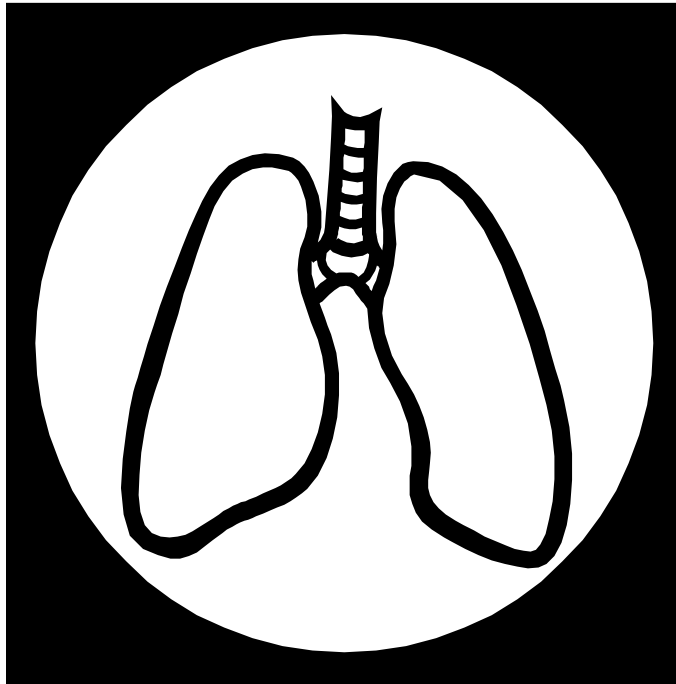


**Respiratory Care Program
Student Handbook
2021-2022**



750 Chase Parkway
Waterbury, CT 06708
nv.edu

**RESPIRATORY CARE PROGRAM HANDBOOK
2021-2022**

The Respiratory Care Program Handbook is a supplement to the Naugatuck Valley Community College Catalog and the Student Handbook. Please refer to those sources for additional information about college policies and services.

This handbook outlines policies specific to the Respiratory Care Program. Respiratory Care students are expected to become familiar with its contents and abide by the policies of the program and college. These policies apply to students in all instructional settings.

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SECTION 1: PROGRAM INFORMATION

1.1: Program Faculty

Program Director	Margaret Guerrera MS, RRT
Director of Clinical Education	Susan Anderson, MS, RRT
Medical Director	David Hill, MD
Lab/Clinical Instructors	Laura Bean, BS, RRT
	Stacey Camp, BS, RRT
	Betty Joseph-Jerome, MS, RRT
	Justine Kasparian, AS, RRT
	Kristy Morrone, AS, RRT
	Julius Sarfo, BS, RRT, NPS

1.2: Program Description

The Respiratory Care program at Naugatuck Valley Community College is a two-year associate degree program designed to develop the competencies and knowledge required for entering the field of Respiratory Care. [See Appendix I for curriculum.](#)

The Respiratory Care program is accredited by The Commission on Accreditation for Respiratory Care (CoARC). Information regarding CoARC and the accreditation of respiratory care programs is available at www.coarc.com. The CoARC program number is 200460.

1.3: Program Mission Statement and Goal and Outcomes

Mission Statement:

The Respiratory Care Program at Naugatuck Valley Community College is designed to prepare students to enter the field of Respiratory Care with the skills necessary to practice as proficient and competent Respiratory Therapists. Our program is designed to meet the evolving health care needs of our diverse community and our faculty are committed to a student-centered approach to teaching and learning that focuses on the development of evidence-based, ethical, and collaborative practice among our students and graduates.

Program Goal:

To prepare graduates with demonstrated competence in the cognitive, psychomotor, and affective learning domains of respiratory care practice as performed by registered respiratory therapists.

Program Outcomes:

Upon the successful completion of the respiratory care program, the graduate will be able to:

1. Assist physicians/licensed independent practitioners in the diagnosis, management, and treatment of patients affected by cardiopulmonary disorders.
2. Collect and evaluate clinical information relevant to their role as a respiratory therapist.
3. Participate in the inter-disciplinary plan of care.
4. Provide patient education concerning health management and prevention of respiratory disease.
5. Demonstrate proficiency in all skills and competencies required of a respiratory therapist as described by the Commission on Accreditation for Respiratory Care (CoARC).
6. Promote evidence-based practice by using established clinical practice guidelines and evaluating published research for its relevance to patient care.
7. Collaborate and communicate effectively with all members of the health care team to enhance patient care.
8. Adhere to AARC statement of ethics and professional conduct.
9. Apply principles and practices of patient safety and process improvement in all aspects of respiratory care.

1.4: Description of the Respiratory Care Profession

Respiratory therapists, as members of a team of health care professionals, work to evaluate, treat, and manage patients of all ages with respiratory illnesses and other cardiopulmonary disorders in a wide variety of clinical settings. Respiratory therapists should demonstrate behavior and ethics that are consistent with the standards and ethics of all health care professionals. In addition to performing respiratory therapy procedures, respiratory therapists are involved in clinical decision-making (such as patient evaluation, treatment selection, and assessment of treatment efficacy) and patient education. The scope of practice for respiratory therapy includes:

- acquiring and evaluating clinical data;
- assessing the cardiopulmonary status of patients;
- performing and assisting in the performance of prescribed diagnostic studies, such as drawing blood samples, performing blood gas analysis, and pulmonary function testing;
- utilizing data to assess the appropriateness of prescribed respiratory care;
- establishing therapeutic goals for patients with cardiopulmonary disease;
- participating in the development and modification of respiratory care plans;
- case management of patients with pulmonary diseases;
- initiating ordered respiratory care, evaluating and monitoring patients' responses to such care and modifying the prescribed respiratory therapy and cardiopulmonary procedures, and life support endeavors to achieve desired therapeutic objectives;
- initiating and conducting prescribed pulmonary rehabilitation;
- providing patient, family, and community education;
- promoting cardiopulmonary wellness, disease prevention, and disease management;
- participating in life support activities as required; and
- promoting evidence-based medicine; research; and clinical practice guidelines.

1.5: Professional Organization

The [American Association for Respiratory Care](#) and [The Connecticut Society for Respiratory Care](#) are the national and state respiratory care professional organizations. Students are strongly encouraged to join and show support for their future profession. A student membership is available the AARC. Information is available through the program director.

1.6: Code of Conduct

Students in the NVCC Respiratory Care program are expected to conduct themselves in a manner compatible with the high standards of the respiratory care profession and in accordance with the [Connecticut State University and College Policy on Student Conduct](#), the [NVCC Student Handbook](#) and the [American Association of Respiratory Care Statement of Ethics and Professional Conduct](#).

Respiratory care students are entering a profession that requires a high level of personal integrity and therefore are expected to adhere to these standards in all program settings and during their everyday life. In addition, respiratory therapists and respiratory care students must be able to cooperate and communicate effectively with individuals from diverse backgrounds and are expected to be respectful and understanding of others including their patients, co-workers, supervisors, and instructors.

Students are expected to comply with established college, program and clinical site policies and procedures. Violations of any of these policies and procedures may result in disciplinary action up to and including dismissal from the program.

