LOUISIANA STATE UNIVERSITY HEALTH SCIENCES CENTER – NEW ORLEANS

Respiratory Therapy Program
Department of Cardiopulmonary Science
School of Allied Health Professions
By John Zamjahn, PhD, RRT, RPFT, Program Director

LSU Health Sciences Center New Orleans (LSUHSC-NO), located in the heart of New Orleans adjacent to the Mercedes-Benz Super Dome, Louisiana Cancer Research Center, University Medical Center, and the Southeast Louisiana Veterans Health Care System Medical Center, was founded in 1931 as the LSU Medical Center. LSUHSC-NO currently comprises six professional schools and eight Centers of Excellence. The professional schools include, in order of their establishment: Medicine (1931), Graduate Studies (1965), Dentistry (1966),
Nursing (1968), Allied Health Professions (1970), and Public Health (2003). The Centers of Excellence include the Alcohol and Drug Abuse Center, Cardiovascular Center, Center of Excellence in Oral and Craniofacial Biology, Epilepsy Center, Eye Center, Louisiana Vaccine Center, Neuroscience Center of Excellence, and the Stanley S. Scott Cancer Center. The faculty, approximately 1,100 professionals, carries out the mission of the Health Sciences Center in providing education, research, and public service through direct patient care and community outreach.

LSUHSC-NO established a Center for Interprofessional Education (IPE) and Collaborative Practice (CIPECP) (http://www.lsuhsc.edu/administration/academic/cipecp/) in April, 2015, as a component of the institution’s reaffirmation (quality enhancement plan). The goal of the CIPECP is to coordinate student education by utilizing a team-based, patient-centered approach across all LSUHSC-NO Schools and Programs. According to the CIPECP Director, Tina Gunaldo, Ph.D., DPT, MHS, LSUHSC-NO has undertaken one of the largest IPE experiences in the United States. The IPE experience, Team Up: Commit to Compassion, Communication and Collaboration, is a two-year longitudinal experience integrated within the curriculum of all six LSUHSC-NO schools for all first- and second-year students. Beginning in September 2017, 659 first-year students from nineteen academic programs were organized into 65 interprofessional groups. The student groups meet on a monthly basis, and in year one of Team Up, student learning experiences focus on communication, observation, and team development. Also, in year one, student teams concurrently engage with community members through the Health Partner program, where they learn about the health, health experiences, and health goals of community members. In the second year of Team Up, the same student groups will analyze wide-ranging patient/client conditions through case studies, while increasing empathy and compassion through lived experiences.

**School of Allied Health Professions**

The School of Allied Health Professions in New Orleans currently comprises seven academic departments offering nine professional academic degree programs.

**Undergraduate degrees:**

- Bachelor of Science in Cardiopulmonary Science (Department of Cardiopulmonary Science)
- Bachelor of Science in Medical Technology (Department of Clinical Laboratory Science)
Graduate degrees:

- Master of Communication Disorders in Speech and Language Pathology (Department of Communication Disorders)
- Master of Health Sciences in Clinical Rehabilitation Counseling (Department of Clinical Rehabilitation and Counseling)
- Master of Occupational Therapy (Department of Occupational Therapy)
- Master of Physician Assistant Studies (Department of Interdisciplinary Human Studies)
- Doctor of Audiology in Hearing (Department of Communication Disorders)
- Doctor of Physical Therapy (Department of Physical Therapy)

The School of Allied Health Professions also includes the Human Development Center, which is an outreach program to increase capacity of healthcare professionals providing services for individuals with developmental and acquired disabilities and their families; and clinics in child and family counseling, physical therapy, speech and audiology, and occupational therapy. Total enrollment of the School of Allied Health Professions in New Orleans averages about 400 students (approximately 13% of the total enrollment of the Health Sciences Center).

