



Skyline College
Respiratory Care Program

STUDENT PROGRAM HANDBOOK

2025-2028

ASSOCIATE OF SCIENCE RESPIRATORY CARE (ASRC) PROGRAM

**BREATHE LIFE INTO YOUR FUTURE:
JOIN THE ASRC PROGRAM START
YOUR RESPIRATORY CAREER HERE**



<https://skylinecollege.edu/respiratory>

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Welcome to the Associate of Science in Respiratory Care (ASRC) Program

We are thrilled to welcome you to the Associate of Science in Respiratory Care Program at Skyline College. This program marks the beginning of your professional journey into one of the most vital and dynamic fields within healthcare. As a respiratory care student, you are preparing to enter a profession that demands a unique blend of knowledge, technical skill, and compassionate care—qualities that will define your success as a Registered Respiratory Therapist (RRT).

Our program is thoughtfully designed to support your development across the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains. Through a combination of rigorous coursework, hands-on clinical training, and guided learning experiences, you will gain the competencies necessary to provide safe, effective, and evidence-based care to patients across a wide range of settings.

Upon completion of the program, our graduates are expected to:

- Earn the Registered Respiratory Therapist (RRT) credential.
- Be eligible for a Respiratory Care Practitioner (RCP) license in California, and secure gainful employment.
- Demonstrate entry-level competency in all domains of respiratory care practice.

This handbook serves as your guide to the structure, philosophy, and academic expectations of the ASRC Program. It should be used in conjunction with the Skyline College Student Guide Handbook to fully understand the responsibilities, policies, and resources available to support your success.

As you navigate this program, your commitment, effort, and professional mindset will play a critical role in your growth. You are not only preparing for licensure and employment—you are also stepping into a respected healthcare profession where your knowledge and skills will impact the lives of patients and families every single day.

We are honored to support you through this transformative journey. We look forward to seeing you develop into a confident and competent respiratory care practitioner, ready to meet the demands of today's healthcare environment.

Welcome to the program—we're excited to see where your future in respiratory care takes you.

Anrey Bartoszynski- M.Ed., BSRT, RRT-ACCS, RCP

Respiratory Care Professor/

Respiratory Care Program Lead

Skyline College, San Bruno, CA

bartoszynskia@smccd.edu

Office: (650) 738-4457

College Mission & Program Goals

Mission Statement

To empower and transform a global community of learners.

Vision Statement

Skyline College inspires a global and diverse community of learners to achieve intellectual, cultural, social, economic and personal fulfillment.

Values Statement

Education Is the foundation of our democratic society.

Program Goal

To prepare graduates with demonstrated competency in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains of respiratory care practice as performed by registered respiratory therapists (RRTs).

Program Student Learning Outcomes (PSLOs)

Upon completion of degree requirements, students will be able to:

- Obtain the RRT credential.
- Obtain gainful employment as a Licensed Respiratory Care Practitioner (RCP).
- Demonstrate competency in the cognitive, psychomotor, and affective domains when providing respiratory care.

Outcomes Measurements and Evaluation Tools

The program assesses and reports the following items annually, as required by the Commission on Accreditation for Respiratory Care (CoARC):

- NBRC Credentialing Success
- Attrition/Retention Rates
- Positive Placement
- Overall Employer Satisfaction
- Overall Graduate Satisfaction
- On-Time Graduation Rate

Meet the Program's Faculty, Administrative, and Support Team

Table 1.0

Respiratory Care Program Lead	<p>Anrey Bartoszynski- M.Ed., BSRT, RRT-ACCS, RCP Respiratory Care Professor/ Interim Respiratory Care Program Lead Skyline College, San Bruno, CA STEM Division, Bldg 7-215 bartoszynskia@smccd.edu Office: (650) 738-4457</p>
ASRC Faculty	
<i>Name and Contact</i>	
<p>Anrey Bartoszynski-M.Ed, BSRC, RRT, RRT-ACCS, RCP Respiratory Care Program Lead bartoszynskia@smccd.edu</p>	
<p>Brian Daniel, RRT Director of Clinical Education danielb@smccd.edu</p>	
<p>Dr. Gordon Mak, MD Medical Director makg@smccd.edu</p>	
<p>Rena Aiken, BSRC, RRT Associate Professor aikenr@smccd.edu</p>	
<p>Amanda Shelton, BSRC, RRT-NPS Neonatal/Pediatric Professor sheltona@smccd.edu</p>	
<p>Dan Alamillo, MSRT, RPFT, RRT-NPS, AE-C Associate Professor alamillod@smccd.edu</p>	
<p>Jazmina Lopez, BSRC, RRT, NPS Neonatal/Pediatric Lab Assistant lopezjazmina@smccd.edu</p>	
<p>Andrew Marcelo, RRT Lab Assistant marceloan@smccd.edu</p>	

Program Support, Staff, and Admin

<i>Title</i>	<i>Name and Contact</i>
<u>Skyline College, Acting President, President</u>	<p>Newin Paul C. Orante, Ed.D Acting President oranten@smccd.edu</p> <p>Nathan Carter, PhD Skyline College President (starting July 1, 2025) carternate@smccd.edu</p>
<u>Skyline College, Interim Vice President of Instruction</u>	<p>Kristy Lisle, Ph.D. lislek@smccd.edu</p>
<u>Dean of STEM Division</u>	<p>Jessica Hurless, M.A. hurlessj@smccd.edu</p>
<u>Allied Health Program Services Coordinator</u>	<p>Shruti Ranade, B.A. ranades@smccd.edu</p>
CTTL - Center for Transformative Teaching and Learning	<p>Andrea Fuentes, M.B.A., M.A. fuentesandrea@smccd.edu (Spring 2025 to Present)</p>
Coordinator of Institutional Effectiveness (Learning Outcomes Coordinator)	<p>Karen Wong, M.A. wongk@smccd.edu</p>
Skyline College Library, Outreach and Equity Librarian	<p>Walawalkar, Pia walawalkars@smccd.edu</p>
Respiratory Care Academic Counselor	<p>Lorraine DeMello, M.A. demellol@smccd.edu</p>
Academic Support and Learning Technologies - Learning Commons - Learning Center Instructional Aide II	<p>John Chew, M.A. chewj@smccd.edu</p> <p>Monique Ubungen ubungenm@smccd.edu</p>

Why get your ASRC, and why at Skyline?

A **Respiratory Therapist (RT)** or **Respiratory Care Practitioners (RCP-** Licensed RTs in California) is a highly skilled and licensed healthcare professional specializing in the care of patients with breathing difficulties and cardiopulmonary disorders. RTs play a critical role in patient care by assessing respiratory conditions, administering oxygen and inhaled medications, conducting diagnostic testing, managing mechanical ventilators, and providing life support during emergencies. They work with patients across the lifespan—including premature infants in neonatal ICUs, children with asthma or pneumonia, trauma patients in critical care, and elderly individuals with COPD or heart failure.

The profession continues to expand due to increasing rates of chronic respiratory illnesses and the growing healthcare needs of an aging population. According to the **U.S. Bureau of Labor Statistics**, the job market for respiratory therapists is projected to grow by **14% from 2022 to 2032**, which is significantly faster than the average for all occupations. In **California**, respiratory therapists earn a **median salary of \$96,150**, with experienced professionals earning over **\$110,000 annually**, depending on work setting, credentials, and location. With high demand, competitive pay, and meaningful patient interaction, respiratory care offers an excellent career pathway for individuals seeking to make a difference in the healthcare field.

The **Respiratory Care Program at Skyline College** is an accredited **two-year** program that offers the academic foundation and clinical training needed to become a successful respiratory care provider. Students benefit from a combination of classroom instruction, about **250 lab practicum hours, and 750 hours of clinical practice** at affiliated clinical sites throughout the **Northern California region**. You'll learn from expert instructors who bring years of practical, real-world experience, and direct **hands-on training** into the classroom.

Graduates of the program earn an **Associate of Science Degree in Respiratory Care (ASRC)**, which qualifies them to sit for the National Board for Respiratory Care (NBRC) examinations and pursue advanced credentialing as a **Registered Respiratory Therapist (RRT)**. These credentials are essential for employment in the field of respiratory care. Upon passing the required exams, graduates will be eligible to apply for a **Respiratory Care Practitioner (RCP)** license in California, as well as licensure in other states.

Skyline College's ASRC program prepares students for direct entry into professional respiratory care practice as licensed Respiratory Care Practitioners. However, as the respiratory care field continues to evolve and expand its role in improving public health and community wellness, there is also a growing need for advanced practice and leadership in the profession. To meet this demand, **Skyline College also offers a Bachelor of Science in Respiratory Care (BSRC)** for students who wish to build upon their associate degree. The BSRC program provides graduates with enhanced knowledge, skills, and attributes in **leadership, management, education, research, and advanced clinical practice**, enabling them to meet their professional goals and prepare for advanced roles in the field.

Students who successfully complete the ASRC program and petition to graduate are eligible to apply to the BSRC program, provided they meet admission requirements. For more information, please visit our **BSRC Program Webpage**. <https://skylinecollege.edu/respiratorycarebachelors/>



Curriculum Overview

(course sequence, credit breakdown, clinical hours)

Curriculum

Associate of Science: The program consists of classroom lectures, laboratory work, and clinical coursework. The core classes in the program must be completed in sequence. Students must complete the program with an Associate of Science degree.

It is the student's responsibility to ensure that they have completed all the requirements for graduation, including necessary courses to obtain the Associates of Science degree. Students with foreign coursework and/or waivers must meet with the Academic Counselor, and Program Director/Lead to clarify their curriculum. Permission from the Program Director/Lead is required to deviate from the Respiratory Care core curriculum.

The curriculum is competency-based. Competencies, abilities, and skills that students must acquire and demonstrate are clearly stated as behavioral objectives. The result of this system is that each student must possess the specified competencies and applied theory before receiving credit for a particular course. Students are also fully aware of expectations and are provided a guideline for study.

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Program Schedule-Course Sequence

(semester-by-semester timeline)

Associate of Science in Respiratory Care Courses

Summary of Program Curriculum and Course Student Learning Outcomes

Table 2.0

First Semester (Fall 1)

Course Title/Units/Hours and Prerequisite	Course Description	Course Student Learning Outcomes (SLOs)
<p>RPTH 410, Introduction to Patient Care & Respiratory Assessment Techniques (3),</p> <p>Hours/semester: 32.0-36.0 Lecture hours; 48.0-54.0 Lab hours; 64.0-72.0 Homework hours; 144.0-162.0 Total Student Learning hours,</p> <p>Method of Grading: Letter Grade Only</p> <p>Prerequisite: <i>Admission to the Respiratory Care Program.</i></p>	<p>The study and practice of basic patient care. Also included will be a review of basic science relevant to respiratory therapy and its application to respiratory system assessment. The class will include some hospital practice.</p>	<ol style="list-style-type: none"> 1. Describe and apply physical, chemical, and algebraic concepts to various components of respiratory care. 2. Perform vital sign procedures to gather patient data and formulate rational assessments. 3. Perform chest physical examination to gather patient data and formulate rational assessments.
<p>RPTH 415, Respiratory Pharmacology, Units: 2.0 units</p> <p>Hours/Semester: 32.0-36.0 Lecture hours; 64.0-72.0 Homework hours; 96.0-108.0 Total,</p> <p>Method of Grading: Letter Grade Only</p> <p>Prerequisite: <i>Admission to the Respiratory Care Program.</i> <i>Student Learning hours</i></p>	<p>Study of general pharmacology principles, basic terminology, drug action, dosage, adverse reactions, and drug toxicity. Emphasis will include physiologic actions/interactions and cardio-respiratory medication categorization.</p>	<ol style="list-style-type: none"> 1. Recognize and describe the physiologic actions of medications used in cardiopulmonary disease. 2. Prepare and modify respiratory medication delivery and dosages given a particular cardiopulmonary 3. disease or disorder.
<p>RPTH 420: Application of Cardiopulmonary Anatomy & Physiology, (3.0 Units),</p> <p>Hours/Semester: 48.0-54.0 Lecture</p>	<p>Study of the healthy cardiopulmonary system with application to the types of alterations that occur with disease.</p>	<ol style="list-style-type: none"> 1. Describe and evaluate normal anatomical and physiological function as it applies to the cardiorespiratory system.

<p>hours; 96.0-108.0 Homework hours; 144.0-162.0 Total Student Learning hours</p> <p>Method of Grading: Letter Grade Only</p> <p>Prerequisite: <i>Admission to the Respiratory Care Program.</i></p>		<p>2. Analyze and differentiate anatomical function, physiologic data and findings to distinguish between normal and abnormal cardiorespiratory function.</p>
<p>RPTH 445, Respiratory Diseases I (2.0 Units)</p> <p>Hours/semester: 32.0-36.0 Lecture hours; 64.0-72.0 Homework hours; 96.0-108.0 Total Student Learning hours,</p> <p>Method of Grading: Letter Grade Only</p> <p>Prerequisite: <i>Admission to the Respiratory Care Program.</i></p>	<p>Using chronic pulmonary disease as models, the student will learn disease terminology, disease classification, history taking and physical examination. Also included will be basic radiologic, clinical and pulmonary diagnostics</p>	<p>1. Distinguish between chronic pulmonary diseases by evaluating etiology, pathophysiology, bedside assessment and clinical data.</p> <p>2. Evaluate and analyze bedside assessment and clinical data to formulate effective respiratory treatment plans for chronic pulmonary diseases.</p>

Second Semester (Spring 1)

Course Title/Units/Hours and Prerequisite	Course Description	Course Student Learning Outcomes (SLOs)
<p>RPTH 430, Introduction to Respiratory Therapeutics Units: 6.0 units</p> <p>Hours/Semester: 64.0-72.0 Lecture hours; 96.0-108.0 Lab hours; 128.0-144.0 Homework hours; 288.0-324.0 Total Student Learning hours</p> <p>Method of Grading: Letter Grade Only</p> <p>Prerequisite: <i>Admission to</i></p>	<p>Study and laboratory practice of basic respiratory care procedures. Oxygen and aerosol therapy, alveolar recruitment therapy, airway clearance procedures, advanced airway management, cleaning and care of respiratory therapy equipment, and introduction to ventilation concepts are included.</p>	<p>1. Assess and select appropriate respiratory care modalities for a given pulmonary disorders.</p> <p>2. Appraise and formulate appropriate respiratory care modalities based on changes in patient's clinical condition.</p> <p>3. Demonstrate the ability to competently perform various respiratory therapeutics.</p>

<i>the Respiratory Care Program.</i>		
RPTH 438, Clinical Clerkship I Units: 1.0 units Hours/Semester: 48.0-54.0 Field Experience hours; 48.0-54.0 Total Student Learning hours Method of Grading: Pass/No Pass Only Prerequisite: Admission to the Respiratory Care Program.	Orientation and supervised experience in the medical/surgical areas of a local hospital, observing and performing respiratory care procedures to non-critical care patients.	<ol style="list-style-type: none"> 1. Demonstrate patient communication and diagnostics as they relate to acute care. 2. Apply basic respiratory care therapeutics used to manage clinical conditions in the acute care and transitional care setting. 3. Develop, assess and adjust respiratory care plans based on clinical needs.
RPTH 450, Respiratory Diseases II Units: 3.0 units Hours/Semester: 48.0-54.0 Lecture hours; 96.0-108.0 Homework hours Method of Grading: Letter Grade Only Prerequisite: Admission to the Respiratory Care Program.	Continuation of the study of cardiopulmonary diseases utilizing the model developed in RPTH 445 to include the treatment and pharmacotherapy of selected disorders.	<ol style="list-style-type: none"> 1. Identify acute pulmonary diseases by evaluating etiology, pathophysiology, bedside assessment and clinical data. 2. Evaluate and analyze bedside assessment and clinical data to formulate effective respiratory treatment plans for acute pulmonary diseases.

Summer Semester (End of Year 1)

Course Title/Units/Hours and Prerequisite	Course Description	Course Student Learning Outcomes (SLOs)
RPTH 448 Clinical Clerkship II Units: 2.5 units Hours/Semester: 120.0-135.0 Field Experience hours; 120.0-135.0 Total Student Learning hours Method of Grading: Pass/No Pass Only	Continued supervised experience in the medical/surgical patient care areas of a local hospital. Emphasis is on attaining further practice towards mastery of technical skills performed by a Respiratory Care Practitioner in basic therapeutics.	<ol style="list-style-type: none"> 1. Demonstrate patient communication and diagnostics as they relate to acute care and transitional care. 2. Apply respiratory care techniques to assess, develop, and adjust care plans according to clinical conditions of patients in the acute care setting.

Prerequisite: <i>Completion of the first year Respiratory Care program.</i>		
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Third Semester (Fall 2)

Course Title/Units/Hours and Prerequisite	Course Description	Course Student Learning Outcomes (SLOs)
<p>RPTH 458 Clinical Clerkship III Units: 5.0 units</p> <p>Hours/Semester: 16.0-18.0 Lecture hours; 192.0-216.0 Field Experience hours; 32.0-36.0 Homework hours; 240.0-270.0 Total Student Learning hours</p> <p>Method of Grading: Pass/No Pass Only</p> <p>Prerequisite: <i>Completion of the first year Respiratory Care program.</i></p>	<p>Orientation and supervised experience in various adult intensive care units of local hospitals. Emphasis is on orienting, observing, practicing and obtaining basic proficiency in skills performed by a respiratory care practitioner in these areas.</p>	<ol style="list-style-type: none"> 1. Perform basic patient communication and diagnostics as they relate to various aspects of critical care. 2. Assess patient respiratory condition and identify appropriate airway and management strategies for the critically ill care patients. 3. Competently assess, apply, and manage invasive and non-invasive positive pressure ventilation in the intensive care setting.
<p>RPTH 460 TITLE: Respiratory Critical Care Units: 3.0 units</p> <p>Hours/Semester: 32.0-36.0 Lecture hours; 48.0-54.0 Lab hours; 16.0-18.0 TBA hours; 48.0-54.0 Homework hours; 144.0-162.0 Total Student Learning hours</p> <p>Method of Grading: Letter Grade Only</p> <p>Prerequisite: <i>Completion of year 1 Respiratory Care Program content.</i></p>	<p>Study and practice of techniques necessary to provide respiratory care to patients in adult critical care areas.</p> <p>Emphasis includes advanced airway management, ventilator care, respiratory assessment, monitoring and management, and effective communication.</p>	<ol style="list-style-type: none"> 1. Evaluation, assessment and determination of a pulmonary disorder using available respiratory diagnostics. 2. Formulate a differential of respiratory care supportive measures/treatment for a given critical illness. 3. Adjust respiratory care based on changes in patients' clinical conditions. 4. Competently perform specific intensive care respiratory procedures.
<p>RPTH 490, Neonatal and Pediatric Respiratory Care</p>	<p>Student will demonstrate the basic foundation and</p>	<ol style="list-style-type: none"> 1. Identify neonatal/pediatric

<p>Units: 3.0 units</p> <p>Hours/Semester: 32.0-36.0 Lecture hours; 48.0-54.0 Lab hours; 48.0-54.0 Homework hours; 144.0-162.0 Total Student Learning hours</p> <p>Method of Grading: Letter Grade Only</p> <p>Prerequisite: <i>Completion of year 1 Respiratory Care Program content.</i></p>	<p>competent delivery of respiratory care with this age specific population by applying the normal and abnormal cardiorespiratory anatomy and physiology of the newborn and pediatric patient. Provides student with the necessary background to pursue further studies in this specialized area.</p>	<p>pulmonary diseases by evaluating etiology, pathophysiology, bedside assessment and clinical data.</p> <ol style="list-style-type: none"> 2. Evaluate and analyze bedside assessment and clinical data to formulate effective neonatal/pediatric respiratory treatment plans. 3. Demonstrate competency in neonatal/pediatric therapies and procedures.
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Fourth Semester (Spring 2)

Course Title/Units/Hours and Prerequisite	Course Description	Course Student Learning Outcomes (SLOs)
<p>RPTH 480, Diagnostic/Interventional Procedures and Outpatient Respiratory Care Units: 2.0 units</p> <p>Hours/Semester: 32.0-36.0 Lecture hours; 64.0-72.0 Homework hours; 96.0-108.0 Total Student Learning hours</p> <p>Method of Grading: Letter Grade Only</p> <p>Prerequisite: <i>Completion of the first year Respiratory Care program.</i></p>	<p>Fundamental diagnostic testing in pulmonary function, cardiopulmonary testing, and bronchoscopy procedures, as well as opportunities for Respiratory Care Practitioners in various outpatient settings will be explored. Through various diagnostic testing studies, the student will be able to identify changes in the patient's pulmonary status and assist the healthcare team in the outpatient setting to improve patient's health status and quality of life.</p>	<ol style="list-style-type: none"> 1. Identify and apply diagnostic testing studies for various cardiopulmonary disorders. 2. Analyze pulmonary function data to differentiate between obstructive and restrictive disease, assess pulmonary disease severity and evaluate effectiveness of various respiratory therapies. 3. Demonstrate the role of Respiratory Care Practitioners in pulmonary rehabilitation, homecare, disaster management, and formulate effective treatment plans for these patient populations.

<p>RPTH 485, Clinical Medicine Seminar and Professional Development Units: 2.0 units</p> <p>Hours/Semester: 32.0-36.0 Lecture hours; 64.0-72.0 Homework hours; 96.0-108.0 Total Student Learning hours</p> <p>Method of Grading: Letter Grade Only</p> <p>Prerequisite: <i>Successful completion of the first year Respiratory Care Program.</i></p>	<p>Students will reinforce their current knowledge of respiratory care practices in selected areas of basic therapeutics, diagnostic procedures and critical care. Varying modes of instruction will be used – laboratory, research and skill development. Integration of pathology, pathophysiology, diagnostics techniques and therapeutic modalities through the utilization of patient case studies. Preparation for job placement by supporting professional development.</p> <p><i>**Note: This course is currently under review for a potential future update to include a clinical internship component. This addition is in the planning phase and has not yet been finalized.- more details to follow shortly.</i></p>	<ol style="list-style-type: none"> 1. Approach patient cases in a systematic manner to synthesize and analyze assessment and diagnostic data to formulate and modify cardiorespiratory treatment plans. 2. Effectively dialogue with physicians to formulate and modify cardiorespiratory treatment plans. 3. Engage effectively with employers for employment in the field of Respiratory Care.
<p>RPTH 488 Clinical Clerkship IV Units: 6.5 units</p> <p>Hours/Semester: 312.0-351.0 Field Experience hours; Total Student Learning hours</p> <p>Method of Grading: Pass/No Pass Only</p> <p>Prerequisite: <i>Completion of the first year Respiratory Care program.</i></p> <p><i>**Note: This course is currently under review for a</i></p>	<p>Continued supervised experience in the Adult Intensive Care Units. Orientation and supervised experience in Neonatal/Pediatric Care Units of a local hospital and other specialty areas. Emphasis is on attaining proficiency in skills performed by a Respiratory Care Practitioner in these areas.</p>	<ol style="list-style-type: none"> 1. Competently apply respiratory therapeutics and management to critically ill adult, pediatric, and neonatal patients. 2. Assess, apply, and effectively manage invasive and non-invasive positive pressure ventilation to adult, pediatric and neonatal critically ill patients. 3. Complete a clinical internship to support transition from student to practitioner in the

<p><i>potential future update to total semester units. This modification is in the planning phase and has not yet been finalized. More details to follow shortly.</i></p>		<p>healthcare setting.</p>
<p>RPTH 495, Respiratory Care Board Examination Preparation and Review Units: 2.0 units</p> <p>Hours/Semester: 32.0-36.0 Lecture hours; 64.0-72.0 Homework hours; 96.0-108.0 Total Student Learning hours</p> <p>Method of Grading: Grade Option (Letter Grade or Pass/No Pass)</p> <p>Prerequisite: <i>Completion of the first year Respiratory Care Program.</i></p>	<p>Designed for practicing and preparing second-year Respiratory Therapy Students as Respiratory Care Practitioners (RCP) in California. After completing the Respiratory Care Program, graduates must achieve a high cut score in their Therapist Multiple Choice (TMC) Exam to become eligible for the Clinical Simulation Exam (CSE). Next, graduates must pass the CSE to earn their Registered Respiratory Therapy (RRT) Credentials from The National Board for Respiratory Care (NBRC). Designed to review the information from the two-year program to prepare graduates better and improve their potential to pass these examinations.</p> <p><i>**Note: This course is currently under review for a potential future update of its course description and student learning outcomes to align with the new NBRC exam that is scheduled to launch on January 1, 2027. This modification is in the planning phase and has not yet been finalized.- more details to follow shortly.</i></p>	<ol style="list-style-type: none"> 1. Demonstrate and evaluate strategies to successfully pass the sample Therapist Multiple Choice (TMC) credentialing exam at a high cut score. 2. Demonstrate and evaluate strategies to successfully pass the sample Clinical Simulation Exam portion of the 'Registered Respiratory Therapist's credentialing exam.

