



**Respiratory Care**

**Student Handbook**

**2025-2026**

**Revised May 2025**

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# **Columbia State Community College**

## **Respiratory Care Student Handbook**

Columbia State Community College  
1665 Hampshire Pike  
Columbia, TN 38401

[www.columbiastate.edu](http://www.columbiastate.edu)  
[www.columbiastate.edu/respiratory-care](http://www.columbiastate.edu/respiratory-care)

Columbia State Community College does not discriminate on the basis of gender, race, color, religion, age, mental, or physical disability, veteran status, or national origin in educational employment opportunities, and is committed to the education of a non-racially identifiable student body. Inquiries and/or complaints should be directed to the Director of Human Resources (Affirmative Action Officer), Room 113 in the Pryor Administration Building, Columbia State Community College, P.O. Box 1315, Columbia, TN 38402-1315. Columbia State Community College is a Tennessee Board of Regents Institution.

TDD Relay Number for the hearing impaired: 1-800-848-0298

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## **Mission Statement**

The mission of the Respiratory Care Program at Columbia State Community College is to provide the community with graduate therapists prepared to participate in today's healthcare environment.

The policies, procedures, and guidelines contained in this handbook and course syllabi apply equally to all students and faculty regardless of the location where instruction and learning occur.

## **Program Goals**

The goal of the program is "to prepare graduates with demonstrated competence in the cognitive (knowledge), psychomotor (skills) and affective (behavior) learning domains of respiratory care practice as performed by registered respiratory therapists (RRTs)."

CoARC Accreditations Standards, 6-2015.

## **Program Outcomes**

In order to achieve the program goals the following outcomes have been adopted. Upon completion of the Respiratory Care Program each student/graduate will/will have:

1. Demonstrated competency in each evaluated skill as outlined in course syllabi.
2. Passed a multi-part comprehensive examination similar to the national credentialing exams required for those seeking to become registered respiratory therapists during the last semester of the program.
3. Pass the NBRC credentialing exams at or above the national average.
4. Receive satisfactory performance evaluations on an employer survey during the first year after graduation.

## **Accreditation**

The Respiratory Care Program at Columbia State Community College is accredited by the Commission on Accreditation for Respiratory Care, CoARC. A performance report is submitted to CoARC annually with re-accreditation occurring every ten years. The program's current accreditation expires in 2026.

Commission on Accreditation for Respiratory Care

1248 Harwood Rd.

Bedford, TX 76021

817-283-2835

<http://www.coarc.com/>

## **Americans with Disabilities Act (ADA)**

In compliance with the Americans with Disabilities Act, students are encouraged to register with the counseling/disability services office for possible assistance with accommodations. It is the student's responsibility to voluntarily and confidentially provide appropriate documentation regarding the nature and extent of a disability. Students requesting special accommodation are strongly encouraged to contact the counseling/disability services office at the beginning of the semester. More information can be found on the [Disability Services Website](#).

All students will be provided reasonable accommodations regarding physical and mental limitations. In keeping with the accreditation standards outlined by CoARC, all students must possess the physical and emotional abilities required of a respiratory therapist. These abilities include, but are not limited to, the following:

1. Physical strength necessary to carry common objects, push or move common equipment, move and reposition patients in bed, perform CPR, etc.
2. Manual dexterity required to assemble common equipment, perform skills such as intubation, arterial puncture etc.
3. Auditory ability to hear alarms, listen to breath sounds, measure blood pressure, etc.
4. Visual acuity necessary to differentiate colored alarms, read information from various types of electronic monitors, record data onto electronic and print media, etc.
5. Possess a command of the English language necessary to effectively communicate verbally and in writing with patients, families and other healthcare workers. An English proficiency test may be required of those who use English as a second language.
6. Perform the duties of a respiratory therapist under the stress of medical emergencies, death and dying, natural disasters, etc.

## **Program Description**

The Respiratory Care program at Columbia State is an entry-level registry program awarding the AAS degree upon completion. Graduates possess the needed abilities to work as respiratory therapists in a variety of environments as well as prepared to take the two NBRC credentialing exams. To become credentialed, the Therapist Multiple Choice, TMC, exam is taken first. Passing the TMC at the "high level" allows graduates to take the Clinical Simulation exam, CSE. Passing the CSE earns the Registered Respiratory Therapist, RRT, credential.

## Program Faculty

### Program Director

Pamela Lindemann MA RRT NHDP-BC  
Walter Building, #124  
[plindemann@columbiastate.edu](mailto:plindemann@columbiastate.edu)  
931-540-2663 (office)

### Director of Clinical Education

Roger M. Major, RRT-ACCS  
Walter Building, #123  
[major@columbiastate.edu](mailto:major@columbiastate.edu)  
931-540-2664 (office)