1.7: Continuing Notice of Nondiscrimination:

Naugatuck Valley Community College does not discriminate on the basis of race, color, religious creed, age, sex, national origin, marital status, ancestry, disability, including but not limited to present or past history of mental disability, learning disability or physical disability, sexual orientation, gender identity or expression or genetic information in treatment or employment at the College, in admission or access to the College, or in any other aspect of its programs and activities. In addition, the College does not discriminate in employment on the additional basis of veteran status or criminal record. The College is required by Title VI of the Civil Rights Act of 1964 (Title VI), Section 504 of the Rehabilitation Act of 1973 (Section 504), Title II of the Americans with Disabilities Act of 1990 (Title II), Title IX of the Education Amendments of 1972 (Title IX), the Age Discrimination Act of 1975 (Age Act), and their respective implementing regulations at 28 C.F.R. Part 35 and 34 C.F.R. Parts 100, 104, 106 and 110, not to discriminate on the basis of race, color, or national origin (Title VI); disability (Section 504/Title II); sex (Title IX); or age (Age Act). Inquiries concerning the application of each of the aforementioned statutes and their implementing regulations to the College may be referred to the applicable College Coordinators: Leah Glende, Director of Diversity & Inclusion/Section 504/Title II/ADA/Age Act Coordinator, CSCU System Office, glendel@ct.edu; 860-723-0727; Angelo Simoni, CSCU

Title IX Coordinator – CSU System Office, 860-723-0165; Sarah Gager, Dean of Student Services/Deputy Title IX Coordinator, Section 504/Title II/ADA/Age Act Coordinator (Students), Naugatuck Valley Community College, Room K509a, 750 Chase Parkway, Waterbury, CT, 203-575-8086 or to the U.S. Department of Education, Office for Civil Rights, at (617) 289-0111 or 5 Post Office Square, 8th Floor, Boston, MA 02109-3921 (Rev 9/28/20)

SECTION 2: ACADEMIC POLICIES

2.1: Students with Special Needs-ADA

Students with Special Needs-ADA: Students who may require academic adjustments on the basis of a disability are encouraged to contact the Counselor for Students with Disabilities. Contact Terry Latella in K519B or call 203-596-8608 in Waterbury and 203-437-9699 in Danbury) at the beginning of each semester. After providing documentation and completing the disability disclosure process, students are then encouraged to speak with their instructor(s) within the first two weeks of the semester to discuss any adjustments approved by the appropriate disabilities contact. Adjustments are not retroactive. Instructors, in conjunction with appropriate college personnel, will provide +assistance and/or adjustments only to those students who have completed the disability disclosure process.

2.2: Student Records and Grades

Students' records and grades are confidential. The program maintains a file on each student. The file may be viewed by the faculty, and by the student upon their request. Any viewing of the file by another individual requires written release by the student. Any communication, whether verbal or written, requiring information about the student's academic record or progress will not be done without the written consent of the student.

All students must receive a "C" or better in all required (including general education and elective courses) and prerequisite courses to fulfill program and graduation requirements. Grading policies for respiratory care courses are included on the course syllabus.

For courses that include a laboratory component (RSP H 112, RSP H 141 and RSP H 262), students must obtain at least a 70 exam/quiz average. This average does not include the medical terminology quizzes in RSP H 141.

An explanation of semester hours, academic load, and the college grading system are located in the college catalog which is available online at <http://www.nv.edu/> .

The following courses are lab courses: RSP H 112, 141 and 262. In these courses, students must obtain a calculated numeric exam/quiz grade of 70% to achieve a passing grade for the course. This grade does not include the Medical Terminology quizzes administered in RSP H 141.

Grading Standards and Equivalency Table

Letter Grade	Grade Scale	GPA Equivalency	Description
A	93-100	4.0	Distinguished achievement in all phases of the course or assignment
A-	90-92	3.7	
B+	87-89	3.3	
B	83-86	3.0	High level of achievement in some phases of the course or assignment
B-	80-82	2.7	
C+	77-79	2.3	
C	73-76	2.0	Basic understanding of the subject of the course or assignment
C-	70-72	1.7	
D+	67-69	1.3	
D	63-66	1.0	Minimal performance in the course of on the assignment
D-	60-62	0.7	
F	0-59	0.0	Failure

Final course grades are computed to a whole number. A grade at or above .50 truncated will be rounded up to the next whole number; any grade at or below .49 truncated will be rounded down to the whole number.

Examples:

Final Course Grade = 72.49 = 72 = C-

Final Course Grade = 72.50 = 73 = C

Students who withdraw from the Respiratory Care courses will receive a grade of "W". Students must withdraw from the course or program by the last day of college-wide student- initiated withdrawal period. Any student who decides to leave the program after this date, will receive a zero for any course work not completed (including the final exam) and the grade for the course will be calculated accordingly.

2.3: Performance Improvement Plan

When a student's performance does not meet expectations and/or learning outcomes, a [Performance Improvement Plan \(PIP\)](#) 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 PIP. It is up to discretion of the instructor to determine whether a PIP is necessary for unsatisfactory progress in the classroom.

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 PIP, the faculty or DCE must notify the Program Director. The Program Director may request to meet with the student to discuss the PIP.

2.4: Program Probation

A student is placed on program probation when the student commits a serious single violation of program policy such as a patient confidentiality breach or academic dishonesty or a serious patient safety error. See form in [Appendix B](#)

2.5: Severance Policy

Students are severed from the respiratory care program when any of the following occur:

1. Failure of any respiratory courses including clinical
2. Student initiated withdrawal ([See section 2.2 –Student Records and Grades paragraph 7 for further information on withdrawal](#))
3. Faculty initiated severance for reasons of health, safety, performance, or other reasonable cause.

It is the responsibility of the student to contact the Program Director to complete the severance procedure. Students who do not complete the severance procedure are not eligible for readmission into the program. The procedure consists of the following steps:

1. Meet with the Program Director for exit interview.
2. Completion of the NVCC Student Withdrawal Process

The student must complete this procedure within one month of the last day attended and not later than the last day for student-initiated withdrawal which is indicated on the college academic calendar. Students who voluntarily leave the program at any point in the semester including the summer session and **do not** complete the NVCC Student Withdrawal form will receive grades of zero for any remaining course work not completed (up to and including the final exam) and the grade for the course will be calculated accordingly.

Permanent severance occurs when a student:

1. Earns a final course grade below a C in any respiratory courses being audited or repeated following readmission.
2. Earns a grade below C in any respiratory courses following readmission into the program.

2.6: Readmission Policy

- Readmission to the program can only be granted if there are available openings, clinical resources, and faculty.

- Students seeking readmission must apply directly to the Program Director within 6 months of severance from the program. The request for readmission must be submitted in writing to the program director.
- Readmission to the program is subject to faculty review, clinical evaluations, current GPA of 2.5 and evidence of interim efforts on the candidate's part to strengthen areas of weakness.
- A medical clearance is required prior to readmission if the withdrawal was due to health reasons ([See section 3.4 for additional information](#)).
- If readmission is granted, the student must re-enter the program within a year from his/her point of exit.
- Students will be allowed only one readmission into the program regardless of their reason for leaving the first time.
- Students who are readmitted to the program will be required to complete the program in sequence.
- An academic and clinical plan will be established by the Program Director and the Director of Clinical Education for readmitted students. The plan is individualized according to each readmitting student's needs. This plan may include auditing respiratory courses that the student had successfully completed in the past or the demonstration of clinical competence prior to enrolling in a clinical course.
- Health requirements, background checks, drug screens and CPR certification must be up to date.
- Students who were dismissed from the program due to violations of the BOR Student Code of Conduct may be ineligible for readmission to the Respiratory Care program.

2.7: Academic Appeals/Student Grievance Policy

When a withdrawal or exclusion of a Nursing/ Allied Health student from classes and/or clinical is contemplated, there are two jurisdictional authorities:

1. The authority of the divisions faculty to withdraw a student for reasons of health, safety, performance, or other reasonable cause.
2. The right assured to a student by the Board of Regents of the CT State Colleges and Universities' policy to appeal any decision affecting them (academic appeals, disciplinary withdrawal, or other).

There two types of Academic Appeals at NVCC:

1. General Academic Appeals are for appeals by students in any program or discipline. This process applies to any student who fails the academic aspect of a course.
2. Allied Health/Nursing Clinical Academic Appeals are for those appeals which deal specifically with failure of the clinical portion of a course.

Time of appeals:

Allied Health/Nursing General Academic Appeals and Clinical Academic Appeals require immediate decisions in order for students not to miss either critical classes or the next cycle of classes. Appeals in these categories must be initiated by the student within 48 hours of an unsatisfactory grade.

The Academic Appeals policy is contained in [Appendix A](#). Copies of necessary forms are available from the division secretary located in room F105 or they are available in [NVCC Student Handbook](#).

Student grievances are appeals that are non-academic in nature. The procedure for filing a grievance is found on page 35 of the [college catalog](#).

2.8: Program Attendance Policy

Classroom and Laboratory

- The faculty expects that each student will exercise personal responsibility regarding class attendance.
- All students are expected to attend every class session of each course for which they are registered.
- Students are responsible for all that transpires in class whether or not they are in attendance, even if absences are the result of late registration or add/drop activity at the beginning of a term as permitted by college policy.
- The faculty defines excessive absence or lateness as more than the equivalent of one week of class meetings during the semester. Distance Learning courses will use criteria established by the instructor.
- When presence counts towards a class participation grade, excessive absence or lateness may, at the discretion of the instructor, lower a student's course grade.
- Specific attendance policies are included in the syllabus for each course.

