

Respiratory Care Program Handbook

**Mayo Clinic School of Health Sciences
University of Minnesota Rochester**

Academic Year 2024-2025

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INTRODUCTION

Welcome to the Mayo Clinic School of Health Sciences (MCSHS) and University of Minnesota Rochester (UMR) Respiratory Care Program! This handbook serves as a student resource referencing key aspects of the program, policies and procedures, and information essential for student success in the Respiratory Care Program. It is a companion to the [MCSHS policy webpage](#) and [University of Minnesota Rochester policy webpage](#).

MISSION STATEMENT

To improve patient care and provide leaders to the respiratory care community by preparing students as respiratory therapists with additional clinical expertise for subspecialty roles and roles in management, education and research.

GENERAL DESCRIPTION

The University of Minnesota and Mayo Clinic College of Medicine and Science (MCCMS) hold regional accreditation by the Higher Learning Commission, a commission of the North Central Association of Colleges and Schools. The Respiratory Care Program is accredited by the Commission on Accreditation of Respiratory Care (CoARC). The Bachelor of Science in Health Professions (BSHP) is an educational collaboration between the University of Minnesota Rochester and the Mayo Clinic School of Health Sciences. The curriculum has a broad focus and includes rigorous science foundations, liberal education, and courses selected to meet the need for deeper academic preparation in health professions. Students majoring in the Respiratory Care Track must complete 121 credits, including 61 credits of upper-division coursework focused on development of technical skills, clinical research applications, health care management and clinical practicum experiences. The curriculum is delivered in the classroom, clinical and laboratory settings over the course of five consecutive semesters.

GOALS

The goal of the BSHP Respiratory Care Program is to equip graduates with demonstrated competence in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains essential for practice as registered respiratory therapists (RRTs). Furthermore, the program aims to develop leaders in the field of respiratory care by integrating curricular content focused on management, education, and research skills.

The American Association for Respiratory Care (AARC) provides the following position statement regarding the Respiratory therapy scope of practice:

The practice of a respiratory therapist is directed by a licensed independent practitioner and is determined by state licensure laws where applicable. The practice typically focuses on:

- Patients across the age spectrum – neonatal through geriatric.
- Direct and indirect patient observation and monitoring of signs, symptoms, reactions to therapeutic interventions
- Monitoring of clinical behavioral responses to respiratory care therapeutic and diagnostic interventions

- Implementation of respiratory therapy procedures, medical technology, and diagnostic procedures necessary for disease prevention, treatment management, and pulmonary rehabilitation.
- Utilization of protocols, guidelines, pathways, and policies driven by evidence-based medicine, expert opinion, and standards of practice.
- Participation in research to evaluate interventions and technology to determine their ability to improve patient outcomes.
- Facilitation and direction of patient rehabilitation programs and the development of disease and care management plans, including but not limited to patient/home care caregiver education (e.g. diseases and devices), pulmonary and cardiac rehabilitation programs, utilization of pulmonary disease navigation and/or telemedicine respiratory therapy consultants.
- Provision of patient and family education activities to promote knowledge and understanding of the disease process, medical therapy and resources available to assist in the care of the patient.
- Facilitation of health care provider education that may include but is not limited to paramedics, EMTs, nurses, residents, medical students, fellows, and advanced practice providers that may include mentorship of student clinical rotations.
- Support of public education activities focused on the promotion of cardiopulmonary wellness and prevention that is sustainable (e.g., Breathe-zy Community education program, health fairs).

The responsibilities of a respiratory therapist include, but are not limited to:

1. Performance and collection of diagnostic information
 - a. Pulmonary function testing
 - b. Interventional diagnostics
 - c. Sleep studies
 - d. Noninvasive and invasive diagnostic procedures
 - e. Blood gas and other pertinent laboratory analysis
2. Patient assessment
 - a. Physical examination
 - b. Diagnostic data interpretation
3. Application of therapeutics to respiratory care
 - a. Medical gas therapy
 - b. Humidity therapy
 - c. High Flow Oxygen Therapy (HFOT)
 - d. Aerosol therapy (both with and without pharmacologic agents)
 - e. Artificial airway insertion, management, and care
 - f. Airway clearance
 - g. Initiation and titration of invasive and non-invasive, and high frequency mechanical ventilation
 - h. Vascular catheter insertion, management, and care
 - i. Extracorporeal Life Support (ECLS)
 - j. Hyperbaric oxygen therapy
 - k. Cardiology interventions (e.g., ECG, cath labs)
 - l. Lung ultrasound

4. Assessment of therapeutic interventions
5. Disease management of acute and chronic diseases with and without clinical decision support systems
6. Discharge planning and case management
7. Provision of emergency, acute, critical and post-acute care, including, but not limited to:
 - a. Patient and environmental assessment
 - b. Diagnostic and therapeutic interventions (including the administration of pharmacologic agents)
 - c. Patient air and ground transport
 - d. In hospital and interhospital transports
 - e. Advanced care/end-of-life planning discussion facilitators

TECHNICAL STANDARDS

The MCSHS Respiratory Care Program is committed to educating students who will make the population of healthcare professionals representative of our diverse community.

