DOÑA ANA COMMUNITY COLLEGE MISSION, VISION & VALUES

Mission Statement

DACC is a responsive and accessible learning-centered community college that provides educational opportunities to a diverse community of learners in support of workforce and economic development.

Vision Statement

DACC will be a premier learning college that is grounded in academic excellence and committed to fostering lifelong learning and active, responsible citizenship within the community.

Values Statement

As a learning-centered community college, DACC is committed to the following core values:

Education that —

- offers lifelong learning opportunities
- fosters dynamic learning environments designed to meet the needs of our students
- guarantees equality of rights and access
- ensures integrity and honesty in the learning process
- provides comprehensive assessment of learning

Students who will be —

- respected for their diversity
- provided with a safe and supportive learning environment
- challenged to become critical and independent thinkers
- expected to take an active role in their learning process

Employees who —

- practice tolerance and inclusiveness in decision-making and shared governance
- encourage and support professional growth
- demonstrate high ethics and integrity
- encourage collaborative interaction among faculty and staff
- practice responsible fiscal management and personal accountability
- ensure equal opportunities for a diverse faculty and staff
Communities that —

- build partnerships, including educational alliances
- strengthen industry partnerships to provide workforce development services and programs in support of economic development
- develop and adapt instructional programs in response to changing economic needs

**WELCOME TO THE RESPIRATORY THERAPY PROGRAM**

The Respiratory Therapy Program faculty and staff wish to welcome you to the Associate Degree of Applied Science in Respiratory Care. We are pleased that you have chosen to study Respiratory at Doña Ana Community College. We encourage you to work diligently toward your goal as you embark on the journey to a new and exciting profession. We hope you will find personal and career happiness as a result of the growth and learning you are undertaking.

The Respiratory Therapy Handbook has been written as a guide for you. It contains important information about program objectives, policies, and the degree plan of the Respiratory Therapy Program. The respiratory faculty believes that this handbook will be a useful guide to your success as a respiratory student.

Please do not hesitate to talk with any of the Respiratory Faculty for further clarification regarding the information contained in this handbook. We are looking forward to assisting you in achieving your goal of becoming a Registered Respiratory Therapist.

**Please Note:** The Doña Ana Community College and the Respiratory Therapy Program reserves the right to make changes without prior notice in all policies, faculty assignments, time schedules, course assignments, courses, grading, curricula, course fees and all other matters contained in the Student Handbook, Course Modules, or any other rules or printed material pertinent to this Program. All program changes will be given to students in writing.
Accreditation

The Doña Ana Community College Respiratory Therapy Program is accredited by the Commission on Accreditation for Respiratory Care (CoARC) and prepares graduates for the Certification (CRT) and Registry (RRT) credentials by the National Board for Respiratory Care (NBRC) and for Licensure (RCP) by the State of New Mexico Respiratory Care Board and Texas Respiratory Care Board.

“Doña Ana Community College Respiratory Therapy Program is accredited by the Commission on Accreditation for Respiratory Care (CoARC) www.coarc.com.

Commission on Accreditation for Respiratory Care
1248 Harwood Road
Bedford, Texas 76021-4244
817.283.2835

DOÑA ANA COMMUNITY COLLEGE RESPIRATORY THERAPY PROGRAM GOALS

Goal: To prepare students as competent Registered Respiratory Therapy Practitioners (RRT)

Cognitive Domain: Upon successful completion of this program, the student will demonstrate the ability to recall, apply and analyze information relevant to his or her role as a Registry Eligible Respiratory Therapist.

Psychomotor Domain: Upon successful completion of this program, all students will demonstrate the technical skill necessary to function as a Registry Eligible Respiratory Therapist.

Affective Domain: Upon successful completion of this program, all students will demonstrate personal behaviors consistent with professional and employer expectations of a Registry Level Respiratory Therapist.

Keeping in line with the college’s mission of providing educational opportunities to a diverse community of learners in support of workforce and economic development, the program aims to prepare all students to become Registered Respiratory Therapists. The success of the program in meeting this goal is directly related to the following communities of interest:

Community Residents who desire a career in Respiratory Therapy and expect a quality educational experience (current and prospective students).

Potential Employers of the program’s graduates, including health care providers and institutions throughout the community

Respiratory Therapy Profession, which requires well, trained practitioners

Patients and Clients that program graduates will be responsible for providing care to

Physicians who use the skills of Respiratory Therapists in providing care for their clients
RESPIRATORY THERAPY PHILOSOPHY

Consistent with the Mission Statement of DACC, the Respiratory Faculty is committed to student success and to providing a quality educational experience in Respiratory to students from diverse geographic, economic and cultural backgrounds. The faculty believes that respiratory education belongs in an institution of higher learning where students have the opportunity to participate in many experiences with students and faculty from other disciplines. Teaching/learning is a continuous, dynamic, collaborative, life long process between teacher and student. Motivation is a key factor in the teaching/learning process. We believe faculty and students share responsibility and accountability for facilitating the teaching-learning process through developing an environment that is conducive to the process and is characterized by mutual respect, trust, and understanding. The Respiratory faculty recognizes the need to provide a variety of types of teaching-learning experiences to address the cognitive, affective, and psychomotor alterations which will occur and provide recognition of the uniqueness of each student’s needs. An environment in which students and teachers facilitates learning which is enhanced when both students and teachers are motivated to give and seek help from others.

The respiratory faculty believes that learning takes place from simple to complex concepts and is influenced by the holistic perceptions of the learner. Instructors facilitate student critical thinking by emphasizing and understanding of concepts within their context, identifying and challenging assumptions, and exploring alternatives and creative ways of thinking and acting. Students are taught the use of the respiratory process to enhance the application of theoretical concepts and skills to promote health from common to complex health deviations that occur throughout the life span. The students, using both evidenced based respiratory theory and the respiratory process will progress from the assessment and managing of care for the patient to providing preventive, acute and restorative care.

