# Idaho State University | College of Technology

# Respiratory Therapy

## 2025-2026

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# I. Message from the Dean

Dear College of Technology Student,

Congratulations on your decision to pursue your education at the Idaho State University College of Technology.  On behalf of all faculty, staff, and administration, I want to take this opportunity to personally extend a warm welcome.  Our mission is to provide you with the skills, knowledge, and abilities to be successful in your chosen career.

I am pleased to see that you made the decision to join the largest, most comprehensive postsecondary technical institution in the state of Idaho.  You now belong to a college that boasts an alumni base of more than 23,000.  For more than 100 years, students have graduated from Idaho State University with the technical skills necessary to successfully enter the workforce.  I am confident that you will also be prepared by our faculty to pursue your passion and have an enjoyable lifetime career.

Amid the excitement of enrolling at Idaho State University, you probably have many questions.  This student handbook has been prepared for your use and contains the answers to many of your questions.  If you would like additional information, please contact your faculty or Student Services directly.  We are all here to help you succeed in your studies and stand prepared to assist you with your concerns.

Once again, welcome to the College of Technology.

Go Bengals!

Jerry Anhorn

Dean

# II. Program Introduction

This handbook is designed to provide information and serve as a resource for most questions and school situations you may encounter as a student in the Respiratory Therapy program. The information provided in this handbook is meant to supplement that provided in the Idaho State University Handbook and Official Student Code of Conduct.

All students are directly responsible to the instructors first. Details regarding program procedures will be covered and questions answered during orientation at the beginning of the program or as the need arises. Problems of any nature will be brought to the attention of the instructors and program coordinator. They will seek assistance for a student problem. If a student feels a need for a conference with someone other than an instructor or the program coordinator, a meeting may be arranged with a student success navigator from the College of Technology Student Services at (208) 282-2622.

## Program Administration

The Respiratory Therapy program is operated by the College of Technology, Idaho State University. The program works in cooperation with the Idaho Career & Technical Education and is approved b y the State Board of Education.

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



**Commission on Accreditation for Respiratory Care**
1248 Harwood Road
Bedford, Texas 76021-4244
(817) 283-2835
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| | |
|---|---|
| Dean | Jerry Anhorn |
| Associate Dean | Debra Ronneburg |
| Health Occupations Department Co-Chair | Jennie Brumfield |
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| Program Coordinator | Danny Duncan |
| Director of Clinical Education | Matt Johnson |
| Instructor | Josh Williams |
| Program Academic Advisor | Hailey Wadley |

## Program Information

### Degrees/Certificates Offered

- Associate of Applied Science          Respiratory Therapy
- Bachelor of Science                        Respiratory Therapy

### Student Learning Outcomes

Graduates of the Respiratory Therapy program will have the following learned capabilities:

1. Demonstrate the ability to comprehend, apply, and evaluate clinical information relative to their role as a respiratory therapist.
2. Demonstrate the technical and clinical proficiency in all the skills necessary to fulfill the role as a respiratory therapist.
3. Demonstrate professional behavior consistent with employer and industry expectations for respiratory therapists.
4. Apply the skills necessary to assemble, maintain, troubleshoot and perform quality control of specific respiratory therapists.
5. Demonstrate the ability to modify the respiratory care plan of patients based on information gathered from clinical and laboratory assessment and the patient's response to therapy.

6. Demonstrate their knowledge and comprehension of patient safety and infection control protocols as they relate to patient care and equipment processing.
7. Show understanding of the ethical obligations and responsibilities as a healthcare professional.
8. Demonstrate critical thinking and problem-solving skills as consultants to physicians and other health care personnel in developing and implementing clinical respiratory care strategies.

# Commission on Accreditation for Respiratory Care (CoARC) Requirements

## General Education Courses and Pre-Requisite Courses

| Course # (if applicable) | Program Pre-Requisite Course or General Education Category | # Credits |
|---|---|---|
| BIOL 1101/L | Prerequisite GEN ED Biology I | 4 |
| BIOL 2221/L | Prerequisite Introduction to Microbiology and Lab | 4 |
| BIOL 3301/L | Prerequisite Anatomy and Physiology Lab | 4 |
| CHEM 1101 or 1111/L | Prerequisite GEN ED General Chemistry | 3 |
| COMM 1101 | Prerequisite GEN ED Principles of Speech | 3 |
| ENGL 1101 | Prerequisite and GEN ED English Composition | 3 |
| HE/HCA 2210/HO 0106 | Prerequisite Medical Terminology and Communication | 2 |
| PSYC 1101 or SOC 1101/1102 | Prerequisite GEN ED Introduction to General Psychology or Sociology | 3 |
| Objective 3 | GEN ED Mathematical Ways | 3 |
| BIOL 3302/L | GEN ED Anatomy and Physiology and Lab | 4 |
| Objective 4 | GEN ED ½ Humanistic & Artistic Ways | 3 |
| Objective 7 or 8 | Critical Thinking/Information Literacy | 3 |
| ENGL 1102 | GEN ED English Composition | 3 |
| Objective 4 | GEN ED ½ Humanistic & Artistic Ways | 3 |
| Objective 9 | Cultural Diversity | 3 |
| | **Total Required for Graduation** | **48** |

## Respiratory Care Courses

| Course # | Respiratory Care Course Title | Lecture Hours | Lab Hours | Clinical Hours | # Credits |
|---|---|---|---|---|---|
| RESP 2200 | Introduction to Respiratory Care | 4 | 0 | 0 | 3 |
| RESP 2200L | Introduction to Respiratory Care Lab | 0 | 4 | 0 | 1 |
| RESP 2211 | Respiratory Pharmacology | 2 | 0 | 0 | 2 |
| RESP 2214 | Introduction to Pulmonary Disease | 4 | 0 | 0 | 4 |

| | | | | | |
|---|---|---|---|---|---|
| RESP 3301 | Critical Care Management | 4 | 0 | 0 | 3 |
| RESP 3301L | Critical Care Management Lab | 0 | 4 | 0 | 1 |
| RESP 3320 | Respiratory Practicum I | 0 | 0 | 225 | 5 |
| RESP 2231 | Patient Assessment and Infection Control | 3 | 0 | 0 | 3 |
| RESP 2232 | Neonatal and Pediatric Respiratory Care | 2 | 0 | 0 | 2 |
| RESP 3325 | Respiratory Practicum II | 0 | 0 | 112 | 3 |
| RESP 2280 | Respiratory Care in Alternative Settings | 2 | 0 | 0 | 2 |
| RESP 3330 | Respiratory Practicum III | 0 | 0 | 225 | 5 |
| RESP 3310 | Clinical Management | 2 | 0 | 0 | 2 |
| RESP 3335 | Respiratory Practicum IV | 0 | 0 | 225 | 5 |
| **Total Required for Graduation** | | | | **787** | **41** |

# III. Policies & Procedures

## Attendance and Punctuality in the Classroom

Employers are very interested in a student's attendance and study habits because they reflect how they will perform on the job. Students are expected to attend all meetings, online classes, laboratory work (intensives) and clinicals in which they are registered. Each instructor may, consistent with departmental policy, establish such specific regulations governing attendance as may seem suited to a particular course. **No one is authorized to excuse a student from a class meeting except the instructor in charge of the class.** (Note: Classroom is broadly defined to include all electronic formats.) Students must have ready access to a computer to attend online presentations.

No student may be absent from the campus in connection with extracurricular activities more than sixteen college instructional days per semester. No one extracurricular activity may take students away from the campus more than twelve college instructional days.

**Arriving late to class is disruptive to your classmates. Should you be more than 15 minutes late, it will be considered an absence. Leaving class more than 15 minutes early will also be considered an absence.** Although the live online classes will be recorded for 24/7 viewing as released by the instructor, students are expected to attend the live online sessions unless they are assigned clinical assignments the day the session is presented. Regardless, all students are required to view 100% of all sessions live or recorded and are responsible for all material covered during any of these classes. All laboratory (intensives) classes are required and must be attended as scheduled as specific skills and procedures will be taught, practiced, reviewed and required skills competencies will be signed off. Students are required to contact the lab intensive instructor prior to the scheduled intensives if a scheduling conflict precludes their attendance at an intensive. The student is required to make up all assignments, skills practice and competency skills sign off with the lab intensive instructor's approval.