The following technical standards are not intended to deter any candidate for whom reasonable accommodation will allow the fulfillment of the complete curriculum. Program applicants and admitted students with disabilities are confidentially reviewed to determine whether there are any reasonable accommodations that would permit the individual to satisfy the program standards. The following technical standards are required of all students enrolled in the Respiratory Care Program:

Theme	Essential Functions	Example of Required Activities (Not all inclusive)
Observation	Candidates must be able to observe, demonstrate, and participate in hands-on learning in the classroom, laboratory, and clinical settings. Candidates must be able to acquire information from written documents and computer systems. Candidates must be able to accurately observe patients and assess findings in a timely manner. They must be able to obtain a medical history and perform a complete physical examination to integrate findings based on these observations and to develop an appropriate treatment plan.	<ul style="list-style-type: none"> • Reading small, fine print in all environments, including low-light conditions for accurate patient identification • Acquire information from digital, analog, or graphic gauges, scales, and monitors • Assess breath and heart sounds • Recognize and assess patient changes in mood, activity, cognition, verbal, and non-verbal communication • Acquire information from various equipment such as patient data, alarms, and emergency signals • Recognize patient’s changing condition in regard to their physical exam and interview

<p align="center">Communication</p>	<p>Candidates must be able to communicate effectively, sensitively, and efficiently with patients, families, healthcare professional and faculty. Candidates must be able to acquire the patient’s medical history in a timely manner, interpret non-verbal information, and establish a therapeutic rapport with patients. Candidates are also required to record information accurately and clearly in the patient’s medical record; and communicate efficiently in English with other health care professionals.</p>	<ul style="list-style-type: none"> • Sufficiently communicate in English to retrieve information from literature, computerized databases, and lectures to communicate concepts on written exams and patient charts • Communicate effectively and efficiently with patients, students, staff, faculty, and all members of the healthcare team during all learning experiences • Interact with healthcare faculty, patients, and family in person, in writing, and via the telephone • Fluently read and comprehend the English language necessary to understand caregiver’s written and/or electronic orders and understand any signage related to safety and patient care
<p align="center">Motor Skill & Mobility</p>	<p>Candidates must have sufficient motor functions that they are able to execute movements required to provide general care and treatment to patients in all health care settings within a specified amount of time. Perform physical examinations and diagnostics maneuvers. Respond to clinical situations in a timely and efficient manner while providing general and emergency care.</p>	<ul style="list-style-type: none"> • A candidate required to have full range of motion allowing for gross movements within confined spaces such as bending, stooping, squatting, lifting, straining, and pushing • Must be able to lift a minimum of 50 pounds • A candidate must be able to negotiate patient care environments and must be able to move self/patients between multiple settings, such as outpatient buildings, classroom building, and hospital building • Fine motor skills, steady hand function and hand-eye coordination • In emergent situations, be able to perform basic life support, cardiopulmonary resuscitation (CPR) • Transfer and position patients and re-position self around patients (including sliding, lifting, and pushing patients in bed or wheelchair) • Position and operate typical equipment found in the health care environment (i.e. oxygen tanks, wheelchairs, patient beds, imaging equipment, etc.) • Adhere to universal precaution measures and meet safety standards applicable to inpatient and outpatient settings and other clinical activities. • Within clinical rotations, students may be required to cover large areas of space (different patient-care floors, different wings or sections within institutional building structures). They must be able to transport themselves and patients from one location to another in a timely and safe manner to facilitate patient care responsibilities and to receive education training. Students maybe required to be on their feet walking or remain in a relatively fixed position for the entirety of a procedure for multiple hours at a time with minimal rest or breaks.
<p align="center">Interpersonal Behavior</p>	<p>Candidates must exhibit the emotional stability required for full utilization of</p>	<ul style="list-style-type: none"> • Tolerate physically, mentally, and emotionally demanding workloads, function effectively

<p style="text-align: center;">& Social Skills</p>	<p>their intellectual abilities, which includes, but is not limited to, the exercise of good judgment, and the prompt completion of responsibilities associated with the care of patients. Candidates are expected to exhibit integrity, honesty, professionalism, compassion, and display a spirit of cooperation and teamwork.</p>	<p>under stress, adapt to changing environments, display flexibility and learn to function in the face of uncertainties inherent in the clinical problems of patients</p> <ul style="list-style-type: none"> • Express compassion, integrity, concern for others, interpersonal skills, interest, and motivation when working with patients, staff, and faculty • Manage apprehensive patients with a range of moods and behaviors in a tactful, culturally sensitive, congenial, personal matter so as not to alienate or antagonize them • Accept feedback and respond by appropriate modification of behavior • Exercise good judgement, promptly complete all responsibilities attendant to the diagnosis and care of patients, develop mature sensitive, and effective relationships with patients and other healthcare personnel • Show genuine empathy, understanding, interest and professionalism while interacting with patients • Students are responsible to ensure they arrive fit for duty, which is defined as being in sound emotional, physical, and mental health to provide safe patient care • Students must be available to meet when session are available for the mastery of the curriculum objectives. This may include evening and night obligations.
<p style="text-align: center;">Cognitive & Intellectual</p>	<p>Candidates must be able to assimilate detailed and complex information presented in both didactic and clinical coursework. Candidates are expected to possess the ability to measure, calculate, reason, analyze, synthesize, and transmit information. Candidate must also command the ability to think critically, possess problem-solving and organizational skills necessary for the classroom, laboratory, and clinical settings.</p>	<ul style="list-style-type: none"> • Learn through a variety of methods including, but not limited to, classroom instruction, small group, problem-based learning groups, team and collaborative activities, individual study, preparation, and presentation of reports simulations, and using technology • Organize time independently and manage multi-faceted demands and schedules • Formulate and test hypotheses that enable effective and timely problem solving in treatment of patients in a variety of clinical settings • During the clinical portion of the program, some mandatory clinical rotations require start times at 5:00am or 7:00pm (overnights). Most clinical shifts will be 12-13 hour days. As a result, students must be able to perform clinical duties competently, capably, physically, and psychologically with moderate degrees of sleep deprivation.

