University of Hartford-Respiratory Care Program Policy and Procedure Handbook 2025-2026

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1. Introduction and Program Overview

Welcome to the Respiratory Care Program (RCP) at the University of Hartford. We are honored to support you in your journey toward a rewarding career in respiratory care, a healthcare profession offering meaningful opportunities for personal fulfillment and professional growth.

Our fully accredited, entry-level Bachelor of Science program combines advanced classroom instruction with competency-based clinical training at affiliated healthcare institutions. Students benefit from on-campus simulation and laboratory facilities, which bridge academic learning with real-world practice. The curriculum is regularly updated to reflect current evidence-based practices and emerging technologies.

Through didactic instruction, simulation-based learning, online tools, and clinical experiences, students develop strong critical thinking and problem-solving skills beyond basic technical proficiency. Graduates are prepared to adapt, lead, and provide compassionate, high-quality care in a dynamic healthcare environment.

1.1 Role of Respiratory Care Practitioners

Respiratory care practitioners, also known as respiratory therapists, utilize scientific knowledge to assess, treat, and manage patients with cardiopulmonary disorders. Their key responsibilities include:

- Collaborating with physicians to assess and diagnose lung and breathing disorders.
- Recommending evidence-based treatments for respiratory conditions.
- Conducting physical examinations and analyzing arterial blood gases.
- Managing mechanical ventilators and monitoring patient responses.
- Responding to cardiopulmonary emergencies, such as cardiac arrests or acute respiratory distress.
- Educating patients and families on respiratory health, disease management, and home care techniques.

Respiratory therapists work in diverse settings, including hospitals (e.g., inpatient care, intensive care units, emergency departments, neonatal and pediatric units), outpatient clinics, diagnostic laboratories, skilled nursing facilities, pulmonary rehabilitation programs, sleep disorder centers, and home healthcare.

The rising prevalence of chronic conditions like COPD and asthma, an aging population, and advancements in respiratory care technology are driving increased demand for respiratory therapists. The U.S. Bureau of Labor Statistics projects a 13% job growth rate from 2023 to 2033, significantly higher than the average for all occupations. Career advancement opportunities include management, education, or specializations in neonatal intensive care, pulmonary diagnostics, sleep medicine, or ECMO (a life-support technique for severe respiratory or cardiac failure).

1.2 Program Overview and Licensure Preparation

The Respiratory Care Practitioner (RCP) program offers a Bachelor of Science degree that prepares students for national credentialing exams and state licensure in respiratory care. Graduates are eligible to take exams administered by the National Board for Respiratory Care (NBRC, nbrc.org) to earn credentials as Certified Respiratory Therapist (CRT) or Registered Respiratory Therapist (RRT) credential. The CRT qualifies graduates for entry-level practice, while the RRT is an advanced credential for specialized roles.

Credentialing Exams Until December 31, 2026

- **Therapist Multiple-Choice (TMC) Exam**:
    - Duration: 3 hours.
    - Format: 160 multiple-choice questions.
    - Outcomes:
        - Low cut score: Earns the CRT credential, qualifying graduates for entry-level practice in most states.
        - High cut score: Earns the CRT credential and eligibility for the Clinical Simulation Exam (CSE).
- **Clinical Simulation Exam (CSE)**:
    - Duration: 4 hours.
    - Format: 22 clinical scenarios testing critical decision-making.
    - Outcome: Passing the CSE (after a high cut TMC score) earns the RRT credential.

Credentialing Exams Starting January 1, 2027

- **Respiratory Therapy Exam**:
    - Duration: 4 hours.
    - Format: 185 multiple-choice questions.
    - Outcomes:
        - Low cut score: Earns the CRT credential.
        - High cut score: Directly earns the RRT credential, eliminating the need for a separate CSE.

State Licensure

Most U.S. states, including Connecticut, require licensure to practice as a respiratory therapist. Licensure typically requires proof of graduation from an accredited program, NBRC credentials (CRT or RRT, depending on state), and submission of an application with applicable fees. For state-specific licensure requirements, visit the NBRC State Licensure page (nbrc.org).

1.3 Program Curriculum

The RCP curriculum integrates classroom instruction, hands-on simulations in state-of-the-art on-campus labs, and competency-based clinical rotations at affiliated healthcare institutions. Clinical education begins in the second year and continues through the fourth year, with students completing 51 professional phase credits, including 17 credits of clinical rotation courses (RCP 252, 353, 354, 355, 460, and 461). The program emphasizes critical thinking, clinical problem-solving, and professional development, preparing graduates for rewarding careers in respiratory care.

This manual serves as a comprehensive guide for students, faculty, clinical instructors, and clinical affiliates for the 2025–2026 academic year. It details policies, procedures, and clinical guidelines necessary for successful participation in academic and clinical components. Students should use this manual alongside *The Source*, the University of Hartford's student handbook (available at hartford.edu), which outlines additional university-wide rules. All students are responsible for reading, understanding, and complying with the policies herein. These policies support students in achieving the highest standards of academic and clinical performance.

This manual is not a binding contract. The faculty may amend or modify this manual's content, including policies, procedures, and guidelines, as needed.

2. Mission, Vision, and Goals

2.1 College of Education, Nursing, and Health Professions (ENHP)

- **Vision**: The College of ENHP will be recognized as a leader in preparing education and health professionals who improve the well-being of individuals and their community.
- **Mission**: The College of ENHP provides inclusive, innovative, and engaging scholarly experiences and clinical opportunities that shape the next generation of leaders in the service professions.
- **Values**: We believe education and healthcare professions are pivotal to advancing equity and social justice in a diverse world. We value inclusive learning environments that embrace interdisciplinary and intercultural learning and collaboration. We value innovation and excellence and are committed to preparing educators and health professionals who contribute to optimal education and health outcomes in local, national, and global communities.