Department of Cardiopulmonary Science

The Department of Cardiopulmonary Science offers professional academic programs in respiratory therapy (including polysomnography) and cardiovascular sonography (cardiac and vascular ultrasound). The department accepts up to fifteen respiratory therapy students and ten cardiovascular sonography students each year. Accepted students have completed no less than sixty credit hours of prerequisite pre-professional courses (shown below). Often students hold baccalaureate and even graduate degrees upon acceptance. Throughout their program of study, Cardiopulmonary Science students complete twenty-two of the required seventy-one total credit hours of professional course work together, beginning with gross human cadaveric anatomy and cardiopulmonary physiology.

The goals of the Respiratory Therapy Program are to 1) prepare graduates with demonstrated competence in the cognitive, psychomotor, and affective learning domains of respiratory care practice as performed by registered respiratory therapists and 2) prepare leaders for the field of respiratory care by including curricular content that includes objectives related to acquisition of skills in management, education, research, and advanced clinical practice.
The Cardiopulmonary Science Respiratory Therapy Program has received continued accreditation since the inception of its first class of students in 1978. The Program was offered on the New Orleans and Shreveport campuses until March 2004 when the campuses were separated administratively. Within a month’s time following the wake of Hurricane Katrina in August 2015, the Program’s faculty, staff, and students relocated to the Pennington Biomedical Research Center in Baton Rouge and resumed classes. Working in collaboration with Our Lady of The Lake College in Baton Rouge, laboratory instruction was carried out in their respiratory therapy program’s labs after hours. Students attended newly established clinical affiliates in Baton Rouge and surrounding areas. The Cardiopulmonary Science Program returned to the New Orleans campus in the summer of 2006. The Program’s curriculum design of students completing respiratory therapy training in the first year and adult echocardiography in the second year, was revised in 2008 into its two concurrent tracks: respiratory therapy and cardiovascular sonography. A Registry-to-B.S. in Cardiopulmonary Science track (campus-based) was also created in 2008. Since 2014, the Respiratory Therapy Program has received CoARC’s Distinguished Registered Respiratory Therapist Credentialing Success Award. The current respiratory therapy program faculty has over 100 years of collective teaching experience in respiratory therapy. The Cardiopulmonary Science program will celebrate its 40th anniversary at LSUHSC-NO next year.

### Semester Hours of Prerequisite Courses

<table>
<thead>
<tr>
<th>Course</th>
<th>Hours</th>
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<tbody>
<tr>
<td>English Composition</td>
<td>6</td>
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<tr>
<td>Humanities</td>
<td>9</td>
</tr>
<tr>
<td>Chemistry (General and Laboratory)</td>
<td>8</td>
</tr>
<tr>
<td>Mathematics (Algebra and Trigonometry)</td>
<td>6</td>
</tr>
<tr>
<td>Biology (General and Laboratory)</td>
<td>8</td>
</tr>
<tr>
<td>Human Physiology</td>
<td>3</td>
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<tr>
<td>Science Elective</td>
<td>3</td>
</tr>
<tr>
<td>Psychology (General)</td>
<td>3</td>
</tr>
<tr>
<td>Physics (General and Laboratory)</td>
<td>4</td>
</tr>
<tr>
<td>Microbiology (Introductory and Laboratory)</td>
<td>4</td>
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<tr>
<td>Art Elective</td>
<td>3</td>
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<tr>
<td>Sociology</td>
<td>3</td>
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<tr>
<td>Subtotal</td>
<td>60</td>
</tr>
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</table>
Interdisciplinary and IPE Curriculum

Students experience low-fidelity and high-fidelity simulation training that engages them in active, competency-based, hands-on learning in a controlled safe simulation environment. The department is equipped with an ASL5000 lung simulator that allows for ventilator training and the assessment of student’s ventilator management of simulated mechanically ventilated patients. Among the department’s labs is a simulated hospital patient room and a pulmonary function lab designed for complete pulmonary function testing, metabolic studies, and cardiopulmonary exercise testing. The department also utilizes the Isidore Cohn, Jr. MD. Learning Center, located within the School of Medicine, and the Nursing Skills and Technology Center, located within the School of Nursing, for training, interdisciplinary, and IPE experiences. The Isidore Cohn, Jr. MD. Learning Center houses multiple simulation/demonstration laboratories complete with state-of-the-art audio-visual technology, and eight small-group teaching rooms. The Nursing Skills and Technology Center houses a fifteen-bed hospital laboratory with state-of-the-art high fidelity simulation technology, and a labor and delivery room equipped with maternal and neonatal birthing simulators.