<p>Environment</p>	<p>Candidate must have the sensory and physical well-being that will allow an individual to tolerate occasional distressing and/or disturbing conditions that may be present in a clinical setting. Candidate must have the ability to enter the static magnetic field without contraindication.</p>	<ul style="list-style-type: none"> • Tolerate odors associated with disease states and infections • Don personal protective equipment according to isolation precautions, including PAPR, N95, gowns, gloves, eyewear • Tolerate sights such as open incisions, invasive procedures during all patient care situations, and injuries/deformities • Tolerate and function in a wide range of lighting conditions- ranging from high brightness to darkness • Acclimate to various noises which may range from distractions to annoyances • Emotional strength to understand patient and/or family disturbances, death, and dying • Function effectively (by completing the given task) in emergent and stressful situations
<p>Computer & Technological Skills</p>	<p>Candidate must be able to utilize electronic technology in didactic, laboratory and clinical environment.</p>	<ul style="list-style-type: none"> • Demonstrate basic computer functions such as data entry, printing, and ability to function in multiple screens simultaneously. • Learn and understand the software technology utilized in the health setting. • Demonstrate the ability to fully utilize computer equipment independently such as a keyboard, mouse, and barcode scanner
<p>Problem Solving/ Organizational Skills</p>	<p>Candidates must think critically and demonstrate problem-solving and organizational skills necessary in providing quality patient care.</p>	<ul style="list-style-type: none"> • Understand the relationship between patient health status/condition and requested actions • Demonstrate the skills necessary to prioritize tasks especially in emergent situations • Effectively and timely troubleshoot/adapt when necessary • Understand additional resources available, where to locate them and how to use them, including departmental and national policies and procedures
<p>Ethics</p>	<p>Candidates must adhere to Mayo Clinic's mission, vision, and value statements regarding patient care.</p>	<ul style="list-style-type: none"> • Recognize the importance of performing duties in accordance with policies and standard operating procedures • Accept the expectation of maintaining patient confidentiality, both from a legal standpoint and a humanitarian perspective • Understand the Patient Bill of Rights and perform care in a manner that exhibits respect, dignity, and empathy for the patient and family members

IMMUNIZATIONS & INFECTIOUS DISEASE PREVENTION

As part of the degree completion requirements, the student will be placed in a clinical setting

which may require the student to be exposed to individuals with communicable and infectious diseases. However, unless otherwise required by law, the program does not grant special consideration or waiver of any degree completion requirements, including placement in a clinical setting.

The following immunizations are required for entry into the program based on Minnesota law and CDC recommendations

Measles-Mumps-Rubella (MMR)
Tuberculin skin test (PPD)
Hepatitis-B Series
Diphtheria-Tetanus (DT)

The CDC also recommends the following additional immunizations:

COVID 19
Chickenpox (varicella)
Meningococcal vaccine

It is the student's responsibility to comply with the University of Minnesota Rochester immunization policy, which may be different than the Mayo Clinic requirements. Please refer to each institution's policy.

Healthcare workers are at very low risk to contract infectious diseases such as hepatitis or AIDS. The program teaches students how to prevent the spread of infectious diseases for the well-being of students and patients. MCSHS's general orientation program provides information regarding universal precautions for health care workers in the workplace and their personal lives. The Respiratory Care Program further provides training in disease-specific precautions to the respiratory care student in courses and clinically.

MEDICAL INSURANCE

Students are required to obtain and show proof of medical insurance coverage during the program. Insurance is available through the University of Minnesota and more information is available at this link: <https://shb.umn.edu/students-and-scholars/shbp-eligibility>

STUDENT HEALTH AND WELLNESS

Mayo Clinic School of Health Sciences coordinates with several Mayo Clinic employee- and patient –service providers to cover a full-spectrum of personal services for students.

- Academic Advising
- Crisis Intervention
- Disability Services
- Health and Wellness Education and Services

- Ombudsperson
- Personal Counseling

For more information please reference the Mayo Clinic [Student Support Services](#) webpage.

The University of Minnesota Rochester has a Student Health Services office where students can receive free testing and treatment for common acute conditions. Please visit the website to learn more [Health Services](#).

Students must report program related injuries, incidents or exposures, no matter how minor, to the clinical coordinator or program director immediately and Occupational Health Services, when instructed. Mayo Clinic has a robust safety program for the protection of all employees, patients, and students. Students will be introduced to these resources during orientation to the program.

HELP Program

The HELP program is a peer support program available to all members of the Department of Anesthesiology and Perioperative Medicine, including learners. The HELP program is intended to offer support when a provider is involved in adverse events, medical errors, unanticipated outcomes, or any stressful clinical event. Trained Peer Supporters are available to offer support. For more information, visit the [HELP website](#).

To access any of the above websites, you must be connected to Mayo Clinic’s network on campus or use VPN/Authenticator for remote access off campus.

CURRICULUM

Students are responsible for registering for courses prior to the start of the semester and verifying enrollment in the proper courses.

