

## **Clinical/Respiratory Care (RSPT 1461)**



**Credit:**4 semester credits (0hours lecture, 32 hours clinic/lab)

**Prerequisite:** RSPT 1329, RSPT 1207, RSPT 2210, RSPT 1213, RSPT 1325, RSPT 1331, RSPT 1335, RSPT 1360

**Co-requisite:**

### **Course Description**

A health-related work-based learning experience that enables the student to apply specialized occupational theory, skills, and concepts. Direct supervision is provided by the clinical professional.

### **Required Textbook and Materials (furnished by students)**

- A. Scrubs
- B. Lab Coat
- C. watch with second hand
- D. goggles
- E. Scissors
- F. Stethoscope
- G. Black pens
- H. Calculator
- I. Name badge
- J. LIT Patch
- K. Tokens for modules- [www.ketteringseminars.com](http://www.ketteringseminars.com)
- L. Trajecsyst access
- M. Current Healthcare Provider Certification- CPR
- N. Daily clinical notebook
- O. Dana Oaks pocket guide for Respiratory Care (ISBN # 978-1-61669-785-3)
- P. ACLS – Advanced Cardiac Life Support class and book.  
Book is only obtained via the American Heart Association.  
<https://shop.aha.channing-bete.com> ISBN 978-1-61669-772-3

### **Course Objectives**

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

As outlined in the learning plan, apply the theory, concepts, and skills involving specialized materials, tools, equipment procedures, regulations, laws, and interactions within and among political, economic, environmental, social, and legal systems associated with the occupation and the business/industry and will demonstrate legal and ethical behavior, safety practices, interpersonal and teamwork skills, and appropriate written and verbal communication skills using the terminology of the occupation and the business/industry.

## 1. Clinical Knowledge & Application

- Apply respiratory care theories, concepts, and textbook knowledge to clinical scenarios.
- Assess, collect, and evaluate patient data, including medical records, history, and diagnostic results (e.g., chest assessment, X-ray interpretation).
- Determine the appropriateness of respiratory care plans and recommend evidence-based interventions.

## 2. Patient Care & Procedural Competency

- Perform and demonstrate competency in core respiratory care procedures, including oxygen therapy (nasal cannula, non-rebreather mask, air entrainment mask), pulse oximetry, aerosol delivery systems, incentive spirometry, mucus clearance adjuncts, and chest physiotherapy.
- Set up, administer, monitor, and evaluate patient responses to respiratory therapies.
- Modify respiratory care procedures based on patient response and clinical indicators.

## 3. Safety, Ethics, and Professional Responsibility

- Adhere to patient safety standards by integrating chart data and patient history to implement appropriate precautions.
- Maintain patient confidentiality in compliance with HIPAA, laws, and regulatory standards.
- Demonstrate professional, ethical, and accountable behavior in all clinical settings.

## 4. Communication & Documentation

- Demonstrate effective verbal and written communication using appropriate medical terminology.
- Accurately document patient care and interventions in the medical record.
- Deliver and receive patient handoff reports clearly and effectively.

## 5. Teamwork & Professional Competence

- Collaborate effectively as a member of the healthcare team.
- Demonstrate competency across the cognitive (knowledge), psychomotor (skills), and affective (professional behavior) domains.
- Meet performance benchmarks as documented in the program's evaluation system (e.g., Trajecsys).

## Course Outline

Competencies required for completion of this course.

### A. Tracheostomy Care

1. Equipment and patient preparation
2. Implementation of Procedure
3. Evaluate and monitor patient response
4. Follow-up to implementation, evaluation and monitoring.
5. Cognitive knowledge of procedure (indications, contraindications, equipment, troubleshooting, evaluating patient response, expected outcomes)
6. Satisfactory perform procedure. (Perform procedure accurately or be able to correct performance without injury to patient or decreasing effect of therapy given.

### B. Transport with oxygen

1. Equipment and patient preparation
2. Implementation of Procedure
3. Evaluate and monitor patient response
4. Follow-up to implementation, evaluation and monitoring.
5. Cognitive knowledge of procedure (indications, contraindications, equipment, troubleshooting, evaluating patient response, expected outcomes)
6. Satisfactory perform procedure. (Perform procedure accurately or be able to correct performance without injury to patient or decreasing effect of therapy given.

### C. Arterial Blood Gas Sample (stick)

1. Equipment and patient preparation
2. Implementation of Procedure
3. Evaluate and monitor patient response
4. Follow-up to implementation, evaluation and monitoring.
5. Cognitive knowledge of procedure (indications, contraindications, equipment, troubleshooting, evaluating patient response, expected outcomes)
6. Satisfactory perform procedure. (Perform procedure accurately or be able to correct performance without injury to patient or decreasing effect of therapy given.

### D. Arterial Blood Gas Sample (arterial line)

1. Equipment and patient preparation
2. Implementation of Procedure
3. Evaluate and monitor patient response
4. Follow-up to implementation, evaluation and monitoring.
5. Cognitive knowledge of procedure (indications, contraindications, equipment, troubleshooting, evaluating patient response, expected outcomes)
6. Satisfactory perform procedure. (Perform procedure accurately or be able to correct performance without injury to patient or decreasing effect of therapy given.