Table 3.0**Associate of Science in Respiratory Care (ASRC) Program Course Sequence Summary***Note (Legend):*

- 1 unit = 48-54 field/clinical experience hours.
- 1 unit = 48-54 lab hours
- 1 unit = 16-18 Lecture hours

Semester	Course Code	Course Title	Course Units	Notes
Fall 1 (First Semester)	RPTH 410	Introduction to Patient Care & Respiratory Assessment Techniques	3.0	Lecture + 48.0-54.0 Lab hours
	RPTH 415	Respiratory Pharmacology	2.0	Lecture
	RPTH 420	Application of Cardiopulmonary Anatomy & Physiology	3.0	Lecture
	RPTH 445	Respiratory Diseases I	2.0	Lecture
Spring 1 (Second Semester)	RPTH 430	Introduction to Respiratory Therapeutics	6.0	Lecture + 96.0-108.0 Lab hours
	RPTH 438	Clinical Clerkship I	1.0	48-54 Clinical Hours (Field Experience)-Clinical Immersion
	RPTH 450	Respiratory Diseases II	3.0	Lecture
Summer (End of Year 1)	RPTH 448	Clinical Clerkship II	2.5	120-135 Clinical Hours (Field Experience)
Fall 2 (Third Semester)	RPTH 458	Clinical Clerkship III	5.0	192-216 Clinical Hours + Lecture
	RPTH 460	Respiratory Critical Care	3.0	Lecture + 48.0-54.0 Lab hours
	RPTH 490	Neonatal and Pediatric Respiratory Care	3.0	Lecture

				+ 48.0-54.0 Lab hours
Spring 2 (Fourth Semester)	RPTH 480	Diagnostic/Interventional Procedures and Outpatient Respiratory Care	2.0	Lecture
	RPTH 485	Clinical Medicine Seminar and Professional Development	2.0 (pending 3.5)	Lecture; Field Experience <hr/> <i>Field Experience, and Internship in planning phase 96-108 Clinical Hours</i>
	RPTH 488	Clinical Clerkship IV	6.5 (pending: 5.0)	321-351 Clinical Hours; <hr/> <i>Unit revision in planning phase 240-270 Clinical Hours</i>
	RPTH 495	Respiratory Care Board Examination Preparation and Review	2.0	Lecture; <i>student outcomes changes in planning phase</i>

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Table 4.0
Summary of the Clinical Courses and Hours

Course Code	Course Title	Clinical Units	Clinical Hours	Notes
RPTH 438	Clinical Clerkship I	1.0	48–54 (Field Experience)	Clinical Immersion
RPTH 448	Clinical Clerkship II	2.5	120–135 (Field Experience)	—
RPTH 458	Clinical Clerkship III	4.0	192–216 (Field Experience) + Lecture	—
RPTH 485	Clinical Medicine Seminar and Professional Development	2.0 <i>(pending 3.5 course units- 2.0 will be Clinical Internship)</i>	n/a <i>Pending: 96–108 (Field Experience, Internship in planning)</i>	Includes Lecture; <i>* Internship and unit change pending</i>
RPTH 488	Clinical Clerkship IV	6.5 <i>(pending 5.0)</i>	321–351 (Field Experience) <i>Pending: 240–270 (Field Experience)</i>	<i>*Unit revision in planning phase</i>
			Current Clinical Hours Range: 681- 756	<i>Pending Proposed Revision: 696-783 Clinical Hours</i>

() = under review and/or pending revision*

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Table 5.0
Summary of the Lab Hours

Course Code	Course Title	Lab Units	Clinical Hours	Notes
RPTH 410	Introduction to Patient Care & Respiratory Assessment Techniques	1.0	48.0-54.0 Lab hours	2.0 Units is Lecture, 1.0 Unit is Lab
RPTH 430	Introduction to Respiratory Therapeutics	2.0	96.0-108.0 Lab hours	4.0 Units is Lecture, 2.0 Units is Lab Students must register which Lab group they will be: <ul style="list-style-type: none"> ● Lab A ● Lab B
RPTH 460	Respiratory Critical Care	1.0	48.0-54.0 Lab hours	2.0 Units is Lecture, 1.0 Units is Lab Students must register which Lab group they will be: <ul style="list-style-type: none"> ● Lab A ● Lab B
RPTH 490	Neonatal and Pediatric Respiratory Care	1.0	48.0-54.0 Lab hours	2.0 Units is Lecture, 1.0 Units is Lab
			Current Total Lab Hours Range: 240- 270	

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Table 6.0

ASRC Program Learning Outcomes Assessment Matrix			
Program Student Learning Outcome (PSLO)	Assessment Method	Courses Used for Assessment	Success Criterion
PSLO #1: Obtain the RRT credential.	Direct Assessment – Course Performance	RPTH 495 Respiratory Care Board Examination Preparation and Review Units	Students must earn a minimum score of 75% in each course listed to demonstrate competency in obtaining the Registered Respiratory Therapy Credential Through the National Board of Respiratory Care (NBRC)
PSLO #2: Obtain gainful employment as a Licensed Respiratory Care Practitioner (RCP).	Direct Assessment – Course Performance	RPTH 485 Clinical Medicine Seminar and Professional Development	Students must earn a minimum of 75% or higher in each course listed to obtain skills and competency for employment as a Licensed Respiratory Care Practitioner (RCP).
PSLO #3: Demonstrate competency in the cognitive, psychomotor, and affective domains when providing respiratory care.	Direct Assessment – Course Performance	RPTH 410 Introduction to Patient Care & Respiratory Assessment Techniques RPTH 415 Respiratory Pharmacology RPTH 420 Application of Cardiopulmonary Anatomy & Physiology RPTH 430 Introduction to Respiratory	Students must earn a minimum of 75% or higher in each course listed to demonstrate competency in the cognitive, psychomotor, and affective domains when providing respiratory care.

		Therapeutics RPTH 438 Clinical Clerkship I RPTH 445 Respiratory Diseases I RPTH 448 Clinical Clerkship II RPTH 450 Respiratory Diseases II RPTH 458 Clinical Clerkship III RPTH 460 Respiratory Critical Care RPTH 490 Neonatal and Pediatric Respiratory Care RPTH 480 Diagnostic/Interventional Procedures and Outpatient Respiratory Care RPTH 488 Clinical Clerkship IV	
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Texts and Supplies

Learning will take place **in person** and through Skyline College’s learning management system (LMS), Canvas.

As part of our ongoing commitment to affordability, ASRC courses utilize Zero Textbook Cost (ZTC) options by incorporating Open Educational Resources (OER). Required course materials—including

textbooks, articles, and other instructional content—will be provided at no cost by the instructor and made available through Canvas or Skyline College’s Library eBook collection.

However, some courses may still require the purchase of textbooks. These materials are carefully selected to support your academic success and serve as valuable references throughout your clinical and professional journey. Textbooks can be purchased through the Skyline College Bookstore or from online retailers.

Estimated Textbook Costs: If applicable, students should expect to spend approximately \$150 to \$300 per term on required materials *if applicable*.

Extra supplies you will need to purchase:

Prior to hospital rotations include:

- White lab coat (3/4 length, long sleeve) - optional (ask your instructor for confirmation)
- Scrub top and pants
- Stethoscope
- Name badge
- Watch with a second hand

Other Expenses During and After Program Completion:

- During:
 - CastleBranch Account
 - MyClinicalExchange Account
- After
 - NBRC Exam fee
 - State Licensing Application Fee

Additionally, the following items may be helpful: a calculator, pocket penlight, and pocket notebook. Additional costs may vary. For more information, please refer to the program website.

Malpractice Insurance:

Associate of Science: All students in the SMCCCD health career programs are recommended to carry student malpractice insurance. This protects you from any personal litigation. Malpractice insurance is included as part of the registration fee for applicable courses; therefore, registration is required prior to starting any clinical course.

Technology and Devices

A PC, Mac, or tablet with videoconferencing capability is recommended for engaging effectively in different environments, concluding but not limited to the office hours, virtual meetings, and course-related activities. For optimal performance in accessing applications, participating in meetings, and completing assignments, a laptop or desktop computer is highly recommended.

Canvas is compatible with Windows, Mac, Linux, iOS, Android, and any device with a supported web browser. More information can be found here: [Skyline Online Education](#)

Additionally, Microsoft Office Suite is required to complete assignments and projects. Students can access a discounted version through the San Mateo Community College District via the following link: [CollegeBuys](#).

 **Skyline College Fee Types (Effective Fall 2024)**

The fees and amounts below are effective as of Fall 2024, except updates to the Non-Resident Tuition & Capital Outlay Fee, which are effective Fall 2025.

Fee Type	Amount	Required of / Notes
Enrollment Fee <i>(Subject to change)</i>	\$46 per unit	All students, except high school students enrolling in fewer than 11.5 units through the Concurrent Enrollment, Middle College High School, or College Consortium programs. Waived for recipients of the California College Promise Grant (CCPG)

Enrollment – Bachelor of Science in Respiratory Care	\$130 per unit	<p>All students who are new graduates from a CoARC-accredited Respiratory Care program equivalent to an A.S. in Respiratory Care and are California licensure eligible, or current licensed RCPs accepted into the BSRC program at Skyline College.</p> <p>Students eligible for the California College Promise Grant (via FAFSA or Dream Act Application) will only waive \$46 per unit, resulting in a total cost of \$84 per unit.</p>
Audit Fee	\$15 per unit	<p>Students may audit courses, except those in programs that require special preparation and/or limited program admission.</p> <p>California College Promise Grant does not cover audit fees.</p>
Nonresident Tuition	\$368 per unit <i>(plus \$46 per unit enrollment fee)</i>	<p>Nonresidents of California who are residents of other states.</p> <p>Exemptions (Ed. Code §68075.6): A one-year exemption is granted from the date of settling in California for:</p> <ul style="list-style-type: none"> • Iraqi citizens/nationals (and dependents) employed by/on behalf of the U.S. Government in Iraq • Afghan and Iraqi translators (and dependents) who worked with U.S. Armed Forces • Afghan nationals employed by/on behalf of the U.S. Government or ISAF in Afghanistan • Refugees admitted under 8 USC §1157
Nonresident Capital Outlay Fee	\$8 per unit	Applies to nonresidents of California who are residents of other states.
International Student Application Fee	\$50 <i>(Fall and Spring only)</i>	Required for international students.

International Student Tuition	\$367 per unit <i>(plus \$46 per unit enrollment fee)</i>	Applies to international students.
International Capital Outlay Fee	\$0 per unit	Applies to international students.
International Student (F-1 Visa) Health Insurance	Fall: \$975 Spring/Summer: \$1,365 Full Year: \$2,340	Required for all F-1 Visa international students.
Health Services Fee	\$0 (Fall 2024)	Suspended for Fall 2024. Students who rely solely on prayer for healing may request exemption. Visit the Health and Wellness website or use the Extenuating Circumstances Form from the Skyline College Forms page to request exemption.
Student Representation Fee	\$2	Required of all students, except those in Concurrent Enrollment or Middle College programs. Supports advocacy at local, state, and federal levels. Opt-out available via instructions sent after registration.
Student Union Fee	\$1 per unit (Max \$5 per semester, Fall and Spring only)	Required of all students, except those in Concurrent Enrollment or Middle College programs. Supports financing and operations of the Student Union. This fee cannot be reversed .
Student Body Fee	\$15 Fall \$15 Spring (<i>Fall and Spring only</i>)	Required of all students, except those in Concurrent Enrollment or Middle College programs. Automatically assessed. Opt-out available via post-registration email

		instructions.
Parking Fee	\$0	Suspended for Summer 2024, Fall 2024, and Spring 2025. Parking regulations are still enforced. Violations are subject to citation. See the parking website for details.
Official Transcript <i>(All SMCCCD records appear on one transcript)</i>	\$5 per transcript	First two transcripts are free. Requests can be made via the Transcript Request Website.
Returned Check Fee	\$20	Applies to checks returned by the bank. Only cash, credit card, cashier's check, or money order accepted for repayment. <i>Bookstore check return fees may differ.</i>
Duplicate Diploma Fee	\$20	Request via the Skyline College Forms Website.
Online Instructional Materials Access Fee	Varies by course	License fee for access to digital course materials via the Inclusive Access Program. Discounted vs. printed materials and includes interactive platforms. Billed during the first week of the semester. Refundable. Students may opt out or choose alternate access.

- **Tuition is free for San Mateo County residents;** (eligibility and fees are subject to change each academic year based on district policies).
 - Financial aid is also available—students are encouraged to contact Skyline College Financial Aid Services for more information at <https://skylinecollege.edu/financialaid/>.

ASRC Accreditation

The **Associate of Science Degree in Respiratory Care Program at Skyline College** in San Bruno, California (Program Number: **200147**) is fully **accredited by the Commission on Accreditation for Respiratory Care (CoARC)**.

CoARC is the recognized accrediting body for respiratory therapy education programs in the United States. It uses an **outcomes-based accreditation model**, which means that programs are evaluated based on performance indicators that reflect how well the educational goals are achieved and how effectively the program prepares students for professional success.

Program Accreditation Highlights:

- **View Skyline College Program Outcomes Data** on the CoARC website.
- **Skyline College Respiratory Care Advisory Committee** supports program relevance and continuous improvement.
- **Recent Accreditation Milestones:**
 - 2024 CoARC Annual Report Commendation Letter
 - 2023 CoARC Annual Report
 - 2021 CoARC Credentialing Success Award
 - Continuing Accreditation Report (2018)

CoARC Contact Information:

Commission on Accreditation for Respiratory Care (CoARC)

Address: 264 Precision Blvd., Telford, TN 37690

Phone: (817) 283-2835

Website: www.coarc.com

Institutional Accreditation

In addition to CoARC accreditation, Skyline College is accredited by:

- **Accrediting Commission for Community and Junior Colleges (ACCJC)**, part of the **Western Association of Schools and Colleges (WASC)**
- Recognized by the **Council for Higher Education Accreditation (CHEA)**

Professional Requirements

New Continuing Education Requirements for California Licensed Respiratory Care Practitioners *Continuing Education Requirements (Effective January 1, 2024)*

The **Respiratory Care Board of California (RCB)** has adopted new continuing education (CE) requirements aligned with its most recent workforce study and strategic plan. Currently, respiratory care practitioners (RCPs) must complete 30 hours of CE every renewal cycle, with two-thirds (20 hours) directly related to the clinical practice of respiratory care.

New CE Framework

- A total of **30 hours of CE** is required every two-year renewal cycle.
- At least **25 of the 30 required CE hours** must be completed in the following content areas:

1. RCP Leadership

- A minimum of **10 hours** must be directly related to RCP leadership.

2. Respiratory Care Clinical Practice

- A minimum of **15 hours** must be directly related to the clinical practice of respiratory care.

New CE Format

- A minimum of **15 of the 30 required CE hours** must be earned from **live courses or meetings**.

Resource:

- Respiratory Care Board Continuing Education Guidebook link:
 - https://rcb.ca.gov/licensees/forms/new_ce_booklet.pdf

Addresses for the licensing and credentialing organizations are:

<p><u>California Licensing Board</u> Respiratory Care Board of California (RCB)</p> <p>3750 Rosin Court, Suite 100 Sacramento, CA 95834</p> <p>Toll Free: (866) 375-0386 Phone: (916) 999-2190 Fax: (916) 263-7311</p> <p>Email: rcbinfo@dca.ca.gov</p>	<p><u>National Credentialing Board</u> National Board for Respiratory Care (NBRC)</p> <p><i>NBRC Executive Office</i> 10801 Mastin Street, Suite 300 Overland Park, KS 66210</p> <p>Toll Free: 888.341.4811 Phone: 913.895.4900 Fax: 913.712.9283</p>
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- The Respiratory Care Board is open Monday - Friday from 8am - 5pm, with the exception of [State Holidays](#).

Email: info@nbrc.org

Course Rubrics and Program Grading Threshold

Each course within the Associate of Science in Respiratory Care (ASRC) program includes its own specific rubrics tailored to the course content, outcomes, and assignments. These rubrics are developed by the instructor of record based on the course’s unique specialty area and are available within each course’s Canvas shell. Students are encouraged to review the rubric for each assignment to understand how their work will be evaluated and to support their academic success.

To successfully complete a course in the ASRC program, students must achieve a minimum final grade of 75%. This threshold reflects the program’s academic standards and ensures that students demonstrate the required level of competency for progression and graduation.

Professional Organizations

Professions and their members are represented by organizations that work for the benefit of the profession. Respiratory Care is no exception. Professional organizations exist at the national and state level. The organizations are affiliated and have chapters in each locality.

The organization's main goals are to promote the profession both from within and outside, to provide educational and professional conferences, disseminate information through scientific and professional journals and promote within government the interests of respiratory care professionals.

All students in the program are expected to maintain student membership in these organizations. The mailing addresses for these organizations are:

<p>American Association for Respiratory Care (AARC) 9425 N. MacArthur Blvd. Suite 100 Irving, TX 75063-4706 USA Phone (972) 243-2272 Fax (972) 484-2720 E-mail: info@aarc.org</p>	<p>California Society for Respiratory Care (CSRC) 3868 Howe St. #1 Oakland, CA 94611 Email: office@csrc.org Toll Free: 888/730-CSRC (2772)</p>
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Students are also encouraged to request the following free publications.

- RT Magazine
 - <http://www.rtmagazine.com/>



Policies and Procedures

(grading, attendance, professionalism, dress code)

Academic Record

Applicable academic records are accessible on a need-to-know basis by the Program Director, faculty, counselor, and Program Services Coordinator in order to evaluate a student's academic standing as needed for the program.

Academic Requirements

While grades do not fully define the kind of respiratory care practitioner a student will become, they serve as an important measure of a student's retention of knowledge necessary for safe and competent practice. Therefore, a minimum grade of **(75%)** is required in all ASRC courses.

If a student is unable to achieve this minimum requirement, options for continuation in the program will be assessed and developed by the Program Director. The Program Director's decision regarding a student's continuation in the program will be based on the following criteria:

- The student's academic standing, attendance, professionalism, and behavior while enrolled in the program
- The reason(s) for the student's academic difficulties
- The potential for resolution and improvement in academic performance
- The development and implementation of a Student Success Plan
- Faculty assessment of the student's potential to successfully complete the program

Respiratory Care Program Dress Code Policy

As future healthcare professionals, students in the Respiratory Care Program are expected to present themselves in a manner that reflects the professionalism and high standards of the healthcare environment. The following dress code must be observed during all clinical, lab, simulation, and classroom activities, unless otherwise specified by the instructor:

Clinical and/or Lab-Activity Attire:

- **Uniform:** Approved program scrubs must be clean, wrinkle-free, and properly fitted. Undershirts (if worn) should be solid in color and neutral (e.g., white, gray, black).

- **Name Badge:** Your student identification and/or clinical badge must be worn at all times and clearly visible above the waist.
- **Shoes:** Closed-toe, non-slip, professional footwear in neutral colors (e.g., black, white, or gray). No Crocs with holes, sandals, or open-heel shoes allowed.
- **Hygiene:** Maintain a high standard of personal hygiene. Avoid strong perfumes or colognes.
- **Hair:** Hair must be clean, neat, and pulled back if it interferes with patient care or safety.
- **Nails:** Nails must be short, clean, and natural. Artificial nails or brightly colored polish are not permitted in clinical settings.
- **Jewelry:** Minimal jewelry is allowed. Stud earrings and wedding bands are acceptable. No dangling earrings, facial piercings, or excessive jewelry for safety purposes.
- **Tattoos:** Visible tattoos must be covered *if* deemed inappropriate or unprofessional by clinical or faculty staff.

Classroom/Community Engagement Attire:

- Casual but professional attire is expected. Examples include:
 - Polo shirts, blouses, or collared shirts
 - Neat jeans or slacks (no rips, holes, or excessive wear)
 - Clean, closed-toe shoes
 - Approved program scrubs,
 - Respiratory Care Shirt/Clinical Cohort Tee,
 - etc.
- Not permitted (unless noted by instructor or Program Lead):
 - Pajamas, sweatpants, leggings worn as pants, crop tops, or clothing with offensive language/images

Additional Guidelines

- **Program Patch:** If required, patches must be securely affixed to the designated area of the scrub top.
- **Clinical Equipment:** Bring all necessary items (e.g., stethoscope, penlight, watch with second hand, etc.) to each clinical rotation.
- **Compliance:** Failure to adhere to the dress code may result in dismissal from the clinical site for the day and/or a deduction in course participation points.

By maintaining a professional appearance, you reflect the integrity and responsibility expected in the healthcare profession. If you are ever unsure whether an item of clothing or accessory is appropriate, err on the side of caution or consult with your instructor.

Attendance – Classroom

Attendance expectations are outlined in this ASRC Program Handbook and Skyline Student Guide Handbook. Missing class means missing essential content that supports your development as a future Respiratory Care Practitioner. Simply put—**your presence matters**.

If you anticipate an absence, it is your responsibility to notify your instructor in advance. Consistent attendance reflects your commitment to the profession and contributes directly to your academic success.

Standards of Clinical Behavior

Clinical experiences offer students the opportunity to practice and develop proficiency in real-life patient care settings. These environments support the transition from theoretical learning to hands-on professional performance.

Clinical practice will help you build skills in:

- Therapeutic communication with patients
- Collaboration with the healthcare team
- Performing respiratory care procedures
- Understanding hospital systems
- Demonstrating professionalism and safe clinical practices
- Time and organizational management

Competency is gained through supervised practice. Many clinical procedures arise spontaneously; students are expected to seek out and engage with these learning opportunities. Both students and instructors share responsibility in evaluating clinical performance.

The hospital is a **learning environment**—your growth depends on your initiative, professionalism, assertiveness, and the academic foundation brought from classroom instruction.

Always remember: **you are a guest of the clinical site and a representative of Skyline College’s Respiratory Care Program**.

Conduct

As a student representative of both Skyline College and the respiratory care profession:

- Follow all policies and procedures of your assigned clinical facility.
 - Respect patient privacy and confidentiality at all times.
 - Do not discuss patient information with unauthorized individuals.
 - Always strive for professional behavior—even if others around you do not model it.
-

Clinical Clerkship Assignments (Applied Clinical Training (ACT))

The clinical coordinator, in collaboration with affiliated clinical sites, develops each student's rotation schedule. While every effort is made to minimize inconvenience, assignments depend on availability and student cohort size.

- **Shift Times:** May include day or evening shifts (8–12 hours). Start times as early as 6:00 AM; end times as late as 11:30 PM.
 - **Supervision:** Students are supervised at all times by licensed practitioners.
 - **Compensation:** Clinical work is for educational purposes, and unpaid.
 - **Evaluation:** Students are evaluated at the end of each clinical rotation block.
 - **Transportation & Parking:** Parking in urban areas (especially San Francisco) may be limited and require a fee. Ride-sharing and public transit are strongly encouraged
-

Clinical Locations:

Sites are located throughout Northern California.

- This includes but not limited to:

San Francisco County

- California Pacific Medical Center – Sutter Health (Van Ness & Mission Bernal)
- Kaiser Permanente, San Francisco Medical Center
- St. Francis Memorial Hospital – UCSF Health
- UCSF Health Medical Center – Mission Bay

- UCSF Health Medical Center – Parnassus
- UCSF Health Medical Center – San Francisco
- Veteran Affairs Medical Center, San Francisco
- Zuckerberg San Francisco General Hospital

San Mateo County

- Lucile Packard Children’s Hospital Stanford
- Mills-Peninsula Medical Center
- San Mateo Medical Center (formerly San Mateo General Hospital)
- Stanford Health Care – Stanford Medical Center

Alameda County

- Eden Medical Center
- UCSF Health Medical Center – Oakland

Background Check, Drug Testing, and Health Screening

Hospitals require all students to complete a background check (referenced by Social Security number), drug test, and health screening prior to entry into the program. The purpose of these screenings is to ensure that students can meet the mental and physical qualifications required for the program. Additionally, students must be properly immunized against Rubella, Mumps, Measles, Tdap, and Hepatitis B, with documentation provided via titers. Tuberculosis (TB) testing must be completed before starting the program and again after one year. The Skyline College Health Center offers these services for a fee.

Prior to starting the program, students must complete:

- **A Social Security-referenced background check**
- **A drug screening**
- **A comprehensive health screening**

These requirements verify that students are physically and mentally prepared for the demands of clinical work. Immunizations must be documented via titer and include:

- Rubella
- Mumps
- Measles
- Tdap
- Hepatitis B
- Tuberculosis (TB) testing upon entry and again after one year

The Skyline College Health Center can provide these services for a fee.

For more information: <https://skylinecollege.edu/healthandwellness/healthservices.php#services>

**Note: The list of required immunizations is subject to change based on clinical site policies, public health guidelines, and program requirements*

Clinical Experience Disclaimer:

- Some clinical sites may require students to submit documentation through a designated third-party platform (e.g., MyClinicalExchange, CastleBranch) for approval prior to the start of clinical rotations. Use of these platforms may incur additional costs. Fees and requirements vary by hospital site.

Student Safety and Protection

When assigned to your clinical rotation, you will be covered for illness or injury under Workers' Compensation Insurance provided by the San Mateo County Community College District. More information about this coverage is included in the clinical manual.

During the first semester of the program, modules will be presented on protecting yourself from the transmission of bloodborne and other pathogens. This manual includes a brief document on universal precautions and body fluid precautions. Emphasis will also be placed on the prevention of respiratory-transmitted infections.