In addition to participating in Team Up, students engage in interdisciplinary and IPE experiences throughout the curriculum with the Schools of Nursing, Allied Health Professions, and Medicine. Students engage in airway lectures and labs with nurse anesthesia students learning airway assessment and management of difficult airways, which includes fiber optic intubation and cricothyroidotomy with jet ventilation. Students also participate in arterial line insertion labs with nurse anesthesia students, neonatal/delivery IPE simulations with nursing students, cadaveric intubation with emergency medicine residents, homecare IPE simulations with occupational therapy and nursing students, and starting in the spring 2018, BLS and ACLS IPE simulations involving physician assistant, nursing, and medical students.

Clinical Training

Sixteen clinical affiliations throughout the surrounding metropolitan area offer students a diverse clinical experience, whereby students gain clinical skills in managing challenging patient populations. The respiratory therapy program uses the Trajeectsys system to track students’ clinical fieldwork, which includes on average 1,025 clinical hours of training over five
semesters. Our students’ clinical resume includes experience in areas of adult, pediatric, and neonatal general and intensive care, high-risk delivery, trauma/emergency room, pulmonary diagnostic testing, pulmonary rehabilitation, home care, hyperbaric oxygen therapy, smoking cessation, and sleep diagnostics. In addition, students attend pulmonary disease management rotations with our program’s medical director and other pulmonary/critical care medicine physicians in their clinical outpatient practices. Students spend time in a multi-disciplinary Muscular Dystrophy Association/amyotrophic lateral sclerosis neurology clinic, comprehensive pulmonary hypertension center, adult cystic fibrosis program clinic, COPD management program clinic, and in an operating room providing airway management and intubation under certified registered nurse anesthetists’ supervision. Senior students during their last semester participate in a management rotation with respiratory care managers/directors of local area hospitals in which they wish to work after graduation.

As part of pediatric clinical rotations, students may choose to participate in Louisiana Lions-Louisiana Pulmonary Disease Camp Incorporated-Camp Pelican. Throughout the week-long overnight camp for children, students assigned to assist in care of campers with pulmonary disorders (some ventilator-assisted) make memorable friendships. Students may also choose to attend the LSU Day at the State Capitol, educating legislators about the respiratory therapy profession and lung health, and performing spirometry screenings.

During the spring semesters, junior and senior students take a mid-clinical break to attend the Louisiana State Society for Respiratory Care Educational Meeting and Exhibits held each year in Baton Rouge. They enjoy competing in the “Pelican Bowl” (State student sputum bowl competition) and have recently represented Louisiana at the AARC National Sputum Bowl Competitions, finishing tied for 5th place in 2015 and 2016 (Pictured L → R: Janelle Arnold, Stewart Scoggin, Sean Sasso; not pictured: Brielle Serpas).
Senior students complete the AARC Clinical Practices of Effective Preceptors course and gain teaching and leadership skills as student peer teaching assistants to junior students attending ICU rotations. This experience is invaluable as graduates working for many of our clinical affiliations provide preceptorship to our students.

**Curriculum**

**Respiratory Therapy Track**
*(Courses shown italicized include cardiovascular sonography students)*

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<thead>
<tr>
<th>JUNIOR YEAR</th>
<th>SENIOR YEAR</th>
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<tr>
<td>Summer Semester</td>
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<tr>
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<td>CPSC 4135</td>
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<td>CPSC 4205</td>
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<td>CPSC 3270</td>
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<td>CPSC 4225</td>
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<td>Spring Semester</td>
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<td>CPSC 3210</td>
<td>CPSC 4300</td>
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<td>CPSC 3370</td>
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<td>CPSC 3395</td>
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<td><strong>TOTAL CREDIT HOURS:</strong> 71</td>
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</table>
Applicants who hold a registered respiratory therapist (RRT) credential may attain a Bachelor of Science in Cardiopulmonary Science through completion of the associated track (shown below).