Fall Semester of Junior Year - 15 credits

HP 3021	Patient Care Techniques (1 cr)
RESP 3011	Foundations of Respiratory Care (2 cr)
RESP 3101	Respiratory Care Modalities and Equipment I (4 cr)
RESP 3201	Cardiopulmonary Patient Assessment (4 cr)
RESP 3301	Clinical Practicum I (3 cr)
RESP 3401	Seminar in Respiratory Care I (1 cr)

Spring Semester of Junior Year – 14 credits

RESP 3102	Respiratory Care Modalities and Equipment II (4 cr)
RESP 3202	Advanced Cardiopulmonary Physiology and Pathophysiology (3 cr)
RESP 3302	Clinical Practicum II (3 cr)

RESP 3402	Seminar in Respiratory Care II (1 cr)
RESP 3502	Clinical Research: Literature, Methodology, and Application (3 cr)

Summer Semester between Junior and Senior Year - 7 credits

RESP 3800	Pharmacotherapy for Respiratory Therapists (3 cr)
RESP 4300	Clinical Practicum Summer (2 cr)
RESP 4400	Advanced Adult Critical Care Techniques I (2 cr)

Fall Semester of Senior Year – 12 credits

RESP 4311	Advanced Perinatal and Pediatric Respiratory Care (3 cr)
RESP 4321	Advanced Cardiopulmonary Diagnostics (2 cr)
RESP 4331	Cardiopulmonary Rehabilitation, Disease Prevention and Case Mgt. (1 cr)
RESP 4341	Clinical Practicum III: Advanced Respiratory Care (3 cr)
RESP 4401	Clinical Practicum IV: Advanced Adult Respiratory Critical Care (1 cr)
RESP 4500	Advanced Adult Critical Care Techniques II (1 cr)
RESP 4501	Research Project I (1 cr)

Spring Semester of Senior Year – 13 credits

RESP 4342	Clinical Practicum V: Advanced Respiratory Care (3 cr)
RESP 4402	Clinical Practicum VI: Advanced Adult Critical Care (2 cr)
RESP 4502	Research Project and Publication II (1 cr)
RESP 4602	Grand Rounds (2 cr)
HP 4802	Health Care Delivery Systems and Finance (3 cr)
HP 4902	Leadership and Management in Health Professions (2 cr)

TOTAL 61 credits

SCHEDULE

The majority of the Respiratory Care Program will follow a class schedule 6-hour days while the clinical schedule may be a combination of eight-hour and twelve-hour days, five days a week, with occasional evening and night clinical rotations. A clinical and class schedule will be provided prior to each semester. Students must arrange their own transportation to class and clinical training sites. The program reserves the right to adjust schedules, times, and sequencing as necessary. Attendance and participation in all classes, labs, and clinical rotations are mandatory.

PERFORMANCE EVALUATION TICKETS (PE TICKETS)

Each student will complete several PE tickets during their junior fall, junior spring, and summer terms. The PE tickets will assess each student individually on their knowledge of a procedure or piece of equipment.

- A. Expectations of PE Tickets

- a. The student is to review each PE ticket prior to the schedule assessment date. This is the exact rubric the PE ticket will follow. Students are to notify their instructor if they are unable to access the PE ticket form.
- b. The student is to review classroom notes/lectures/labs/assignments/textbook reading related to the PE ticket.
- c. The student completes self-guided hands-on learning in clinical downtime or in the respiratory therapy classroom/lab.
- d. Students will coordinate with faculty ahead of PE ticket date if they would like additional help preparing.
- e. Students will schedule the PE ticket time with the faculty member assessing them. Students will report to this time and will be excused from clinical during it.
- f. Pass at a Total Average score of 3 out of 4.
 - i. In the event the student does not pass at a 3 or above, the student must coordinate with the faculty member a makeup time to be scheduled within one week to complete again.

EXPECTATIONS OF CLINICAL

Students will complete about 1,000 clinical hours throughout their time in the Respiratory Care program. The scheduled clinical hours will be different for each clinical area, ranging from about 4 hours to 12 hours. The scheduled clinical sites will be on the Rochester Campus, not in Mayo Clinic campus, and in the Mayo Clinic Health System- Mankato, Eau Claire, Austin, and Red Wing. Students must transport themselves to each clinical site and report at the required time prepared.

A. Clinical Schedule

- a. The Director of Clinical Education (DCE) will create each student's schedule per term. The student has the opportunity prior to each term to notify the DCE of potential requests off from clinical. It is at DCE's discretion if the request will be granted.
- b. The student can request a maximum of two clinical schedule shift trades per term. It is at DCE's discretion if the request will be granted.
- c. Late changes the clinical coordinator makes (48 hours or less) will be communicated via pager/email. A response is required from the student after viewing the message.

B. Daily Clinical Expectations

- a. To meet standards set by our accrediting body, CoARC, the program has established goals and standards for clinical rotations. While serving in the student role, students must not be used to substitute for clinical, instructional, or administrative staff. If a student feels they are serving as a substitute for clinical, instructional, or administrative staff they are to notify the Clinical Coordinator at the earliest and safest moment.
- b. Arrive at least 15 minutes early to the assigned clinical site to prepare for the shift and receive patient reports.

- c. Follow Mayo Clinic Dress and Decorum Policy and clinical program dress code policy- royal blue scrub top and bottom with program provided patch attached to either arm sleeve (must always be visible), comfortable closed toed shoes- recommend non-porous, wearing a stethoscope, student pager, and MCSHS Student badge (must always be visible). The student's personal device MUST remain in their bag or personal belongings when performing patient care tasks. Included in the Mayo Clinic Dress and Decorum Policy: "It is unacceptable for staff (students) to smell of cigarette smoke, or other strong perfumes or odors, while at work." Failure to adhere to both policies may lead to the student leaving their clinical shift- then needing to be made up later, a loss of professionalism points, and a meeting with the DCE.
 - d. Each student must keep their student pager on and on their scrubs while in clinical. The student must respond to every page promptly and replace the pager's battery when necessary.
 - e. Clinical preceptors may ask a student to leave clinical- if the student is not engaging in professionalism, causing patient harm, or at their general discretion. The student MUST contact the clinical coordinator IMMEDIATELY if this happens.
 - f. Students must have their clinical syllabus and clinical objectives with them during all clinical rotations. Each student is responsible for knowing the clinical objectives before the clinical rotation and ensuring all objectives are completed by the end of the rotation.
- C. MedHub
- a. The Respiratory Care program uses the online database, MedHub, to record each student's clinical experiences and evaluations- the student must complete these for each clinical shift.
 - i. The student will complete a designated number of clinical PEs (performance evaluations) throughout each semester. The PEs are co-signed by the student's preceptor.
- D. Personal Devices:
- a. Engage in appropriate use of cell phones and other personal communication devices such that they do not interfere with patient care, research, or education activities. Please keep this amount minimal, during lunch or downtime. Students must excuse themselves for personal phone conversations.
 - b. Repeated personal device reminders will warrant a one-on-one meeting with the DCE and program director and loss of professionalism points.
- E. Breaks and Lunch Expectations:
- a. Breaks are to be communicated between preceptor and student. Do not leave the clinical area unless you have communicated with your preceptor. Breaks should avoid interference with patient care and should be at a maximum of 15 minutes.
 - b. All students are entitled to a 30-minute lunch break during their clinical day. Students are encouraged to take their lunch break concurrently with their preceptor. Flexibility is