While the respiratory faculty recognizes that many changes have occurred in health care with new technology and new trends are continually emerging, the needs of this region are the priority. Therefore, the focus of the curriculum relates to individuals with acute or chronic conditions requiring care in a structured setting, while still providing the student with many community experiences.
The respiratory faculty believes that a graduate of this program can practice respiratory therapy effectively at the advanced level as a collaborative member of the health care team. Using principles from the growing body of respiratory therapy knowledge, the graduate will be able to assess patient needs, manage day to day care in a compassionate manner, make sound clinical decisions, evaluate patient response to therapy and supervise and guide colleagues so all will deliver quality care. The graduate of this program will also be aware of skills and limitations and will continually seek to expand cognitive and psychomotor knowledge. The respiratory therapy student will exhibit professional behaviors by taking an active interest in the issues confronting the profession and will practice in accordance with the dictates of accountability, responsibility, and competency.

**PHILOSOPHY & STANDARDS**
Students are responsible for knowing and abiding by the mission statement, philosophy, purpose, organizational framework and standards of the Respiratory Therapy Program and Doña Ana Community College.

**STATEMENT OF PURPOSE**
This handbook is designed to serve as an informational guide to assist in the orientation of new students and to clarify policies and procedures for all students enrolled in the Associate Degree: Applied Science for Respiratory Care. It is expected that each Respiratory Therapy student be familiar with the information contained within this handbook.

**NOTE:**
It is understood that any item in this handbook is subject to modification at any time by the proper administrative procedure. Background checks and drug testing will be done on all Respiratory Therapy Students.

**PROGRAM OBJECTIVES**
Upon completion of the Respiratory Therapy Program, the graduate can:

1. Perform, assess, and plan appropriate cardiopulmonary diagnostic procedures.
2. Administer therapeutic and life support procedures in the management of patients with cardiopulmonary impairment.
3. Evaluate therapeutic effectiveness of respiratory therapy modalities
4. Select, assemble, check, correct malfunctions, and assure cleanliness and calibration of respiratory care equipment.
5. Demonstrate the ability to perform as a member of a health care team in an effective and ethical manner.
6. Develop an awareness of organizational, legislative, and management principles as related to Respiratory therapy.
7. Develop skills and attitudes needed to maintain professional and technical competence.
8. Demonstrate the ability to communicate effectively
9. Demonstrate functional literacy in mathematics
10. Demonstrate functional literacy in computers
11. Demonstrate an awareness of the values and beliefs of the patient and other health care professionals
12. Demonstrate ability to perform advanced procedures available to the respiratory therapy professional
13. Demonstrate an ability to think abstractly, reason logically, and apply problem solving skills in the practice of respiratory therapy.

DISABILITIES POLICY

*Students with Disabilities* If you have, or believe you have, a disability, you may wish to self-identify. You may do so by providing documentation to the Office of Services for Students with Disabilities (SSD) located in Room 117 at the DACC Central Campus in Las Cruces (Gregg & Espina) Phone: Voice 527-7548, TTY 527-7647). Appropriate accommodations may then be provided for you.

If you have a condition which may affect your ability to exit the premises in any emergency or which may cause an emergency during class, you are encouraged to discuss this in confidence with the instructor and/or the Specialist, Services for Students with Disabilities. A brochure “Self-Disclosure, Don’t Presuppose,” is available in room 117 at the DACC Central Campus in Las Cruces (Gregg & Espina). If you have general questions about the Americans with Disabilities Act (ADA), call the ADA Coordinator at 527-7545.

**Non-Discrimination Policy**

Doña Ana Community College is committed to a policy of non-discrimination on the basis of race, gender, sexual orientation, national origin, disability, or other non-merit reasons, in admissions, educational programs or activities and employment, as required by applicable laws and regulations. Please see the DACC Catalog and the DACC Student Handbook for additional information.
<table>
<thead>
<tr>
<th>COURSE NUMBERS</th>
<th>TITLE</th>
<th>CREDITS</th>
<th>TERM</th>
</tr>
</thead>
<tbody>
<tr>
<td>RESP 110</td>
<td>Respiratory Therapy I</td>
<td>3</td>
<td>1st Semester</td>
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<tr>
<td></td>
<td><em>Introduction to basic respiratory care techniques</em></td>
<td></td>
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<tr>
<td>RESP 110L</td>
<td>Respiratory Therapy I Lab</td>
<td>2</td>
<td>1st Semester</td>
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<tr>
<td></td>
<td><em>Lab practice in basic respiratory care procedures</em></td>
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<tr>
<td>BIOL 227/OEEM</td>
<td>Cardio Pulmonary Diseases</td>
<td>3</td>
<td>1st Semester</td>
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<tr>
<td>201/HIT 140</td>
<td><em>Diagnosis and management of cardiopulmonary diseases</em></td>
<td></td>
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<tr>
<td>RESP 115</td>
<td>Respiratory Therapy Pharmacology</td>
<td>3</td>
<td>1st Semester</td>
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<tr>
<td></td>
<td><em>Concepts and principles of pharmacology for clinical practice and respiratory care</em></td>
<td></td>
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<tr>
<td>RESP 120</td>
<td>Respiratory Therapy II</td>
<td>3</td>
<td>2nd Semester</td>
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<tr>
<td></td>
<td><em>Basic respiratory techniques, continued from 110</em></td>
<td></td>
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<tr>
<td>RESP 120L</td>
<td>Respiratory Therapy II Lab</td>
<td>2</td>
<td>2nd Semester</td>
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<tr>
<td></td>
<td><em>Lab practice using equipment and simulations</em></td>
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<tr>
<td>RESP 124</td>
<td>Respiratory Therapy II Clinical</td>
<td>3</td>
<td>2nd Semester</td>
</tr>
<tr>
<td></td>
<td><em>Emphasis on oxygen modalities and arterial blood gases</em></td>
<td></td>
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<tr>
<td>RESP 210</td>
<td>Respiratory Therapy III</td>
<td>2</td>
<td>Summer I</td>
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<tr>
<td></td>
<td><em>Introduction of adult mechanical ventilator theory</em></td>
<td></td>
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<tr>
<td>RESP 210L</td>
<td>Respiratory Therapy III Lab</td>
<td>2</td>
<td>Summer I</td>
</tr>
<tr>
<td></td>
<td><em>Lab practice procedure of mechanical ventilator using equipment and simulations</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td>RESP 224</td>
<td>Respiratory Therapy III Clinical</td>
<td>3</td>
<td>Summer I</td>
</tr>
<tr>
<td></td>
<td><em>Emphasis on mechanical ventilators</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td>RESP 230</td>
<td>Respiratory Therapy IV</td>
<td>3</td>
<td>3rd Semester</td>
</tr>
<tr>
<td></td>
<td><em>Advanced diagnostic technique and tests</em></td>
<td></td>
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<tr>
<td>RESP 230L</td>
<td>Respiratory Therapy IV Lab</td>
<td>2</td>
<td>3rd Semester</td>
</tr>
<tr>
<td></td>
<td><em>Lab practice in advanced procedures</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td>RESP 233</td>
<td>Respiratory Therapy Cardiopulmonary Pathophysiology</td>
<td>2</td>
<td>3rd Semester</td>
</tr>
<tr>
<td></td>
<td><em>Diagnosis and management of cardiopulmonary disorders</em></td>
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<tr>
<td>Course Code</td>
<td>Course Title</td>
<td>Credits</td>
<td>Semester</td>
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<tr>
<td>RESP 234</td>
<td>Respiratory Therapy IV Clinical</td>
<td>3</td>
<td>3rd</td>
</tr>
<tr>
<td></td>
<td>Emphasis on special modalities and mechanical</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>ventilation</td>
<td></td>
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<tr>
<td>RESP 240</td>
<td>Respiratory Therapy V</td>
<td>3</td>
<td>4th</td>
</tr>
<tr>
<td></td>
<td>Advanced diagnostic technique and tests</td>
<td></td>
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<tr>
<td>RESP 240L</td>
<td>Respiratory Therapy V Lab</td>
<td>2</td>
<td>4th</td>
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<tr>
<td></td>
<td>Lab practice in advanced procedures</td>
<td></td>
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</tr>
<tr>
<td>RESP 242</td>
<td>Pediatric Advanced Life Support (PALS)</td>
<td>1</td>
<td>4th</td>
</tr>
<tr>
<td></td>
<td>Certification of PALS</td>
<td></td>
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<tr>
<td>RESP 243</td>
<td>Respiratory Therapy Neonatal</td>
<td>1</td>
<td>4th</td>
</tr>
<tr>
<td></td>
<td>Certification of NRP</td>
<td></td>
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</tr>
<tr>
<td>RESP 244</td>
<td>Respiratory Therapy V Clinical</td>
<td>3</td>
<td>4th</td>
</tr>
<tr>
<td></td>
<td>Emphasis on neonatal and pediatric mechanical</td>
<td></td>
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<td></td>
<td>ventilation</td>
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</tbody>
</table>

