

CASPER COLLEGE COURSE SYLLABUS  
(Course Number and Title — (must match catalog - changes require curriculum committee approval))

**Semester/Year: Fall 2015**

**Lecture Hours:** TBA

**Lab Hours:** TBA

**Credit Hours:** 4

**Class Time:** TBA

**Days:** TBA

**Room:** TBA

**Instructor's Name:** Alexia Johnson

**Instructor's Contact  
Information:** HS 117

**Office Phone:**  
268-2470  
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(emergency only)

**Email:**  
alexiajohnson@caspercollege.edu

**Office Hours:** Posted

**Course Description:** Continuation of respiratory clinical rotations with an emphasis on ICU, critical care and advanced ventilator management. The student will also participate in critical thinking classes on a weekly basis to improve their clinical decision making skills. Case studies will be researched and presented. See program handbook for clinical clock hours vs credit hours description. (Second year fall semester.)

**Statement of Prerequisites:** RESP 2500

**Goal:** The goal of this course is to provide students with opportunities to learn and practice clinical respiratory skills under supervision in both the lab and clinical settings.

**Outcomes:**

1. Demonstrate effective oral and written communication
2. Solve problems using critical thinking and creativity
3. Appreciate aesthetic and creative activities
4. Use appropriate technology and information to conduct research
5. Use quantitative analytical skills to evaluate and process numerical data

**Course Objectives:** Upon completion of the course, the student will be able to perform under supervision in a clinical setting the following:

- 1) Ventilator set up, monitoring, and recommend initial ventilator settings
- 2) Ventilator special procedures (modalities and vent operations that are more specialized)
- 3) ABG- draws and interpretation
- 4) EKG -performance and interpretation
- 5) ABG Machine Quality Control and Management
- 6) CXR- interpretation
- 7) Neonatal/Pediatric Assessment
- 8) Neonatal Ventilation/Ventilators
- 9) NIPPV- set up, monitoring and weaning

**Methodology:** Clinical rotations at various sites, soap notes, site evaluations, Daily logs, clinical competencies, case studies, board and video presentations, ICU performance evaluations, and clinical preceptor evaluations.

**Evaluation Criteria:** It is the philosophy of the Respiratory Therapy Program that in order for the student to derive the maximum benefit from the clinical rotation, that the student attend all clinical rotations as assigned. See the Respiratory Therapy Handbook for attendance policy. Two hundred forty (240) hours of documented clinical time is required for the successful completion of this course in addition to the written and interactive components of the course. Attitude and participation are also a major component of your grade.

- Validation of Daily Logs must be done by a preceptor. I will validate 2 at no cost to your grade. After that, a 20% grade deduction on each log that I have to validate.
- Time Clock must be accurate with correct time in and time out. I will fix 2 at no cost to your grade. After that a 20% grade deduction on daily points for that clinical shift.
- Clocking In and Out at Clinical Site. All Clock-ins for Clinical Hours must be done on a site computer and not phones, tablets or home computers. IP addresses will be checked.
- Class Attendance is required. For each of the first 5 tardies or early departures from class including absences, 5 points will be subtracted. Any after the first 5, will result in 10 points subtracted from your total score. If you are sick and can bring me a written note from a physician, an exception will be made. **\*I reserve the right to adjust this in extreme circumstances like a Doctor's note, a death certificate, etc.**
- Schedule Changes- You are expected to attend all clinicals as scheduled on calendar. I will allow one change during the semester, which I will have to approve. If I am not notified or do not approve the change, the hours will have to be made up again by the parties involved. After that, a 10% grade deduction will be made on the total grade for each change. **\*The Clinical Director reserves the right to extend this in extreme circumstances.**
- **Assignments-** All assignments are due by 3pm the day they are due (See Syllabus)
- **Late Work-** I will accept Late work after the deadline with a 10% grade deduction each day it is late and it is due no later than the following Monday at 3pm. After this, it will be a Zero in the grade book.
- **Simulation Days\*\*\*** you will be required to participate in the debriefing. While there are no points obtained for participation, points can be subtracted for lack of participation. The Friday after each Sim day, a ½-1 page report is due. You will choose a SIM that you learned the most from (good or bad) and write about that experience. Explain how you can use that in the future to provide better care for your patients. It doesn't have to be the one you physically participated in. **Please see the attached Rubric.**
- **Writing a SIM paper-** The format handout will be given at a later date. There will be 2 groups of 2 people and one group with 3 people. You will be evaluating a Case Study from your clinicals and creating a SIM that you believe will help others in their learning process. I would like you to include at least one other discipline in the SIM. The learning objectives are: learning to apply the information you have already learned regarding mechanical ventilation and/or airway management, critical thinking for the information that you still need to learn, and working as a team. You will be doing a peer evaluation of the participation of the team members. Dates for drafts are below. Your final draft will be graded based on creativity, accuracy, and learning objectives.

