RESPIRATORY THERAPY

2021 – 2022
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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 ISU, 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 with your concerns.

Once again, welcome to the College of Technology.

Go Bengals!

Debra Ronneburg
Interim Dean
II. COVID-19 Information

Idaho State University has returned to in-person instruction and on-campus activities for Fall 2021. To protect the health and safety of our entire campus community, Idaho State will continue to follow CDC guidelines.

Effective August 11, 2021, face coverings are required indoors for all individuals – regardless of vaccination status – unless alone in a private office, campus residence, or workspace.

The University is not implementing any physical distancing requirements, and face coverings are not required when outside on any of our campuses. The on-campus face covering requirement for indoor spaces will be reviewed every two weeks and removed as the local situation improves.

COVID-19 Screening Program
The University's non-invasive, saliva-based screening program is available to members of the campus community who may have COVID-19 symptoms, know COVID-19 exposure, or related to travel requirements. For more information or to schedule a screening, please visit isu.edu/roaringback/covidscreening.

COVID-19 Self-Report Form
If you believe you have symptoms of COVID-19, have had a recent positive COVID test, or have come into contact with someone who has tested positive for COVID, please fill out the COVID-19 Symptoms, Exposure, & Test Result Self-Reporting Form. isu.edu/self-reporting-form

COVID-19 Vaccination Information
The COVID-19 vaccination is widely available at no cost. Idaho State University has many pop-up vaccination clinics available this fall for students, faculty, and staff. The vaccine is also available at local clinics and pharmacies.

Help Idaho State Say In Person This Fall: Get Vaccinated!
III. 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 conference with someone other than an instructor or the program coordinator, a meeting may be arranged with an advisor 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 State Board for Professional Technical Education and is approved by 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
coorc.com

College of Technology

Interim Dean
Debra Ronneburg
Interim Associate Dean  Darin Jernigan
Health Occupations Department Chair  Dr. Henry Oh
Program Coordinator  Eugene “Johnny” Demekhin
Director of Clinical Education  Danny Duncan
Program Academic Advisor  Jesse Call-Feit

Program Information

Degrees/Certificates Offered

- Associate 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.
IV. Program Policies

Attendance and Punctuality in the Classroom

Employers are very interested in a student’s attendance and study habits because they reflect how he/she 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
- Blood Pressure Cuff

Additional requirements;

- Students are required to wear scrub top and bottom with white lab coat to clinical sites, color of scrubs to be determined by the Program Director (starting 2\textsuperscript{nd} semester).
- 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.

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:

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

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

Conduct detrimental to the operation of the university, the program, or your courses, may be grounds for disciplinary action as outlined in the Student Code, Handbook, and Calendar available in Student Services.

In all program courses, conduct must be consistent with maintenance of an appropriate educational environment. Abusive language, distracting or disruptive behavior will not be tolerated and will be grounds for possible disciplinary action and possible program dismissal.

Dishonesty, cheating, or other misrepresentation, willful disregard for safety of others and deliberate acts of destruction will be grounds for possible disciplinary action and possible program dismissal. 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 disciplinary action and possible program dismissal.

Cheating on papers, tests or other academic works is a violation of program rules. No student shall engage in behavior that, in the judgment of the instructor of the class, may be construed as cheating. This may include, but is not limited to, plagiarism or other forms of academic dishonesty such as the acquisition without permission of tests or other academic materials and/or distribution of these materials and other academic work. This includes students who aid and abet as well as those who attempt such behavior.

The disciplinary actions include verbal warnings, written warnings, probation, or dismissal from the program. The degree of the discipline depends on the severity of the inappropriate behavior. You are especially to be courteous to your fellow students during their oral presentation.

Smoking is prohibited in classrooms, laboratories, and hallways at the university and in all areas of the hospitals except in designated smoking areas.

Release Form

A student must sign a release form if he/she 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, in addition to the teacher/student role, may include financial, business, personal, sexual, 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 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.

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

- 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.

**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, his/her 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.

Clinical Assignments and Travel

Students are required to arrange for transportation to and from his/her 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, he/she must follow certain guidelines to ensure his/her 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 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.
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.

**Other Clinical Policies**

1. Before leaving clinical, notify your clinical preceptor and make sure that he/she dismisses 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).

