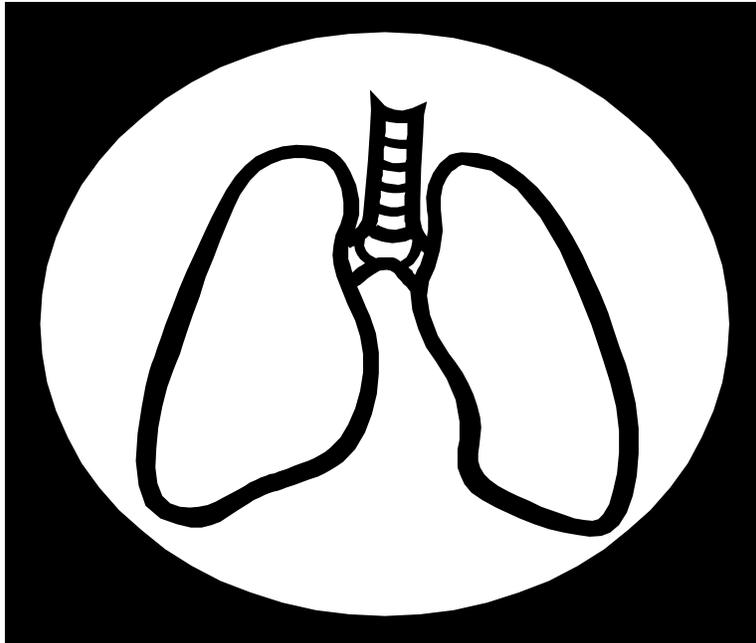


DIVISION OF HEALTH SCIENCES
RESPIRATORY CARE TECHNOLOGY
STUDENT HANDBOOK



Northeast Mississippi Community College
Cunningham Blvd.
Booneville, MS 38829

The program faculty reserves the right to make changes in the rules, regulations or curriculum contained in this manual if we feel that it is in the best interest of the program and its students.

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SECTION ONE: ORIENTATION TO THE PROFESSION

WELCOME

The administration, faculty, and staff welcome you to the Respiratory Care Technology program. The contents of this handbook have been compiled for use in the Respiratory Care Technology Program of the Northeast Mississippi Community College. It is designed to help acquaint the student with the policies and regulations governing his/her participation in this program. You are responsible for reading the contents of this handbook. If you need clarification, don't hesitate to ask. Your success in this program will depend on the mutual commitment of you, the student, and the instructors on campus as well as clinical instructors.

PROGRAM MISSION AND GOAL

The mission of the NEMCC Respiratory Care Technology Program is to instill the value of lifelong learning and professionalism in students, graduates and faculty and to provide the students with an education in respiratory care technology that prepares them for the CRT & RRT certification examination and employment as a Certified Respiratory Therapist and Registered Respiratory Therapist.

The overall goal of the Respiratory Care Technology program is to prepare graduates with demonstrated competence in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains of respiratory care practice as performed by registered respiratory therapists (RRTs). The RCT program also reflects the basic purpose and objectives of Northeast Mississippi Community College.

As this program is designed to train competent Respiratory Care Therapists, it should be understood by each individual that a total commitment on the part of each student is required in order to successfully complete the courses of study.

DEFINITION OF RESPIRATORY CARE

Respiratory Care is an allied health specialty employed with medical direction in the treatment, management, control, diagnostic evaluation, and care of patients with deficiencies and abnormalities with the cardiopulmonary system.

Respiratory Care shall mean the therapeutic use of the following: medical gases and administration apparatus, environmental control systems, humidification, aerosols, medications, ventilatory support, broncho-pulmonary rehabilitation, cardiopulmonary resuscitation and airway management.

Specific testing techniques are employed in respiratory therapy to assist in diagnosis, monitoring, treatment, and research. This shall be understood to include measurement of ventilatory volumes, pressures, flows, blood gas analysis and other related physiologic monitoring.

PROGRAM ACCREDITATION

The NEMCC Respiratory Care Technology program faculty is licensed by the Mississippi State Board of Health. The program is accredited by the Commission on Accreditation for Respiratory Care (CoARC). CoARC is a committee is sponsored by the following organizations: the American Association for Respiratory Care (AARC), the American College of Chest Physicians (ACCP), the American Society of Anesthesiologists (ASA), and the American Thoracic Society (ATS). CoARC is responsible for ensuring that respiratory therapy educational programs follow accrediting standards as endorsed by the American Medical Association (AMS). To learn more you may contact CoARC at;

CoARC
1248 Harwood Road
Bedford, TX 76021-4244
www.coarc.com

AMERICAN ASSOCIATION FOR RESPIRATORY CARE (AARC) www.aarc.org

Students are strongly encouraged to maintain membership with the AARC. The AARC is an organization that has been committed to enhancing professionalism as a respiratory care practitioner, improving performance on the job, and helping to broaden the scope of knowledge essential to success. With more than 49,000 members nationwide, the AARC is the only professional society for respiratory therapists in hospitals and with home care companies, managers of respiratory and cardiopulmonary services, and educators who provide respiratory care training.

AMERICAN ASSOCIATION OF RESPIRATORY CARE – Statement of Ethics and Professional Conduct

- Demonstrate behavior that reflects integrity, supports objectivity, and fosters trust in the profession and its professionals.
- Promote and practice evidence-based medicine.
- Seek continuing education opportunities to improve and maintain their professional competence and document their participation accurately.
- Perform only those procedures or functions in which they are individually competent and which are within their scope of accepted and responsible practice.
- Respect and protect the legal and personal rights of patients, including the right to privacy, informed consent, and refusal of treatment.

- Divulge no protected information regarding any patient or family unless disclosure is required for the responsible performance of duty as authorized by the patient and/or family, or required by law.
- Provide care without discrimination on any basis, with respect for the rights and dignity of all individuals.
- Promote disease prevention and wellness.
- Refuse to participate in illegal or unethical acts.
- Refuse to conceal, and will report, the illegal, unethical, fraudulent, or incompetent acts of others.
- Follow sound scientific procedures and ethical principles in research.
- Comply with state or federal laws which govern and relate to their practice.
- Avoid any form of conduct that is fraudulent or creates a conflict of interest, and shall follow the principles of ethical business behavior.
- Promote health care delivery through improvement of the access, efficacy, and cost of patient care.
- Encourage and promote appropriate stewardship of resources.
- Work to achieve and maintain respectful, functional, beneficial relationships and communication with all health professionals. It is the position of the American Association of Respiratory Care that there is no place in a professional practice environment for lateral violence and bullying among respiratory therapists or between healthcare professionals.

NATIONAL BOARD OF RESPIRATORY CARE www.nbrc.org

The National Board for Respiratory Care, Inc. (**NBRC**) is a voluntary health certifying board which was created in 1960 to evaluate the professional competence of respiratory therapists.