## Grading

Criteria	Points	Date Due
Clinical Hours, Dataarc Daily Logs, and Preceptor Evaluations. (12 points a day for 12 hour shifts and 10 pts a day for 8 hour shifts)	200	Daily logs and preceptor evaluations are due each clinical day including Doctor days.
Site Evaluations 7 @ 10 points each	70 (CRMC, WMC, RWMC, BC WMC Sleep Lab, INT,& Doc)	Due at the end of your stretch there or the day of if 1 day.
Clinical competencies 27 @ 10 points each	270	See below
ICU performance Evaluations 6 @ 10 points each	60 (Nicole, Adrian, or Aaron days)	Due each shift with Nicole, Adrian, or Aaron
Board decorating (3 groups) plus peer evaluation	50	9/30/15
SIMS EVAL, Reflection, and attendance 6 @ 20 points each	120	Due each Sims day (5 days are scheduled, one during lecture) Reflections due Friday.
Case Study ( vent patient)	100 ( 50 pts for writing it and 50 pts for presenting the study)	10/26/15 (Will present in class meeting)
Create your own SIM and peer evaluation ( groups of 3,2,2)	100 ( 80 for the SIM and 20 for the peer evaluation)	<b>10/27/15</b> 1 <sup>st</sup> draft (20 pts) <b>11/10/15</b> 2 <sup>nd</sup> draft (20 pts) <b>11/24/15</b> - final (40 pts)
Respiratory Skit	100	12/10/15
Semester Evaluations (SIM and Class)	30	<b>TBA</b>
Total	1100	

## Grades

Grade	Points
A	1012-1100
B	913-1011
C	858-912
D-F	Less than 858 points is failure to complete the course and dismissal from the program.

## Written Rubric for Case Study (50 Possible Points)

	<b>Seriously Deficient (2 points)</b>	<b>Substantially Flawed (4 points)</b>	<b>Inadequate (6 points)</b>	<b>Satisfactory (8 points)</b>	<b>Good (10 points)</b>	<b>Excellent (12.5 points)</b>
<b>Structure</b>	Lacks length and organization; does not adhere to topic.	Lacks length and organization; unclear understanding of topic. No mention of disease or meds	Lacks length enough for real analysis; strays from topic or is partially unfocused. Mentions disease/meds but doesn't describe them at all	Has good basic organization and sufficient paragraphing. Mentions a disease and meds but doesn't describe them in detail	Has well-developed paragraphs and structure; stays on topic. Only focuses on one disease and medications	Has well-developed paragraphs and structure; Explains in major detail the disease(s) process and medications that help
<b>Evidence</b>	Provides no evidence	Provides very sparse examples to back up claims. Gives 1 reason why the patient has this disease	Provides insufficient examples to back up claims. Gives 1 reason why the patient has these disease	Provides sufficient examples to back up claims. Gives 2 reasons why the patient has a disease	Provides strong examples to back up claims. Gives 3 reasons why the patient has a disease	Provides very strong examples to back up claims. Gives 4 or more reasons why the patient has these disease (s)
<b>Depth of Analysis</b>	Shows very little understanding of topic and gives no analysis of it.	Presents topic, but fails to give any analytical critique. Uses 1-citation from an article without proper citation	Analyzes somewhat, but fails to explain major areas of topic. Uses 1-citation from an article	Addresses topic adequately with some analysis. Uses 2 citations from articles	Addresses topic with thorough analysis. Uses 3 citations from articles	Addresses topic and analyzes with great clarity and depth. Uses 4 or more-citations from articles
<b>Style/ Grammar</b>	Has severe and persistent errors in sentence structure and use of language; meaning is lost.	Frequently uses language incorrectly and sentence structure; grammar and usage errors inhibit meaning.	Uses language imprecisely and is deficient in variety; some major errors or a number of small errors.	Controls language adequately, including syntax and diction; a few flaws.	Controls language with clarity, including variety of syntax and diction; may have a flaw here and there.	Controls language extremely well, including variety of syntax and diction; may have a small flaw here and there.