Clinical Attendance

Students are expected to attend all clinical assignments, arrive on time and remain at the clinical site for the scheduled hours. In the event of illness or other unforeseen circumstance that prevents a student from attending all or part of the clinical day, the student is expected to call the clinical site at least one hour before the start of the clinical shift for an absence and at least 15 minutes before the start of the clinical shift for a tardy. Students are to speak directly to the charge therapist or their clinical instructor when calling in an absence or tardy. The charge therapist can be reached through the hospital operator. Students are to also notify the

Director of Clinical Education of their attendance incident. Students are to inform their clinical instructor at the beginning of a shift if they must leave early.

Students who fail to notify the hospital charge therapist of an absence (No show/No call) will be placed on clinical probation. A repeated offence will result in removal from the program and a failing grade for that clinical course.

Students are allowed one excused clinical absence and one excused late or early dismal (less than 90 minutes) without receiving a deduction in their clinical grade for the semester. Any additional absence or late/early dismal incident will result in a 6-percentage point decrease per occurrence in the final clinical grade.

Students may be sent home from clinical if, in the opinion of the clinical instructor, the student poses a health hazard to their patients. This will count as an excused clinical attendance incident.

2.9: CPR Certification

Students must be CPR certified with the American Heart Association or the American Red Cross, Basic Life Support (BLS) for health care providers. CPR certification is not part of the respiratory care curriculum. Students are expected to have a current CPR card (BLS for health care providers) and upload it to Castlebranch before beginning the clinical component of the program. Students are to assume full responsibility for maintaining current CPR certification while in the respiratory care program. Students are not allowed to attend clinical with an expired CPR card. Clinical days missed for this reason will be counted as absences. ([See section 2.6 -Clinical Attendance Policy](#))

2.10: NVCC Academic Misconduct Statement

The first offense of academic misconduct may result in a grade of “F” or “0” for the assignment and/or failure in the course at the discretion of the instructor. (Please see the Student Handbook on the College website link for more information: <https://nv.edu/portals/0/documents/studentservices/studenthandbook.pdf>.) Any subsequent instances of academic misconduct will require the student to meet with the Dean of Academic Affairs. The Dean will determine the consequence for the subsequent instances of academic misconduct. In addition, as academic misconduct is a violation of the Student Code of Conduct, referral will be made to the Dean of Student Services and addressed as appropriate.

A student may not obtain a transcript notation of “W” in a course if there exists substantial reason to believe the student has engaged in academic misconduct in the course. A transcript notation of “W” will only be permitted for such students when the final resolution results in finding the student did not commit academic misconduct in the course.

At NVCC we expect the highest standards of academic honesty. Academic misconduct is prohibited in accordance with the Board of Regents ***Student Code of Conduct*** (Part D. Prohibited Conduct, 1. academic misconduct). This policy prohibits cheating on examinations ([see Appendix H: Testing Guidelines](#)), unauthorized collaboration on assignments, unauthorized access to examinations or course materials, plagiarism, and other proscribed activities. Academic misconduct extends to any student who aids in another's student's cheating. Plagiarism is defined as the use of another's idea(s) or phrase(s) and representing that/those idea(s) as your own, either intentionally or unintentionally.

The first offense of academic misconduct may result in a grade of "F" or "0" for the assignment and/or failure in the course at the discretion of the instructor. (Please see the Student Handbook on the College website link for more information: <https://nv.edu/portals/0/documents/student-services/student-handbook.pdf>.) Any subsequent instances of academic misconduct will require the student to meet with the Dean of Academic Affairs. The Dean will determine the consequence for the subsequent instances of academic misconduct. In addition, as academic misconduct is a violation of the Student Code of Conduct, referral will be made to the Dean of Student Services and addressed as appropriate.

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ACADEMIC INTEGRITY & PLAGIARISM

Allied Health and Nursing students are entering professions that require academic, professional, and personal integrity. Students are expected to conduct themselves in a manner consistent with the standards of that profession and the program in which they are enrolled. Any violation of appropriate conduct will be dealt with according to the policies outlined in the program handbook, the NVCC College Student Handbook and the Connecticut Community Colleges Board of Regents' Policy on Student Conduct. Academic integrity is demonstrated by not engaging in conduct that has as its intent or effects the false representation of a student's academic performance, including but not limited to:

- cheating on an examination,
- collaborating with others in work to be presented, contrary to the stated rules of the course,
- plagiarizing, including the submission of others' ideas or papers (whether purchased, borrowed or otherwise obtained) as one's own,
- stealing or having unauthorized access to examinations or course materials,
- falsifying records or laboratory or other data,
- submitting, if contrary to the rules of a course, work previously presented in another course, and

- knowingly assisting another student, in any of the above, including an arrangement whereby any work, classroom performance, examination, or other activity is submitted or performed by a person other than the student under whose name the work is submitted or performed.

False representation of a student's academic performance also includes knowingly giving or accepting assistance in the clinical area contrary to the stated rules of the course.

PLAGIARISM is the intentional copying of another's idea(s) or phrases(s) and representing that/those idea(s) as your own, either intentionally or unintentionally. This includes copying a friend's paper as well as a published work. Penalties for plagiarism are as follows:

First incident: The first incident of plagiarism will be documented as unintentional plagiarism and as such will be treated as follows – Conference with instructor followed by the mandatory resubmission of the work with all materials correctly documented as stated in the course syllabus.

Second incident: The second incident of plagiarism will be documented as intentional. There will be no opportunity to re-submit the paper and the grade for that paper will be recorded as an "F" and will result in a grade of "F" for the course. See above [Academic Misconduct Statement](#) for further information regarding subsequent incidents of misconduct.

Selected portions of the curriculum are taught, reinforced or reviewed through the use of educational software/instructional media such as audiovisual tools, computer simulations, and/or online learning activities. Students are required to adhere to all copyright polices.

2.11: Expected Graduation Date

It is the expectation of the program faculty that students complete the program within two years from the year the student was admitted into the program. Students readmitted to the program are expected to complete the program no more than three years from their original admission date.

2.12: Respiratory Care Laboratory Use

The laboratory is located in F351. Students are supervised in the laboratory setting by designated laboratory instructors and other program faculty during designated laboratory instruction.

Students are allowed to practice skills independently in the laboratory but are required to notify program faculty or allied health staff of their intention to use the laboratory for independent practice.

The laboratory is available to students during breaks/vacations when the college is open and faculty/division staff is available to monitor student activities; however, students are required to make arrangements in advance with faculty/staff to use the lab during these times.

The laboratory is not available on weekends nor is it available on holidays when the college is officially closed.

Children are not allowed in the laboratory at any time.

Laboratory safety is extremely important. Students are required to read and sign off on the laboratory safety rules and regulations at the beginning of the program. All students are expected to comply with these rules and regulations as long as they are enrolled in the program and use the laboratory either during scheduled lab time or during independent practice ([see Appendix C](#))

2.13: 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 serve as academic advisors to all students enrolled in the program including any students who are seeking readmission to the program. It is the student's responsibility to arrange to meet with their advisor each semester prior to the course registration period for the upcoming semester and on an as needed basis.

Faculty utilize Degree Works to track student progress toward program completion. Students also have access to the program and can view the information from the advising sessions and track their own progress toward completion.

2.14: Student Responsibilities

Once a student has been accepted into the respiratory care program, he/she must assume the following responsibilities:

- Purchase required books, manuals and clinical supplies.
- Purchase required uniforms for clinical practice which conform to the program dress code.
- Transportation to and from clinical facilities.
- Participate fully in class and clinical and take responsibility for completing all course objectives and assignments.

- Meet deadlines for the submission of course assignments and required program materials.
- Follow established college policies and procedures.
- Follow established program policies and procedures as outlined in this handbook

2.15: Respiratory Care Program Simulation Policies

During participation in simulated clinical experiences, while a student in the Respiratory Care program, students are both an active participant and an observer.

The primary objective of simulation is to support and enhance clinical learning. The faculty believe these experiences will provide students with an additional method to identify student learning needs and improve clinical performance. Simulations are designed to challenge student response and judgement in a variety of clinical scenarios. Due to the possible sensitive nature of these experiences, strict confidentiality is required by all participants and observers.