2.2 Respiratory Care Program

- **Mission**: The Respiratory Care 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 (RRTs). 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.
- **Goals**:
    - Competence in interpersonal and communication skills for diverse populations.
    - Development and application of critical thinking skills.
    - Acquisition of expected knowledge and competencies.
    - Commitment to professional growth and development.

2.3 Student Learning Outcomes

- Demonstrate effective oral and written communication skills.
- Apply problem-solving strategies and respond to critical situations in patient care.
- Demonstrate competency in respiratory care procedures and expected knowledge.
- Exhibit professionalism and integrate lifelong learning into practice.

2.4 Assessment of Program Effectiveness

Program effectiveness is measured by:

- Passing the high cut score on the Therapist Multiple-Choice (TMC) exam (or the Respiratory Therapy Examination starting January 2027; see Section 1).
- Graduates earning the Registered Respiratory Therapist (RRT) credential.
- Gainful employment as respiratory therapists within 12 months of graduation.
- Successful program completion.
- Student satisfaction (via graduate surveys).
- Employer satisfaction (via employer surveys).

3. Program Administration and Accreditation

3.1 University Administration

- President: Lawrence P. Ward
- Provost: Katharine A. Black
- Vice President & Chief Financial Administrative Officer: Guy Drapeau
- Vice President of Student Success/Dean of Students: Aaron Isaacs
- Associate Vice President for Graduate and Professional Studies: R.J. McGivney
- Vice President for Inclusive Excellence and Belonging: Kayon Morgan
- Vice President for Development and Alumni Affairs: Kate Pendergast
- Chief of Staff; Vice President for Marketing and Enrollment: Molly Polk

3.2 Collegiate Deans

- College of Engineering, Technology, and Architecture: Hisham Alnajjar
- College of Arts and Sciences and Hillyer College: Josie Brown
- Barney School of Business: Aart S. Ivanic
- The Hartt School and Hartford Art School: Dale Merrill
- College of Education, Nursing, and Health Professions: Brian T. Swanson

3.3 Program Faculty and Staff

- Dean, College of ENHP: Brian T. Swanson, (860) 768-5314, bswanson@hartford.edu
- Chair, Department of Health Sciences: Linda Dahlin, (860) 768-4390, LDahlin@hartford.edu
- Medical Director: John McArdle, J.Mcardle@att.net
- Program Director, Respiratory Care Program: Karen Griffiths, (860) 768-4823, Griffiths@hartford.edu
- Director of Clinical Education, Respiratory Care Program: Nikolaos Galiatsatos, (860) 768-5499, Galiatsat@hartford.edu

3.4 Accreditation

The University holds accreditation from the New England Commission of Higher Education (NECHE). The Respiratory Care Program (RCP) is accredited by the Commission on Accreditation for Respiratory Care (CoARC), the national accrediting body for respiratory care education programs, located at 264 Precision Blvd, Telford, TN 37690. Contact CoARC at (817) 283-2835 or visit coarc.com.

3.5 Advisory Board

The RCP Advisory Board consists of respiratory therapists, healthcare professionals, and community members. The board meets twice yearly to provide guidance for program enhancement, in alignment with CoARC guidelines. Student representatives are appointed by the Program Director for two-year terms.

4. AARC Statement of Ethics and Professional Conduct

Respiratory therapists shall:

- Demonstrate behavior that reflects integrity, supports objectivity, and fosters trust in the profession.
- Promote and practice evidence-based medicine.
- Seek continuing education to maintain professional competence and document participation accurately.
- Perform only procedures or functions in which they are competent and within their scope of practice.
- Respect and protect patients' legal and personal rights, including privacy, informed consent, and refusal of treatment.
- Divulge no protected information unless authorized by the patient/family or required by law.
- Provide care without discrimination, respecting the rights and dignity of all individuals.
- Promote disease prevention and wellness.
- Refuse to participate in illegal or unethical acts and report such acts by others.
- Follow sound scientific procedures and ethical principles in research.
- Comply with state and federal laws governing their practice.
- Avoid fraudulent conduct or conflicts of interest and follow ethical business behavior.
- Promote healthcare delivery through improved access, efficacy, and cost of patient care.
- Encourage appropriate stewardship of resources.
- Work to achieve and maintain respectful, functional, beneficial relationships, and communication with all health professionals. Disregard for the effects of one's actions on others, bullying, harassment, intimidation, manipulation, threats, or violence are always unacceptable behaviors.