#### E. Arterial Blood Gas Analysis

1. Equipment and patient preparation
2. Implementation of Procedure
3. Evaluate and monitor patient response
4. Follow-up to implementation, evaluation and monitoring.
5. Cognitive knowledge of procedure (indications, contraindications, equipment, troubleshooting, evaluating patient response, expected outcomes)
6. Satisfactory perform procedure. (Perform procedure accurately or be able to correct performance without injury to patient or decreasing effect of therapy given.

#### F. Cuff Pressure monitoring

1. Equipment and patient preparation
2. Implementation of Procedure
3. Evaluate and monitor patient response
4. Follow-up to implementation, evaluation and monitoring.
5. Cognitive knowledge of procedure (indications, contraindications, equipment, troubleshooting, evaluating patient response, expected outcomes)
6. Satisfactory perform procedure. (Perform procedure accurately or be able to correct performance without injury to patient or decreasing effect of therapy given.

#### G. Pulmonary Mechanics

1. Equipment and patient preparation
2. Implementation of Procedure
3. Evaluate and monitor patient response
4. Follow-up to implementation, evaluation and monitoring.
5. Cognitive knowledge of procedure (indications, contraindications, equipment, troubleshooting, evaluating patient response, expected outcomes)
6. Satisfactory perform procedure. (Perform procedure accurately or be able to correct performance without injury to patient or decreasing effect of therapy given.

#### H. Suctioning (inline and sterile)

1. Equipment and patient preparation
2. Implementation of Procedure
3. Evaluate and monitor patient response
4. Follow-up to implementation, evaluation and monitoring.
5. Cognitive knowledge of procedure (indications, contraindications, equipment, troubleshooting, evaluating patient response, expected outcomes)
6. Satisfactory perform procedure. (Perform procedure accurately or be able to correct performance without injury to patient or decreasing effect of therapy given.

#### I. Securing artificial airway

1. Equipment and patient preparation
2. Implementation of Procedure

3. Evaluate and monitor patient response
4. Follow-up to implementation, evaluation and monitoring.
5. Cognitive knowledge of procedure (indications, contraindications, equipment, troubleshooting, evaluating patient response, expected outcomes)
6. Satisfactory perform procedure. (Perform procedure accurately or be able to correct performance without injury to patient or decreasing effect of therapy given.

Competencies required within **simulation in the lab – not clinical competency**

A. ABG sampling

1. Equipment and patient preparation
2. Implementation of Procedure
3. Evaluate and monitor patient response
4. Follow-up to implementation, evaluation and monitoring.
5. Cognitive knowledge of procedure (indications, contraindications, equipment, troubleshooting, evaluating patient response, expected outcomes)
6. Satisfactory perform procedure. (Perform procedure accurately or be able to correct performance without injury to patient or decreasing effect of therapy given.

B. ABG sampling Arterial Line

1. Equipment and patient preparation
2. Implementation of Procedure
3. Evaluate and monitor patient response
4. Follow-up to implementation, evaluation and monitoring.
5. Cognitive knowledge of procedure (indications, contraindications, equipment, troubleshooting, evaluating patient response, expected outcomes)
6. Satisfactory perform procedure. (Perform procedure accurately or be able to correct performance without injury to patient or decreasing effect of therapy given.

C. Capillary sampling

1. Equipment and patient preparation
2. Implementation of Procedure
3. Evaluate and monitor patient response
4. Follow-up to implementation, evaluation and monitoring.
5. Cognitive knowledge of procedure (indications, contraindications, equipment, troubleshooting, evaluating patient response, expected outcomes)
6. Satisfactory perform procedure. (Perform procedure accurately or be able to correct performance without injury to patient or decreasing effect of therapy given.

D. Transcutaneous Monitoring

1. Equipment and patient preparation
2. Implementation of Procedure
3. Evaluate and monitor patient response
4. Follow-up to implementation, evaluation and monitoring.
5. Cognitive knowledge of procedure (indications, contraindications, equipment, troubleshooting, evaluating patient response, expected outcomes)

6. Satisfactory perform procedure. (Perform procedure accurately or be able to correct performance without injury to patient or decreasing effect of therapy given.

## Grade Scale

- A = 90 -100
- B = 80 - 89
- C = 70-79
- D = 60-69
- F = less than 60

## Course Evaluation

Final Grades will be calculated according to the following criteria.

Clinical evaluation	40%
Modules:	20%
Final Exam	30%
Physician contact: (20 points)	10%

Student must demonstrate competency in all procedures of the course outline within the simulation lab and also the clinical setting. Student will receive an F in the course if competency is not obtained.

Student must obtain the ACLS credential. If not achieved, it will result in an F in the course.

