The policies and procedures described herein pertain to students beginning matriculation in the professional component of the RCP curriculum during the Fall 2019 semester.

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INTRODUCTION
Welcome to the Respiratory Therapy Program (RCP) at the University of Hartford. It is our honor and pleasure to assist you in the pursuit of an education and professional career in respiratory therapy. Your chosen profession is one that offers a rewarding career with great potential for personal growth and satisfaction.

Our fully accredited entry level bachelor of science program in Respiratory Therapy integrates state-of-the-art didactic instruction in the principles of respiratory care with competency-based clinical instruction at our affiliate institutions. We utilize an on campus laboratory and simulation center to bridge the classroom learning with the clinical internships. Our professional curriculum is routinely monitored and updated to ensure that our students receive the most current information required for clinical practice. By combining these didactic, simulation and clinical experiences, our students are afforded the opportunity to develop critical thinking and problem-solving skills that elevate their professional practice beyond the level of basic procedural competency. In addition, our program incorporates web-based computer simulations to further develop critical thinking and problem solving skills. Our program graduates enter a dynamic healthcare profession with the tools required to constantly adapt and thrive in their compassionate care for others.

This manual has been prepared for our Respiratory Therapy students and should be used as a reference for the regulations and policies of the RCP Program at the University of Hartford. This manual is designed to serve as an adjunct to the University student handbook (The Source), which includes additional rules, regulations, and requirements of all students of the University of Hartford. Each student enrolled in the RCP program is responsible for reading, understanding, and adhering to the policies, rules, and procedures presented herein. These important provisions serve as a guide for our students as they work to develop the highest level of clinical professional performance in respiratory care. All students will be strictly held to the standards described in this manual. However, the manual is not a contract between the Program and our students. We reserve the right to amend or modify these policies, rules, and procedures at any time deemed necessary. Students will also receive a clinical handbook, which will provide the student, clinical instructors and clinical affiliates with the policies and procedures required for a successful clinical experience.

It is our sincere hope that you will fully realize the opportunities that our Program and a professional career in respiratory care can offer.

- The Faculty of the Respiratory Therapy Program, University of Hartford
WHAT IS Respiratory Care?

The Respiratory Care Practitioner applies scientific knowledge and theory to practical clinical problems of respiratory disease. A Respiratory Care Practitioner may:

- Assist in diagnosing lung and breathing disorders and recommending treatment methods.
- Interview patients and do chest physical exams to determine what kind of therapy is best for their condition.
- Consult with physicians to recommend a change in therapy, based on evaluation of the patient.
- Analyze arterial blood gases to determine levels of oxygen and other gases.
- Manage ventilators and artificial airway devices for patients who can’t breathe normally on their own.
- Respond to emergency situations and urgent calls for care.
- Educate patients and families about lung disease so they can maximize their quality of life.

Respiratory therapists work in a variety of settings including many areas of a hospital such as the intensive care units, emergency rooms, newborn and pediatric units and operating rooms. In addition to hospital settings respiratory therapists work in skilled nursing homes, doctor’s offices, pulmonary rehabilitation programs, asthma education programs, as well as air transport and ambulance programs.

Opportunities for advancement include specialty rotations, advancing to shift manager as well as supervisor or administrator. There are also employment opportunities in home care and medical sales. In the area of education, teaching positions are offered in hospital based educational programs for both clinical and didactic areas. The future outlook for the professional Respiratory Therapist is excellent.
College of ENHP Mission

The College of Education, Nursing, and Health Professions provides a reflective, collaborative and scholarly environment where we prepare professionals to teach, promote well-being, and become leaders in local, national and global communities.

Respiratory Therapy Program Mission

The Respiratory Therapy Program at The University of Hartford will 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 (RRT’s). The program will 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, and/or advanced clinical practice in areas such as adult critical care, neonatal/pediatric care, emergency room, pulmonary rehabilitation and pulmonary laboratory.

Program Goals

Graduates of the University of Hartford’s Respiratory Therapy Program are expected to meet the following goals for graduation:

GOAL 1: Students must be competent in interpersonal and communication skills to effectively interact with diverse population groups.

GOAL 2: Students will develop and employ critical thinking skills.

GOAL 3: Students will acquire expected knowledge and competencies.

GOAL 4: Students will demonstrate a commitment to professional growth and development.
**STUDENT LEARNING OUTCOMES**

**In Support of Goal 1:**
1.1 Students will demonstrate effective oral communication skills
1.2 Students will demonstrate effective written communication

**In Support of Goal 2:**
2.1 Students will apply problem-solving strategies in the patient care setting
2.2 Students will demonstrate the ability to respond to a critical situation

**In Support of Goal 3:**
3.1 Students will demonstrate competency in respiratory therapy procedures
3.2 Students will demonstrate expected knowledge

**In Support of Goal 4:**
4.1 Students to demonstrate professionalism during their clinical experience
4.2 Students will integrate a commitment to life-long learning into their professional practice of respiratory therapy

**Assessment of Program Effectiveness**
1. Students will earn their CRT credential on the first attempt. (This will be measured by passing the low cut score of the TMC).
2. Students will be gainfully employed as respiratory therapists within the first 12 months following graduation.
3. Students will successfully complete the program.
4. Students will be satisfied with their education. (This will be measured by graduate student survey)
5. Employers will be satisfied with the performance of our graduates (This will be measured by the employer survey).
UNIVERSITY ADMINISTRATIVE STRUCTURE

President’s Cabinet

President
Gregory S. Woodward
860.768.4417

Provost
H. Frederick Sweitzer
860.768.4505

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Maria A. Feeley
860.768.4275

Dean of Students
Aaron Isaacs
860.768.4285

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Dean of University Programs
860.768.4401