**PROGRAM PROGRESSION POLICY**
Courses in the Respiratory Therapy Program are sequential and shall be completed in the designated order. All respiratory courses required in a specific level shall be completed with a grade of 75% or better in order to progress to the next semester of respiratory. Each semester shall be completed before starting the next.

**TECHNICAL STANDARDS**
Qualified applicants are expected to meet all admission criteria as well as essential functions. Students requesting reasonable accommodations to meet these criteria must inform the Program Director in writing of the need for accommodations at the time of admission. The student is expected to file the appropriate forms to document the need for accommodation with the Services for Students with Disabilities Office, DAMA 117, 575-527-7548.
<table>
<thead>
<tr>
<th>FUNCTIONAL ABILITY CATEGORY</th>
<th>REPRESENTATIVE ACTIVITY/ATTRIBUTE</th>
<th>EXAMPLES</th>
</tr>
</thead>
<tbody>
<tr>
<td>GROSS MOTOR SKILLS</td>
<td>• Move within confined spaces</td>
<td>Function in an ICU environment: move about an ICU room in order to perform procedures on the patient. Must also read patient chart, equipment settings, and/or equipment displays. Sit to record findings. Change equipment settings above head and below waist, plug electrical appliances into wall outlets.</td>
</tr>
<tr>
<td></td>
<td>• Sit and maintain balance</td>
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</tr>
<tr>
<td></td>
<td>• Stand and maintain balance</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Reach above shoulders</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Reach below waist</td>
<td></td>
</tr>
<tr>
<td>FINE MOTOR SKILLS</td>
<td>• Pick up objects with hands</td>
<td>Lift medication vials to eyes to read. Squeeze medication vials to empty. Squeeze Ballard suction catheter button. Grasp hold and read small instruments such as volume measuring devices. Write in patient chart. Record patient data in record. Change settings on equipment by turning knob and observing change.</td>
</tr>
<tr>
<td></td>
<td>• Grasp small objects with hands</td>
<td></td>
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<tr>
<td></td>
<td>• Write with pen or pencil</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Key/type</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Pinch/pick or otherwise work</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• with fingers</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Twist</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Squeeze with finger</td>
<td></td>
</tr>
<tr>
<td>PHYSICAL ENDURANCE</td>
<td>• Stand in place for prolonged</td>
<td>Stand and perform repetitive procedures on patients such as Chest Physical Therapy and CPR. Repeat this procedure periodically throughout an 8-hour shift.</td>
</tr>
<tr>
<td></td>
<td>periods</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Sustain repetitive movements</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Maintain physical tolerance</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• for 8 or 12 hour periods</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Ability to perform activities</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• day, afternoon, evening and</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• night</td>
<td></td>
</tr>
<tr>
<td>SMELL</td>
<td>• Detect odors from patients</td>
<td>Assess for noxious odors originating from the patient or environment (gas leak or smoke).</td>
</tr>
<tr>
<td></td>
<td>• Detect smoke</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Detect gases or noxious smells</td>
<td></td>
</tr>
<tr>
<td>PHYSICAL STRENGTH</td>
<td>MOBILITY</td>
<td>HEARING</td>
</tr>
<tr>
<td>------------------------------------------</td>
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<td>---------------------------------------</td>
</tr>
<tr>
<td>• Push and pull 25 pounds</td>
<td>• Twist</td>
<td>• Hear normal speaking level sounds</td>
</tr>
<tr>
<td>• Support 25 pounds</td>
<td>• Bend</td>
<td>• Hear faint voices</td>
</tr>
<tr>
<td>• Lift 25 pounds</td>
<td>• Stoop/squat</td>
<td>• Hear faint body sounds</td>
</tr>
<tr>
<td>• Carry equipment/supplies</td>
<td>• Move quickly</td>
<td>• Hear in situation when not able to</td>
</tr>
<tr>
<td>• Use upper body strength</td>
<td>• Climb</td>
<td>see lips</td>
</tr>
<tr>
<td>• Squeeze with hands</td>
<td>• Walk</td>
<td>• Hear auditory Alarms</td>
</tr>
<tr>
<td>Assist patient from bed to chair.</td>
<td>Turn to change settings on monitor while standing at patient bedside.</td>
<td>Listen to patient breath sounds to determine if patient is breathing.</td>
</tr>
<tr>
<td>Hoist patient up in bed. Move patient from stretcher to bed and back. Carry medications, pulse oximeter, stethoscope or other equipment to patient room. Push ventilator or other heavy equipment to patient room. Push ventilator or other heavy equipment from respiratory care department to patient room. Move other equipment such as Pulse Oximeter, IPPB, and IPV machine. Lift equipment from bed height to shelf height above chest level.</td>
<td>Bend to change equipment settings on floor, at knee level, waist level, chest level, eye level, and above head. Gather equipment and manually resuscitate patient without delay. Make rapid adjustments if needed to ensure patient safety. Make way to patient room if an emergency is called using stairs.</td>