The **NBRC** provides credentialing examinations and associated services to the respiratory community. Cost of NBRC credentialing examinations are as follows:

- Therapist Multiple Choice Exam (TMC) - \$190.00
- Clinical Simulation Examination (CSE) - \$200.00

TECHNICAL STANDARDS

Any individual considering the field of Respiratory Care should consider the following technical standards:

- Push and pull wheelchair with patient seated in wheelchair
- Lean over to lock wheelchair and lift footrests.
- Lift patient's feet off footrests, if necessary.
- Push and pull stretchers with patient resting on a stretcher, lock and unlock stretchers for patient transfer.
- Use draw sheet to transfer patient from stretcher bed.
- Push mobile equipment; maneuver around patient bed and through hallways in various locations in the hospital.
- Verbally instruct patient in clear, concise, easily understandable manner.
- Visually assess patient's condition.
- Hear patient's questions and requests and respond quickly.
- Interact appropriately with patients, co-workers, visitors, and hospital staff.

- Read and comprehend written communications (i.e. charts, diagrams, etc.)
- Provide written communication to medical and technical staff.
- Demonstrate manual dexterity in handling of items such as medication vials and droppers, syringes and needles, and sterile items.
- Ability to ascend and descend stairway in case of fire or absence of elevator.
- Be able to deliver effective chest compressions during a resuscitation effort.

RESPIRATORY CARE CONFERENCE AND INSERVICE

Students will be encouraged to attend conferences and in-services when opportunity arises. Conferences are held at a different location each year. The expense (registration, hotel, meals etc.) of conferences varies. This is the student's responsibility; students will be given an opportunity to choose a fundraiser which will help offset the expense. There may be competitions in which the students can compete for awards.

RESPIRATORY CARE TECHNOLOGY CLUB

This is the student organization of the Respiratory Care Technology club. Its purpose is to help students in the program raise money for conference and certification/registry review seminar. Officers are selected at the beginning of the school term. They meet several times a year to discuss student concerns and plan fundraisers. More information will be provided during meetings.

SECTION TWO: PROGRAM POLICY AND PROCEDURE

STUDENT CRIMINAL BACKGROUND CHECK POLICY

In accordance to the Mississippi State Law as stated in the State Statute **§3729232**, Northeast Mississippi Community College Health Science Programs: Associate Degree Nursing, Medical Laboratory Technology, Practical Nursing Education, Radiologic Technology and Respiratory Care Technology require students to submit to and satisfactorily complete a criminal background check/fingerprinting. Admission may be rescinded and reversed based on review of the student's criminal background check.

Students who refuse to submit to a criminal background check/fingerprinting or do not pass the criminal background check/fingerprinting will be dismissed from the program. Students who are dismissed from a Health Science Program may seek admission into another educational program that does not have a clinical component requirement in its curriculum. The NEMCC Allied Health Program and the State of Mississippi requires that all students validate no history of "conviction of or pled guilty to or nolo contendere to a felony of possession or sale of drugs, murder, manslaughter, armed robbery, rape, sexual battery, any sex offence listed in Section 45-33-23(g), child abuse, arson, grand larceny, burglary, gratification of lust, aggravated assault, or felonious abuse and/or battery of a vulnerable adult or that any such conviction or plea was reversed on appeal or a pardon was granted for the conviction or plea." (Mississippi Code of 1972. Section 43-11-13).

Background check results from an agency other than the Mississippi Department of Health will not be accepted. All students will be required to have a criminal background check/fingerprinting, including students currently employed in local and regional clinical affiliates. "Employer Letters" from human resource manager, clinical affiliates, etc. will not be accepted in lieu of a current background check/fingerprinting. Students are responsible for payment of all fees charged for the background Check/fingerprinting service.

The Mississippi Department of Health will report the findings of the criminal background checks to the Academic Head of the Division of Health Sciences. The report will indicate, "No disqualifying events" or "disqualifying event/s". If the student has "disqualifying event/s", the student must submit a "rap sheet" report to the Academic Head of the Division of Health Sciences with full explanation of the conviction/s or disposition of charge/s. Health Science students who complete the criminal background check/fingerprinting with no disqualifying event/s will receive a two year letter from the Academic Head of the Division of Health Sciences.

Second year returning students will be required to sign an Annual Disclosure Form. This form states that the student has not been charged with, or convicted of, a criminal offence or has become the subject of any criminal proceedings in any manner.

CURRICULUM REQUIREMENTS

Respiratory Care Technology Program – Curriculum requirements for AAS degree

FRESHMEN YEAR			
Perquisites to Program		First Semester	
BIO 2514 – Anatomy & Physiology I	4	RCT 1213 Respiratory Care Sciences	3
BIO 2524 – Anatomy & Physiology II	4	RCT 1223 Patient Assessment and Planning	3
MAT 1233 – Intermediate Algebra or		RCT 1313 Cardiopulmonary A & P	3
MAT 1313 College Algebra	<u>3</u>	RCT 1416 Respiratory Care Practitioner I	<u>6</u>
	11 hours		15 hours
Second Semester		Summer Semester	
RCT 1515 Clinical Practice I	5	RCT 1523 Clinical Practice II	3
RCT 1424 Respiratory Care Practitioner II	4	ENG 1113 English Composition I	<u>3</u>
RCT 1613 Respiratory Care Pharmacology	3		6 hours
RCT 2613 Neonatal/Pediatrics Management	3		
Elective (Fine Arts)*	<u>3</u>		
	18 hours		
SOPHOMORE YEAR			
Third Semester		Fourth Semester	
RCT 2334 Cardiopulmonary Pathology	4	RCT 2546 Clinical Practice IV	6
RCT 2434 Respiratory Care Practitioner III	4	RCT 1322 Pulmonary Function Testing	2
RCT 2534 Clinical Practice III	4	RCT 2714 Respiratory Care Seminar	4
SPT 1113 Public Speaking	3	Elective (Social/Behavioral Science)**	<u>3</u>
CPT 1123 Computer Applications I	<u>3</u>		15 hours
	18 hours		
*Fine Arts Electives		** Social/Behavioral Science Electives	
ART 1113 Art Appreciations		PSY 1513 General Psychology I	
MUS 1113 Music Appreciation		SOC 2113 Introduction to Sociology	
SPT 2233 Theatre Appreciation		SOC 2143 Marriage and Family	
		EPY 2533 Human Growth and Development	

READMISSION

A final average of 75 or above must be obtained in each course in order for the student to advance to the next semester. If a student fails to obtain the required 75 on one or all courses taught in the attending semester, he/she may apply for readmission to the program. **The following guidelines must be followed:**