Revised: 12/94, 12/07, 07/09, 07/12, 12/14, 04/15, 10/21

5. Technical Standards

To perform the tasks required of a respiratory therapist, students must demonstrate the following capabilities during classroom, laboratory, or clinical rotations:

1. **Strength and Mobility**:
    - 1.1 Lift (up to 50 lbs.), move, or push heavy equipment (e.g., ventilators, stretchers, wheelchairs with patients).
    - 1.2 Assist in lifting (up to 50 lbs.) or repositioning patients who may be paralyzed, comatose, or incapacitated.
    - 1.3 Provide physical assistance and care while sitting or standing for 60–90 minutes.
    - 1.4 Reach overhead and below waist to manipulate equipment.
    - 1.5 Administer CPR without assistance.
2. **Manual Dexterity and Eye-Hand Coordination**:
    - 2.1 Manipulate and calibrate equipment.
    - 2.2 Don surgical gloves and fill syringes.
    - 2.3 Set up equipment and perform routine therapies (e.g., aerosol treatments, suctioning, manual ventilation).
    - 2.4 Document patient assessments and therapy outcomes.
    - 2.5 Draw blood.
3. **Sensory Function (in at least one upper limb)**:
    - 3.1 Palpate vessels for blood sampling.
    - 3.2 Palpate pulses.
    - 3.3 Assess skin surface texture and temperature.
4. **Auditory Ability (corrected as necessary with approved accommodations)**:
    - 4.1 Assess breath sounds.
    - 4.2 Respond to patient needs despite muffled ventilator alarms in noisy ICU environments.
    - 4.3 Monitor equipment operation indicated by low-sounding bells or buzzers.
    - 4.4 Function while wearing surgical masks.
    - 4.5 Respond to pages and emergency calls via hospital public address or cell phone/pager systems.
5. **Visual Acuity (corrected as necessary with approved accommodations)**:
    - 5.1 Read patient monitor and ventilator values in dimly lit surroundings.
    - 5.2 Read waveform graphic monitors.
    - 5.3 Recognize and interpret facial expressions and body language.
    - 5.4 Identify normal and abnormal patterns of movement and breathing.
    - 5.5 Discriminate color changes and assess the environment.
6. **Communication (oral and written in English)**:

6.1 Ascertain and record patient histories.

6.2 Monitor and document patient progress.

6.3 Provide clear, audible directions to patients face-to-face.

6.4 Communicate accurate information with physicians and support staff.

6.5 Evaluate information and communicate and document effectively using a computer.

7. Mental/Attitudinal Standards:

7.1 Function safely, effectively, and calmly in stressful situations.

7.2 Maintain composure while managing multiple tasks.

7.3 Prioritize tasks effectively.

7.4 Exhibit social skills (respect, politeness, tact, collaboration, teamwork, discretion) with diverse patients, families, and colleagues.

7.5 Exhibit attitudes and actions consistent with the profession's ethical standards.

The University complies with Section 504 of the Rehabilitation Act and the Americans with Disabilities Act. Students requiring reasonable accommodations should contact Access-Ability Services at Auerbach Hall, Room 209, (860) 768-4312. Accommodations are determined confidentially, and all technical standards must be met with or without approved accommodations.

6. Academic and Progression Policies

This section outlines the academic and progression policies for the Respiratory Care Program (RCP), including admission requirements, progression standards, probation procedures, clinical remediation, dismissal criteria, and policies for leaves of absence or reinstatement. These policies ensure students meet the academic and clinical standards necessary for success in the program.

6.1 Admission Procedure

Admission requirements and procedures are detailed in the University of Hartford Undergraduate Bulletin and on the admissions website (hartford.edu/admission). Students must meet all university and program-specific criteria to enroll in the Respiratory Care Program.

6.2 Progression Requirements

To start and continue in RCP professional coursework, students must meet the following academic standards:

- **Overall GPA**: Maintain a minimum 2.7 GPA.
    - Below 2.7: Students cannot begin professional coursework. If enrolled, students are placed on program probation and must restore their GPA to 2.7 to continue. Failure to do so results in temporary withdrawal from professional coursework, potentially delaying completion.
- **Science and Math Courses**: Earn a C or higher in all biology, chemistry, math, and physics courses.
    - Below C: Retake the course within one year to earn a C or better. If a prerequisite, this may delay progression.
    - Two attempts allowed per course. Failure after two attempts results in dismissal.
- **RCP Courses**: Earn a C+ or higher in all RCP courses (didactic and clinical).
    - Below C+: Retake the course, which may delay completion by up to one year due to course scheduling.
    - One repeat allowed per RCP course. A second failure in the same course results in dismissal.
    - Maximum of two different RCP courses can be repeated. A third grade below C+ in any RCP course leads to dismissal.
    - Two clinical RCP course failures (below C+) result in program dismissal.

6.3 Program Probation

Students are placed on program probation for failing to meet academic or clinical requirements:

- **Academic Requirements**:
  - Maintain a 2.7 overall GPA.
  - Earn a C or higher in all science/math courses.
  - Earn a C+ or higher in all RCP courses.
- **Resolution**:
  - Improve GPA to 2.7 or higher by the following semester
  - Retake science/math courses to earn a C within one year (sooner if a prerequisite).
  - Retake RCP courses to earn a C+ or higher when next offered.
- **Consequences**:
  - Delayed progression: Program completion may be postponed due to course retakes or remediation.

6.4 Clinical Remediation Process

Students must score a "meets expectations" (3 or higher) in all categories of the Trajecsys clinical daily evaluation (See section 8.5 for Trajecsys evaluations). Scores below 3 in any category initiate clinical remediation.

If a student's clinical performance is unsatisfactory (e.g., scoring 2 or lower on a 5-point daily evaluation scale or violating policies), they are placed on clinical remediation:

- A faculty member creates a time-limited remediation plan to meet course objectives (e.g., additional training or supervised practice).
- The Director of Clinical Education and/or the Program Director will meet with the student within two business days to review the remediation plan.
- The student is removed from the clinical rotation until the plan is completed.