### Adjunct Clinical Instructors:

Heather Chang, RRT, Didactic

William (Trint) Cotham, RRT  
Maury Regional Medical Center

Brandon Hallmark, RRT  
Maury Regional Medical Center

Paige Isbell, RRT, RRT-NPS  
Didactic  
Vanderbilt University Medical Center

Norman (Tim) Poll, RRT  
Vanderbilt University Medical Center

Helen (Beth) Sims, RRT  
Ascension St Thomas – Rutherford

Rebecca Vlahos, RRT  
Vanderbilt University Medical Center

### Medical Directors:

Dr. Jon Freels, MD  
Maury Regional Medical Center

### Dean of Allied Health

Dr. Kae Fleming  
Walter Building, #112  
931-540-2600

### Professional Staff:

Katrina Woody, Division Secretary  
Walter Building, #112  
931-540-2599

Ebony Price, Division Secretary  
Walter Building, #112  
931-540-2600

Staci Tapp, Health Records Clerk  
Walter Building, #113  
931-540-2849

## **Ethical Statement**

The Respiratory Care Program adheres to the non-discrimination policies of the college. The program also supports the American Association for Respiratory Care statement on ethics and professional conduct:

### **AARC Statement of Ethics and Professional Conduct**

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

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

Effective 12/94    Revised 10/21

## Clinical Affiliates

Huntsville Hospital  
101 Sively Rd  
Huntsville Al 35801  
LaVonia Dickerson, Dept. Director  
256-265-8034

Maury Regional Medical Center  
1223 Trotwood Ave.  
Columbia, TN 38401  
Christy Wright, Dept. Director  
John Hagan, Day Supervisor  
Robin Weaver, Day Supervisor  
931-380-4029 (RC Dept.)

Monroe Carrel Jr. Children's Hospital at  
Vanderbilt University Medical Center  
2200 Children's Way  
Nashville, TN 37232-7680  
Christa Sala, Dept. Director  
615-715-9014, Supervisor

North Alabama Medical Center  
1701 Veterans Dr.  
Florence, AL 35630  
Jacqueline Kearny, Dept. Director  
256-768-9398 (RC dept.)

RT Medical  
1241 Robinson Rd  
Old Hickory, Tn  
Rachel Thomas, owner  
615-469-7299 (office)

Southern TN Regional Health System  
Lawrenceburg  
Hwy. 43 So.  
Lawrenceburg, TN 38464  
Amy Garland, Dept. Director  
931-762-6571 (Hospital Operator)  
931-766-3259 (RC Dept.)

St. Thomas Ascension Midtown Hospital  
2000 Church St.  
Nashville, TN 37236  
John Ford, Dept. Manager  
615-284-5494 (RC Dept.)

St. Thomas Ascension Rutherford Hospital  
1700 Medical Center Parkway  
Murfreesboro, TN 37129  
Chris Asberry, Dept. Manager  
615-396-4371

St. Thomas Ascension West Hospital  
4220 Harding Rd.  
Nashville, TN 37205  
Derrick Cox, Dept. Manager  
Sherry Warren, Day Supervisor  
Barb Smith, Day Supervisor  
615-222-6742 (Secretary)  
615-222-4355 (Supervisor)  
615-456-7106 (Supervisor cell phone)

The Vanderbilt Clinic (TVC)  
Pulmonary Function Lab  
1301 22<sup>nd</sup> Ave.  
Nashville, TN 37232  
Stephanie Glenn, Coordinator  
615-322-0626 (office phone)  
615-322-5880 (Stephanie Glenn's office)

Tri-Star Centennial Hospital  
2300 Patterson St.  
Nashville, TN 37203  
Mike Mulcahy, Interim Director  
615-342-1000

Tri-Star Horizon Medical Center  
111 US-70E  
Dickson, TN 37055  
Tabatha Brooks, Director  
615-446-0446

Tri-Star StoneCrest Medical Center  
200 StoneCrest Boulevard  
Smyrna, TN 37167  
Blake C Longmire, Director  
615-768-2000

Vanderbilt University Medical Center  
1211 22<sup>nd</sup> Ave. So.  
Nashville, TN 37232  
Craig Rooks, Dept. Director  
Roger Richardson, Educator/Manager  
Michelle Hamric, Day Supervisor  
615-322-0692 (Supervisor)

Williamson Health  
2021 Carothers Rd.  
Franklin, TN 37064  
Jeff Garner, Dept. Manager  
615-435-5377 (RC dept.)

## **Admission Requirements**

The program admits one class each fall. Applications are accepted between January 1<sup>st</sup> and May 1<sup>st</sup> each year. The admission requirements are also listed in the college catalog. In order to be considered for enrollment into the program all application requirements must be completed by the application deadline.

1. Meet all College admission requirements.
2. Complete all entrance examinations such as the ACT/SAT or placement exam as required by the College prior to the application deadline.
3. Complete all learning support courses as determined by the ACT/SAT or placement exam or obtain a permanent waiver from the exam or course prior to the application deadline.
4. Possess a cumulative grade point average of 2.0 (C) or above on a 4.0 (A) scale for academic subjects. Learning Support courses are not included as part of the GPA.
5. Submit a completed Respiratory Care application to the program director by the application deadline.
6. Complete an orientation and interview with program faculty by the application deadline.