- A new application must be submitted to the program for the requested semester; May 1 is deadline for fall admission and December 1 is deadline for spring admission (returning students).
- Student must have a cumulative grade point average of at least a 2.0 at time of application for readmission.
- For students who do not pass all courses first semester of freshmen year; applications will be scored with all other applicants and all admission criteria will apply.
- For students who have successfully completed the first semester of the program, but are unsuccessful a subsequent semester, readmission is based on space availability of the program. Since we have a limited number of clinical spots, readmission is not guaranteed.
- After a second unsuccessful attempt, the student must wait five years to re-apply to the program. The student will then apply through the regular admission process. **The student's transcript will be evaluated and all D's, F's, W's in academic courses as well as previous attempts in other health science programs will cause point deduction from rating scale.**

Additional guidelines for readmission:

- First year students (Freshmen)
 - All courses first semester, RCT 1416, RCT 1213, RCT 1223, and RCT 1313 must be passed concurrently or ALL courses must be repeated if student is readmitted.
 - Second semester: Each course failed second semester must be repeated along with RCT 1515 (Clinical Practice I).
 - Summer semester: If a student fails RCT 1523 (Clinical Practice II), the student must reapply for admission to program, gain acceptance, repeat the course (RCT 1523, Clinical Practice II). Readmission will be based on meeting all admission criteria and availability of a seat. If the student is successful in the repeated course, he/she may continue in the program as a second-year student. **Note – since RCT 1523 is offered only one time in the summer, this means the student will have to sit out one year until the course becomes available for the repeated attempt.**
- Second year students (Sophomore)
 - Third semester: Each course failed third semester must be repeated along with RCT 1534 (Clinical Practice III).
 - Fourth semester: Each course failed fourth semester must be repeated along with RCT 1546 (Clinical Practice IV).

If a student has reason to believe they will not be successful in a course/and or the program, it is their responsibility to monitor progress and grades and make this determination. While

instructors will provide timely feedback to students, it will be the responsibility of the student to withdraw during the appropriate time frame.

SPECIAL FEES

In addition to regular college fees, each student is responsible for the purchase of uniforms and accessories, mal-practice insurance, clinical tracking system, self-assessment examinations, ACLS and PALS certification, review seminars for NBRC exams, and possibly the cost of educational seminars that are held out of town.

All students are required to have an iPad with the respiratory care technology e-books loaded onto the iPad. The iPad will be a REQUIREMENT for ALL students and will be required for every semester. Malfunction or loss of the iPad is the student's responsibility. The student will be required to purchase a replacement iPad quickly in order to continue in the program. Failure to have the proper equipment with e-books could result in dismissal from the program.

SOCIAL MEDIA

Under no circumstances should a clinical site or anything related to a clinical site or clinical course be discussed on any type of social media (Facebook, twitter, etc.). Doing so will be considered a breach of confidentiality and could be grounds for dismissal from the Respiratory Care Technology program

Canvas (ONLINE LEARNING)

The program instructors will utilize an online site for course materials. Each student will be assigned a user name and password. Students must have a functioning school e-mail account. While access to a computer with internet capabilities at home would provide convenience for the student to complete assignments, it is not a mandatory requirement. Students have access to library and there is also a computer lab on campus for student use. Students should conduct themselves as honestly with online course work as they would in a traditional classroom setting. Dishonesty in any form will not be tolerated. Canvas will be discussed more in depth as courses require.

STUDENT CONDUCT

All Northeast student conduct and policy will be followed in the Respiratory Care Technology Program. **It is the student's responsibility to adhere to all Northeast student conduct policies. To view the complete policy click on the following link:** <http://www.nemcc.edu/current-students/student-conduct/>

- SMOKING POLICY

NEMCC is a tobacco free environment. This includes Booneville, Corinth, and New Albany campuses.

- SUBSTANCE USE AND ABUSE

The Respiratory Care Technology Program and clinical agencies expect the student to adhere to the Substance Screening Policy for the Division of Health Sciences and NEMCC policy.

Alcohol and drug screens may be requested by the Respiratory Care faculty at any time signs and symptoms of possible use are observed. Student(s) may be asked to submit individual, group and/or

random drug screening at any time. The college reserves the right to determine which agency will conduct the drug screening.

The Academic Dismissal procedure will be instituted for a positive confirmation test or refusal to comply with requested screening within the time frame directed. The student may appeal the decision by following the college appeals process.

- **COMMUNICATION WITH INSTRUCTORS**

Official communications from the College are sent via electronic mail (e-mail) to each student's Northeast e-mail accounts. Students are responsible for reading e-mail sent to this official address by checking their college account regularly. Any questions or concerns regarding grades, assignments, exams, personal issues, health issues, etc. needs to be conveyed to program faculty via email. Texting instructors is allowed only in emergency situations.

SECTION THREE: CLASSROOM POLICY AND PROCEDURE

ATTENDANCE:

Respiratory care students are **STRONGLY** advised to attend ALL classroom and laboratory experiences. **The Northeast absentee policy will be followed. Click the following link to view this policy.** <http://catalog.nemcc.edu/content.php?catoid=9&navoid=548#class-attendance>
This policy is stated in all course syllabi.

1. Absenteeism will be included in an affective evaluation performed in designated RCT course.
2. The student who is ABSENT from classroom and laboratory experiences will be counted absent and be RESPONSIBLE FOR OBTAINING THE MISSED WORK (i.e., handouts, A-V material, and announcements). The student should make an appointment with the instructor who conducted the missed class regarding the missed work.
3. The instructor will assign all laboratory and check-off sessions. The student is expected to have mastered ALL laboratory skills for each course by the end of the semester. If a student has not completed all laboratory check-offs by the end of the semester, he/she will not be permitted to enroll in clinical experience.

TARDIES

1. The student needs to be aware that unexcused tardiness is not acceptable behavior. Arriving to class on time is a behavior that is important to the student, the teacher, other students, and future employee habits.
2. If a student arrives between the class start time and the first 10 minutes, the student will receive a tardy. Three tardies is the equivalent of an absence.
3. Tardies will be included in an affective evaluation performed in designated RCT courses.

EXAM POLICY

If a student misses an exam, he/she will be allowed to take the exam, but **ALL** missed exams will be given on **ONE** make-up day scheduled at the end of each semester. If the exam(s) is not made up on this date, the student will receive a grade of **ZERO** for that exam. **NO** grade will be dropped or exam retaken to raise a grade.