## Respiratory Therapy Competency Policy

As a condition of progression through the Respiratory Therapy program, students will attend and participate in class time, lab work, and must complete all appropriate competencies prior to performing a specific skill that requires a competency sign off. If a student is asked to perform a skill or procedure which they have not been competency signed off, the student must not perform the task but direct the request to their appropriate clinical instructor.

Students not completing lab work competencies or clinical competencies will not be permitted to attend clinical sessions until the required competencies are completed.

## Student Required Lab and Clinical Supplies

Students are required to obtain the following items and have available at all lab and clinical assignments;

- Stethoscope
- Pulse Oximeter

Additional requirements;

- Students are required to wear pewter gray scrub top and bottom to clinical sites.
- An ISU Respiratory Therapy student clinical ID badge will be issued prior to clinical visits, which must be worn and be visible during any clinical assignments.
- Program patches will be provided for student to attach to the right shoulder sleeve of scrub top.

## Clinical Attendance Policy

Clinical hours may vary depending on rotation assignment. **Students should report to the clinical site 15 minutes prior to the starting of the clinical session.** A late arrival of 5 minutes or more after the start time of the clinical will be considered a tardy (except in emergencies and approved by the clinical instructor). Two or more tardies will be considered an absence and one clinical day will have to be made up.

The student is expected to attend all labs and clinical assignments which will help to develop and improve your clinical skills. All attendance must be recorded in your clinical journal and signed by the clinical preceptor. If there is any discrepancy as to whether the student was present in the clinical setting, the date of attendance and the clinical preceptor's signature in the student's clinical journal will be considered proof of attendance. Students are not permitted to sign for their clinical preceptors, doing so may be cause for program dismissal. Clinical handbooks must be submitted to the instructor of record for the clinical class prior to week 17 of the semester (during week 8 Wednesday for summer semester). Failure to submit the completed clinical handbook by the due date may result in a zero for the clinical semester assignment.

Any clinical time missed will need to be made up at the discretion clinical site and approval of the program clinical director before the end of the semester, except in special circumstances. This will apply to full and partial days missed. It is the student's responsibility to make arrangements to reschedule lab/clinical time as well as inform the clinical site and the program clinical director that they will be absent. No shows

without a telephone call may result in dismissal from the program.  The student may make up one day without penalty to his or her grade.  If two clinical days have to be made up during the semester, there will be a deduction of 10% from the final clinical evaluation grade and a written warning will be given.  Three absences may result in dismissal from the program.  The student will then have to reapply for admission to the program when this class is offered again.  Students leaving clinical more than 15 minutes early is unacceptable and will result in four hours make-up clinical time.

Children are not allowed in the lab intensives or clinical settings.

## General Grading Policy

Idaho State University uses a graduated letter grading system to indicate the instructor's evaluation of a student's performance in a course.  These letter grades are converted to a numerical value for computing a student's semester and cumulative grade point averages.  At the beginning of each course, an instructor should inform students of the criteria to be used in evaluating their performance through the class syllabus or other written means.

Idaho State University uses letter grades with the four (4) point maximum grading scale.  The grade A is the highest possible grade, and a grade of F is considered failing.  Plus (+) or minus (-) symbols are used to indicate grades that fall above or below the letter grades.  The grades of A+, F+, and F- are not used.  For purposes of calculating grade points and averages, the plus (+) increases the grade's point value by 0.3 and minus (-) decreases the grade's point value by 0.3 (e.g., a grade B+ is equivalent to 3.3 and an A- is 3.7).  A student's work is rated in accordance with the following definitions:

| Letter Grade | Percent | Points | Performance |
|---|---|---|---|
| A | 95-100 | 4 | Excellent |
| A- | 90-94 | 3.7 | Excellent |
| B+ | 87-89 | 3.3 | Good |
| B | 84-86 | 3 | Good |
| B- | 80-83 | 2.7 | Good |
| C+ | 77-79 | 2.3 | Adequate |
| **C** | **74-76** | **2** | **Adequate** |
| C- | 70-73 | 1.7 | Adequate |
| D+ | 67-69 | 1.3 | Marginal |
| D | 64-66 | 1 | Marginal |
| D- | 60-63 | 0.7 | Marginal |
| F | Below 60 | 0 | Unacceptable |

**A grade of "C" (74% or better average) in each course is required by this program.  A "C-" is not acceptable.**

## Release Form

A student must sign a release form if they would like to authorize the instructors in the program to release information to prospective employers regarding grades, attendance, or other pertinent information for gaining employment.

## Clinical Assignments, Policies, and Guidelines

The nature of the clinical activities will vary, depending on the term of the program. Clinical assignments may involve day, evening or night rotations throughout the program.  Clinical training will involve observation of procedures, and the evaluation on the performance of procedures on various patient populations (neonatal, pediatric, adult and geriatric patients).  Due to the seriousness of clinical and the potential harm to patients, the standards of clinical training will be followed closely and enforced strictly.  HIPAA regulations require that the confidentiality of patients and patient information be held in strictest confidence.  Breach of confidentiality will result in disciplinary action and may result in dismissal from the program.

Health Occupations faculty and Clinical Preceptors/Externship Supervisors have the responsibility to assure that they are not involved with HO Department students in dual or multiple relationships.  Dual or multiple relationships are defined as relationships that, beyond the teacher/student role, may include financial, business, personal, sexual, or family connections that could raise questions about the parties' ability to perform their duties professionally, objectively, or without bias.  If these relationships are pre-existing, they should be disclosed to the supervising faculty or the department chairman in order to ascertain whether the student needs to be re-assigned to another faculty member or moved to an alternative clinical/externship location.  The sensitivity to and prohibition of dial relations is not only for the protection of the student involved, but also to the integrity of the program.  Furthermore, it can serve as an assurance to other students in the program that the standards upon which a student will be graded are fair, objective, and not potentially biased by factors outside of a student's actual performance in the program.

## Core Performance Standards

Essential eligibility requirements for participation in the respiratory care program: Respiratory therapy is a practiced discipline, with cognitive sensory, affective and

psychomotor performance requirements.  The Core Performance Standards below identify essential requirements for participation in the respiratory care program.

**CRITICAL THINKING ABILITIES**

- Standards: Critical thinking ability for effective clinical reasoning and clinical judgement consistent with level of educational preparation.
- Examples: Identification of cause/effect relationships in clinical situations and exercise independent judgment and think under pressure.

**INTERPERSONAL SKILLS AND ABILITIES**

- Standards: Sufficient to interact with individuals, health care members, families, and people from a variety of social, economical, cultural and intellectual backgrounds.
- Examples: Establishment of rapport with patients/clients and colleagues.  Have the emotional strength to regularly deal with death and dying.  Capacity to engage in successful conflict resolution.

**COMMUNICATION SKILLS AND ABILITIES**

- Standards: Communication adeptness sufficient for verbal and written professional interactions.
- Examples: Explanation of treatment procedures, initiation of patient education and teaching.  Documentation and interpretation of actions and patient responses to therapy.

**MOBILITY**

- Standards: Physical abilities sufficient for movement from room to room, long periods of standing, and maneuvering in small spaces.
- Examples: Movement about patient's room, work spaces and treatment areas, administration of rescue procedures- cardiopulmonary resuscitation, move bedridden patients and heavy equipment (over 60 pounds).  Walk briskly to emergency situations.

**MOTOR SKILLS**

- Standards: Gross and fine motor abilities sufficient for providing safe, effective respiratory care and therapies.
- Examples: Calibration and use of equipment, manipulate small pieces of equipment and typing documentation in the electronic medical records.

**HEARING**

- Standards: Auditory ability sufficient for monitoring and assessing health needs.
- Examples: Ability to hear monitoring device alarms, other emergency signals, discern auscultatory breath and heart sounds.

**VISUAL**

- Standards: Visual ability sufficient for observation and assessment necessary in-patient care.
- Examples: Ability to observe patient's condition and responses to treatments or therapy, evaluate computerized graphically displayed patient information.

**TACTILE SENSE**

- Standards: Tactile ability sufficient for physical assessment and providing therapy.
- Examples: Ability to palpitate in physical examinations related to therapeutic interventions such as intubation, ABG draws.