## **Admission Selection Process**

Because space is limited, the number of students accepted into the program is limited. Selection from those meeting the admissions requirements is competitive based on the following, which are listed in the order of importance:

1. Receipt of all college and program application materials by the application deadline.
2. College grade point average, GPA.
3. Completion of the math and science general education core as listed in the college catalog.
4. ACT or SAT scores.
5. Knowledge of the profession and interest in becoming a respiratory therapist as determined from the application materials and interview.

Completed applications received after the May 1<sup>st</sup> deadline but before the beginning of fall class may be considered on a space available basis. Students with outstanding learning support deficiencies (based on the college's placement process) as of the end of summer semester are ineligible for fall consideration. All applicants will receive an email stating acceptance or denial into the program beginning the second week in June. Applicants who have not received notice by the end of the second week of June may call the respiratory care faculty.

Student ID: _____	Catalog: 2025-2026 Catalog and Student Handbook
Student Name: _____	Program: Respiratory Care, A.A.S.
Adviser Name: _____	Minimum Credits Required: _____

## Respiratory Care, A.A.S.

Major in Respiratory Care (A.A.S.)

### Sample Academic Plan - Total Credit Hours: 73

*Students must be accepted into the Respiratory Care program before they can register for RESP courses. Note: Respiratory Care courses must be repeated if three or more years have elapsed since completion. See complete program information below. Students may be required to take additional Learning Support courses. Courses cannot be used more than once to satisfy program requirements.*

#### First Year - Fall Semester - Credit Hours: 18

Course Name	Credits:	Term Taken	Grade	Gen Ed
RESP 1410 - Fundamentals of Respiratory Care I	Credits: 4			
BIOL 2010 - Human Anatomy and Physiology I *	Credits: 4			
ENGL 1010 - English Composition I <b>OR</b> ENGL 1020 English Composition II	Credits: 3			
PSYC 1030 - Introduction to Psychology <b>OR</b> PSYC 2130 Lifespan Development Psychology	Credits: 3			
<sup>3</sup> General Education - Mathematics Requirement <b>Credits: 3**</b>				
COLS 101 - Columbia State College Success	Credits: 1			

#### First Year - Spring Semester - Credit Hours: 15

Course Name	Credits:	Term Taken	Grade	Gen Ed
RESP 1420 - Fundamentals of Respiratory Care II	Credits: 4			
RESP 1225 - Cardiopulmonary Pharmacology	Credits: 2			
RESP 1129 - Introduction to Clinical I	Credits: 1			
BIOL 2020 - Human Anatomy and Physiology II *	Credits: 4			
BIOL 2230 - Microbiology	Credits: 4			

#### First Year - Summer Semester - Credit Hours: 11

Course Name	Credits:	Term Taken	Grade	Gen Ed
RESP 2430 - Intensive Care Monitoring	Credits: 4			
RESP 2435 - Arterial Blood Analysis	Credits: 4			
RESP 2339 - Introduction to Clinical II	Credits: 3			

#### Second Year - Fall Semester - Credit Hours: 14

Course Name	Credits:	Term Taken	Grade	Gen Ed
RESP 2440 - Mechanical Ventilation	Credits: 4			
RESP 1310 - Cardiopulmonary Pathophysiology	Credits: 3			
RESP 2449 - Intensive Care Practicum I	Credits: 4			
<sup>2</sup> General Education - Humanities/Fine Arts Requirement	Credits: 3			

#### Second Year - Spring Semester - Credit Hours: 15

Course Name	Credits:	Term Taken	Grade	Gen Ed
RESP 2450 - Pulmonary Functions/Seminar	Credits: 4			
RESP 2455 - Pediatric Respiratory Care	Credits: 4			
RESP 2459 - Intensive Care Practicum II	Credits: 4			
COMM 2025 - Fundamentals of Communication	Credits: 3			

#### Note(s):

\*BIOL 2010 and BIOL 2020 must have been completed no more than five years prior to start of program. Students must earn a "C" or higher in all Biology courses.

\*\*Students must earn a "C" or higher in the Mathematics course.

## **Physical Exam**

Prior to the start of clinical training all students must complete a physical exam using the form supplied by the Respiratory Care Program. Completed forms must be turned in to the Health Record Clerk prior to the start of clinical training. Students will not be able to participate in clinical training until all required clinical access clearance requirements are completed.

As described on the physical exam form, students must have a TB skin test annually, during the fall semester and PRN for suspected exposure. Those with a positive skin test must have an annual chest x-ray.

Prior to the start of clinical experiences students must either complete the hepatitis vaccine series or must formally decline the vaccine by signing the appropriate form. Students are required to obtain an annual flu vaccination unless prohibited by medical necessity.

## **Criminal Background Checks**

All students are required by clinical partners to complete a criminal background check prior to the start of clinical training. Clinical partners may deny access to a student with a positive criminal background check. Students denied clinical access are unable to complete course/program objectives and continue in the program. Additional information and the approved organizations to perform the background check are available from the health records clerk. Students will not be able to participate in clinical training until the background check is cleared/accepted.