<td>Listen to heart sounds to determine if heart is beating. Determine the intensity and quality of patient breath sounds in order to help determine a diagnosis. Hear audible alarms such as a ventilator alarm. Hear overhead pages to call for emergency assistance.</td>
</tr>
</tbody>
</table>
| VISUAL                        | • See objects up to 20 inches away  
  • See objects up to 20 feet away  
  • Use depth perception  
  • Use peripheral vision  
  • Distinguish color  
  • Distinguish color intensity | Read patient chart to determine correct therapy. Visually assess patient color to assess for hypoxia. Read settings on monitors and other equipment. Visually assess for changes. Confirm settings visually such as with ventilator display. |
|-----------------------------|------------------------------------------------------------------------------|
| TACTILE                     | • Feel vibrations  
  • Detect temperature  
  • Feel differences in surface characteristics  
  • Feel differences in sizes/shapes  
  • Detect environmental temperature | Assess patient by feeling for patient pulse, temperature, tactile fremitus, edema, and subcutaneous emphysema. |
| READING                     | • Read and understand written documents | Read and interpret physician orders, physician, therapist and nurse's notes. Read from a computer monitor. Gather data reasonably accurate, and in a reasonable amount of time to ensure safe and effective patient care relative to other caregivers. |
| MATH COMPETENCE             | • Read and understand columns of writing  
  • Read digital displays  
  • Read graphic printouts  
  • Calibrate equipment  
  • Convert numbers to and from metric system  
  • Read graphs  
  • Tell time  
  • Measure time  
  • Count rates  
  • Use measuring tools  
  • Read measurement marks  
  • Add/subtract/multiply/divide  
  • Compute fractions  
  • Use calculator | Read and interpret patient graphics harts and graphic displays. Perform basic arithmetic functions in order to calculate minute ventilation, convert temperature, correctly place graduated tubing, and other functions. |
| **EMOTIONAL STABILITY** | - Establish appropriate emotional boundaries  
  - Provide emotional support to others  
  - Adapt to changing environment/stress  
  - Deal with the unexpected  
  - Focus attention on task  
  - Monitor own emotions  
  - Perform multiple responsibilities concurrently  
  - Handle strong emotions  | Provide for safe patient care despite a rapidly changing and intensely emotional environment. Perform multiple tasks concurrently, example: delivery of medication or oxygen in one room while performing an arterial blood gas in another such as in an emergency room environment. Maintain enough composure to provide for safe and effective patient care despite crisis circumstances. |
| **ANALYTICAL THINKING** | - Transfer knowledge from one situation to another  
  - Process information  
  - Evaluate outcomes  
  - Problem solve  
  - Prioritize tasks  
  - Use long-term memory  
  - Use short-term memory  | Evaluate different sources of diagnostic information to help arrive at a patient diagnosis. Evaluate priorities in order to provide for the most appropriate care. Appropriately evaluate data in order to notify physician and nursing when necessary. |
| **CRITICAL THINKING** | - Identify cause/effect relationships  
  - Plan/control activities for others  
  - Synthesize knowledge and skills  
  - Sequence information  | Evaluate different sources of diagnostic information to help arrive at a patient diagnosis and treatment. Evaluate data in order to formulate an appropriate action plan. |
| **INTERPERSONAL SKILLS** | - Negotiate interpersonal conflict  
  - Respect differences in patients, fellow students, and members of the healthcare team  
  - Establish rapport with patients, fellow students, and members of the healthcare team  | Communicate effectively with disagreeable patients, family doctors, and nurses and other staff in order to attempt to meet therapeutic goals for the patient. |
| **COMMUNICATION SKILLS** | - Teach  
  - Explain procedures  
  - Give oral reports  
  - Interact with others  
  - Speak on the telephone  
  - Influence people  
  - Convey information through writing  | Communicate effectively and appropriately with doctors, nurses, patients, family, and other staff in order to provide for most effective and efficient patient care. |
**Technical Exit Competencies:**

Upon completion of the DACC Respiratory Program, graduates will be able to demonstrate the ability to;

1. Comprehend, apply and evaluate clinical data related to patient information systems, therapeutic rationale and equipment application relevant for data collection, equipment management and clinical practice of cardiopulmonary care. **Evaluation Methods:** Comprehensive Final Theory Written Exam, NBRC Therapist Multiple-Choice Examination, and the CoARC Surveys.

2. Perform technical skills with proficiency in all health care settings to include initiating, conducting, evaluating and modifying therapy based on patient response and performing diagnostic testing, therapeutic treatments and maintaining life support systems for patients with cardiopulmonary diseases. **Evaluation Methods:** Comprehensive Final Laboratory Practical Exam, Comprehensive Final Clinical Evaluation, DataArc & CoARC Surveys.