By signing the [Respiratory Care Student Handbook Acknowledgement of Receipt and Agreement to Comply](#) and associated simulation forms ([see Appendix G](#)) indicates your agreement to maintain strict confidentiality about the details of any simulation experiences, it participant(s) and the performance of any participant(s). In addition, your signature indicates that you have authorized the Respiratory Care faculty to video record your performance during simulation as a participant or as an observer. Furthermore, your signature indicates that you have authorized the faculty and staff to use the video recording(s) of your participation in simulation for purposes including but not limited to: debriefing, faculty review and the education support of other learners by displaying the recording.

By signing the Acknowledgement of Receipt and Agreement to Comply, you acknowledge that your agreement is voluntary and that you have been provided the opportunity to seek further clarification about the program policies and procedures prior to signing the document.

SECTION 3: STUDENT HEALTH AND SAFETY POLICIES

3.1: Student Health Requirements

Documentation of specific student health requirements is mandatory to participate in any clinical experiences. The program will provide students with the Health Assessment form and procedures for submission of the form and other health requirements. Students are required to follow all instructions for documentation of immunization status and required laboratory reports and the health care provider's signature. Certain items may require additional follow-up during the Respiratory Care program (i.e. Tuberculin screening, flu vaccination). Students will not be allowed to continue in the respiratory program unless all medical compliancy requirements listed below are completed and submitted by the stated

deadlines. [See the Report of Health Evaluation form](#) for details regarding the information below:

- Physical examination by a qualified medical professional dated no earlier than May 1st of the year of admission into the program.
- Proof of immunization or positive immunity for measles, mumps, and reubella (MMR). Proof of immunity through any laboratory titer test must be accompanied by the laboratory report. There is no longer an age exemption for rubella.
- Proof of immunity through a laboratory titer test for varicella (chicken pox). Individuals who are not immune must then receive an immunization for chicken pox.
- Tetanus/Diphtheria/Pertussis (TD/Tdap) booster within the previous ten years.
- Annual influenza vaccination no later than October 15 of each year
- Tuberculin testing dated no earlier than May 1st of the year of admission into the program. Initiation of the Hepatitis B series with dose #1 and #2 (given 30 days apart) completed prior to the first day of classes. The remaining series must be completed in a timely manner as explained in the medical compliancy admission information that was mailed at the time of acceptance into the program.
- Depending on the clinical facility, students may be required to undergo a COVID screening test. Information regarding this and other COVID screening requirements are posted on the specific clinical course Blackboard page.

Updates to the requirements (e.g. annual PPD) are due by May 1st of each subsequent year. ([see above for influenza vaccine requirement](#))

Students who are hospitalized or who have a major change in health status are required to notify the Program Director. Documentation from a health care provider that clearly states the student is able to fully participate in class, lab and clinical must be submitted to the Program Director before returning to the program and/or to participate in clinical. Students who require academic adjustments to participate in the program refer to section [3.4 Medical Clearance](#)

3.2: Procedure for Reporting Injuries occurring on Campus and College-Sponsored Activities

An incident resulting in an injury (this includes blood or bodily fluid exposure/needle stick injury) or chemical exposure to a student that occurs on campus or while participating in NVCC sponsored activities is reported by completing the NVCC Incident Report Form within 3 days of the incident. The responsible staff or faculty member ensures that the form is completed and submitted. In addition to the NVCC policy, students who are injured at a clinical facility are required to follow the facility's injury reporting policy and procedures. Students who are injured while participating in (specify the program) program activities, should report the injury to the program director within 48 hours of the incident. The faculty or staff who were supervising the student at the time that the incident occurred must also report the incident to program director within 48 hours of the incident.

Students injured while participating in College activities may be covered by the College's accident insurance policy. It is the student's responsibility to follow the procedures listed in the NVCC Student Handbook in order to receive reimbursement for costs incurred.

The Incident Report Form is available in the Allied Health Division office or it may be obtained by contacting the offices of the Dean of Student Services (203 575 8012) or Dean of Administration (203 575 8089).

The completed form is sent to the Dean of Administration's office, K706. A copy of the form should be given to the party involved in the incident. The Dean of Administration's office will then send the forms to the Dean of Student Services.

Reference: NVCC Procedure for Reporting Injuries Occurring on Campus and College-sponsored activities (February 28, 2018)

3.3: Infectious Disease / Infection Control Policy

Students participating in the Respiratory Care program are exposed to potentially infectious diseases during their clinical experiences. If a student is exposed to and placed at risk for contracting an infectious disease while at a clinical site, students and faculty will follow the clinical site exposure/injury policy and the college policy for reporting injuries. Students must report any exposures such as needle stick injuries or other contact with blood or bodily fluids to their clinical instructor immediately.

Students are not to care for patients in airborne isolation or participate in any clinical activities where an N95 mask is required unless they have been properly fit tested for an N95 mask at the particular clinical site. Fit testing at one clinical site does not carry over to other sites as the N95 masks used often vary from one site to another. If there is a high suspicion of an airborne disease (e.g. tuberculosis, COVID), students who have not been fit-tested should not be assigned to care for or assist in any procedures for that patient.

Students should use caution when reporting to clinical with an illness (see information below regarding COVID). The clinical instructor has the final decision in determining whether the student will be permitted to continue with clinical for the day. The clinical instructor will be guided by the respective policies of the clinical affiliate.

Specific Information Regarding COVID-19

Each clinical facility has its own protocol for mitigating the spread of the COVID virus including required PPE and vaccination requirements. In addition, students may be required to undergo a COVID screening at their assigned clinical facility which may include a temperature check, answering questions related to symptoms of COVID-19, possible exposures, and travel history.

As the program receives updates and additional information from the clinical sites, the information is posted on the clinical course Blackboard page. Students are responsible for

abiding by the procedures at their assigned clinical site. Student should note that as more is learned about the virus, procedures may change, and they should check Blackboard frequently for updates.

For attendance purposes, students should self- monitor each day for symptoms of COVID-19. If symptoms are present, students must not return to campus or clinical.

Students who test positive for COVID-19 must notify the program director as soon as possible and follow the current CDC guidelines regarding isolation. Information regarding isolation is available at <https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/isolation.html>. Students who have been exposed to someone who has COVID-19 must follow the current CDC guidelines regarding quarantine. Information regarding quarantine is available at <https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine.html>. Students who test positive for COVID cannot return to campus or clinical unless they have isolated as per the CDC guidelines.

If a student travels to a state on the restricted list or the state is added to the list while they are visiting, they must follow the state of CT guidelines for quarantine upon their return to CT. The list is continually updated and is available at <https://portal.ct.gov/coronavirus/travel>. There are no provisions for making up lost clinical or lab time due to a travel-related quarantine. Please refer to the program attendance policy.

3.4: Medical Clearance

Students enrolled in an Allied Health and Nursing Program must adhere to the following process when a medical condition exists that may require accommodations:

- Students must notify the Program Director of a major change in health status that may require temporary learning accommodations. The PD will direct the student to the Office of Disability Services.
- Documentation from a health care provider that clearly states the student's ability to participate and/or any accommodations related to participation in the required class, laboratory and/or clinical activities must be submitted by the student to the Program Director (clearance) or Director of Disabilities Service (accommodations).
- The Program Director determines whether requested accommodations can reasonably be made to the learning and clinical environments.
- Students are expected to adhere to the attendance policy of the program.

3.5: Latex Allergies

College allied health and nursing laboratories and my clinical sites are not latex-free. Students who enter the program with a latex sensitivity/allergy must notify the program director and the Office of Disabilities to develop a plan of action for accommodations.

3.6: Program Technical Standards

The *Respiratory Care Technical Standards* reflect a sample of performance abilities and characteristics necessary to successfully complete the requirements of the respiratory care program; these standards are not admission requirements. The student is responsible for notifying the Respiratory Care program director and the *Disability Services Coordinator* of conditions that may impact the student's ability to meet the *Technical Standards*.