## **Drug Screening**

All students are required by clinical partners to complete a drug screen using the form provided. Drug screens must be performed at a testing center supervised by a certified medical review officer (RSO). Drug screen results are provided directly to the health records clerk. Students with a positive drug screen may be denied clinical access and unable to continue in the program. Documentation of prescription(s) may be submitted to the RSO. Students will not be granted clinical access until the drug screen is reviewed/approved.

Students are subject to random drug screens in accordance with clinical partner policies and clinical affiliation agreement.

## **Grading / Grading Scale**

The grading scale for all RESP program courses is listed below. Components of course grades (exams, lab assignments, skill evaluations, etc.) vary from course to course and are detailed in course syllabi.

A = 93 - 100%  
B = 83 - 92%  
C = 75 - 82%

D = 65 - 74%  
F = < 65%

A grade of at least a “C” for each respiratory care course is required as a condition of program continuation. If grade error is suspected contact the instructor immediately.

The college does not mail grades to students. Final course grades may be accessed through MyChargerNet (MyCN) ([www.columbiastate.edu](http://www.columbiastate.edu)) approximately five (5) working days after the end of the semester.

A series of comprehensive exams similar to the national credentialing exam are administered during the last semester of the program. The impact of the exam grades on course grades is detailed in syllabi. Faculty provide remediation recommendations following review of exam scores. Success on these comprehensive exams is predictive of NBRC success. The goal is for all students to achieve the high-cut score on simulated credentialing exams prior to graduation.

### Grading Clinical Courses

To be eligible for a “C” or better in each clinical course, each skill must be learned, performed correctly and safely. For each skill evaluation, a performance and comprehension score of at least 75% is required. A score less than 75% for either is unacceptable and requires the entire evaluation be repeated. A performance or comprehension score of less than 75% for any skill at the end of the semester may result in a failing grade for the course and prevent program continuation.

Using the appropriate skill evaluation form, performance scores are calculated by deducting 7 points for each error. Errors are noted in the performance evaluation section and the comments section of the evaluation sheet. Errors involving an asterisk (\*) step automatically result in a performance score of 50% and will require the skill be repeated. Errors/actions/inactions that jeopardize patient safety, regardless if it is related to the skill being evaluated will result in a score of 50%. Refusing to perform an evaluation will be considered an attempt failure.

The maximum possible performance evaluation scores for each attempt are:

Attempt:	1 <sup>st</sup> ----	100%
	2 <sup>nd</sup> ----	93%
	3 <sup>rd</sup> ----	86%
	4 <sup>th</sup> ----	79%

Comprehension scores are calculated by dividing the number of indications, hazards and contraindications the student is able to discuss by the total.

Final skill evaluation scores will be calculated as follows:

Performance score	70%
Comprehension score	30%

Students are expected to have an adequate number of clean, usable skill evaluation sheets (practice evaluations and formal evaluations). **Students are not to borrow evaluation sheets from one another.** (Please let Mr. Major know if you need assistance with forms).

All clinical paper charting must be done using black ink unless otherwise directed. Charting in any other color, or pencil, during a skill evaluation will result in failure of the evaluation attempt. All charting must be legible, in the correct sections of the patient record and in accordance with hospital and program standards and policies. Unacceptable charting: in the wrong section, charting illegibly, incomplete charting, etc. will result in a grade penalty including failure of that skill attempt.

During clinical rotations professional behavior will be coached and evaluated using the "Professional Behavior Assessment."

### **Classroom & Professional Conduct**

Class time, lecture, lab or clinical are designed for learning. Attendance is expected, as is being on time.

Unless otherwise stated, lab assignments are to be completed during lab. Lab worksheets are to be turned in at the end of the lab period. Failure to turn in a lab sheet at the end of the day will result in a grade of zero for the lab. Missed lab periods are difficult to make up. Unexcused lab absences result in a grade of zero for the lab. Students must notify the instructor prior to assigned lab time and documentation may be required in order for the absence to be excused/made up.

Only four-function calculators are allowed during exams. Cell phone calculators are not permitted. Calculators cannot be shared during exams.

Academic dishonesty (plagiarism, cheating, fabrication of information, etc.) of any kind is prohibited. Academic dishonesty results in a zero (0) for the assignment and may be grounds for disciplinary action. Refer to the college's Student Handbook for more information regarding academic dishonesty.

Cell phone use is distracting to others around you. Cell phones shall not be used while in professional settings: classroom, labs, meetings, lectures and healthcare settings. This includes patient care areas, staff work areas, labs, etc. unless instructed to search for information. Cell phones are to be turned off or silenced.

For inappropriate cell phone and smart watch use the following will apply:

- 1<sup>st</sup> offense: 5-point deduction from final grade
- 2<sup>nd</sup> offense: 10-point deduction from final grade, dismissed for the day, unexcused (attendance policies apply)

Individual course syllabi may include further discussion, limitations and/or penalties.

Cell phones may be used during lunch/breaks. When in doubt, ask the instructor or supervisor for permission to use cell phones. When in doubt, do not use cell phones.

Smart watches may only be used as watches unless on break or at lunch. Texting, email, and other functions may only be used when on break or at lunch. When in doubt don't use it.