3. Exhibit behaviors consistent with professional and employer expectations to include characteristics of personal behavior, interests and attitudes, communication skills, and teamwork necessary to be successful in securing and maintaining a career and licensure in the health care industry. **Evaluation Methods:** Comprehensive Final Evaluations, Affective Domain Evaluation, DataArc evaluations and CoARC Surveys.

4. Gather appropriate clinical information, analyze data and use critical thinking skills to solve problems and make decisions in the delivery of safe, efficient, effective Respiratory Care. **Evaluation Methods:** Comprehensive Final Laboratory Practical Exam, AMP SIMs SAE, AMP TMC SAE, Affective Domain (Behavior) Evaluation. **Students will be required take an exit exam RRT/SAE and be required to make 65% of better in order to graduate from the program**

5. Value continued learning through growth and development as a health care professional by active participation as students & graduates in professional organizations and educational activities within the local, state, national and international communities that offer continuing education and professional services to respiratory care practitioners.
Evaluation Methods: Membership in AARC, NMSRC, Participation in State & National Educational Conferences, Membership in Student Associations, Serve in Leadership Positions in Respiratory Therapy Professional Organizations, Obtain additional Credentials in the Respiratory Profession.

Technical Exit Competencies
These are the focus of the Respiratory Therapy Program effort to align curriculum structure, teaching/learning activities and assessment of student learning. Assessment is to concentrate on the knowledge, skills and behaviors that are truly valued by faculty and employers. The effort is to move toward quality initiatives and processes, the exit competencies and assessment of student/graduate attainment of them will continue to become a vital measure of accountability of the Respiratory Program and the DACC stakeholders. Together, the Technical Exit Competencies and Core Competencies will ensure that the DACC Respiratory Therapy graduates possess the necessary knowledge, skills and behaviors to be competent and successful contributors to the workforce and society. These Competencies represent an assurance to students and employers that the Respiratory Therapy Program is providing high quality teaching and learning experiences here at Doña Ana Community College.

STUDENT RESPONSIBILITIES
In order to be successful learners, students shall assume an active role in the learning process. The student responsibilities listed below emphasize behaviors that contribute directly to student academic success, and they apply to all student enrolled at Doña Ana Community College Respiratory Therapy Program

Responsibility for Learning - Students shall take responsibility for their own learning and for succeeding in their courses by following course requirements as presented in course syllabi and attending all of their classes.

Attendance – Students are expected to attend all sessions of each course in which they are enrolled. Failure to do so shall result in academic probation or withdrawal from the program. Absence for any reason, including illness or lateness, in no way relieves the student of the responsibility for completing all work in the course to the satisfaction of the instructor in charge. Students are expected to be in the classroom, laboratory and clinical and be ready to begin the session on time.

Performance – During the respiratory program it is expected that the students prepare for class, complete all assignments as well as submit assignments when due. This includes reading or viewing the information prior to class. Students should be prepared
to participate in active learning discussions in each class on the topic assigned for that
day and are expected to cooperate with their instructor and other students to create a
positive learning atmosphere and to contribute effectively to class activities

**Time Commitment** – To meet the course objectives a student shall find it necessary to
plan time to study (**we suggest 30 hours a week**), test, practice in the lab, and work on
assignments, as student should plan to extend hours beyond the set course hours.
Clinical practice, some course exams and other course related assignments shall occur
during hours outside of the regularly scheduled class times. A student shall be flexible
when arranging personal and work schedules.

**Accountability** – All respiratory students share the responsibility of observing a code of
ethics, adhering to the professional behaviors and maintaining patient confidentiality.
This code of ethics requires truthfulness, honesty, and integrity in all human activities by
the student including immediate reporting of any and all suspected or actual patient
abuse. If a breach of standards occurs, the student shall jeopardize their standing in the
Respiratory Therapy Program.

**RESOURCES**
The Respiratory Therapy Program is a challenging experience. The program has been
designed to be completed in 22 months. The Degree plan has the required courses in
the sequence in which they shall be completed. Faculty is available for assistance, each
syllabi has the faculties office hours posted as well as on their office doors. Students
may also make appointments with faculty, students desiring a conference with a faculty
member may make an appointment at any time.

Because the Respiratory Therapy Program is a challenging experience, the respiratory
faculty and Program Director are also available to facilitate the respiratory student
learning, either directly or by referring the student to appropriate sources. Respiratory
students are encouraged to meet with them as needed. Additional assistance is
available through Counseling Services and Tutoring. If the respiratory student needs
assistance in accessing their help, please contact the Respiratory Program Director.

**LIBRARY RESOURCES**
DACC library allows respiratory students access to a wide variety of clinical and non-
clinical resources, periodicals, books, supplemental texts, and a host of electronic
resources. Students are encouraged to avail themselves to these resources in
completing individual course assignments.
**Tutorial Services/Student Success Center**
One-on-One learning assistance is provided free of charge to students who are already enrolled in programs. Subjects include math, English, language, test-taking, study skills.

**Respiratory Tutors**
The Respiratory Program has qualified tutors to help students with respiratory therapy courses, hours are posted and appointments may be scheduled. For more information contact the Director of Clinical Educator or the Program Director for details.

**Counseling Services**
Counseling Services staff provides *confidential counseling* services as an integral part of the education mission of Doña Ana Community College. Counseling Services are provided to students having concerns or experiencing stress due to personal problems, decision making, or conflicts experienced by the student. Besides counseling, counselors are involved in advocating for student needs, program development, lecturing, and consultation activities that support the efforts of faculty and staff in improving the Doña Ana Community College environment.

Counseling Services are located in Suite 117, telephone 527-7548.

**Student Computer Access**
DACC has more than 1,300 computers for student use. Most are located in classrooms, where they are integrated into the teaching process. Additionally, all DACC campuses and satellite centers have open computer laboratories, affording access to student E-mail accounts, the internet, and Canvas, as well as other services provided through NMSU’s information and Communication Technologies unit.

Wireless network access is provided in the commons area at Central, East Mesa and the satellite campuses.

