

UNIVERSITY OF KANSAS MEDICAL CENTER
DEPARTMENT OF RESPIRATORY CARE EDUCATION
STUDENT POLICY MANUAL

Revised August 2011

**DEPARTMENT OF RESPIRATORY CARE EDUCATION
STUDENT POLICY MANUAL**

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DEPARTMENT OF RESPIRATORY CARE EDUCATION

FACULTY

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HELPFUL INFORMATION

Department Address

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University of Kansas Medical Center
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Kansas City, Kansas 66160

Main Phone Number: 913-588-4630
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Other KU Hospital Numbers:

Resp Care Managers 913-588-1576 Page 913-917-7470
KU Hospital Resp Care Educator 913-588-1580 Page 913-917-7410
KU Hospital Operator 913-588-5000
Weather & Emergencies 913-588-4636
913-588-info

Other clinical affiliate contact information is found online in Angel on the Respiratory Care Group pages under *Affiliate Information*

NOTICES TO STUDENTS:

- 1) All non-clinical items apply to both online and onsite students, but certain subjects may generally relate to onsite student administration.
- 2) All students are required to verify that they read this policy manual using the verification method specified.
- 3) In addition to Program policies, students are subject to the provisions in the School of Health Professions and KUMC Student Policy manuals.

SECTION I - STUDENT MAILBOXES, LOCKERS, E-MAIL**A. Email (Important for on-campus and on-line students)**

Notices, journal articles, and other important program or medical center information are distributed via e-mail. Each student is responsible for checking his/her GroupWise email (kumc.edu) account on a frequent basis. The student is responsible for the information distributed by email.

Email information will ONLY be distributed by email through the Medical Center's GroupWise email system (includes Webmail). The program will not distribute email to personal accounts such as yahoo, aol, hot mail, or g-mail.

B. Lockers

Lockers for books and other supplies are located in Orr-Major. Assignments are made by the Director of Clinical Education at the beginning of the fall semester. Because of the limited number of lockers available, it may be necessary to share. A list of the combinations is kept by the Clinical Coordinator and may be given to facilities maintenance or security if required. A student who forgets his/her combination must contact the DCE to obtain the combination.

C. Mailboxes

The program does not maintain or assign physical mailboxes. Communications, course work, and exam results are available on line.

SECTION II - Grade Requirements

A. Passing grades in the Respiratory Care Program are "A," "B," and "C." Generally a C is 70% or greater. Assigning a minimum passing score in any individual course is the discretion of the course instructor.

Exceptions: The minimum passing score on the 2 clinical exams and the comprehensive oral exam is 75% (See Section 10).

B. Grades of "D" and "F" are not considered passing.

C. An "I" (incomplete) may be given for extenuating circumstances. These grades must be made up within the time frame agreed upon between the student and faculty and in accordance with the University of Kansas rules.

D. A student failing a course with a grade of "D" or "F" will not be permitted to advance in the program until the courses have been repeated and passed with a "C" or higher.

E. A student who received a "D" or "F" in a Respiratory Care course at the Medical Center may petition the program for permission to repeat the course. If the student fails a course the second time, they will be dismissed from the program. A student who receives "D" or "F" grades in two or more courses in a semester may be dismissed from the program.

F. Successful completion of course works fulfills the prerequisites for advancing to the next level of course in the respiratory care curriculum sequence.

SECTION III – Evaluation of Student Performance

A. During a Semester

Students are responsible for keeping track of their grades over the semester and for recognizing when their anticipated course grade is below course and Departmental standards, or places them in academic jeopardy. Students are expected to seek assistance from the course instructor at such times, or sooner if they feel they need support from faculty to be successful. Course instructors provide students with information about performance standards in the course syllabus; they are not expected to provide additional warnings concerning a particular student's prospects for an unacceptable course grade.

B. End of Semester

The department will notify the student in writing if semester grades result in a change of status in the program (i.e. good standing, probationary status, dismissed). To access course grades go to Enroll & Pay (<https://sa.ku.edu>).

Faculty reserves the right to require remediation in any course in which the student is determined to be didactically, or clinically, deficient.