*\*Adapted from: SREB Council on Collegiate Education for Nursing, March (1993).  The American with Disabilities Act: Implications for nursing education and UT Health Science Center Department of Respiratory Care.*

## Prior to Attending Clinical

All students that are accepted into the program will be expected to start full clinical assignments at the beginning of the second semester and must turn in a completed health form at the first lab intensive meeting of the first semester.  Students may be assigned to participate in some clinical assignment during the first semester.  The health form must be completed and signed by a physician or nurse practitioner.  All immunizations must be up to date.  If immunizations are not up to date the student may not attend clinical.  A clean criminal background check is required, which will be reviewed by administration to ensure it meets each clinical site employment standards.  This criminal background check must be started by the first lab intensive meeting.  A drug screen will also be required which is done at the student's expense.  The drug screen, which is unannounced, will be conducted by a vendor, at a time and location all determined by program faculty.

All students, regardless of prior history, must have a tuberculosis test 90 days prior to the clinical rotation.  If the TB test is positive, their physical, prior to the clinical rotation, must evaluate the student.  If the student does not have a family physician, the student should make an appointment with their county's health department.  The student must provide documentation of the physician's recommendation and any follow-up health visits to the program prior to entering the clinical rotation.  Should the student fail to provide written documentation of their appointments to the program, it would result in immediate removal of the student from the clinical setting.  The TB test must be repeated the following year and documentation provided to the program unless exposure requires more frequent testing.

All students must complete a Basic Cardiac Care Life Support – Healthcare Providers course prior to starting the clinical portion of the program.  This card must not expire during the program.  A student may not go to clinical without a valid BCLS card.  This course is taken at the student's expense.

If our clinical sites determine additional screening or testing is needed, students will be required to complete the required screening or testing before they will be allowed to attend clinicals at the requesting hospital or clinical site.

## Conduct in the Clinical Setting

You are expected to behave in a professional manner any time you are in the clinical setting.  **Abusive language, distracting or disruptive behavior will not be tolerated.  Any conduct outside of scheduled class sessions that directly and adversely relates to your function in the program will be reviewed and may constitute grounds for possible disciplinary action and possible program dismissal.**  Your conduct will influence your effectiveness with patients and potential employment opportunities.

You are expected to treat patients, visitors, hospital staff, faculty, student peers, and physicians with respect.  At no time will noisy, boisterous, or abusive language be tolerated.  Make sure that your clinical preceptor knows your whereabouts at all times.  This is your responsibility.  If your conduct is inappropriate in the judgment of your clinical preceptor and/or program faculty, you may be subject to disciplinary action.  The disciplinary actions include verbal warning, written warnings, probation, or dismissal from the program.  The degree of the discipline depends on the severity of the inappropriate behavior.

If the clinical site has reason to believe that you are under the influence of illicit drugs or alcohol, you may be required to submit to a drug screening even if the drug screening has previously been done.  The drug screening will be at your expense.  If you refuse to the drug test you may be subjected to disciplinary actions.

HIPAA regulations require that the confidentiality of patients and patient information be held in strictest confidence.  Breach of confidentiality will result in disciplinary action and my result in dismissal from the program.

You will not always get to see or be involved in certain therapies or procedures during each of the 4 clinical rotations in each assigned hospital. You will not be rotated to a different hospital every 8 weeks during each semester of clinicals. Take advantage of each experience you might have at each clinical site as you may see more opportunities throughout different hospitals within each clinical rotation. Each time you set foot in your assigned clinical setting, you must keep in mind that it is considered as an ongoing interview based on your actions, attitude, and performance. You may request which

clinical sire you are interested in; however, it is up to the clinical director to make clinical site assignments based on the preceptor's schedule.

## Clinical Assignments and Travel

Students are required to arrange for transportation to and from their assigned clinical sites.  Each clinical site offers its own unique learning experiences and can accommodate only a certain number of students so rotations to the different clinical sites can be expected.  **Students must be prepared for a variety of starting times at these clinical sites and may travel distances to a clinical site.**  There will be no trading of clinical rotations, except in extreme circumstances, and every attempt will be made to arrange at least one other student to share a ride and gas expenses.  You are responsible for costs incurred during clinical time: housing, food, transportation, parking, and for miscellaneous items.

## Dress Codes in Clinical

Because of the environment in which a health care provider practices, they must follow certain guidelines to ensure their safety as well as the safety of their patients.  The following guidelines are based on that premise.

1. The student is expected to dress in appropriate attire for all clinical sessions as outlined below.
2. The uniform consists of closed-toe and heel leather shoes, top and bottom scrubs (color to be announced), plain white or black t-shirts to be worn under the pewter/gray scrub top.  Idaho State University picture IDs must be worn at all times in clinical.  The uniforms should always be clean and wrinkle free with shoes and shoelaces clean. ISU patch must be attached to the side of the right shoulder.
3. When in uniform at clinical, jewelry must be kept to a minimum.  If earrings are worn, only one pair of small earrings will be accepted.  No bracelets, necklaces, nose, or tongue rings, piercing, or decorative pins will be worn during clinical assignments.
4. When in uniform at clinical, your fingernails are important.  Nails will be kept short at all times and if nail polish is used it should be a natural colored polish.  Acrylic, or false nails, must be removed due to the possibility harboring bacterial and fungal infections.
5. Hair must be clean and pulled back from the face in a manner that prevents it from falling over the shoulders or contaminate sterile fields while in uniform.  Facial hairs need to be well groomed.

6. Use cosmetics sparingly.  Perfumes or highly scented personal products are not to be used because the fumes can cause breathing difficulties in our patients.  When coming to clinical students must be clean and free from body odor.
7. No tobacco products are to be carried by any student during clinical assignments.  If you are a smoker, consider the odor that might cling to your uniform.  If at all possible, try not to smoke before or during clinical time.  If you must smoke, it should only be done in designated areas.
8. Gum chewing, eating and/or drinking is allowed only in designated areas while at clinical.
9. The hospital and/or university reserve the right to require any student who is not correctly dressed to leave the hospital.

## Conduct in an Academic Setting

Professionalism is defined as those behaviors that demonstrate the ability to make independent and sound judgments. These judgments are congruent with current standards of practice. Professionalism also encompasses those traits that project an image. This includes attitude, ethics, honesty, integrity, mannerisms, appropriate communication skills (verbal, non-verbal, written, electronic), personal hygiene, and the ability to remain effective under stress.

Part of professional behavior includes professional courtesy. This includes active participation and attentiveness during lectures and classroom activities. Those students who disrupt the learning environment by chatting, reading newspapers or surfing the internet will be asked to leave the class. The behavior of this type that continues will be documented, and a warning will be issued. Respiratory therapy students are accountable and responsible for their own therapeutic actions and decisions. Students interact with the legal aspects of the respiratory therapist's role, including documentation, confidentiality, honesty, integrity, medication administration, and treatments as prescribed by healthcare providers authorized to prescribe medications, while maintaining safe and effective respiratory care, whether rendered directly or indirectly. Respiratory therapy students are accountable and responsible for maintaining a level of physical and mental health that enables them to function safely and competently in the healthcare arena.

Health Occupations faculty and Clinical Preceptors/ Externship Supervisors have the responsibility to assure that they are not involved with HO Department students in dual or multiple relationships. Dual or multiple relationships are defined as relationships that, in addition to the teacher/ student role, may include financial, business, personal, intimate, or family relationships that could bring into question the ability of the parties to perform their duties in a professional, arms-length, objective fashion, or that might subject the student to the potential of threat or coercion associated with differential positions of power. If these relationships are pre-existing, they should be disclosed to

the supervising faculty or the department chairman in order to ascertain whether the student needs to be re-assigned to another faculty member or moved to an alternative clinical/ externship location. The sensitivity to and prohibition of dual relations is not only for the protection of the student involved, but also to the integrity of the program. Furthermore, it can serve as an assurance to other students in the program that the standards upon which a student will be graded are fair, objective, and not potentially biased by factors outside of a student's actual performance in the program.

## Other Clinical Policies

1. Before leaving clinical, notify your clinical preceptor and make sure that they dismiss you from the clinical site and is aware of any incomplete assignments. Make sure your clinical preceptors know where you are during clinical time.
2. Attending meetings is an excellent opportunity for exposure to further knowledge in the field of respiratory therapy. Notify your clinical preceptor so they may be looking for any additional educational opportunities, physician contact or procedure observations for you during clinical. This is your responsibility.
3. The confidentiality of patients and patient information must be held in the strictest confidence. Breach of confidentiality will result in disciplinary action and may result in dismissal from the program.
4. Personal telephone calls or texting are not to be made during clinical hours.
5. Should you become ill during your clinical time, notify your clinical preceptor. You will have to make up all clinical time missed, except in emergency situations. Arrangements will be made for medical attention as appropriate. You are responsible for costs incurred during treatment.
6. Students must ensure to come prepared to clinical sessions, i.e., have a black pen, stethoscope, note pad, and clinical pocket notebook.
7. Any involvement with law enforcement which results in an arrest or citation other than traffic related while off clinical assignment, must be reported to the program director who may require an additional criminal background check to be conducted. If the results indicate the student no longer meets clinical site employment standards, the student may be dismissed from the respiratory therapy program.