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.

What Is the Average Salary?

Median annual wages of wage-and-salary respiratory therapists were $57,790 in 2015.

*Data obtained from Bureau of Labor Statistics Occupational Outlook Handbook, 2015 Online. Additional salary information is available on the American Association for Respiratory Care Website; www.aarc.org

Disability Services

Mission Statement

The mission of Disability Services (DS) is to increase equal opportunities and equal access 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; Division of Student Affairs

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: 208-417-0620
Email: disabilityservices@isu.edu

Office of Equity & Inclusion

Mission Statement

The Office of Equity & Inclusion is committed to creating and maintaining a safe and respectful learning and working environment for all staff and students at Idaho State University by providing leadership, expertise and education in our mission to create an environment where all members of the ISU community can thrive.

Our webpage will detail the specifics of each of our areas of service to the campus community including:

- EEO policy and procedure
- Civil Rights including harassment and discrimination
- Title IX compliance
- Gender Resource Center
- Diversity Resource Center
- Training, workshops and events
Our helpful and friendly staff are available to work with any member of the university community. We look forward to serving you.

Contact Information

Office of Equity and Inclusion
Rendezvous Complex, Room 157
921 South 8th Avenue, Stop 8315
Pocatello, ID 83209-8315
Phone: 208-282-3964
Fax: 208-282-5829
V. College of Technology Policies

Intoxicants Policy

Any instructor who observes behavior which suggest that a student may be under the influence or detects the odor of an intoxicant of a student will take the following actions:

1. The instructor will notify the student that they will not be allowed in the classroom or lab.
2. Public Safety should be contacted to escort the student to a safe place.
3. The student will meet with the Director of Student Services the following day to discuss which steps should be taken.
4. The Director will communicate with the Office of Student Affairs regarding the violation.
5. The Director will contact the instructor and Department Chair summarizing any outcomes.

This policy does not supersede other laws or university student conduct policies pertaining to alcohol or drug possession, consumption or delivery.

Dismissal Policy

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. Prior to making a decision of dismissing a student, the faculty of the program will meet with the student fora disciplinary review in order to give the student due process which includes a student’s right to be adequately notified of charges and the opportunity to be heard.

Disciplinary Procedure

1. The faculty will notify the student privately of the incident(s) that have led to a disciplinary review and schedule a meeting time for the review. The purpose of a disciplinary review is to discuss the facts of the incident(s), to hear the student’s perspective, and if a violation has occurred, to determine an appropriate level of discipline which may lead to dismissal.
2. The meeting should be scheduled as soon as possible after the
incident(s) occurred.
3. The student should refrain from attending any clinical, lab, externship, etc. that may threaten or pose a danger to the health, safety or welfare of any individual. After the disciplinary review, the faculty should determine what sanction to impose. In determining what sanction to impose, mitigating and aggravating factors may be considered, such as the individual's prior disciplinary record, the nature of the offense, the severity of the damage, injury or harm resulting from the violation, and any restitution made.

**Notification Procedures**

1. The student must be notified in writing of the outcome of the disciplinary review and if sanctions will be imposed. If the student is dismissed, the letter must be sent by certified mail, return receipt requested.
2. The letter should indicate the incident(s) that occurred and the decision made regarding the incident(s). The student should be notified in the document that he or she has the right of appeal according to the Idaho State University Student Handbook. The student should be given a copy of the ISU Student Handbook or notified that it is available online.

**Channels of Redress**

An aggrieved student may:

1. Present any unresolved issues to the Department Chairperson. If the Department Chairperson is named in the complaint, the Dean of the College where the alleged infraction occurred shall appoint another member of the college to act in the Chairperson role for the appeals process.
2. Present any unresolved issues in a formal hearing before the Dean of the College involved. In the case of dismissal from a program, that is the college in which the program resides; for an appeal of a course grade, it is the college in which the course was offered. At this hearing, parties shall submit written charges, answers, and arguments to the Dean. The Dean shall preserve these documents for use in later appeals to a Scholastic Appeals Board, if such an appeal becomes necessary. Only written charges, answers and arguments presented at the Dean’s formal hearing will be subject to review by a Scholastic Appeals Board. The Deans shall be charged with preserving all tangible evidence and all written charges, answers, and arguments submitted at hearing before them. The student must have specifically demonstrated at the formal hearing before the Dean how the alleged infraction led to his or her dismissal.
from the program or adversely affected his or her final grade in order to pursue an appeal to a Scholastic Appeals Board. The Dean must notify, in writing, the student and faculty member of his or her decision within one week following the formal hearing. The Dean shall have the authority to direct the Registrar to change a student’s grade.