<table>
<thead>
<tr>
<th>RRT-to-B.S. in Cardiopulmonary Science Track</th>
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<tbody>
<tr>
<td><strong>JUNIOR YEAR</strong></td>
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<tr>
<td>Summer Semester</td>
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<tr>
<td>CPSC 3130 Cardiopulmonary Anatomy</td>
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<td>CPSC 3220 Cardiopulmonary Physiology</td>
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<tr>
<td>Fall Semester</td>
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<tr>
<td>CPSC 3270 Patient Assessment</td>
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<td>CPSC 3280 Cardiopulmonary Pathophysiology</td>
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<tr>
<td>CPSC 3290 Principles of Cardiac Electrophysiology</td>
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<td>Spring Semester</td>
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<td>CPSC 3210 Cardiopulmonary Pharmacology</td>
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<td>CPSC 3360 Medical Ethics</td>
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<td>CPSC 3370 Advanced Pulmonary Pathophysiology</td>
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<td><strong>TOTAL CREDIT HOURS:</strong> 33</td>
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**Faculty - Respiratory Therapy Program**

**Andy Pellett, PhD, RDCS, FASE** is Professor and Department Head in the Department of Cardiopulmonary Science. He is also Program Director for the Cardiovascular Sonography program. He obtained his B.S. (biological sciences) at the University of Vermont and his Ph.D. (physiology) at LSU Medical Center, New Orleans. He was a member of the Board of Directors of the American Society of Echocardiography (ASE) from 2014 to 2017, and devotes creative and editing efforts toward educational products and guideline publications of the ASE.

**John B. Zamjahn, PhD, RRT, RPFT**, is Associate Professor of Clinical Cardiopulmonary Science and Program Director of Advanced Respiratory Therapy (since 2004) in the Department of Cardiopulmonary Science. He obtained his respiratory care education/training from LSU Medical Center in New Orleans where he earned a B.S. (cardiopulmonary science) and MHS (health science). He obtained his Ph.D. (pathology) from LSU Health Sciences.
Center in New Orleans. He has held registry credentials from Cardiovascular Credentialing International for cardiovascular invasive specialist (RCIS) and cardiac sonographer (RCS) and has been an ACLS instructor since he joined the faculty in 1993. He serves on the Board of Directors of the Louisiana Society for Respiratory Care (since 2011) and on the Board of Directors of the CoBGRTE (since 2015).

**Helena F. Midkiff, MSHCM, RRT, RPFT, AE-C** is Assistant Professor of Clinical Cardiopulmonary Science and Director of Clinical Education for Respiratory Therapy in the Department of Cardiopulmonary Science. She obtained her respiratory care education/training from LSU Medical Center in New Orleans where she earned a B.S. in Cardiopulmonary Science. She was a member of the Department’s inaugural class. She obtained her M.S. in Health Care Management from the University of New Orleans. Previously, she was instructor in the respiratory care technology program at Delgado Community in New Orleans. Other experiences include Director of the Louisiana Technical College respiratory therapy program, supervisor of pulmonary diagnostic and neurodiagnostic labs at East Jefferson General Hospital, and gratis adjunct instructor for the Department of Cardiopulmonary Science.

**Carol Mason, M.D., FCCP** is Louis R. Cabiran Professor of Medicine, Section Chief of Pulmonary & Critical Care Medicine/Allergy & Immunology, and Vice Chair of Academic Affairs in the Department of Medicine. She is the Medical Director of the Respiratory Therapy program in the Department of Cardiopulmonary Science. She is Medical Director – Respiratory Therapy at the University Medical Center at New Orleans and the Ochsner Kenner Medical Center, Kenner, LA. She is board certified in internal medicine with sub-board specialties in pulmonary disease and critical care medicine. Her interests include general pulmonary diseases, mechanisms of pulmonary host defense against infections, *Mycobacterium tuberculosis*, and tobacco abuse and smoking cessation. Her most recent NIH/NIAAA grant of $1.125 million focused on alcohol and reactivation TB. She has been listed in *US News and World Report*’s “Top Doctors” in Pulmonary Medicine.