Students are covered by **Workers' Compensation Insurance** through the San Mateo County Community College District for any illness or injury sustained during clinical rotations. More information is available in the Clinical Manual.

In the first semester, students will receive training in:

- Bloodborne pathogen transmission prevention
- Universal and body-fluid precautions.
- Respiratory-transmitted infection control

- Hepatitis vaccination education.- (information also available in the Health Center, Bldg 19)

Please note: students are responsible for obtaining all required immunizations.

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Universal Precautions

Policy: Respiratory Care students are required to practice safe infection control procedures to protect themselves and others.

Procedure:

- Wash hands thoroughly after every patient encounter (minimum 10 seconds with soap and water).
- Wear gloves when exposed to body fluids, blood, urine, or stool.
- Wear gowns, goggles, and/or masks when contamination or splashing is anticipated.
- Dispose of sharps in designated, puncture-resistant containers. Never recap or manipulate needles by hand.
- Report all **needle stick injuries** to Student Health Services within 72 business hours.

Tuberculosis Protocol:

- Wear a **fit-tested N95 mask** when working with known or suspected TB patients.
- Students without a properly fitted mask may not enter TB patient rooms.
- Students who convert to a positive TB result must receive a chest X-ray and consult with a physician for treatment options through Skyline Health Services.

Personal Appearance

Maintaining a professional appearance is essential. Patients and healthcare staff view you as part of the clinical team. A neat and appropriate appearance supports trust, communication, and effectiveness.

- Follow the **dress code** of the assigned clinical site.
- Some sites allow program scrubs; others require **business casual attire**.
- A **white lab coat** and visible **student identification** must be worn at all times.
- Personal hygiene and grooming are expected to be of high professional standard.

Attendance – Clinical

Clinical time is limited and critical to your success. **Missing clinical hours negatively impacts your education.**

If you will be absent or late:

1. Notify your clinical site before your scheduled shift.
2. Contact your clinical instructor.
3. Notify the Director of Clinical Education.

Excessive absences, tardiness, or failure to notify appropriate personnel will result in disciplinary action, as outlined in the Student Handbook. All assigned clinical hours must be completed to meet course and program requirements.

Etiquette & Netiquette

As a Respiratory Care Practitioner, professionalism is expected at all times—even in virtual environments. Faculty, staff, and student colleagues are expected to maintain a respectful, professional, and supportive attitude, especially when differences of opinion or disagreements arise.

The guidelines that govern online communication are known as *netiquette*. These not only include rules of behavior during discussions but also etiquette that reflects the unique nature of online interaction. Remember: your time online is also someone else's time. Respect for others' time, privacy, and dignity is essential.

To communicate effectively and professionally in our online environment, please adhere to the following rules:

- **Avoid typing in all caps.** This is equivalent to shouting and is considered impolite.
- **Do not plagiarize.** Always give credit where credit is due when referencing someone else's work.
- **Keep personal information private.** Protect your own and others' confidentiality.
- **Avoid foul or offensive language.** This is a professional forum—always present yourself with professionalism.
- **Use correct punctuation, grammar, and spelling.** Clear and professional writing reflects your attention to detail.
- **Read first.** Review questions, instructions, and assignments thoroughly before posting or asking questions—your answer may already be there.
- **Be kind.** Although online communication may feel anonymous, remember there is a real person behind every screen name. Engage respectfully, even in disagreement.

Student Relationships

Throughout the program, students will share a wide range of experiences. It is important to understand that there is no need for competition among peers. Some students may enter the program with more knowledge of respiratory care, while others may have less. It is essential to recognize that no one—not even instructors—knows everything.

The primary goal is to support, teach, and learn from one another. Students and faculty are partners in creating a collaborative learning environment and building meaningful relationships that may last beyond the duration of the two-year program. Students are encouraged to address instructors by their names or titles to help foster a respectful, professional, and supportive atmosphere.

Additionally, the program offers a Respiratory Care Club through the Student Organizations and Clubs at Skyline College. Participation in this club is encouraged, as it provides valuable opportunities for academic enrichment, leadership development, and the cultivation of professional skills essential to becoming effective respiratory care practitioners and future leaders in healthcare.

Program Advisory Committee (PAC) Meeting

We strongly encourage all Respiratory Care students to consider joining our Program Advisory Committee (PAC) Meeting, which takes place once every semester. This important meeting is part of our ongoing commitment to maintaining CoARC accreditation standards—and more importantly, it's your chance to be the voice of your cohort. By participating, you'll have a unique opportunity to engage directly with clinical affiliates, faculty, and program leadership. Your input helps shape the future of our program, ensuring it continues to meet the needs of students and the evolving healthcare landscape. Don't miss this meaningful way to represent your peers, share your perspective, and make a real impact on the program you're a part of.

Guidelines for Using Artificial Intelligence (AI) as a Student

As technology evolves, so does academia. A good rule of thumb when using AI as a student is to **supplement**, not replace, your learning and critical thinking. AI tools can offer valuable assistance with research, data analysis, and study organization; however, they should not be relied upon as a substitute for understanding the material or developing your own insights. Remember, **you are the conductor—AI is your assistant, not your boss!**

Below are guidelines for responsibly and effectively using AI tools as you progress through the BSRC program:

- **Use AI as a tool, not a crutch:** While AI can help streamline tasks and provide additional resources, it's essential to stay actively engaged with the material and build your understanding independently.

- **Verify and cross-reference:** Always double-check the accuracy and credibility of AI-generated information, especially when using it for academic research or writing. Cross-reference with reputable sources to ensure information is reliable and up to date.
- **Understand limitations:** AI algorithms may have biases or limitations based on the data they are trained on. Apply your critical thinking skills when interpreting AI-generated content.
- **Maintain academic integrity:** When using AI tools to assist with writing or generating content, ensure you are not plagiarizing or violating academic honesty policies. Use AI-generated content as a starting point, and be sure to edit, modify, and properly cite any sources used. Don't forget to credit all external content appropriately.
- **Seek guidance when needed:** If you're unsure how to use AI tools effectively or ethically, reach out to your instructors, librarians, or academic advisors. They can provide support and clarity in navigating AI use in academia.

In summary, approach AI use with a balanced mindset—leveraging the strengths of modern technology while preserving the core values of traditional learning and academic integrity.

Academic Integrity and Self-Plagiarism

Maintaining academic honesty is essential to your success in the BSRC Program and to upholding the integrity of the respiratory care profession. One important aspect of this responsibility is understanding the concept of **self-plagiarism**.

What Is Self-Plagiarism?

Self-plagiarism occurs when a student reuses their previously submitted work and presents it as new, without proper citation or substantial new contribution. According to the **APA 7th Edition (Section 8.3)**, once an assignment has been submitted in an academic setting, it is considered "published." Reusing that material in future assignments requires citation just as you would with any other source.

It is important to recognize that **building on prior work**—especially in a program that includes progressive or cumulative projects—is encouraged. However, this does **not** mean copying and pasting large sections of a previous paper into a new one. Even if the work is your own, submitting it again without clear attribution constitutes self-plagiarism and violates academic integrity policies.

Acceptable Use of Your Previous Work

You may incorporate portions of your previous work under the following conditions:

-  **You must properly cite yourself** using APA 7th Edition style.

- **Only a small portion** (a few sentences or a short paragraph) should be reused, and only if it directly supports the purpose of the new assignment.
- The reused content must be **relevant, justified**, and should not replace new, original analysis or insight.
- Avoid reusing entire papers or large sections of prior work.

How to Cite Yourself (APA 7th Edition)

If you include content from a previously submitted paper, cite it like this:

Smith, J. (2024). *Title of the previous paper*. Unpublished manuscript, [Course Name], [Institution Name].

This citation makes clear that you are the author and that the work has already been submitted in a prior academic context.

Paraphrasing and Citation

Paraphrasing is the process of rewording and restructuring an original source using your own words while preserving the meaning of the original content. When paraphrasing, you **must still provide a proper citation** to credit the original author.

To avoid plagiarism of any kind:

- Use your own voice to paraphrase ideas and integrate them into your work.
- Include in-text citations and a complete reference list for all sourced content, following current APA Edition formatting.
 - For more support contact CTTL
 - Website: <https://skylinecollege.edu/cttl/>
 - Location:
 - Skyline College
 - 3300 College Drive, Suite 5-118
 - San Bruno, CA 94066
 - Phone: 650-738-7080

More Resource:

- Plagiarism and Artificial Intelligence Guidance, SMCCD District Academic Senate
 - <https://smccd.edu/academicsenate/plagiarismaiguideance.php>

Upholding Integrity

Understanding Turnitin: What You Need to Know as a Respiratory Care Student at Skyline College

Welcome to the Respiratory Care Program at Skyline College! As you begin your academic journey with us, one of the tools you'll become familiar with is **Turnitin**. Turnitin is an online application used by many colleges and universities—including Skyline College—to support academic writing and help uphold integrity in your coursework.

What is Turnitin?

Turnitin is a platform that checks your written assignments for similarity by comparing your work to a vast database of academic papers, articles, websites, and student submissions worldwide. This generates a **Similarity Report** which highlights parts of your submission that match other sources.

Think of Turnitin not just as a “plagiarism checker,” but as a **learning tool** that helps you improve your writing, avoid accidental plagiarism, and develop strong academic habits.

How Do I Use It?

Your instructors may ask you to submit essays, reflection papers, or other written assignments through Turnitin. In most cases, this will be done directly through your **Canvas** course shell. After you submit your work, Turnitin will generate a Similarity Report showing what percentage of your paper matches other sources.

- **A low percentage** (generally under 20%) is often considered normal, depending on the type of assignment.
 - **0–20%:** Usually acceptable, especially for research papers or assignments that include proper citations.
- **21–29%:** May prompt instructor review and feedback on improving citation and paraphrasing.
- **30% or higher:** This may typically result in a more formal review. If the report shows questionable similarity, the **instructor may consult with the Program Director** to create a **Progress Plan** that addresses the issue and supports your success.
- **50% or higher:** If your similarity report is **50% or greater**, and the **faculty's initial review confirms plagiarism, and absence of proper citation**, the **Program Director must be notified immediately**. At this point, the **Academic Integrity and Honesty policy** is activated, and we will meet with you to:
 - Review the findings,
 - Identify the root of the issue,
 - Provide guidance on proper academic practices, and
 - Collaboratively create a plan for moving forward to support your success in the assignment and the course.

Our goal is not to penalize but to **support you in becoming a responsible and successful student**. Mistakes can be powerful learning opportunities, and we're here to help you every step of the way.

What Happens if the Similarity is High?

If your Turnitin report shows a high similarity score, it doesn't always mean you've intentionally done something wrong—but it does mean we'll need to take a closer look. In line with Skyline College's **Academic Integrity and Honesty Guidelines**, we'll work with you to create a **Progress Plan** to address the issue.

This may include:

- Reviewing proper citation practices
- Providing additional writing support
- Giving you a chance to revise and resubmit
- Helping you build the skills needed to succeed not just on that assignment, but throughout the course

Our goal is always to support you—not to penalize you—and to ensure you're learning and growing through each experience.

Where Can I Get Help?

If you ever have questions about Turnitin or your Similarity Report, the **first step** is to reach out to your **instructor for that course**. They can give you the best guidance specific to that assignment.

If you need further support, don't hesitate to contact your **Respiratory Care Program Director**—we're here to help and ensure you feel confident and prepared.

 **Support Services – EAC (formerly DRC)**
(tutoring, career readiness)

Mental and Physical Qualifications

(For Skyline College Respiratory Care Students)

The mission of the Skyline College Respiratory Care Program is to train competent entry-level **Respiratory Care Practitioners (RCPs)** capable of providing care for diverse patient populations across modern healthcare settings. This section outlines the physical and mental qualifications necessary for successful completion of the program and future professional practice.

If a student is unable to demonstrate any of the following essential skills and abilities, it is their responsibility to request appropriate accommodations. In consultation with the **Educational Access Center (EAC)**—formerly known as the Disability Resource Center (DRC)—reasonable modifications and/or accommodations will be made for students with documented disabilities in accordance with

Skyline College policies and applicable laws.

- Students needing accommodation are encouraged to connect early with the **Educational Access Center (EAC)** to begin the documentation and support process.

Tutoring and Academic Learning Center

The Learning Center (Building 5) provides support for writing, reading, math, and other subjects. Sign up for LSKL 800 for general tutoring, or for LSKL 853 for reading and writing support through the Writing & Reading Lab in the Learning Center.

For in-person appointments: Librarians, on the 2nd floor of building 5, can assist with research projects and library questions. Academic counselors, health services, and other student support services are available in the Student Services Center in Building 2.

For remote assistance: Please use this link to for hours and contact information

- <https://skylinecollege.edu/learningcenter/>

Career Readiness Center:

The **Career Readiness Center** at Skyline College is here to support you as you prepare for your future career. Whether you're exploring potential pathways or actively applying for jobs, the Center offers both in-person and virtual services designed to help you grow professionally.

By connecting with Career Readiness services, you'll gain:

- One-on-one guidance and support from career faculty and staff
- Access to tools and resources to strengthen your job readiness
- Assistance with resume writing, interview preparation, and job search strategies
- Opportunities to take career assessments and review your results with a career faculty member to help identify possible career paths and related majors

All students are encouraged to utilize this valuable resource to build confidence and clarity as they move toward their professional goals.

To learn more or schedule an appointment, visit the Career Readiness Center website or drop by their office on campus! <https://skylinecollege.edu/careercenter/>

Counseling, and Campus Resources

Counseling

The Skyline counseling department is available for academic or personal guidance. This department

should be used for all class registration, questions on academic requirements and personal guidance. The school also employs a professional psychologist. Students in demanding programs sometimes need professional help to handle stress. Do not hesitate to contact your counselor early. Do not hesitate to talk to the program director or other faculty members.

The academic counselor assigned to the Respiratory Care program is:


- Lorraine DeMello
- demellol@smccd.edu
- 650-738-4424

Campus Resources

As Skyline Students you have the option to utilize SparkPoint services and resources to achieve financial stability.

- SparkPoint services and resources are bundled and sequenced to make the most of what we have to offer, and they are integrated with the network of Student Services provided by Skyline College.
- This site provides information about SparkPoint Services -- contact SparkPoint if you have any additional questions!

- **SparkPoint at Skyline College**

<p>Address: Building 1, Floor 2 Room 1-214 San Bruno, CA 94066 Phone#: 650-738-7035</p>	 <p>SparkPoint Flyer</p>
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- **Other Sparkpoint Services:** <https://skylinecollege.edu/sparkpoint/>

- This includes but not limited to:
 - Public benefits support
 - Student food grants
 - Free groceries
 - Tax services
 - Grove Scholars Program
 - Legal clinic and more

Office Hours

Monday - Thursday: 8:00am - 4:30pm

Friday: 8:00am - 1:00pm

Financial Aid, Resources, Grants and Scholarships

Financial Aid Eligibility:

Due to the academic demands of the respiratory care program, work life balance can still be difficult even with the flexible schedule options. The college does recognize that many students may have financial obligations necessitating work. If you are challenged with finances, there are grants and loans that may be available to you. To assess qualification for financial aid support, **please contact the Financial Aid Office.**

Please Note:

Students must achieve a minimum of **75%** in each class to remain in and progress through the Associate of Science in Respiratory Care (ASRC) Program at Skyline College.

Financial Aid Eligibility Only:

Per AB 789

To maintain financial aid eligibility at Skyline College:

- Students must meet all Satisfactory Academic Progress (SAP) criteria as outlined below.
 - Minimum 2.0 Cumulative Grade Point Average (GPA)
 - Minimum 67% Cumulative Completion Rate
 - Cannot exceed 90 attempted units

If a student has been suspended for not meeting these SAP standards, they may submit an appeal if they faced special circumstances that affected their academic performance. For further details about this policy and the appeal process, visit <https://skylinecollege.edu/financialaid/satisfactoryacademicprogress.php>.

Grants and Scholarships

Scholarships also exist for respiratory care students. Here is a partial list:

- The Respiratory Care Therapy Scholarship Fund
- Skyline College Respiratory Care Scholarship Fund
- Lambda Beta Society
- American Association for Respiratory Care
- Breathe California – Bay Area
- California Society for Respiratory Care
- California Thoracic Society
- Kaiser Scholarship Foundation and Loan Program
- Grove Scholars Program

- Rotary Club of Palo Alto, Robert Smithwick Vocational Scholarships

Please contact the program director for more information regarding scholarships.

Academic Adjustments for Students with Disabilities

Skyline College and the Educational Resource Center are committed to providing services that will enhance the educational experience of students with disabilities. For a more detailed description of the program, stop by the EAC, Building 5, Room 5-132, or call (650) 738-4280.

In coordination with the EAC office, reasonable accommodation will be provided for eligible students with disabilities. If you do not have an accommodation letter, please contact the EAC office at (650) 738-4280.

For counseling, and support services to students with documented disabilities in accordance with State and Federal law, the [Educational Access Center](#) (EAC) can help. Please contact 650-738-4280 or stop by the front desk (Room 5-132) to make an appointment with an EAC Counselor or Learning Disabilities Specialist.

EAC email: skyeac@smccd.edu

WebPage: <https://skylinecollege.edu/educationalaccesscenter/>

Skyline College Respiratory Care Practitioner Program Code of Conduct

Professional Conduct Policy for Respiratory Care Students

All students enrolled in the **Associate of Science in Respiratory Care (ASRC)** and/or the **Bachelor of Science in Respiratory Care (BSRC)** programs at Skyline College are expected to uphold the highest standards of professionalism, integrity, and ethical behavior. These expectations are in accordance with the **Skyline College Student Code of Conduct**, the **Due Process Policy**, and the policies of the **San Mateo County Community College District**.

Due to the professional responsibilities and leadership roles respiratory care practitioners fulfill, students must consistently demonstrate behavior aligned with the standards of the respiratory care profession.

ASRC Program – Clinical and In-Person Expectations

Students enrolled in the **ASRC program**, which includes in-person classroom instruction, simulation labs, and clinical rotations at affiliated healthcare facilities, are expected to demonstrate professionalism in all academic and clinical settings.

Professional conduct is expected in the following environments:

- On-campus classrooms and labs
- Simulated clinical environments

- Hospitals and clinical agencies affiliated with the program
- Allied health and instructor offices

ASRC students must:

- Interact with peers, faculty, clinical instructors, and staff with **respect and courtesy**
- Uphold **patient confidentiality, dignity, and rights** during clinical rotations
- Adhere to all **rules and protocols** established by clinical sites
- Dress and behave in a manner that reflects **professionalism and readiness for patient care**
- Represent Skyline College and the respiratory care profession with **integrity** in every clinical encounter

Consequences of Academic Dishonesty:

Academic and student disciplinary sanctions may be applied in cases of academic dishonesty. Depending on the seriousness of the infraction, you may:

- Receive a failing grade on a test, paper, or examination which may result in a lower course grade or failure in the course.
- Have your course grade lowered, or possibly fail the course.

Under the standards of Academic Sanctions and Disciplinary Sanctions, you may be subject to:

- A warning
- Temporary exclusion from an activity or class
- Censure
- Disciplinary probation
- Suspension
- Expulsion

The Dean of Enrollment Services/Disciplinary Officer maintains a record of students who have engaged in academic dishonesty. This information is used to identify and discipline students who have been reported for academic dishonesty more than once.

Student Appeals:

In all instances, a student who has been subject to an academic or disciplinary sanction has the right to appeal the decision of the professor or administrator in accordance with established College due process procedures. Refer to Student Grievance and Appeals Policy in the Student Handbook.

Commitment to Professionalism

Whether in-person through the **ASRC program** or online through the **BSRC program**, students are representatives of **Skyline College** and the **respiratory care profession**. Demonstrating professionalism is not only an academic requirement—it is a foundational expectation for those who seek to enter or advance within the field as **respiratory care practitioners**.

As students progress in their education—whether advancing their degree, obtaining higher credentials, pursuing leadership roles, engaging in research or academia, contributing to legislative advocacy, leading community initiatives, or participating in outreach and public health improvement projects—the **community expects them**

to uphold the highest standards of professionalism. This includes integrity, accountability, cultural humility, and a strong commitment to improving the quality of life for the individuals and populations they serve.

Students are expected to reflect the core values of the respiratory care profession and Skyline College, both during their time in the program and as they continue to grow as practitioners, educators, advocates, and leaders.

Failure to meet these professional standards may result in disciplinary action, in accordance with the policies of Skyline College and the Respiratory Care Program.

Types of Violations May Include But Not Limited to:

1. Field Violations

1. Theft of the College or Hospital/Clinical Agency property
2. Violation of Patient/Client confidentiality (HIPAA)
3. Leaving the clinical agency or simulated lab without reporting off as instructed (i.e. Patient Abandonment)
4. Tape recording, using electronic listening or copying or data collection devices to record medical information about clients/patients or their families, improper use of information including information contained in hand written notes, PDA or other data collection methods obtained for use to prepare or care for assigned patients.
5. Photocopying any document without his/her knowledge or consent;
6. Tape recording an instructor without his/her knowledge or consent;
7. Improper use of tape recordings permitted because of a documented disability requiring the use of tape recorders.
8. Violation of Skyline College Associate and/or Bachelor Degree Respiratory Care Practitioner Program HIPAA Policy.
9. Physical or verbal insults; threats of profanity, ethnic or racial slurs, or unprofessional interactions or comments with other students, faculty, staff, clients/patients agencies, the simulated clinical laboratory, computer laboratory, facility staff, any healthcare providers, administration, and other stakeholders.
10. Violation of any [AARC Code of Ethics](#)

2. Academic Violations

1. Violation noted under the [Academic Integrity and Honesty Bylaws](#). This includes but not limited to: Cheating, plagiarism (including self-plagiarism without proper citation), alteration or misuse of college or hospital/clinical agency documents, records, equipment or computer data.
2. Physical or verbal insults; threats of profanity, ethnic or racial slurs, or unprofessional interactions or comments with other students, faculty, staff, clients/patients agencies, the

simulated clinical laboratory, computer laboratory, classrooms, virtual meetings, online discussions, in any digital platform, or in the program or faculty offices.

3. Violation of district [Student Code of Conduct Bylaws](#)
4. Verbal or physical behavior which obstructs or disrupts teaching, learning, patients/clients care, or the administration of the respiratory care program.
5. Disruption of in-person or online learning to peers and the program.
6. Furnishing false or misleading or altered information or documents to the Skyline College Associate and/or Bachelor Degree Respiratory Care Practitioner Program or instructors.
7. Violation of Colleges [Policies and Procedures from Student Handbook](#).
8. Violation of [Student Privacy Rights](#)

Assignments, Projects, and Participation

- Timely completion of assignments and projects is essential to your success and to the success of your student colleagues in the teaching and learning environment.
- Most assignments are intended to be completed individually. However, some are collaborative in nature and require timely, high-quality contributions to support individual, group, and class learning. For example, discussion board assignments rely on active and punctual participation from all students to maximize collaborative engagement. Some assignments may also be completed in group formats that require teamwork and coordination.
- Instructors will clearly define expectations for each assignment and project, including grading criteria that reflect professional standards, comprehension, and adherence to deadlines.
- Students are encouraged to maintain open and effective communication with instructors, team members, and support personnel whenever questions arise or clarification is needed regarding any expectations.
- Instructors will also provide clear expectations for overall course participation. Please read the syllabus for each course carefully to understand course length, pacing, and expectations.
- For all meetings and conferences, whether in-person or online, arrive on time and be prepared to engage meaningfully.

Sexual Misconduct, Harassment, Assault and Title IX

San Mateo County Community College District is committed to maintaining safe and caring college environments at Cañada College, College of San Mateo and Skyline College. The District has established policies and procedures regarding Sexual Misconduct, Harassment, and Assault.

A District website has also been developed which provides you with important information about sexual

misconduct and sexual assault. <http://smccd.edu/titleix/>

To learn more about these issues and how you can help prevent them, you are encouraged to view the [Not Anymore videos](#), which can be found on WebSMART under the Student Services link.

Email Forwarding

Please note:

Each student attains a **my.smccd.edu** email account upon acceptance into the college. However, if you prefer to use another email account such as hotmail, yahoo, gmail, or another, please take a few minutes to set up forwarding for your my.smccd.edu email to your regular account to avoid missing a communication from me.

How to Forward an email (Follow these steps):

1. Go to Websmart at <https://websmart.smccd.edu/>
 2. In your student account area, click on the link that says "New! Student Email"
 3. Here, you may view your email address and password, and you may reset your password.
 4. IMPORTANT: Open your my.smccd.edu email.
 5. Click "Settings" at the top of the page.
 6. Click the "Forwarding and POP/IMAP" tab.
 7. Under Forwarding, click the "Forward a copy of incoming mail" button.
 8. Enter the email address you want to forward your email to.
 9. Click "Save Changes."
-

The following statements identify the essential physical and cognitive capabilities required for Respiratory Care practice:

A. Physical Requirements

A prospective Respiratory Care student must possess the physical strength, motor coordination, and manual dexterity to:

- Stand and walk for up to 90% of clinical work time
- Bend, kneel, and perform cardiopulmonary resuscitation (CPR) effectively
- Climb stairs when necessary in the clinical setting
- Lift up to 45 pounds and carry up to 25 pounds
- Push and pull heavy objects such as compressed gas cylinders and ventilators
- Use hands and fingers for clinical activities, including chest percussion, auscultation, assembling/disassembling equipment, and adjusting machine controls
- Accurately document patient care activities using legible handwriting or electronic health

records.