- I. Acquire Fundamental Knowledge
 - Ability to learn in various educational settings (classroom, laboratory, and clinical)
 - Ability to access, evaluate and apply information to acquire knowledge.
- II. Develop Communication Skills
 - Communicates effectively with patients, their families, and the health care team
 - Accurately interpret and convey information using one or more means of communication such as verbal, non-verbal, written, and assisted methods (e.g. TTY/electronic)
- III. Develop appropriate professional attitudes and behaviors:
 - function safely and effectively in stressful situations
 - appropriately respond to evolving/changing situations
 - establish effective working relationships with patients, families, fellow students, faculty, and other professionals in a variety of work environments (classroom, laboratory, and clinical settings)
 - assume responsibility for actions
 - accept feedback constructively
 - display attitudes/actions consistent with the ethical standards of the profession
 - develop cross-cultural competence
- IV. Cognitive Reasoning:
 - Collect, interpret, and analyze relevant information and draw appropriate conclusions
 - Make informed decisions
 - Practice and promote evidenced-based medicine
 - Prioritize workload
 - Request help when needed

3.7: myCommnet Alert System

- **myCommNet Alert** is a notification system that delivers critical information to students, faculty and staff of the Connecticut Community Colleges in the event of an emergency.
- The system delivers emergency messages through text messaging over cellular phones. Emergencies may include campus-related immediate health or safety situations and may also include weather-related class cancellations.

- Enrollment in **myCommNet Alert** is free and voluntary for all students, faculty and staff.
- Enrollment is strongly recommended to all Respiratory Care students and faculty.
- Enrollment information is available at the [myCommnet](#) homepage.

SECTION 4 : CLINICAL INFORMATION

4.1: Clinical Dress Code

- The respiratory care clinical uniform is as follows:
 - a. white waist length lab coat (**optional**)
 - b. charcoal gray pants
 - c. charcoal gray scrub top / polo shirt
 - d. clean white or black leather sneakers or nursing shoes

*** Students are to purchase their uniform before the beginning of clinical*
- Students are required to wear and clearly display hospital and student identification badges at all times while in the clinical areas.
- Students are required to have the following at all times while in clinic:
 - a. stethoscope
 - b. watch with a second hand
 - c. small pocket notebook
 - d. black/blue ink pen
 - e. pocket calculator
 - f. small bandage scissors

***Students are to have the above by the first day of clinical*
- No body scents of any kind or excessive jewelry should be worn to clinical. Long hair should be pulled back off the shoulders. Long or dangling earrings are not to be worn to clinical. Fingernails are to be short and clean. Polish, if used, should be light in color. Artificial nails/tips are prohibited.
- Students are expected to appear neat and clean. Clinical uniforms are to be laundered after each clinical day. Deodorant should be worn. Men should be neatly shaved or have neatly trimmed beards/mustaches.
- Students are not allowed to smoke while in clinical nor are they to arrive to clinical smelling of cigarette smoke.
- Students who do not adhere to the above clinical dress code may be asked to leave clinical and remedy the problem. This will count as a clinical absence.
- If the dress code at a particular clinical site is stricter or has additional stipulations than the policy stated above, the clinical site dress code will supersede the program dress code.

4.2: Clinical Affiliates

Bridgeport Hospital
 Danbury Hospital
 Gaylord Hospital
 Saint Mary's Hospital

Waterbury Hospital
The Charlotte Hungerford Hospital
Connecticut Children's Medical Center
Yale-New Haven Hospital
Waterbury Pulmonary Associates

Respiratory care students are considered guests in the clinical facility and must adhere to the administrative rules and regulations of that hospital. The clinical instructors will review these policies during the orientation period. This information will include but is not limited to the following:

- parking (may include a parking fee)
- cafeteria
- library facilities
- emergency, fire, and disaster plans
- charting and paperwork
- infection control policy

The program utilizes the CT Hospital Association (CHA) Health and Safety Training course for clinical orientation. A post-test is included. Completion of the test is a mandatory requirement for clinical orientation. The course and post-test are located on the CHA website at <https://cthosp.org/education/ct-health-and-safety-training-course/> .

Students are expected to provide their own transportation to the clinical site. Generally, most clinical shifts will begin by 7:00 am; however, some sites may have earlier start and end times. Students will adhere to the clinical affiliates shift start and end times.

While in the clinical setting, students are supervised by designated clinical instructors/preceptors at all times when they are providing patient care. Students must not be used as substitutes for department staff and do not receive payment for any patient care they provide while participating in clinical educational experiences.

Health Insurance Portability and Accountability Act of 1996 (HIPAA) took effect on April 14, 2003. Under this act, federal rules govern the use and release of a patient's personal health information. The rules protect medical records and other individually identifiable health information, including paper records, electronic records and oral communication of medical information. Students must follow the privacy procedures set forth at each of the clinical sites. Patient confidentiality must be maintained at all times. Failure to comply will result in disciplinary action up to and including removal from the program.

Using social media such as Facebook, Twitter, YouTube, Blogs and group texts to share patient care/clinical site experiences is not permitted. This applies even when protected health information (PHI) is not included.

For patient case presentations, profiles and any other patient presentations, students must use MS PowerPoint only.

4.3: Clinical Evaluations

Students are evaluated in the cognitive, psychomotor, and affective domains **during** their clinical rotations. Students are to complete a “daily instructional log” for each clinical day. These forms are turned into the clinical instructor who then provides feedback to the student regarding their clinical performance for the day. A summative evaluation is completed on each student at the end of the clinical rotation. ***The grading criteria for this evaluation are specified on the clinical evaluation form.*** The Director of Clinical Education and clinical instructor will counsel any student whenever clinical progression is not satisfactory. Remediation may include a laboratory referral where the student will be required to practice specific procedures in the laboratory setting before continuing practice in the clinical setting. **Continued failure to progress** will require a PIP ([see section 2.3: Performance Improvement Plan](#)) between the student and the clinical instructor describing the nature of the deficiency, additional plans for remediation, and defined time limits to demonstrate improvement. Failure to fulfill the PIP in the stated time frame will result in a failing grade for that clinical course and withdrawal from the program.

4.4: Liability Insurance

All Respiratory Care students are covered by professional liability insurance while participating in clinical experiences.

4.5: Criminal Background Check/Drug Screen

Due to clinical affiliate requirements, criminal background checks and toxicology (drug) screening are required for all Respiratory Care students prior to participating in the program. Due to these requirements, students’ refusal of either the background check or drug screening will result in dismissal from the respiratory care program due to the inability to complete clinical learning requirements. Students must follow instructions provided to them for obtaining the criminal background checks and toxicology screening. The following guidelines apply to the toxicology screening and criminal background check for all students:

1. Fees for all screening are the responsibility of the student.
2. The need for additional screening/checks beyond the initial screenings/checks is related to clinical affiliate requirements and/or results of the initial screening/assessments.
3. Notification and recordkeeping of toxicology screening results and/or criminal background checks are performed in a manner that ensures the integrity, accuracy and confidentiality of the information.
4. Students are not allowed to hand-deliver results of either the toxicology screening or criminal background checks.
5. Students are required to sign a release that allows the vendor that provides the service to release the results of the toxicology screenings and criminal background checks to the Respiratory Care program and the Allied Health and Nursing Division Leader.

Criminal Background Checks: Standards and Guidelines:

If a criminal background check reveals that a student has been found guilty or convicted as a result of an act which constitutes a felony or misdemeanor and the student is unable to be placed at a clinical learning site, then the student is unable to meet the clinical learning outcomes of the course. The Program Director notifies the student, and the student is provided with the opportunity to withdraw from the program. Should the student refuse to withdraw, the student will be dismissed from the program.

Students have an ongoing duty to inform the Director of the Respiratory Care program of any conviction that occurs after the initial criminal background check is done.

Toxicology Screening: Standards and Guidelines:

The following guides the response to a positive toxicology screening for all students:

1. All specimens identified as non-negative/positive on the initial test shall be confirmed, reviewed, and interpreted by the vendor.
2. The student is required to provide documentation by a healthcare provider in the event there is a medical explanation for a positive result (i.e., the result of a legally prescribed medication).¹
3. Toxicology screening that requires retesting:
 - a. Vendor reports that the screening specimen was diluted.
 - b. A student challenges a result, in which case, only the original sample can be retested.
4. If a student tests positive for drugs that are illegal substances, non-prescribed legal substances, or the student is deemed unsafe for the clinical setting by a healthcare provider, the student is immediately dismissed from the Respiratory Care program.
5. Readmission to program following dismissal in response to a confirmed positive toxicology screen is guided by a confirmed negative toxicology screen immediately prior to readmission and that the student meets all other requirements for readmission. ([See section 2.6 Readmission](#))

¹ *In accordance with federal law, a positive toxicology screen for legally prescribed marijuana may prohibit a student from being placed in clinical setting that accepts federal funding.*

SECTION 5: GENERAL INFORMATION

5.1: Inclement Weather

Check local TV and radio stations for late openings or class cancellation. Students are strongly encouraged to sign up for the myCommnet Alert system ([See section 3.7](#)).