SECTION IV – Progress, Interruption, Discontinuance

1. Effective Fall, 2010 all students must complete the program in 4 years.
2. A student who withdraws during a semester, or who does not continue in the program for any reason, that results in a delay greater than one semester, before re-entry may be required to:
 - A) Pass a written and a practical examination to reaffirm standing within the program.

Or

- B) Complete a guided program of review or remediation determined by the faculty on an individual basis.

And

- C) Complete the reactivation process with the Student Affairs Office and obtain permission of the Program Director.

The program faculty reserves the right to deny readmission if the student is determined to be didactically, or clinically, deficient. Dismissal from the program may result if the student fails to complete or pass the required course remediation and/or competency evaluation.

SECTION V - CLASSROOM/LABORATORY POLICIES

A. Attendance Policy

Student attendance is required at all lectures, labs, case presentations, and rounds as assigned. The student's education is considered a priority. The attendance policy specific to each course is determined by the individual instructor.

A student who will miss an examination because of an emergency or bereavement absence must follow the guidelines specified in the course syllabus. Written documentation verifying the absence may be required before scheduling a makeup examination. Unless specifically arranged, the faculty is not obligated to arrange for examinations before the posted date of the exam.

*Students will not be allowed to make up an examination to accommodate leaving early before a holiday, Fall, Spring, or end of semester break. **Schedule vacations during semester breaks only.***

B. Tardiness Policy

Students are expected to be on time for all classes, labs assignments. The tardiness policy for each course is determined by the instructor. No time extension will be given to a student who arrives late for an examination. Examination times will start and stop as scheduled.

C. Dress Code

The student should be neat and clean. (Specific instructions for clinical sites are separate from the classroom dress code and provided under clinical information.)

The student must wear his/her identification badge per KUMC policy.

D. Classroom courtesy

Students are expected to display proper classroom courtesy and respect for fellow students and instructors. Cell phone or other communication devices should be set to silent mode, or turned off, and not disrupt classroom activities. This policy also applies to the use of laptop computers or other web enabled devices, 'surfing' the internet, or other activities. Enforcement or modification of this policy is the sole discretion of the course instructor.

E. Inclement Weather

Classes will proceed as scheduled regardless of weather. However, in the event of an extremely hazardous situation, the student must inform the instructor concerning class attendance.

To access information regarding cancelation of classes, or dismissal of non-emergency personnel and students, by the medical center due to extreme weather conditions, call 913-588-4636 (913-588-info), announcements will be available over local broadcast outlet, by broadcast email from the Vice Chancellor's office.

Emergency weather information requiring immediate action is broadcasted campus wide over the Alertus emergency alert system.

F. Assignments/Tests

All assignments, tests, projects, and papers must be completed by the date specified by the instructor. Failure to complete an assignment on time may result in a grade reduction. The amount of the reduction is determined by the course instructor.

Tests are administered only on the day and time announced. No exams are given before the scheduled time. Exams will not be given after the scheduled time except for those delayed for reasons of hazardous weather or documented emergency absence. Refer to each individual course syllabus for details.

G. Library

Dykes Library allows student access to a wide variety of clinical and non-clinical resources, periodicals, books, supplemental texts, and a host of electronic resources. Students are encouraged to avail themselves to these resources in completing individual course assignments. A limited amount of material may be available from the department or individual instructor. If a student

does not return material loaned out from the department, or an instructor, by the due date for grades at the end of a semester, an “I” (incomplete) may be sent to the Office of Records and Registration. Compensation is required for non-returned or lost books.

H. Copier Use

Copier use is limited to department personnel. Personal materials or class notes cannot be copied on the department copy machine. PowerPoint slides and outlines are available for most courses online. Copying slides or outlines for a course is at the sole discretion of the instructor.

Written protocols for case conference presentations will be copied by the department provided it is available to the faculty members no later than 3:00 p.m. on the day before the presentation.