Hours for the open laboratory on the central campus are 8 a.m. to 5 p.m. M-F, on Saturday 9a.m. to 5p.m. and Sunday 1 to 5 p.m. Call 527-7561 for more information.

**Books and Supplies**
Students are responsible for buying their own textbooks, routine school supplies, clinical supplies, and personal items. The bookstore is arranged for self-service, with textbooks displayed by course number. In addition to textbooks, the bookstore sells calculators, educational supplies, and other types of merchandise. For current bookstore hours or other information, visit [http://www.nmsu.bookstore.com](http://www.nmsu.bookstore.com)
**Student Government/Student Activities**
The Associated Students of Doña Ana Community College is a dynamic and responsive student government that provides students and student organizations a foundation for enhanced learning and leadership development through educational and social activities, communications and programs.

The Respiratory Therapy Program has an active club in the student government organization. The office of Student Activities is located on Central and East Mesa campus. For more information, please call 527-7618.

**COMMUNICATION POLICY**
**Correspondence between Students and Faculty**
The NMSU email/canvas account shall be the official contact/communication methods for student and faculty in the Respiratory program. Each student and faculty member is responsible for maintaining their NMSU email/canvas account and checking it on a daily basis to ensure timely communication.

**CHANGE OF ADDRESS**
Each student is responsible for reporting a change of address or phone number to the program. The program is legally required to keep such information confidential. Entering this information into the DataArc Clinical Education Database is the most convenient method to accomplish this. Change of address must also be reported to the Office of Records and Registration. The Financial Aid Department should also be kept advised of current addresses of students who are receiving loans. This is the responsibility of the student; the department will not be able to keep all parties up to date on addresses.

**Holiday/Semester Schedules**
Class, lab, and clinical schedules will follow the official semester and holiday timetable designated by DACC. Students are scheduled according to the NMSU/DACC calendar. Exceptions will not be made for students who desire to leave early for holidays, for extending holiday time, or late arrival back to classes.

**Inclement Weather**
Classes will proceed as scheduled regardless of whether; however, in the event of an extremely hazardous situation, the student may contact the Respiratory Therapy Program Director or Clinical Educator concerning class information; 575-640-5480.
ATTENDANCE POLICIES

Regular attendance and application of learning constitute the most significant factors which promote success in college. All students are expected to observe the attendance requirements of the college and Respiratory Therapy Program. Attendance and tardiness will affect the student’s status in the program.

Lecture and Lab Attendance
A student may be placed on probation when absences total three in lecture or lab courses in fall/spring semester beginning with the first day of instruction (two absences in lecture or lab in summer courses). Any further absences will result in dismissal from the lecture or lab. Three incidences of lateness are equal to one absence in lecture/lab. Students must notify their instructor if they are going to be absent. Failure to do so can result in disciplinary action. Please refer to the “Consequences for Non-Compliance of Standards of Conduct” in the Health Sciences Division Student Handbook or go to the division student handbook link.

http://dacc.nmsu.edu/hs/health-sciences-division-student-handbook/

Clinical Attendance and Lateness
A student may be placed on probation from clinical when absences total three occurrences in the fall/spring semester or two occurrences in the summer semester. A student who misses Clinical w/o notifying the clinical instructor, preceptor, and the Program Director will be placed on probation immediately. Failure to do so can result in disciplinary action. Please refer to the “Consequences for Non-Compliance of Standards of Conduct” in the Health Sciences Division Student Handbook or go to the division student handbook link.

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NOTE: Students are to notify the clinical instructor/preceptor and the Program Director (575.640.5480) of their absence, two hours before clinical start (texting does not constitute notification). If you text the Program Director and do not receive a text back, it was not received. If you text the Program Director an email is also required (an email constitutes notification). All specialty rotations are mandatory. If a student misses a specialty rotations the rotation must be made up on his/her own time. Failure to do so can result in disciplinary action. Please refer to the “Consequences for Non-Compliance of Standards of Conduct” in the Health Sciences Division Student Handbook or go to the division student handbook link.

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Attendance for case study presentations is mandatory.

Probation
When a student is placed on probation due to violation of the attendance policy, he/she may have up to 20% deducted from his/her final grade in that particular course.

Important Notice: Student health, safety, and emergency concerns must be the priority at all times. An emergency situation such as an accident, injury, or emergency illness resulting in an inability to contact the program in a timely manner will be evaluated on an individual basis.

COURSE SYLLABI
The criteria by which grades for each lecture, lab, and clinical courses are determined will be included in each course syllabi distributed to students at the beginning of each semester. Content/ Schedules in the syllabi may change at the discretion of the instructor.

Schedule /Syllabi Modification Policy
If, or when changes are made (cancellations, adds, time-date changes, etc.), the changes will be available via Canvas postings, verbal announcements, etc. Students are responsible for checking their Canvas, and keeping faculty informed of phone number changes. The student is responsible for making appointments and meeting the deadlines specified by the instructor. Failure to do so can result in disciplinary action. Please refer to the “Consequences for Non-Compliance of Standards of Conduct” in the Health Sciences Division Student Handbook or go to the division student handbook link.

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OPEN LAB POLICY
Students are expected to attend open lab sessions. Because the respiratory program lab coursework focuses on hands on learning for key respiratory skills, missing open lab may be detrimental to the successful completion of the Respiratory Program.

GRADING POLICY
Respiratory courses shall be graded with letter grades. Grades shall be calculated according to the percentages identified in each course syllabus. The following scale shall be used to determine the final course grade.

A minimum of a “C” grade must be maintained in all Respiratory Therapy courses and technically related courses which include the following:

Chemistry 110
Microbiology & Lab 253
Anatomy and Physiology 1 & 2
General Requirements including English, Math, Computer, and Medical Terminology

If a grade of “D” or “F” is received by a student at the end of the semester in any technically related course or any general requirement course (as listed earlier) the student will be allowed to repeat the course to receive a minimum grade of “C” before graduation. It is the responsibility of the student to inform the program coordinator if he/she received a “D” or “F” in any general education or technically related course.

