complete experience in a clinical agency. Such experience is educational in nature and is designed to develop each student’s professional skills in order that each student may demonstrate specific entry-level competencies upon program completion. Program objectives and entry-level competencies are stated in the college catalog.

My signature on this form is to certify that I understand and agree that:

1. Clinical assignments are made based on the availability of clinical sites and the needs of students. Clinical site attendance may require an extended drive. All expenses incurred while enrolled in clinical (gasoline, parking, etc.) are the students’ responsibility.
2. Clinical contracts between the clinical facility and the college prohibit students from filing suit against the clinical facility.
3. Although Jacksonville State University does not require students to obtain the COVID-19 vaccine, many of our clinical sites do require students to have this vaccine. Clinicals are a requirement in the Respiratory Therapy program.
4. I am a student in the Respiratory Therapy program at Jacksonville State University. My enrollment in a clinical course requires that I be present at all assigned clinical facilities. I am aware that during the time spent at the clinical agency is designed to achieve course objectives. I will NOT be considered an employee of the clinical facility or of Jacksonville State University.
5. As a student, I do not expect and will not receive compensation for time spent achieving the objectives of my clinical course from either the college or the clinical facility. **If I am found guilty of working as a paid, student employee while completing required clinical hours, I can be dismissed from the program and become ineligible to reapply in the future.**
6. I have NOT been promised and am NOT expecting to be offered a job at the clinical agency as a result of my participation in the clinical course.

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7. Failure to sign and submit this agreement to the program director will prohibit the college's ability to place me at a clinical facility and will therefore be grounds for dismissal from the program.

8. In the event of sickness or injury in the clinical or laboratory setting, I realize that I am responsible for all costs related to the provision of medical care. I have been advised that hospital/accident insurance is required by many of the clinical agencies utilized in the program and that I should carry evidence of current insurance coverage at all times. Furthermore, I understand that I am responsible for all expenses associated with sickness/injury irrespective of insurance coverage or lack thereof.

Student Printed Name: _____

Student Signature: _____

Date: _____

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Attachment V

Acknowledgment of Student Handbook/Policy Manual

Student Name: _____

Student Number: _____

I have received and thoroughly read the student handbook for the Department of Respiratory Therapy Program of Jacksonville State University. I understand the policies and requirements contained therein and the responsibilities to be undertaken.

I understand that, with proper notice, the material in this handbook is subject to change or revision, at the Programs or university's discretion. If such change takes place, I will be made aware of them, in writing.

I understand failure to comply with the established policies and guidelines may result in probation or possibly dismissal from the Respiratory Therapy Program and subject to university disciplinary action.

I agree to comply with these policies and guidelines.

Student Printed Name: _____

Student Signature: _____

Date: _____