Associate Vice President for Student Success; Associate Professor of Psychology
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860.768.5365

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860.768.2421

Vice President for Marketing and Enrollment
Molly Polk
860.768.4267

Vice President for Finance and Operations
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860.768.4267
Collegiate Deans
Dean, College of Engineering, Technology, and Architecture
Hisham Alnajjar

Dean, College of Arts and Sciences
Katherine A. Black

Dean, Hillyer College
David H. Goldenberg A '73, 76, M '76

Dean, The Hartt School; Professor of Composition; Curator, Richard P. Garmany Chamber Music Series
Larry Alan Smith

Dean, Hartford Art School
Nancy M. Stuart

Dean, College of Education, Nursing and Health Professions
Cesarina Thompson

Dean, Barney School of Business; Professor of Management
Amy Zeng

Administration
Assistant Provost for Academic Financial Planning and Administration
Robert McAlpin

Assistant Vice President for Student Success
Suzanne Anderson McNeil

Associate Vice President for Development
Sean Meehan

Associate Provost for Graduate Studies and Research
T. Clark Saunders

Dean of Undergraduate Learning
James Shattuck

Assistant Provost and Dean of Faculty Development
T. Stores

Associate Vice President of Facilities Planning and Management
Norman Young '82

Dean of Admission
Richard A. Zeiser
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perritano@hartford.edu
AARC Statement of Ethics and Professional Conduct

In the conduct of professional activities the Respiratory Therapist shall be bound by the following ethical and professional principles. Respiratory Therapists shall:

- Demonstrate behavior that reflects integrity, supports objectivity, and fosters trust in the profession and its professionals.
- Promote and practice evidence-based medicine.
- Seek continuing education opportunities to improve and maintain their professional competence and document their participation accurately.
- Perform only those procedures or functions in which they are individually competent and which are within their scope of accepted and responsible practice.
- Respect and protect the legal and personal rights of patients, including the right to privacy, informed consent, and refusal of treatment.
- Divulge no protected information regarding any patient or family unless disclosure is required for the responsible performance of duty as authorized by the patient and/or family, or required by law.
- Provide care without discrimination on any basis, with respect for the rights and dignity of all individuals.
- Promote disease prevention and wellness.
- Refuse to participate in illegal or unethical acts.
- Refuse to conceal, and will report, the illegal, unethical, fraudulent, or incompetent acts of others.
- Follow sound scientific procedures and ethical principles in research.
- Comply with state or federal laws which govern and relate to their practice.
- Avoid any form of conduct that is fraudulent or creates a conflict of interest, and shall follow the principles of ethical business behavior.
- Promote health care delivery through improvement of the access, efficacy, and cost of patient care.
- Encourage and promote appropriate stewardship of resources.
- Work to achieve and maintain respectful, functional, beneficial relationships and communication with all health professionals. It is the position of the American Association of Respiratory Care that there is no place in a professional practice environment for lateral violence and bullying among respiratory therapists or between healthcare professionals.

Effective 12/94
Revised 12/07
Revised 07/09
Revised 07/12
Reviewed 12/14
Revised 04/15
Technical Standards

In order to perform the tasks required of a respiratory therapist certain physical/behavioral capabilities are required. Students must demonstrate the ability to perform required functions, as a routine part of classroom, laboratory, or clinical education. Students should be aware that successful completion of the Respiratory Care Program will depend upon the ability to meet the following technical standards:

1. A reasonable amount of strength and mobility are required for but not limited to the following:
   a. Lift, (up to 50 lbs) move or push heavy equipment, specifically ventilators, therapy equipment, stretchers and/or wheelchairs with patients in them
   b. Assist in lifting (up to 50 lbs) or repositioning patients who may be paralyzed, comatose or otherwise incapacitated, from patient beds and stretchers or wheelchairs
   c. Provide physical assistance and care for patients in a timely manner in all circumstances which may involve the activities of sitting and standing in one place for 60-90 minutes
   d. Reach overhead (stretching) and below waist level (bending) to manipulate equipment
   e. Administer CPR without assistance

2. Manual dexterity, effective motor skills and eye-hand coordination are required for but not limited to the following:
   a. Manipulate and calibrate equipment
   b. Don surgical gloves
   c. Fill syringes
   d. Set up equipment
   e. Perform routine therapies, i.e. aerosol treatments, suctioning and manual ventilation
   f. Document patient assessment and outcome of therapy
   g. Draw blood

3. Sensory function in at least one upper limb is required for but not limited to the following:
   a. Palpate vessels for blood sampling
   b. Palpate pulses
   c. Assess skin surface texture and temperature

4. The auditory ability (corrected as necessary) to recognize and respond to faint or muffled sounds is required for but not limited to the following:
   a. Assess breath sounds
   b. Respond to patient needs since ventilator alarms may be muffled due to ICU noise
   c. Monitor equipment operation or dysfunction which may be indicated by low sounding bells or buzzers
   d. Function when the use of surgical masks are required for protection of the patient or hospital personnel
e. Respond to pages and emergency calls from the hospital public address system and cell phone/pager system

5. Visual acuity (corrected as necessary) is required for but not limited to the following:
   a. Read patient monitor values and ventilator values in dimly lit surroundings
   b. Read waveform graphic monitors
   c. Recognize and interpret facial expressions and body language
   d. Identify normal and abnormal patterns of movement and breathing
   e. Discriminate color changes
   f. Interpret and assess the environment

6. The ability to effectively communicate orally and in writing in the English language is required but not limited to the following:
   a. Ascertain and record patient histories
   b. Monitor and document patient progress
   c. Provide clear and audible directions to patients face-to-face
   d. Provide accurate information when discussing patient management with physicians and other support staff
   e. Assess information and to communicate and document effectively via a computer
   f. Collect, interpret, and analyze information