## Respiratory Therapy Program

### Course Length

Eight or more semesters depending on student progress and skill level resulting in an associate of science degree in Respiratory Therapy. Upon successful completion of the

program, graduates are eligible to take the entry-level examination to become certified respiratory therapists (CRT).  They would then be eligible and are highly encouraged to take the advanced-level examination to become registered respiratory therapists (RRT).

## Student Service Requirement

All social work students are required to complete a minimum of 25 hours of volunteer, community work in a social service such as high school tours/conventions. Each student must complete at least 5 hours of service per semester. Hours must be documented in the log sheet found in the clinical handbook which is located in Moodle and should be signed off by either the program and/or clinical director at the end of each semester.

## Job Description

What is a Respiratory Therapist?

Respiratory therapists and respiratory therapy technicians – also known as respiratory care practitioners (RCPs) – evaluate, treat, and care for patients with breathing or other cardiopulmonary disorders.  Respiratory therapists, practicing under physician direction, assume primary responsibility for all respiratory care therapeutic treatments and diagnostic procedures, including the supervision of respiratory therapy technicians. Respiratory therapy technicians follow specific, well-defined respiratory care procedures under the direction of respiratory therapists and physicians.  In clinical practice, many of the daily duties of therapists and technicians overlap, although therapists generally have greater responsibility than technicians.  For example, respiratory therapists will primarily consult with physicians and other healthcare staff to help develop and modify individual patient care plans.  Respiratory therapists are also more likely to provide complex therapy requiring considerable independent judgment, such as caring for patients on life support in hospital intensive care units.  In this statement, the term respiratory therapists include both respiratory therapists and respiratory therapy technicians.

## What Is the Expected Job Market for Respiratory Therapy?

The vast majority of job openings will continue to be in hospitals.  However, a growing number of openings are expected to be outside of hospitals, especially in-home healthcare services, offices of physicians or other health practitioners, consumer-goods rental firms, or in the employment services industry as a temporary worker in various settings.

Median annual wages of wage-and-salary respiratory therapists were $77,960.

*Data obtained from Bureau of Labor Statistics Occupational Outlook Handbook.  Additional salary information is available on the American Association for Respiratory Care Website; www.aarc.org*

## Computer Misuse

Inappropriate use of the computer is considered computer misuse.  All usage is to pertain to class instructional purposes.  The supervisor of each lab will determine what is deemed "inappropriate use" for their particular lab.  For specific computer lab policies, see individual lab instructor.  Inappropriate use may result in denial of computer lab access at the College of Technology.

## Registration and Fee Collection Policy

- All students who are enrolled in semester-based programs must pay their tuition by the Friday before classes begin to avoid a $50 late fee.  For tuition payment information, login to MyISU and go to the Online Fee Payment tile.
- Students who are enrolled only in the eight-week classes (early and late), must pay tuition by the first day of class.

NOTE: It is the individual student's responsibility, regardless of funding source, to see that their tuition is paid on time and that they are officially enrolled at ISU.  Students who do not pay tuition prior to the deadline may be disenrolled.

## Communicable Disease Safety Procedures

It is the policy of ISU to safeguard the welfare of Students, Faculty, Staff, and Campus Residents while maintaining the operations of the University in an effective and efficient manner in the event a member of the University community has a Communicable Disease.

ISU will address issues involving Communicable Diseases in a sensitive and responsible manner, with concern for the rights and welfare of Students, Faculty, and Staff.  The

confidentiality of information regarding any individuals with a Communicable Disease will be respected. All medical records and the patient information contained therein will be handled in accordance with applicable law, including the Health Insurance Portability and Accountability Act (HIPAA) and the Family Educational Rights and Privacy Act (FERPA). However, Idaho law requires medical care providers to notify public health officials of any disease on the Idaho Reportable Disease List as set forth in IDAPA 16.02.10. ISU will disclose sensitive medical information no further than is necessary to ensure the health and safety of all members of the ISU community, and in a manner consistent with applicable law.

ISU will not unlawfully discriminate in policy or practice, including admissions and employment policies, against individuals who have, or are considered to be at risk for, Communicable Diseases. Discrimination against and/or harassment of Students, Faculty, or Staff may result in disciplinary action.

As long as evidence supports, with reasonable medical certainty, that a particular disease is not communicable by contact normally found in the workplace, classroom, or ISU owned facility, the workplace, classroom, or ISU owned facility will not be considered hazardous as a result of the presence of an affected Faculty member, Staff member, or Student.

For more information on this policy, please visit: [Communicable Disease Policy](Communicable Disease Policy)

## Accommodations for Students with Disabilities

The University is committed to providing Reasonable Accommodations, modifications or academic adjustments for Qualified Students with Disabilities in accordance with federal, state, and local disability laws. Pursuant to these laws, no Qualified Student having a disability, or regarded as having a disability, shall unlawfully be denied access to or participation in any services, programs, or activities sponsored by or funded by ISU.

For more information on this policy, please visit: [Accommodations for Students with Disabilities](Accommodations for Students with Disabilities)

## Appeals and Dismissals

A student may be dismissed from a College of Technology program if the student fails to meet the academic and/or nonacademic continuation standards of the

program/department including unprofessional/unethical behaviors and unsafe practices, or if the student is not making satisfactory progress in the program.

For more information on the Scholastic and Dismissal Appeals process, please visit: [Appeals and Dismissals](#)

## Student Conduct Rules and Regulations

The Student Code of Conduct articulates behavioral standards and procedural guidelines designed to empower ISU community members to live, work, study, recreate, and pursue their goals in a safe, secure, and inclusive environment.  Adherence to and enforcement of the code promotes Student accountability, community integrity, and mission fulfillment.

Stealing, Cheating, Dishonesty, and other violations to the student code of conduct will be handled on an individual basis.

Using, possessing, or being under the influence of illicit drugs or alcoholic beverages during school hours is prohibited.

For more information on the Student Code of Conduct, please visit: [Student Code of Conduct](#)

## Smoke Free Campus

Idaho State University is committed to promoting a healthy and safe environment for students, faculty, staff, and visitors. This policy is intended to reduce the health risks related to Smoking and secondhand smoke for the campus community. Smoke and tobacco-free policies are becoming a national standard in order to foster a healthy environment in all communities

For more information on the Smoke Free Policy, please visit: [Smoke Free Campus](#)

## Academic Integrity and Dishonesty Policy

### Policy Statement

Academic integrity is expected of all individuals in academe.  Behavior beyond reproach must be the norm.  Academic dishonesty in any form is unacceptable.

    A.  Academic dishonesty includes, but is not limited to, Cheating and Plagiarism.

B. This policy applies to all forms of University educational activities, including but not limited to, classroom, lab, and online formats.
C. Instructors are encouraged to include specific information in the course syllabus on Academic integrity and dishonesty guidelines specific to the course format and evaluation activities, as well as the link to this policy.
D. Students should not assume that any materials or collaborative learning activities are authorized unless explicitly stated by the instructor in the course syllabus.

For more information on the Academic Integrity and Dishonesty Policy, please visit: [Academic Integrity](#)


## Idaho State University Student Handbook

The following policies fall under the guidance of the Idaho State University Student Handbook.

For more information on each topic, please find the policy and descriptions using the handbook link.

1. Students Rights and Responsibilities (Page 4)
2. Withdrawal (Page 6)
3. Academic Standing (Page 10)
4. Petitions (Page 16)
5. Sexual Harassment (Page 18)
6. Student Complaints and Grievances (Page 18)


[ISU Student Handbook](#)


## Additional Idaho State University policies:

- [FERPA](#)
- [TITLE IX](#)
- [Satisfactory Academic Progress](#)

# IV. College of Technology Resources and Services

## Services for Students

**STUDENT SERVICES:** This office is located in two locations, the main floor of the Roy F. Christensen (RFC) Complex, room 101, and the William M. and Karin A. Eames Advanced Technical Education and Innovations (Eames) Complex, room 102.  Student Services assists students with specific information about the programs at the College of Technology.  Student Success Navigators are available to give students assistance with admissions, class and schedule advisement, academic resources, and specific information pertaining to a student's educational goals.