SECTION VI - Clinical Information

A. Clinical Schedules

General scheduling information for RESP 325, 350, 355, 375, and 425 will be available in advance of the rotations. Students are expected to follow schedules as assigned. Should an extenuating circumstance, such as inability of a clinical affiliates to accommodate students, a schedule adjustment may be necessary. The decision to adjust a schedule will be made by the Program Director or Director of Clinical Education. Students will be given as much advanced notice as possible.

General information relevant to each clinical course is described below.

RESP 325 (Fall semester)

Clinical rotations begin in October and continue until STOP day. Students will be rotated between 8 hour day, evening, and possibly night rotations, two days a week. Clinical times are coordinated with the RESP 303 lab.

RESP 350 and 355 (Spring semester)

Resp 350 is a continuation of 325 in the acute care areas of the hospital. A non-ICU clinical exam is administered during this half of the semester. Successful completion of this course includes passing a clinical proficiency examination. RESP 355 is the start of the student’s rotations in the ICUs. For both courses students are scheduled for two shifts per week, which is coordinated with the RESP 340 lab. Day, evening, and night shifts, 8 or 12 hours may be assigned.

RESP 375 (Summer semester)

Students are assigned 3 shifts per week, including day, evening, and night shifts. Shifts may be for an 8 or 12 hour period. Successful completion of this course includes passing a clinical proficiency, oral, and written examination.

RESP 425 (Fall semester, senior year)

Students are assigned to two 8 hour shifts per week including days, evenings, and nights. Students must pass all components of each course to progress to the clinical practicum.

RESP 670 (Senior Specialty Practicum)

Practicum schedules are determined by the faculty advisor for the specific practicum. RESP 670 includes an ACLS preparatory module and the ACLS examination.

The following policies apply to RESP 325, 350,355,375,425.

B. Schedule Changes / Schedule Requests

Bring special scheduling concerns or requests to the Director of Clinical Education (DCE) before the beginning of the clinical rotation. Requests for any schedule change, shift change or date(s) change, must be approved in advance by the DCE. Schedule changes may be requested in the event of an unforeseen circumstance or critical event.

When a schedule change is requested by a student that requires trading shift for shift, both students must provide written acknowledgement they understand that they are responsible for the other student's shift and vice versa.

One discretionary day (see policy below) is given each semester, and will be used before accommodating a schedule change request.

C. Holiday/Semester Schedules

Clinical schedules follow the official semester and holiday timetable designated by the University of Kansas. Students must schedule vacations during official breaks only.

D. Clinical Attendance Policy

The following policies apply to RESP 325, 350,355,375,425. Senior clinical practicum policies are set by the designated instructor.

Attendance is mandatory for the satisfactory completion of clinical rotations.

Students arrive in clinic 10 to 15 minutes before the posted schedule time. Students remain at the affiliate (clinical site) the entire 8 hour shift. ***Students are not permitted to leave an affiliate for meals or breaks.***

Clinical rotations start and end as scheduled. ***Students will not be rescheduled to a different day or shift to accommodate leaving early before or late after a holiday, semester break, or beginning or end of a semester.*** Schedule vacations during breaks only. *Exceptions will not be made* for students who desire to leave early for holidays, for extending holiday time, or late arrival back to classes. Exceptions will not be made for reasons of international travel.

Special circumstances may arise that make an affiliate unavailable to students. The DCE will notify the student of any changes in the schedule provided the affiliate notifies the program in advance. The DCE will make alternate arrangement for the student; clinic is not automatically cancelled if the affiliate is not available.

Emergency circumstances may require early dismissal from clinic, permission must be granted by the DCE or Department Chair, unless officially designated by the KUMC administration.

E. Discretionary Days

Students are allowed one discretionary day off the KU Med clinic during RESP 325, 350/355, 375, and 425 (one day per semester). The discretionary day policy does not apply to the practicum.

The student must notify the DCE (Department Chair or designee, if DCE is not available) at least 24 hours in advance of the designated shift. In addition, follow up by email is REQUIRED (not an email page).

Discretionary days do not apply to night shift rotations, days scheduled during a specialty affiliate rotations (e.g. hyperbarics, homecare, ECG, sleep lab, etc), or if clinical makeup time is pending.