3. A Department Chairperson or College Dean may elect to utilize an internal committee to assist in making a decision on academic appeals at the departmental and/or college levels. Department Chairs and Deans may interview the student and/or instructor, or conduct an additional investigation deemed appropriate to help in the decision-making process. Nothing contained in these procedures shall act to enlarge or restrict the existing authority, if any, of any Dean or the Provost and Vice President for Academic Affairs to take any action, including the changing of student grades or reinstating a student, outside of the appeals process described herein.

Procedure for an Appeal to Scholastic Appeals Board

1. If the student wants to appeal the decision reached in the formal hearing, he/she must obtain a scholastic appeal petition form from the Office of Student Affairs, and return it there when completed. The completed petition shall include a concise description of the complaint, the signature of the student instituting the petition, and the signatures and comments of the faculty member, Department Chairperson, if any, and the Dean involved, if said persons are still available.

2. Copies of all written charges, answers, and arguments and all tangible evidence presented at the Dean’s formal hearing shall be made available to the student to attach to the original petition submitted to the Office of Student Affairs. The petition and additional materials will be secured in the office.

3. A scholastic appeal petition must be initiated before the end of the semester following the formal hearing. The petition is initiated when the student formally presents his or her complaint to the Office of Student Affairs and requests a scholastic appeals petition.

4. The Office of Student Affairs will then notify the Chairperson of the Academic Standards Council of the need to consider the petition. The Chairperson will then choose a Chair for the Scholastic Appeals Board, and the rest of the Board will be constituted.
VI. Idaho State University Policies

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. Academic Integrity (page 15; Academic Integrity and Dishonesty Policy ISUPP #4000 for Undergraduates)
2. Academic Standing (page 10; Academic Standing)
3. Petitions (page 16; Petition Policies)
4. Sexual Harassment (page 18; Sexual Harassment Policy)
5. Smoking (page 23; Smoking Policy ISUPP 2370)
6. Substance Abuse (page 20; Substance Abuse Policy)
7. Withdrawal (page 6; Withdrawing from Courses)

isu.edu/Student_Handbook

Additional Idaho State University policies:

1. FERPA
   - isu.edu/ferpa
2. Title IX
   - isu.edu/titleIX
3. Satisfactory Academic Progress
   - isu.edu/satisfactory-academic-progress
VII. Idaho State University Resources and Services

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

For more information on each topic, please use the links given.

1. Career Services
   • isu.edu/career
2. Commencement
   • isu.edu/graduation
3. Counseling and Testing Services
   • isu.edu/ctc
4. Disability Services
   • isu.edu/disabilityservices
5. Health at ISU
   • isu.edu/health
6. Parking Services
   • isu.edu/parking
7. Student Resources
   • isu.edu/student-resources
VIII. College of Technology Resources and Services

Section I: 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. Academic advisors 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. isu.edu/tech/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 he/she is having difficulty, help should be sought immediately! Contact the TAP Center, (Tutoring, Academic support, Peer mentoring), located in Room 101 of the RFC Complex. Or telephone at (208) 282-3208 for an appointment to discuss specific tutoring needs. isu.edu/tech/tutoring

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 ‘not-traditional’ fields of training. isu.edu/cnd
Section II: 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 the ISU BengalWeb and go to the Finances tab.
- 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.

Section III: 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:

studentaid.gov/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:

isu.edu/financialaid

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.

isu.edu/scholarships
Section IV: Short-Term Loans

The Short-Term loan program is funded by Friends of Idaho State University. It is limited to loans for books and educational expenses. The maximum amount of each loan is $500. The loans are issued for up to 90 days. They must be repaid upon receipt of financial aid, 90 days after issue, or the last day of the semester, whichever arrives first. Your ISU internal credit rating will be reviewed prior to loan approval. Failure to pay this loan as agreed will adversely affect the credit rating used internally by ISU.

isu.edu/short-term-loans

Section V: Traffic and Parking

Note: Please refer to the ISU Parking web address at:

isu.edu/parking

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: $100
- Reserved Lot: $300
- Reduced Fee: $50 (at Holt Arena only)

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 will be towed at the owner’s expense when it accumulates $50 in citations.

