

RCT 1516
Clinical Practice I
Fall

Instructor: Willie Lockett, Jr. Office Location: Allied Health Bldg
Office Hours: TH F 1:00 pm –4:00 p.m. Phone: 662-621-4221(O), 662-388-0626(C)
Class Time(s)/Sections: M T W 6:00 a.m. - 6:00 p.m. Email: wlockett@coahomacc.edu

The information in the CCC Student Handbook for Health Science Programs applies to this course RCT 1516 and is accessible at <http://www.coahomacc.edu/healthsciences/HealthP&P.pdf>

Course Description:

Patient assessment, performance of respiratory care procedures, and care plan formation are practiced in the hospital environment. A procedural guide is utilized to evaluate student competencies and performance of respiratory care procedures (6 sch: 18 hr. clinical)

Prerequisites:

Respiratory Care Science (RCT 1214), Patient Assessment and Planning (RCT 1223), Cardiopulmonary Anatomy and Physiology (RCT 1313), Respiratory Care I (1416) and Respiratory Care Pharmacology (RCT 1613)

Textbook(s) and Material(s):

1. Egan's Fundamentals of Respiratory Care - 9th Edition; Mosby (ISBN: 978-0-323-03657-3)
2. Respiratory Care Equipment – 8th Edition; J. Cairo, et. al. Mosby 2010 (ISBN: 978-0-323-05176-7)
3. Students will need Internet access to www.DataArc.ws (online) and DataArc CD.

Student Learning Outcomes:

Upon completion of this course, the student will be able to do the following:

By the end of this course, the student will be proficient in the following:

1. Evaluate patient data and formulate a care plan.
 - a. Review patient record data.
 - b. Perform basic patient assessment.
 - c. Evaluate pertinent clinical data.
 - d. Recommend procedures to obtain additional data.
 - e. Write a care plan for a given patient.
2. Perform respiratory care procedures.
 - a. Apply medical gas therapy concepts.
 - b. Apply aerosol humidity therapy concepts
 - c. Perform hyperinflation techniques
 - d. Demonstrate cardiopulmonary resuscitation (CPR).
 - e. Perform bronchopulmonary techniques.
 - f. Perform basic airway management techniques.
 - g. Perform drug administration.
 - h. Apply methods of decontamination.
 - i. Troubleshoot equipment.
 - j. Demonstrate isolation techniques.

- k. Demonstrate quality control procedures.
- l. Communicate information of patient status to appropriate health care team members
- m. Explain planned therapy and goals to patient in understandable terms to achieve optimal therapeutic outcomes.
- n. Communicate results of therapy and alter therapy per institution policy.

School Attendance:

Regular class attendance and punctuality are expected. All arrangements for completing missed work are to be made with the instructor. It is the student's responsibility to initiate these arrangements.

Excessive absences may result in loss of credit for the course concerned as well as loss of grant refunds and/or financial aid eligibility.

The nature of the educational programs at Coahoma Community College is such that it is necessary for every student to attend class regularly. Instructors will keep accurate class records, and those records will become part of the student's official record.

NOTE: In the event of inclement weather, the President may cancel classes. Students are advised to listen to the campus based alert system, TV, or radio for an announcement. Absence without an official closure is treated as an unexcused absence unless there is a danger for the student to drive.

Respiratory Care Clinical Attendance:

The student is expected to attend 100% of the time designated as clinical. Experience missed during this phase of training may result in a delayed or failure of graduation. In case of an unavoidable absence, a 48-hour notice to the Director of Clinical Education (DCE) is required in writing, forty-eight hours before the requested absence. The student must additionally notify the RT department to which they are assigned of approved absence at least twenty-four hours prior to the absence.

Emergency absence will be handled as follows: Telephone notification must be made to the Director of Clinical Education one hour prior to the scheduled time of rotation. The student must speak directly to the DCE, **leaving messages is not sufficient notification.** In addition, the student must contact the appropriate RT department at least one hour in advance of scheduled rotation time. (e.g. If your scheduled time is 7 am - 3 p.m. you must contact the DCE and the department by 6 am). **Failure to follow these instructions will result in immediate disciplinary action according to school and program policy.**

TARDIES:

A tardy is considered arriving at any time past the designated rotation time. Proper notification must be made (see attendance policy) and the student may remain in clinic if the department can accommodate them. If the student is tardy without proper notification, they may be released from clinical for the day and counted absent.

ABSENCES AND TARDIES See *Respiratory Care Student Handbook*.

Absence from Class for School Sanctioned Activities:

Students who are absent from class due to participation in an officially sanctioned school activity must present notice of the event to the instructor (at least one week prior is mandatory). The missed clinic time must be made up before the end of the actual rotation that the time was missed on the student's own time

and at the discretion of the clinical affiliate. The time missed must be made up at the facility where the time was missed. For example, if the time missed was at Baptist in Jackson, the student will need to make up the time in Jackson most likely on a weekend. In general, the philosophy that students attend college for educational purposes and participation in activities outside the classroom and/or clinic is recognized as a lower priority.

Canvas

Students are responsible for checking announcements and course postings on the Canvas course sites daily.