B. Communication Requirements

- Students must communicate effectively in English, verbally and in writing, to explain procedures and guide patients through them.
- They must be able to respond to verbal cues from patients, instructors, and clinical staff.

C. Auditory and Visual Requirements

- Students must hear clearly to detect equipment alarms, monitor sounds, and spoken instructions
- They must have sufficient near-vision acuity to read patient charts, medication labels, ventilator settings, monitors, and LED (Light Emitting Diode) displays—common on respiratory care equipment. LED displays are bright, easy-to-read light indicators used on devices such as ventilators and oxygen analyzers, and they are especially important in dimly lit clinical environments

D. Cognitive and Emotional Requirements

By the end of the training program, a Respiratory Care graduate must be able to:

- Maintain composure and perform effectively in high-stress situations involving critical patient care and equipment failure
- Respond rapidly and appropriately to emergency situations
- Offer emotional support and reassurance to patients during procedures
- Collaborate respectfully and efficiently with a multidisciplinary healthcare team, including nurses, physicians, and allied health professionals

They also reflect compliance with the **Americans with Disabilities Act (ADA)**.

Adapted in part from CoARC guidelines and ADA-aligned technical standards. For more information, visit www.coarc.com and Skyline College's Educational Access Center webpage.

Program Structure and Enrollment

Respiratory Care Associate Degree Application Process

Approximately **25 students are admitted** to the program each year. Admission is competitive and based on criteria established by Skyline College and in accordance with California state regulations.

Enrollment in the Respiratory Care program is **full-time only**, and all courses must be taken in the prescribed sequence. Credit may be awarded for previous college-level coursework upon evaluation.

Minimum Eligibility Requirements

To be eligible to apply, applicants must complete the following **college-level prerequisite courses** with a **grade of C or better**:

- **Intermediate Algebra** (or higher-level transfer math)
- **Chemistry with lab** – CHEM 192, CHEM 210, CHEM 410, or equivalent
- **Microbiology** – BIOL 240 or equivalent
- **Human Anatomy with lab** – BIOL 250 or equivalent
- **Human Physiology with lab** – BIOL 260 or equivalent
- **Medical Terminology** – HSCI 484, BUS 485, or equivalent
- **English Composition** – ENGL 100, ENGL 105, or equivalent

Important: All prerequisite coursework must be completed **by the application deadline**. Applications with in-progress or missing prerequisites will not be considered complete.

Application Steps

Step 1: Apply to Skyline College

Submit a general application for admission to Skyline College at skylinecollege.edu.

Step 2: Complete the Respiratory Care Online Application

Submit the **Respiratory Care Associate Degree Online Application**. The application takes approximately 20–30 minutes and must be completed in one sitting.

You will need:

- Details of **educational history and prerequisite grades** (including unofficial transcripts)
- A brief **medical history** regarding chronic conditions or communicable illnesses
- A **500-word personal statement** addressing:

In your own words, describe yourself, your goals, and why you chose respiratory care. Include your strengths and weaknesses.

- Uploads of **digital copies of unofficial transcripts** (PDF or Word)

Step 3: Submit Three Letters of Recommendation

Three letters are required from professional or academic references. Recommenders may include:

- Deans, counselors, or principals
- Teachers or instructors
- Healthcare professionals
- Employers or supervisors
- Leaders of volunteer or community organizations

Letters **cannot be from close friends or relatives.**

Download the **Standard Recommendation Form** to provide guidance to your recommenders.

Completed recommendation forms may be:

- **Uploaded** to the online application, or
- **Emailed** to: ranades@smccd.edu

Your application is not considered complete until you receive **email verification** confirming that all steps are finalized.

Requirements After Acceptance

Upon acceptance into the program, students must:

- Complete a **physical examination**
 - Provide a current **immunization record**
 - Complete a **background check** (linked to Social Security number)
 - Submit to a **drug screening test**
-

Additional Notes


- It is **strongly recommended** that prerequisite coursework be completed **within five (5) years** of application.
- **High school courses** do not meet program prerequisites.
- Students are encouraged to complete most **General Education (GE)** requirements prior to starting the program. Please consult with a Skyline College Counselor for an education plan.


Note: An Associate Degree is required to be eligible for the **California Respiratory Care Practitioner (RCP) licensing exam**, administered by the **California Respiratory Care Board**.

Contact for Program Information

Shruti Ranade

Program Services Coordinator

 ranades@smccd.edu

 (650) 738-4310

Disclaimers:

- *This Program Handbook is intended to provide students with general information about the program, its requirements, policies, and fees. While every effort has been made to ensure the accuracy of the information presented, Skyline College reserves the right to modify, amend, or update any content within this handbook, including but not limited to program requirements, fees, policies, and procedures, without prior notice. Students are encouraged to consult official college communications and websites regularly for the most current information.*



Forms

Required Abilities and Qualifications for Respiratory Care Students

The mission of the Skyline College Respiratory Care Program is to train competent, entry-level Respiratory Care Practitioners (RCPs) capable of providing care for a general patient population in today's dynamic healthcare settings. To be effective, RCPs must demonstrate flexibility, the ability to respond to rapidly changing demands, and maintain composure under stressful clinical situations.

The purpose of this section is to outline the physical, cognitive, and behavioral attributes required for successful completion of the program. Students who are unable to demonstrate these abilities are responsible for requesting reasonable accommodations. The program will collaborate with the Disability Resource Center to make appropriate modifications for students with documented disabilities.

A. Physical and Motor Abilities

The prospective Respiratory Care student must possess the strength, coordination, and manual dexterity to:

- Stand and walk for up to 90% of their clinical/work time.
- Bend and kneel to perform CPR.
- Climb stairs as needed in clinical settings.
- Lift up to 45 pounds and carry up to 25 pounds.
- Push and pull heavy wheeled equipment (e.g., ventilators, gas cylinders).
- Use hands and fingers continuously for tasks such as auscultation, percussion, equipment assembly/disassembly, and machine operation.
- Write legibly to document patient care in charts, reports, and other records.

B. Communication Abilities

- Communicate clearly and effectively in spoken English to instruct patients, explain procedures, and collaborate with healthcare staff.

C. Cognitive and Sensory Abilities

- Comprehend and respond promptly to verbal instructions, patient cues, and team communication.
- Assess and respond appropriately to visual and auditory alarms on medical equipment.
- Accurately auscultate breath sounds and differentiate critical changes.
- Maintain attention and focus under stress and during emergency care.

D. Visual Acuity

- Demonstrate sufficient near vision to:
 - Read medication labels, patient charts, and monitor displays (including LED lights).
 - Observe physical signs in patients.
 - Function effectively in both well-lit and dim environments.

E. Behavioral and Emotional Stability

Upon completion of the program, graduates must be capable of:

- Remaining composed and responsive during emergencies.
- Providing emotional and physical support to patients during procedures.
- Collaborating effectively with healthcare teams.

Health Screening and Immunization Requirements

All students enrolled in the Allied Health Programs must submit documentation of physical health clearance and immunization status as required by clinical affiliates. It is the student's responsibility to ensure all records are complete, current, and submitted on time.

1. Health Clearance

A licensed healthcare provider (MD, DO, PA, NP, or RN) must complete the official Allied Health Program Report of Health Screening. The form includes but is not limited to:

- Physical exam results (height, weight, vitals, lungs, heart, skin, neurological, and musculoskeletal status).
- Confirmation the student is free of communicable disease.
- Certification that the student is physically capable of performing the activities described in the Required Abilities section above.

2. Immunization & Titer Requirements

Required immunizations and titers include but not limited to:

Immunization	Requirements
Tuberculosis (TB)	QuantiFERON within 2 months of program start. If positive, a chest X-ray is required.
Rubella (German Measles)	Positive titer OR MMR vaccination if titer is negative.
Rubeola (Measles)	Positive titer OR MMR vaccination if titer is negative.
Mumps	Positive titer OR MMR vaccination if titer is negative.
Varicella (Chickenpox)	Positive titer OR 2-dose vaccine series, followed by titer.
Tdap	Booster required within the last 10 years.
Hepatitis B	3-dose series with follow-up positive titer. If the titer is negative, re-vaccination may be required.
Influenza (Seasonal)	Required annually.
COVID-19	Initial series and booster(s), if applicable. Documentation must specify type and date(s) of administration.

Important: Hard copies of all immunization records and lab test results must be submitted. All immunizations must be current within six (6) months prior to entering the program.

Consent to Release Medical Information

I give permission to release my background check, drug test results, medical examination records, and immunization records to the clinical facilities affiliated with Skyline College's Respiratory Care Program.

Student Signature: _____

Date: _____

Respiratory Care Program Handbook Affidavit

This is to acknowledge that I have received and read the ASRC Skyline College and Respiratory Care Program Handbook. I accept and will adhere to the obligations contained within and understand that my dismissal may result if I do not comply.

DATE

NAME (Print)

Signatures

Appendices

~Please refer to the Appendices for additional resources ~

Degree Advancement Additional Information

1. The American Association for Respiratory Care (AARC) has collaborated with key stakeholders to initiate an effort to mandate that all respiratory therapists entering practice in **2030** and beyond possess at least a bachelor's degree and hold the National Board for Respiratory Care's (NBRC) Registered Respiratory Therapist (RRT) credential.
 - a. <https://www.aarc.org/wp-content/uploads/2019/09/issue-paper-entry-to-respiratory-therapy-practice-2030.pdf>
2. Per The Respiratory Care Board (RCB) of California (October 2023):
 - a. The RCB believes the opportunity for additional access to baccalaureate degree programs for California RCPs will help fill a void in training California's advanced respiratory care workforce and contribute to improved quality of healthcare for the public.
 - b. Expansion of degrees in respiratory care beyond the associate degree level in California is supported by the RCB.
3. The Bachelor of Science in Respiratory Care program here at Skyline allows graduates of AS degree Respiratory Care programs and licensed Respiratory Care Practitioners (RCP) a pathway to complete their four-year degree without having to transfer to a four-year college or university.
 - a. Our bachelor degree curriculum provides an advanced scope of practice with emphasis on advanced cardiopulmonary pathophysiology, advanced respiratory case management, advanced respiratory neonatal/pediatrics, health education in respiratory care, research methodology, quantitative principles, respiratory care sleep medicine, and respiratory care leadership and management.
 - b. There are approximately 35 programs in California with only a handful offering an educational pathway to [baccalaureate](#) degrees. Skyline College being one of them ([Skyline CoARC Accreditation](#)).
 - c. **We are Affordable, Flexible, and High-Quality.**
 - i. The Skyline College BSRC Program has been established since baccalaureate Programs in Community Colleges have been approved.

Bachelor of Science in Respiratory Care (BSRC) Program Overview

Program Structure and Enrollment

The BSRC Program at Skyline College is a **fully online degree program (100% online)** designed for licensed respiratory care practitioners seeking academic and professional advancement. Students benefit from a flexible, affordable, and accredited pathway to earning their bachelor's degree while balancing work, family, and life responsibilities.

Affordability

- **Program Cost:**
 - \$46 per unit for lower-division coursework
 - \$130 per unit for upper-division coursework
 - Additional costs for books and supplies
 - Most course materials in the BSRC Program—such as articles, textbooks, and other resources—are provided by the instructor as part of our transition to Zero Textbook Cost (ZTC) and use of Open Educational Resources (OER). These materials will be accessible through each course’s Canvas shell. Please refer to your instructor’s syllabus for specific details regarding required materials.
 - **Tuition is free for San Mateo County residents;** (eligibility and fees are subject to change each academic year based on district policies).
 - Financial aid is also available—students are encouraged to contact Skyline College Financial Aid Services for more information at <https://skylinecollege.edu/financialaid/>.
-

BSRC Program Format

- **Total of 13 courses** in the BSRC program
- **Course Length:**
 - Most courses are 9 weeks in duration
 - The **Capstone Project (RPTH B90)** is a full-semester course
- **Flexible Scheduling Options:**
 - Students may choose between **accelerated** and **relaxed** tracks
 - Options include taking one course at a time (slower pace) or two courses simultaneously (faster pace)
 - Program completion ranges from **2 to 3 years**, depending on chosen pace

Note: Students are required to notify the BSRC Program Lead **promptly** if they plan to:

- Change tracks
- Drop a course
- Pause program participation
This ensures accurate advising and administrative updates.
- **Academic Breaks:**
 - **Winter and Summer breaks are observed**
- **Track Options:** Skyline BSRC currently offers **four track options** to accommodate student schedules (details available in the Program Tracks section)

Application Periods & Orientation

- **Fall Entry:**
 - Application Period: *January 15 – June 1*
 - Bachelors Asynchronous Online Orientation: *First week of July through the end of July*
- **Spring Entry:**
 - Application Period: *July 1 – November 1*
 - Online Orientation: *First week of December through the end of December*

Once Orientation is completed, students will receive enrollment instructions and next steps from the Program Services Coordinator to ensure a smooth transition into the program.

BSRC Accreditation

Program Accreditation

The **Bachelor of Science in Respiratory Care (BSRC)** program at Skyline College (Program Number: **510016**) currently holds *Provisional Accreditation* for a Degree Advancement (DA) Additional Track from the Commission on Accreditation for Respiratory Care (CoARC).

This status reflects that the program has submitted a satisfactory Provisional Accreditation Self-Study Report (PSSR), fulfilled all required documentation, and successfully completed the initial on-site visit. CoARC utilizes an outcomes-based accreditation model, focusing on whether programs meet established standards and effectively achieve their educational goals.

Upcoming Site Visit

As part of the ongoing accreditation process, the BSRC program at Skyline College is scheduled for its next CoARC site visit in **June 2025**. This visit will evaluate the program's continued compliance with accreditation standards and support its transition toward continuing accreditation status.

Institutional Accreditation

In addition to CoARC accreditation, Skyline College is accredited by:

- **Accrediting Commission for Community and Junior Colleges (ACCJC)**, part of the **Western Association of Schools and Colleges (WASC)**
- Recognized by the **Council for Higher Education Accreditation (CHEA)**

State Accreditation

The **California Community Colleges Chancellor's Office (CCCCO)** and the **Academic Affairs Division** have also formally approved Skyline College to offer the Bachelor's Degree in Respiratory Therapy.

Academic Counseling and Degree Planning

Each student enrolled in the BSRC Program is highly encouraged to meet regularly with an academic counselor to develop and maintain their degree map accordingly. These meetings are essential for ensuring that students stay on track toward successful program completion, make informed decisions about course sequencing, and align their educational goals with graduation and career timelines.

Regular check-ins with a counselor and the program director can also help identify opportunities for support, clarify program completion requirements, and provide guidance on academic progress throughout the program.

Minimum Eligibility Requirements to Enter the BSRC Program

Who is eligible to apply?

- Students currently enrolled in the AS Respiratory Care Program at Skyline College who intend to continue into the BS Respiratory Care Program
OR
- Recent graduates from other programs who have completed an accredited Respiratory Care program equivalent to an AS in Respiratory Care and are eligible for California licensure
OR
- Licensed Respiratory Care Practitioners who have completed an accredited Respiratory Care program equivalent to an AS in Respiratory Care and are eligible for California licensure
AND
- Completion of a minimum of 30 units from the CSU General Education (GE) pattern, including the "Golden Four":
 - A1 – Oral Communication
 - A2 – Written Communication
 - A3 – Critical Thinking

- B4 – Mathematics/Quantitative Reasoning
OR completion of the Intersegmental General Education Transfer Curriculum (IGETC) for CSU or UC.

Minimum Requirements for the BSRC Program Completion

(120 semester units)

Associates Degree Level

Lower Division Coursework

- **Completion of lower division Respiratory Care major coursework (or equivalent) as part of an accredited AS Degree.**
 - *Note: Coursework completed at another institution will be evaluated for equivalency.*

Lower Division General Education Requirements	
<u>Students with Catalog Rights Prior to Fall 2025</u>	<u>Students with Catalog Rights from Fall 2025 to Present</u>
California State University General Education (CSU-GE) Requirement Mapping	California General Education Transfer Curriculum (Cal-GETC) Mapping
<ul style="list-style-type: none"> ● Area A – English Language Communication and Critical Thinking ● Area B – Scientific Inquiry and Quantitative Reasoning ● Area C – Arts and Humanities ● Area D – Social Sciences ● Area E – Lifelong Learning and Self-Development ● Area F – Ethnic Studies 	<ul style="list-style-type: none"> ● AREA 1: English Communication ● AREA 2: Mathematics Concepts and Quantitative Reasoning ● AREA 3: Arts and Humanities ● AREA 4: Social and Behavioral Sciences ● AREA 5: Physical and Biological Sciences ● AREA 6: Ethnic Studies

Bachelor's Degree Level

Upper Division Major Coursework (40 units)

BS Program Upper Division Respiratory Care Courses	BSRC Program Upper Division General Education Courses
<ul style="list-style-type: none">● RPTH B10 – Advanced Cardiopulmonary Respiratory Care (3 units)● RPTH B15 – Sleep Medicine and Respiratory Care (3 units)● RPTH B20 – Advanced Respiratory Case Management (3 units)● RPTH B30 – Principles of Health Education (3 units)● RPTH B40 – Health Care Research Design and Methodology (3 units)● RPTH B50 – Respiratory Care Leadership and Management I (3 units)● RPTH B52 – Respiratory Care Leadership and Management II (3 units)● RPTH B60 – Advanced Neonatal/Pediatric Respiratory Care (3 units)● RPTH B90 – Respiratory Care Capstone Project (4 units)	<ul style="list-style-type: none">● COMM B10 – Health Communication (3 units)● SOSC B10 – Public Health Policy (3 units)● COUN B10 – Multicultural Human Relations (3 units)● SOCI B10 – Intersectionality and Citizenship (3 units)

According to the California Community Colleges Chancellor's Office General Baccalaureate Degree Standards (p.74)

All baccalaureate degrees offered by a California community college must meet the minimum requirements outlined in this section. These requirements are designed to ensure that the baccalaureate degrees are equivalent to or exceed the standards of those offered by other regionally accredited community colleges or universities throughout the United States.

Each degree program must include the following:

1. A combination of lower-division and upper-division coursework totaling a minimum of **120 semester units** or 180 quarter units that are applicable to a baccalaureate degree, as defined within these guidelines. This includes a minimum of 60 semester units or 90 quarter units at the associate level.
 2. At least **36 semester units** or 54 quarter units of **lower-division general education**.
 3. Completion of a minimum of **40 semester units** or 60 quarter units of **upper-division coursework**.
 - a. **Within** that 40 upper-division semester units, **at least 9 semester units** or 13.5 quarter units of upper-division general education coursework.
- *General education requirements must be integrated and distributed across both lower- and upper-division courses.*

Resources:

Skyline General Education Webpage:

- <https://skylinecollege.edu/transfercenter/generaleducation.php>

California Community Colleges Chancellor's Office | Program and Course Handbook

- <https://www.cccco.edu/-/media/CCCCO-Website/docs/curriculum/program-course-approval-handbook-8th-edition.pdf>

Summary BSRC Program Completion Minimum Requirements:

- 36 semester units of lower-division general education (AS Degree Level)
- AS Degree Level Respiratory Care Major Coursework Completion from a CoARC Accredited Institution
- 40 semester units of upper-division coursework (BS Degree Level)-- 9 units must be Upper Division General Education Courses
 - **Total: 120 semester units**

Important: This course list should be used as a **general guide only**. Students should consult with the **Skyline College Counseling Department** to confirm specific graduation requirements based on individual catalog rights.

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Program Tracks

Fall Entry

Fall Semester Entry - TRACK 1 (2.0 Years)				
Semester	Term	Months	Course Information	
Fall Year 1	1st Half	August to October	RPTH B10	Advanced Cardiopulmonary
			SOCI B10	Intersectionality and Citizenship
	2nd Half	October to December	RPTH B30	Principles of Health Education
			COUN B10	Multicultural Human Relations
Spring Year 1	1st Half	January to March	RPTH B50	Respiratory Care Leadership and Management I
			RPTH B15	Sleep Medicine and Respiratory Care
	2nd Half	March to May	RPTH B52	Respiratory Care Leadership and Management II
			RPTH B20	Advanced Respiratory Case Management
Fall Year 2	1st Half	August to October	RPTH B40	Health Care Research Design and Methodology
			RPTH B60	Advanced Neonatal and Pediatric Respiratory Care
	2nd Half	October to December	COMM B10	Health Communication
			SOSC B10	Public Health Policy
Spring Year 2	Full Semester	January to May	RPTH B90	Capstone Project

Fall Semester Entry - TRACK 2 (3.0 Years)				
Semester	Term	Months	Course Information	
Fall Year 1	1st Half	August to October	RPTH B10	Advanced Cardiopulmonary
	2nd Half	October to December	RPTH B30	Principles of Health Education
Spring Year 1	1st Half	January to March	RPTH B50	Respiratory Care Leadership and Management I
	2nd Half	March to May	RPTH B52	Respiratory Care Leadership and Management II
Fall Year 2	1st Half	August to October	SOCI B10	Intersectionality and Citizenship
	2nd Half	October to December	COUN B10	Multicultural Human Relations
Spring Year 2	1st Half	January to March	RPTH B15	Sleep Medicine and Respiratory Care
	2nd Half	March to May	RPTH B20	Advanced Respiratory Case Management
Fall Year 3	1st Half	August to October	RPTH B40	Health Care Research Design and Methodology
			RPTH B60	Advanced Neonatal and Pediatric Respiratory Care
	2nd Half	October to December	COMM B10	Health Communication
			SOSC B10	Public Health Policy
Spring Year 3	Full Semester	January to May	RPTH B90	Capstone Project

Spring Entry

Spring Semester Entry - TRACK 1 (3.0 Years)				
Semester	Term	Months	Course Information	
Spring Year 1	1st Half	January to March	RPTH B50	Respiratory Care Leadership and Management I
	2nd Half	March to May	RPTH B52	Respiratory Care Leadership and Management II
Fall Year 1	1st Half	August to October	RPTH B10	Advanced Cardiopulmonary
			RPTH B40	Health Care Research Design and Methodology
	2nd Half	October to December	COMM B10	Health Communication
			RPTH B30	Principles of Health Education
Spring Year 2	1st Half	January to March	RPTH B15	Sleep Medicine and Respiratory Care
	2nd Half	March to May	RPTH B20	Advanced Respiratory Case Management
Fall Year 2	1st Half	August to October	RPTH B60	Advanced Neonatal and Pediatric Respiratory Care
	2nd Half	October to December	SOSC B10	Public Health Policy
Spring Year 3	Full Semester	January to May	RPTH B90	Capstone Project
Fall Year 3	1st Half	August to October	SOCI B10	Intersectionality and Citizenship
	2nd Half	October to December	COUN B10	Multicultural Human Relations

Spring Semester Entry -TRACK 2 (2.5 Years)				
Semester	Term	Months	Course Information	
Spring Year 1	1st Half	January to March	RPTH B50	Respiratory Care Leadership and Management I
	2nd Half	March to May	RPTH B52	Respiratory Care Leadership and Management II
Fall Year 1	1st Half	August to October	RPTH B40	Health Care Research Design and Methodology
			RPTH B60	Advanced Neonatal and Pediatric Respiratory Care
	2nd Half	October to December	COMM B10	Health Communication
			SOSC B10	Public Health Policy
Spring Year 2	1st Half	January to March	RPTH B15	Sleep Medicine and Respiratory Care
	2nd Half	March to May	RPTH B20	Advanced Respiratory Case Management
Fall Year 2	1st Half	August to October	RPTH B10	Advanced Cardiopulmonary
			SOCI B10	Intersectionality and Citizenship
	2nd Half	October to December	RPTH B30	Principles of Health Education
			COUN B10	Multicultural Human Relations
Spring Year 2.5	Full Semester	January to May	RPTH B90	Capstone Project