F. Emergency, Illness, or Bereavement Absence Policy

Follow the 2 Step procedure below in the event of an emergency, illness, or bereavement related absence from a clinic rotation.

Step 1

Page or contact the DCE *before* the beginning of the assigned shift at 913-917-0073.

TO SEND A PAGER TEXT MESSAGE IN CASE OF ABSENCE FROM CLINICALS send an email to 9139170073@alphapage.myairmail.com. Remember to include your name and the affiliate where you are scheduled.

Step 2

Email message (may use the c.c. function while performing step 1) the DCE ([mzczervin@kumc.edu](mailto:mczervin@kumc.edu)), or leave a telephone voice mail message at 913-588-4632.

It is important to follow up with the DCE if there is no response to an email, phone message, or page.

FAILURE TO FOLLOW THIS ATTENDANCE AND NOTIFICATION POLICY WILL RESULT IN THE FOLLOWING ACTIONS:

1. First occurrence, written letter of warning.
2. Second occurrence during program tenure, probation.
3. Third occurrence during program tenure, termination from the program.

Important Notice: Student health, safety, and emergency concerns must be the priority activity. An emergency situation such as an accident, injury, or emergency illness resulting in an inability to contact the program in a timely manner will be evaluated on an individual basis.

An absence resulting from a "no call, no show" situation which does not fit the above criteria may result in immediate probation or termination from the program, no written warning will be applied.

Documentation of illness or other emergency may be required if more than 2 scheduled clinical shifts are missed within a one-week period, or if, at the discretion of the DCE, frequent absenteeism persists.

A student demonstrating excessive absenteeism with in a clinical course will not be allowed to progress to the next level course. Emergency circumstances affecting a student's ability to complete the rotation, such as a serious or chronic illness, will be considered on an individual basis.

G. Clinical Make-up Requirements

Make-up is required for all missed clinical time and will be scheduled for the same shift as the missed shift.

Stop Day is designated as a clinical make up day. Other times must be arranged and approved in advance by the DCE to make arrangements with the affiliate and for the student to receive credit. All makeup rotations must be completed before the end of the semester. A grade reduction may result if makeup rotations are not completed by the last day of the semester.

Absences due to bereavement, a death in the immediate family are excused and do not require makeup if 2 or less clinic days in one week are affected, or 3 days in one week during RESP 375. Immediate family is defined as parents, siblings, or other relative domiciled in the immediate family home, and grandparents. For other relatives (aunts, uncles, cousins, etc.) or friends, contact the DCE prior to being absent from clinic to determine makeup requirements.

Make-up time does not apply to the discretionary day previously described in this manual.

H. Time cards

Since KUMC clinical attendance records are maintained from time cards. The student must time IN and OUT each shift. *This is an absolute requirement, there are no exceptions.*

Time must be verified by the shift supervisor or designee at the beginning and end of each shift. Only the affiliate supervisor or designee may sign the time cards, not the clinical preceptor. Each student is responsible for his/her own card and may not time in or out for another student.

Credit will not be given for clinical time that is not documented and may result in a grade reduction or failing grade for the course.

I. Clinical Shifts and Dismissal times

Day shift hours are generally 7:00 a.m. to 3:30 p.m., unless specified otherwise by a clinical affiliate. Evening shift hours are 3:00 p.m. to 11:30 p.m., unless specified otherwise by a clinical affiliate. Some non-hospital and clinic rotations operate during usual business hours. These times are defined by the affiliate and accessible on the affiliate information site of the department's web pages.

Students assigned to evening shift may be dismissed at 2200 on an evening preceding an 0800 or 0830 course the next day. All other shifts, including Friday evenings, are 8-hour shifts. Clinical rotations end the last official day of each semester.

Students are expected to remain on clinic in the event of a hospital or clinical emergency (disaster alert, severe weather alert, etc.).

Students may be dismissed 15 minutes before a scheduled class, case conference, or rounds to allow time for travel to the classroom or unit when they are scheduled at KU Medical Center. Students at off-campus affiliates will be exempt from class, case conference, or rounds, but must remain on the clinic for the duration of their scheduled shift.