Consequences of being placed on clinical remediation:

- Failure to meet remediation objectives or requiring more than one remediation in a semester results in an "F" in the clinical rotation.
- Students must meet with the Director of Clinical Education and/or Program Director within two business days to review the remediation plan. Failure to do so results in missed clinical days, which count as unexcused absences under the attendance policy (see Section 8.8). Each missed day may reduce the clinical grade by 5–15 points, as outlined in the course syllabus.
- Failure to resolve remediation within the provided time frame results in a grade of "F" in the clinical and student will be placed on program probation.

Any act that harms a patient (e.g., breaching patient confidentiality or causing safety errors) results in an 'F' in the clinical rotation, program probation, and possible dismissal

6.5 Dismissal Policy

Students will be dismissed from the RCP for:

1. Failing to earn a C+ in a repeated RCP course.
2. Earning a grade below C+ in more than two RCP courses (clinical or didactic).
3. Earning a grade below C+ in more than one RCP clinical course.
4. Failing to earn a C in a science/math course after two attempts.
5. Violating policies in the Respiratory Policy and Procedure Manual.
6. Committing an act that harms a patient (e.g., breaching patient confidentiality or making patient safety errors).
7. Violating the AARC Code of Ethics.
8. Inability to meet technical standards.
9. Failing to adhere to a remediation plan.
10. Failing to complete and submit onboarding documents required for clinical placement.
11. Inability to be placed at clinical sites due to performance issues.
12. Faculty-initiated dismissal for health, safety, performance, or other reasonable causes.

6.6 Delayed Progression Policy

If progression is delayed (e.g., due to course retakes, remediation, probation, personal, or health issues), students must demonstrate the following before re-entering:

- **Knowledge Retention**: Pass a re-entry exam (covering core RCP coursework) with a minimum score of 77%.
- **Clinical Competency**: Demonstrate all previously achieved clinical skills in a supervised setting.
- **Failure to Meet Requirements**: Students unable to demonstrate knowledge or competency must restart the sequence of all RCP courses.

6.7 Leave of Absence

- **Request Process**: Submit a written request to the Program Director and the Office of Student Affairs (forms available at the Office of Student Affairs or online portal).
- **Return Within One Year**: Follow the Delayed Progression Policy (Section 6.6).
- **Return After One Year**: Follow the Reinstatement Policy (Section 6.8).

6.8 Reinstatement Policy

- **Reapplication**: Dismissed or withdrawn students may reapply as transfer students through the university's transfer admission process (https://www.hartford.edu/admission/undergraduate).
- **Evaluation**: Based on GPA, completion of prerequisites, reason for initial dismissal, and available program space.
- **Course Requirements**:
    - Re-admitted within one year: Completed RCP courses may not need to be repeated if knowledge and clinical competency are demonstrated (See Section 6.6)
    - Delays beyond one year: All RCP courses may need to be repeated.

7. Assessment, Grading, and Academic Integrity

7.1 Quizzes, Exams, and Make-Up Exams

- **Scheduling**: All quizzes and exams must be taken on the designated date and time as outlined in the course schedule.
- **Make-Up Exams**: Make-up exams are allowed only in exceptional circumstances and require prior approval from the instructor. Approved make-up exams must be completed within one week of the original exam date.
- **Technical Requirements**: Students must bring a charged laptop with a functioning webcam to all classes. The laptop must meet the technical specifications to download and operate LockDown Browser and Respondus Monitor, which are required for all quizzes and exams. Refer to the University Student Guide for LockDown Browser and Respondus Monitor for setup instructions.
- **Additional Information**: Comprehensive details regarding quizzes, exams, grading policies, and make-up procedures are provided in the course syllabus.

7.2 Grading

Each course syllabus, distributed on the first day, outlines required competencies, evaluations, assignments, and exams. The grading scale is:

Grade	Range
A	94–100
A-	90–93
B+	87–89
B	83–86
B-	80–82
C+	77–79
C	73–76
C-	70–72
D+	67–69
D	63–66
D-	60–62
F	Below 60

7.3 Academic Honesty

Students must adhere to the University's Academic Honesty Policy, outlined in *The Source* (hartford.edu). Violations will be addressed per the procedures and consequences in that policy.

8. Clinical Education

8.1 Overview of Clinical Curriculum

Clinical education is a cornerstone of the RCP, bridging theoretical knowledge with hands-on practice through structured rotations at affiliated healthcare institutions. This section details the clinical curriculum, affiliations, evaluation processes, and policies governing professional behavior and compliance. The competency-based curriculum includes 33 required competencies across six clinical courses (17 credits):

Clinical Course Summary

Course	Credits	Hours	Focus Area	Schedule
RCP 252	2	120	Oxygen Therapy, aerosol therapy, airway clearance	Fridays, 7 AM-3:30 PM
RCP 353	3	240	Continues RCP 252 skills, adds arterial blood sampling	Tuesdays and Thursdays, 7:00 AM-3:30 PM
RCP 354	3	240	Airway management, ventilator management in ICU's	Tuesdays and Thursdays, 7:00 AM-3:30 PM
RCP 355	3	145	Independent practice in ICU, hemodynamic monitoring	Monday- Thursday, first summer session, 7:00 AM-3:30 PM
RCP 460	3	120	Specialty areas (pediatric/ neonatal care, adult critical care, emergency medicine, pulmonary function, pulmonary rehabilitation, education, leadership)	Varies by rotation
RCP 461	3	120	Specialty areas (pediatric/ neonatal care, adult critical care, emergency medicine, pulmonary function, pulmonary rehabilitation, education, leadership)	Varies by rotation