APPENDIX B

~Individual ASRC Courses; COURSE OUTLINES OF RECORD (COR)~

Skyline College
Official Course Outline

1. **COURSE ID:** RPTH 410 **TITLE:** Introduction to Patient Care & Respiratory Assessment Techniques
Units: 3.0 units **Hours/Semester:** 32.0-36.0 Lecture hours; 48.0-54.0 Lab hours; 64.0-72.0 Homework hours;
144.0-162.0 Total Student Learning hours
Method of Grading: Letter Grade Only
Prerequisite: Admission to the Respiratory Care Program.
2. **COURSE DESIGNATION:**
Degree Credit
Transfer credit: CSU
3. **COURSE DESCRIPTIONS:**
Catalog Description:
The study and practice of basic patient care. Also included will be a review of basic science relevant to respiratory therapy and its application to respiratory system assessment. The class will include some hospital practice.
4. **STUDENT LEARNING OUTCOME(S) (SLO'S):**
Upon successful completion of this course, a student will meet the following outcomes:
 1. Describe and apply physical, chemical, and algebraic concepts to various components of respiratory care.
 2. Perform vital sign procedures to gather patient data and formulate rational assessments.
 3. Perform chest physical examination to gather patient data and formulate rational assessments.
5. **SPECIFIC INSTRUCTIONAL OBJECTIVES:**
Upon successful completion of this course, a student will be able to:
 1. Apply understanding of anatomy, human physiology, and microbiology to respiratory care, including cardiopulmonary assessment
 2. Apply basic principles of physics, gas laws, chemistry, fluid dynamics, and thermal dynamics concerning respiratory care
 3. Understand and apply concepts relating to infection control in the health care setting
 4. Identify and competently apply methods necessary in obtaining a comprehensive respiratory physical examination
 5. Obtain fine skills in the auscultation of breath sounds distinguishing between normal and abnormal.
 6. Develop critical thinking skills to assess and evaluate patient's respiratory status
 7. Utilize appropriate written and verbal communication skills consistent with the profession's expectations
 8. Discuss and apply proper body mechanics to safely lift, pull, push and/or transfer patients in order to prevent body injuries or mechanical falls
6. **COURSE CONTENT:**
Lecture Content:
 1. Fundamental Concepts of Chemistry and Physics Applied to Respiratory Care
 - A. States of Matter
 - B. Kinetic Theory
 - C. Heat Transfer
 - D. Gas Density
 - E. Gas Laws
 - F. Partial Pressures of Various Gases
 - G. Humidity
 - H. Solutions and Electrolytes
 2. Patient Care Arts
 - A. Respiratory Care Using Evidence-Based Practice
 - B. Patient-Provider effective communication strategies
 - a. Proper Patient-handoff procedures and strategies
 - b. Utilizing SBAR (Situation, Background, Assessment and Recommendation)
 - c. Patient Interview and Gathering of History (SAMPLE)
 - d. Methods ensuring patients, and families understanding of the patient's care plan
 - C. Vital signs assessment, normal values, understanding, and interpretation

- a. Temperature
- b. Pulse
- c. Respiratory Rate and Pattern
- d. Blood Pressure
- e. Oxygen Saturation
- f. General Appearance
- g. Breath Sounds
- h. Mental State
- D. Proper Use of Body Mechanics
 - a. Patient Movement
 - b. Equipment Use
 - c. Patient and Provider Safety
- E. Infection Control
 - a. Body Substance Isolation
 - b. Blood born Pathogens
 - c. OSHA and CDC Guidelines
 - d. Patient and Health Care Provider Protective Equipment
 - i. Barrier Equipment
 - ii. Isolation
- F. Information Documentation
 - a. History
 - b. SBAR Communication
 - c. Bedside Flowsheet
 - d. Diagnostic Data
- 3. Respiratory Assessment
 - A. Patient Interview and History
 - B. Inspection
 - C. Palpation
 - D. Percussion
 - E. Auscultation
 - a. Breath Sounds
 - i. Normal vs. Abnormal

Lab Content:

- Lab Contents
- 1. Vital Signs Assessment and Interpretation
 - A. Temperature
 - B. Pulse
 - C. Respiratory Rate
 - D. Blood Pressure
 - E. Oxygen Saturation
- 2. Proper Use of Body Mechanics
 - A. Patient Movement
 - B. Equipment Use
- 3. Infection Control
 - A. Body Substance Isolation
 - B. Blood born Pathogens
 - C. OSHA and CDC Guidelines
 - D. Patient and Health Care Provider Protective Equipment
 - a. Barrier Equipment
 - b. Isolation
- 4. Information Documentation
 - A. Patient Chart
 - B. Bedside Flowsheet
 - C. Diagnostic Data

7. REPRESENTATIVE METHODS OF INSTRUCTION:

Typical methods of instruction may include:

- A. Lecture
- B. Lab
- C. Discussion

D. Observation and Demonstration

E. Other (Specify): Computer assisted learning exercises Video presentations Laboratory exercises and simulations Class presentations

8. REPRESENTATIVE ASSIGNMENTS

Representative assignments in this course may include, but are not limited to the following:

Writing Assignments:

Weekly 200-word discussion posts and peer-replies on different aspects of the fundamentals of respiratory therapy with questions and answer portions on the following topics:

- Evidence-based research on patient assessment, diseases, and their severity and how it impacts patients and healthcare providers
- Parts of medical records and writing medical notes using the acronym SOAP (Subjective, Objective, Assessment and Plan)
- Health communication and proper patient hand-off using the acronym SBAR (Situation, Background, Assessment and Recommendations)

Lab worksheets to use during hands-on practice of respiratory assessment, and patient care.

- The students are required to work in groups while expanding and practicing their health communication skills and dexterity in handling RT-related equipment while performing their duties assigned weekly.

Team leader worksheet

- Each week, a team leader (TL) is assigned per group. This person requires to turn in the job roles of their peers that week, including the completion of the given lab that was performed, and collaborate with their team regarding the assigned topic each week.

Reading Assignments:

Selected readings from the Open Educational Resources and Proposed textbooks from the eBook in the library are given weekly. Each document, file, article, and journal varies in length however the student will not be required to read/research more than 25 pages per week.

- Each student is responsible for assuring that they have covered these pages and watched any significant videos assigned by the instructor.

Other Outside Assignments:

Lab exercises

- Working with a lab partner to perform a full chest physical assessment using a stethoscope, palpation, and percussion.
- Utilizing the Gaumard HAL High-Fidelity Adult Manikin to differentiate different lung sounds from normal to abnormal, including rhonchi, crackles, wheezes, stridor, pneumothorax, etc.
- Working in groups to check for oxygenation, ventilation, circulation, and perfusion by utilizing pieces of equipment such as pulse oximeters, blood pressure cuffs with gauges, stethoscopes, and an electrocardiogram (ECG) machine, including a 12-lead.
- Performing basic pulmonary function testing utilizing a peak flow meter and a Wright spirometer to measure peak flow rates and vital capacities for monitoring obstructive pulmonary disorders such as asthma and its severity. The ultimate goal is to recognize what is determined as an emergency and the actions needed to reverse the exacerbation.
- Learn proper body mechanics to transfer patients and pull, push, lift, etc., to prevent self-injuries or patient injuries such as mechanical falls.
- Conducting a health fair to practice and get comfortable interacting, communicating, and assessing with patients while taking notes of their results and applying them back to class lectures and lab.
- Visit a healthcare center or institution to get acquainted with the clinical setting and prepare for the next semester rotation.

9. REPRESENTATIVE METHODS OF EVALUATION

Representative methods of evaluation may include:

A. Class Participation

B. Class Performance

C. Exams/Tests

D. Homework

E. Lab Activities

F. Papers

G. Quizzes

H. Written examination

I. Effective assessment, evaluation, treatment plan formulation of patient case scenarios. Competent performance and application of respiratory procedures. Exams following completion of each module

Comprehensive final exam.

10. **REPRESENTATIVE TEXT(S):**

Possible textbooks include:

A. Kacmarek, Robert. *Egan's Fundamentals of Respiratory Care***; 11th ed. Elsevier, 2017

Other:

A. ** This title is available through Skyline College Library's e-Book collection, and students can access it for free by using their SMCCCD credentials.

Book's Permalink:

https://cacclsmccd.primo.exlibrisgroup.com/permalink/01CACCL_SMCCD/s0te9o/alma99100064341150530

** This is 2017 edition

B. Practical Math for Respiratory Care: A Text and Workbook, Sibberson

Origination Date: February 2023

Curriculum Committee Approval Date: March 2023

Effective Term: Fall 2023

Course Originator: Heather Esparza

Skyline College
Official Course Outline

1. **COURSE ID:** RPTH 415 **TITLE:** Respiratory Pharmacology
Units: 2.0 units **Hours/Semester:** 32.0-36.0 Lecture hours; 64.0-72.0 Homework hours; 96.0-108.0 Total Student Learning hours
Method of Grading: Letter Grade Only
Prerequisite: Admission to the Respiratory Care Program.

2. **COURSE DESIGNATION:**
Degree Credit
Transfer credit: CSU

3. **COURSE DESCRIPTIONS:**
Catalog Description:
Study of general pharmacology principles, basic terminology, drug action, dosage, adverse reactions, and drug toxicity. Emphasis will include physiologic actions/interactions and cardio-respiratory medication categorization.

4. **STUDENT LEARNING OUTCOME(S) (SLO'S):**
Upon successful completion of this course, a student will meet the following outcomes:
 1. Recognize and describe the physiologic actions of medications used in cardiopulmonary disease.
 2. Prepare and modify respiratory medication delivery and dosages given a particular cardiopulmonary disease or disorder.

5. **SPECIFIC INSTRUCTIONAL OBJECTIVES:**
Upon successful completion of this course, a student will be able to:
 1. Define the basics of drug action.
 2. Calculate and prepare appropriate drug dosages.
 3. Distinguish, differentiate, categorize, and compare drugs affecting the peripheral nervous system.
 4. Distinguish, differentiate, categorize, and compare drugs affecting the respiratory system.

6. **COURSE CONTENT:**
Lecture Content:
 1. Introduction to Pharmacology
 2. General Principles of Pharmacology
 3. Central and Peripheral Nervous System
 4. Drug Measurement and Dosage
 5. Administration of Aerosolized Agents
 - A. Small Volume Nebulizer
 - B. Continuous Nebulizer
 - C. Small Particle Aerosol Generator (SPAG)
 - D. Metered Dose Inhaler
 - E. Dry Powder Inhaler
 - F. Infection Control
 - G. Patient Application
 6. Sympathomimetic (Adrenergic) Bronchodilators
 - A. Receptor sites
 - a. Alpha
 - b. Beta 1
 - c. Beta 2
 - i. Albuterol
 - ii. Levalbuterol
 - iii. Bitolterol
 - iv. Pirbuterol
 7. Parasympatholytic (Anticholinergic)
 - A. Atropine
 8. Xanthine Bronchodilators
 - A. Aminophylline

- B. Theophylline
- 9. Mucus-controlling, Surface-Active, and Cold and Cough Agents
 - A. Acetylcysteine
 - B. Dornase alfa
 - C. Isotonic Saline
 - D. Hypertonic Saline
- 10. Antiasthmatic/Mediator Antagonist Medications
 - A. Montelukast sodium
 - B. Zafirlukast
 - C. Ziluton
- 11. Corticosteroids
 - A. Betamthasone
 - B. Dexamethasone
 - C. Beclomethasone
 - D. Flunisolide
 - E. Triamcinolone
 - F. Prednisone
 - G. Hydrocortisone
- 12. Anti-Infective/Antimicrobial Agents
 - A. Amoxicilline
 - B. Penicillin
 - C. Azithermycin
 - D. Gentamycin
 - E. Tobramycin
 - F. Ribavirin
 - G. Pentamidine
- 13. Nuromuscular Blocking Agents
 - A. Succinylcholine
 - B. Pancurnium
 - C. Tubocurarine chloride
 - D. Vecuronium
- 14. Sedatives & Analgesics
 - A. Diazepam
 - B. Lorazepam
 - C. Fentanyl
 - D. Propofol
 - E. Morphine

7. REPRESENTATIVE METHODS OF INSTRUCTION:

Typical methods of instruction may include:

- A. Lecture
- B. Activity
- C. Discussion
- D. Guest Speakers
- E. Other (Specify): Computer assisted learning exercises; Case scenarios.

8. REPRESENTATIVE ASSIGNMENTS

Representative assignments in this course may include, but are not limited to the following:

Writing Assignments:

Written assignments pertaining to various application of respiratory pharmacology concepts, 5-6 pages/week will include:

- A. Writing Respiratory Care drugs calculation problems to better understand therapeutic dosage for a given patient as part of disease management.
- B. Computer assisted learning exercises - Clinical simulations for therapeutic application and writing patient case report

Reading Assignments:

Weekly reading assignments may include selected readings from text and current Respiratory Care journal articles. Student will be assign to read at least 15 pages per week.

9. REPRESENTATIVE METHODS OF EVALUATION

Representative methods of evaluation may include:

- A. Exams/Tests
- B. Homework
- C. Quizzes
- D. Written examination
- E. Periodic quizzes. Homework assignments. Exams following completion of each module. Comprehensive final exam.

10. **REPRESENTATIVE TEXT(S):**

Possible textbooks include:

- A. Rau Jr., J. L ed. *Respiratory Care Pharmacology*, 10th ed. St. Louis, MO: Mosby, Inc., 2019

Origination Date: February 2023

Curriculum Committee Approval Date: March 2023

Effective Term: Fall 2023

Course Originator: Heather Esparza

Skyline College
Official Course Outline

1. **COURSE ID:** RPTH 420 **TITLE:** Application of Cardiopulmonary Anatomy & Physiology
Units: 3.0 units **Hours/Semester:** 48.0-54.0 Lecture hours; 96.0-108.0 Homework hours; 144.0-162.0 Total Student Learning hours
Method of Grading: Letter Grade Only
Prerequisite: Admission to the Respiratory Care Program.

2. **COURSE DESIGNATION:**
Degree Credit
Transfer credit: CSU

3. **COURSE DESCRIPTIONS:**
Catalog Description:
Study of the healthy cardiopulmonary system with application to the types of alterations that occur with disease.

4. **STUDENT LEARNING OUTCOME(S) (SLO'S):**
Upon successful completion of this course, a student will meet the following outcomes:
 1. Describe and evaluate normal anatomical and physiological function as it applies to the cardiorespiratory system.
 2. Analyze and differentiate anatomical function, physiologic data and findings to distinguish between normal and abnormal cardiorespiratory function.

5. **SPECIFIC INSTRUCTIONAL OBJECTIVES:**
Upon successful completion of this course, a student will be able to:
 1. Identify anatomical components and understand primary functions of the respiratory system
 2. Understand and apply key factors which contribute to 'work of breathing' in normal and altered lung function
 3. Identify pulmonary volumes and capacities, and calculate alveolar ventilation, dead space, and VD/VT ratios
 4. Compare and contrast pulmonary systemic circulation and factors which alter normal function
 5. Understand diffusion and exchange of pulmonary gases
 6. Identify how the cardiopulmonary system functions to maintain acid base balance
 7. Identify and apply receptors in the cardiopulmonary system responsible for modification of ventilatory drive and conditions that affect ventilatory drive
 8. Gather anatomic and physiologic data to assess and differentiate between normal and altered cardiopulmonary function

6. **COURSE CONTENT:**
Lecture Content:
 1. Respiratory system
 - A. Primary function of the respiratory system
 - B. Define external and internal respiration
 - C. General components of the respiratory system as viewed mechanically
 - a. Controller
 - b. Pump
 - c. Mixer
 - D. Physiological components of the respiratory system
 - a. Ventilation
 - b. Diffusion
 - c. Perfusion
 - E. Primary function of their components
 - F. Example diseases affecting each of the above components.
 2. Respiratory system anatomy
 - A. Terms, symbols and abbreviations
 - B. Components in Terms of Development, Anatomical Structures and Function(s)
 - a. Chest wall

- b. Respiratory muscles
 - c. Upper airways
 - d. Lower airways
 - e. Terminal respiratory unit
 - f. Alveolar/capillary unit
 - g. Pulmonary circulation and lymphatics
 - h. Mucociliary escalator
 - i. Respiratory neuromuscular system
 - C. Clinical situations related to pulmonary anatomy
 - a. Upper airway alterations
 - b. Lower airway alterations
 - c. Alveolar/capillary membrane disruption
- 3. Pulmonary ventilation
 - A. Terms, symbols and abbreviations
 - B. Lung volumes and capacities via spiogram
 - C. Detailed interrelationships
 - a. Tidal volume
 - b. Ventilatory frequency
 - c. Minute ventilation
 - d. Dead space volume
 - e. Dead space/tidal volume ratio
 - f. Minute alveolar ventilation
 - D. Factors affecting function
 - a. Resting lung volume
 - b. Airway resistance
 - c. Regional ventilation of the lung
 - d. Compliance of the lung, chest wall and respiratory system.
 - e. Ventilation/perfusion matching
- 4. Cardiovascular function and relationship to respiratory system
 - A. Chambers and pressures of the heart
 - B. Pulmonary circulation vessels
 - a. Anatomy
 - b. Specific function
 - c. Normal pressure
 - C. Pulmonary and systemic circulations.
 - D. Fluid movement of intravascular and interstitial spaces.
 - E. Pulmonary and systemic vascular resistance.
 - F. Regional perfusion and ventilation/perfusion (V/Q) ratio
- 5. Diffusion and exchange of pulmonary gases
 - A. The alveolar/capillary membrane
 - B. Factors which affect diffusion
 - a. Differences in diffusion of O₂ and CO₂
 - b. Movement of O₂ and CO₂ between the atmosphere and erythrocyte.
 - c. Normal Values For: PAO₂, PACO₂, PaCO₂, PaO₂, PvO₂, PvCO₂
 - d. Alterations in V/Q affecting gas exchange.
 - C. Alveolar/arterial calculations
 - D.
 - a. PAO₂
 - b. P(A-a)O₂
 - E. Oxyhemoglobin equilibrium
 - a. Partial pressure versus hemoglobin saturation
 - b. Factors affecting shifting of the oxyhemoglobin dissociation curve
 - c. Factors affecting cellular oxygen availability
 - F. Methods of measuring oxygenation
 - a. PaO₂
 - b. SaO₂ (oximetry and co-oximetry)
 - c. TcPO₂ (surface PO₂)
 - G. Causes of hypoxemia
 - a. Ambient changes
 - b. Hypoventilation
 - c. Ventilation/perfusion mismatch

- d. Shunt
- e. Diffusion defect
- H. Causes of hypoxia
 - a. Anemia
 - b. Hypoxemia
 - c. Ischemia
 - d. Dysoxia
- I. Carbon dioxide transport and impaired CO₂ removal
- 6. Control of ventilation
 - A. Receptor modification of ventilatory drive
 - a. Chemoreceptors
 - b. Aortic
 - c. Carotid
 - d. Medullary
 - e. Baroreceptors
 - f. Irritant receptors
 - g. J Receptors
 - h. Stretch receptors
 - B. Respiratory components of the central nervous system
 - a. Medulla
 - b. Pons
 - c. Pneumotaxic center
 - d. Dorsal respiratory group
 - e. Ventral respiratory group
 - f. Cerebral cortex
 - g. Spinal cord
 - C. Conditions affecting control of respiration
 - a. Sleep
 - b. Traumatic brain injury
 - c. Neuromuscular disorders
- 7. Gas transport and acid-base balance
 - A. Terms, symbols and abbreviations
 - B. Henderson-Hasselbach equation
 - C. Acid-base disorder categories
 - D. respiratory and metabolic disturbances
 - E. Respiratory and metabolic compensation
 - F. Arterial blood gas interpretation
 - a. Respiratory
 - b. Metabolic
 - c. Level of compensation
 - d. Degree of hypoxemia
 - G. Calculation of CaO₂, SaO₂, CvO₂ and C(a-v)O₂.
 - H. Siggard-anderson nomogram determining acid/base relationship

7. REPRESENTATIVE METHODS OF INSTRUCTION:

Typical methods of instruction may include:

- A. Lecture
- B. Discussion
- C. Other (Specify): Group discussion. Computer assisted learning exercises. Patient case scenarios. When applicable, case histories will be utilized. Emphasis will be applied to areas of particular concern to the Respiratory Care Practitioners.

8. REPRESENTATIVE ASSIGNMENTS

Representative assignments in this course may include, but are not limited to the following:

Writing Assignments:

Weekly respiratory calculation problems to better understand data assessment (5-7 pages). Weekly evaluation of patient case scenarios (5-7 pages).

Reading Assignments:

Weekly reading assignments may include selected readings from text and current Respiratory Care journal articles. Minimum of 15 pages.

Other Outside Assignments:

Computer assisted learning exercises
Out of class assignments may include: Evaluation of patient case scenarios
Computer assisted learning exercises
Written assignment pertaining to various application of respiratory concepts
Discussion board participation

9. REPRESENTATIVE METHODS OF EVALUATION

Representative methods of evaluation may include:

- A. Class Work
- B. Exams/Tests
- C. Homework
- D. Quizzes
- E. Periodic quizzes. Homework assignments. Exams following completion of each module. Comprehensive final exam.

10. REPRESENTATIVE TEXT(S):

Possible textbooks include:

- A. Terry Des Jardins. *Cardiopulmonary Anatomy & Physiology: Essentials of Respiratory Care*, 7th ed. Cengage, 2019
- B. Kacmarek, R., Stoller, J., Heuer, A. *Egan's Fundamentals of Respiratory Care***, 11 ed. https://caccl-smccd.primo.exlibrisgroup.com/permalink/01CACCL_SMCCCD/s0te9o/alma991000643411505308: Mosby, 2017

Other:

- A. ** This title is available through Skyline College Library's e-Book collection, and students can access it for free by using their SMCCCD credentials.

Origination Date: January 2023
Curriculum Committee Approval Date: February 2023
Effective Term: Fall 2023
Course Originator: Brian Daniel

Skyline College
Official Course Outline

1. COURSE ID: RPTH 430 **TITLE:** Introduction to Respiratory Therapeutics

Units: 6.0 units **Hours/Semester:** 64.0-72.0 Lecture hours; 96.0-108.0 Lab hours; 128.0-144.0 Homework hours; 288.0-324.0 Total Student Learning hours

Method of Grading: Letter Grade Only

Prerequisite: Admission to the Respiratory Care Program.

2. COURSE DESIGNATION:

Degree Credit

Transfer credit: CSU

3. COURSE DESCRIPTIONS:

Catalog Description:

Study and laboratory practice of basic respiratory care procedures. Oxygen and aerosol therapy, alveolar recruitment therapy, airway clearance procedures, advanced airway management, cleaning and care of respiratory therapy equipment, and introduction to ventilation concepts are included.

4. STUDENT LEARNING OUTCOME(S) (SLO'S):

Upon successful completion of this course, a student will meet the following outcomes:

1. Assess and select appropriate respiratory care modalities for a given pulmonary disorders.
2. Appraise and formulate appropriate respiratory care modalities based on changes in patient's clinical condition.
3. Demonstrate the ability to competently perform various respiratory therapeutics.

5. SPECIFIC INSTRUCTIONAL OBJECTIVES:

Upon successful completion of this course, a student will be able to:

Utilize the techniques, skills and application of theory to properly and effectively administer the therapeutic modalities listed:

1. Adjuncts to CPR
2. Equipment cleaning and sterilization
3. Medical gas delivery systems
4. Oxygen therapy
5. Humidity and bland aerosol delivery
6. Respiratory pharmacology and aerosol medication
7. Alveolar recruitment therapies
8. Airway clearance techniques
9. Continuous positive airway pressure and noninvasive positive pressure ventilation
10. Introduction to Mechanical ventilation

6. COURSE CONTENT:

Lecture Content:

1. Cardiopulmonary Resuscitation and Adjuncts
 - A. ABC's of CPR
 - a. Techniques
 - i. Adult
 - ii. Child
 - iii. Infant
 - B. Relief of Obstructed Airway Using Advanced Airways
 - C. Manual Ventilation
 - a. Equipment
 - b. Hazards
 - c. Proper Technique
 2. Equipment Cleaning and Sterilization
 - A. Categories of Microorganisms
 - a. Pathogenesis
 - b. Nosocomial
 - c. Cross-Contamination

- B. Equipment Processing Techniques
 - a. Disposable Equipment
 - b. Reusable
 - i. Sterilization
 - ii. Disinfection
- 3. Medical Gas Delivery
 - A. Goals, Objectives and Guiding Principles
 - B. Recommending and Regulating Agencies
 - C. Storage and Delivery
 - a. Gas
 - b. Liquid
 - c. Measurement and Duration of Flow
 - D. Safety Delivery Systems
 - a. High Pressure
 - i. Reducing Valves
 - b. Low Pressure
 - i. Regulators
 - ii. Flowmeters
 - iii. Working Pressure
- 4. Oxygen Therapy
 - A. Indications and Contraindications
 - B. Hazards and Complications
 - C. Delivery Devices
 - a. Low/High Flow
 - b. Low/High FiO₂
 - D. Pulse Oximetry
 - E. Hyperbaric Oxygen Therapy
 - F. Oxygen Analysis
- 5. Humidity and Bland Aerosol Therapy
 - A. Indications and Contraindications
 - B. Humidification Performance
 - a. Bubble
 - b. Jet
 - c. Heat Moisture Exchanger
 - d. Heated High Flow
 - e. Infection Control
 - C. Aerosol Delivery and Principles
 - a. Large Volume Nebulizer
 - b. Ultrasonic Nebulizer
 - c. High Flow Nebulizer (Mistyox)
 - d. Infection Control
 - e. Patient Application
- 6. Alveolar Recruitment Therapies
 - A. Indications and Contraindication
 - B. Hazards and Complications
 - C. Therapies
 - a. Incentive Spirometry
 - b. Intermittent Positive Pressure breathing
 - c. Positive Expiratory Pressure
 - d. Continuous Positive Airway Pressure
- 7. Airway Clearance
 - A. Indications and Contraindications
 - B. Hazards and Complications
 - C. Therapies
 - a. Chest Physical Therapy
 - i. Therapeutic Positioning
 - ii. Percussion and Vibration
 - iii. Cough and Related Expulsion Techniques
 - b. Autogenic Drainage
 - c. Positive Expiratory Pressure/Oscillating Positive Expiratory Pressure

- d. High Frequency Chest Wall Oscillation
 - e. Intrapulmonary Percussive Ventilation
 - f. Nasotracheal Suctioning
8. Advanced Airway Care – Endotracheal, Tracheostomy, Esophageal Obturator, Laryngeal Mask
 - A. Assessment, Selection, and Placement of Artificial Airway
 - B. Airway Trauma Associated with Tracheal Tubes
 - C. Airway Maintenance
 - D. Extubation and Decannulation
 9. Principles of Positive Pressure Ventilation _ Mechanical ventilation
 - A. Equation of Motion
 - B. Pressure Target
 - C. Volume Target
 - D. Noninvasive Ventilation

Lab Content:

Upon completion of the laboratory content, the student will demonstrate and/or perform the following techniques in a patient simulated session:

1. Cardiopulmonary resuscitation and airway management using appropriate adjunct in the adult and pediatric patient.
2. Medical gas delivery using low flow and high oxygen delivery devices
 - A. Indications and Contraindications
 - B. Hazards and Complications
 - C. Assessment of outcomes.
3. Humidity and Bland Aerosol device set up
 - A. Indications and Contraindications
 - B. Humidification Performance among the following devices:
 - a. Bubble
 - b. Jet
 - c. Heat Moisture Exchanger
 - d. Heated High Flow
 - C. Aerosol delivery principles
 - a. Large Volume Nebulizer
 - b. Ultrasonic Nebulizer
 - c. High Flow Nebulizer
 - d. Patient Application
4. Airway Clearance techniques
 - A. Indications and Contraindications
 - B. Hazards and Complications
 - C. Advantages and disadvantages of various techniques
5. Alveolar Recruitment techniques
 - A. Indications and Contraindication
 - B. Hazards and Complications
 - C. Advantages and disadvantages of various techniques
6. Advanced Airway Care placing endotracheal, tracheostomy, esophageal obturator, laryngeal mask
 - A. Assessment, selection, and placement of advanced artificial airway
 - B. Airway trauma associated with tracheal tubes
 - C. Airway maintenance
 - D. Extubation and decannulation
7. Advanced Principles of Positive Pressure Ventilation (Mechanical Ventilation)
8. Principles and Practice of Infection Control

7. REPRESENTATIVE METHODS OF INSTRUCTION:

Typical methods of instruction may include:

- A. Lecture
- B. Lab
- C. Activity
- D. Discussion
- E. Guest Speakers
- F. Observation and Demonstration
- G. Other (Specify): Computer assisted learning exercises. Reading assignments. Patient case scenarios.