7. Possess acceptable mental/attitudinal standards are required for but not limited to:
   a. Function safely, effectively, and calmly in stressful situations
   b. Maintain composure while managing multiple tasks simultaneously
   c. Prioritize multiple tasks
   d. Exhibit social skills necessary to interact effectively with patients, families, supervisors, classmates, instructors and co-workers of the same or different cultures such as respect, politeness, tact, collaboration, teamwork, and discretion
   e. Display attitudes/actions consistent with the ethical standards of the profession

These standards reflect reasonable expectations of the Respiratory Care student for the performance of common functions of the Respiratory Therapist. The University of Hartford complies with Section 504 of the Rehabilitation Act and the Americans with Disabilities Act. A prospective student who is otherwise qualified, but requires reasonable accommodation, should contact Access-Ability Services at in Auerbach Hall, Room 209 860.768.4312. They will determine what accommodations are necessary and appropriate. All information and documentation is confidential. All technical standards must be met with either reasonable accommodation or without accommodation.
ADMISSION PROCEDURE
Applicants are accepted into the Respiratory Therapy Program as freshman. Information regarding specific admission criteria may be obtained on the University of Hartford Website (Hartford.edu) or by contacting the University of Hartford Admissions office at (860) 768-4296. University of Hartford generally grants credit to students who have earned scores of 3 or higher (4 for English Composition) on the Advanced Placement examination. Credit can also be awarded for courses taken at an accredited college or university while in high school.

A first-year (freshman) student must maintain an overall GPA of 2.7 for eligibility to progress into the professional portion of the curriculum in the Fall of sophomore year. Only students who successfully complete all required courses during the first (freshman) year, with a minimum 2.7 GPA are eligible to enter the professional portion of the Respiratory curriculum. Students who fail to achieve the 2.7 minimum GPA and lose their professional RCP program eligibility are encouraged to re-apply for eligibility once the disqualifying item(s) have been rectified.

Opportunities for transfer students occur only on a space-available basis. A number of slots may open for transfer (non-Freshman) applicants to the RCP program each year. Students wishing to transfer from other majors or Colleges of the University of Hartford must have completed all prior coursework with a minimum GPA of 2.7. Transfer students must also have completed the following required courses and earned a grade of “C” or higher:
   a. One college-level math course (3 credits) at the algebra level or higher.
   b. One college level course, with lab in each of the following sciences: general biology (4 credits),
      general chemistry I and II (4 credits each) or anatomy and physiology I and II (4 credits each).

Once these criteria have been met, students who are interested in placing their name on a waiting list for consideration must do so by contacting the Respiratory Program Director at griffiths@hartford.edu or (860)768-4823. Decisions on waiting list applicants are made in the May prior to each Fall semester and are based solely on achieved GPA. The process for transfer application, wait-listing, and selection to the RCP program applies to transfer students from both within and outside the University of Hartford.

PROGRESSION REQUIREMENTS
The respiratory therapy program curriculum consists of a designated sequence of courses. The minimum grade requirement for each respiratory (RCP) course is C+. Students who fail to meet this minimum grade requirement in any RCP designated course will be removed from the normal sequencing of the curriculum until that course can be successfully retaken. Failure to achieve a C+ grade in a RCP course may extend the professional program of study a full academic year. Students are only allowed to repeat a RCP designated course once to achieve the required course minimum of a C+. Students failing to achieve the minimum C+ for a second time in a given course will be subject to program dismissal. A maximum of two different respiratory courses may be repeated due to below C+ achievement. Students who receive a third grade below the minimum C+ required in RCP courses will be subject to program dismissal.
PROGRAMMATIC WARNING
In addition to the C+ requirement for all RCP courses, students are also required to maintain a minimum overall GPA of 2.7 and a grade of C in all science and math courses to remain in good academic standing. In the event their overall GPA drops below 2.7 or a student does not meet the required grade of C in a science or math course, a student will be placed on programmatic warning. If the GPA falls below 2.7, a student is placed on a probationary period which lasts for one semester, during which the student must demonstrate sufficient academic achievement to increase their overall GPA above the minimum 2.7 required. Failure to reach an overall GPA of 2.7 will result in the student’s removal from the normal sequence of RCP courses. If a student fails to achieve the required grade of “C” in a math or science course, they will need to repeat that course within a one year period. Students are only allowed to repeat the course once to achieve the required course minimum of a “C”. Students failing to achieve the minimum “C” for a second time in a given course will be subject to program dismissal. If a student is removed from the normal RCP sequence due to a lower than 2.7 overall GPA, the professional program of study may be extended a full academic year.

REMEDIATION PLAN
When a student’s performance does not meet expectations and/or learning outcomes, a remediation plan is developed by a faculty member, including lab and clinical instructors, and the student. The plan is time limited and is designed to promote the student’s successful achievement of the course objectives. The clinical/lab instructor or faculty must document that the student has successfully completed the objectives of the remediation plan. Plans that are clinical in nature require the student to meet and review the plan with the Director of Clinical Education. Within two days of initiating a remediation plan, the faculty or DCE must notify the Program Director. The Program Director may request to meet with the student to discuss the remediation plan. Students with two concurrent remediation plans (i.e. academic and clinical) are automatically placed on program probation. Students who do not meet the objectives outlined in the remediation plan are subject to program probation. Students with more than one remediation in any one course may be subject to program probation.

PROGRAM PROBATION
A student is placed on program probation when the student fails to meet the requirements of a remediation plan or commits a serious violation of program policy such as confidentiality breach or academic dishonesty or a serious patient safety error.