Hours are 7:30 am to 5:00 pm, Monday through Friday.  Appointments can be made by calling (208) 282-2622.  Appointments are recommended but are not required.  Tours of the programs are available by appointment and can be set up by calling (208) 282-2800. STUDENT SERVICES

**TUTORING ASSISTANCE:** Students who are experiencing difficulties with their program instruction or classroom assignments may receive assistance.  The student's instructor should be contacted first, as many of the training programs have 'peer tutors' available who are familiar with the required curriculum and assignments.

NOTE: It is important to request assistance as EARLY in the semester as possible!  At the point a student recognizes they are having difficulty, help should be sought immediately!  Contact the TAP Center, (Tutoring, Academic Support, Peer mentoring), located in room 380 of the RFC Complex.  Or telephone at (208) 282-3208 for an appointment to discuss specific tutoring needs.  TAP CENTER

**THE CENTER FOR NEW DIRECTIONS** Located within the RFC Complex on the third floor. The Center's telephone number is (208) 282-2454.  Support programs are available at no cost for men and women who are interested in entering/re-entering the job market due to issues which might include: divorce; separation; death; or disability of a spouse. Services are available on job seeking skills, career information, self-esteem, self-confidence building, and personal counseling.  The Center also provides a limited number of scholarships for single parents and for women and men interested in pursuing 'non-traditional' fields of training.  CENTER FOR NEW DIRECTIONS

Success in this course depends heavily on your personal health and wellbeing. Recognize that stress is an expected part of the college experience, and it often can be compounded by unexpected setbacks or life changes outside the classroom.  You are encouraged to reframe challenges as an unavoidable pathway to success.  Reflect on your role in taking care of yourself throughout the term, before the demands of exams and projects reach their peak.  You are encouraged to reach out to the center about any difficulty you may be having that may impact your performance in this course.  If you are experiencing stress in other areas of your campus life, the center will help you get in contact with other resources on campus that stand ready to assist you.  In addition to your student success navigator, you are encouraged to contact the many other support services on campus that are available.

## **Statement on Services**

- Students enrolled in Idaho State University College of Technology are eligible to receive free, confidential personal and career counseling from licensed professional counselors at **Center for New Directions (CND)**.  We offer individual counseling and Biofeedback.  **Call 208-282-2454**, Monday through Friday, from 8 am to 5 pm, to schedule an appointment or to speak immediately to a counselor if you are in crisis.
  CENTER FOR NEW DIRECTIONS

- **ISU Counseling and Mental Health Center (CMHC)** The university Counseling and Mental Health Center serves Idaho State University and its community with a dual mission. Our counseling services mission is to support the academic, emotional, social, vocational, spiritual, cultural, and professional development of students and other members of the ISU community by offering counseling, outreach, consultation, training, and educational and health promotion services. Our testing services mission is to initiate and provide a secure, professional, and proctored testing environment to meet individual, University, and community needs for admission, certification, licensure, correspondence, course placement, job placement, and academic course exams that adheres to the NCTA Professional Standards and Guidelines.  Crisis intervention services are available Monday through Friday, from 8 am to 4 pm.

  To establish services:
  Please call 208-282-2130, Monday through Friday, from 8 am to 4 pm.

**Mental Health Services for Out of State ISU Students**

ISU Counseling and Mental Health Center has partnered with LifeWorks, Inc. to bring the MySSP tool to ISU students while they are physically out of the state of Idaho.  Through MySSP, students can access health assessments, real-time chat support, and free counseling from licensed mental health professionals.

**Accessing MySSP**

- Connect with My SSP by calling 1-866-743-7732 or visiting **LINK**.  IF calling from outside North America: 001.416.380.6578.
- Download "My SSP" from the app store to use on your phone.

## Financing Your Education

Students attending the ISU College of Technology can apply for federal financial aid by submitting a Free Application for Federal Student Aid (FAFSA) form each year they are enrolled at the University.  FAFSA applications are available on the web at:

**FAFSA**

It is strongly recommended that students apply early.  Keep the Financial Aid office notified of any changes in student status such as address change, marriage, etc.

NOTE: Students who leave school prior to successful completion may have to repay federal financial aid received.  Call the ISU Financial Aid office immediately if you plan to withdraw from school, (208) 282-2756.  The website for financial aid is:

**FINANCIAL AID**

Numerous scholarships are available to College of Technology students.  The ISU Scholarship Department website lists those scholarships through the Bengal Online Scholarship System (BOSS).

The most common scholarships are the Associated Students of ISU (ASISU) Need and Scholastic awards.  Funds for these scholarships come from a portion of the registration fees each student pays.  Many scholarships are donated by business/industry, organizations, or individuals and have specific criteria which must be met.

**SCHOLARSHIPS**

## Traffic and Parking

NOTE: Please refer to the ISU Parking web address at:
**PARKING & TRANSPORTATION**

Every motor vehicle on the ISU campus must be registered and display an appropriate ISU decal.  Parking permits are available at the ISU Traffic Office located at the corner of South 5th and Humboldt Street, telephone (208) 282-2625.

Cost:

- General Lot: $183
- Reserved Lot: $365

Students may park only in the area their parking decal designates.  Students at the College of Technology may not park in the Cosmetology Patron parking spaces.  The parking meters at the RFC Complex are reserved for visitors and new applicants inquiring about school.  Students are NOT PERMITTED to park in metered spaces.  Students should be aware of the ISU towing policy.  Any vehicle that has incurred outstanding fines of $50 or more and has received a tow warning may be towed from campus at the owner's expense, even if legally parked.

Any traffic tickets resulting in fines owed to the University must be paid or student's transcripts, certificates, and/or degrees will not be released upon completion of their training program.  In addition, registration for the next term will not be permitted until the fines and other financial obligations are paid or proper arrangements are made by the student.

For more information on parking regulations, visit: https://www.isu.edu/parking/permit-information/regulations/

# V. Idaho State University Resources and Services

## Disability Services

### Mission Statement

The mission of Disability Services (DS) is to increase equal access and opportunities to all programs and services sponsored or funded by Idaho State University. DS is dedicated to creating an accessible environment for students, employees, and community members with disabilities. In achieving this, DS:

- Works collaboratively with University Partners to foster a welcoming, diverse, and inclusive University community.
- Collaborates with and empowers individuals who have documented disabilities by working together proactively to determine reasonable accommodation(s).
- Promotes a culture of self-advocacy, responsibility, and agency.
- Ensures compliance with the Americans with Disabilities Act Amendments Act (ADAAA) and other current legislation.
- Readily responds to grievances and advances inclusion through the removal of identified informational, physical, and/or attitudinal barriers.
- Advocates for Universal Design (UD) as a crucial framework to support the diverse needs of students, faculty, staff, and community members.
- Develops partnerships with external community members/groups to support the advancement of equity and inclusion at the local, state, and national levels.
- Provides institution-wide advisement, consultation, and training on disability-related topics, including but not limited to: legal and regulatory compliance and universal design.

### Contact Information

**Disability Services**
Rendezvous Complex, Room 125
921 South 8th Avenue, STOP 8121
Pocatello, ID 83209-8121
Phone: 208-282-3599

Fax: 208-282-4617
VP for ASL: 208-530-6505
Email: disabilityservices@isu.edu
DISABILITY SERVICES

## Office of Equal Opportunity & Title IX

The Mission of the Office of Equal Opportunity & Title IX is to foster a culture of connection and belonging within our community.

Our Vision is to inspire our community to develop and maintain an equitable and inclusive environment through support, outreach, and collaboration.

The University is committed to creating and maintaining a learning and working environment free of discrimination and harassment against any individual based on that person's race, color, religion, gender, age, sexual orientation, national origin, ancestry, physical or mental disability, or Veteran's status. Our helpful, friendly staff are available to work with any university community member. We look forward to serving you.

### Contact Information

**Office of Equal Opportunity & Title IX**
Rendezvous Complex, Room 151C
921 South 8th Avenue, STOP 8315
Pocatello, ID 83209-8315
Phone: 208-282-3964
Fax: 208-282-5829
EQUAL OPPORTUNITY

## Additional Resources and Services

The following are Idaho State University resources and services to help our students succeed.