Attendance at the annual TSRC state conference is expected. Not attending will result in 5 points deducted from the final grade for each day (or partial day) missed unless excused in advance by the program director. Students engaging in any actions which reflect poorly on the program will be sent home and considered absent. Unacceptable

behavior may lead to disciplinary action. Convention details and assignments will be provided as information becomes available.

Professional behavior is expected at all times while representing the college and the profession whether in a classroom, clinical setting or a professional meeting.

Those engaged in any type of unprofessional or disruptive behavior or foul language (profanity, suggestive speech, etc.) regardless of setting (classroom, clinical, other professional setting, etc.) may be dismissed and considered absent. Attendance policies apply.

- 1<sup>st</sup> Offense: Unprofessional or disruptive conduct, 7-points deducted from course grade. Documented on the appropriate program/college form(s). Other actions, including immediate dismissal from the program, may be considered based on the severity of the incident.
- 2<sup>nd</sup> Offense: 14-point deduction from course grade. Documentation on the appropriate program/college form(s). Other actions, including immediate dismissal from the program, may be considered depending upon the nature of the offense.
- 3<sup>rd</sup> Offense: Unprofessional/disruptive conduct which continues, regardless of the time span from the first or second, may result in point deductions which earn the student a failing grade for the course and prevent continuation in the program.

The Columbia State Student Handbook, 2025-2026 in the Student Disciplinary Policy: Section 3, Academic and Classroom Misconduct states:

(1) The instructor has the primary responsibility for maintenance of academic integrity and controlling classroom behavior, and can order the temporary removal or exclusion from the classroom of any student engaged in disruptive conduct or conduct that violates the general rules and regulations of the institution for each class session during which the conduct occurs. Extended or permanent exclusion from the classroom, beyond the session in which the conduct occurred, or further disciplinary action can be effected only through appropriate procedures of Columbia State.

(2) Classroom Misconduct: Disruptive behavior in the classroom may be defined as, but not limited to, behavior that obstructs or disrupts the learning environment (e.g., offensive language, harassment of students and professors, repeated outbursts from a student which disrupts the flow of instruction or prevents concentration on the subject taught, failure to cooperate in maintaining classroom decorum, etc.), text messaging, and the continued use of any electronic or other noise from beepers, cell phones, palm pilots, lap-top computers, games, etc.).

Additional information on student conduct can be found in the college's Student Handbook including the appeals process.

## Professional Dress Code

Students participate in numerous activities throughout the program outside the classroom and clinical training. These activities include elementary and high school visits, attending professional meetings (TSRC, AARC, etc.), hospital lectures, etc. At all times attire is to be professional, in general business casual, as described below. Depending on the event, adjustments will be made. For most non-clinical hospital meetings, the appropriate college and hospital ID must be worn with scrubs or street clothes. See faculty for details for specific meetings. Those not adhering to a professional dress code will be sent home and counted absent for the day.

### Dress Code When Representing the College/Program:

1. Dresses, skirts or slacks are appropriate. Pants must not touch/drag the floor. Pants must not be frayed. Jeans must be clean, neat, and free of holes. Leggings of any type or other form-fitting pants must have a shirt/blouse which covers the hips. Shorts, cut-offs, sweats and gym clothes are not permitted.
2. Blouses and tops must have a professional look. Sheer tops must have an undershirt. T-shirts and tank tops are not permitted. The midriff and cleavage should not be exposed.
3. All clothing is to be free of tears or holes.
4. Dress shoes should be worn; open-toed shoes and flip-flops are not acceptable.
5. Under garments should not be visible.
6. Clothing must be clean and pressed and free offensive odor.
7. Hair must be worn in a manner appropriate for a professional person. Natural colors, styled away from the eyes. Hair prone to fall into the face of the student or a patient must be secured back regardless of length.
8. Students should keep fingernails clean and neatly trimmed for patient safety and student safety. Specifically, those having those having contact with patients or patient care equipment, the following applies:
  - No nail jewelry
  - Nails which are acrylic, gel, shellacked, artificial, press-on/extendors are prohibited.
  - Nails may be polished only if the polish is not chipped. Clear polish is preferred.
9. False eyelashes and eyelash extensions are not permitted.
10. Conservative use of make-up, jewelry and perfume is permitted; no nose, eyebrow, lip rings, studs or other visible body piercings.
11. Tattoos/body art are prohibited on the head, face, or scalp. Tattoos/body art elsewhere on the body is allowed if covered. Tattoo/body art which is excessive, obscene, or advocates or symbolizes discrimination or harassment based on sex, race, religion, ethnic, and/or national origin, age, disability or other protected criteria is prohibited. In addition, tattoos and body art which advocate or symbolize gang affiliation, supremacist or extremist groups, or drug use are prohibited. Reasonable accommodation will be made for religious tenants.
12. Glasses are to be worn for medical necessity. Sunglasses may not be worn indoors except for medical necessity.
13. For cell phone and smart watch usage refer to the "Classroom & Professional Conduct" section.
14. Facial hair cannot interfere with isolation (N-95) mask fitting.