DISMISSAL POLICY
The Respiratory Therapy program adheres to all of the student conduct regulations outlined in The Source. Please review this publication for information regarding sanctions and/or dismissal for academic dishonesty, sexual harassment and assault, and various acts of student misconduct.

In addition to these policies, a student may be subject to dismissal from the Respiratory Therapy program for any of the following:
1. Failure to achieve a C+ grade in a repeated RCP course
2. Failure to achieve a C+ grade in more than two (2) RCP courses
3. Failure to comply with clinical policies as outlined in the program Clinical Handbook(s).
4. Violation of the American Association for Respiratory Code of Ethics (pg.10)
5. Faculty initiated dismissal for reasons of health, safety, performance or other reasonable cause.
The Program Director will notify the student in the event of dismissal from the Program. Students dismissed from the Respiratory Therapy Program may appeal the decision, in writing within three (3) days of dismissal. This appeal shall be made in writing to the Chair of the Department of Health Sciences. The Chair will consult with the parties involved and notify the student of the decision within ten (10) working days of the appeal.

If the student does not obtain satisfactory resolution, the student may then appeal the decision in writing within three (3) working days to the Dean of the College of Education, Nursing and Health Professions. The Dean will review the appeal and notify the student of the decision within ten (10) working days. For additional information on due process for academic or clinical grievances, please refer to the policies on pages 21-22 of this manual.

**Leave of Absence**

Students must formally request a leave of absence from the RCP program, in writing, to the RCP program director. A leave of absence from the University must be requested through the Office of Student Affairs (see *The Source*). Students returning from an approved leave of absence of one year or less, may be required to complete additional clinical time and/or repeat designated competency examinations to reinforce previously attained clinical skills. Students returning from an approved leave of absence of more than one year must adhere to the Reinstatement Policy and Application process (see next paragraph).

**Reinstatement Policy & Application Process**

Students who have been dismissed, or who have voluntarily withdrawn from the RCP program may reapply for admission into the program as a transfer student. Please refer to the transfer admission policy (pg. 14) for details regarding this process. Students seeking readmission are selected from the entire pool of transfer applicants who are placed on the RCP waiting list. Applicants on the RCP waiting list are evaluated and selected based upon academic achievement (GPA) within the limitations of available program space. Enrollment space for a student cannot be guaranteed for any subsequent semester.

Students must be successfully re-admitted into the RCP program for the immediately succeeding school year to avoid retaking the RCP courses they had previously completed. Students who delay readmission beyond the immediately succeeding year may be required to repeat all RCP courses they had previously taken.

**Additional Costs for Program Completion**

The total approximate costs for tuition, room, board, and all associated fees for students of the Program may be found in the *University of Hartford Bulletin For Undergraduate Programs*. In addition to these University costs, students of the Respiratory Therapy Program can expect to incur the following additional expenses:

6. Uniforms: 1-2 sets of hospital scrubs with university logo (Student to purchase from school bookstore; does not include required appropriate footwear)
7. Stethoscope (varying cost depending on quality of stethoscope)
8. Immunizations/physicals: required for clinical assignment (varying cost based on individual student health insurance)
9. Parking fees: possible depending upon clinical assignment

Laboratory fees are attached to several RCP courses and will cover the cost of several required items. Students are not required to make separate payment for the items listed below:

1. BLS training
2. Background check/Fingerprinting
3. Drug Screening
4. Online Immunization Tracking System
5. Classmates online simulation software

STUDENT ORIENTATION

The faculty and staff of the Respiratory Program are committed to ensuring that our students receive the support they need to successfully complete our curriculum. During the following series of meetings, students are provided the important information they need regarding their respiratory therapy education at the University of Hartford. The primary purpose of this initiative is to provide new students the opportunity to discuss the program with faculty and have any questions or concerns addressed.

Program Orientation
An orientation meeting for the RCP program is held for freshman students, in the first Fall semester. Several important policies of the RCP program are reviewed with students during the meeting. Students may ask questions of program faculty.

Clinical Orientation
In the Spring semester of Freshman year, a clinical orientation meeting is held for students who will enter the professional portion of the RCP curriculum the following fall. Students are provided with a copy of the RCP Clinical Handbook and all clinical requirements are reviewed with students during the meeting. Students have the opportunity to ask questions about the professional component of the RCP curriculum, including their upcoming clinical rotations, the competency-based education system, etc.

Professional Phase
In the Fall of Sophomore year, first-year RCP students are given a copy of the RCP Policy and Procedure Manual. Students and faculty engage in a detailed review of the RCP curriculum and program requirements.

ACADEMIC ADVISING
The purpose of academic advising is to help students become more aware of their program and career choice and also become increasingly independent in their program and life planning. In addition, the student and faculty review the student’s progression toward completion of graduation requirements. The full-time program faculty serves as academic advisors to all students enrolled in the professional phase of the program.
HEALTH FORMS
All students must arrange to have a physical examination performed by their family physician. The physical must be completed before any clinical experience may begin. PDF copies of the forms must be uploaded to the *myCB Medical Document Manager* component of the student’s Castle Branch account. Students should be aware that all health care providers involved in direct patient care activities, which includes respiratory therapists, are at increased risk of contracting Hepatitis B as well as other communicable diseases. Hepatitis B infections are spread through direct contact with an infected person’s blood, body fluids or saliva. While the likelihood of you actually contracting the disease is minimized by the use of proper medical techniques (Universal Precautions), students should consult their family physician regarding the individual need for the Hepatitis B vaccination. Varicella vaccines are mandatory. A blood titer may be performed to establish the student’s immunity. A two-step tuberculosis (TB) test must be performed on an annual basis. The flu vaccine is mandatory for all students on an annual basis. Students have the option to decline the influenza vaccine due to health or other personal reasons. However, declination of the flu vaccine may significantly limit the student’s eligibility to rotate at certain clinical affiliates and may require that the student wear a surgical mask during their clinical experience. The *myCB Medical Document Manager* is a secure, web-based tracking system, used to upload and manage all immunization and health documentation.