J. Tardiness

A student is considered tardy if more than 5 minutes late in reporting for clinical assignments at all affiliates.

The student should notify the Director of Clinical Education if emergency circumstances will delay arrival before the scheduled starting time.

Persistent or chronic tardiness may result in disciplinary or remedial action at the discretion of the Program Director, or Director of Clinical Education.

K. Dress Code

Students are expected to conform to the dress code requirements of the clinical affiliate while on rotations. Both professional appearance and safety are important considerations. Inappropriately attired students will be sent home by the faculty or by the responsible clinical supervisor. Make-up time must be scheduled for any time lost.

Clinical dress code includes:

I.D. tag

Scrubs

White lab jacket (*optional* but handy for extra pockets).

Safety glasses or goggles

Eyeglasses do not provide adequate protection.

Long hair must be tied back

Pocket calculator

Jewelry

- Minimal amount

- No dangling ear rings

- No jewelry in external body piercings except up to 2 earrings in each ear

- Rings and watches may need to be pinned inside a pocket in Neonatal Units

Socks (or hose) must be worn.

Shoes

- Closed toe leather walking shoes (nursing type of leather or athletic shoes)

- Shoes must be clean and/or polished.

- 'Croc' type shoes, clogs, open-toed shoes, or sandals cannot be worn.**

Shirts or tops must cover the stomach at all times.

- Short sleeve T-shirts may be worn underneath scrubs only.

- Long sleeve shirts may not be worn underneath scrubs

Acrylic or other nail overlays (artificial nails) are not permitted, no exceptions.

Questions regarding any other dress code items will be resolved to the satisfaction of the *clinical affiliate*.

Case conference dress code:

Students presenting at case conference are required to dress professionally. A tie or dress is not required, but clothes need to be neat and clean. No shorts, tee-shirts, or flip flops may be worn. Students on clinical rotations may wear scrubs.

L. Inclement Weather

Clinical rotations proceed as scheduled regardless of weather. However, in the event of an extremely hazardous situation, the student must inform the DCE of the situation if class is not officially cancelled by KUMC administration.

In the event that KUMC administration dismisses non-essential personnel, or cancels classes, due to extreme weather or other emergency conditions, clinical rotations are cancelled or dismissed early and not subject to make-up time.

To access information regarding cancellation of classes, or dismissal of non-emergency personnel and students, by the medical center due to extreme weather conditions, call 913-588-4636 (913-588-info), announcements will be available over local broadcast outlet, by broadcast email from the Vice Chancellor's office.

Emergency weather information requiring immediate action is broadcasted campus wide over the Alertus emergency alert system.

Prolonged periods of clinical time lost due to adverse weather may be rescheduled at the end of the course.

M. Injuries or Exposures

Students will be instructed on the appropriate KUMC Infection Control procedures by the infection control nurse before the RESP 325 clinical rotation.

In case of an accident or potential exposure to biohazard or other substance, notify the clinical shift manager and report to Student Health in the Student Center Building, or designated alternative department, such as Emergency Room, during non-business hours.

Any student who has a concern about an exposure is encouraged to contact Student Health for information and appropriate testing, 913-588-1941. The Program must be notified of an accident or exposure as soon as prudently possible, but attend to treatment and testing first. .

(Manual continues on next page.)

N. Important Clinical Policies

DO NOT read clinically unrelated periodicals, newspapers, or 'web surf' during clinical assignments. Take the initiative during periods of inactivity. Use the time to gain clinical proficiency or observe respiratory care or other clinically related procedures.

Cell phones or other electronic devices are STRICTLY prohibited on clinic. Stow them in your purse, locker, or other safe location; which should be interpreted as leave them at home.

Check in and out with the shift coordinator, and give a patient report to the designated preceptor or team leader before leaving. *This is not optional.*

Clinical activities performed as a student employee of any respiratory department will not be substituted for clinical time as part of the Program curriculum.