On clinical days, if NVCC classes are announced as canceled, clinical is automatically canceled. If a delay has been announced, students are expected to arrive to clinical at the delayed time. If the delay is called for any time after 11:00 AM, then clinical is cancelled for that day. The

official start time for the college is 8:00 AM therefore if a delay is called it will count from the 8 AM start time. For example, if a 90-minute delay is called, students are to arrive at clinical by 9:30 AM.

5.2: Mobile Devices and Cell Phones

Mobile devices and cell phones are allowed in class only if they are turned off or turned to silent mode. Under no circumstances are phones to be answered in class. Texting, checking social media, taking pictures, listening to music and playing games on these devices during class is also prohibited. Students who ignore this policy may be asked to leave class. When there are extenuating circumstances that require that a student be available by phone, the student should speak to the instructor prior to class, so that together they can arrive at an agreement concerning the device.

The above mobile device policy applies in the clinical setting. In addition, the use of cell phones and mobile devices **are not allowed** in the patient care areas. Students are to follow the hospital policy regarding the usage of these devices while they are in clinical.

5.3: Children on Campus

For the purpose of this policy, children are defined as minors under the age of 18 who are not enrolled in a Naugatuck Valley Community College course or program. Children must be attended at all times by a responsible adult. Children may accompany an adult to class on an occasional basis and only with the prior permission of the class instructor. In an emergency situation that is not repetitive, a request may be made to the instructor of the course or supervisor of the activity for permission to bring a child to class or on campus. The student must notify the instructor or supervisor prior to the beginning of the class or activity that a child is present. Pre-k, elementary and high schools that are not in session are not emergency situations. Arrangements must be made for childcare outside of NVCC.

It is expected that this accommodation will be made only when there is no disruption to the teaching and learning process. Instructors and/or supervisors are authorized to ask the student or program participant to leave should the presence of the child be disruptive.

Children are never permitted in any test, exam or final exam session.

(Full policy can be found in the [NVCC Student Handbook](#))

5.4: International Students

International students are strongly encouraged to investigate whether Respiratory Therapy is a recognized profession in their country of origin. It is the student's responsibility to ensure that their visa will allow employment in the US following graduation.

5.5: Email Policy:

College Email Policy:

Official Student Email and Free Access to Web Applications

All Naugatuck Valley Community College students are given an official student email address. This email address is the primary mode of communication with the college. It is a student's responsibility to check this e-mail for all communications from their instructors and the college. Emails will no longer be sent to personal email accounts. The College gives free access to web applications of Microsoft Word, Excel, PowerPoint, and OneNote. Visit http://supportcenter.ct.edu/service/Office365_email.asp for details on setting up your account or for help, call or visit IT: 203-575-8092 or <https://www.nv.edu/Information-For/College-Support-Services/IT>

Program Email Policy:

During the admissions process and once a student is admitted to the program, all email communication between program faculty and staff will be done through the college email system or through Blackboard. Emails will not be sent to personal email accounts. See above college policy for setting up a college email account.

5.6: Gift giving to faculty and staff:

The faculty and staff of the NVCC Respiratory Care program respectfully ask students not to give us personal gifts of any kind. As employees of the state of CT, accepting gifts is governed by state law and is a complicated matter. Any gifts given to the faculty or staff will be returned to the student.

5.7: Student Employment at Clinical Affiliates:

Students who may be employed at any of the program's clinical affiliates are not permitted to function in their employee capacity while participating in their clinical education experience. In addition, students who are employees of a clinical affiliate cannot complete clinical coursework while working as an employee at the site.

Appendix A – Academic Appeals Process

Student Academic Appeals Process

Revised June 17, 2010

This document applies to General Academic and Clinical Academic Appeals. Any student has the right to appeal a decision of a faculty, adjunct faculty, staff, program director, clinical coordinator, or employee of the college. Definition of an academic appeal is an allegation by a student that, as to him or her, an employee of the college has violated federal or state laws and regulations, college or department policies, accreditation standards, or the faculty member's own stated policy relating to student's assignment of grades or other academic evaluation.

Step One: The student is advised to discuss the concern or issue with the college faculty member, clinical instructor or other employee of the college directly involved within fourteen (14) business days of the incident (48 hours if it is a clinical appeal). (Appeal Form 1)

Step Two: If the student is not satisfied with the resolution or outcome of Step One, the student may bring the concern with additional supporting information (within fourteen business days of the previous resolution or 48 hours if it is a clinical appeal) to the college employee who is one level above the college employee previously consulted. (Use Appeal Form 2) The clinical coordinator, course leader, department chair/coordinator, program director or other involved college employee will review the concern with the Division Director. The resolution or outcome will be put in writing and a copy sent to the student, department chair, and faculty member or other college employees involved in the concern and to the Dean of Academic Affairs within 5 days.

Step Three: If the student is not satisfied with the resolution or outcome to Step Two, the student may request that an appeals committee review the matter. (Appeal Form 3) The appeal must be filed within fourteen (14) days of receipt of the response to Step Two. For academic matters, the Academic Appeals Committee will review the concerns, outcomes and resolutions from the previous steps. If it is a clinical decision or concern, the resolutions and outcomes will be reviewed by the Clinical Appeals Committee. The Clinical Appeals Committee will convene within 48 hours.

The Academic Appeals Committee/Clinical Appeals Committee can dismiss an appeal where:

1. No new evidence has been presented to change a consistent decision emanating from the initial appeal steps.
2. The appeal is untimely.
3. The appeal is being pursued in another college procedure or tribunal.
4. The appeal is intended to harass, embarrass, or has otherwise been filed in bad faith.

If a quorum is not available, the Dean of Academic Affairs hears the appeal. A response will be made to the student within five (5) days of receipt of the appeal (48 hours if a clinical appeal). The student may still appeal to the Dean if the appeal is dismissed by the Committee.

Step Four: If the student is not satisfied with the resolution or outcome to Step Three, the student may bring the concern to the Dean of Academic Affairs. (Appeal Form 4) The appeal must be filed within five (5) days of receipt of the response to Step Three (48 hours if clinical appeal). The student will submit the appeal in writing along with any other relevant documents

and the Dean of Academic Affairs will need to respond within 5 days of the receipt of the appeal (48 hours if it is a clinical appeal).

Step Five: If the student is not satisfied with the resolution or outcome to Step Four, the student will appeal to the President directly in writing. (Appeal Form 5) The appeal must be filed within five (5) days of receipt of the response to Step Four (48 hours if a clinical appeal). The President will respond within 14 days.

Appendix B: Performance Improvement Plan and Program Probation Forms

**Naugatuck Valley Community College
Division of Allied Health, Nursing, and Physical Education**

PERFORMANCE IMPROVEMENT PLAN

Student Name: _____ Date: _____
Student ID: _____ Course(s): _____

Part I: Situation

Academic Clinical Professional Behavior

Description of Incident / Event: *(cite specific examples)*

Areas of concern/unmet learning outcomes:

Instructor Recommendations:

Student Comments:

Action Plan needed: Yes (if yes, proceed to Part II of this form) No (if no, sign and date below)

Student Signature: _____ Date: _____

Instructor Signature: _____ Date: _____

Instructor Print Name _____

Director/Clinical Coordinator Signature: _____ Date: _____

Part II - Action Plan

Expected Outcome(s):

Instructor recommendations:

Student Strategies (student should include how they intend to improve or address their performance):

Follow-up Scheduled _____
Date

Student Signature: _____ Date: _____

Instructor Signature: _____ Date: _____

Instructor Print Name: _____

Director/Clinical Coordinator Signature: _____ Date: _____

Part III: Follow Up Evaluation Date: _____

Outcome of Action Plan:

- Meeting the course/clinical objectives and does not require follow-up
- Making progress toward the course/clinical objectives but requires follow-up.
Follow-up Scheduled for _____
- Not meeting the course/clinical objectives and will receive a failing grade for the course.