PROFESSIONAL LIABILITY INSURANCE
All students are required to have professional liability insurance coverage prior to commencing their clinical experience. This liability coverage will be obtained and maintained by the University of Hartford.

Students also may purchase additional professional liability insurance through the American Association for Respiratory Care. For more information, you can contact:

Proliability powered by Mercer
http://www.proliability.com
1 800 375-2764

PROFESSIONAL CURRICULUM IN RESPIRATORY THERAPY
The professional portion of the Respiratory Therapy Program is fifty one (51) credits and a minimum of 2 ½ years in length. During this phase, courses in respiratory therapy (RCP) are taken concurrently with other required science, general education, University curriculum, and elective courses. Students typically begin the professional component during the second (sophomore) year of matriculation towards the Bachelor of Science Degree in Respiratory Therapy. The first (freshman) year consists primarily of general education, basic science, and introductory health science courses.
# Respiratory Curriculum

## Freshman Year

<table>
<thead>
<tr>
<th>Fall</th>
<th>Credits</th>
<th>Spring</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>CH</td>
<td>114 or 110</td>
<td>Prin. of Chem. I or College Chemistry I</td>
<td>4</td>
</tr>
<tr>
<td>CH</td>
<td>10W</td>
<td>Academic Writing I</td>
<td>3</td>
</tr>
<tr>
<td>CS or M</td>
<td>110 or 114P</td>
<td>Introduction to Computers or Everyday Statistics</td>
<td>3</td>
</tr>
<tr>
<td>BIO</td>
<td>122</td>
<td>Biological Science I</td>
<td>4</td>
</tr>
<tr>
<td>ENHP or HS</td>
<td>140 or 140P</td>
<td>ENHP Dialogue (Transfers Only) or Intro to Health Professions</td>
<td>1 or 2</td>
</tr>
<tr>
<td></td>
<td>15-16</td>
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<td></td>
</tr>
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</table>

## Sophomore Year

<table>
<thead>
<tr>
<th>Fall</th>
<th>Credits</th>
<th>Spring</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>BIO</td>
<td>212</td>
<td>Anatomy &amp; Physiology I</td>
<td>4</td>
</tr>
<tr>
<td>RCP</td>
<td>212</td>
<td>Respiratory Therapy</td>
<td>3</td>
</tr>
<tr>
<td>RCP</td>
<td>251</td>
<td>Clinical Practice I</td>
<td>2</td>
</tr>
<tr>
<td>BIO</td>
<td>272W</td>
<td>Genetics</td>
<td>3</td>
</tr>
<tr>
<td>PHY</td>
<td>102 or 101 or 120</td>
<td>Electricity and the Body or Mech., Heat and the Body or Algebra-Based Physics I</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>16</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Junior Year

<table>
<thead>
<tr>
<th>Fall</th>
<th>Credits</th>
<th>Spring</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>RCP</td>
<td>214</td>
<td>Mechanical Ventilation and Resuscitation I</td>
<td>4</td>
</tr>
<tr>
<td>RCP</td>
<td>325</td>
<td>Cardio-Pulmonary Anatomy &amp; Physiology</td>
<td>4</td>
</tr>
<tr>
<td>RCP</td>
<td>331</td>
<td>Medical-Surgical Problems</td>
<td>3</td>
</tr>
<tr>
<td>RCP</td>
<td>353P</td>
<td>Clinical Practice III</td>
<td>3</td>
</tr>
<tr>
<td>RCP</td>
<td>360W</td>
<td>Respiratory Care Ethics</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>17</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Summer

<table>
<thead>
<tr>
<th>Fall</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>RCP</td>
<td>355</td>
</tr>
</tbody>
</table>

## Senior Year

<table>
<thead>
<tr>
<th>Fall</th>
<th>Credits</th>
<th>Spring</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>RCP</td>
<td>460W</td>
<td>Advanced Clinical Practice I</td>
<td>3</td>
</tr>
<tr>
<td>UISS</td>
<td>______</td>
<td>University Interdisciplinary Studies (Social Context)</td>
<td>3</td>
</tr>
<tr>
<td>HS2</td>
<td>______</td>
<td>Upper-Level HS Elective</td>
<td>3</td>
</tr>
<tr>
<td>3</td>
<td>______</td>
<td>Social Science Elective</td>
<td>3</td>
</tr>
<tr>
<td>3</td>
<td>______</td>
<td>University Interdisciplinary Studies (Arts)</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>15</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Total Credits:** 125-127
PROFESSIONAL MEMBERSHIP
The American Association for Respiratory Care offers membership to student respiratory therapists. Membership in this professional organization is voluntary and the student is directly responsible for the payment of associated dues. Advantages of belonging to the AARC as a student include digital subscriptions to respiratory journals, a $40 discount on the NBRC board exam, access to exam prep videos as well as available scholarship funds.

Other professional organizations that offer resources and/or scholarship funds to respiratory students include; The Connecticut Society for Respiratory Care (CTSRC), the National Board for Respiratory Care (NBRC), and the Coalition for Baccalaureate and Graduate Respiratory Therapy Education (CoBGRTE)

CTSRC: https://www.ctsrc.org/
NBRC: http://NBRC.org/
CoBGRTE: http://www.cobgrte.org/

ACCREDITATION
The University of Hartford is accredited by the New England Commission of Higher Education (NECHE, formerly the Commission for Institutions of Higher Education, New England Associations of Schools and Colleges).