1. Cheating (academic dishonesty) in any form, by any student, **VIOLATES** the ethics of Respiratory Care and the Northeast Mississippi Community College. See Northeast policy code of conduct: <http://catalog.nemcc.edu/content.php?catoid=9&navoid=582#code-of-student-conduct>
2. Any student found guilty of cheating will receive a grade of **ZERO** on the work or exam involved and could face other disciplinary action from the College Disciplinary Committee as per college policy.
3. This is the exam policy that will be followed when exams are administered:
 - a. While testing, students will not be allowed to leave the classroom without permission from the instructor.
 - b. All cell phones and electronic devices will be turned off. Cell phones should not be visible during testing.**
4. If a student knows that he/she will be absent on the scheduled exam date, he/she may take the exam early if granted permission by the instructor. Permission will be granted only if reason

for absence is due to unavoidable circumstance, as deemed necessary by instructor.

AFFECTIVE EVALUATION

For designated courses in the program, an affective evaluation will be completed. The purpose of this evaluation is to evaluate classroom behaviors such as punctuality, absences, lab behaviors, integrity, and interpersonal relationships with other students and staff. The instructor will complete this evaluation at midterm and at the end of the semester. Results of the evaluation will be reviewed with student. It will count 5% of the final grade. Effective evaluation is at end of this document. See attachment at end of handbook.

THEORY GRADE

The theory grade will be an average of unit exams and the final exam and daily grades. The student must have a final average of 75 in order to pass each Respiratory Care course.

1. Unit/lesson exams will usually be given at the end of each unit/lesson. Exams are made up of multiple choice, true/false, matching, and discussion questions. Math problems may be included on any exam at any time.
2. If a student does not achieve a basic level of competency in any subject area, remediation of that area may be required.
3. Final exams will be given at the end of the semester. These exams are comprehensive.
4. Exams will be averaged at the discretion of the instructors of each course. (See course syllabi).
5. Homework assignments will be given and are due on the assigned day. No late assignments will be accepted unless prior arrangements are made with the instructor. Any assignments not submitted on the due date will be given a zero.
If a student is absent on the day the assignment is due, he/she may turn in the assignment upon returning to class. Otherwise, the student will be given a zero for the assignment.
6. Pop test may be given at any time and count as a daily grade. Missed pop test are not allowed to be made up.
7. A zero (0) grade will be given for any missed pop quiz and assignments.
8. When averaging grades, **no grades will be rounded off until the final average.** Final Averages will be rounded to the nearest 10th. (e.g. 74.5 would be rounded to a 75 and 74.4 would be rounded to 74)
9. It is the student's responsibility to seek information regarding his/her grades by making an appointment with his/her advisor concerning the theory grade.
10. The student will be given 24 hours, after being notified that the grades are available, to review exams or clinical grades, then the grade will be recorded and filed. The student will **NOT** be allowed further access to the exam or clinical evaluation form after this time. At no time will exams be re-graded at the end of the semester. After receiving notification by the faculty advisor of the final course grade, the student:
 1. Has 24 hours to request an appeal with the Program Director.
 2. Must make an appointment for the appeal with the Program Director and Clinical Director.
10. Failure to pass three (3) consecutive exams within a course (theory and/or clinical) may prevent the student from remaining in the program.

11. All courses must be completed within the program sequence to allow progression within the program.
12. Grades are available through Canvas to students at all times. Exams and homework assignments are graded and posted in a timely manner by instructors. This allows each student to access their grade and progression in a course at any given time.
13. Midterm grades and final grades are posted on Tigerline. This can be located at: <https://my.nemcc.edu/students.html>
This site provides information to students on registration, course schedules, grades and other pertinent information.

GRADING POLICY

A = 95-100
B = 85-94
C = 75-84
D = 70-74
F = Below 70

Students who receive a D, F, or a Withdrawal in a Respiratory Care Technology course cannot continue with the current class. Students who fail (D, F, or W) a course may reapply to the program the following year.

LAB SAFETY

A lab student laboratory handbook is given to each student prior to lab exercises. This handbook includes laboratory safety guidelines, specific procedures lab objectives for each course, recommended practice times for each procedure; skills practice log, and comprehensive form for each skill that includes date of completion and instructor signature.

CELL PHONE USE IN THR CLASSROOM

Cell phones and other wireless communication devices are to be turned off when inside classrooms, labs, or other areas where instruction, group meetings, or performances are in progress. Exceptions may be made in cases of anticipated emergencies provided prior approval is granted by the instructor or person in charge or in times when required by instructor.

Distractive cell phone use will not be allowed and could result in a student being dismissed from class for the day.

No air pods or ear buds are allowed during class and lab at any time. It could result in a student being dismissed from class for the day.

iPad USE IN THE CLASSROOM

- Device should be brought to every class meeting. EBooks and required apps should be loaded prior to class meetings.
- Students are responsible for charging their devices prior to class meetings. The device is now a requirement of the program. If it is lost, stolen, broken, etc. it is the student's responsibility to remedy the problem.

- Technology is not fool-proof. If you have issues with your device, it is your responsibility to come to the instructor for help or call us if you are experiencing difficulty while at clinical.
- Northeast Help Desk is available for any problems encountered with iPad and other technology issues. It is located in the Union. The following link is provided for further information: <http://www.nemcc.edu/computer-services/helpdesk/>

CLASSROOM ETIQUETTE

Students should adjust their work and other schedules that allow for rest. Sleeping during lecture, lab, and testing will not be allowed and could result in a student being dismissed from class for the day.

CIVILITY POLICY

A Civility Policy regarding disruptive behaviors will be discussed with students admitted to the program. Each student must be willing to sign a form stating he/she will comply with the policy and will be held accountable if policy is violated.

SECTION FOUR: CLINICAL POLICY AND PROCEDURE

INTRODUCTION TO CLINICAL INSTRUCTION:

The clinical phase of the Respiratory Care Program is the “heart” of the student’s educational experiences. Under the supervision of the clinical instructor, the student has the opportunity to learn firsthand the internal operation of his or her particular field of study. The student will, furthermore, be able to apply many of the skills and concepts learned in the classroom to the clinical situation. The combination of theoretical knowledge obtained in the classroom environment and practical knowledge obtained in an internship environment will enable the student to obtain the well-rounded background so urgently needed in our contemporary society.

CLINICAL ENVIRONMENT

The primary function of the hospital is patient care. Under no circumstance should the presence of students detract from patient care. As a student you are responsible for following the policies established by the hospital respiratory care department. Remember, you are here to learn; asking and doing are the best ways to learn. Do not wait on someone to ask you to assist with a procedure. Assertiveness is a must for this program. Most therapists will be glad to help students who have a true interest in learning.

STUDENT EMPLOYMENT

School hours include clinical rotation hours. Students may not be paid for time that is required for academic clinical rotations.

Students are not prohibited from working in respiratory outside of school hours.

Any students whose employment interferes with school will be discouraged from working.

Students that call in sick or are absent from clinical rotation may not work at any affiliate on the day of the sickness. A student found working on a sick day can be dismissed from the program.