based on communication between preceptor, student, and patient workload. If you choose to leave the clinical area to have lunch, make sure it is communicated with your preceptor and does not interfere with patient care rounds.

F. Attendance and Absences:

- a. Each student will record their clinical time via the timekeeping tool. The timekeeping tool is treated as a “real” timecard. This records when a student arrives and leaves their clinical shift. Late/no check in and late/no check out will result in a loss of professionalism points.
- b. During a 1 shift at St. Mary’s hospital the expectations are to clock in and to be ready and prepared for report at 0645. This ensures the student can receive the morning patient report. The student may clock out and leave the shift when the exiting report is completed, this is typically around 1900.
- c. Failure to be prepared at 0645 and leaving before the exiting report will result in a loss of professional points as well as having a discussion with the DCE.
- d. It is the student’s responsibility to email the DCE and EAC in the event of planned and unplanned absences. Missed clinical rotations must be made up by the end of the semester, they may not be made up the next term. It is the learner's responsibility to contact the DCE to reschedule the clinical shift within one week of the missed shift or of returning from absence.
- e. A planned absence MUST be emailed to the clinical coordinator and EAC within 24 hours of the assigned clinical shift. An unplanned absence notification needs to be emailed to the DCE and EAC at least 30 minutes prior to report time.
- f. Clinical will be cancelled in the event of the University of Minnesota- Rochester announces school closure and/or activation of an emergency staffing plan at St. Mary’s Hospital. The student will be notified by either UMR or St. Mary’s Hospital in their UMN email or Mayo Clinic email respectively. The student will not go to the scheduled clinical shift. If the student is at clinical when the notification(s) are sent, they will immediately go home. The clinical shift may need to be rescheduled, at the discretion of the DCE.
- g. See the MCSHS Attendance, Tardiness, and Absence policy for more information.

G. STO:

- a. Student time off is a bank of days provided to the students to be used at their discretion for clinical shifts either assigned as a “1” or “2” shift.
- b. The students earn this time off and it is up to the clinical coordinator if the time is approved. Students must communicate with the clinical coordinator and EAC via email at least 24 hours prior to desired STO shift. Do not assume STO shift is approved immediately. The student MUST receive a response from the clinical coordinator indicating the shift is approved.
- c. STO hours are not required to be made up. STO days cannot be used in increments, it must be a whole shift. STO is considered an excused absence. STO

cannot be used on specialty rotations. STO may not be used in the last week of clinical if all PEs are not completed, this is at the discretion of the clinical coordinator.

EMPLOYMENT

The Respiratory Care Program discourages employment that interferes with academic progress. The heavy load of clinical activities combined with study commitments occupies a substantial portion of a student's weekly schedule. Students cannot complete clinical coursework while in an employee status. Students shall not receive any form of remuneration in exchange for work they perform incident to their clinical education coursework and experiences.

COST OF ATTENDANCE

Tuition and fees for the program are established annually by the University of Minnesota Rochester. Up-to-date information can be found online <https://onestop.r.umn.edu/finances/cost-attendance>

Students will be loaned a laptop at no charge for use while enrolled in the program. Personal laptops cannot be used to connect to the Mayo Clinic network.

FINANCIAL AID

Needs-based grants are available to students enrolled in the program. Complete the free application for Federal Student Aid (FAFSA.) The most efficient method to complete the FAFSA is to log on to [Federal Student Aid website](#) and follow the on-screen instructions. Financial aid information and requests should be handled at the University through the Student Financial Aid Office <https://onestop.r.umn.edu/finances/receiving-financial-aid>

GRADUATION REQUIREMENTS

1. Fulfill the University's liberal education requirements; please visit the website for a complete list of requirements.
2. Earn certification in Advanced Cardiac Life Support
3. Earn certification in Pediatric Advanced Life Support
4. Earn certification in Neonatal Resuscitation.
5. Completion of a minimum of 120 semester credits earning a grade of C or higher.
6. Completion of all required course work with a minimum 2.0 GPA.
7. Earn the minimum passing score on the following exams:
 - Skills Assessment Exam in RESP 3302, consisting of clinical scenarios assessed in the Multidisciplinary Simulation Center, or comparable location, and score 75% or better on each scenario.
 - NBRC Secure Comprehensive Therapist Multiple-Choice Self-Assessment Examination, or comparable exam, in RESP 4300 earning a raw score of 86 points or better

- NBRC Secure Comprehensive Therapist Multiple-Choice Self-Assessment Examination, or comparable exam, in RESP 4401 and raw score of 92 points or better
 - NBRC Secure Comprehensive Clinical Simulation Self-Assessment Examination in RESP 4402, earn a raw score within 5% of passing grade.
 - Skills Assessment Exam in RESP 4342, consisting of clinical scenarios assessed in the Multidisciplinary Simulation Center, or comparable location, and score 75% or better on each scenario.
8. Attend an exit counseling session if federal and/or University-administered loan(s) were received.
 9. Return all loaned electronic devices and accessories in good operating condition (or pay for replacement if necessary)

POLICIES STATEMENT

Program academic policies apply equally to students and faculty, regardless of the location where instruction occurs. This handbook is revised annually and the most recent edition replaces all previous editions. The Program reserves the right to implement revised or newly created policies at any time. All students will be notified by the program whenever the handbook is revised.