LETTER GRADE SCALE
The grading scale for the DACC Respiratory Therapy Program is as Follows:

- A = 92%-100%
- B = 85%-91%
- C = 75%-84%
- D = 74% and below is failing the respiratory program

Important Note:
- A grade of 75% or better shall be maintained throughout each course.
- A grade of 75% or better for the course is required to progress to the next semester.
- Grades shall not be rounded up nor rounded down.

TESTING POLICY
The following guidelines and procedures for testing shall be followed in each course.

- Exams are not given back to the student to review, only the score they have received.

Testing Outcomes:
Testing outcomes shall be part of the assessment for determination of safe practice for student in the clinical setting. Therefore, a student shall maintain a 75% or better average in the course.

- The point value of each exam and the total required points for successful completion and corresponding letter grade are established in each specific course syllabus.
• Failure to maintain a 75% average beginning with the first two tests shall result in a Student Improvement Plan.
• Failure to achieve a 75% exam average at course completion shall result in failure of the respiratory program.
• Exams scores shall not be rounded up or rounded down.

Scheduled Exams

• Exams are the property of the DACC Respiratory Therapy Program.
• Students are responsible for knowing exam dates and shall be present for all exams.
• All exams shall be proctored.
• All scheduled tests shall be taken as scheduled. Exams will start no later than 15 minutes after the designated exam time.
  ✓ If more than 15 minutes late the student will not be able to take the exam.
• Once time is up, all computers will be turned off and final grades recorded.

Make-up exams
  ✓ In the event a student is unable to take an exam, and a make-up has been approved a new exam will be provided at the instructor’s convenience no later than one week from the missed exam date.
  ✓ No more than one exam per semester shall be made up in this manner without forfeiting the exam points.

QUIZZES

• Unannounced quizzes may be given in class, skills laboratory, or clinical sites.
• Quizzes, announced or unannounced, cannot be made up or taken later in the time period.

During Testing

• No cell phones, laptops, or programmable electronics will be allowed in the exam area. No internet accessible devices are permitted.
• At the beginning of each exam, the proctor shall provide a pencil and a blank piece of paper for notes/calculation/etc. the student shall put his/her name on this paper and return it to the proctor when testing is completed.
• Calculators are not allowed during any exams.
• It shall be at the discretion of the instructor/proctor to assign seating during the exam.
• No food or drinks are allowed in the computer lab during testing.
• No children or individuals other than the examinee shall be allowed in the testing area.
• No communication except with proctors is allowed with anyone in the testing center during the exam.
• If the student has a problem or question, a hand shall be raised to alert the proctor. DO NOT leave the assigned computer station.
• The test proctor will not answer any questions concerning the content of the exam. The proctor will assist with technical questions about the computer or keying in the information.
• For security reasons, students shall not be allowed to place calls during the test or to leave the testing room without a faculty escort.

• No other sites on the computer other than the designated site may be open or opened during the computer testing or review. This may be considered academic dishonesty. Failure to do so can result in disciplinary action. Please refer to the “Consequences for Non-Compliance of Standards of Conduct” in the Health Sciences Division Student Handbook or go to the division student handbook link.

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• In the event the computer the student is using to take the exam malfunctions and is rendered unusable for the remainder of the exam time, the faculty/proctor shall decide which of the following measures may be taken to ensure that the student completes the exam while maintaining exam integrity:
  ✓ The student’s exam answer printout will be used to record a hard copy of the exam. The student will resume the exam using the remaining time allotment from the time the computer malfunctioned to the end of the exam: OR
  ✓ The student will be provided a hard copy of the exam and the student will start the exam from the beginning with the full time allotted to the exam.
  ✓ During the transition from computer to hard copy testing, to ensure the student completes the exam and test integrity is maintained, the student shall not be allowed to leave the exam area without faculty escort.

**Question Discussion**

• Student exams will not be returned for review
• The exam will be discussed as a class by the instructor.
• If a student wishes to debate a question, he or she shall provide documentation on the day the test is reviewed, and submit the following:
  ✓ The question in debate
  ✓ Information to support the student answer

STUDENT IMPROVEMENT PLAN POLICY /LETTER OF UNDERSTANDING
A Student Improvement Plan (SIP) or letter of understanding is a written agreement in which the student and faculty member identify one or more areas in skills, knowledge and/or behavior requiring improvement and actions/behaviors required to correct these areas. The student agrees to correct deficiencies in skills, knowledge and/or behavior which have resulted in unsatisfactory or potentially unsatisfactory performance. The areas that may require a Student Improvement Plan include things such as grades, technical skills, communication, accountability, responsibility, and patient safety. A Student Improvement Plan may be used in class, lab or clinical.

The purpose of a Student Improvement Plan is to provide the student with a specific plan for remedying a performance deficiency which may affect the students overall performance and/or ability to continue in the Respiratory Therapy Program.

Implementation of a Student Improvement Plan

1. If an instructor determines a Student Improvement Plan is required to assist the student in meeting the respiratory programs and the student’s performance.
2. It is then reviewed and approved by the Respiratory Program Director.
3. After the Student Improvement Plan is approved by the Program Director, it is then signed by the instructor(s) involved and the student.
4. A copy is given to the student and the instructor(s), and a copy is placed in the student’s program file.
5. Failure to meet the terms of the SIP may result in failure of the course. If the behavior reappears in another respiratory semester and involves patient safety, Failure to do so can result in disciplinary action. Please refer to the “Consequences
for Non-Compliance of Standards of Conduct” in the Health Sciences Division Student Handbook or go to the division student handbook link.

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**Student Improvement**

If a student makes a grade of D or F on more than one course examination other than the final examination

- A Student Improvement Plan will be created to determine the deficiencies that need to be corrected.
- The tasks and responsibilities outlined for the student
- The deadlines for completion, criteria for evaluation, and evaluation methods will be determined (Remediation tasks and evaluation criteria do not have to be identical to the original tasks and criteria)
- The student’s individual examination grade will not be changed

It is anticipated that the results of successful remediation will be evident when the comprehensive final examination is taken.