As evidenced by: (cite specific performance examples)

Student Comments:

Student Signature: _____ Date: _____
Instructor Signature: _____ Date: _____
Instructor Print Name: _____
Director/Clinical Coordinator Signature: _____ Date: _____

Naugatuck Valley Community College
Respiratory Care Program
Notice of Placement on Program Probation

Student Name: _____

Date: _____

Part I: Reason for Program Probation: (Note whether this a policy violation or Clinical probation)

Check all that apply:

____ Policy Violation (Reference Respiratory Care Student Handbook for specific policy)

____ Patient Safety (Reference Performance Improvement Plan)

____ Academic Misconduct

As Evidenced by: (Describe in detail why the student is being placed on program probation. Reference previous warnings and performance improvement plans)

Program Director/DCE Comments: (include consequences related to a repeat of the violation)

Student Comments:

Student Signature: _____ Date: _____

Director of Clinical Education Signature: _____ Date _____

Program Director Signature: _____ Date: _____

Appendix C: Laboratory Safety

Laboratories pose a risk of injury or illness because of the physical and chemical hazards present in them. This risk can be lowered substantially or completely eliminated by following these general safety rules:

- Follow your instructor's directions at all times;
- Know the types of hazards that the lab work involves;
- Conduct yourself in a responsible manner at all times in the laboratory;
Protect your eyes, face, hands, feet, and body;
- Never perform unauthorized experiments/procedures.
- Independent practice is allowed with instructor permission
- Never bring food or drinks into the lab;
- Never apply cosmetics (lip gloss, etc.) while in the lab; and
- Abide by the additional rules listed below.



PREPARE FOR LABORATORY WORK

1. Study laboratory procedures prior to class and understand the types of hazards you may encounter.
2. Keep your work area organized and free of apparel, unnecessary books, and other clutter.
3. Know your exit routes.
4. Put away all distractions such as cell phones and laptop computers.

DRESS FOR LABORATORY WORK

1. Open-toe shoes, sandals, or other footwear that exposes skin of the foot are **NOT** allowed at any time.
2. Avoid wearing overly loose clothing (i.e. long draping sleeves, long fringe) when working in the lab.
3. Tie back long hair when working in the laboratory.
4. Avoid wearing excessively long or bulky jewelry.

*Don't risk it!
You will be
asked to leave
the lab if you do
not have proper
footwear and
clothing!!*

AVOID HAZARDS

1. Never taste or touch solutions.
2. Take extra care when handling sharp items such as needles. Dispose of sharps in the appropriate sharps container.
3. Use and store oxygen tanks as directed by your instructor. Do **NOT** leave tanks unsecured. Use appropriate storage receptacles.
4. The laboratory is not latex-free. Notify your instructor if you have a latex allergy.

CLEAN UP AT THE END OF LAB

1. Always follow your instructor's directions regarding the proper disposal of equipment/materials.
2. Wash hands thoroughly following procedures AND before leaving the lab.
3. Leave your work area clean and neat. Return all equipment to the proper location.
4. Before storing oxygen tanks, close the cylinder valve and bleed the oxygen regulator.

IN CASE OF ACCIDENT

1. Report all accidents and spills (no matter how minor) to your instructor immediately.
2. Place broken glass in designated boxes. Never pick up broken pieces with your hands. Use a dust pan & broom.
3. Wash all chemicals from your skin immediately using plenty of running water.
4. Treat minor cuts with the first aid kit. Injuries that cannot be easily treated with the contents of the first aid kit are medical emergencies!

*Immediately report all
emergencies to the
Public Safety Department
at 575-8112.*

LABORATORY SKILL PRACTICE

1. Students are expected to perform procedures such as nebulizer treatments, CPT and IPPB treatments on one another. Notify your instructor if you are unable to participate in this way or you have concerns regarding the procedures.

Common Hazard Warnings



Warning



Irritant



Corrosive



Flammable



Toxic or Poison



Oxidizer



Explosive



Environmental Toxin



Biohazardous



Eye or Face Protection Required



Body Protection Required



Hand Protection Required

Appendix D: Health Evaluation Form

Naugatuck Valley Community College / Division of Allied Health, Nursing, & Physical Education

Student Name: _____ Date of Birth: ___/___/___ Date of Physical Exam: _____
(No sooner than 5/1/2019)

Address: _____ Phone: _____

Emergency contact name: _____ Phone: _____

TO THE EXAMINING PHYSICIAN / HEALTH CARE PROVIDER (HCP):

Based on my health assessment and physical exam:

Student **DENIES** Latex Allergy Student **CONFIRMS** Latex Allergy

Student is clear to participate in clinical courses **with no restrictions.**

yes **no*** *If no, please explain the nature of the restrictions/limitations related to the delivery of patient care:

IMMUNIZATION RECORD

Refer to the CDC Healthcare Personnel Vaccination Recommendations at <http://www.immunize.org/catg.d/p2017.pdf> HCP

1. MMR: MEASLES (RUBEOLA), MUMPS & RUBELLA (GERMAN MEASLES)

Dose 1: ___/___/___
Dose 2: ___/___/___ (at least 4 weeks apart)

OR

Titer results: _____ (Qualitative or Quantitative titer, laboratory report attached)

2. VARICELLA (CHICKEN POX)

History of Disease, date: ___/___/___

OR

Titer results: _____ (Qualitative or Quantitative titer, laboratory report attached)

OR

Dose 1: ___/___/___
Dose 2: ___/___/___ (at least 28 days apart)

3. TETANUS/DIPHTHERIA/PERTUSSIS (Tdap)

Tdap Dose: ___/___/___ (within last 10 years)

OR

Td Booster: ___/___/___ (if Tdap was > 10 years ago)

4. HEPATITIS B: (Hep B)

Titer results: _____ (Quantitative titer, laboratory report attached)

OR

Dose 1: ___/___/___
Dose 2: ___/___/___ (~1 month later)
Dose 3: ___/___/___ (~5 months later)

Titer results: _____ (at least 2 months after dose 3, laboratory report attached) ****IF negative – must repeat series.**

****MD Signed documentation as a 'non-responder' after repeat series and second negative titer is required.**

ANNUAL IMMUNIZATION REQUIREMENTS:

5. Tuberculosis Testing is required every year, options as below:

TB Skin Test (TST): **INITIAL TST MUST be a two-step test** #1 Date Given: _____ Date Read: _____ **Result:** _____

1-4 weeks apart

#2 Date Given: _____ Date Read: _____ **Result:** _____

OR TB Blood Test (IGRA, i.e. Quantiferon)

Date of Blood Draw: _____ Results: _____

IF either test is positive a chest x-ray is required (attach report) for 1st positive test. TB screen form can be done 2nd year.

Healthcare Provider Print Name Healthcare Provider Signature DEA Number DATE

Address: Telephone () - _____

Appendix E: Respiratory Care Student Handbook Acknowledgement of Receipt and Agreement to Comply Form

**Naugatuck Valley Community College
Respiratory Care Program**

I _____ have received and read the Respiratory
(Please Print Name)

Care Program Student Handbook. I understand its contents and agree to abide by the policies of the college and the program.

STUDENT'S NAME (PRINT)

STUDENT'S SIGNATURE

DATE

Appendix F: Injury Report Form

Incident Report Form

Injury or Chemical Exposure

Directions: This form is completed when an employee, student, or visitor is injured or exposed to a chemical while on campus or during College-sponsored events. When the incident involves a student or visitor, the faculty member or NVCC sponsor of the event is responsible for completing the form. Submit the completed form to the Office of the Dean of Administration (K706) within 3 days of the incident. Alternatively, an electronic copy can be sent to delm@nv.edu.