8. REPRESENTATIVE ASSIGNMENTS

Representative assignments in this course may include, but are not limited to the following:

Writing Assignments:

- A. Weekly respiratory calculation problems to better understand data assessment; 5-7 pages.
- B. Weekly group and individual evaluation of patient case scenarios and write treatment plan; 5-7 pages.

Reading Assignments:

Reading assignments may include selected readings from text and current journal articles; 5-7 pages, weekly.

Other Outside Assignments:

- A. Weekly, lab exercises may include:
 - a. Evaluation of patient case scenarios
 - b. Computer assisted learning exercises
 - c. Written assignments pertaining to various application of respiratory concepts
 - d. Discussion board participation

9. REPRESENTATIVE METHODS OF EVALUATION

Representative methods of evaluation may include:

- A. Class Performance
- B. Exams/Tests
- C. Group Projects
- D. Homework
- E. Lab Activities
- F. Papers
- G. Quizzes
- H. Written examination
- I. Periodic quizzes. Effective assessment, evaluation, treatment plan formulation of patient case scenarios. Competent performance and application of respiratory procedures. Exams following completion of each module. Comprehensive final exam.

10. REPRESENTATIVE TEXT(S):

Possible textbooks include:

- A. Kacmarek, Robert. *Egan's Fundamentals of Respiratory Care*, 11th ed. Elsevier, 2017
- B. Gardenhire, D. S. *Rau's Respiratory Care Pharmacology*, 10th ed. Elsevier, 2020
- C. Cairo, P. *Mosby's Respiratory Care Equipment*, 9th ed. Mosby, 2014

Origination Date: February 2023

Curriculum Committee Approval Date: April 2023

Effective Term: Fall 2023

Course Originator: Heather Esparza

Skyline College
Official Course Outline

1. **COURSE ID:** RPTH 438 **TITLE:** Clinical Clerkship I
Units: 1.0 units **Hours/Semester:** 48.0-54.0 Field Experience hours; 48.0-54.0 Total Student Learning hours
Method of Grading: Pass/No Pass Only
Prerequisite: Admission to the Respiratory Care Program.

2. **COURSE DESIGNATION:**

Degree Credit
Transfer credit: CSU

3. **COURSE DESCRIPTIONS:**

Catalog Description:

Orientation and supervised experience in the medical/surgical areas of a local hospital, observing and performing respiratory care procedures to non-critical care patients.

4. **STUDENT LEARNING OUTCOME(S) (SLO'S):**

Upon successful completion of this course, a student will meet the following outcomes:

1. Demonstrate patient communication and diagnostics as they relate to acute care.
2. Apply basic respiratory care therapeutics used to manage clinical conditions in the acute care and transitional care setting.
3. Develop, assess and adjust respiratory care plans based on clinical needs.

5. **SPECIFIC INSTRUCTIONAL OBJECTIVES:**

Upon successful completion of this course, a student will be able to:

1. Describe the functioning and interaction of the respiratory care department with the following: nursing services, medical staff, emergency department, diagnostic services, outpatient services and ancillary departments
2. Describe the purpose of patient and staff communication
3. Attend patient report, rounds, and relevant inservices
4. Describe the value of patient history and perform a chart review for pertinent data
5. Determine objectives for basic patient respiratory care plans and evaluate if objectives are effectively met
6. Relate information regarding therapeutic basic procedures practice in the lab with actual patient care
7. Behave in a manner consistent exhibiting a professional attitude with other health professionals, patients, and visitors in a hospital setting
8. Observe and practice the following procedures: equipment care and infection control; cardiopulmonary resuscitation (manual resuscitation, pharyngeal airways); oxygen administration; tank and regulator setup; monitoring of oxygen administration (oxygen analyzer, pulse oximetry); continuous bland aerosol; aerosol medication delivery (small volume nebulizer, metered dose inhaler, filtered nebulizer, continuous medication nebulization); sputum induction; incentive spirometry; positive pressure breathing; and airway clearance (deep breath and cough, postural drainage and percussion, PEP therapy, flutter valve, high frequency oscillation, nasotracheal suctioning)

6. **COURSE CONTENT:**

Lab Content:

Each of the days in clinical, the student will orient, observe and/or perform one or more of the procedures listed in the objectives. With each of these procedures, the student will perform a chart review, determine objectives for therapy, practice and deliver therapy competently, evaluate the patient, and communicate these and the results of the therapy to the instructor and/or the student preceptor.

The following skills will be observed and practiced:

- Introduction and appropriate interaction with nursing services, medical staff, emergency department, diagnostic services, outpatient services, and other applicable ancillary departments
- Engage in patient rounds
- Identification and review of patient chart components
- Professional and ethical interaction with other health professionals, patients, and visitors

The following respiratory care therapeutics will be observed and practiced for initial competency in indications, contraindications, and application:

- Equipment setup, use, and cleaning

- Cardiopulmonary resuscitation (manual resuscitation, pharyngeal airways)
- Oxygen administration with appropriate devices
- Monitoring of oxygen therapy (oxygen analyzer and pulse oximetry)
- Continuous bland aerosol
- Aerosol medication delivery
 - Delivery device
 - Medication
 - Dosage
- Sputum Induction
- Lung expansion procedures
- Airway clearance procedures

7. REPRESENTATIVE METHODS OF INSTRUCTION:

Typical methods of instruction may include:

- A. Directed Study
- B. Discussion
- C. Field Experience
- D. Observation and Demonstration
- E. Other (Specify): Preceptor-led discussions. Student observation of respiratory care application in the clinical setting. Practice and return demonstration.

8. REPRESENTATIVE ASSIGNMENTS

Representative assignments in this course may include, but are not limited to the following:

Writing Assignments:

- Electronic medical record documentation with clinical preceptor supervision of 3-10 patients/week (This number may vary based on number of assigned patients and detail of patient summary)
- Daily assigned self evaluation (1 page each)

Reading Assignments:

Assigned evidenced based support/research related to patient care techniques employed during clinical experience. This will generally be in the form of a peer review journal article of 5 - 25 pages/semester.

Other Outside Assignments:

- One case history presentation (5-7 pages) at the conclusion of this clinical experience.
- Weekly in class discussions of patient care plans and outcomes, maintaining full HIPPA compliance.

9. REPRESENTATIVE METHODS OF EVALUATION

Representative methods of evaluation may include:

- A. Class Participation
- B. Class Performance
- C. Homework
- D. Oral Presentation
- E. Complete assigned procedural competencies. Written evaluation (theory; practical application; appearance; attendance; communication; theory and application understanding and integration).

10. REPRESENTATIVE TEXT(S):

Possible textbooks include:

- A. Robert M. Kacmarek. *Egan's Fundamentals of Respiratory Care***, 11th ed. Mosby, 2017

Other:

- A. **This title is available through Skyline College Library's e-Book collection, and students can access it for free by using their SMCCCD credentials.

Permalink:

https://caccl-smccd.primo.exlibrisgroup.com/permalink/01CACCL_SMCCD/s0te9o/alma9910006434115053

**This is the 2017 edition

Origination Date: January 2023
Curriculum Committee Approval Date: February 2023
Effective Term: Fall 2023
Course Originator: Brian Daniel

Skyline College
Official Course Outline

1. COURSE ID: RPTH 445 **TITLE:** Respiratory Diseases I

Units: 2.0 units **Hours/Semester:** 32.0-36.0 Lecture hours; 64.0-72.0 Homework hours; 96.0-108.0 Total Student Learning hours

Method of Grading: Letter Grade Only

Prerequisite: Admission to the Respiratory Care Program.

2. COURSE DESIGNATION:

Degree Credit

Transfer credit: CSU

3. COURSE DESCRIPTIONS:

Catalog Description:

Using chronic pulmonary disease as models, the student will learn disease terminology, disease classification, history taking and physical examination. Also included will be basic radiologic, clinical and pulmonary diagnostics.

4. STUDENT LEARNING OUTCOME(S) (SLO'S):

Upon successful completion of this course, a student will meet the following outcomes:

1. Distinguish between chronic pulmonary diseases by evaluating etiology, pathophysiology, bedside assessment and clinical data.
2. Evaluate and analyze bedside assessment and clinical data to formulate effective respiratory treatment plans for chronic pulmonary diseases.

5. SPECIFIC INSTRUCTIONAL OBJECTIVES:

Upon successful completion of this course, a student will be able to:

1. Apply normal and abnormal respiratory anatomy and physiology to pulmonary obstructive, restrictive, and infectious disease.
2. Identify etiology, pathophysiology, clinical manifestations, and treatment.
3. Apply radiologic, laboratory data, and pulmonary diagnostics.
4. Discuss clinical case studies to apply the pathophysiology of cardiopulmonary diseases.
5. Distinguish between the different stages of cardiopulmonary diseases.
6. Identify the appropriate respiratory therapy and interventions to treat patients with cardiopulmonary diseases.

6. COURSE CONTENT:

Lecture Content:

1. Disease Terminology and Classification/Defense Mechanism
 - A. Terms Related to Disease
 - B. Disease Categories
 - C. Stages of Disease
 - D. Mechanical and Anatomical Defense Mechanisms of the Lung
 - E. Immunity Response
 - F. Inflammatory Response
 - a. Specific
 - b. Non-Specific
2. Chest X-Ray Interpretation
 - A. Technique
 - a. Position
 - b. Penetration
 - B. Densities
 - a. Air
 - b. Tissue / Fluid
 - c. Bone
 - C. Anatomical Landmarks
 - D. Abnormalities
 - a. Densities

- b. Vascularity
 - c. Silhouette Sign
 - d. Air Bronchograms
- E. Disease Alterations
- 3. Obstructive Pulmonary Disease
 - A. Epidemiology, Etiology, Pathophysiology, Differential Diagnosis, Therapeutic modalities, and Prognosis:
 - a. Asthma
 - b. Chronic Bronchitis
 - c. Pulmonary Emphysema
 - d. Bronchiectasis
- 4. Pulmonary Infections due to immunocompromised or immunosuppressed patients.
 - A. Epidemiology, Etiology, Pathophysiology, Differential Diagnosis, Therapeutic Modalities and Prognosis:
 - a. Tuberculosis
 - b. Bacterial Pneumonia
 - c. Influenza and Viral Pneumonia
 - d. Pneumocystis Carinii Pneumonia
 - e. Novel Virus (ex. COVID 19)
 - f. Acute Bronchitis
 - g. Atelectasis
 - h. Rhinitis and Sinusitis
 - i. Lung Abscess
 - j. Pleurisy
 - k. Empyema
 - B. Opportunistic Infections Due to Immunosuppression
 - a. Acute
 - b. Chronic
- 5. Interpretation of Basic Pulmonary Function
 - A. Static Lung Volumes and Capacities
 - a. Vital Capacity
 - b. Functional Residual Capacity
 - c. Residual Volume
 - B. Flow/volume Loop
 - C. Bedside Pulmonary Function Testing
 - a. FVC
 - b. FEV1
 - c. FEV1/FVC
 - d. PEFr

7. REPRESENTATIVE METHODS OF INSTRUCTION:

Typical methods of instruction may include:

- A. Lecture
- B. Discussion
- C. Field Experience
- D. Other (Specify): Group discussion, Computer assisted learning exercises, and Patient case scenarios and data analysis.

8. REPRESENTATIVE ASSIGNMENTS

Representative assignments in this course may include, but are not limited to the following:

Writing Assignments:

- Weekly respiratory calculation problems to better understand data assessment; 7 pages
- Weekly group and individual evaluation of patient case scenarios; 5-7 pages
- Weekly computer assisted learning exercises; 5-7 pages

Reading Assignments:

- Weekly selected readings from text and current journal articles; 5-7 pages

Other Outside Assignments:

Other weekly out-of-class assignments may include:

- Evaluation of patient case scenarios

- Computer assisted learning exercises
- Written assignment pertaining to various application of respiratory concepts
- Discussion board participation

9. REPRESENTATIVE METHODS OF EVALUATION

Representative methods of evaluation may include:

- Exams/Tests
- Homework
- Quizzes
- Effective assessment, evaluation, treatment plan formulation of patient case scenarios. Exams following completion of each module. Comprehensive final exam.

10. REPRESENTATIVE TEXT(S):

Possible textbooks include:

- D. Hess, N. MacIntyre, S. Mishoe and W. Galvin. *Respiratory Care***, 4th ed. Jones & Bartlett Publishers, 2021
- Kacmarek, Rober M., Stoller, James K., Heuer, Albert J. *Egan's Fundamentals of Respiratory Care***, 12th ed. Maryland Heights: Mosby, 2020

Possible periodicals include:

- American Association of Respiratory Care. *Respiratory Care Journal*, Volume 2022

Other:

- ** These books are available through Skyline College Library's e-Book collection, and students can access it for free by using their SMCCD credentials.
Egan's Fundamentals of Respiratory Care, 2017 edition
https://caccl-smccd.primo.exlibrisgroup.com/permalink/01CACCL_SMCCD/s0te9o/alma9910006434115053
Respiratory Care, 2021 edition
https://caccl-smccd.primo.exlibrisgroup.com/permalink/01CACCL_SMCCD/s0te9o/alma9910007878588053

Origination Date: March 2023

Curriculum Committee Approval Date: May 2023

Effective Term: Fall 2023

Course Originator: Beatriz Qura del Rio

Skyline College
Official Course Outline

1. **COURSE ID:** RPTH 448 **TITLE:** Clinical Clerkship II
Units: 2.5 units **Hours/Semester:** 120.0-135.0 Field Experience hours; 120.0-135.0 Total Student Learning hours
Method of Grading: Pass/No Pass Only
Prerequisite: Completion of the first year Respiratory Care program.
2. **COURSE DESIGNATION:**
Degree Credit
Transfer credit: CSU
3. **COURSE DESCRIPTIONS:**
Catalog Description:
Continued supervised experience in the medical/surgical patient care areas of a local hospital. Emphasis is on attaining further practice towards mastery of technical skills performed by a Respiratory Care Practitioner in basic therapeutics.
4. **STUDENT LEARNING OUTCOME(S) (SLO'S):**
Upon successful completion of this course, a student will meet the following outcomes:
 1. Demonstrate patient communication and diagnostics as they relate to acute care and transitional care.
 2. Apply respiratory care techniques to assess, develop, and adjust care plans according to clinical conditions of patients in the acute care setting.
5. **SPECIFIC INSTRUCTIONAL OBJECTIVES:**
Upon successful completion of this course, a student will be able to:
 1. Competently represent the respiratory care department when engaging the following hospital disciplines: nursing services, medical staff, emergency department, diagnostic services, outpatient services and ancillary departments.
 2. Competently and effectively communicate with patients and the healthcare team
 3. Effectively engage in patient report, rounds, and relevant inservices
 4. Effectively review and interpret patient history and perform a chart review for pertinent data
 5. Appreciate the value of determining objectives for patient care and evaluating if these objectives are met
 6. Assess patient condition and identify and effectively apply therapeutic procedures
 7. Demonstrate professional character and conduct with other health professionals, patients, and visitors in the hospital setting.
 8. Practice to competency the following procedures: equipment care and cleaning; cardiopulmonary resuscitation (manual resuscitation, pharyngeal airways); oxygen administration; tank and regulator setup; monitoring of oxygen administration (oxygen analyzer, pulse oximetry); continuous bland aerosol; aerosol medication delivery (mall volume nebulizer, metered dose inhaler, filtered nebulizer, continuous medication nebulization); sputum induction; incentive spirometry; intermittent positive pressure breathing; and airway clearance (deep breath and cough, postural drainage and percussion, PEP therapy, flutter valve, high frequency oscillation, nasotracheal suctioning)
6. **COURSE CONTENT:**
Lab Content:
Each of the days in clinical, the student will perform procedures listed in the objectives towards competency and applied mastery. With each of these procedures, the student will perform a chart review, determine objectives for therapy, delivery therapy competently, evaluate the patient, and communicate these and the results of the therapy to the instructor and/or the student preceptor.
The following skills will be practiced to competency and mastery:
 - Introduction and appropriate interaction with nursing services, medical staff, emergency department, diagnostic services, outpatient services, and other applicable ancillary departments
 - Engage in patient rounds
 - Identification and review of patient chart components
 - Professional and ethical interaction with other health professionals, patients, and visitorsThe following respiratory care therapeutics will be observed practiced for competency and mastery:
 - Equipment setup, use, and cleaning

- Cardiopulmonary resuscitation (manual resuscitation, pharyngeal airways)
- Oxygen administration with appropriate devices
- Monitoring of oxygen therapy (oxygen analyzer and pulse oximetry)
- Continuous bland aerosol
- Aerosol medication delivery
 - Delivery device
 - Medication
 - Dosage
- Sputum Induction
- Lung expansion procedures
- Airway clearance procedures

7. REPRESENTATIVE METHODS OF INSTRUCTION:

Typical methods of instruction may include:

- A. Field Experience
- B. Individualized Instruction
- C. Other (Specify): Mentorship between student and practitioner. Practice and return demonstration under supervision during delivery of patient care.

8. REPRESENTATIVE ASSIGNMENTS

Representative assignments in this course may include, but are not limited to the following:

Writing Assignments:

- Electronic medical record charting under clinical preceptor supervision of 3-10 patients/week (This number may vary based on number of assigned patients and detail of patient summary)
- Daily assigned self evaluation (1 page each)

Reading Assignments:

Student will review their clinical manual weekly in preparation for each subsequent clinical rotation day (approximately 3-5 pgs/week).

Other Outside Assignments:

- One case history presentation (5-7pages)
- Weekly discussion board participation (1page)

9. REPRESENTATIVE METHODS OF EVALUATION

Representative methods of evaluation may include:

- A. Class Participation
- B. Class Performance
- C. Class Work
- D. Group Projects
- E. Papers
- F. Projects
- G. Complete assigned procedural competencies. Daily evaluation (theory; practical application; appearance; attendance; communication; theory and application understanding and integration). Written evaluation (theory; practical application; appearance; attendance; communication; theory and application understanding and integration). Each student will also complete an assigned patient case study evaluation that may vary in number of pages given the particular disease state. While papers may be assigned, no more than one paper will be required.

10. REPRESENTATIVE TEXT(S):

Other:

- A. Respiratory Care Student Clinical Manual. In-house produced manual.

Origination Date: February 2023

Curriculum Committee Approval Date: March 2023

Effective Term: Fall 2023

Course Originator: Brian Daniel

Skyline College
Official Course Outline

1. **COURSE ID:** RPTH 450 **TITLE:** Respiratory Diseases II
Units: 3.0 units **Hours/Semester:** 48.0-54.0 Lecture hours; 96.0-108.0 Homework hours; 144.0-162.0 Total Student Learning hours
Method of Grading: Letter Grade Only
Prerequisite: RPTH 445 or equivalent.

2. **COURSE DESIGNATION:**
Degree Credit
Transfer credit: CSU

3. **COURSE DESCRIPTIONS:**
Catalog Description:
Continuation of the study of cardiopulmonary diseases utilizing the model developed in RPTH 445 to include the treatment and pharmacotherapy of selected disorders.

4. **STUDENT LEARNING OUTCOME(S) (SLO'S):**
Upon successful completion of this course, a student will meet the following outcomes:
 1. Identify acute pulmonary diseases by evaluating etiology, pathophysiology, bedside assessment and clinical data.
 2. Evaluate and analyze bedside assessment and clinical data to formulate effective respiratory treatment plans for acute pulmonary diseases.

5. **SPECIFIC INSTRUCTIONAL OBJECTIVES:**
Upon successful completion of this course, a student will be able to:
 1. Apply normal and abnormal respiratory anatomy and physiology to cardiopulmonary.
 2. Identify etiology, pathophysiology, and clinical manifestations of cardiopulmonary diseases.
 3. Apply radiologic, laboratory data, cardiopulmonary diagnostics and treatment.
 4. Connect disease process with laboratory and diagnostic testing information.
 5. Enhance critical thinking skills when assessing and evaluating patient's status based on objective data.
 6. Apply research conducted during the class to better understand different disease process.
 7. Utilize clinical data to make differential diagnosis.
 8. Utilize clinical data such as imaging and laboratory work up to come up with the right diagnosis and therefore treat the patient accordingly.

6. **COURSE CONTENT:**
Lecture Content:
 1. Pulmonary Thromboembolic Disease
 - A. Etiology and Pathology
 - B. Pathophysiology
 - C. Clinical Features
 - D. Treatment and Prevention
 2. Heart Failure
 - A. Etiology and Pathology
 - B. Pathophysiology
 - C. Clinical Features and Laboratory Findings
 - D. Treatment
 3. Smoke Inhalation and Burns
 - A. Etiology and Pathology
 - B. Pathophysiology
 - C. Clinical Features
 - D. Treatment
 4. Near Drowning
 - A. Etiology and Pathology
 - B. Pathophysiology
 - C. Clinical Features
 - D. Initial Assessment and Prognosis

- E. Treatment
- 5. Adult respiratory Distress Syndrome
 - A. Etiology and Pathology
 - B. Pathophysiology
 - C. Clinical Features
 - D. Treatment
- 6. Chest Trauma
 - A. Etiology and Pathology
 - B. Injury Pathophysiology
 - C. Clinical Features and Laboratory Findings
 - D. Treatment
- 7. Neuromuscular Diseases
 - A. Normal Neuromuscular Function in Breathing
 - B. Pathology and Pathophysiology
 - C. Clinical Features
 - D. Treatment and Prevention
- 8. Pneumonia – Bacterial and Immunnocompromised
 - A. Etiology and Pathology
 - B. Pathophysiology
 - C. Clinical Features
 - D. Treatment
- 9. Tuberculosis
 - A. Etiology and Transmission
 - B. Pathology and Pathogenesis
 - C. Clinical Features
 - D. Treatment
- 10. Lung cancer
 - A. Etiology and Pathology
 - B. Clinical Features
 - C. Diagnosis
 - D. Radiographic Data
 - E. Laboratory Studies
 - F. Diagnostic Features
 - G. Staging
 - H. Treatment and Prognosis

7. REPRESENTATIVE METHODS OF INSTRUCTION:

Typical methods of instruction may include:

- A. Lecture
- B. Critique
- C. Activity
- D. Discussion
- E. Other (Specify): Group discussion, assignments, and poster presentation. Computer assisted learning exercises. Patient case scenarios and data analysis.

8. REPRESENTATIVE ASSIGNMENTS

Representative assignments in this course may include, but are not limited to the following:

Writing Assignments:

- Once each semester, students work collaboratively on a poster which they present together in class.
- One two-page self-reflection paper each semester based on clinical research articles.
- A weekly 300 word case study assessment and formulation of treatment plans.