8.2 Clinical Affiliation Contact Information

Hospital	Name	Email	Phone
Hartford Hospital	Diana Dlugolenski	Diana.Dlugolenski@hhchealth.org	(860) 972-4137
UConn Health Center	Sandy Thibodeau	santhibodeau@uchc.edu	(860) 679-3870
Danbury Hospital	Sue Albino	susan.albino@wchn.org	(203) 239-7878
Baystate Medical Center	Mohamed Ghamnit	Mohamed.Ghamnit@baystatehealth.org	(413) 794-4438
Hospital of Central Connecticut	Kimberly Chambers	Kimberly.chambers@hhchealth.org	(203) 694-8233
Connecticut Children's Medical Center	Chantelle Beach, Lisa Lebon	cbeach@connecticutchildrens.org, llebon@connecticutchildrens.org	(860) 545-8244
Yale New Haven Hospital	Emily Woodworth	emily.woodworth@ynhh.org	(203) 218-7744
Gaylord Hospital	Lori Jano	ljano@gaylord.com	(203) 284-2800
Johnson Memorial Medical Center	Lisa McGee	lisa.mcgee@jmmc.com	(860) 684-8175
Boston Children's Hospital	Christine Desrosiers	Christine.Desrosiers@childrens.harvard.edu	(617) 355-0445
Brigham and Women's Hospital	TBD	TBD	(617) 732-6593
St. Francis Hospital and Medical Center	Robin Silpe-Morel	Rkarolin@trinityhealthofNE.org	(860) 714-4066

8.3 Trajecsys

The RCP uses Trajecsys, an online platform for tracking and assessing clinical activities, including daily performance evaluations, competency assessments, and physician interactions. Students access Trajecsys via hospital computers to clock in and out, document activities, and review feedback from clinical instructors.

Competency evaluations and daily evaluations are entered into the Trajecsys database by the clinical instructor/preceptor. Students are responsible for reviewing daily evaluations, documenting physician interactions, completing program evaluations. In addition, students must sign off on all daily evaluations and physician interactions within 48 hours of the clinical rotation.

Upon arrival at clinical, students are required to clock in using a hospital computer through Trajecsys. Clocking in with a cell phone is not permitted. If a student arrives on time but is unable to access a computer, they may update their clock-in time once one becomes available. The student must notify the clinical instructor/ preceptor to obtain approval for the adjusted time. Failure to secure instructor approval will result in a 5-point deduction from the overall clinical grade.

8.4 Competency Evaluations

The competencies required for each clinical course are included in the syllabi provided on the first day of class. Students must notify the clinical instructor or preceptor when they are ready to perform a clinical competency, after achieving an appropriate level of experience. Each student must complete the required clinical competencies by the end of the semester.

- **Process**:
    1. It is the responsibility of the student to notify the clinical instructor or preceptor when they would like to perform a clinical competency. Students request a competency evaluation after gaining sufficient experience.
    2. Clinical instructors/preceptors document the evaluation in Trajecsys, indicating pass or fail.
    3. The Director of Clinical Education reviews competencies for completeness, incorporating them into the student's clinical grade.
- All 33 competencies must be completed by the end of the program, as outlined in course syllabi.

8.5 Daily Evaluations

Daily evaluations assess clinical performance on a 5-point scale. Students must earn "meets expectations" (3 or higher) in all categories. Scores of 2 or lower initiate remediation (see Section 6.4).

8.6 Physician Interaction

Students are required to obtain three physician interactions each clinical semester as indicated on each clinical course syllabus. Students must communicate with the physician and have the clinical instructor sign off that the interaction occurred. Each student must complete the required physician interaction form by the end of the semester.

- **Process**:
    1. Students are responsible for interacting with physicians in clinical settings.
    2. Clinical instructors/ preceptors are not obligated to remind students of this responsibility.
    3. Students must document physician interaction in Trajecsys for each clinical rotation.
    4. The student must have the clinical instructor/preceptor sign off on the Trajecsys documentation of the physician interaction within 48 hours.
    5. A total of three documented interactions must occur each clinical rotation.
    6. The clinical course overall grade will be reduced as indicated on the course syllabi for failure to complete, document and obtain clinical instructor/ preceptor signature within 48 hours of the interactions.

8.7 CastleBranch

The RCP uses CastleBranch, a secure online platform, to manage and verify clinical compliance requirements, such as immunizations, background checks, fingerprinting, drug screenings, and BLS certification, ensuring students are eligible for clinical internships.

Students must meet all clinical compliance requirements through CastleBranch (see Section 9.1). Non-compliance results in removal from clinical activities and may delay program progression.

8.8 Attendance Requirements

- Excused Absences:
    - Students are allowed one excused absence per semester. Documentation may be required.
    - Lab days are considered clinical days and follow the same rules.

- Unexcused Absences or Additional Excused Absences:
    - First absence: 5-point deduction from the final grade.
    - Second absence: 10-point deduction from the final grade.
    - Third absence: Student will fail the clinical course and be placed on program probation (refer to Section 6.3 Program Probation)

- Notification Requirements:
    - Absences must be reported to the program official and clinical supervisor at least 90 minutes before the shift (e.g., by 5:30 AM for a 7:00 AM shift).
    - Failure to notify results in an additional 5-point deduction from overall grade.

- Special Cases:
    - Jury Duty: Not counted as an absence; provide court documentation.
    - Bereavement Leave: Up to three days for immediate family; additional time may be requested.
    - Military Leave: Follows state and federal regulations; notify the Program Director and Director of Clinical Education.
    - Holidays/Religious Observances: Follow the university calendar. Notify the Director of Clinical Education in advance for religious conflicts.