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.
Section VI: Transportation

ISU Commuter Express: Idaho State University Commuter Express is a system designed to assist commuting students enrolled at ISU with a source of transportation to and from the campus. Buses run on a daily basis (Monday through Friday) and pick up students at various locations in outlying areas of the region including Idaho Falls and Blackfoot. The bus schedule operates from the first day of each semester and continues until the last day of final examination week. For information on costs and schedule, telephone (208) 282-4460, or go to:

isu.edu/transportation/commuter-express

Bengal Shuttle: Pocatello Regional Transit (PRT) provides a shuttle bus service on campus from Holt Arena to various drop off points on a 10-minute basis during the school day and is free of charge. PRT provides transportation services within the metropolitan Pocatello vicinity. Student discounts are available. For information on schedule and drop off points, go to:

isu.edu/parking/bengal-shuttle
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 ____________________________

CONSENT FOR PHOTOGRAPH RELEASE

I understand that my photograph may be used for educational purposes. I also understand that these photographs may be used in classroom discussions, reproduced to facilitate written and digital formats (including online), and/or be used in promotional materials (brochures, pamphlets, flyers, etc).

If there are limitations, please check one of the following boxes:

☐ Photographs must be altered to ensure facial identity is hidden.
☐ Do NOT use my photo for promotional or educational use.

PRINTED NAME ____________________________ DATE ____________________________

SIGNATURE ____________________________
X. Computer Usage Policy

COMPUTER USAGE POLICY

Person(s) using any of the ISU computing resources for personal gain, violation of security/privacy or who otherwise compromise the integrity of the hardware and/or software shall be prosecuted to the full extent of 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 can 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 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, use 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 above policy. I further acknowledge that any abuse of the above privilege may result in 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 #
XI. Health Occupations Department Consent for Release of Information

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 ADRN 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
XII. Medical History and Physical Examination

Respiratory Therapy Program

College: ___________________________ Department: ___________________________
921 South 8th Avenue, MS________
Pocatello, Idaho 83209-________
Program of Study________________________
Fax Number:_________________________ ATT:_________________________

STUDENTS PLEASE COMPLETE
BEFORE GOING TO YOUR PHYSICIAN FOR EXAMINATION

REPORT OF MEDICAL HISTORY

<table>
<thead>
<tr>
<th>M/F</th>
<th>Last Name</th>
<th>First</th>
<th>Middle</th>
<th>Sex</th>
<th>Home Address: Number &amp; Street</th>
<th>City</th>
<th>State</th>
<th>Zip</th>
<th>Date of Birth</th>
</tr>
</thead>
</table>

PERSONAL HISTORY

Please check those which you have had or now have

<table>
<thead>
<tr>
<th>Have You Had</th>
<th>Yes</th>
<th>Date</th>
<th>Comments</th>
<th>Have You Had</th>
<th>Yes</th>
<th>Date</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Head Injury with Unconsciousness</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>High or Low – Blood Pressure</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Back Problems</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Stomach, Intestinal, Gallbladder Trouble</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>List All Operations:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>List All Current Medications:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

______________________________
Applicant’s Signature

______________________________
Date

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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 Yearly Vaccine 2 documented doses OR proven booster as an
-Negative Titer serologic Mm induction to all adult within the
Attach lab result last 10 years
August – March
2 documented doses OR proven
serologic immunity

VARICELLA
2 documented doses OR proven
serologic immunity

TB
Skin Test (PPD)
Mm induration
(>10mm is +)
OR IGRA + or –

Attach copy of
Skin Test (PPD)
document PPD
mm reading or
mm or
IGRA lab result

If positive* CXR
attach report
from radiology

Negative titer
requires further
evaluation
Attach copy of
attachment
attaching

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
XIII. Drug Screening Letter of Introduction

Please see the attached Idaho Workcare Drug Screening Letter of Introduction.
Letter of Introduction