Reading Assignments:

- Selected 20-30 pages a week of readings from text and current journal articles

Other Outside Assignments:

- A. Respiratory calculation problems to better understand data assessment
- B. Group and individual evaluation of patient case scenarios
- C. Computer assisted learning exercises
- D. Other out-of-class assignments may include:
 - a. Evaluation of patient case scenarios
 - b. Computer assisted learning exercises

- c. Written assignment pertaining to various application of respiratory concepts
- d. Discussion board participation

9. REPRESENTATIVE METHODS OF EVALUATION

Representative methods of evaluation may include:

- A. Exams/Tests
- B. Homework
- C. Oral Presentation
- D. Papers
- E. Quizzes
- F. Effective assessment, evaluation, treatment plan formulation of patient case scenarios. Exams following completion of each module. Comprehensive final exam.

10. REPRESENTATIVE TEXT(S):

Possible textbooks include:

- A. Hess, N. MacIntyre, S. Mishoe and W. Galvin. *Respiratory Care - Principles and Practice*, 3rd ed. Jones & Bartlett Publisher, 2015

Origination Date: November 2024

Curriculum Committee Approval Date: January 2025

Effective Term: Fall 2025

Course Originator: Heather Esparza

Skyline College
Official Course Outline

1. COURSE ID: RPTH 458 **TITLE:** Clinical Clerkship III

Units: 5.0 units **Hours/Semester:** 16.0-18.0 Lecture hours; 192.0-216.0 Field Experience hours; 32.0-36.0 Homework hours; 240.0-270.0 Total Student Learning hours

Method of Grading: Pass/No Pass Only

Prerequisite: Completion of the first year Respiratory Care program.

2. COURSE DESIGNATION:

Degree Credit

Transfer credit: CSU

3. COURSE DESCRIPTIONS:

Catalog Description:

Orientation and supervised experience in various adult intensive care units of local hospitals. Emphasis is on orienting, observing, practicing and obtaining basic proficiency in skills performed by a respiratory care practitioner in these areas.

4. STUDENT LEARNING OUTCOME(S) (SLO'S):

Upon successful completion of this course, a student will meet the following outcomes:

1. Evaluate and perform basic patient communication and diagnostics as they relate to various aspects of critical care.
2. Assess patient respiratory condition and identify appropriate airway and management strategies for the critically ill care patients.
3. Competently assess, apply, and manage invasive and non-invasive positive pressure ventilation in the intensive care setting.

5. SPECIFIC INSTRUCTIONAL OBJECTIVES:

Upon successful completion of this course, a student will be able to:

1. Engage in patient hand off and rounds, and provide relevant services in the adult intensive care units.
2. Describe the importance of interdisciplinary communication on clinical outcomes in the adult intensive care unit.
3. Articulate the value in knowing patient history, performing ongoing chart review of pertinent data related to patients admitted to adult intensive care units.
4. Establish daily goals and care plans for patient requiring respiratory care services in the intensive care unit.
5. Relate concepts practiced in the laboratory setting regarding monitoring and management of patients admitted to intensive care.
6. Demonstrate professional conduct and character when engaging patients, surrogates and members of the health care team.
7. Attain minimum competency in advanced airway management and maintenance.
8. Attain minimum competency in ventilator setup, initiation, monitoring, troubleshooting.
9. Attain minimum competency in the application of ventilator modes and discontinuation procedures.
10. Attain minimum competency in the application of invasive and non-invasive cardiopulmonary monitoring devices related to respiratory care.

6. COURSE CONTENT:

Lecture Content:

1. Critical Care Procedures
 - A. Hand Ventilation Procedures
 - B. Airway Management
 - C. Extubation
 - D. Ventilator Set-Up for Standby
 - E. Ventilator Management and Discontinuance
 - F. Weaning
 - G. Airway Clearance
 - H. Equipment Care and Cleaning
2. Patient chart Review
3. Patient Assessment

4. Therapy Objectives

5. Communication Of Patient Care with Preceptor and Health Care Providers

Lab Content:

Each of the days in clinical, the student will orient, observe and/or perform one or more of the procedures listed in the objectives. With each of these procedures, the student will perform a chart review, determine objectives for therapy, practice and deliver therapy competently, evaluate the patient, and communicate these and the results of the therapy to the instructor and/or the student preceptor.

The following skills will be observed and practiced:

- Introduction and appropriate interaction with intensive care unit nursing services, medical staff, emergency department, diagnostic services, outpatient services, and other applicable ancillary departments
- Engage in intensive care inpatient rounds
- Identify and review of intensive care patient chart components
- Professional and ethical interaction with other health professionals, patients, and visitors

The following intensive respiratory care therapeutics will be observed and practiced for initial competency in indications, contraindications, and application:

1. Common clinical findings, relevant history, expected radiologic and laboratory findings, and management of the following diseases and/or disorders:
 - A. COPD
 - B. Tuberculosis
 - C. Lung abscess
 - D. Atelectasis
 - E. Bronchiectasis (*as with Cystic Fibrosis*)
 - F. Cardiac disease
 - G. Pulmonary emboli
 - H. ARDS and sepsis
 - I. Chest trauma
 - J. Neuromuscular disease
 - K. Occupational lung disorders
2. Indications, hazards and types of the following devices:
 - A. Nasal airways
 - B. Oral airways
 - C. Endotracheal tubes
 - D. Tracheostomy tubes
 - E. Trach buttons
 - F. Phonation devices for tracheostomy tubes
3. Procedure for intubation and extubation
4. Procedure for ETT cuff monitoring
5. Indications, hazards and complications of mechanical ventilation
6. Determination of initial ventilator parameters
7. Determine the following:
 - A. compressible volume
 - B. static and dynamic pulmonary mechanics
8. Understand and effectively apply ventilator concepts to include:
 - A. Design characteristics
 - B. Controls
 - C. Circuit set up
 - a. Alarm systems
 - b. Modes of ventilation specific to each model
9. Clinical uses for volume and pressure targeted strategies
 - A. Controlled mandatory ventilation
 - B. Synchronized intermittent mandatory ventilation
 - C. Pressure support
 - D. Continuous positive airway ventilation
 - E. Spontaneous ventilation modes
 - F. Hybrid modes of ventilation
10. Alternative ventilation strategies
 - A. Lung protective strategies
 - B. Dual modes
 - C. Heliox
 - D. Nitric Oxide

- E. Cerebral protection strategies
- 11. Determine extubation readiness criteria and methods.
- 12. Monitor ventilator patients to include: ventilator system checks, patient assessment, adjunctive equipment (oximetry and capnography): and alarm systems
- 13. Select and interpret ventilator graphics
- 14. Appropriate apply, monitor, and maintain non invasive respiratory monitors:
 - A. Pulse oximetry
 - B. end tidal CO₂
 - C. Transcutaneous monitor
 - D. Nitric oxide
 - E. Heliox

7. REPRESENTATIVE METHODS OF INSTRUCTION:

Typical methods of instruction may include:

- A. Lecture
- B. Individualized Instruction
- C. Observation and Demonstration
- D. Other (Specify): Mentorship between student and practitioner. Observation, practice and return demonstration under supervision during delivery of patient care to critically ill patients.

8. REPRESENTATIVE ASSIGNMENTS

Representative assignments in this course may include, but are not limited to the following:

Writing Assignments:

- Electronic medical record charting under clinical preceptor supervision for 3-5 patients/week. Total pages may range from 1 - 5 pages per week.
- Daily assigned self evaluation (1 page each)

Reading Assignments:

- A. Evidenced based weaning from mechanical ventilation (Peer reviewed articles ranging from abstract to full length paper).
- B. Current strategies in patient's safety as they relate to critical care. (Peer reviewed articles ranging from abstract to full length paper 1 - 25 pages over eight weeks.
- C. 5 -10 peer reviewed papers (5 - 30 pages biweekly) published in Respiratory Care Journal or any pulmonary/ critical medical journal during their clinical rotation depending on patient population the student served.

Other Outside Assignments:

- One case history presentation (5-7 pages)
- Weekly discussion board participation (1 page)

9. REPRESENTATIVE METHODS OF EVALUATION

Representative methods of evaluation may include:

- A. Class Participation
- B. Class Performance
- C. Final Performance
- D. Group Projects
- E. Research Projects
- F. Simulation
- G. Complete assigned procedural competencies. Daily evaluation (theory, practical application, appearance, attendance, communication, theory and application understanding and integration). Written evaluation (theory, practical application, appearance, attendance, communication, theory and application understanding and integration). Patient Case study evaluation than might vary in number of patients due disease state.

10. REPRESENTATIVE TEXT(S):

Other:

- A. Respiratory Care Student Clinical Manual. In-house produced manual.

Origination Date: October 2024

Curriculum Committee Approval Date: November 2024

Effective Term: Fall 2025

Course Originator: Heather Esparza

Skyline College
Official Course Outline

1. **COURSE ID:** RPTH 460 **TITLE:** Respiratory Critical Care
Units: 3.0 units **Hours/Semester:** 32.0-36.0 Lecture hours; 48.0-54.0 Lab hours; 16.0-18.0 TBA hours; 48.0-54.0 Homework hours; 144.0-162.0 Total Student Learning hours
Method of Grading: Letter Grade Only
Prerequisite: Completion of year 1 Respiratory Care Program content.

2. **COURSE DESIGNATION:**
Degree Credit
Transfer credit: CSU

3. **COURSE DESCRIPTIONS:**
Catalog Description:
Study and practice of techniques necessary to provide respiratory care to patients in adult critical care areas. Emphasis includes advanced airway management, ventilator care, respiratory assessment, monitoring and management, and effective communication.

4. **STUDENT LEARNING OUTCOME(S) (SLO'S):**
Upon successful completion of this course, a student will meet the following outcomes:
 1. Evaluate, assess and determine a pulmonary disorder using available respiratory diagnostics.
 2. Formulate a differential of respiratory care supportive measures/treatment for a given critical illness.
 3. Adjust respiratory care based on changes in the patients' hemodynamic status and clinical conditions.
 4. Competently perform specific intensive care respiratory procedures.
 5. Evaluate and analyze hemodynamic conditions as they relate to clinical outcomes in acute, transitional and critical care.

5. **SPECIFIC INSTRUCTIONAL OBJECTIVES:**
Upon successful completion of this course, a student will be able to:
 1. Deliver advanced airway care.
 2. Understand principles of critical care management in respiratory intensive patients.
 3. Operationalize respiratory care techniques when managing critically ill adult patients.
 4. Demonstrate effective communication when reporting on a patient's clinical condition and workflow to other members of the multidisciplinary team.
 5. Competently initialize mechanical ventilation when indicated for critically ill patients.
 6. Effectively conduct goal oriented monitoring and management in respiratory intense patients.
 7. Use available diagnostic tools to aid in determining clinical outcomes associated with critical illness.
 8. Utilize intravascular and hemodynamic data to identify and assess the cardiovascular pathophysiology state(s) and intervention(s).
 9. Organize a respiratory care plan for patients in the critical care unit and admitted to a Respiratory Care Service.
 10. Formulate and recommend appropriate modification to respiratory care plans based on hemodynamic data interpretation.

6. **COURSE CONTENT:**
Lecture Content:
 1. Review of Cardiopulmonary Resuscitation
 2. Principles of Mechanical Ventilation and the Need For Support
 - A. Identification of Respiratory Failure
 - B. Ventilator Classification and Understanding Ventilation Modes
 - C. Effects of Mechanical Ventilation on Oxygenation, Ventilation, and Lung Mechanics
 3. Competent Application of the Following Specific Ventilator Platforms:
 - A. Covidien 840
 - B. Hamilton
 - C. Drager
 - D. Envie
 - E. Site specific mechanical Ventilators during clinical immersion
 4. Initiation and Monitoring Ventilated Patients

- A. Selection of Appropriate Initial Ventilator Settings Based on Patient Assessment
- B. Assessment and Adjustment of Ventilator Settings Based on Patient's Condition
- C. Effects of Mechanical Ventilation on Other Body Systems
- D. Identification of Complications and Hazards During Mechanical Ventilation
- E. Minimizing Adverse Effects During Mechanical Ventilation
- F. Utilization of Noninvasive Monitoring
- 5. Review of Cardiac Anatomy and Applied Physiology
 - A. Structure
 - B. Function
 - C. Dysfunction
- 6. Arterial Blood Gas
 - A. Locations
 - B. Techniques
- 7. Arterial Pressure and Central Venous Monitoring
 - A. Anatomy
 - B. Data
 - C. Equipment
 - a. Catheter
 - b. Pressure transducer
 - c. Placement
 - d. Troubleshooting
- 8. Pulmonary Artery Catheterization
 - A. Anatomy
 - B. Data
 - a. Preload
 - b. Afterload
 - C. Equipment
 - a. Catheter
 - b. Pressure Transducer
 - c. Placement
 - d. Troubleshooting
- 9. Applied Cardiac Physiology
 - A. Anatomy
 - B. Physiologic Pressure
 - C. Heart Failure Identification and Management
 - a. Left Heart
 - b. Right Heart
 - c. Pulmonary Hypertension
- 10. Oxygenation Status in Hemodynamic Monitoring
 - A. Arterial
 - B. Venous
 - C. Oxygen Consumption
- 11. Monitoring Considerations
 - A. Technique
 - B. Placement
- 12. Fluid Management
 - A. Data Measurement
 - B. Recommendations

Lab Content:

Weekly Lab Content:
 Ventilator Taxonomy
 Ventilator Waveforms
 Mechanical Ventilation Monitoring and Management
 Mechanical Ventilation Math
 Sedation and Analgesia
 Arterial Blood Gas practice

TBA Hours Content:

TBA hours are to be completed by all enrolled students in conjunction with normal instructional activities. TBA hours are completed under the direct supervision of a qualified faculty member. They are meant to:

1. Allow extra practice on respiratory modalities in the lab

2. Increase confidence in disease management
3. Increase competence in identification of proper respiratory case management
4. Increase competence in set up, manipulation, and troubleshooting of critical care equipment and techniques

7. REPRESENTATIVE METHODS OF INSTRUCTION:

Typical methods of instruction may include:

- A. Lecture
- B. Lab
- C. Directed Study
- D. Discussion
- E. Guest Speakers
- F. Other (Specify): 1. Computer-assisted learning exercises, on and off campus, no extra cost for the students, using the platform Labster, provided by the college. 2. Patient case scenarios.

8. REPRESENTATIVE ASSIGNMENTS

Representative assignments in this course may include, but are not limited to the following:

Writing Assignments:

Students will complete written assignments throughout the entire semester. For example:

- A. Two peer reviewed journal article summaries (related to critical care management of adult patients). Each 3-5 pages in length.
- B. Weekly group and individual evaluation of patient case scenarios. Length will vary.
- C. Two written Summaries of case scenarios, 3-4 paragraphs for each case.

Reading Assignments:

Weekly readings; minimum of 5 pages:

- A. Sedation and Analgesia in the ICU
- B. Airway Management
- C. Mechanical Ventilators
- D. Clinical Principles of Positive Pressure Ventilation
- E. Monitoring and Managing Patients Receiving Positive Pressure Ventilation
- F. Discontinuing Positive Pressure Ventilation
- G. Mechanical Ventilation Waveforms
- H. Effective Communication in the ICU
- I. Hemodynamic Monitoring
- J. Patient Case Scenarios

Other Outside Assignments:

- A. Selected readings from text and current journal articles
- B. Lab exercises
- C. Respiratory calculation problems to better understand data assessment
- D. Group and individual evaluation of patient case scenarios
- E. Computer assisted learning exercises
- F. Out of class assignments may include:
 - a. Evaluation of patient case scenarios
 - b. Computer assisted learning exercises
 - c. Written assignment pertaining to various application of respiratory concepts
 - d. Discussion board participation
 - e. 8 hours community service

To be Arranged Assignments:

- A. Case study worksheets
- B. Respiratory equipment practice sheets

9. REPRESENTATIVE METHODS OF EVALUATION

Representative methods of evaluation may include:

- A. Class Participation
- B. Class Performance
- C. Class Work
- D. Exams/Tests
- E. Group Projects
- F. Homework
- G. Lab Activities
- H. Projects

- I. Quizzes
- J. Simulation
- K. Effective assessment, evaluation, treatment plan formulation of patient case scenarios. Competent performance and application of respiratory procedures. Quiz and exams will accompany each module. There will be a comprehensive final examination.

10. **REPRESENTATIVE TEXT(S):**

Possible textbooks include:

- A. Robert M. Kacmarek. *Egan's Fundamentals of Respiratory Care***, 11th ed. Mosby, 2017
- B. Gardenhire, D. S. *Rau's Respiratory Care Pharmacology*, 10th ed. Mosby, 2019

Other:

- A. ** This title is available through Skyline College Library's e-Book collection, and students have free access by using their SMCCCD credentials.

Permalink:

https://caccl-smccd.primo.exlibrisgroup.com/permalink/01CACCL_SMCCCD/s0te9o/alma9910006434115053

** This is 2017 edition

Instructor Generated Handouts

Origination Date: October 2024

Curriculum Committee Approval Date: November 2024

Effective Term: Fall 2025

Course Originator: Heather Esparza

Skyline College
Official Course Outline

1. **COURSE ID:** RPTH 480 **TITLE:** Diagnostic/Interventional Procedures and Outpatient Respiratory Care
Units: 2.0 units **Hours/Semester:** 32.0-36.0 Lecture hours; 64.0-72.0 Homework hours; 96.0-108.0 Total Student Learning hours
Method of Grading: Letter Grade Only
Prerequisite: Admission to the Respiratory Care Program.

2. **COURSE DESIGNATION:**

Degree Credit
Transfer credit: CSU

3. **COURSE DESCRIPTIONS:**

Catalog Description:

Explore fundamental diagnostic testing in pulmonary function, cardiopulmonary testing, and bronchoscopy procedures, as well as opportunities for Respiratory Care Practitioners in various outpatient settings. Through various diagnostic testing studies, the student will learn to identify changes in the patient's pulmonary status and assist the healthcare team in the outpatient setting to improve patient's health status and quality of life.

4. **STUDENT LEARNING OUTCOME(S) (SLO'S):**

Upon successful completion of this course, a student will meet the following outcomes:

1. Identify and apply diagnostic testing studies for various cardiopulmonary disorders.
2. Analyze pulmonary function data to differentiate between obstructive and restrictive disease, assess pulmonary disease severity and evaluate effectiveness of various respiratory therapies.
3. Demonstrate the role of Respiratory Care Practitioners in pulmonary rehabilitation, homecare, disaster management, and formulate effective treatment plans for these patient population.

5. **SPECIFIC INSTRUCTIONAL OBJECTIVES:**

Upon successful completion of this course, a student will be able to:

1. Define and discuss terms and methods used in respiratory equipment instrumentation and quality control.
2. Demonstrate how various pulmonary function tests are performed and how to interpret their results.
3. Identify applicable exercise physiology components and be able to interpret exercise testing data.
4. Identify goals for patients participating in pulmonary rehabilitation programs and the role of the Respiratory Care Practitioner in this process.
5. Identify opportunities for Respiratory Care Practitioners in the home care setting and their role in providing patient care.
6. Identify indications for bronchoscopy procedures and demonstrate application techniques appropriately.
7. Understand the role of a Respiratory Care Practitioner in a disaster and apply effective triage systems for respiratory failure mass-casualty.

6. **COURSE CONTENT:**

Lecture Content:

1. Instrumentation and Quality Control
 - A. American Thoracic Society/European Respiratory Society standards
 - B. Accuracy and precision
 - C. Methods, frequency, and procedures
2. Pulmonary Mechanics
 - A. Forced vital capacity
 - B. Flow/volume loops
 - C. Pre and post bronchodilator
3. Static Lung Volumes
 - A. Helium dilution
 - B. Nitrogen washout
 - C. Body plethysmography
 - D. Radiographic techniques
4. Diagnostic Testing
 - A. Diffusion capacity

- B. Compliance
- C. Bronchial Provocation
- D. Exercise Physiology and Exercise Studies
 - a. Equipment
 - b. Exercise in Disease
- 5. Special Studies
 - A. P50
 - B. Hypoxic Studies
 - C. Hypercarbic Studies
 - D. P100
 - E. Altitude Simulation
- 6. Bronchoscopy
 - A. Techniques
 - B. Indications
 - C. Patient Selection and Preparation
 - D. Hazards and Complications
- 7. Pulmonary Rehabilitation
 - A. Functional Deterioration in Patients with Chronic Lung Disease
 - B. Educational Program Structure
 - C. Patient Assessment
 - D. Nutritional Assessment
 - E. Outcomes and Progress Documentation
- 8. Respiratory Homecare
 - A. Goals
 - B. Reimbursement
 - C. Equipment and Procedures
 - a. Oxygen Therapy
 - b. Mechanical Ventilation
 - c. Adjunct Therapies
 - D. Safety Considerations
- 9. Disaster Management
 - A. Scenarios resulting in mass-casualty respiratory failure
 - B. Role in disaster planning and management
 - C. Special equipment and devices
 - D. Triage systems of patients in mass-casualty respiratory failure

7. REPRESENTATIVE METHODS OF INSTRUCTION:

Typical methods of instruction may include:

- A. Lecture
- B. Activity
- C. Observation and Demonstration
- D. Other (Specify): Computer-assisted learning exercises. Reading assignments. Pulmonary physiology interpretation case studies.

8. REPRESENTATIVE ASSIGNMENTS

Representative assignments in this course may include, but are not limited to the following:

Writing Assignments:

Weekly respiratory pulmonary diagnostic calculation problems to better understand data assessment; 5-7 pages Weekly evaluation of patient case scenarios for diagnostic cases; 5-7 pages Weekly written assignment pertaining to various application of respiratory concepts; 5-7 pages

Reading Assignments:

Weekly selected readings from text and current journal articles; 5-15 pages

Other Outside Assignments:

Weekly group discussion board participation

9. REPRESENTATIVE METHODS OF EVALUATION

Representative methods of evaluation may include:

- A. Class Performance
- B. Class Work
- C. Exams/Tests

- D. Quizzes
- E. Written examination
- F. Effective assessment, evaluation, treatment plan formulation of patient case scenarios.

10. **REPRESENTATIVE TEXT(S):**

Possible textbooks include:

- A. Kacmarek, R., Stoller, J., Heuer, A. *Egan's Fundamentals of Respiratory Care***, 11 ed. https://caccl-smccd.primo.exlibrisgroup.com/permalink/01CACCL_SMCCD/s0te9o/alma991000643411505308:: Mosby, 2017

Origination Date: November 2024

Curriculum Committee Approval Date: January 2025

Effective Term: Fall 2025

Course Originator: Heather Esparza

Skyline College
Official Course Outline

1. **COURSE ID:** RPTH 485 **TITLE:** Clinical Medicine Seminar and Professional Development
Units: 2.0 units **Hours/Semester:** 32.0-36.0 Lecture hours; 64.0-72.0 Homework hours; 96.0-108.0 Total Student Learning hours
Method of Grading: Letter Grade Only
Prerequisite: Successful completion of the first year Respiratory Care Program.

2. **COURSE DESIGNATION:**
Degree Credit
Transfer credit: CSU

3. **COURSE DESCRIPTIONS:**
Catalog Description:

Students will reinforce their current knowledge of respiratory care practices in selected areas of basic therapeutics, diagnostic procedures and critical care. Varying modes of instruction will be used – laboratory, research and skill development. Integration of pathology, pathophysiology, diagnostics techniques and therapeutic modalities through the utilization of patient case studies. Preparation for job placement by supporting professional development.

4. **STUDENT LEARNING OUTCOME(S) (SLO'S):**

Upon successful completion of this course, a student will meet the following outcomes:

1. Approach patient cases in a systematic manner to synthesize and analyze assessment and diagnostic data to formulate and modify cardiorespiratory treatment plans.
2. Effectively dialogue with physicians to formulate and modify cardiorespiratory treatment plans.
3. Engage effectively with employers for employment in the field of Respiratory Care.