## Course requirements

- A. Competency in all procedures in Course Outline.
- B. Modules: ([www.ketteringseminars.com](http://www.ketteringseminars.com)) – must turn in grade sheet or submit via blackboard on Mondays.  
CSE- Pulmonary 6,7,8,9,10,11,12,13,14,15,18,19,20  
TMC- Mechanical Ventilation A, B, C, D, E
- C. If student receives a score of 3 or less, on a section in the clinical evaluation. Student will receive a plan for improvement. Student must then score a 3 or higher in that category to continue within the RC Program.
- D. 20 Physician Contact points.

## Course Policies

1. As outlined in the Respiratory Care Handbook.
2. Four absences allowed (four - 8-hour shifts)
3. Four absences are allowed without makeup.
4. If a student has perfect attendance, they may take the four days of clinics off as long as all the coursework is completed and submitted prior to these days being taken off.
5. Your Absence on Mondays is highly discouraged. You will miss some very valuable time with skill practice.

As Outlined in the Respiratory Care Handbook.

*According to LIT policy: It is the student's responsibility to familiarize himself or herself with the LIT Student Handbook and the Respiratory Care program student handbook.*

*Violation of the policies listed in the LIT Student Handbook and/or the Respiratory Care program student handbook will result in appropriate action being taken. Attendance is expected. Students are allowed 4 clinical absence per semester, with or without a Dr.'s excuse. Each absence in excess of the allotted absences will result in a 10% reduction, per absence, in the student's final class grade. Example: 1 excessive absence = 10% reduction in final class grade, 2 excessive absences = 20% reduction in final class grade, etc. Deductions as a result of excessive absences will be applied to the student's final class grade at the end of the semester. Students with approved absences shall be allowed to make up examinations and written assignments without penalty. This privilege does not extend to unapproved absences. The determination of whether an absence is excused or approved is the responsibility of the instructor, except in the case of approved absence for an Institute-sponsored activity. If absences seriously interfere (whether approved or not) with performance the instructor may recommend to the Department Chair that the student be dropped from the course. Absences resulting from extenuating circumstances will be evaluated by the program Director and/or Director of Clinical Education on a case-by-case basis. Proper documentation will be required to demonstrate the nature of the extenuating circumstance.*

*Examples of extenuating circumstances, and documentation, include:*

*-Hospitalization of an immediate family member (Hospital/Physician documentation must be provided)*

*-Death of an immediate family member (Memorial Pamphlet must be provided)*

*Students are to follow the absenteeism policy for each course as defined in the course syllabi.*

*If the policy is not followed, the student may enter into a Level I or II offense as defined in the Code of Conduct and Disciplinary Policy. All approved excessive absences within the clinical setting will be made up after completion of the final clinical day. The date and time for makeup will be arranged by the Director of Clinical Education. **It is the student's responsibility to notify and provide documentation to the Director of Clinical Education for each absence.***

*If you are rotating through a facility for a special rotation, you are to have the manager/ therapist/staff member to sign verifying the date with time in and time out. Falsification of records is a Level III Offense. You are expected to adhere to your scheduled clinical rotation start and stop times.*

### **Technical Requirements (for courses using Blackboard)**

The latest technical requirements, including hardware, compatible browsers, operating systems, software, Java, etc. can be found online at:

[https://help.blackboard.com/en-us/Learn/9.1\\_2014\\_04/Student/015\\_Browser\\_Support/015\\_Browser\\_Support\\_Policy\\_A](https://help.blackboard.com/en-us/Learn/9.1_2014_04/Student/015_Browser_Support/015_Browser_Support_Policy_A)

functional broadband internet connection, such as DSL, cable, or WiFi is necessary to maximize the use of the online technology and resources.

### **Disabilities Statement**

The Americans with Disabilities Act of 1992 and Section 504 of the Rehabilitation Act of 1973 are federal anti-discrimination statutes that provide comprehensive civil rights for people with disabilities. Among other things, these statutes require that all students with documented disabilities be guaranteed a learning environment that provides for reasonable accommodations for their disabilities. If you believe you have a disability requiring accommodation, please contact the Special Populations Coordinator at (409) 880-1737 or visit the office located in the Cecil Beeson Building.

### **Artificial Intelligence Statement**

Lamar Institute of Technology (LIT) recognizes the recent advances in Artificial Intelligence (AI), such as ChatGPT, have changed the landscape of many career disciplines and will impact many students in and out of the classroom. To prepare students for their selected careers, LIT desires to guide students in the ethical use of these technologies and incorporate AI into classroom instruction and assignments appropriately. Appropriate use of these technologies is at the discretion of the instructor. Students are reminded that all submitted work must be their own original work unless otherwise specified. Students should contact their instructor with any questions as to the acceptable use of AI / ChatGPT in their courses.

### **Course Schedule**

This course requires 32 hours per week in the assigned clinical facility. Daily assignments are distributed by the clinical instructor.

### **Contact Information:**

DCE: Stacey Armstrong

Office: Gateway 107

Office hours: Posted outside office door. Additional times available with appointment.

Available for remediation or tutoring.

Contact: [smhall@lit.edu](mailto:smhall@lit.edu)

Phone: 409-247-4838