SATISFACTORY ACADEMIC PROGRESS

A cumulative grade point average (GPA) of at least 2.0 must be achieved for the duration of the program in order to maintain good academic standing as well as to graduate. The minimum satisfactory letter grade for all program courses is a C, or P (pass) in courses graded on a pass/fail basis. Grade point averages are based on the following:

- A = 4.00 points
- B = 3.00 points
- C = 2.00 points
- D = 1.00 points
- F = 0.00 points
- P = 0.00 points (Select courses use a “Pass/Fail” grading scheme)

If a student is not meeting academic progress standards at any time, the program faculty will implement a remediation plan to help the student achieve the program standards. The Mayo Clinic College of Medicine and Science Warning, Probation, Dismissal, and Appeal Policy and Procedures provide a structured framework for learners whose performance does not meet academic and non-academic standards.

Earning less than 75% or the minimum passing score on an exam (written or simulation) will result in the creation of a remediation plan, which may include formal action. In a case that a student earns less than 75% or the minimum passing score on two exams in a course within a semester on the first attempt, the remediation plan will include formal action. The learner’s initial attempt on an exam is what is reflected in the gradebook.

Failing a course (earned letter grade of D or F) will result in academic probation at a minimum. Failing a primarily clinical course will likely result in dismissal from the program based on the need to maintain high standards of patient safety and care. Failure to meet program standards will be managed in accordance with the Mayo Clinic College of Medicine and Science Warning, Probation, Dismissal and Appeal Policy and Procedure.

UMR's Satisfactory Academic Progress standards for can be viewed at this link:

<https://onestop.r.umn.edu/finances/satisfactory-academic-progress-sap>

Students placed on Academic Probation at MCSHS will automatically be placed on Probation at UMR.

Students are able to reattempt exams a maximum of 3 times. Failing the same exam 3 times within any course will likely result in academic probation and possible dismissal.

COURSE REPEAT POLICY

When a student fails a didactic course, the Program Director and School administration will invoke the Mayo Clinic College of Medicine and Science Warning, Probation, Dismissal and Appeal policy. An objective evaluation will be made to determine if the student will be allowed to repeat the failed course as part of a remediation program. If the student is allowed to repeat the course, the following conditions apply:

1. If the failed course is **not a pre-requisite** to the subsequent didactic or clinical courses in the program, the student may continue in the program, but will remain on academic probation at least until the course is completed successfully. Student must re-take the course at the next available opportunity.
2. If the failed course is a **pre-requisite** to the subsequent didactic course in the program, the student cannot continue in the program and will be offered a leave of absence until the course is offered again, and may return to the program at that time.
3. If the course is not successfully completed with a grade of C or higher on the second attempt, the student will be dismissed from the program.

ATTENDANCE, ABSENCES, and TARDINESS POLICY

Attendance is required for all clinical and didactic activities. Activities include in person and virtual lectures, seminars, laboratory sessions, small group discussions, clinical rotations, conferences, examinations, and simulation. Absence is defined as missing one or more class activities per day or missing class activities due to tardiness or early dismissal. Absences are deemed excused or unexcused.

- An excused absence is defined as an absence that was **pre-approved** by course instructors and program director.
- An unexcused absence may occur due to emergency, medical condition, or disability without previous approval.

- ALL absences require immediate notification to the course instructor and program office

Excused Absences

Students will be excused from class for unavoidable or legitimate circumstance and to participate in religious observances in accordance with University of Minnesota Rochester's Attendance Policy. Please visit the website for more information, and a list of unavoidable or legitimate circumstances <https://policy.umn.edu/education/makeupwork> . In the case Occupational Health or a medical provider restricts a student's on campus activity, the student must forward the written communication to the program director on the day it was received.

In the case of inclement weather, the program will follow the directions communicated from the University of Minnesota Rochester and Mayo Clinic. If unscheduled absence exceeds 3 or more days or is associated with an unapproved absence, program faculty may request supporting documentation.

Students must notify their instructors of circumstances leading to an absence from class or clinical as soon as possible and provide information to explain the absence. Students are encouraged to contact their instructor to discuss alternative methods for participation in the case of an unavoidable absence.

If it is necessary for a student to be absent for class or clinical, the student must notify the instructor for the course, at least 15 minutes prior to the scheduled start time on that same day. If the student is unable to call, he or she must have someone make the call.

Expectations for missing class

Students are responsible for all material missed during an absence. Students should notify their instructors prior to the absence to make any necessary arrangement regarding missed exams, assignments, etc.

Unexcused Absence

An absence that does not meet the definition of an excused absence is considered an unexcused absence. Failure to report to scheduled activity without prior notification is considered an unexcused absence and is a violation of the [Mayo Clinic College of Medicine and Science \(MCCMS\) Learner Professional Conduct Policy](#), which will be addressed according to the [Warning, Probation, Dismissal and Appeal Policy and Procedure](#). Any unscheduled, unapproved absence in which supporting documentation was not provided at program's request will be considered an unexcused absence.