**J.M. Cairo PhD, RRT, RPFT, FAARC** is Professor of Cardiopulmonary Science, Physiology, and Anesthesiology and Dean of the School of Allied Health Professions. Dean Cairo served as Program Director of Respiratory Care and Department Head from 1990 – 2004. Dean Cairo has authored textbooks *Mosby’s Respiratory Care Equipment* and *Pilbeam’s Mechanical Ventilation: Physiological and Clinical Applications* and their companion workbooks.
Michael G. Levitzky, PhD is Professor of Physiology, Cardiopulmonary Science and Anesthesiology. He obtained his B.A. at the University of Pennsylvania and his Ph.D. at Albany Medical College of Union University, New York. He authored the textbook *Pulmonary Physiology*, and coauthored textbooks *Medical Physiology: A Systems Approach*, and *Pulmonary Pathophysiology*.

Terry L. Forrette, MHS, RRT, FAARC is Adjunct Associate Professor of Cardiopulmonary Science in the Department of Cardiopulmonary Science. He obtained his respiratory care education/training from Madison Area Technical College in Wisconsin where he earned an A.S. (respiratory therapy). He obtained his B.S. (allied health science) from Our Lady of Holy Cross in New Orleans, LA. He obtained his MHS (health science) from LSU Medical Center in New Orleans. He has over 40 years of experience teaching respiratory therapy students, of which 36 years has been with the Department of Cardiopulmonary Science. He works with Medical Specialties as a clinical specialist. He has presented over 275 lectures/presentations at State, National, and International venues, published numerous articles, and authored chapters in respiratory therapy textbooks. His areas of special interest/expertise include adult education and learning strategies, adult mechanical ventilation and trauma, indirect calorimetry, and physiologic monitoring. His career has included extensive service to the LSRC, NBRC, and AARC organizations.

Charlaine Ritter, BS is Administrative Assistant in the Department of Cardiopulmonary Science. She obtained her B.S. (business administration) from LSU, Baton Rouge. She joined the Department in September, 2015.

Contact Information
Louisiana State University Health Sciences Center
School of Allied Health Professions
Department of Cardiopulmonary Science
1900 Gravier St.
New Orleans, LA 70112
(504) 568-4229
http://alliedhealth.lsuhsc.edu/cp/defaultRT.aspx.
Qualified Site Visitors Needed

Shane Keene, DHSc, MBA, RRT, RRT-NPS, CPFT, RPSGT, FAARC
Associate Executive Director
Commission on Accreditation for Respiratory Care

The Commission on Accreditation for Respiratory Care (CoARC) is looking for qualified site visitors. The CoARC is honored to have had some of the best respiratory care faculty and physicians serve as site visitors. Many of our seasoned site visitors become team captains and some have continued to serve as commissioners for the board. The CoARC benefits from the experience and individualism that each site visitor brings. Site visitors have the benefit of learning from other programs that are innovative and quality driven. Additionally, they act as consultants to help programs problem solve and develop solutions to help achieve optimal accreditation outcomes.

Qualifications for Initial Appointment as a Site Visit Team Member

To be eligible to become a site visit team member, an individual must meet or exceed all the qualifications for one (1) of the three categories (A-C):

A. Academic Team Member:
   1. At least three (3) years of experience as a senior academician (e.g., dean, associate dean, department chair, program director, director of clinical education, or senior faculty member holding the rank of associate professor or higher) within the last 10 years at program(s) holding initial or continuing accreditation;
   2. At least five (5) years as an NBRC-credentialed registered respiratory therapist;
   3. Earned baccalaureate degree or higher from an academic institution accredited by a regional or national accrediting agency that is recognized by the U.S. Department of Education (USDE);
   4. Demonstrated active involvement in the profession of respiratory care (e.g., membership in professional organizations, credentialing, and research record);
   5. Has prepared or contributed to the preparation of a self-study report; and involved in a site visit or observed a site visit.