Make-up Policy:

All Clinic missed must be made up on the student's own time and at the discretion of the clinical facility. **It is the student's responsibility to arrange the make-up time with the clinical facility subject to the prior approval of the Director of Clinical Education.**

ANY NO CALL NO SHOW WILL NOT BE ALLOWED TO MAKE UP CLINICAL TIME AND WILL RESULT IN A GRADE OF "F" FOR THE CLINICAL ROTATION.

Cheating Policy/Plagiarism/ Academic Misconduct:

Cheating and Plagiarism will not be tolerated. All offenders will be referred to the Vice President for Health Sciences for disciplinary action. Repeated offenses will result in expulsion from the program. Cheating, Plagiarism, and Academic Misconduct includes but is not limited to the following:

1. Copying from another students' paper.
2. Using the textbook or other materials such as a notebook normally brought to class meeting but not authorized for use during a test by the person giving the test. Having such forbidden material open and in sight will be considered prima facie evidence of use.
3. Attempting to commit or to be an accessory to the commission of, an offense listed above.
4. Collaborating during a test with any other person by giving or receiving information without authority.
5. Using specially prepared material, e.g., notes, formula lists, notes written on the student's body or clothing, during a test. Bring such forbidden material to a test will be considered prima facie evidence of use or attempted use.
6. Stealing, buying, or otherwise obtaining, all or part of an un-administered test including answer to an un-administered test.
7. Possession/distribution of all or part of an un-administered test.
8. Submitting as one's own, in fulfillment of academic requirements, any theme, report, workbook assignment, term paper, or other work.
9. Plagiarizing is the un-acknowledge inclusion, in work submitted for credit, of someone's else's words, ideas, work or data.

Electronic Devices:

The use of cellular phones, pagers, CD players, radios, and similar devices is prohibited in the classroom, laboratory and clinical facilities.

Non-Discrimination/Disability Policy:

Coahoma Community College does not discriminate on the basis of race, color, national origin, sex, disability, or age in its programs and activities. The institution has designated a Section 504/ADA/Title

IX Coordinator to address inquiries regarding the non-discrimination policies, please contact the Office of Academic Affairs for more information at 662-621-4127.

Instructional Techniques:

- Clinical
- Canvas
- www.Dataarc.ws

Method(s) of Evaluation:

The student's will be evaluated on daily logs, weekly discussion board, care plans, clinical competencies and laboratory competencies. The final average will be assigned a letter grade according to the grading scale listed below:

Daily logs and Evaluation.....	25%
Care Plans, Lit review, Discussion Board	15%
Clinical & laboratory competencies.....	25%
Professionalism.....	25%
Attendance	10%

*Daily logs and evaluations

- Daily Logs and evaluations will be submitted via DATAARC. Grades will be assessed for logs and evaluations on a weekly basis. There must be a documented log and evaluation for each day a student participates in clinical activity.
- Students are strongly encouraged to complete documents on a daily basis prior to completing the clinical day.

*Discussion Board

- Weekly discussion will be conducted via Discussion Board in Canvas. Grades will be assessed on a weekly basis.

*Care Plans

- Care Plans must be submitted by 11:59 p.m. on Sunday night of the assignment week. Assignments late by more than one minute but less than 24 hours will result in a deduction of 10 points to awarded grade. Assignments late > 24 hours will not be accepted.
- Care plans are a two part assignment:
 - Part A consists of completing a Respiratory Care Plan document with as much detail as patient records will allow.
 - Part B consists of an oral presentation of the care plan.

*Clinical competencies will be completed at the clinical site and submitted via DATAARC. It is the responsibility of you, the student, to ensure that competencies are completed in a timely fashion, **not the clinical director nor the clinical preceptor.**

*Laboratory competencies will be performed in the lab.

*Professional Characteristics includes, Dress (See Dress Code in CCC Health Science Student Handbook), clinical participation, demeanor, reliability, etiquette, organization, ethics, and accountability. (See AARC **Statement of Ethics and Professional Conduct** below)

*Literature review (See **Appendix A** for assignment format). Assignments deadlines are the Sunday of each assignment week no later than 11:59 p.m. Literature review must be written in APA 6th edition format. Articles used for review must be written within the last five years and are respiratory in nature.

AARC Statement of Ethics and Professional Conduct

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

- ❖ Demonstrate behavior that reflects integrity, supports objectivity, and fosters trust in the profession and its professionals.
- ❖ Seek educational opportunities to improve and maintain their professional competence and document their participation accurately.
- ❖ Perform only those procedures or functions in which they are individually competent and which are within their scope of accepted and responsible practice.
- ❖ Respect and protect the legal and personal rights of patients, 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 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.

APPENDIX A

Literature Review Article #()

Student Name:

Title:

Author:

Summary Statement (1-2 sentences):

Findings in Article (minimum of one paragraph encouraged to write more):

Assessment (minimum one paragraph encouraged to write more):

Reference information (APA 6th Edition format):

*A header should be placed in the upper right hand corner of the paper consisting of the following information-- **Respiratory Care –RCT (your class #)**, also all pages should be numbered at the bottom right hand corner of the page. All assignment should be developed using **APA 6th Edition formatting where possible.**

**** If you are unfamiliar with 6th edition APA formatting, please review the following resources: Purdue Owl and YouTube.**