SECTION VII - Standardized Assessments / Examinations / Certifications

A. Examinations and Assessments

Student must complete the following examinations and certifications before exiting program:

1. Two clinical exams, including cognitive and psychomotor elements with a minimum passing score of 75%. The non-ICU exam is administered during RESP 350, the ICU exam is administered during RESP 375.
2. A comprehensive oral examination with a minimum passing score of 75% administered during RESP 375.
3. Successful completion of an ACLS course. Neonatal Practicum students may be required to complete an NRP course. (Depends on availability and a separate fee apply.)
4. Completion of the NBRC secure web Written RRT Self Assessment Examination. (A separate fee applies.)
5. Completion of the the NBRC secure web Clinical Simulation Self Assessment Examination. (A separate fees apply.)
- 6. Passing completion of the NBRC Entry Level CRT Examination.** (Separate fees apply.)

A student who has earned the CRT credential and has not passed the RRT written exam before entering the program is required to take the Written RRT Self Assessment Examination before graduating from the program.

A student who has earned the RRT credential prior to program entry will be exempt from the entry level review course and all NBRC examination requirements.

B. Certifications

ACLS certification is required for all on-site students prior to graduation. See RESP 670.

Online student may substitute NRP or PALS for ACLS depending on the selected clinical specialty courses.

C. Surveys

On campus students will complete 2 student surveys in Data Arc information system. Completion of the surveys will be included in the course grades for RESP 355 and RESP 670.

Completion of the survey is anonymous, however completing the survey may be required as an item graded in clinical courses and failure to complete the survey may result in final grades being withheld pending survey completion.

Following graduation a graduate survey in Data Arc must be completed as part of the program reaccreditation process. A survey will also be sent to each graduates' employer.

SECTION VIII - Change Of Address

Each student is responsible for reporting a change of address or phone number to the program. The program is legally required to keep such information confidential. Entering this information into the DataArc Clinical Education Database is the most convenient method to accomplish this.

Changes of address must also be reported to the Office of Records and Registration. The Financial Aid Department should also be kept advised of current addresses of students who are receiving loans. This is the responsibility of the student; the department will not be able to keep all parties up to date on address changes.

SECTION IX –Registering With the Kansas Board of Healing Arts

Students are not required to possess a permit from the Kansas Board of Healing Arts.

Students are eligible to apply for a Kansas Board of Healing Arts student permit and must possess a permit to work in a patient care setting before they are hired as a student employee. This activity is not part of the clinical curriculum. Information regarding the process will be provided by the employer. Applications are available from the Kansas Board of Healing Arts.

SECTION X - Drug Policy

The Department of Respiratory Care Education subscribes to the University of Kansas Medical Center's policy on alcohol and drug use. Violations of this policy may result in disciplinary proceedings as prescribed in the Medical Center policy, as well as possible termination from the program. Any violation resulting in a judicial conviction will have an adverse affect on a student's ability to acquire a license to practice Respiratory Care in Kansas, or any other state requiring a license.

SECTION XI - Academic Misconduct

Academic misconduct includes, but not limited to; giving or receiving unauthorized aid on examinations, assignments, preparation of reports, essays, presentations, projects, research and other assignments or research by misrepresenting the source of course work, plagiarism, or other forms of cheating on closed book exams. Academic misconduct also includes misrepresentation of clinical education documentation, documentation of clinical procedures or activity (charting), and breaching patient confidentiality, or any violation of the practices outlined by government HIPAA guidelines.

Consequences related to academic misconduct include a failing grade, written reprimand, probation, or termination from the program.

Policies related to academic misconduct and grieving a disciplinary action are described in the School of Health Professions Student Handbook.

SECTION XII - Advanced Standing Requirements And Portfolio Evaluation

1. Advanced Standing for Junior Students

Challenging a clinical course is available to a junior student who:

a. Transfers from an accredited respiratory care program as a junior. The individual may challenge RESP 325, RESP 350, and RESP 355.

OR

b. Has graduated from an accredited technician program and holds the CRT credential. Such an individual is eligible to challenge RESP 325, RESP 350, RESP 355.