- Tardiness: Tardiness (defined as not being at the designated area at start time) may result in being sent home, counting as an absence if over 30 minutes late

- Early Dismissal: Early dismissal requires preceptor permission and notification to the Director of Clinical Education within 24 hours.

8.9 Professional Behavior

Students must adhere to University, RCP and clinical site policies. Unprofessional behavior or policy infractions may result in an "F" in the clinical course, delayed progression, or dismissal. Hospital computers are for clinical database entry only. Personal devices are prohibited unless approved for educational purposes.

8.10 Dress Code

- **Tops**: Solid red with University of Hartford logo (purchased from bookstore).
- **Pants**: Slate grey scrub pants (purchased from bookstore).
- **Footwear**: Clean, professional white, grey, or black shoes/sneakers.
- **Other**: Stethoscope, black ink pen, watch with second hand or digital timer, calculator.
- **Hair**: Neat, clean, pulled back if longer than shoulder length.
- **Personal Hygiene**: Maintain hygiene; no scented products.
- **Fingernails**: Short (no longer than ¼ inch above fingertip), clear or neutral polish (no chipped polish), per clinical site guidelines.
- **Tattoos**: Covered during clinical hours, per clinical site guidelines.
- **Uniforms**: Clean and wrinkle-free.

8.11 Inclement Weather Policy

If the University delays or closes due to weather, students do not report to clinical rotations and must notify the clinical supervisor at their clinical site. Missed hours are deducted from required hours, and no makeup is needed. Students at clinical sites during a closure are dismissed at the closing time.

8.12 Lunch Breaks

Students are permitted one 30-minute lunch break and one 15-minute break (morning or afternoon) per eight-hour clinical rotation, assigned by the clinical preceptor/instructor.

8.13 Transportation to and from Clinical Sites

Clinical facilities are 20–80 minutes from campus. The University does not provide transportation. Students must arrange their own transport (e.g., personal car, public transportation, taxi, or rideshare).

8.14 Parking

Parking fees at clinical sites are the student's responsibility.

8.15 Student or Patient Accidents

- **Student Injuries**: Immediately inform the clinical preceptor/instructor. Seek treatment through the affiliate's emergency services or personal physician. Medical expenses are the student's responsibility. Complete an incident report and submit it to the clinical site's department manager and the Program Director or Director of Clinical Education.

- **Patient Incidents**: For injuries or unsafe practices (e.g., incorrect procedures, medication errors, falsifying documentation), immediately inform the clinical preceptor/instructor. Complete an incident report and submit it to the affiliate's department manager and the Program Director or Director of Clinical Education. The student may be temporarily removed from the clinical area and return only after a formal discussion with the Program Director or Director of Clinical Education. Clinical staff or hospital management may complete a critical incident report.

9. Program Requirements and Compliance

9.1 Eligibility Requirements for Clinical Rotations

To participate in clinical rotations, students must meet the following requirements:

- **BLS Certification**: Obtain Basic Life Support (BLS) certification from the American Heart Association (AHA) during the fall of the first professional phase year. This certification is valid for two years, and students are responsible for arranging recertification if it expires before program completion.
- **Health Requirements**: Complete a physical examination and provide proof of vaccinations, including rubella/measles, varicella, and annual influenza. Hepatitis B vaccination is optional. Annual tuberculosis (TB) testing is required. COVID-19 and influenza vaccinations are mandatory; declination may limit clinical placement options, potentially preventing program completion.
- **Health Insurance**: Provide proof of active health insurance coverage prior to starting clinical rotations.
- **Drug Screening, Background Check, and Fingerprinting**: Complete a criminal background check (including fingerprinting) and drug screening. Any issues must be resolved to secure clinical placement. Failure to clear these checks will prevent participation in clinical rotations and program completion.
- **Orientation and Identification Badges**: Attend mandatory site-specific orientations arranged by the Director of Clinical Education. Students must wear clinical identification badges at all times while at clinical sites.

9.2 Submission and Maintenance of Clinical Requirements

- Students must upload and maintain up-to-date clinical documentation (e.g., immunizations, background checks, drug screenings, BLS certification) through CastleBranch (refer to Section 8.7 for CastleBranch details).
- Initial documentation must be submitted by October 31 of the first professional phase year. Annual updates are required by August 31 thereafter.
- Non-compliance will result in ineligibility for clinical placement, recorded as an unexcused absence (see Section 8.8), and may lead to delays in program progression or dismissal.

9.3 Compliance with Patient Privacy and Confidentiality

Students must comply with the Health Insurance Portability and Accountability Act (HIPAA), a federal law protecting patient privacy. Access to patient information is limited to assigned duties. Discussing patient details in public areas or with unauthorized individuals is a violation. In academic settings, exclude identifying information from presentations, reports, or case studies. Violations may result in disciplinary action, including dismissal. Students must complete HIPAA training for each clinical rotation.

9.4 Professional Liability Insurance

The University provides professional liability insurance coverage for students in the Respiratory Care Practitioner (RCP) program. Students may choose to purchase additional insurance coverage as an optional resource through Proliability (proliability.com, 800-375-2764) to supplement their protection during clinical training or professional activities.

9.5 Additional Program Costs

In addition to tuition, room, board, and general fees, students should budget for the following:

Out-of-Pocket Expenses

- **Uniforms**: 1–2 sets of hospital scrubs with the University logo, purchased from the bookstore. Appropriate clinical footwear is required.
- **Stethoscope**: Cost varies depending on type and quality.
- **Immunizations and Physical Exams**: Costs depend on health insurance coverage.
- **Parking Fees**: May be required at clinical sites.
- **Additional Certifications**: Beyond the initial BLS certification, students are responsible for costs.
- **BLS Recertification**: Paid by the student.
- **Laptop**: A laptop with a webcam is required for all RCP classes. It must meet specifications to run Respondus LockDown Browser (See section 7.1 for a student guide with specifications).