The University of Hartford's Respiratory Program is accredited by the: Commission on Accreditation for Respiratory Care (CoARC)

Commission on Accreditation for Respiratory Care (CoARC)

CoARC
264 Precision Blvd
Telford, TN 37690
USA
TELEPHONE: 817-283-2835
URL: https://www.coarc.com/

ADVISORY BOARD
The RCP Advisory Board is a group of respiratory therapists, health professionals and community members invited from our local community to assist in ongoing efforts towards programmatic improvement. The group meets at least twice annually once each in the Fall and Spring semesters. Members are selected by the program faculty and serve voluntarily. Student members are selected by the Program Director. Student members serve on the RCP Advisory Board for a period of two (2) years.
**Grading Policies**

All instructors within the respiratory therapy curriculum courses, for both academic and clinical courses, will distribute a syllabus on the first day of each class. Each individual syllabus will contain the specific information regarding the required text(s) for the course, reading assignments, homework assignments and the testing procedures for that course. Each instructor will follow the same grading system, which is:

<table>
<thead>
<tr>
<th>Grade</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>94 - 100</td>
</tr>
<tr>
<td>A-</td>
<td>90 - 93</td>
</tr>
<tr>
<td>B+</td>
<td>87 - 89</td>
</tr>
<tr>
<td>B</td>
<td>83 - 86</td>
</tr>
<tr>
<td>B-</td>
<td>80 - 82</td>
</tr>
<tr>
<td>C+</td>
<td>77 - 79</td>
</tr>
<tr>
<td>C</td>
<td>73 - 76</td>
</tr>
<tr>
<td>C-</td>
<td>70 - 72</td>
</tr>
<tr>
<td>D</td>
<td>65 - 69</td>
</tr>
<tr>
<td>F</td>
<td>below 65</td>
</tr>
</tbody>
</table>

Students must maintain a C+ average in each RCP designated course in order to continue within the Respiratory Therapy professional component curriculum.

**Quizzes, Exams and Make-up Exams**

Students are required to take quizzes and exams on the day and time they are scheduled. Under extenuating circumstances, they may be postponed but only if the instructor's permission is first obtained. Any make-up must be completed within one week from the date it was originally scheduled. Each RCP program course will include a syllabus describing any additional requirements, grading policies, and make-up procedures.

**Academic Honesty**

Students will be held to the University's policy on academic honesty and will be dealt with in compliance with that policy as detailed in *The Source*, the University's student handbook.

**Academic Grievance Policy**

Appeals relating to a respiratory therapy program faculty member's decision in the implementation of an academic policy can be made only on the grounds of discriminatory, unjust or capricious action.

In the event a student feels that an appeal is warranted, it is the student’s responsibility to initiate the appeals procedure. The appeals procedure shall normally be as follows:

1. The student shall discuss the matter with the faculty member assigned to the course. This meeting must take place within 10 academic days of the occurrence.
2. If the situation cannot be resolved in such a conference, the student may request in writing a meeting with the Respiratory Therapy Program Director. This meeting must take place before an additional 10 academic days have elapsed.
3. If the situation cannot be resolved in such a conference, the student may request in writing a meeting with the Chair of the Department of Health Sciences. This meeting must take place before an additional 10 academic days have elapsed.
4. If the situation is not resolved at this meeting, the student may appeal the decision in writing to the Dean of the College of Education, Nursing, and Health Professions (ENHP). The Dean shall screen the evidence presented by the student and determine whether the appeal warrants
further investigation. If so, the appeal and the evidence shall go to the Chair of the academic standing committee of ENHP.

5. The Chair shall call a meeting of the academic standing committee, and the committee shall review the appeal by hearing all the evidence presented by student and faculty member. Both the student and the faculty member will be invited to meet with the Academic Standing Committee to respond to questions concerning written material that either party has presented. The academic standing committee meeting(s) shall be convened within 20 days of receiving the charge and evidence.

6. After investigating the appeal, the committee shall submit a detailed report and recommendation(s) to the Dean of the College of ENHP. The committee shall make the final determination of the case.

7. The Dean of the College of ENHP shall inform the concerned parties of the decision(s) of the committee. There shall be no further appeal.

CLINICAL GRIEVANCE POLICY
Appeals relating to a respiratory therapy program’s faculty members’ decisions in the implementation of a clinical policy can be made only on the grounds of discriminatory, unjust or capricious action.

In the event that a student feels that an appeal is warranted, it is the student’s responsibility to initiate the appeals procedure. The appeals procedure shall normally be as follows:

1. The student shall discuss the matter with the faculty member assigned to the clinical course. This meeting must take place within 10 academic days of the occurrence.

2. If the situation cannot be resolved in such a conference, the student may request in writing a meeting with the Respiratory Program Director. This meeting must take place before an additional 10 academic days have elapsed.

3. If the situation cannot be resolved in such a conference, the student may request in writing a meeting with the Chair of the Department Health Sciences. This meeting must take place before an additional 10 academic days have elapsed.

4. If the situation is not resolved at this meeting, the student may take the appeal in writing to the Dean of the College of Education, Nursing, and Health Professions (ENHP). The Dean shall screen the evidence presented by the student and determine whether the appeal warrants further investigation. If so, the appeal and the evidence shall go to the Chair of the academic standing committee of ENHP.

5. The Chair shall call a meeting of the academic standing committee, and the committee shall review the appeal by hearing all the evidence presented by student and faculty member. Both the student and the faculty member will be invited to meet with the Academic Standing Committee to respond to questions concerning written material that either party has presented. The academic standing committee meeting(s) shall be convened within 20 days of receiving the charge and evidence.

6. After investigating the appeal, the committee shall submit a detailed report and recommendation(s) to the Dean of the College of ENHP. The committee shall make the final determination of the case.