## **Clinical Dress Code**

Dress code standards are designed to identify you as a Columbia State student, promote student and patient safety, limit the risk of cross contamination and reflect a professional appearance. Those not adhering to the clinical dress code/clinical uniform will be sent home and counted absent for the day.

1. Scrubs are to be clean and wrinkle free. Pants must not touch the floor.
2. Clothing which is worn out must be replaced.
3. The college name tag must be worn and visible at all times. Depending on the clinical rotation, the student may also need a name tag from the clinical affiliate.
4. Appropriate under garments must not be visible outside or through clothing.
5. Student must adhere to clinical partner policies regarding smoke/tobacco use (including vaping, dipping, e-cigarettes) on site.
6. Eating is not permitted in patient areas or while performing any type of patient care/patient interaction.
7. For cell phone usage see section "Classroom & Professional Conduct" section.
8. Students may not accept gifts from patients or family members.
9. While in the clinical setting, students are expected to follow all policies of the clinical affiliate as well as the college and program.
10. In accordance with OSHA guidelines, proper footwear is an issue of safety in the laboratory and health care facility environment. Therefore, open-toed shoes, flip flops, heels or sandals are not permitted in any lab, clinical, or simulated clinical experience. Appropriate shoes include waterproof tennis shoes or clogs (may not be made of cloth/mesh or have holes on the tops.) When on a clinical or externship site, the student will follow the dress code for the site.

## **Clinical Access Requirements**

### Pre-clinical:

Prior to the start of clinical experiences the following must be completed with the appropriate documentation. Students seeking re-admittance into the program must also complete the following:

1. Completed physical exam.
2. Proof of liability insurance (group policy included with course fees)
3. Proof of health insurance.
4. Criminal background check.
5. Drug screening.
6. BLS healthcare provider training.
7. Blood borne pathogens/universal precautions/standard precautions training.
8. HIPAA/hospital orientation training.
9. TB skin test and/or CXR.

New skills are presented, practiced and evaluated each semester prior to the start of clinical rotations during pre-clinical labs on campus. Details are in the course syllabus reviewed at the beginning of each semester.

### Clinical supplies:

The following items make up the student's clinical uniform. Unless otherwise stated (special rotations, etc.), all of the items below are to be with each student for each clinical rotation. Students are not to borrow or share supplies. Any student at clinical without the required clinical uniform will be sent home and counted absent for the day.

1. Steel gray or pewter scrubs; pants must not touch the floor. White, black or gray T-shirts may be worn under scrubs if desired but must be tucked in.
2. Student shoulder patch; sewn onto the right shoulder 2 inches below the shoulder seam onto the scrub top.
3. School name badge/hospital name badge.
4. Acceptable Stethoscope (Littmann Cardiology, Classic III, or II)
5. Wristwatch with digital or sweep second hand.
6. Leather or other non-porous shoes with a full heel; white or black; no open areas.
7. Bandage scissors, 5 ½" – 7 ½", optional.
8. Goggles.
9. Calculator (other than cell phone calculator)
10. Black pen.
11. Note pad, pocket size, optional.
12. Penlight, optional.
13. Clinical forms packet (skill evaluation sheets, daily log sheets, etc.).

#### Pre-clinical / Clinical attendance:

Each clinical course involves rotations to a number of clinical affiliates throughout middle Tennessee and northern Alabama. These rotations may include day, evening or night shifts during the week or weekend. Clinical schedules are distributed at the start of each semester but are subject to change throughout the semester. Students are to follow clinical rotations as outlined in the clinical schedule. Deviating from the clinical schedule unless redirected by the Director of Clinical Education will be considered an absence.

Attendance is expected and required. One day per semester may be missed without grade penalty. Students are responsible for identifying/making up missed assignments. Beginning with the second absence, 5 points will be deducted from the final grade for each absence. Excused absences (instructor notified in advance, document required) may be eligible to be made up. All specialty rotation absences (intubation, ECG, PFT, etc.) must be made up at the original facility. Students are still considered absent. Attendance policy applies.

A student who reports for a clinical assignment sick or appears sick based on the judgment of the faculty/facility staff may be sent home. The student will be considered absent for the day.

Students who experience extended illnesses (personal, children, spouse, parents, or spouse's parents) or other situations which result in prolonged absence (military duty, jury duty, etc.) may qualify for an "extended leave." To qualify students must notify the Program Director and the Director of Clinical Education as soon as possible in writing describing the situation. For those qualifying for the "extended leave" the grade penalties associated with absences will be waived. However, all absences must be made up by the first day of class of the next semester. If all absences are not made up a grade of "F" will be given for the course.

Bereavement leave for immediate family (child, spouse, parents/in-laws, and other household members) may be discussed with program faculty. Make up days may be required depending on the number of days approved.

The student is expected to arrive at all clinical settings on time and ready to participate in the day's activities. The student is to report immediately to the clinical preceptor or program faculty. One tardy (> 10 mins) may be excused each semester without grade penalty. Students who arrival 60 minutes late (or more) will be sent home and counted absent. The 2<sup>nd</sup> and each subsequent tardy will result in a 5-point deduction from the final course grade. Extenuating circumstances may be discussed with the instructor privately.