CLINICAL ROTATION SCHEDULES

Clinical rotation days vary between 8 and 12 hours. Each student will be expected to be at the clinical facility for the entire time. As a student you will not get credit for more than 40 hours per week in class or clinical; therefore, there will be no accumulation of extra clinical time.

First year students will have clinical rotations on Tuesday (8 hour) and Thursday (8 hour) during the Spring semester. Summer rotations consist of four (8 hour) days for 5 weeks. Second year students will have clinical rotations on Monday and Wednesday (8 hour) during the Fall semester. Spring semester consist of Monday (9 hour) and Thursday (9 hour) rotations. **The clinical schedule and hours may change if needed to achieve clinical objectives.**

Some of our clinical affiliates are rural hospitals and are limited on their variety of procedures. To give students as much varied experience as possible; we will rotate each student through several clinical facilities. We realize that this may cause some difficulties with travel, but we are trying to give each student an equal amount of opportunity. Each of these affiliates has its own specific rules. These may vary slightly from one facility to another. Students are required to abide by the rules of each individual facility.

Students will be required to perform both routine and critical care procedures. Both are required to keep a respiratory care department running smoothly.

CLINICAL SUPERVISION POLICIES

Students are required to be under the **direct supervision** of a qualified clinical instructor for procedure on which they have not proven competency. Direct supervision is defined as supervision provided by a clinical instructor in the immediate area (close enough to check the student's performance) of student instruction. Once a student has proven competency he/she may work under indirect supervision. **Indirect supervision** is defined as supervision provided by a clinical instructor who is available to assist the student if needed. Indirect supervision means that a qualified clinical instructor is near-by if needed.

CLINICAL PRECEPTOR/FACULTY RESPONSIBILITIES:

1. Provide orientation and instruction to the assigned student.
2. Supervise the learning experiences of the student and provide assistance or correction if necessary.
3. Provide continual feedback of the student's performance by completing progress reports along with verbal interviews with the college faculty.
4. Evaluate the student's performance by completing an evaluation form after the student has finished the evaluation period.
5. Notify the college faculty of any behavior that would result in a failing grade as soon as the instructor becomes aware of it.
6. Provide input to campus faculty on development of essential knowledge, skills and attitude necessary to the student in the clinical setting.

CLINICAL ASSIGNMENTS

It is necessary that you have transportation to the assigned hospitals. Clinical rotations may include a 3-11 shift or other non-traditional hours.

CLINICAL AFFILIATE	LOCATION	NUMBER OF STUDENTS	SIZE OF HOSPITAL	CLINICAL SUPERVISORS	PHONE NUMBERS
BMH – Booneville	Booneville, MS	2	60 beds	Anneliesa Bennett	662-720-5076
BMH – North MS	Oxford, MS	2	220 beds	Glen Barkley	662-513-1574
BMH – Union County	New Albany, MS	2	150 beds	Daniel Stutts	662-538-2470 or 538-2471
North Alabama Medical Center	Florence, AL	2	365 beds	Amy Garland	256-629-2050
Magnolia Regional Health Center	Corinth, MS	2	300 beds	Janet Lindsey Laura Davis	662-293-1376 662-293-1378
NMMC-Iuka	Iuka, MS	1	48 beds	Stephanie Carr	662-423-4571
NMMC-Tupelo	Tupelo, MS	6 to 8	650 beds	Donyell Hester Krena Silver	662-377-4475 662-377-7370
Baldwyn Nursing Home	Baldwyn, MS	2	100 beds	Shasta Hollins	662-365-4164
Women’s Hospital	Tupelo, MS	2	22 NICU beds 60 In-patient beds	Kathy Haynes Riley Williams	662-377-4930
Tippah County Hospital	Ripley, MS	1	45 beds	Wendy Newby	662-837-2189
Helen Keller	Sheffield, AL	2	150 beds	Marilyn Bradley	256-386-4074
Jackson-Madison County General Hospital	Jackson, TN	2	650	Scott Laster	731-425-6839

CLINICAL ATTENDANCE

IT IS THE INTENT OF THIS PROGRAM TO TRAIN COMMITTED INDIVIDUALS TO BECOME CARING, COMPETENT THERAPISTS. GOOD ATTENDANCE IS A MUST TO ACCOMPLISH THIS GOAL

1. If a student misses a clinical day, he/she **MUST** notify his/her clinical instructor and the scheduled clinical site **PERSONALLY** by 5:30 a.m. for the missed clinical day. If an emergency occurs after these times, the student must notify the clinical instructor **AS SOON AS POSSIBLE**. If a student fails to personally notify the clinical instructor, **10 points will be deducted from the final clinical evaluation average.**
2. This policy is applied to each clinical day that was missed and the clinical instructor was not notified.
3. Due to the nature of clinical experience and the requirements placed on the program by our accrediting agency, a student **MUST NOT EXCEED** the number of absences allowed within each clinical course. The Program Director and Clinical Director will take special circumstances into consideration as they occur. If special circumstances are allowed, any missed days over the number allotted per clinical course **MUST** be made up by the student in order to complete the clinical experience in which the student is enrolled.
4. Each clinical course syllabus addresses attendance. Required hours for each clinical course **MUST** be met in order to pass the course. The attendance policy for NEMCC will be followed in each course. Any clinical absence that is unexcused or not made up will be reflected in the overall clinical average by a 10 point deduction.

TARDY POLICY

1. Tardiness should seldom, if ever, occur. If you expect to be hired by any of the facilities in which you are training, you need to show them that you are dependable and be on time. Students are expected to arrive at clinical in clean uniforms and practice good personal hygiene. Arriving 10 minutes after the expected time of arrival of the clinical day will be counted tardy. Tardies will be reflected in the clinical evaluation and result in a lower grade on the evaluation. The evaluations are averaged together at the end of the clinical semester and this average counts as a large percentage of the final clinical grade. Three tardies will be counted as one absence. Leaving early from the clinical site will count as a tardy and the missed time **must** be made up.
2. If an emergency occurs that will result in the student being tardy, the student must notify the clinical instructor **AS SOON AS POSSIBLE**. If a student fails to personally notify the clinical instructor, **10 points will be deducted from the final clinical evaluation average.**

TRANSPORTATION

You are responsible for your transportation to clinical rotation facilities. You may be required to drive over an hour each way to some clinical rotation sites. Please do not ask to be switched from one site to another due to the distance from your home, car issues, etc.

CONTIGAOUS DISEASE (GENERAL POLICY)

Students entering the respiratory care technology program must be aware that they and all healthcare workers in direct patient contact will be exposed to various contagious diseases. This exposure may happen at any time during their training or career. They may or may not be aware of the patient's infection with this disease. Precautions must always be taken. These will be outlined in the Respiratory Care Science course taught in the fall semester prior to beginning clinical. Protective attire (gloves, masks, gowns, etc.) will always be available when needed for use in the clinical facilities. Additional information on various contagious diseases is available at the school and at the clinical facilities. If you are or should become a carrier of a contagious disease, you must contact the director immediately. A temporary suspension of training may be necessary for the protection of you and your patients.