Students will SELF-PAY at Collection Site

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

Program: Respiratory Therapy    Date Scheduled: ___________________________ Time: _________________________

Student Name: ___________________________ ID#: ___________________________

Reason for test: ___________________________ Type: ___________________________

- X Pre-Practicum
- Random
- Post-Accident
- Other:

Collection Facilities Idaho Workcare

<table>
<thead>
<tr>
<th>Location</th>
<th>Facility Name</th>
<th>Address</th>
<th>Phone</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Idaho Falls</td>
<td>Legacy Health Partners</td>
<td>203 N Holmes</td>
<td>(208) 522-2591</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Ellis Chiropractic</td>
<td>512 W Judicial</td>
<td>(208) 782-9793</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Blackfoot, ID 83401</td>
<td>Blackfoot, ID 83221</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Twin Falls</td>
<td>Canyon Springs Chiropractic</td>
<td>2167 Village Park Ave, #100</td>
<td>(208) 737-1430</td>
<td></td>
</tr>
<tr>
<td>Rexburg</td>
<td>Orchard Chiropractic</td>
<td>160 E Valley River Dr. #3</td>
<td>(208) 656-8883</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Ellis Chiropractic</td>
<td>512 W Judicial</td>
<td>(208) 782-9793</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Canyon Springs Chiropractic</td>
<td>2167 Village Park Ave, #100</td>
<td>(208) 737-1430</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Orchard Chiropractic</td>
<td>160 E Valley River Dr. #3</td>
<td>(208) 656-8883</td>
<td></td>
</tr>
</tbody>
</table>

Other Collection Facilities

<table>
<thead>
<tr>
<th>Location</th>
<th>Facility Name</th>
<th>Address</th>
<th>Phone</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meridian</td>
<td>Unity Health Center</td>
<td>745 S Progress Ave</td>
<td>(208) 895-6729</td>
<td></td>
</tr>
<tr>
<td></td>
<td>ISU Student Health Center</td>
<td>990 Cesar Chaves Ave</td>
<td>(208) 282-2330</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Pocatello</td>
<td>990 Cesar Chaves Ave</td>
<td>(208) 282-2330</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Portneuf Medical Center Work-Med</td>
<td>500 S 11th Ave, #500</td>
<td>(208) 239-1940</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Pocatello</td>
<td>990 Cesar Chaves Ave</td>
<td>(208) 282-2330</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Portneuf Medical Center Work-Med</td>
<td>500 S 11th Ave, #500</td>
<td>(208) 239-1940</td>
<td></td>
</tr>
</tbody>
</table>

Student: By signing below you are requesting that the testing facility and/or Idaho Workcare 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 and/or Idaho Workcare 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: Chanel Quirk at fax: (208) 282-3975, or email: quirchan@isu.edu

Idaho Workcare Testing SITE: The Health Information Technology student is responsible to pay to have one Pre-Practicum, instant, 10-panel drug screen test completed at the contracted $25 rate. A clear, readable, copy of this release and the screening results must be sent to: ATT: Chanel Quirk at fax: (208) 282-3975, or email: quirchan@isu.edu

Collector Printed Name____________________ Signature:_________________________

Date result sent to ISU: _______________ Time sent to ISU: _______________ Method: Fax/Email/Student
XIV. Clinical Education Assumption of Risk

Respiratory Therapy Program

Participation in clinical education, including clinical simulations in didactic settings, is required by professional accreditation standards for health sciences programs. Any placement in a healthcare facility (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. All health science students may receive a COVID-19 vaccination free of charge. If unvaccinated, restrictions upon student activities by the program or facility may be imposed. Placement at certain healthcare facilities 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 to participate in certain aspects of clinical education. If I choose NOT to be vaccinated for COVID-19, I will be required to adhere to additional guidance based on CDC recommendations as detailed below. Before engaging in clinical education, please read, initial, and sign the following:

INITIALS

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.

2. If I am unvaccinated and I am exposed to COVID-19, I will immediately notify the appropriate person(s) at my clinical site and my designated program contact person. I will complete a self-reporting form and may be required to quarantine.

3. If I am unvaccinated for COVID-19, I will self-isolate before engaging in clinical education of any kind, as directed by my program and clinical site policy.