7. The Dean of the College of ENHP shall inform the concerned parties of the decision(s) of the committee. There shall be no further appeal.
CLINICAL COMPETENCY EVALUATIONS

The respiratory program has a total number of 33 required competencies that are divided between the clinical internship rotations. The students in the respiratory program first learn new material in the didactic setting. Students then practice the competencies in the classroom laboratory and the campus simulation center. Students are required to pass a competency in the classroom laboratory or simulation center prior to performing the competency in the clinical setting. All students will be required to complete the same competencies regardless of clinical location.

The clinical competency process during the clinical rotation:

1. It is the responsibility of the student to request a competency evaluation. This should occur only after the student has achieved an appropriate level of experience in a clinical procedure. The student must notify the clinical instructor or preceptor that they would like to perform a Clinical Competency Evaluation.

2. The clinical instructor or preceptor will document the competency in Data Arc or Trajecsys, depending on the software that the class is using. (Our program is transitioning from Data Arc to Trajecsys.) The clinical instructor or preceptor will indicate whether the student has passed the competency.

3. The Director of Clinical Education reviews the completed competencies for completeness and correctness, and they are incorporated into the student's clinical grade for that semester. The competency evaluations are stored electronically on data arc or in Trajecsys for any future review.

Please refer to the RCP Clinical Handbook for additional information on competency requirements, the clinical grading process, and to view sample competency evaluation forms.

ATTENDANCE REQUIREMENTS

ACADEMIC CLASSROOM ATTENDANCE

The student has the obligation to regularly attend all scheduled respiratory (RCP) program classes. The respiratory program curriculum classes and laboratory simulations are intensive in nature. Therefore, it is imperative that students maintain consistent attendance at all program-related activities. The faculty recognizes that instances will arise when absence from class cannot be avoided. In those instances, the student has the responsibility to notify the faculty member, via phone or email prior to the start of class. A syllabus is provided for each course at the beginning of the semester. A student’s absence from class does not forgive them from assignments due on the next class meeting, including tests or homework assignments.
CLINICAL EXPERIENCE ATTENDANCE
The rotation of students through a clinical facility enables the student to obtain the practical experience necessary to learn the skills of an entry-level respiratory therapist. The student has the obligation to their clinical affiliate to attend his/her regularly scheduled days of clinical experience. Students are permitted one personal day per semester. Additional absences may result in deduction of clinical grade or failure of the clinical rotation. If, due to extenuating circumstances, students lack the required hours for a specified clinical internship the student must arrange to complete these hours through the Respiratory Therapy Director of Clinical Education.
One program official and the clinical faculty supervisor (or specified clinical contact) must be notified when illness or extenuating circumstances cause the student to be absent from their clinical internship. Notification to both parties must be made no later than 90 minutes prior to the start of the clinical rotation.

TARDINESS, ACADEMIC AND CLINICAL
Each student is required to be punctual for all classes, both academic and clinical. If for any reason: weather, transportation, illness, etc., a student is unable to be present at the scheduled starting time, the instructor or facility should be notified as soon as possible. Permission of the affiliate's clinical instructor is required if the student requests to leave the clinical area early. The director of clinical education must be notified by the student within 24 hours, if a student requests and is permitted to leave a clinical site prior to the scheduled end time of the clinical rotation. The student's outside job responsibilities, doctor's appointments, etc., are not adequate reasons for obtaining permission to leave the clinical facility early.

PROFESSIONAL BEHAVIOR
Students are expected to abide by the policies and procedures of their assigned clinical affiliate. Students may be dismissed from the professional component courses in respiratory therapy for behaviors deemed unprofessional at the clinical affiliate. These behaviors are presented at each affiliate's clinical orientation session.

HARASSMENT
Students will be held to the University’s policy on harassment and will be dealt with in compliance with that policy as detailed in The Source, the University’s student handbook.

SUBSTANCE ABUSE
Students will be held accountable to the University’s policy on drug abuse as detailed in The Source, the University’s student handbook. The use of illicit drugs can be detrimental to the safety of you, the people that you are with, the health care site you are at and the patients that you are interacting with. Students are reminded that drug screening is required prior to the start of clinical experience in sophomore year. A second drug screen may be performed before subsequent clinical rotations.
BACKGROUND CHECKS & DRUG SCREENING
All students of the RCP program are required to undergo a criminal background check (including fingerprinting) and drug screening prior to the start of clinical experience in the Fall of sophomore year. The student is responsible for clearing any eligibility issues identified during the screening process. Students who are unable to resolve said issues may be denied clinical placement and will not be able to complete the requirements of the RCP program. The program utilizes a nationwide background check (including fingerprinting) and drug testing service, Castle Branch to facilitate the screening process. The process for obtaining a documented background check, fingerprinting and drug screen through Castle Branch is described to students during an orientation meeting that occurs prior to the start of clinical experience. Costs associated with the background check and drug screening are paid by the University with funds collected from RCP course fees.

INCLEMENT WEATHER POLICY
Academic sessions will be held in accordance with the University's announced closing or late opening. For example, if academic classes are delayed until 10:00 a.m. the 8:30 a.m. academic class for that day is cancelled. In the case of clinical rotations, the student is not to report to clinical if the University of Hartford has a delayed opening or is closed. Listen to Hartford area radio stations, watch Hartford area TV stations or log onto the University's homepage at www.hartford.edu for these announcements. In the event the University is closing and the student is at the clinical site, the student should be dismissed from clinical at the closing time, i.e. at 2:00 pm. Students are not penalized for, nor do they need to make up time due to official closings for inclement weather. The student is responsible to notify the clinical faculty supervisor (or specified clinical contact) when clinical is canceled due to a school closing or late opening.