Excessive absence

Unexcused absences, excessive absences and tardiness will be addressed through the Mayo Clinic College of Medicine and Science Warning, Probation, Dismissal and Appeal Policy and Procedure. A student may request a leave of absence by talking with the program director.

Excessive absenteeism is defined as two or more unexcused absences in a 30-day period, or as

defined in a clinical syllabus, and will result in a remediation plan, which may involve The Mayo Clinic College of Medicine and Science Warning, Probation, Dismissal, and Appeal Policy and Procedures. Excessive absence in clinical may result in extension of a term or graduation date.

Tardiness

If a student arrives after the scheduled start time for a class, lab, or clinical shift, the student should notify the instructor prior to the scheduled start time. If a student is tardy for clinical and circumstances are such that placing the student with an instructor would lead to interruption of patient care, the student may be asked to leave clinical for the day, which will be documented as an unexcused absence.

Virtual classroom expectations

- Unless arranged and approved by instructor, video cameras should be on when learning in the virtual environment.
- Background and dress should be appropriate for the classroom setting and free of distractions.
- Students must have ability to mute/unmute microphone
- Professional communication etiquette is expected for all video, audio, and chat messaging

WITHDRAWAL POLICY

Enrollment in the Bachelor of Science in Health Professions (BSHP) Respiratory Care Track at the University of Minnesota Rochester is contingent on enrollment in the Mayo Clinic School of Health Sciences Respiratory Care Program.

A student who wishes to withdraw from the program or a course must follow the withdrawal process established by the University of Minnesota Rochester. The MCCMS Withdrawal and Tuition Refund Policy requires the student to initiate the process with the program director.

SCHOLASTIC EXCELLENCE

Students who excel in their course of study while taking 12 or more hours of graded academic work and obtain a grade point average of 3.5 or better are appointed to the University of Minnesota Dean's List.

SCHOLASTIC DISHONESTY

Academic integrity in the Mayo Clinic School of Health Sciences is based on the premise that each student has the responsibility:

- To uphold the highest standards of academic integrity of student work
- To refuse to tolerate violations of academic integrity
- To foster a high sense of integrity and social responsibility to the community

Use of generative artificial intelligence platforms

All course work must be the student's own work unless an instructor indicates otherwise. The use of ChatGPT or other AI tools for course assignments is akin to receiving assistance from another person, which raises the concern that the work is not your own.

- Students may not utilize generative artificial intelligence technologies, such as ChatGPT, to answer or assist in answering exam or quiz questions unless authorized by faculty. Answers to exam quiz questions and prompts must originate from the student and comply with exam or quiz expectations
- All sources must be properly cited, giving credit to authors and contributors. Artificial intelligence technologies will not be considered a legitimate source if included in citations
- Students wishing to use generative AI should be aware that information returned is not always accurate. Students are responsible for the accuracy of work submitted and sources cited.

To protect the integrity of the teaching, learning and evaluation process, the Mayo Clinic School of Health Sciences expects all members of the academic community to respect the principles of academic freedom and to behave with academic integrity. Academic misconduct shall consist of any attempt to misrepresent one's performance on any exercise submitted for evaluation.

- The primary responsibility for ensuring adherence to the principles of academic integrity rests with students and faculty. Any infraction that comes to the attention of any person should be brought to the attention of the Program Director to whose course it pertains or another member of the school's staff.
- Violations of the principle of academic integrity include but are not limited to:
 - Cheating: intentionally using or attempting to use unauthorized material, information, notes, study aids, or other devices in any academic exercise. This definition includes unauthorized communication of information during an academic exercise.
 - Fabrication and falsification: intentional and unauthorized alteration or invention of any information or citation in an academic exercise. Falsification is a matter of altering information, while fabrication is a matter of inventing or counterfeiting information for use in an academic exercise.
 - Multiple submissions: the submission of substantial portions of the same academic work (including oral reports) for credit more than once without authorization.
 - Plagiarism: intentionally or knowingly presenting work of another as one's own (ie, without proper acknowledgement of the source). The sole exception to the requirement of acknowledging sources is when the ideas, information, etc are common knowledge.
 - Abuse of academic materials: intentionally or knowingly destroying, stealing, or making inaccessible library or other academic resources or materials.
 - Complicity in academic dishonesty: intentionally or knowingly helping or attempting to help another commit an act of academic dishonesty.

All students are expected to be aware of what plagiarism is and is not. Ignorance will not be accepted as an excuse for plagiarism.

Scholastic dishonesty is addressed at the UMR through the Student Conduct policy and at MCCMS it is addressed through the [Formal Warning, Probation, Dismissal, and Appeal Policy](#).

USE OF COURSE MATERIALS

Students may not distribute instructor-provided notes or other course materials, except to other members of the same class or with the express (written) consent of the instructor. Instructors have the right to impose additional restrictions on course materials in accordance with copyright and intellectual property law and policy. Students may not engage in the widespread distribution or sale of transcript-like notes or notes that are close to verbatim records of a lecture or presentation. Reproducing or recording exams and quizzes is prohibited. Exam and quizzes may not leave the classroom unless permitted by the faculty member. For additional information, please see: <https://policy.umn.edu/education/studentresp>

PHONE CALLS, CELL PHONES, COMPUTER USAGE, AND USE OF PERSONAL ELECTRONIC DEVICES

- The use of electronic devices (phones, computers, tablets, etc.) during lectures is at the discretion of individual instructors. Please clarify the instructor's position on computer use prior to utilization.
- The use of electronic devices should be limited to activities that are related to the lecture/class—note taking, syllabus review, etc. It is inappropriate to use devices for activities such as checking/sending email, social media, or internet surfing during didactic lectures. Consequences for use of devices are at the discretion of the individual instructor
- For complete information please reference: <https://policy.umn.edu/education/studentresp>
- Use of Mayo Clinic computers, network, & internet usage is defined by the [Allied Health Staff Employee Policy Manual Policy](#).
- Learners are responsible for following the [MCSHS social media guideline](#)
- Mayo Clinic E-mail use is defined by the Allied Health Staff Employee Policy Manual. Students are provided with an e-mail account. Appropriate use of Mayo Clinic E-Mail is defined by the [Appropriate Use of Mayo Clinic E-Mail Policy](#).