- [Career Center](#)
- [Commencement](#)
- [Counseling and Mental Health Center](#)
- [Health at ISU](#)
- [Disability Services](#)
- [Parking and Transportation](#)
- [Student Resources](#)
- [Tutoring](#)

# VI. Handbook Signature Form

**Idaho State University | College of Technology**

HANDBOOK SIGNATURE FORM

I acknowledge that I have received, read and understand the Respiratory Therapy Handbook.  I have also reviewed the Idaho State University Student Handbook and understand the privileges and responsibilities of attending Idaho State University.

_____

PRINTED NAME

_____

DATE

_____

SIGNATURE

_____

BENGAL ID #

_____

INSTRUCTOR SIGNATURE

# VII. Media Release

**Idaho State University | College of Technology**

MEDIA RELEASE

Instructions: Please review and indicate your agreement to this Release by signing below.

I hereby grant permission to Idaho State University (Idaho State) to use my name, image, voice, and likeness in all forms of physical and digital media for Idaho State's educational, marketing, and promotional purposes in perpetuity. Idaho State shall have the right to photograph, record, publish, re-publish, adapt, exhibit, perform, reproduce, edit, modify, make derivative works, distribute, display or otherwise use or reuse my name, image, voice and likeness in all markets, media, and technology now known or hereafter developed.  Idaho State may exercise any of these rights itself or through any assignees, licensees, or other parties including other Universities.

I acknowledge that I will not be compensated for these uses, and that Idaho State exclusively owns all rights to the images, videos, recordings, and any derivative works created by Idaho State or its employees. I waive the right to inspect or approve of these uses. I hereby release Idaho State, its assignees, and its licensees from any claims that may arise from these uses, including without limitation claims of defamation, invasion of privacy, or copyright.

This Release is binding on me, my heirs, assigns, and estate. I understand Idaho State is not obligated to use any of the rights granted under this Release

_____          _____

FULL NAME (PRINTED)                                      SIGNATURE

_____          _____  _____  _____

ADDRESS (STREET)                                          CITY                    STATE      ZIP

_____          _____  _____  _____

EMAIL ADDRESS                                              TELEPHONE NUMBER      DATE

# VIII. Computer Usage Policy

**Idaho State University** | **College of Technology**

COMPUTER USAGE POLICY

Person(s) using any of the ISU computing resources for personal gain, violation of security/privacy or whootherwise compromise the integrity of the hardware and/or software shall be prosecuted to the full extentof the law.

Legitimate use of a computer or computer network does not extend to whatever you are capable of doing with it.  Although some rules are built into the system itself, these restrictions cannot limit completely what you can do and see.  In any event, you are responsible for your actions whether or not rules are built in, and whether or not you can circumvent them.

Inappropriate use of the computer is considered computer misuse.  The supervisor of each lab will determine what is deemed "inappropriate use" for their particular lab.  For specific computer lab policies, see individual lab instructors.  Inappropriate use may result in denial of computer lab access at the College of Technology.

The misuse of this computing account, or use of an account belonging to another, may result in the loss of your computer privileges.  Where computing is required to complete course work this may effectively require transfer to a non-computer related program and/or hinder your pursuit of a degree.  Examples of misuse are: sharing your personal account with another individual, using unauthorized passwords, using for financial gain or business purposes, sending offensive electronic mail or internet correspondence, chain letter, or other such correspondence, unauthorized transfer of computer programs or data, attempts to circumvent established procedures, computer security breach or attempts to break security.

I have read the entire student computing contract.  I acknowledge and agree to use the ISU computing resources solely for university instructional, administrative, or research activities in accordance with the above policy.  I further acknowledge that any abuse of the above privilege may result in the loss of computing privileges whether or not such privileges are necessary for continued enrollment in my present course of study.

_____          _____
PRINTED NAME                                                                    DATE


_____          _____
SIGNATURE                                                                       BENGAL ID #

# IX. Health Occupations Department Consent for Release of Information

**Idaho State University | College of Technology**

**Respiratory Therapy Program**

I hereby consent and give my permission to the faculty and staff of Idaho State University College of Technology Health Occupations Department to provide information, both oral and written, to prospective and future employers, both public and private; such information shall include but shall not be limited to records, grades, performance evaluations, observations, and any other information which might be pertinent to a prospective employer seeking to verify and evaluate my qualifications for a position.  Once employed, my employer is allowed to complete evaluation information provided by the college and RT program that may reflect my current or past performance.  I understand that I have the right to revoke this Consent for Release of Information at any time, but that I must do it in writing and that any such revocation will become effective only upon actual delivery to the Health Occupations Chair.

_____          _____

Student's Signature                                                              Date

_____

Student's Name (Print)

_____

Bengal Card Number

# X. Medical History and Physical Examination

**Idaho State University** | **College of Technology**

## Respiratory Therapy Program

College:_____ Department:_____

921 South 8th Avenue, MS_____

Pocatello, Idaho 83209-_____

Program of Study_____

Fax Number:_____ ATT:_____

**STATUDENTS PLEASE COMPLETE**

**BEFORE GOING TO YOUR PHYSICIAN FOR EXAMINATION**

REPORT OF MEDICAL HISTORY

|  |  |  | M/F |
|---|---|---|---|
| Last Name | First | Middle | Sex |

Home Address:  Number & Street ......... City ......... State ......... Zip ......... Date of Birth

## PERSONAL HISTORY

**Please check those which you have had or now have**

| Have You Had | Yes | Date | Comments | Have You Had | Yes | Date | Comments |
|---|---|---|---|---|---|---|---|
| Head Injury with Unconsciousness |  |  |  | Tuberculosis |  |  |  |
| High or Low – Blood Pressure |  |  |  | Heart Condition |  |  |  |
| Back Problems |  |  |  | Jaundice |  |  |  |
| Stomach, Intestinal, Gallbladder Trouble |  |  |  | Disease or Injury of Joints |  |  |  |
| List All Operations: |  |  |  |  |  |  |  |
|  |  |  |  | Kidney Disorder |  |  |  |
| List All Current Medications: |  |  |  | Allergy: Asthma |  |  |  |
|  |  |  |  | Hay Fever |  |  |  |
|  |  |  |  |  |  |  |  |

I hereby declare that I have no illnesses or emotional problems not discussed with my physician that will interfere with my enrollment in the program.  I hereby grant permission for the information requested on this form to be released to the

_____ OF _____

Applicant's Signature                                                        Date

## PHYSICIAN PLEASE COMPLETE
### REPORT OF HEALTH EVALUATION

BP                    Height                    Vision – Right 20/                    Left 20/

Pulse                 Weight                    Corrected – Right 20/                 Left 20/

| ARE THERE ANY ABNORMALITIES? | YES | NO | DESCRIBE |
|---|---|---|---|
| 1. Head, Ears, Nose, or Throat | | | |
| 2. Respiratory | | | |
| 3. Cardiovascular | | | |
| 4. Gastrointestinal | | | |
| 5. Hernia | | | |
| 6. Eyes | | | |
| 7. Genitourinary | | | |
| 8. Musculoskeletal | | | |
| 9. Metabolic/Endocrine | | | |
| 10. Neuropsychiatric | | | |
| 11. Skin | | | |

| HEPATITIS B | INFLUENZA | MMR | Tdap | VARICELLA | TB |
|---|---|---|---|---|---|
| + Positive Titer -Negative Titer  Attach lab result | Yearly Vaccine  August – March | 2 documented doses OR proven serologic immunity to all three | Booster as an adult within the last 10 years | 2 documented doses OR proven serologic immunity | Skin Test (PPD) Mm induration (>10mm is +) OR IGRA + or − |
| Negative titer requires further evaluation | | Attach copy of vaccine administration record OR attach lab result | Attach copy of vaccine administration record | Attach copy of vaccine administration record OR attach lab result | Attach copy of document PPD mm reading or IGRA lab result  If positive* CXR attach report from radiology |
| | | | | | |
| **Please refer to ISU screening recommendations for details about serologic immunity, vaccines, and *TB screening** | | | | | |

Is the patient now under treatment for any medical or emotional condition? Yes_____No_____
Does this person have any limitations regarding lifting and moving of people and or equipment?
Yes_____No_____
In your opinion, does this applicant have the mental and physical health to meet the requirements of being an active and successful student in the _____Department as well as for being employed professionally following graduation?  Yes_____No_____
Comments:

_____        _____        _____
Physician's Signature                            Date                    Address


_____        _____
Print Name                                          Phone

# XI. Drug Screening Letter of Introduction

Please see the attached Drug Screening Letter of Introduction.