STUDENT HEALTH INSURANCE VERIFICATION
All students enrolled in the professional component RCP courses must be covered by their own health insurance policy. Students must demonstrate proof of medical insurance coverage, a copy of their medical insurance card, prior to the commencement of their first clinical internship rotation. Students who do not comply with this policy will be prohibited from participating in clinical internship rotations.
STUDENT OR PATIENT ACCIDENTS
A student injured as a result of their direct participation of their assigned duties during their clinical experience may receive treatment through the emergency services provided at their affiliate or their personal physician. Payment for such services is the student’s responsibility, as students are not the hospital’s employees. In addition, an incident report regarding the nature of the accident must be completed by the student and forwarded to the department manager. An additional copy must be forwarded to the Respiratory Care Program Director.

In the event that a student is involved in a situation where a patient is injured or exposed to unsafe clinical practice, the student must inform the clinical preceptor/ instructor of their conduct during the situation. An incident report must be completed by the student to properly reflect the situation which led to the injury or unsafe practice. A copy of the incident report must be forwarded to the department manager of the affiliate as well as the Respiratory Care Program Director. Examples of unsafe clinical practice include but are not limited to:
- An incorrect procedure
- Incorrect patient being treated
- Medication error
- False documentation

The student may be asked by the clinical faculty/ preceptor or hospital department manager to leave the clinical area and may only return after a discussion or conference with the Program Director or Director of Clinical Education. The clinical faculty, preceptor or hospital program manager may also complete a critical incident report.

HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA)
Compliance for Respiratory Therapy Students in Clinical and Academic Situations
Students must have access to medical information regarding the patient’s clinical history in order to effectively evaluate and care for patients during the clinical internships. According to HIPAA guidelines students are limited to information only necessary for the performance of their direct duties. Students must not discuss patient conditions by identifying their names in public areas of the medical facility, for example cafeterias or elevators, as this violates the patient’s medical privacy.

Students must also be aware of HIPAA for compliance in addressing issues related to patient identification in oral and written reports presented as a component of an academic course. Students are advised that when they provide case reports they may not reveal any information about patients such as the specific birth date, patient name, location of treatment or any information that could be used to identify a particular patient. Failure of students to comply with these guidelines may result in their dismissal from the program.
PROGRAM COMMENCEMENT

REQUIREMENTS FOR DEGREES

Fulfillment of graduation requirements is the student’s individual responsibility. The Respiratory therapy faculty will be the student’s advisors during their enrollment in the professional component of the Respiratory curriculum. No variation from the published University of Hartford Bulletin requirements for the student’s admission year is official unless it is in writing and signed by the Dean of the College of Education, Nursing and Health Professions.

1. Application for Degree: No student is considered a degree candidate until he/she files an application with the Registrar. There are deadlines for submission of these materials.
2. Satisfactory completion of your prescribed curriculum.
3. Payment of all outstanding fees.
4. Vote of faculty, trustees and Regents.
5. Attendance at Commencement, while not mandatory is expected.

Once successful completion of the program requirements is met, the student is awarded a B.S. degree in Respiratory Therapy. The B.S. in Respiratory Therapy is not contingent upon the student’s passing any type of certification examination.

Professional Certification & Licensure

In most states (including Connecticut), a respiratory therapist must be credentialed in the discipline, and must hold a state license in order to practice in respiratory therapy.

• The National Board for Respiratory Care (NBRC) is the credentialing organization for respiratory therapists in the United States. Health care organizations and other employers will typically require that practicing respiratory therapists have earned the NBRC badge of honor as a Certified Respiratory Therapist (CRT) or Registered Respiratory Therapist (RRT). To achieve this nationally accepted credential, a qualified program graduate must successfully complete (pass) the Therapist Multiple Choice Exam to earn the CRT. To achieve the RRT credential the graduate must pass the high cut score on the TMC exam as well as the Computer Simulation Exam (CSE). In order to qualify for the TMC exam, a student must complete a recognized educational program in Respiratory Therapy. Students who receive their diploma in respiratory therapy at the University of Hartford are eligible to take the NBRC board exams.

• Most states also require that technologists hold a license to practice respiratory therapy. Although the requirements differ in each state, this often amounts to demonstrating proof of having graduated from an accredited respiratory program, achieved the CRT or RRT credential and paying an annual licensure fee. Students are encouraged to contact the Department of Health within their home state (or anticipated state of employment) to verify the licensure requirements to practice in the profession. State licensure requirements are also available on the NBRC website.
Appendix
University of Hartford
Respiratory Care
Clinical Remediation Form

Student Name: ________________________ Date: ________

Course: ______________________________

Objectives Not Being Met or Areas of Concern:
(Please reference clinical evaluation form)

As Evidenced By:
(Cite specific performance example(s).)
Instructor/ preceptor recommendations:
(Include date for completion of an action plan and follow up evaluation)

Student comments:

Student Signature: __________________________________________ Date: ______

Instructor/ Preceptor Signature: _______________________________ Date: ______

Director of Clinical Education: _______________________________ Date: ______
University of Hartford
Respiratory Care
Critical Incident Report

A critical incident is a positive or negative report that reflects any action or behavior that the student exhibits which can be exemplary, an infraction of clinical policies, or is harmful or potentially harmful to patient care. Student may comment on the back of this form.

__________________________________________________________

Student __________________________ Date of incident_______________

Report submitted by _________________________________

Incident

Nature and consequence of incident

Action taken

Student signature __________________________ Date _____________

Clinical Coordinator __________________________ Date ____________

Program Director __________________________ Date ____________
I ______________________________________have received and read the University of Hartford Policy and Procedure Manual. I understand its contents and agree to abide by the policies of the university and the program.

STUDENT’S NAME (PRINT): ________________________________

STUDENT’S SIGNATURE: ________________________________

DATE: _______________