The student is expected to stay the entire designated time each day unless approved to leave early or arrive late by the Director of Clinical Education. Approval should be requested 24 hours in advance by email or text message. Unexpected/unpredictable situations may be discussed with program faculty privately. Otherwise, 5 points will be deducted from the final course grade. Affiliate personnel and faculty must be notified of late arrival/early departure. Clinical personnel are required to sign off on the log sheet daily.

The student is expected to call the clinical affiliate then contact the Director of Clinical Education at least 1 hour in advance if unexpectedly unable to attend or will be late (illness). Failure to make both calls will result in 5 points being deducted from the student's final grade.

Each student is to complete entries into the "Daily Log" at the completion of each clinical day. The Daily Log sheet, like all program forms are to be completed in black ink. These are to be signed by the student and clinical instructor before the student leaves the clinical site. Daily logs are to be turned in to the appropriate school faculty member. The Daily Log sheet is to be turned in on the first lecture day after the sheet is full (represents 3 clinical days). Students cannot attend subsequent clinical assignments unless/until the Daily Log Sheet is turned in. The clinical attendance policy applies.

Students cannot be paid for work performed during clinical training. This is a violation of Tennessee law (Respiratory Care Practice Act) and CoARC standards. Such actions will result in a clinical absence for each incident (all clinical attendance polices would apply). Additionally, each occurrence will be considered a breach in professional conduct (refer to statements in the "Classroom & Professional Conduct" section of this handbook).

## **Tutoring**

The Academic Success Center offers tutoring services free of charge for all students enrolled at Columbia State Community College. Assistance is available for most math and science courses. Tutors are available at all five campuses. View the TLC webpage at [www.columbiastate.edu/tlc](http://www.columbiastate.edu/tlc) for details. For more information or to schedule appointments, call 931-540-1302 or 931-540-2891. Online tutoring is also available at no charge. Walk-in visits are welcome, but to ensure prompt service, students should schedule an appointment.

You may set an appointment by:

Email: [tutoring@columbiastate.edu](mailto:tutoring@columbiastate.edu)

Self-schedule at [www.columbiastate.edu/tutoring-appointment](http://www.columbiastate.edu/tutoring-appointment)

Tutoring on the Columbia campus:

Anne Reeves, Finney Library 124, 931-540-1302

Email: [areeves2@columbiastate.edu](mailto:areeves2@columbiastate.edu)

## **Remediation Policy**

Students who do not demonstrate competency in didactic, laboratory, or clinical components of the program may be offered remediation at the discretion of program faculty. Remediation is designed to address specific areas of weakness and support student success while upholding program standards.

Remediation may include:

- Targeted skill practice in the lab

- Written assignments or reflection activities

- Additional testing or skill evaluations

- Scheduled tutoring sessions

Participation in remediation does **not** guarantee a passing grade or continued progression in the program. All remediation activities must be completed within the timeline set by the instructor. Failure to successfully complete remediation or demonstrate sufficient improvement may result in initiation of the dismissal process from the program.

## **Continuation in the Program**

To continue in the program students must pass, with a “C” or better, each math, science and respiratory care course on schedule or ahead of schedule as outlined in the catalog. Those not meeting this requirement may re-apply to the program at a later time.

Actions or inactions which put a patient at risk or cause injury will be grounds for dismissal from the program. An affiliate requesting a student not return will be grounds for dismissal from the program.

## **Re-Admission**

Re-admittance into the program is not guaranteed. Re-admittance is based on the availability of space and the circumstances in which the student originally left the program. Re-admittance requirements include:

1. Submit a written request for re-admittance to the program director. This letter should be submitted no less than 60 days before the start of the semester requested for reenrollment.
2. Schedule an interview with the program director.
3. Meet with the health records clerk to refresh/repeat/update:
  - a. TB skin test or chest x-ray before starting clinical training.
  - b. Complete a physical exam using the approved form if there has been more than a 12 month break since originally entering the program.
  - c. Criminal background check
  - d. Drug Screen
  - e. Clinical facility orientation
4. Documentation of current health insurance coverage.
5. Skill evaluations may be required to help determine which if any clinical courses or competencies must be repeated as determined by the director of clinical education.
6. Depending on the circumstances, the student may be expected to retake classes already passed. In general, students cannot take clinical classes without the co-requisite lecture class(es).
7. BLS healthcare provider card which will not expire before the anticipated graduation date.
8. As appropriate, possess an ACLS and PALS provider card which will not expire before the anticipated graduation date.
9. Other requirements may be identified based on presented circumstances.
10. A student requesting re-admittance into the program must be allowed unrestricted access to all clinical affiliates. Failure to obtain unrestricted clinical access will prohibit a student from returning to the program.

## **Pinning Ceremony**

Prior to graduation, the sophomore class traditionally coordinates a pinning ceremony to celebrate accomplishments. This ceremony is hosted by the freshman class. Attendance by all respiratory care students is encouraged.