The challenge process will consist of a written examination. A score of 70% or greater must be achieved to continue the challenge mechanism. Successful completion of the written examination will be followed by performance evaluation of clinical skills appropriate to the level of the challenge course. The practical exam will take place in the teaching lab. Completion of the written examination and demonstration of adequate clinical knowledge and skills will satisfy the course requirement for the specified course.

A fee is assessed for the challenge process. This fee is set by the department and approved by the University. The University also charges a posting fee for credits that are transferred to the Respiratory Care Department. Specific details of current fees can be obtained from the Registrar's office. No credits are posted until posting fees have been paid.

A student who fails the challenge process will be required to formally enroll and complete the required courses.

Qualified students interested in the challenge of clinical courses should contact the Director of Clinical Education, or Department Chair, prior to the beginning of the semester. Testing must be completed before the date of enrollment.

Didactic courses may not be challenged. Credit is posted for courses approved for transfer.

There are no clinical courses for online degree completion students to challenge.

2. Online Student Portfolio Evaluation

Community college respiratory care courses may be converted to junior level credit hours through a portfolio evaluation process. This may be necessary for the student to fulfill the junior/senior credit hour requirements for graduation. Community college respiratory care hours are evaluated by the faculty who complete the portfolio and forward the recommendations to the Registrar's Office. No action is required by the student to initiate this process.

Effective Fall 2009, a fee is assessed for posting credits. Specific details of current fees can be obtained from the Registrar's office. No credits are posted until posting fees have been paid.

3. Onsite Degree Completion Student Competency Evaluation

Students transferring into the program after completing an advanced practitioner associate degree program must complete an oral and laboratory competency exam with a passing score of 75%. This exam will cover ventilators commonly used by clinical affiliates and basic critical care topics. The exam will be completed prior to enrolling in the onsite RESP 425 clinical course in the Fall semester. There is no fee or credit for this exam.

SECTION XIII – Technical Standards

A. Successful completion of the baccalaureate degree in Respiratory Care implies that the graduate will have acquired the knowledge and skills necessary to safely and competently provide respiratory care to a patient. The respiratory therapist should be able to deliver urgent and non-urgent care to patients of all ages and in all healthcare settings. Therefore, all applicants and matriculating students must meet the following expectations. (These standards were given to each student with their program acceptance letter.)

B. Technical Standards for Admission to the Department of Respiratory Care Education

I. Visual – Auditory

The student must be able to accurately observe patients from a distance or close at hand, correctly read digital, analogue or graphic gauges, scales and monitors, and recognize biohazardous fluids. The student must be able to hear audio and see visual alarms. He/she must also be able to hear breath and heart sounds with a stethoscope, and see cardiac/pulmonary waveforms on monitoring screens.

II. Sensory-motor

The student must have both fine and gross motor skill capabilities to perform patient care procedures. These procedures include but are not limited to the following: palpating, auscultating, percussing the chest, administering medications using airway and endotracheal access, obtaining blood samples from veins and arteries, performing cardiopulmonary resuscitation, turning and lifting patients, moving heavy, bulky equipment, maneuvering in tight places, and assembling and calibrating respiratory care equipment.

III. Communication

The student must be able to speak, and hear. He/she must also be able to perceive non-verbal communication. A student must be able to communicate effectively and sensitively with patients, families and health care providers. He/she must be able to communicate accurately, orally and in writing, with all members of the health care team.

IV. Intellectual-Conceptual, Integrative and Qualitative Abilities

The student must be able to comprehend and apply didactic concepts to the clinical setting. This involves physiologic measurements, mathematical computation, information gathering, interpretation and analysis of data, and problem solving.

V. Behavioral and Social Attributes

The student must possess the emotional health necessary to exercise judgment, complete patient care responsibilities, and maintain effective relationships with others in classroom, laboratory and clinical settings. Students must be able to tolerate physically taxing workloads and to function effectively under stress. He/she must be able to adapt to changing environments, display flexibility and function in the uncertainties inherent to the health care setting. Compassion, integrity, concern for others, interpersonal skills, interest and motivation are all important personal qualities.

Individuals with disabilities are encouraged to apply for admission and/or matriculation in the program.