Included in Course/Laboratory Fees

- Initial AHA BLS certification
- Criminal background check
- Drug screening
- Online immunization tracking system
- Classmates online simulation software

9.6 Professional Membership and Resources

Students are encouraged to join professional organizations to access valuable resources such as journals, exam preparation tools, networking opportunities, and scholarships. Recommended organizations include:

- **American Association for Respiratory Care (AARC)**
  Offers professional development resources, continuing education, and access to journals. Students can join through the Early Professional Membership program at aarc.org.
- **Connecticut Society for Respiratory Care (CTSRC)**
  Provides regional networking, educational events, and scholarship opportunities. Learn more at ctsrc.org.
- **National Board for Respiratory Care (NBRC)**
  Responsible for credentialing and certification. The NBRC website includes exam information, licensure guidance, and preparation materials. Visit nbrc.org.
- **American College of Respiratory Therapy Education (ACRTE)**
  Supports respiratory care educators and students with academic resources. Visit acrte.org.
- **Lambda Beta Society**
  The national honor society for the respiratory care profession. Offers recognition and scholarship opportunities for high-achieving students. More information at lambdabeta.org.
- **Commission on Accreditation for Respiratory Care (CoARC)**
  Accredits respiratory care educational programs to ensure graduates are prepared for practice. Learn more about accreditation standards and program quality at coarc.com.

10. Academic and Clinical Grievance Policies

10.1 Appeals from Academic Decisions

Appeals relating to the decisions of an instructor(s) in the implementation of an academic policy can be made only on the grounds of alleged unjust or capricious action on the part of an instructor. per the policy in the University Student Handbook, *The Source* (hartford.edu):

Steps in the Appeals Process:

Step 1: The student must contact the instructor (in person, by phone, or by electronic means) to discuss the issue in question, stating the grounds for the appeal and presenting evidence to support the grounds. This must be completed within ten working days* after notification of the academic decision during a semester, and within ten working days after notification at the end of a semester.

Step 2: The instructor upon receiving an appeal of an academic decision from a student has ten working days to respond.

Step 3: If the situation is not resolved with the instructor, the student may request a meeting with the department chair or designee of the unit in which the course is taught (in person, by phone, or by electronic means) within ten working days. This meeting must occur within ten working days of the student's request for a meeting.

Step 4: If the situation is still not resolved, the student may submit a written appeal with supporting evidence to the dean (or designee) of the college in which the course is taught. This must occur within ten working days after the meeting with the department chair (or designee). The dean within ten working days shall decide whether the appeal warrants further investigation. If the dean decides that no further appeal is warranted, no further appeal is allowed.

Step 5: If the dean decides the appeal warrants further investigation, the appeal and evidence shall go to the Academic Standing Committee (ASC) of the college or program in which the course was taught at the next regularly scheduled meeting of ASC. The ASC meets (when necessary, by electronic means), and reviews the appeal by hearing the evidence presented by the student and the faculty member. Both are invited to meet with the ASC to respond to questions on the issues, whenever possible in person or if necessary via electronic means. The dean of students or designee may be invited to attend by either the student or ASC with voice but no vote.

Step 6: For the ASC meeting, the student shall have the right to select a meeting advisor. The meeting advisor shall not be licensed in the field of law, shall be a current member of the University community (limited to faculty, staff, and students), and not otherwise

involved in the case. The meeting advisor shall not address the committee or otherwise directly participate, but the accused may request a short recess to consult the meeting advisor.

Step 7: After hearing the appeal, the ASC shall submit a report and recommendations to the dean within five working days. The committee shall make the final determination of the case. The Dean informs the parties of the decision in a timely manner. No further appeal is allowed. *Working Days: For the purposes of this policy, working days are defined as days the University is open to conduct the work of the University, Monday through Friday. It excludes, therefore, days Monday through Friday in which the University is closed due to holidays or inclement weather.

10.2 Clinical Grievance Policy

Clinical grievances follow the same process as academic grievances (see Section 10.1), starting with the clinical instructor or preceptor, then escalating to the Director of Clinical Education, Program Director, Department Chair, and Dean, as necessary.

11. Program Commencement and Certification

11.1 Degree Requirements

To be eligible for the Bachelor of Science in Respiratory Care, students must:

- Submit a degree application to the Registrar's Office by the published deadline.
- Successfully complete all required coursework in the program curriculum.
- Satisfy all financial obligations to the University.
- Receive formal approval for degree conferral from the faculty, Board of Trustees, and Board of Regents.

Participation in commencement ceremonies is encouraged but not required. Degree conferral is not dependent on passing external certification or licensure examinations.