4. If I am unvaccinated for COVID-19, I will comply with masking and physical distancing requirements when possible, including on lunch, breaks, or when occupying shared workspaces. I will wear facial covering in accordance with CDC, program, and health facility policy.

5. Regardless of my vaccination status, 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.
6. I will complete any required infection control or PPE training by my program or the clinical facility.

7. 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.

8. 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.

9. 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.

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

11. If I test positive for COVID-19, I will notify my program’s clinical coordinator and complete the self-report form.

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

Training Guidelines:

Different programs may develop their own COVID-related training requirements. Possible options include those from either the World Health Organization (WHO) or the Centers for Disease Control (CDC):

openwho.org
cdc.gov/coronavirus

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 if a student chooses to opt-out of any aspect of required coursework.

Other Potential Consequences and Considerations:

Clinical placement sites may limit the types of patient populations unvaccinated students may interact with; for example, some sites do not allow students to see patients with acute respiratory illness or to interact with pregnant patients if they have not been vaccinated for COVID-19 and other infectious diseases. A student’s satisfactory progression through clinical education may be impeded if students cannot demonstrate adequate training in such patient populations.

Sharing Information with Clinical Site:

If a student tests positive for COVID-19, this information may need to be shared with clinical site preceptors. A separate FERPA waiver form will need to be signed by the student and complete for each preceptor site with whom test results are to be shared. This form is available online and in the Health Occupations Department main office.

_________________________________________  ________________
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.
Clinical Education Assumption of Risk

Respiratory Therapy Program

Updated 6/16/2021 CTO
Reviewed by ISU General Counsel

Participation in the Care of Patients with Aerosol Generating Procedures (AGP) at St. Luke’s Health System

NOTE: The following sections are ONLY for students participating in the care of non-COVID-19 patients at St. Luke’s Health System facilities.

At St. Luke’s facilities, a student may care for non-COVID-19 patients receiving Aerosol Generating Procedures (AGP) if the student has completed the N95 fit testing procedures (which will be completed by ISU faculty) prior to the student participating in this care.

_____ I will complete the N95 fit testing procedures. Idaho State University faculty will perform fit testing.

Note: If the student is a current employee of St. Luke’s Health System and has already been fit tested for an N-95 as a provider in this system, St. Luke’s will continue to complete fit testing and will continue to supply N-95 masks.

Additional requirements:

The student will:

• Bring adequate and new supply of N95 masks to the clinical setting that are NIOSH approved, no vents or valves; comply with St. Luke’s mask use/re-use guidelines and CDC guidelines
• Complete the OSHA medical questionnaire and follow the St. Luke’s Re-Use Program
• Provide a copy of the fit test record and bring to clinical site (worn in badge holder or wallet)
• Re-fit testing will be done as needed by Idaho State University faculty.

_________________________________________  ____________________________
Student Signature  Date

_________________________________________
Student Printed Name

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Clinical Education Assumption of Risk

Idaho State University
Respiratory Therapy Program

Reviewed by ISU General Counsel

Participation in COVID-19 Care Pilot St. Luke’s Health System

NOTE: This section is ONLY for students participating in the care of COVID patients at designated sites and on specific clinical rotations that include these activities.

As a voluntary, selected student in this pilot project, I understand that I will be caring for patients that are known or suspected to be COVID-19 positive. In addition to above statements:

1. I choose to "opt-in" for this clinical experience.
2. I will comply with all training requirements of both ISU and St. Luke’s Health System.
3. I will participate in PPE validation prior to any COVID-19 care being provided.
4. I will be fitted for and wear an N-95 mask (completed through the College of Technology).
5. I understand that the clinical site will provide a gown, shield, and other appropriate PPE as required while in the clinical setting and I will wear required PPE while in the clinical setting.
6. I will work with the preceptor and/or buddy to ensure donning and doffing is completed accurately each and every time entering or exiting a patient room.
7. I agree to participate in required weekly survey administered through St. Luke’s Health System.
8. I agree to participate in all debrief sessions held by St. Luke’s and/or ISU as part of the program.
9. I understand that pilot project data (i.e. weekly survey will be collected. Outcomes of the pilot project will be disseminated in aggregate form only.

Student Signature  Date

____________________________  __________________________
Student Printed Name

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