## Presentation Rubric (50 Possible Points)

	<b>Seriously Deficient (2 points)</b>	<b>Substantially Flawed (8 points)</b>	<b>Inadequate (15 points)</b>	<b>Satisfactory (18 points)</b>	<b>Good (22 points)</b>	<b>Excellent (25 points)</b>
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<b>Style/ Grammar</b>	Has severe and persistent errors in sentence structure and use of language; meaning is lost.	Frequently uses language incorrectly and sentence structure; grammar and usage errors inhibit meaning.	Uses language imprecisely and is deficient in variety; some major errors or a number of small errors.	Controls language adequately, including syntax and diction; a few flaws.	Controls language with clarity, including variety of syntax and diction; may have a flaw here and there.	Controls language extremely well, including variety of syntax and diction; may have a small flaw here and there.
<b>Presentation</b>	Holds no eye contact with audience, as entire report is read from notes. Speaks in low volume. Shows no interest in topic presented. Does not have a grasp of information and cannot answer questions about the subject. Shows no feeling about topic.	Holds no eye contact with audience, as entire report is read from notes. Speaks in low volume. Is uncomfortable with information and is able to answer only rudimentary questions. Shows no or little feelings about topic.	Displays minimal eye contact with audience, while reading mostly from the notes. Is uncomfortable with information and is able to answer only rudimentary questions. Shows little or mixed feelings about the topic being.	Consistent use of direct eye contact with audience, but still returns to notes. Is slightly uncomfortable with information and is able to answer only rudimentary questions. Shows little or mixed feelings about the topic being.	Consistent use of direct eye contact with audience, but still returns to notes. Is at ease with expected answers to all questions, without elaboration. Shows some enthusiastic feelings about topic.	Holds attention of entire audience. Demonstrates full knowledge by answering all class questions. Demonstrates strong enthusiasm about topic during entire presentation.

## Rubric for Decorating boards

<b>Category</b>	<b>10</b>	<b>8</b>	<b>5</b>	<b>2</b>
<b>Neatness</b>	Project is exceptionally attractive meaning layout, design and neatness.	Project is attractive in design, layout and neatness.	Project is attractive, but a bit messy	Project is messy and unattractive in design and layout.
<b>Grammar/Spelling</b>	Project has no grammatical or mechanical mistakes	Project has 1-2 grammatical or mechanical mistakes.	Project has 3-4 grammatical or mechanical mistakes	Project has more than 4 grammatical or mechanical mistakes.
<b>Teamwork</b>	Worked together on all aspects of project	Worked on some, but not all aspects of project.	Worked on a very small piece of the project as a group.	Worked alone on project without consulting group.
<b>References</b>	All references listed	All, but 1 reference listed	All, but 2 references listed	No references listed
<b>Creativity</b>	The project shows excellent creativity in design.	The project shows average creativity in design	The project shows little creativity in design	The project shows very poor / no creativity in design

### Rubric for SIM Reflection

Category	5	4	3	2
<b>Required elements</b>	Project has all required elements and extra information	Project has all, but 1 of the required elements.	Project is missing 2 or more of the required elements	Project is missing all required elements
<b>Neatness</b>	Project is exceptionally attractive meaning layout, design and neatness.	Project is attractive in design, layout and neatness.	Project is attractive, but a bit messy	Project is messy and unattractive in design and layout.
<b>Grammar/Spelling</b>	Project has no grammatical or mechanical mistakes	Project has 1-2 grammatical or mechanical mistakes.	Project has 3-4 grammatical or mechanical mistakes	Project has more than 4 grammatical or mechanical mistakes.
<b>Reflection of SIM</b>	Deep reflection of the SIM. Digs deep into how they feel about it.	Gives 2 ideas about how the SIM helped them become a better therapist/student	Gives 1 idea about how the SIM helped them become a better therapist/student	Only gives basic information. Didn't explain how they could use the SIM to become better.

### Rubric for Respiratory Skit 100 points total

	10 points	20 points	25 points	30 points
<b>Team Work</b>	1 or 2 people doing all the work; not willing to do skit as a group	2-3 people working together. Few people willing to be on screen or waiting till last minute to help	Good teamwork, everyone is involved but at least one person refuses to be on screen	Exhibits great teamwork; everyone is involved and on the screen.
<b>Creativity</b>	Very bland, doing a simple respiratory concept	Takes a simple respiratory concept but puts a slight twist on it	An unique idea but sticks with the norm; but still exciting	An unique idea; takes the idea and puts a twist on it
	5 points	10 points	15 points	20 Points
<b>Accuracy</b>	Very little truth to skit	Half accurate	Accurate in the majority of the skit	Perfectly accurate
<b>Presentation</b>	Skit has many mistakes and doesn't flow	Skit has a few major mistakes and inappropriate breaks (ex. People messing up lines, etc)	Skit has some minor issues with how it flows (some mistakes) but overall is put together well	Skit is put together well and flows well. Very tidy.