**STANDARDIZED ASSESSMENTS/EXAMINATIONS/CERTIFICATIONS/FEES**

Students must complete the following examinations and certifications before exiting the respiratory program

1. Clinical mock board exams, including cognitive and psychomotor elements with a minimum passing score of 75%.
2. Course fees are added to tuition each semester (amount may change from semester to semester). All course fees must be paid in-order to graduate from the Respiratory Therapy Program.
3. Students are required to purchase a background check, drug test and DataArc CD (information will be provided).
4. Successful completion of NRP/PALS/ACLS courses (Separate fees apply).
5. Successful completion, with a minimum score 60% on the NBRC Self-Assessment Examination (Separate fees apply).
6. Attendance of the Kettering Seminar is required prior to graduation (Separate fees apply).
7. Each Semester a student survey must be entered into the DataArc information system (failure to complete the survey may result in the students final grades being withheld pending survey completion).
8. Following graduation a graduate survey in DataArc must be completed as part of the program reaccreditation process. A survey will also be sent to each graduates employer.
EXIT EXAM POLICY
A comprehensive RRT Self-Assessment Exam evaluating the students’ mastery of the respiratory programs content the final semester is required. Results will provide information regarding a students’ readiness to take the National Board of Respiratory Care (NBRC) Therapist Multiple-Choice Examination and simulation credentialing exam. A Student scoring below a 65% on the RRT Self-Assessment Exam (SAE) will be required to retake the last year over beginning the Summer I Session.

Upon completion of the RRT Self-Assessment Exam the Respiratory Therapy Program Director will sign and submit the eligibility for Graduation form or official student transcript to the National Board of Respiratory Care (NBRC). This eligibility for graduation will allow the student to take the Therapist Multiple-Choice Examination and Clinical Simulation NBRC exams.

NATIONAL CREDENTIALING
1. The NBRC Therapist Multiple-Choice Examination is given by the National Board for Respiratory Care (NBRC) and is required of all graduates in order to obtain state licensure.
2. The NBRC requires that the graduate successfully completed the Therapist Multiple-Choice Examination with the equivalent of a Registered Respiratory Therapist (RRT) in order to be able to sit for the Clinical Simulations.
3. Other National Credentials can be viewed on www.nbrc.org

Consequences for Non-Compliance of Standards of Conduct

Corrective Action up to Involuntary Dismissal from Program
Students are expected to meet performance standards and comply with other academic requirements for each of the Health Sciences Programs, and consequence for non-compliance will be commensurate with the severity of the violation (e.g. not every violation would warrant dismissal from the program), and that as appropriate, and provided patient safety or departmental operations are not placed at risk, some type of warning or progressive discipline will be provided.

Involuntary Dismissal from a Program
Violation of standards of conduct pertaining to any of the DACC Health Services academic programs or failure to abide by specific program requirements may result in the student being
dismissed from a program, after notice and an opportunity for the student to provide the
student’s position relative to the proposal dismissal.

DACC recognizes that involuntary dismissal from an academic program is a serious event with
significant consequences for the student. As a result, DACC has developed the following
procedures by which allegations will be investigated, facts will be determined and the
administrative consequence (e.g. dismissal from the program) will be clearly communicated to
the student, with an opportunity for an informal fact finding hearing and right to appeal to an
objective third party not involved in the underlying decision.

Students charged with violations may continue to attend classes pending the final outcome of all
steps in the process, including the appeal if any, EXCEPT WHEN continuing student participation
creates a risk of harm to patients or would disrupt the learning process of others; in these
situations, an interim academic suspension may be imposed pending the outcome of the hearing.

STEP 1: Allegations are Received and Investigated: Often infractions are brought to the
attention of faculty or administrators by other students or by patients participating in the
programs. Allegations will be fairly and timely investigated by the faculty member or program
coordinator. The investigation must include an interview with the student to notify them about
the allegations and the investigation, to obtain their side of the story, and to allow them to
provide relevant evidence. The investigative process and all factual findings will be documented,
including whether witness testimony taken was found to be credible etc.

STEP 2: Notice of Intent to Dismiss Student from Program is provided: If the consequence
proposed as a result of a violation of the academic program standards or other requirements is
involuntary dismissal, the student will be notified, provided a copy of the investigative
documentation, and offered an opportunity to withdraw from the program in lieu of dismissal or
the opportunity to contest the findings or the sanction at an informal administrative hearing.

STEP 3: INFORMAL ADMINISTRATIVE HEARING: The Division Dean or designee or equal rank or
higher will serve as the hearing officer for the informal hearing. The parties will be given the
opportunity to present their position relative to the facts alleged and those documented after
investigation. If either party wishes to call a witness to testify, they may do so, and must give
the other party and the hearing officer at least five working days advance notice so that
arrangements may be made for the witnesses to attend, for sufficient time to be scheduled, and
to allow the other party to choose to call live witnesses rather than rely on the documentation.
Each party will be permitted to ask questions of the other party and of any witness who may
provide testimony. The hearing officer may ask questions of any party or of any witness. The
student charged may have a representative attend with them who will not activity participate or
interfere in the process, within ten working days from the close of the hearing. the Division Dean
or designee will issue a written Determination outlining findings of fact and determining whether the proposed sanction will be upheld, reversed or modified. The proposed sanction shall not be increased in severity.

**STEP 4: APPEAL PROCESS:** Students who receive a Determination that they are to be dismissed from a program may seek an on-the-record-review from the next level of administration or designee in the case of unavailability or conflict of interest. To appeal, within ten working days from the date of receipt of the Determination, the student must submit a Notice of Appeal indicating the basis for the appeal, and attach the Determination appealed from. The student must send a copy of the appeal to the other party and to the faculty member or program director as appropriate. The other party may submit a position statement responding to the basis for the appeal within five working days from receipt of the appeal notice. Typically, the DACC Associate Vice President for Academic Affairs serves as the appeal officer. The appeal will be decided based on the record from the informal hearing, the appeal documentation, and any position statement provided by the other party to the appeal. An appeal may reverse or modify the Determination for substantial procedural error or if the Determination is not supported by a preponderance of the evidence. The appeal officer will issue a Final Decision within fifteen working days from the date the Notice of Appeal was received. The Decision shall be sent to all parties, the informal hearing officer, and the faculty member/program director as appropriate.

Student may continue to attend class pending completion of all procedural steps, including the appeal, unless patient safety considerations dictate otherwise.