Each student will receive training in standard precautions. Each student and faculty member who is involved in direct patient care will receive information about HIV infection based on current guidelines.

Due to the current and fluid situation of COVID-19, with a student exposure to such, the following guidelines are to be followed:

Symptomatic Confirmed Positive - Immediate isolation for a minimum of 10 days since COVID-19 test AND symptom free for at least the last 72 hours of the isolation.

Symptomatic Confirmed Negative - Immediate isolation while awaiting test results. May return to normal activities 72 hours after symptom recovery.

Asymptomatic Confirmed Positive - Immediate 10-day self-isolation from day of test and compliance with local public health quarantine orders. Self-monitor for symptom development, check temperature (subjective or measured) twice daily, and keep a log of the results.

Asymptomatic Close Contacts of COVID-19 Positive Cases - Immediate 14-day* self-quarantine. Self-monitor for symptom development, check temperature (subjective or measured) twice daily, and keep a log of the results. Requires compliance with local public health quarantine orders.

**14-day quarantine exists for asymptomatic close contacts to include the average incubation period for the viral infection. The minimum time before you test for COVID-19 should be no less than 4 days after suspected exposure.*

* Please contact Program Director, John Shelburne or Director of Clinical Education, Dalton Harris, should you fall within any of the above listed.

HEALTH INSURANCE

You are responsible for any personal injury that occurs at the clinical affiliate. Cost for medical treatment at a clinical facility is the responsibility of the student. Purchase of Health & Accident insurance is encouraged.

INCLEMENT WEATHER

In cases of bad weather the student must use his/her own judgment on clinical attendance. The student should inform the clinical instructor and clinical site of his/her absence as soon as possible. If the college is closed due to inclement weather, you are not expected to attend classes or clinical. If the college does not close due to inclement weather, published attendance policies will be followed.

CLINICAL PREPARATION

THE STUDENT MUST BE ADEQUATELY PREPARED FOR EACH CLINICAL EXPERIENCE. TO BE PREPARED REQUIRES THE FOLLOWING:

1. The student must be familiar with the assigned skills through reading, studying assignments, laboratory skills practice, and completion of ALL lab skills check-offs.
2. Possession of all equipment necessary for the clinical experience. (See Dress Code).
3. Each student that participates in clinical education must submit proof of health status to the program director. The requirements to meet are as follows
 - Physical exam
 - Negative Nine (9) panel drug screen
 - Immunizations- Students are required to document proof of:
 - 2 TB skin test or 1 QFT result (to be updated every year)
 - 2 Rubella or proof of positive Rubella Titer
 - Hepatitis B vaccination – series of 3 vaccinations
 - TDaP vaccination since childhood TDaP and a tetanus containing vaccine within the last ten years
 - Varicella (chicken pox) documented positive titer or documentation of 2 varicella vaccinations
 - Influenza – FLU vaccine – submitted by October 1st
3. **All required immunizations must be completed before the first clinical day. Failure to do this may result in dismissal from the program.**
4. If a student's health status should change after enrolled into the program (e.g. pregnancy, diagnosis of acute or chronic disease, etc.), the student should notify the program director immediately so that both the student and patient can be protected in the clinical setting.
5. Students must also be certified in CPR. The CPR training course will be offered to students during August before clinical begins. NEMCC students will receive AHA (American Heart Association) CPR training.
5. All students must have completed the criminal background procedure and have letter of clear background check on file prior to attending clinical.
6. Students **MUST HAVE MALPRACTICE INSURANCE**. Malpractice insurance is obtained through the Business Office of Northeast which is located on the first floor of Ramsey Hall. The price of the insurance is \$15.00 per year, and must be renewed annually.

CLINICAL POLICY FOR CELL PHONE and WIRELESS DEVICES

Cell phone use is only allowed during breaks and lunch time and must not be used at any time in patient care areas. This includes phone use, camera, email, texting, and etc. Program faculty will follow each hospital policy. Violation of cell phone policy may result in dismissal from the program. Any emergency that warrants the need of a phone must be approved by the instructor. Refer to Student Code of Conduct for Northeast policy on use of cell phones and wireless devices.

The following applies to use of iPad during clinical rotations:

- Device is to be taken to the clinical site every day.
- Students are to charge their devices each night if necessary. The device is now a requirement of the program. If it is lost, stolen, broken, etc. it is the student's responsibility to remedy the problem. **CHARGE often (daily if necessary).**
- Students will clock in upon arrival and clock out upon exiting the clinical site. All 'actual' access times are recorded into the internal memory of the device.
- Every procedure viewed by or completed by the student will be logged into the Trajecsyst daily clinical tracking.
- Technology is not fool-proof. If you have issues with your device, it is your responsibility to come to the instructor for help or call us if you are experiencing difficulty while at clinical.
- These devices **SHOULD NOT** be used for entrainment purposes during clinical hours. **If caught (by instructors, preceptors or supervisors) using applications other than clinical information, the student will be penalized. If warranted, student could be dismissed from program.**

CLINICAL EVALUATION PROCESS

Student evaluations – you must have an evaluation for **every day of clinical** during the clinical rotation to be completed by your clinical instructor or preceptor (therapist) you are with for every clinical day. These evaluations are available on Trajecsyst Website. **There should be an evaluation for each day of clinical.**

The following is what will be considered a completed evaluation:

- 1) Your name
- 2) The correct date
- 3) The location of the clinical site
- 4) The preceptor or clinical instructor must complete the evaluation

RESPIRATORY CARE TECHNOLOGY COMPETENCIES

A student will have approximately 40 competencies to complete while in the Respiratory Care Technology program. Students will keep a digital record of all procedures that are performed or observed by accessing the Trajecsyst Website. The clinical coordinator will have a master electronic record for each student's competencies in his office.