# Idaho State University | College of Technology

# Letter of Introduction
<mark>Donor is responsible for payment</mark>

Failure to report to a collection site, and provide results as instructed, before _____ may be considered a refusal to test.  Students are responsible to make appointment for testing as necessary. Please retain a copy of your results.

**Program:**___Respiratory Therapy Program____ **Date Scheduled:**_____ **Time:**_____

**Student Name:**_____ **ID#:**_____

**Reason for test:**                                 **Type:**

**X**_____Pre-Practicum                            **X**_____Instant 10 Panel

_____Random                                    _____Breath Alcohol

_____Post Accident

_____Return to Duty

_____Other

**You can use any site as long as you receive a 10 Panel Drug Screen.**

**STUDENT:** By signing below you are requesting that the testing facility to release your results to Idaho State University College of Technology Health Occupations Department.  This information will be used to determine your practicum eligibility.  These results will be protected, and will only be shared with parties with an educational need to know as allowed by FERPA.  By signing below, you agree to allow testing facility to release this personal health information.

Student Signature:_____Date:_____

**All Testing Sites:** If further testing is required, please contact ISU.  A clear, readable, copy of this release and the screening results must be sent to ATT: Tashina Hunsaker at fax: 208-282-3743 or email: browtash@isu.edu.

Date result sent to ISU:_____Time sent to ISU:_____Method used (circle one):

FAX/EMAIL/STUDENT

A few options for testing Pocatello are listed below:

- Student Health Center (208) 282-2330
- Portneuf Medical Center Work Med (208) 239-1940
- Intermountain Medical Clinic (208) 238-1000
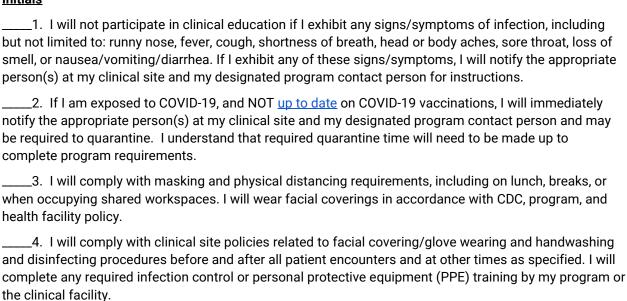
# XII. Clinical Education Assumption of Risk

**Respiratory Therapy Program**

Participation in clinical education, including clinical simulations in didactic (classroom) settings, is required by professional accreditation standards for health sciences programs. Participation in such activities, including any placement in a healthcare facility or clinical site (including hospitals, clinics, pharmacies, or other such entities) for the purpose of clinical education entails certain risks, including the risk of exposure to infectious diseases and other personal injuries. Similarly, there exists some level of risk in didactic settings. While every effort will be made to minimize risks to students, staff, and faculty, the elimination of all such risks is beyond the control of the program or university. Vaccination for many infectious diseases, including COVID-19, may be required by a healthcare facility for placement in clinical education. If unvaccinated, restrictions upon student activities by the program or site may be imposed. Placement at certain healthcare facilities or sites may be contingent on vaccination status and requirements may change without advanced notice. Educational opportunities missed due to lack of vaccination may delay graduation and/or result in additional educational expenses.

I freely and voluntarily accept the health risks and potential facility requirements described above to complete my clinical educational requirements. I also understand that COVID-19 vaccination is recommended, but not required by Idaho State University. I understand that COVID-19 vaccination may be required by some health facilities or clinical sites to participate in certain aspects of clinical education. If I choose NOT to be vaccinated for COVID-19, I may be required to adhere to additional guidance based on CDC recommendations. Before engaging in clinical education, please read, initial, and sign the following:

**<u>Initials</u>**

_____1.  I will not participate in clinical education if I exhibit any signs/symptoms of infection, including but not limited to: runny nose, fever, cough, shortness of breath, head or body aches, sore throat, loss of smell, or nausea/vomiting/diarrhea. If I exhibit any of these signs/symptoms, I will notify the appropriate person(s) at my clinical site and my designated program contact person for instructions.

_____2.  If I am exposed to COVID-19, and NOT up to date on COVID-19 vaccinations, I will immediately notify the appropriate person(s) at my clinical site and my designated program contact person and may be required to quarantine.  I understand that required quarantine time will need to be made up to complete program requirements.

_____3.  I will comply with masking and physical distancing requirements, including on lunch, breaks, or when occupying shared workspaces. I will wear facial coverings in accordance with CDC, program, and health facility policy.

_____4.  I will comply with clinical site policies related to facial covering/glove wearing and handwashing and disinfecting procedures before and after all patient encounters and at other times as specified. I will complete any required infection control or personal protective equipment (PPE) training by my program or the clinical facility.

_____5. I will follow all infection control guidelines, policies, and procedures of the clinical facility, program, and/or university. Such guidelines are subject to change as more information becomes available.

_____6. I recognize the dangers to myself and others of acquiring infectious diseases during clinical education, including the possibility of health-related consequences of such diseases. I recognize that vaccination for COVID-19 and other infectious diseases is recommended to decrease the risk of these consequences.

_____7. I have the right to feel safe during clinical education. I have the ability to talk to my clinical instructor regarding any concerns I may have related to breaches in infection control measures or public health recommendations at any clinical education site.

_____8. I recognize I have the right not to participate in clinical education because of potential risks to myself and/or members of my household. I recognize that any missed clinical education time due to lack of participation will need to be made up to complete program requirements and may delay my graduation.

_____9. If I test positive for COVID-19, I will notify my program's clinical coordinator and follow their instructions.

_____10. I will follow all ISU or health facility-related screening requirements.


11. Vaccination status. Please initial one of the following and provide dates if applicable:

_____ I have been fully vaccinated* with an FDA-approved COVID-19 vaccine. **Date(s):_____,** **_____**

_____ I have been fully vaccinated* with an FDA-approved COVID-19 vaccines, including being up to date with the recommended boosters. **Date(s): _____,_____,_____** **,_____**

_____ I have not received an FDA-approved COVID-19 vaccine, but will be fully vaccinated* within 6 weeks.

_____ I will not be receiving an FDA-approved COVID-19 vaccine.

*Fully vaccinated means that you have met the vaccine recommendations included on the CDC webpage which is kept up to date.

**Documenting Exemptions:**

Students may request an exemption to a clinical facility or site's vaccination requirement for valid medical or religious reasons. If a student chooses not to be vaccinated for a medical or religious reason and seeks an exemption from the vaccination requirement imposed by a clinical site, further documentation may be required by the site. Some sites may facilitate the religious exemption request themselves and the student will need to complete the site's appropriate form. Other sites may ask the university to help facilitate this process. Decisions to accept an exemption request are generally up to the clinical site.

**Medical exemption requests:** Students should work with the ISU Office of Disability Services for disability accommodations. Students can fill out a Student Request for Services Form or call (208) 282-3599 (Pocatello), (208) 373-1723 (Meridian), or email disabilityservices@isu.edu. Upon the conclusion of the accommodation process, the Office of Disability Services will email a letter to the student with the decision of the medical exemption request for submission to any requesting clinical site.

**Religious exemption requests:** Students should work with the Office of Equal Opportunity & Title IX for a religious exemption request by completing the Religious Exemption Request Form. The Office of Equal Opportunity & Title IX will email a letter to the

student with the decision of the religious exemption request for submission to any requesting clinical site. Students can reach the Office of Equal Opportunity & Title IX at (208) 282-3964 or email taysshir@isu.edu to request the form.

**Opt-out Guidelines:**

In general, satisfactory progression through professional curricula requires that students complete clinical and didactic course requirements in the semester in which they are enrolled.   Programmatic requirements are based on professional accreditation standards and licensing board requirements, and include clinical education activities.  Should a student be unable to complete requirements due to illness or CDC-recommended isolation/quarantine, make-up work may be allowed if congruent with programmatic or university policies for other medically-related absences. Should a student choose not to complete any course or program requirement related to clinical education, the student is responsible for contacting the course instructor and providing a rationale for "opting out." Opt-out policies may vary between programs; students should contact their individual programs for specifics on process. Delays in progression and/or graduation may occur due to quarantine time and/or if a student chooses to opt-out of any aspect of required coursework or clinical education.

_____          _____

Student Signature                                           Date

_____

Student Printed Name

This assumption of risk is in effective for the course of the program of study or until a new document is signed, whichever is greater.