12. Appendix

12.1 Bachelor of Science in Respiratory Care Curriculum

First Year

Fall			Credits	Spring			Credits
CH[4]	114 or 110	Prin. of Chem. I or College Chemistry I	4	CH[4]	136 or 111P	Prin. of Chem. II or College Chemistry II	4
WRT	110W	Academic Writing I	3	WRT	111W	Academic Writing II	3
CS or M	110 or 114P	Introduction to Computers or Everyday Statistics	3	M[4]	110 or 140 or 144	Modeling with Elem. Functions or Pre-Calculus w/Trig or Calculus I	3 or 4 or 4
BIO[4]	122	Biological Science I	4	[1]		Humanities Elective	3
US	150	Student Success Seminar	1	HS	111P	Health Care Concepts	3
			15				17

Sophomore Year

Fall			Credits	Spring			Credits
BIO[4]	212	Anatomy & Physiology I	4	BIO[4]	213	Anatomy & Physiology II	4
RCP[5]	212	Respiratory Therapy	3	RCP[5]	210	Respiratory Pharmacology	2
RCP[5]	251	Clinical Practice I	2	RCP[5]	213	Pulmonary Diagnostics and Therapy	3
BIO[4]	272W	Genetics	3	RCP[5]	252	Clinical Practice II	2
PHY[4]	102 or 101 or 120	Electricity and the Body or Mech., Heat and the Body or Algebra-Based Physics I	4	BIO[4]	340	Medical Microbiology	4
			16				15

Junior Year

Fall			Credits	Spring			Credits
RCP[5]	214	Mechanical Ventilation and Resuscitation I	4	RCP[5]	215	Mechanical Ventilation and Resuscitation II	4
RCP[5]	325	Cardio-Pulmonary Anatomy & Physiology	4	CMM	110 or 111 or 115	Communication in the Digital Age or Business and Prof. Comm. or Improving Comm. Skills	3
RCP[5]	331	Medical-Surgical Problems	3	RCP[5]	333	Neonatal Pediatric Respiratory Care	3
RCP[5]	353P	Clinical Practice III	3	RCP[5]	354P	Clinical Practice IV	3
RCP[5]	360W	Respiratory Care Ethics	3	RCP[5]	443	Respiratory Insufficiency and Patient Rehabilitation	3
			17				16

Summer			Credits
RCP[5]	355	Clinical V	3
			3

Senior Year

Fall			Credits	Spring			Credits
RCP[5]	460W	Advanced Clinical Practice I	3	RCP[5]	461P	Advanced Clinical Practice I	3
UISS		University Interdisciplinary Studies (Social Context)	3	UISC		University Interdisciplinary Studies (Cultures)	3
HS[2]	_____	Upper-Level HS Elective	3	UIST		University Interdisciplinary Studies (Technology)	3 - 4
[3]		Social Science Elective	3	[3]		Social Science Elective	3
UISA		University Interdisciplinary Studies (Arts)	3				
			15				12-13
							Total Credits:125-127

[1] Humanities electives include: Communication, English, History, Art History, Philosophy, Languages, Music Theory, Theatre, UISA and UISC courses

[2]See back for a listing of the health science courses that may be used to fulfill this requirement. Must be completed with a C (2.0) or higher.

[3] Social Science electives include: Politics and Government, Psychology, Sociology, Economics, and UISS courses

[4]Sciences must be completed with a C (2.0) or higher. May not be taken pass/no pass.

[5] Required Respiratory Care (RCP) courses must be completed with a C+ (2.33) or higher. May not be taken pass/no pass.

This program is accredited by the Commission on Accreditation for Respiratory Care (CoARC).

All inquiries regarding accreditation should be directed to CoARC, 1248 Harwood Road, Bedford, TX 76021, (800) 874-5615

***Please see the University of Hartford Undergraduate Bulletin for an official list of all program requirements*

Updated 12/2023

12.2 Clinical Remediation Form

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)

Conditions of remediation and probation:

As Evidenced By:
(Cite specific performance example(s).)

Instructor/Preceptor Recommendations:
(Include date for completion of an action plan and follow-up evaluation)

Conditions of clinical remediation:

Student Comments:

Student Signature: _____ Date: _____

Program Director: _____ Date: _____

Director of Clinical Education: _____ Date: _____

12.3 Critical Incident Report

University of Hartford Respiratory Care Critical Incident Report

A critical incident is a positive or negative report reflecting any action or behavior exhibited by the student that is exemplary, violates clinical policies, or is harmful or potentially harmful to patient care.

Student: _____
Date of incident: _____
Report submitted by: _____

Incident:

_____
_____
_____
_____

Nature and consequence of incident:

_____
_____
_____
_____

Action taken:

_____
_____
_____
_____

Student Signature: _____ Date: _____

Program Director: _____ Date: _____

Director of Clinical Education: _____ Date: _____

12.4 Student Acknowledgment and Agreement

Program Expectations and Responsibilities

Students are expected to adhere to the following academic, non-academic, and clinical requirements:

1. Meet all academic and non-academic standards outlined in this manual.
2. Complete all course and clinical requirements as specified.
3. Maintain satisfactory attendance per Section 8.8. Non-compliance, including failure to maintain up-to-date clinical documentation, counts as an unexcused absence and may lead to progression delays or dismissal.
4. Promptly update personal information (name, address, phone number) with the University.
5. Maintain open and professional communication with the Program Director and Director of Clinical Education.
6. Understand that relevant information may be shared between University and clinical faculty to support student success and ensure patient safety.
7. Comply with all clinical site policies and procedures.
8. Upload and maintain current clinical documentation via CastleBranch (see Section 8.7).

Student Acknowledgment

I have read and understand the expectations and responsibilities outlined in the Respiratory Care Program Policy and Procedure Manual, including the standards above. I agree to abide by all program and University policies. I understand that failure to meet these expectations may result in disciplinary action, up to and including dismissal. I will notify the University of any changes to my personal contact information. I will return this signed acknowledgment to the Program Director or Director of Clinical Education within two business days of receipt.

Student Name (Print): _____

Student Signature: _____

Date: _____