CLINICAL GRADE

To pass each respiratory care clinical course the student **MUST**:

1. Complete all clinical procedure check-offs specified by the end of the assigned time (see course syllabi).
2. The final grade must average a minimum of 75 on all clinical course work (see course syllabi).
3. The student must not threaten the physical and/or psychological well-being of a patient by her/his performance in the clinical area. If this occurs at any time, the student is in danger of failing the Respiratory Care course in which he/she is currently enrolled. Students are held accountable for any real and or potential threat to the client. If an instructor prevents an error, the student is still in error.
4. **Critical Incidents** are defined by the respiratory care faculty based on their expertise, knowledge of the respiratory care practice guidelines, the client's history, nature of the incident, and the potential liability incurred by all parties.
5. Examples of critical incident behavior(s) include, but are not limited to, the following:
 - Failure to observe respiratory care ethics i.e., dishonesty, confidentiality, falsifying information, etc.
 - Functioning outside the Respiratory Care student's role i.e., collection of arterial blood from arterial puncture or arterial line, ABG analysis, and any procedure that a student has not shown competency in.
 - Inappropriate verbal or non-verbal behavior in the presence of a patient or the family.
 - Committing acts of unprofessional behavior.
 - Committing acts that harm or threaten the client physically or psychologically i.e., administering medications incorrectly, inappropriate communication, failure to verify written physician orders, etc.
 - Demonstrable lack of progress in clinical performance. Lack of progress will be determined by evaluations, comments, and observations made by clinical faculty and site preceptors.
 - Failure to give safe and essential respiratory care to clients to include but not limited to:
 - Tardies
 - Excessive break times
 - Student not notifying preceptor when leaving assigned area
 - Rushing through procedures without taking the time to do a thorough job.

CRITICAL INCIDENT PROCEDURE

- "Critical incident" behavior(s) will be documented on an incident form. The form will include all pertinent information stated concisely, and behavior(s) will be precisely and specifically identified.
- A student/instructor conference will be held after the "critical incident" behavior has been documented to review the behavior, make recommendations, and obtain the student's comments and signature.
- Copies of the Student Conference Form will be given to the student, instructor, and academic head.

- Student will be counseled by program faculty. If severity of incident results in termination from the program, information regarding termination from the currently enrolled Respiratory Care course or program will be given to student.
- The student may be given opportunity to withdraw from currently enrolled RCT course by designated withdrawal date and receive a “W” for the course.
- If the student does not elect to withdraw from the course, program faculty will make a recommendation to the Disciplinary Committee. The student will appear before the Disciplinary Committee. The Committee will then determine appropriate action toward the student.

CONFIDENTIALITY

- Patient confidentiality must be maintained at **ALL TIMES** i.e., on assignments that are to be turned in, in social conversations, etc.
- Students have authorized access to client information (i.e., charts, computer printouts, medication administration records) during clinical hours only. Other access is deemed a breach of confidentiality with possibility of personal liability and academic penalty.
- Patient clinical information will not be discussed in public areas, and patient confidentiality will be of utmost importance.
- Failure to abide by confidentiality guidelines may result in the student’s failure to progress in the program due to the critical nature and legality of issues involved.

DRESS CODE

When a student is on campus they are to follow the guidelines in the student handbook planner (page 48). At the clinical facilities each student is to dress in program scrubs with appropriate identification badge. T-shirts may be worn under scrub tops but can **ONLY** be White or Gray. Pants must be worn at waist level and under garments should not show. Good personal hygiene and clean uniforms are mandatory. Hospital dress codes may supersede policy established by the school.

The dress code for **Clinical Experience** shall be as follows:

- Students are expected to be neat and clean and free of body odor.
- Uniforms of the assigned color must be worn. White lab coats must be worn over the uniforms.
- Appropriate shoes for the clinical setting must be worn.
- Name tags or scrubs/lab coats with identification embroidery must be worn at all times while in the clinical area.
- Hair is to be worn neat and clean. Long hair should be placed off the shoulders. Only natural color hair is allowed.
- Stethoscopes, goggles, penlights, scissors, and a watch with a secondhand are required and must be carried at all times during clinical experience.
- Colognes and perfumes should not be worn during clinical. (This can be very nauseating to an already sick person).
- Dangling jewelry is not to be worn during the clinical experience.
- Artificial nails, nail polish and unkept nails are not allowed, Nails should be kept trimmed short and neat.

- Only small earrings and wedding bands are to be worn. No other jewelry is allowed to be worn on the face or body.
- Visible tattoos may be distracting and may detract from a professional atmosphere; accordingly, those with tattoos whenever should wear clothing to cover them.
- Each student must adhere to the dress policy of each clinical facility.

COVID-19

- All Respiratory Care Technology students will be required to complete a temperature screening every 24 hours along with the self-reported screening form delivered by text message by 6:00am daily. In order for students to receive excused absences for making up coursework, the screening form must be completed each morning.

Face Coverings

- Subject to change in guidance from medical professionals and the CDC, all students are required to wear face coverings. Acceptable face coverings include surgical masks, N95 masks, cloth masks, or face shields and are required inside campus buildings when physical distancing (6 feet or more) cannot be achieved. Face coverings must be worn in classrooms, labs, and shared office spaces regardless of physical distancing. Face coverings must also be worn in enclosed office spaces when two or more people are present. Face coverings are not required in individual residence hall rooms, public outdoor settings, enclosed office spaces with a single person present, and dining facilities when eating. Reasonable accommodations will be provided for persons who cannot wear a face covering due to medical conditions. Students should request these accommodations via the Office of Disability Support Services. Employees should request these accommodations via their supervisor.

Cleaning and Sanitization

- Classrooms will be outfitted with additional cleaning supplies that can be used by students and/or faculty members who desire to clean their individual spaces before class periods.

Clinical Infection Control

NEMCC Respiratory Care Technology

The COVID-19 pandemic is challenging the healthcare system and requiring thoughtful changes to services, models, and collaboration. In response, student clinical placements and experiences were paused as healthcare leaders and providers responded to the pandemic and worked together to ensure the safety of patients, staff, students, faculty, and communities.

As NEMCC prepares for a new normal, we are pleased to reestablish student clinical experiences, however, this will include important responsibilities for all.

Prerequisites

- Prior to resuming clinical experiences, a **negative RT-PCR test** may be required within 14 days of start date for students and faculty.
- **COVID Understanding:** Coronavirus disease basics for students and faculty prior to resuming clinical experiences from the Centers for Disease Control and Prevention (CDC) website. Go to <https://www.cdc.gov/coronavirus/2019-ncov/> to review how to protect yourself, what to do if you are sick, and other information for healthcare professionals including clinical care guidance, and potential exposure at work.
- **Donning/Doffing Personal Protective Equipment (PPE):** Student/faculty experiences will be restricted to COVID Safe Zones with no known COVID cases. Go to <https://www.cdc.gov/hai/pdfs/ppe/ppeposter148.pdf> to review “Sequence for Putting on Personal Protective Equipment (PPE) and “How to Safely Remove Personal Protective Equipment,” “PPE Optimization Strategies,” and practice safe donning/doffing of PPE.
- **Hand Hygiene:** Performing hand hygiene is imperative for the health and safety of patients, staff, students, faculty and communities. During the coronavirus disease 19 (COVID-19) pandemic, keeping hands clean is especially important to help prevent the virus from spreading. The hand hygiene standard is the CDC “Clean Hands Save Lives” (<https://www.cdc.gov/handwashing/>)