**Updated 5/17/23 CTO**          Reviewed by ISU General Counsel

# XIII. Document of Understanding

**Idaho State University** | **College of Technology**

**Respiratory Therapy Program**

I, _____ (print name), understand that the clinical component of the Respiratory Therapy Program has a variable schedule. The scheduling is subject to the availability of clinical preceptors and the operations of the respiratory care department.
Clinical rotation hours vary and may begin as early as 5:00 AM in the morning, or start as late as 7:00 PM in the evening. Each shift can be for as many as twelve (12.5) continuous hours. Students may be scheduled anywhere from one (1) to three (3) days per week.

Clinical rotation days may be assigned any day of the week and are subject to change. Students may be assigned to any of our affiliated clinical sites. As part of our accreditation standards, students are expected to meet a minimum number of clinical hours while attending several different clinical sites. Good clinical experience, sites and clinical preceptors are precious resources and are to be treated accordingly.

The DCE may allow students to make clinical scheduling requests, but is not obligated to fulfill such requests. Consideration will be given for an emergency supported by verifiable documentation or other forms of proof (which is still subject to clinical site availability).

It is the sole responsibility of each student to arrange for transportation to and from clinical sites.
It's also the student's responsibility to arrange childcare, personal, work, or employment schedules to ensure attendance for each scheduled clinical day. Students are expected to make-up any hours missed due to extreme weather, Holiday's, or any additional valid reason. In the event that a student cannot attend their scheduled clinical shift (for any legitimate emergency/verifiable reason), the student will be responsible for arranging the make-up of required hours with their assigned clinical site and must also seek the approval of the DCE.

Students must understand that missing scheduled clinical hours may jeopardize their ability to pass the course. A minimum number of clinical hours (see course syllabus/clinical handbook) and attendance is mandatory, to comply with accreditation and graduation requirements. Due to the rigorous demands of the Respiratory Therapy program, it is recommended that students do not work while attending this program (Part-time or PRN may be acceptable with above average gpa).

Background investigations, drug tests, and all applicable immunizations must be completed before any student may begin clinical rotations, this is the student's responsibility.


_____          _____
Signature of Student                                             Date

_____          _____
Witness Name and Signature                                   Date

# XIV. Health Occupations Department Professional Email Etiquette Policy

Etiquette rules for communicating in the workplace. Below are some useful tips to use in your emails for years to come!

1. **Email Response:** Don't respond to an email when you are emotional! Take a step back, compose yourself, get outside advice, or sleep on it. You'll come back refreshed and with a clear mind, ready to craft a balanced and professional email without the emotions attached.

2. **Salutation:** A salutation is a professional greeting such as Dear *Name*, Greetings *Name*.
   - Never use words like "hate", or such greetings as, "Hey", "Howdy "or other slang.
   - When choosing a salutation, consider the audience. Your greeting sets the tone for your email, so choose it wisely.
   - Do not use first name only with an individual in a position of authority unless invited to do so. For example, you would address the President of the ISU as *President Satterlee.*

3. **Subject Line:**
   - Make sure your subject line is clear. In the event you have no subject line, the other person may not answer your email, or may take a long time to reply.
   - Appropriate subject lines give the theme of the email and gives the receiver an idea of the importance of your email. Make subject line as specific as possible. Invest an extra minute in a specific subject line, and it may make the difference between being ignored and answered quickly.
   - Most professionals receive numerous e-mail messages each day, yet they may have little time to respond. Many people prioritize answering e-mails based on the subject line. A blank subject line is not useful to the reader.

## Here are a few examples of ineffective and effective subject lines:

| Ineffective Subject lines | Effective Subject Lines |
|---|---|
| Question | Question about Application for XXX |
| Request | Recommendation Letter Request |
| Sick | Missing work due to Illness |
| Meeting | Meeting with you for extra help with evaluations |

| Thank you | Thank you for your help in XXXX remediation |
|---|---|
| Late | Arriving late to work, arrive at 11:00am -1:00pm |
| Early | Leaving work at break 10:00am |

4. The message: Follow a proper email format.

Keep it brief and to the point. It is wise to follow the correct email format:

- Subject line: describe what the email is about in a few words.
- Introduction: state purpose of the message, mention the recipient's name and add a proper greeting.
- Body: Write the main message and supply the necessary details. Always be courteous and kind.  Use words such as, "Please" when asking for help and "Thank-you" when someone has given you the gift of their time. Always recognize when someone has taken time out of their day to help you.
- Conclusion: Close with a courteous statement. Include your name, surname, company name and sign-off.
- Avoid stream-of-consciousness messages. In other words, don't just write words as they come to you; read it from the recipient's perspective and edit accordingly before you click "send."

5. **Tone of email:**
   a. **Watch your tone and be respectful. Here are some useful tips!**

   **Poor Tone:** *"I tried to access the link to the XXXX database you recommended, but it won't go through! How am I supposed to complete this assignment?!"*
   **Professional Tone: "***Attached is the personal statement required for the XXXX application. I sent the personal information form and recommendations on May 4, so the submission should complete my file."*
   **Do not** use phrases such as: *"everyone is*", *"it's not just me"*. Emails should specifically address the question that **YOU** have. Please do not speak for everyone.
   **Do not** use threatening language such as: *"if this is not addressed I will go to the Dean/VP"*
   b. **When asking another faculty or staff member for a favor:**
   Please remember that other faculty and staff have work to do, which takes priority. When you need some help or a favor from another faculty or staff, always ask first the other person, "Are you available on…" "Do you have time to help me with…"
   c. **It is a good practice to acknowledge that you have received the email.**
   "Thank you for your email." "Thank you for letting me know." "I will get back to you as soon as I can."

6. **Formatting and Other thoughts:**

- Use proper paragraphing or bullet points. Many writers make the mistake of lumping all the content of an e-mail message into one long paragraph. Short paragraphs or bullet points lend themselves well to skimming, a practice that most e-mail readers use.
- Add a space between paragraphs to provide a visual clue as to where a new message starts.
- Use Standard English. Text language is unacceptable.
    - Run a spell-check. In fact, consider writing important or lengthy messages in a word processing program. When you're satisfied with the draft, you can copy and paste it to the email program.
    - Make sure that any attachments you intend to send are truly attached. Also, refer to the attachment in the message itself to alert the reader to its presence.
    - E-mail is an excellent academic and professional tool you can use to your benefit. Extra time spent crafting effective e-mail messages is an investment in a practical and valuable communication skill.

**I acknowledge that I have read and understand the Email Etiquette Policy. If you have questions, pleases do not hesitate to seek clarification. **

Student Signature:_____          Date: _____

# XV. Communicating in the Workplace

## Proper Email Etiquette for Professionals

Additional rules for communicating in the workplace:

1. **Proofread your emails.**
   The occasional spelling or grammar mistake is unavoidable.  But if your emails are always littered with them, it is a problem: You look unprofessional and like you do not care about your job – not a good image to portray among colleagues.

2. **Check that the recipient's name is spelled correctly.**
   Common names like Cathy or Sean can be spelled differently. Always check name spelling.

3. **Use emojis sparingly.**
   It is far easier to say, "Do not use emojis – ever!" It saves you any trouble, even if it is okay to use emojis in certain circumstances. But realistically, this won't happen – and chances are you have probably already used them.
   So here is a general take on emojis: If you use emojis in formal business emails, use the correct ones, use them sparingly, and use them only with people you know well.

4. **Don't send emails over the weekend.**
   People need time to disconnect from work, so it's important to respect their time.  Plus, you will want to set an example for how you want to be treated.  If you do not want to receive emails about work during your Saturday afternoon barbecue, then don't send them to others off work hours **unless it is an emergency**. At which time, it should be followed by a phone call or text, so the person knows there is an email coming.

5. **Timing.**
   Respond to emails promptly. In a perfect world, we respond to emails immediately. But busy schedules and cluttered inboxes means this is not always possible. A good rule to follow is to respond to emails within 12 hours.  If you need more time to respond, let the person know you will get back to them at a later date.
   Always acknowledge what the sender has sent and that the recipient received it.

6. **Remember to set out-of-office messages.**
   Out-of-office messages are commonly used when people go on vacation. They also include a note informing people who they can contact for any urgent requests.

7. **Always be kind.**
   Emails can be so easily forwarded to other people. Always be kind.  If you are frustrated, take a moment, an hour, or however long before sending that email.  Use words like "please" and "thank-you" and above all else, be kind.

   **Proper email etiquette will always be crucial because it orders our communication, improves efficiency, and makes us look professional. That is why we have rules like using proper salutations, replying promptly, and setting out-of-office replies.**