PERSONAL INFORMATION		
Name: (Last, First, Middle):	Date of Birth:	
Address:	Phone:	
NVCC Employee	NVCC student; Student ID#:	NVCC Visitor
INCIDENT INFORMATION		
Date of Incident:	Time of Incident:	Location:
Nature of Incident:		
Was NVCC Public Safety Department or Security notified?	yes	no
For employees, was First Report of Injury Form (WC-207) completed?	yes	no
Witness name(s):		
Details of incident (include description and extent of injury <u>and</u> how the injury/exposure occurred):		
Describe initial action at time of injury (i.e., first aid):		
Was further medical treatment recommended?	yes	no If yes, by whom?
Was injured transported for further medical treatment?	yes	no
Was further treatment received?	yes	no
If yes, where?	When?	
What recommendations do you have for preventing other accidents of this type?		
My signature affirms that I have reviewed this form and the information is true and correct to the best of my knowledge.		
Preparer's Name and Title:	Division/Department:	
Preparer's Signature:	Date:	
Signature of Injured Party:	Date:	

Important Notes:

Employees - This form does not replace Form WC-207, *First Report of Injury*, which must be submitted to Human Resources.
Students - Students may be covered by accident insurance if injured during College activities. It is the student's responsibility to follow procedures provided in the Student Handbook in order to be reimbursed for medical costs incurred.

Appendix G – Simulation Forms

Naugatuck Valley Community College
Division of Allied Health, Nursing, & Physical Education

The purpose of simulation-based healthcare training is for you to develop skills, including judgment and reasoning, for the care of real patients. Using patient simulators and simulation teaching techniques, your instructors will recreate realistic patient care situations. The realism of each simulation may vary depending upon the learning goals for the session. The simulated environment and patient have certain limitations in their ability to exactly mirror real life.

When participating in the simulations, your role is to assume all aspects of a practicing healthcare provider's professional behavior. Additionally, when a gap occurs between simulated reality and actual reality, it is expected that you try to understand the goals of the learning session and behave accordingly.

Instructor Responsibilities:

- Create goal-oriented, practical simulations based upon measurable learning objectives.
- Add realism to each simulation so that the learner receives enough clues to identify and solve a problem.
- Set and maintain an engaging learning environment.
- Facilitate discussions and foster reflective practice.
- Identify performance gaps and helps close the gaps.

Learner Responsibilities:

- Suspend judgment of realism for any given simulation in exchange for the promise of learning new knowledge and skills.
- Maintain a genuine desire to learn even when the suspension of disbelief becomes difficult.
- Treat the simulated patient with the same care and respect due an actual patient.

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**Naugatuck Valley Community College
Expectations for Clinical Simulations**

NVCC students are expected to practice professional integrity related to simulation and a desire to learn when participating in on-campus clinical. Professional integrity includes maintaining confidentiality of the performances, scenario content, and participant experience during and after any simulation (International Nursing Association for Clinical Simulation and Learning (INACSL) Standards of Best Practice: Simulation Professional Integrity, 2016).

On-campus clinical simulations may be videotaped and may be used as an educational tool during the debriefing process. I agree to allow NVCC to photograph or videotape my participation in the simulation for educational purposes.

In addition, the following on-campus clinical expectations must be observed.
The learner will:

1. Wear their NVCC clinical uniform to on-campus clinical activities, unless otherwise noted. This includes but is not limited to equipment such as stethoscope, wristwatch, pen, and name badge.
2. Attend simulation experiences as scheduled. Any absence/tardiness of an on-campus clinical simulation will be handled according to Clinical Absence Policy.
3. Maintain confidentiality. Confidentiality applies to all phases of the simulation-based learning experience including pre-briefing, simulation experience debriefing, any feedback provided, and all patient information made available to the participants regardless of format including electronic, written or verbal. Violation of confidentiality is considered a violation of professional ethical conduct. (INACSL Standards of Best Practice: Simulation Professional Integrity, 2016)
4. Acknowledge the value of self-reflection and a safe and open environment for active learning. (INACSL Standards of Best Practice: Simulation Professional Integrity, 2016).
5. Demonstrate mutual respect and provide constructive feedback during simulation and debriefing.
6. Abide by the NVCC Simulation Fiction Agreement treating the manikins, actors, the environment, and/or the scenarios with the same care, respect and professionalism as if the setting and the patients were “real” and suspend judgment of realism for any given simulation in exchange for the promise of learning new knowledge and skills.

I have read, understand, and will abide by the clinical simulation expectations

Print Name

Signature and Date

Appendix H - Testing Guidelines

Naugatuck Valley Community College
Respiratory Care Program
Testing Guidelines

1. Students are required to attend exams at the scheduled exam start time. Students who arrive late will not have the exam time extended.
2. In situations where the exam proctor is not a program faculty member, students must present a photo ID to the proctor prior to beginning the exam.
3. Exams are administered through Blackboard and in most cases on campus. If college-issued laptops are not available, students may use their own computer to take the exam. If you do not have access to a laptop, please notify faculty immediately. Laptops may be available through the college library.
4. Do not begin the exam until instructed to do so by the instructor/proctor.
5. Students are expected to remain in the classroom until they have finished and submitted the exam.
6. All personal items, (including coats, hats, bags, books and **ALL ELECTRONIC DEVICES**) are placed in the designated area in the room. The desk and chair should be clear of all personal items.
7. Cell phones must be turned off or placed in silent mode prior to storing them in the designated areas.
8. Calculators are provided by the instructor/proctor. Personal calculators are not allowed.
9. The NVCC academic misconduct policy is in full effect during all exams and quizzes. Violations of the policy will be addressed accordingly.
10. Grades will be posted as stated in the course syllabus.
11. Refer to the course syllabus for the policy regarding make up exams and exam review.
12. Exams administered virtually are recorded for security persons. Exam reviews conducted virtually are also recorded. Virtual testing guidelines are posted on Blackboard.
13. During exam reviews, students may not copy, screen shot, or take pictures of any exam questions. Doing so, is a violation of our academic misconduct policy.

Any violation of the above test guidelines will result in disciplinary action, which may include dismissal from the Respiratory Care program.

Revised: 08/2021

Appendix I - Curriculum

Respiratory Care Program Curriculum

Course Number	Course Title	Credits	Prerequisite for Course
BIO*H211 †	Anatomy & Physiology I	4	BIO*H105 or BIO*H115 or equivalent
BIO*H212 †	Anatomy & Physiology II	4	BIO*H211, Anatomy & Physiology I
CHE*H111 ††	Concepts of Chemistry	4	MAT*H137 or equivalent
COM*H100	Introduction to Communication	3	Eligibility for ENG*H101, Composition
ENG*H101	Composition	3	Eligibility for ENG*H101, Composition
ENG*H102 or ENG*H200	Literature & Composition or Advanced Composition	3	ENG*H101
Elective	Aesthetic Dimensions/Written Communication	3	See college catalog for prerequisites
Elective	Historical Knowledge & Understanding	3	See college catalog for prerequisites
PSY*H111	General Psychology I	3	Eligibility for ENG*H101, Composition
First Semester Respiratory Care (Fall)			
RSP*H112	Fundamentals of Respiratory Care	4	
RSP*H121	Cardiopulmonary Anatomy and Physiology	3	
Second Semester Respiratory Care (Spring)			
RSP*H131	Applied Pharmacology	3	
RSP*H141	Principles of Respiratory Care	4	
RSP*H180	Clinical Practicum	1	
Third Semester Respiratory Care (Summer)			
RSP*H151	Cardiopulmonary Pathophysiology	3	
RSP*H181	Clinical Practicum II	2	

Fourth Semester Respiratory Care (Fall)			
RSP*H270	Hemodynamic and Critical Care Monitoring	3	
RSP*H262	Advanced Principles of Respiratory Care	4	
RSP*H281	Advanced Clinical Practicum	2	
Fifth Semester Respiratory Care (Spring)			
RSP*H271	Pulmonary and Cardiovascular Diagnostics	2	
RSP*H291	Perinatal and Pediatric Respiratory Care	2	
RSP*H201	Future Trends	2	
RSP*H282	Advanced Clinical Practicum II	2	

Clinical learning experiences are held at a variety of healthcare settings. Assignment of clinical sites is at the discretion of the Director of Clinical Education.

Once admitted to the program, students are required to undergo a criminal background check and drug screen. Students who do not pass the background check and/or drug screen may be excluded from clinical practice and may not meet the competencies required for the program.

†Must be taken within 5 years from the start of the program.

††Must be taken within 8 years from the start of the program.

For further information, please refer to the current NVCC College catalog at www.nv.edu