First Day of Resuming Clinical Experience

- **Understanding Social Distancing:** Social distancing basics for students and faculty are as follows: <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/social-distancing.html>
Specific areas to be mindful of during clinical experiences include:
 - ✓ Conference rooms, Break rooms, Central stations/common areas –avoid gathering in groups and must maintain at least 6 feet from others
- **Safe Zones:** Assignments/clinical experiences are limited to COVID Safe Zones with no known COVID cases. Students and faculty should not enter COVID Zones where known COVID patients are treated.
- **Surveillance:** Temperature Reading _____

Yes	No		Yes	No	
		Cough			New Loss of Taste or smell
		Shortness of Breath or Difficulty Breathing			Nausea or Vomiting
		Fever			Diarrhea
		Chills			
		Repeated Shaking with chills			
		Muscle Pain			
		Headache			
		Sore Throat			

NEMCC Respiratory Care Technology COVID-19 Clinical Consent

During Time at Clinical Facility

- Daily Surveillance: Students and faculty will be surveyed when they enter the facility.
- Students and faculty are expected to adhere to assignments in safe zone areas
- Students and faculty are expected to practice social distancing

_____ I have a basic understanding of coronavirus disease, how to protect myself, what to do if I am sick, optimizing PPE supply, and potential exposure at work.

_____ I have a basic understanding of donning and doffing personal protective equipment (PPE).

_____ I have a basic understanding of the importance and technique for CDC hand hygiene standards.

_____ I have a basic understanding of social distancing, and not entering COVID zones.

_____ I am solely responsible for my choice to engage in an on-site clinical rotation, and voluntarily choose to participate. I therefore assume all dangers and risks inherent with participating.

_____ I understand that by participating in a clinical rotation, I may be exposed to certain dangers and risks, including but not limited to all risks associated with contracting COVID- 19.

_____ I understand that care of COVID-19 positive patients is not planned but may occur as part of my participation."

_____ I waive and discharge NEMCC and its agents, from legal actions arising as a result of being exposed to or contracting the COVID-19 coronavirus in connection with my participation.

_____ I understand my academic progression toward degree completion may be delayed if I am unable to complete required in-person clinical experiences.

_____ I have been informed, to the extent possible based on current knowledge, of all risks associated with the clinical care of patients in the pandemic, particularly of patients with known or suspected COVID-19.

Student Name: _____

Date: _____

Affective Evaluation:

At midterm and before the end of the semester, the student's performance and behavior will be evaluated by circling the most appropriate statement.

Instructor Signature: _____ Student Signature: _____

Student _____ Evaluation date _____ Final grade _____

1. Safety and Infection Control (applies to classes with a lab)

3 Consistently adheres to policies and rules and takes appropriate action if necessary	2 Usually adheres to policies and rules and takes appropriate action with prompting.	1 Frequently needs reminding of importance of safety and infection control rules and policies.	0 Ignores safety and infection control rules and policies.
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Comments:

2. Punctuality

3 No tardies recorded	2 1 to 2 tardies and/or leaves early more than once	1 3 to 4 tardies and/or leaves early more than once.	0 Greater than 5 tardies.
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Comments:

3. Attendance

3 Never absent.	2 Absences are minimal (1 to 2)	1 Absences meet basic course requirements. (3 to 4)	0 Absences exceed basic course requirements. (greater than 5)
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Comments:

4. Priorities

3 Always prepared and concentrates on RCT course material.	2 Usually prepared and puts other interests (other class assignments, test, etc) aside and concentrates on RCT course material being presented.	1 Not prepared, has a tendency to concentrate on other interests while in RCT classes.	0 Preoccupied with other interests to the detriment of learning.
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5. Ability to accept Responsibility.

3 Always completes assignments on time. Never loses course materials.	2 Usually completes assignments on time, and rarely asks for replacement of course materials	1 Assignments are frequently late or incomplete, often loses course material.	0 Never turns in assignments.
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Comments:

6. Integrity

3 Readily admits mistakes and takes immediate and appropriate steps to correct.	2 Admits mistakes but needs direction to take corrective action.	1 Recognizes mistakes but blames others or rationalizes.	0 Ignores or covers up mistakes.
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Comments:

7. Takes Initiative: uses time constructively

3 Self-motivating, finds work without prompting.	2 Initiates work on their own, occasionally needs prompting.	1 Hesitant to act upon own initiative. Must be told what to do.	0 Never acts on their own initiative. Needs to be told several times to complete a task
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Comments:

8. Speed and Efficiency (Lab procedures only)

3 Always completes quality work in a minimum of time. Prioritizes work well. Work area is safe neat and clean.	2 Average speed. Likely to increase speed with experience. May need help organizing work flow. Work area is safe.	1 Works slowly, does not plan for next step or procedure. Work area is cluttered and disorganized.	0 Unable to efficiently achieve results. Cannot plan or prioritize procedures. Work area is unsafe
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Comments:

9. Interpersonal relationships with other students, instructors and other staff.

3 Tactful, considerate of others. Mature attitude when dealing with conflict.	2 Usually sensitive to the needs of others, respectful.	1 Moody, complains excessively, may be harsh, abrupt, or intolerant of others.	0 Insensitive, disrespectful, argumentative.
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Comments:

10. Acceptance of Constructive Criticism

3	2	1	0
Accepts criticism and guidance openly.	Usually accepts and utilizes criticism and direction.	Complies but appears sullen or resentful.	Resents all direction and instruction, defensive.

Comments:

11. Attitude and Interest:

3	2	1	0
Enthusiastic and excellent attitude.	Conscientious and satisfied.	Indifferent with lack of enthusiasm.	Finds fault frequently. Very critical.

Comments:

12. Observes confidentiality with assignments and exams

3	0
Always keeps work confidential	Does not keep work confidential

Comments:

13. iPad/Cell Phone Use In Classroom

3	2	1	0
Uses iPad/iPhone without any disruptive behaviors	Seldom Uses iPad/iPhone without any disruptive behaviors	Student has shown disruptive with iPad/iPhone behavior but is improving	Student has shown disruptive iPad/iPhone behavior but is not improving

Comments:

14. Focus/Attention

3	0
Always focused, attentive, Awake and alert, participates in class activities	Not focused, not paying attention due to sleeping, talking, daydreaming, not participating in class activities, etc.

NORTHEAST MISSISSIPPI COMMUNITY COLLEGE
DIVISION OF ALLIED HEALTH

RESPIRATORY CARE TECHNOLOGY

I have read the Respiratory Care Technology Student Handbook and the course policies for all the courses enrolled. I do clearly understand the policies contained in each and hereby agree to abide by these policies as long as I am a student in this program. I understand the consequences if I do not abide by these policies.

Student Signature

Date

INSTRUCTIONS: After reading the Respiratory Care Student Handbook and the course policies, sign this form, date it, and give it to your instructor.