PROGRAM COMMUNICATIONS

Respiratory care students will receive a Mayo Clinic e-mail account. All official correspondence with Mayo Clinic faculty should be communicated via Mayo Clinic e-mail. **Students are responsible for checking their Mayo Clinic e-mail accounts daily. Learners should primarily communicate with faculty via email or Teams. In emergent situations, contact faculty via mobile phone.**

All University of Minnesota students have a university e-mail account and students are responsible for all communications sent to that account. Students may wish to use the system functionality to automatically forward emails into a single account.

A pager will be assigned to each student, and each student will be responsible to have their pager on and working on days the student is scheduled to be in class and clinical. Changes to the schedule will be communicated using a text page and email.

CHANGE OF ADDRESS RESPONSIBILITY

It is the responsibility of all students to inform the UMR Registrar's Office, Mayo Clinic, and the Respiratory Care Program of any change of address or phone number within one week of change. Update personal information from the One Stop web page [Onestop](#). It is the student's responsibility to keep their address/contact information current with the lenders from their student loans.

Update the Mayo Clinic School of Health Sciences record through Employee Connect

LEGAL AND COMPLIANCE RESOURCES

The Respiratory Care Program follows Federal and State laws, including the Family Education Rights and Privacy Act (FERPA) and several others which require specific disclosures as well as consumer and student right to know information. A comprehensive compilation of resources is available online at <https://college.mayo.edu/about/college-profile/consumer-information-and-disclosures/>

GRIEVANCE PROCEDURE

Students can initiate the MCCMS Grievance Procedure at any time to facilitate resolution of conflicts, problems, or disagreements within a program. Reports of mistreatment of any kind may be filed, anonymously if desired, through the MCCMS compliance hotline at 1-888-721-5391.

For resolving student academic complaints refer to The Mayo Clinic College of Medicine and Science policy: [Grievance procedure](#)

Students can initiate the UMR Grievance Procedure at any time to facilitate resolution of conflicts, problems, or disagreements within a program. Academic grievances must be based

on a claimed violation of a University rule, policy, or established practice. This policy does not limit the University's right to change rules, policies, or practices. For resolving student academic complaints refer to [UMR Grievance Procedures](#)

[Complaints related to programmatic compliance with the CoARC's Standards, Practices, and Policies, and Procedures may be reported to the Commission on Accreditation for Respiratory Care. In order to submit a complaint to CoARC, the complainant must identify themselves and share contact information.](#)

NATIONAL CREDENTIALING AND LICENSURE

- Certification as an entry level respiratory care practitioner is required of all graduates in order to obtain state licensure. Application forms and information about credentialing may be obtained from the [National Board for Respiratory Care \(NBRC\) website](#).
- A license is required to practice Respiratory Care in the State of Minnesota. More information is available online. The application can be found on the [MN Board of Medical Practice website](#).

American Association for Respiratory Care (AARC)

AARC membership grants students membership in the Minnesota Society for Respiratory Care (MSRC), allowing participation in MSRC-sponsored seminars and educational lectures at reduced rates. More information can be found at <http://aarc.org/> and <http://msrcnet.com/>.

The Commission on Accreditation for Respiratory Care (CoARC) accredits the Respiratory Care Program. Their contact information is:

CoARC
264 Precision Blvd
Telford, TN 37690 USA
(817) 283-2835
(817) 354-8519 (fax)
Or online at <http://www.coarc.com/>

RESOURCES

<u>Mayo Clinic School of Health Sciences</u>	
<u>Resources</u>	
Stephanie J. Holst, MS, RRT Program Director	Brendan T. Wanta, M. D. Medical Director

Phone: (507) 284-0174 Direct dial pager : 5-3641 Email: Holst.stephanie@mayo.edu	Phone: (507) 255-4305 Email: Wanta.Brendan@mayo.edu
Pia P. McEleney, MS, RRT Academic Coordinator Phone : (507) 284-5995 Pager : 127 (24454) Email : McEleney.Pia@mayo.edu	Amanda Boyson, MS, RRT Director of Clinical Education Phone: (507) 284-0186 Pager : 127-07370 Email : Krinke.amanda@mayo.edu
Becky Radtke Education Administrative Coordinator Phone: (507) 284-0200 Fax: (507) 284-2818 Email: Radtke.becky@mayo.edu	Mayo Clinic School of Health Sciences Student Services: http://intranet.mayo.edu/charlie/student-services/
<u>University of Minnesota, Rochester</u> <u>Resources</u>	
UMR Student Services web site : https://onestop.r.umn.edu/ Email : umr1stop@r.umn.edu Phone : Unavailable at this time	University of Minnesota Rochester BSHP coordinator: Lourdes Irizarry, PhD Phone: 507-258-8055 Email: canc0003@r.umn.edu

CHANGES IN POLICY

Additional policies and regulations may be established by the department or by the instructor for a course or any portion of a course. After due and proper notification, students will be expected to comply fully with all regulations.

Respiratory Care Program
Mayo Clinic School of Health Sciences
Academic year 2024-2025

I acknowledge that I have received and am responsible for the 2024-2025 Respiratory Care Program Student Handbook.

Printed Name: _____

Signature: _____

Date: _____