## **Respiratory Care Club**

The Respiratory Care Club consists of all members of the freshman and sophomore classes. Officers are elected during the Fall Semester. The president and treasurer are elected from the sophomore class and the vice president and secretary are elected from the freshman class.

## **Professional Organizations**

American Association for Respiratory Care (AARC)  
9425 N. MacArthur Blvd. Suite 100,  
Irving, TX 75063-4706  
1-972-243-2272  
<http://www.aarc.org/>

The AARC is the national organization for respiratory care. The AARC promotes professional excellence, advancement of the science and practice of respiratory care and serves as an advocate for patients, their families, the public, the profession and the respiratory therapist.

Tennessee Society for Respiratory Care (TSRC)  
<http://www.tntsrc.org/>

The TSRC is a chartered affiliate of the AARC. The TSRC promotes programs that advance the education, science, technology, ethics and art of cardiopulmonary care for those interested in all aspects of health care related to the cardiopulmonary system.

National Board for Respiratory Care (NBRC)  
8310 Nieman Rd.  
Lenexa, KS 66214  
913-599-4200  
<http://www.nbrc.org>

The NBRC is the national organization that develops credentialing examinations for the respiratory care profession. The NBRC reviews each exam every five years to ensure its accuracy and relevance. Since Columbia State Community College is a registry program, graduates must take two NBRC exams to earn the registered respiratory therapist, RRT, credential.

Lambda Beta Society  
P.O. Box 15945-292  
Lenexa, KS 66285  
913-495-4411  
<http://lambdabeta.org/Pages/default.aspx>

The Lambda Beta Society is the national honor society for respiratory care. The Respiratory Care Program here at Columbia State Community College is a registered chapter of the Lambda Beta Society.

Entering into the last semester of the program, students in the top 25% of the class based on overall GPA qualify for membership into the Lambda Beta Society.

## **Licensing**

Respiratory care graduates must obtain a license from the State of Tennessee after graduation to work in the state. Graduates may obtain a 12-month temporary license during which time the credentialing exams must be taken. The licensing process is explained in detail during the last semester of the program. Direct questions on this matter to the program director or the licensing board:

Board of Respiratory Care  
665 Mainstream Dr.  
Nashville, TN 37243  
(615)-253-5087 local; 800-778-4123  
<http://tn.gov/health/topic/rc-board>

Initial license application process, forms and instructions are available at the web address above:

1. Complete and notarize the license application and attach a 2x2 to 4x4 photograph (computer generated images will not be accepted).
2. Include with the application a copy of your final transcript sent from the college, a notarized copy of your certificate of completion or a notarized copy of your diploma.
3. Request a final school transcript to be sent to the licensing board.
4. Complete the "Practitioner Profile."
5. Complete the criminal background check. Note, this will take several days to complete and will include fingerprinting. Review carefully the instructions on the form.

### License renewal:

A state license is good for two years. The initial licensing period may be longer or shorter in order to get each applicant onto a two year cycle which corresponds to birth month.

Ten clock hours of continuing education is required each year to maintain a respiratory care state license in Tennessee. Failure to obtain the needed continuing education can result in monetary fines and suspension of your license. However, during the calendar year of graduation, graduates do not need continuing education hours to maintain a license.

## **Credentialing**

Graduates must take two exams to obtain the registered therapist, RRT, credential. The National Board for Respiratory Care, NBRC, develops these exams. The examination process and current credentialing requirements are discussed during the last semester of the program.

NBRC  
10801 Mastin St.; Suite 300  
Overland Park, KS 60210-1614  
913-895-4900 (o)  
931-712-9283 (fax)  
<http://www.nbrc.org>

### Registry examinations:

There are two registry examinations which must be passed in order to obtain the RRT credential (registered respiratory therapist): the Therapist Multiple Choice (TMC) exam and the Clinical Simulation Exam (CSE).

The TMC exam is computer-based, in-person at a testing center. The 140 multiple choice questions must be completed within three hours.

The CSE exam is computer-based, in-person at a testing center and consists of twenty-two patient-based scenarios which must be completed within four hours.

### Maintaining your credential/continuing competency:

Effective July 1, 2002 NBRC credentials must be renewed every five years. There are three options for credential renewal:

1. Provide proof of completion of a minimum of 30 hours of Category I Continuing Education (CE) acceptable to the NBRC.
2. Retake the respective examination(s) for the credential being renewed and achieve a passing score. For the RRT credential, both the written registry and the clinical simulation exams must be taken.
3. Pass another NBRC credentialing examination, not previously completed.



## **Respiratory Care Program Student Handbook**

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Print name

I have been given a copy of the “Respiratory Care Student Handbook” and agree to follow the policies described in it and course syllabi while I am a student in the program.

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Signature

Date

I understand that I am responsible for my own transportation to and from class, clinical training locations, professional meetings, etc. I also understand that a lack of transportation on my part will not be considered an excuse for not attending clinical rotations and other required meetings.

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Signature

Date

I understand that while I am at a clinical affiliate I will follow the policies of the clinical affiliate. I also understand that failure to follow the policies of the clinical affiliate may lead to dismissal from the clinical affiliate and from the Respiratory Care Program.

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Signature

Date