**Required Text, Readings, and Materials:** Scrubs in the correct color (Royal Blue tops and black bottoms), stethoscope, transportation to and from clinical sites, Casper College name tag, clinical site identification badge, calculator, small note pad, pen and comfortable shoes that adhere to the Respiratory Program's dress code.

**Class Policies: Last Date to Change to Audit Status or to Withdraw with a W Grade:** Last date to change to Audit status or to withdraw with a W grade: Friday November 12, 2015. Failure to pass this class with a grade of 'C' or better will result in dismissal from the program.

**Student Rights and Responsibilities:** Please refer to the Casper College Student Conduct and Judicial Code for information concerning your rights and responsibilities as a Casper College Student.

**Chain of Command:** If you have any problems with this class, you should first contact the instructor to attempt to solve the problem. If you are not satisfied with the solution offered by the instructor, you should then take the matter through the appropriate chain of command starting with the Department Head/Program Director, the Dean, and lastly the Vice President for Academic Affairs.

**Academic Dishonesty:** (Cheating & Plagiarism) Casper College demands intellectual honesty. Proven plagiarism or any form of dishonesty associated with the academic process can result in the offender failing the course in which the offense was committed or expulsion from school. See the Casper College Student Code of Conduct for more information on this topic.

**Official Means of Communication:** Casper College faculty and staff will employ the student's assigned Casper College email account as a primary method of communication. Students are responsible to check their account regularly. This is also, where you will find course evaluation links during course evaluation periods.

**ADA Accommodations Policy:** If you need academic accommodations because of a disability, please inform me as soon as possible. See me privately after class, or during my office hours. To request academic accommodations, students must first consult with the college's Disability Services Counselor located in the Gateway Building, Room 344, (307) 268-2557, [bheuer@caspercollege.edu](mailto:bheuer@caspercollege.edu). The Disability Services Counselor is responsible for reviewing documentation provided by students requesting accommodations, determining eligibility for accommodations, and helping students request and use appropriate accommodations.

**Calendar or schedule indicating course content:** (be as complete here as possible, at least a grid showing week by week topics to be covered, assignments, due dates, readings etc. This can always be modified with a new handout later in the semester – better to send out a revised schedule than to trust verbal announcements by themselves)

**\*\*Syllabus is subject to change. All changes will be emailed and students will be given ample time for any changes.\*\***

# CLINICAL PRACTICUM II SYLLABUS

Fall 2015

RESP 2548

<b>Date- Week of</b>	<b>Topic</b>	<b>Competencies</b>	<b>Date Due</b>
8/24	Drager  Review	Ventilator setup Routine ventilator check Intubation Securing Artificial Airway	10/16/15
	Review	Endotracheal Suctioning Tracheal Suctioning In-line suctioning	10/16/15
9/1	ABG Draw/Art line draw Review	ABG sampling ABG Analysis	10/16/15
9/14	ABG Machine QA, Point of care and Proficiency testing Review	ABG Analyzer QA  Inline MDI Inline SVN	10/16/15
9/21	Compliance and Resistance Review	Capnography Cuff management	10/16/15
9/28	Ventilator Graphics and Circuit Change	Ventilator Graphics Analysis Ventilator Circuit Change	10/16/15
10/5	Transport Ventilator	Transport Ventilator Setup	12/11/15
10/13	Midterm Week	All above competencies except transport vent due	10/16/15
10/19	Weaning parameters  Review	Weaning Parameters Weaning Trach Care	12/11/15
10/26	Neonatal/Pediatric Assessment	Pediatric Vital Signs Pediatric Assessment	12/11/15
11/2	Baby Vents  Review	Next semester Noninvasive ventilator setup Noninvasive ventilator check	12/11/15
11/10	Rad. Lecture (TBA) Baby-Drager  Review	Xray Interpretation Next semester  EKG Extubation	12/11/15
12/2	NRP/ SIMs		12/2/15
12/7-12/8	Lab Final	All competencies due	12/11/15
12/9	Finals Week		