5. **SPECIFIC INSTRUCTIONAL OBJECTIVES:**

Upon successful completion of this course, a student will be able to:

1. Define the difference between objective and subjective data and the difference between signs and symptoms
2. Describe the value in reviewing the following parts of a patient's chart: a. Admission notes b. Physician orders c. Progress notes
3. Organize, identify, and appropriately analyze assessment and diagnostic data pertinent to decision formulation
4. Identify and recommend proper treatment modalities based on data assessment
5. Discuss information with the health care team in an organized and rationale manner to modify and improve quality of treatment plans
6. Explore work tasks, settings, salary, job opportunities and resources corresponding to the Respiratory Care career
7. Support Respiratory lab activities for Freshmen students learning basic therapeutics
8. Perform community service focused on Respiratory Care professional development

6. **COURSE CONTENT:**

Lecture Content:

1. Patient History and Assessment Data
 - A. Past History
 - B. Current History
 - C. Pulmonary Physical Assessment
 - D. Basic Cardiac Assessment
 - E. Other Physical Assessment
 - F. Laboratory Data
 - G. Basic Awareness of Cardio Pulmonary Problems
 - a. Chronic Obstructive Pulmonary Disease
 - b. Asthma
 - c. Consolidation/Pneumonia
 - d. Atelectasis
 - e. Congestive Heart Failure/Pulmonary Edema

- f. Pneumothorax
- g. Pleural Effusion
- 2. Order Interpretation
 - A. Indications, Contraindications and Hazards/Complications of Respiratory Therapy Modalities
 - a. Cardiopulmonary Resuscitation
 - b. Oxygen Therapy
 - c. Humidity and Aerosol Therapy
 - d. Lung Expansion Therapy
 - e. Airway Clearance
 - f. Ventilator Initiation and Management
- 3. Treatment Recommendation
 - A. Patient Condition
 - a. History
 - b. Bedside Assessment
 - B. Diagnostic Testing
 - a. Noninvasive Monitoring
 - b. Invasive Monitoring
 - c. Radiographic Results
 - d. Laboratory Data
 - e. Pulmonary Function
 - C. Health Care Team Communication
 - a. Participants
 - i. Patient and Family
 - ii. Physicians
 - iii. Nurses
 - iv. Respiratory Care Practitioners
 - v. Radiologists
 - vi. Pharmacists
 - vii. Dieticians
 - viii. Specialists
 - b. Information
 - i. Preparation
 - ii. Organization
- 4. Job Market
 - A. Preparing Resume
 - B. Attending Respiratory Care job fair
 - C. Participation in mock interview
 - D. Learn how to conduct a success job search
- 5. Professional Development
 - A. Competency training
 - B. Learning process engagement
 - C. Interview skills
 - D. Resumes
 - E. Employer colleague networking

7. REPRESENTATIVE METHODS OF INSTRUCTION:

Typical methods of instruction may include:

- A. Lecture
- B. Directed Study
- C. Activity
- D. Discussion
- E. Guest Speakers
- F. Individualized Instruction
- G. Observation and Demonstration
- H. Other (Specify): Computer-assisted learning exercises. Patient case scenarios.

8. REPRESENTATIVE ASSIGNMENTS

Representative assignments in this course may include, but are not limited to the following:

Writing Assignments:

Critical thinking will be required of students in such weekly assignments and activities as written and oral analysis and evaluation of readings and/or classroom materials, class discussion of readings, lectures.

- A. Weekly computer assisted learning exercises; 5-7 pages
- B. Students will write a comprehensive final case study 10 to 15 pages
- C. Weekly draft written progress reports during the semester; 5-7 pages

Reading Assignments:

- A. Weekly selected readings from text and current journal, 10 -15 articles. Students will be reading 300 - 450 pages material as part of the course.
- B. Readings may include a general survey text, an anthology of articles, monographs, and/or any combination of these works which require individual comprehension at both a factual and interpretive level.
- C. Critical thinking will be required of students in such assignments and activities as written and oral analysis and evaluation of readings and/or classroom materials, class discussion of readings, lectures, comments, and ideas, and assessing and evaluating historical data and theses.

Other Outside Assignments:

- A. Weekly respiratory calculation problems to better understand data assessment
- B. Weekly group and individual evaluation of patient case scenarios
- C. Weekly computer assisted learning exercises
- D. Weekly case study presentation
- E. Weekly discussion board participation
- F. Weekly outside class assignments may include any, some, or all of the following: reading, researching, writing, critiquing, summarizing, analyzing, and/or evaluating.

9. REPRESENTATIVE METHODS OF EVALUATION

Representative methods of evaluation may include:

- A. Class Participation
- B. Class Performance
- C. Exams/Tests
- D. Field Trips
- E. Group Projects
- F. Oral Presentation
- G. Papers
- H. Portfolios
- I. Projects
- J. Quizzes
- K. Research Projects
- L. Written examination
- M. Effective assessment, evaluation, treatment plan formulation of patient case scenarios. Group case study project and class room. final presentation.

10. REPRESENTATIVE TEXT(S):

Possible textbooks include:

- A. Dean R. Hess. *Respiratory Care: Principles and Practice***, 4th ed. Jones & Bartlett, 2021

Other:

- A. Vary depending on specific assignment and outlined in learning contract.
- B. ** This title is available through Skyline College Library's e-Book collection, and students can access it for free by using their SMCCCD credentials.

https://caccl-smccd.primo.exlibrisgroup.com/permalink/01CACCL_SMCCD/s0te9o/alma9910007878588053

Origination Date: January 2023

Curriculum Committee Approval Date: May 2023

Effective Term: Fall 2023

Course Originator: Heather Esparza

Skyline College
Official Course Outline

1. COURSE ID: RPTH 488 **TITLE:** Clinical Clerkship IV

Units: 6.5 units **Hours/Semester:** 312.0-351.0 Field Experience hours; 312.0-351.0 Total Student Learning hours

Method of Grading: Pass/No Pass Only

Prerequisite: Completion of the first year Respiratory Care program.

2. COURSE DESIGNATION:

Degree Credit

Transfer credit: CSU

3. COURSE DESCRIPTIONS:

Catalog Description:

Continued supervised experience in the Adult Intensive Care Units. Orientation and supervised experience in Neonatal/Pediatric Care Units of a local hospital and other specialty areas. Emphasis is on attaining proficiency in skills performed by a Respiratory Care Practitioner in these areas.

4. STUDENT LEARNING OUTCOME(S) (SLO'S):

Upon successful completion of this course, a student will meet the following outcomes:

1. Competently assess and apply respiratory therapeutics and management to critically ill adult, pediatric, and neonatal patients.
2. Assess, apply, and effectively manage invasive and non-invasive positive pressure ventilation to adult, pediatric and neonatal critically ill patients.
3. Complete a clinical internship to support transition from student to practitioner in the healthcare setting.

5. SPECIFIC INSTRUCTIONAL OBJECTIVES:

Upon successful completion of this course, a student will be able to:

1. Expand on the purpose of patient and staff communication.
2. Effectively engage in patient hand off, interdisciplinary rounds, and relevant in-services within adult, pediatric, and neonatal areas.
3. Describe the value of patient history and perform a chart review for pertinent data in the adult, pediatric, and neonatal intensive care units.
4. Determine objectives for adult, pediatric, and neonatal patient care and evaluate if these objectives are met.
5. Relate information regarding therapeutic procedures practiced in the lab with actual adult, pediatric and neonatal patient care.
6. Demonstrate a professional attitude when working with other health care professionals, patients, and visitors in a hospital setting.
7. Continue competency and proficiency in adult, pediatric, and neonatal critical care procedures.
8. Gain exposure to areas of practice outside the acute patient care units.
9. Complete a clinical rotation that will support transition from student to practitioner in the healthcare workforce.

6. COURSE CONTENT:

Lab Content:

Each of the days in clinical, the student will perform procedures listed in the objectives towards competency and applied mastery. With each of these procedures, the student will perform a chart review, determine objectives for therapy, delivery therapy competently, evaluate the patient, and communicate these and the results of the therapy to the instructor and/or the student preceptor.

The following skills will be practiced to competency and mastery:

- Introduction and appropriate interaction with nursing services, medical staff, emergency department, diagnostic services, outpatient services, and other applicable ancillary departments
- Engage in patient rounds
- Identification and review of patient chart components
- Professional and ethical interaction with other health professionals, patients, and visitors

The following respiratory care therapeutics will be observed practiced for competency and mastery for the adult, pediatric, and neonatal intensive care areas:

1. Critical Care Procedures

- A. Hand Ventilation Procedures
 - B. Airway Management
 - C. Extubation
 - D. Ventilator Set-up For Standby
 - E. Ventilator Management and Discontinuance
 - F. Weaning
 - G. Airway Clearance
 - H. Equipment Care and Cleaning
2. Neonatal/pediatric Acute Care Areas
- A. High Risk Delivery and Stabilization
 - B. Hand Ventilation Procedures
 - C. Airway Management
 - D. Extubation
 - E. Ventilator Set-Up For Standby
 - F. Ventilator Management and Discontinuance
 - G. Weaning
 - H. Airway Clearance
 - I. Equipment Care and Cleaning
3. Specialty Rotation
- A. Pulmonary Function Lab
 - B. Subacute
 - C. Long term acute care
 - D. Home Care
 - E. Pulmonary Rehabilitation
 - F. Neuromuscular Disease Clinic

4. Chart Review

5. Patient Assessment

6. Therapy Objectives

7. Communication of Patient Care with Preceptor and Health Care Providers

Final clinical rotation to include a 120 hour “internship” program that will cover approximately 4 weeks.

The primary goal of the internship is to allow the student an opportunity to spend additional clinical time in an area of practice that is of particular interest and will support transition to the workforce. Site and objectives are to be determined by the student with the advice of the Program Director.

7. REPRESENTATIVE METHODS OF INSTRUCTION:

Typical methods of instruction may include:

- A. Critique
- B. Field Experience
- C. Individualized Instruction
- D. Observation and Demonstration
- E. Work Experience
- F. Other (Specify): Mentorship between student and practitioner. Observation, practice and return demonstration under supervision during delivery of patient care.

8. REPRESENTATIVE ASSIGNMENTS

Representative assignments in this course may include, but are not limited to the following:

Writing Assignments:

- Electronic medical record charting under clinical preceptor supervision for 3-5 patients/week (Total number may change based on number of assigned patients and detail of patient summary)
- Daily assigned self-evaluation (1 page each)

Reading Assignments:

Assigned evidenced based support/research related to patient care techniques employed during clinical experience. This will generally be in the form of a peer review journal article of 5 - 25 pages/semester.

Other Outside Assignments:

- One case history presentation (5-7 pages)
- Weekly discussion board participation (1 page)
- One written summary of internship experiences, integrated goals, and a self-reflection of overall performance (4-6 pages)

9. REPRESENTATIVE METHODS OF EVALUATION

Representative methods of evaluation may include:

- A. Class Participation
- B. Class Performance
- C. Class Work
- D. Complete assigned procedural competencies. Daily evaluation (theory, practical application, appearance, attendance, communication, theory and application understanding and integration). Written evaluation (theory, practical application, appearance, attendance, communication, theory and application understanding and integration).

10. **REPRESENTATIVE TEXT(S):**

Other:

- A. Respiratory Care Student Clinical Manual. In-house produced manual.

Origination Date: October 2024

Curriculum Committee Approval Date: February 2025

Effective Term: Fall 2025

Course Originator: Heather Esparza

Skyline College
Official Course Outline

1. **COURSE ID:** RPTH 490 **TITLE:** Neonatal and Pediatric Respiratory Care
Units: 3.0 units **Hours/Semester:** 32.0-36.0 Lecture hours; 48.0-54.0 Lab hours; 64.0-72.0 Homework hours; 144.0-162.0 Total Student Learning hours
Method of Grading: Letter Grade Only
Prerequisite: Completion of year 1 Respiratory Care Program content.

2. **COURSE DESIGNATION:**
Degree Credit
Transfer credit: CSU

3. **COURSE DESCRIPTIONS:**
Catalog Description:
Examines the delivery of Respiratory Care on an age specific population by applying the normal and abnormal cardiorespiratory anatomy and physiology of the newborn and pediatric patient. Provides students with the necessary background to pursue further studies in this specialized area.

4. **STUDENT LEARNING OUTCOME(S) (SLO'S):**
Upon successful completion of this course, a student will meet the following outcomes:
 1. Evaluate neonatal/pediatric pulmonary diseases through assessment of etiology, pathophysiology, bedside critical observations and clinical data.
 2. Evaluate and analyze bedside assessment and clinical data to formulate effective neonatal/pediatric respiratory treatment plans.
 3. Demonstrate competency in neonatal/pediatric therapies and procedures.

5. **SPECIFIC INSTRUCTIONAL OBJECTIVES:**
Upon successful completion of this course, a student will be able to:
 1. Differentiate between normal and abnormal fetal development.
 2. Discuss and perform assessment of the healthy and ill neonate.
 3. Demonstrate airway management and resuscitation techniques of the neonate.
 4. Identify etiology, pathophysiology, clinical findings of respiratory disease and competently apply respiratory care modalities in the neonatal and pediatric patient.
 5. Master the basic foundation and competent delivery of respiratory care with this age specific population.
 6. Differentiate the normal and abnormal cardiorespiratory anatomy and physiology of the newborn and pediatric patients.

6. **COURSE CONTENT:**
Lecture Content:
 1. Conception to Birth
 - A. Embryologic Development of the Fetus
 - B. Development of the Pulmonary System
 - C. Fetal Lung Fluid and Surfactant
 - D. Cardiovascular System and Fetal Circulation
 - E. Development and Function of Intrauterine Structures
 2. Assessment of Fetal Growth and Development
 - A. Modalities to Assess Fetal Status
 - a. Amniocentesis
 - b. Fetal Heart Rate Monitoring
 - B. Factors Identifying a High-Risk Pregnancy
 3. Labor, Delivery and Physiological Changes After birth
 - A. Stages of Normal Delivery
 - B. Abnormal Labor and Delivery
 - a. Prematurity and Tocolysis
 - b. Dystocia
 - c. Placental Abnormalities
 - C. Adaption to Extrauterine Life
 4. Resuscitation of the Newborn

- A. Neonatal Resuscitation Guidelines for the Neonate
- B. Skills
 - a. Hand Ventilation
 - b. Suctioning
 - c. ET Tube Securement
 - d. Airway management
 - e. Skin integrity
- 5. Physical Assessment of the Neonate and Pediatric Patient
 - A. History
 - B. Gestational Age Assessment
 - C. Physical Examination
 - a. Inspection, Palpation, Percussion, Auscultation
- 6. Respiratory Care Procedures
 - A. Airway Clearance
 - B. Aerosolized Medication Therapy
 - C. Surfactant delivery
 - D. Oxygen Therapy
 - E. Specialized gas delivery
 - F. Non-invasive Monitoring
- 7. Review of Ventilation Concepts and Application of the Following Mechanical Ventilation Strategies:
 - A. Nasal Continuous Positive Pressure Ventilation
 - B. Non-invasive ventilation
 - C. Invasive mechanical ventilation
 - D. Conventional modes of ventilation- Pressure/Volume
 - E. Hybrid modes of ventilation
 - F. NAVA
 - G. HFOV
 - H. HFJV
- 8. Management of the Neonate to Include Etiology, Pathophysiology, Clinical Findings, and Respiratory Care Including Acceptable Oxygenation and Ventilation Strategies for the Following Acute and Chronic Cardiopulmonary Diseases:
 - A. Transtachypnea of the Newborn
 - B. Respiratory Distress Syndrome
 - C. Meconium Aspiration
 - D. Air Leak
 - a. Pulmonary Interstitial Emphysema
 - b. Pneumothorax
 - E. Pneumonia and Infectious Diseases
 - F. Bronchopulmonary Displasia
 - G. Congenital Heart Disease
- 9. Management of the Pediatric Patient to Include Etiology, Pathophysiology, Clinical Findings, and Respiratory Care Including Acceptable Oxygenation and Ventilation Strategies for the Following Acute and Chronic Cardiopulmonary Diseases:
 - A. Asthma/Reactive Airways Disease (RAD)
 - B. Cystic Fibrosis
 - C. Croup
 - D. Epiglottitis
 - E. RSV/Bronchiolitis

Lab Content:

Weekly Lab content:
 Fetal Circulation
 Neonatal Resuscitation
 Disease of Premature Neonate
 Disease of Full-term Neonate/Infant
 Abdominal Defects and X-Rays
 Acyanotic Heart Disease
 Cyanotic Heart Disease
 Oxygen Therapy and Non-Invasive Ventilation
 Invasive Mechanical Ventilation
 ECMO

7. REPRESENTATIVE METHODS OF INSTRUCTION:

Typical methods of instruction may include:

- A. Lecture
- B. Lab
- C. Activity
- D. Discussion
- E. Guest Speakers
- F. Observation and Demonstration
- G. Other (Specify): Group discussion and assignments. Computer-assisted learning exercises. Patient case scenarios and data analysis.

8. REPRESENTATIVE ASSIGNMENTS

Representative assignments in this course may include, but are not limited to the following:

Writing Assignments:

- Written reflections and discussion board posts pertaining to various application of respiratory concepts in neonatology and pediatrics (1-3 pages/week).
- Final written assignment, essay pertaining to a neonatal or pediatric respiratory disease process 5-7 pages/semester.

Reading Assignments:

- A. Weekly selected readings from current journal articles. Student will be reading 400 to 550 pages of journal article content during the course.

Other Outside Assignments:

- A. Respiratory calculation problems to gain better understand data assessment
- B. Group and individual evaluation of patient case scenarios
- C. Lab assignments
- D. Computer assisted learning exercises
- E. Other out-of-class assignments may include:
 - a. Evaluation of patient case scenarios
 - b. Computer assisted learning exercises
 - c. Discussion board participation

9. REPRESENTATIVE METHODS OF EVALUATION

Representative methods of evaluation may include:

- A. Class Participation
- B. Class Performance
- C. Class Work
- D. Exams/Tests
- E. Field Trips
- F. Group Projects
- G. Homework
- H. Lab Activities
- I. Oral Presentation
- J. Papers
- K. Quizzes
- L. Research Projects
- M. Simulation
- N. Written examination
- O. Exams including multiple choice, short answer, and short essay questions. Effective assessment, evaluation, treatment plan formulation of patient case scenarios. Competency based lab practicum. Competent performance and application of respiratory procedures. Comprehensive final exam.

10. REPRESENTATIVE TEXT(S):

Possible textbooks include:

- A. Brian K. Walsh. *Neonatal and Pediatric Respiratory Care*, 6th ed. Saunders, 2022

Origination Date: October 2024

Curriculum Committee Approval Date: November 2024

Effective Term: Fall 2025

Course Originator: Heather Esparza

Skyline College
Official Course Outline

1. **COURSE ID:** RPTH 495 **TITLE:** Respiratory Care Board Examination Preparation and Review
Units: 2.0 units **Hours/Semester:** 32.0-36.0 Lecture hours; 64.0-72.0 Homework hours; 96.0-108.0 Total Student Learning hours
Method of Grading: Grade Option (Letter Grade or Pass/No Pass)
Prerequisite: Completion of the first year Respiratory Care Program.

2. **COURSE DESIGNATION:**

Degree Credit
Transfer credit: CSU

3. **COURSE DESCRIPTIONS:**

Catalog Description:

Designed for practicing and preparing second-year Respiratory Therapy Students as Respiratory Care Practitioners (RCP) in California. After completing the Respiratory Care Program, graduates must achieve a high cut score in their Therapist Multiple Choice (TMC) Exam to become eligible for the Clinical Simulation Exam (CSE). Next, graduates must pass the CSE to earn their Registered Respiratory Therapy (RRT) Credentials from The National Board for Respiratory Care (NBRC). Designed to review the information from the two-year program to prepare graduates better and improve their potential to pass these examinations.

4. **STUDENT LEARNING OUTCOME(S) (SLO'S):**

Upon successful completion of this course, a student will meet the following outcomes:

1. Demonstrate and evaluate strategies to successfully pass the sample Therapist Multiple Choice (TMC) credentialing exam at a high cut score.
2. Demonstrate and evaluate strategies to successfully pass the sample Clinical Simulation Exam portion of the 'Registered Respiratory Therapist's credentialing exam.

5. **SPECIFIC INSTRUCTIONAL OBJECTIVES:**

Upon successful completion of this course, a student will be able to:

1. Identify process expectations for the therapist multiple-choice (TMC), and clinical simulation examinations
2. Systematically review body of information presented throughout respiratory therapy program to reinforce knowledge
3. Build confidence in students to attempt and successfully complete exams.
4. Learn testing strategies to take the TMC and CSE NBRC Board Exam, efficiently and in a timely manner.
5. Complete sample examinations pertaining to therapist multiple-choice (TMC) and clinical tests.

6. **COURSE CONTENT:**

Lecture Content:

1. Overview of Examination Process and Licensure for the State of California
 - A. National Board for Respiratory Care
 - a. Therapist Multiple Choice
 - b. Clinical Simulation Exam
2. Consumer Affairs
 - a. Respiratory Care Board
 - b. Licensure Process
3. Review the Following Respiratory Care Modules:
 - A. Patient Assessment,
 - a. Disease Recognition to Identify Proper Treatment Plan for Adult, Neonatal and Pediatric Assessment
 - i. Gathering Data and Information
 - ii. Identification of Pulmonary Disease and Severity through Pulmonary Function Testing, Other Laboratory Testing, and Imaging Related to Cardiopulmonary
 - iii. Forming Decision on Treatment Plans and Different Therapy Approach per Disease Severity
 - iv. Modifying Respiratory Care Plan

- b. Signs, and Symptoms
 - i. Identifying Normal and Abnormal Values with the following:
 - a. Thoracic, Breathing Pattern, and Auscultation Assessment
 - b. Respiratory Anatomy and Physiology
 - c. Adult and Critical Care Assessment
 - d. Metabolic Impact to Cardiopulmonary
 - e. Assessment of Oxygenation and Ventilation
 - f. Modifying Respiratory Care Plans
 - B. Airway Management
 - C. Oxygen Therapy, Aerosol, and Other Gas Therapy
 - D. Alveolar Recruitment, and Lung Expansion Therapy
 - E. Airway Clearance Therapy
 - a. Postural Drainage and Chest Physiotherapy Techniques
 - F. Cardiac Monitoring, Hemodynamics
 - G. Arterial Blood Gas
 - H. Mechanical Ventilation on Adult, Neonatal, and Pediatric, including Invasive and Non-Invasive Ventilation
 - a. Mechanical Ventilation Set Up
 - b. Modification of Mode and Other Settings
 - c. Liberation from Mechanical Ventilation
 - d. Recognition of Ventilator Associated Events
 - e. Selection of Proper Actions to Treat Both Obstructive and Restrictive Lung Pathophysiologies
 - i. Acute respiratory distress syndrome (ARDS) pathways
 - a. Chronic obstructive pulmonary disease (COPD)
 - ii. Other Airway and Lung Diseases
 - I. Respiratory Pharmacology
 - J. Respiratory Homecare Procedures
 - a. Pulmonary Rehab
 - K. Infection Control and Special Procedures
 - L. Respiratory Related Formulas and Calculations

7. REPRESENTATIVE METHODS OF INSTRUCTION:

Typical methods of instruction may include:

- A. Lecture
- B. Activity
- C. Discussion
- D. Other (Specify): 1. Learning testing strategies through: a. Sample tests and reviews. b. Weekly discussion assignments. c. Assigned readings and videos d. Course Project e. Weekly quizzes that simulate the TMC exam from NBRC. f. Practice the Therapist Multiple-Choice (TMC) exam and Clinical Simulation Exam through the National Board of Respiratory Care (NBRC) Website.

8. REPRESENTATIVE ASSIGNMENTS

Representative assignments in this course may include, but are not limited to the following:

Writing Assignments:

Writing assignments will consist of:

- Weekly discussion board posts that consists of 1-3 pages.
- Course reflection essay (500 words)

Reading Assignments:

Weekly reading assignments may include:

- Open Educational Resources Curated for the RPTH-495 course
- Reading assignments and other resources will vary with course objective ranging from 5 - 30 pages.

Other Outside Assignments:

Other weekly out-of-class assignments may include:

- Utilization of other study guides and exam practices for the TMC Exam and Clinical Simulation Exam.

9. REPRESENTATIVE METHODS OF EVALUATION

Representative methods of evaluation may include:

- A. Exams/Tests
- B. Projects
- C. Quizzes

- D. Simulation
- E. Written examination
- F. Online Comprehensive Exams (National Board of Exam TMC and CSE practice questions). Asynchronous multiple choice exam through Canvas (Learning Management System for Skyline).

10. **REPRESENTATIVE TEXT(S):**

Other:

- A. Website Resources may include:

Respiratory Therapy Zone Test-Bank Page [RespiratoryTherapyZone.com](https://www.respiratorytherapyzone.com)

National Board for Respiratory Care Free Practice Exams
<https://www.nbrc.org/examinations/rrt/#free-practice-exam>

Skyline Library's Learning Express's RT Certification practice exams.
<https://guides.skylinecollege.edu/az.php>

Origination Date: March 2023

Curriculum Committee Approval Date: April 2023

Effective Term: Fall 2023

Course Originator: Heather Esparza



**Skyline
College**

Three Year Assessment Cycle for Fall 2025- Spring 2028

Program Name: Respiratory Care (RPTH)

Assessment Coordinator: Anrey Bartoszynski

	2025-2026	2026-2027	2027-2028
Fall	RPTH 460 RPTH 490 RPTH B60 COUN B10 SOCI B10	RPTH 410 RPTH 415 RPTH 420 RPTH B10 RPTH B30	RPTH 445 RPTH B40 COMM B10 SOSC B10
Spring	RPTH 480 RPTH 485 RPTH B20 RPTH B52	RPTH 430 RPTH 450 RPTH B15 RPTH B50	RPTH 495 RPTH B90
Featured ISLO	Critical and Creative Thinking	Lifelong Wellness	Effective Communication
Which of that year's course(s) will be used to assess the featured ISLO?	RPTH 460 RPTH 490 RPTH B60 RPTH B20 RPTH B52	COUN B10 SOCI B10	COMM B10 SOSC B10 RPTH B90

** Information Literacy and Community Engagement will be assessed in 2028-2029 and 2029-2030 respectively*