B. Physician Team Member:
   1. At least three (3) years as a board-certified, licensed physician, credentialed at or has been credentialed at one of the clinical affiliates of a CoARC-accredited program, with recognized qualifications, by training and/or experience, in the management of respiratory disease and in respiratory care practices;
   2. Hold appropriate state credential to practice, or be a retired physician in good standing who is otherwise qualified as determined by the CoARC;
3. Demonstrated active involvement in the profession of respiratory care (e.g., membership in professional organizations, specialization, or research record).

C. Sleep Specialist Team Member:
1. At least three (3) years of experience as a faculty member within the last 10 years at program(s) holding initial or continuing accreditation;
2. At least five (5) years as an NBRC-credentialed registered respiratory therapist;
3. At least three (3) years as an NBRC-credentialed sleep disorders specialist (SDS) or BRPT-credentialed registered polysomnographic technologist;
4. Earned associate degree or higher from an academic institution accredited by a regional or national accrediting agency that is recognized by the U.S. Department of Education (USDE);
5. Demonstrated active involvement in the profession of respiratory care and polysomnography (e.g., membership in professional organizations, credentialing, and research record).

D. Degree Advancement Site Team Member
1. At least three (3) years of experience as a faculty member within a degree advancement program and/or currently serves as the program director for a degree advancement program;
2. At least five (5) years as an NBRC-credentialed registered respiratory therapist; or, meet the criteria as a physician team member who has significant experience with degree advancement education;
3. Developed a respiratory care degree advancement program in its entirety and/or has developed courses within the program;
4. Earned master’s degree or higher from an academic institution accredited by a regional or national accrediting agency that is recognized by the U.S. Department of Education (USDE) (CoARC, 2016).

The CoARC currently has a need for site visitors for degree advancement, sleep specialists, and physician team members. If you are qualified for any of these opportunities, please email your Curricula Vitae to shane@coarc.com. If you are selected, you must attend the mandatory online site visitor training and you will be placed with a seasoned team captain for your first site visit. The service commitment to maintain your status as a site visitor is to complete at least one site visit per year.

REFERENCES

CoBGRTE (as a stand-alone professional organization) is SIX YEARS OLD! CoBGRTE has made significant accomplishments; however, more work still needs to be done! In mid-November, CoBGRTE launched the 500 in 50 campaign. During the last 50 days of 2017, our goal is to reach 500 student members. More than ever, we need to engage and inspire the future practitioners of the respiratory therapy profession.

CoBGRTE’s officers, board of directors, and committees have had another productive year. CoBGRTE awarded Wade Jones CoBGRTE’s first Lifetime Membership Award. The CoBGRTE Roundtable Discussion (held in conjunction with the AARC International Congress in Indianapolis) was a huge success! I learned so much about California’s move to the RRT for licensure. CoBGRTE continues to collaborate with the AARC as both organizations assist associate degree programs who plan to move to the bachelor’s degree. I invite members to serve on a CoBGRTE committee. Please see the October issue of The Coalition Chronicle for President-Elect Shelledy’s Call for Volunteers.

Can you believe 2018 is almost here?! Please join me in renewing your CoBGRTE membership or becoming a new member! If active members renew or join by December 31, 2017, their name will be placed in a drawing for an iPad Mini 4 (128 GB). Please go to http://www.cobgrte.org/membership.html and renew or join today! CoBGRTE needs you as we continue our important work in 2018. A special note to program and department directors – Institutional Membership dues remain at $125 for 2018 and includes one active membership. Institutional Membership invoices will be mailed out in early December.
The Old Spaghetti Factory was the host for the 2017 CoBGRTE Round Table Dinner discussions in Indianapolis. Like our conversations, the meals were an enjoyable experience with the opportunity to gather, renew, and discuss issues within our profession. Guss and Sally Dussin opened their first restaurant in Portland, Oregon in 1969 with the guest experience in mind. They provided our group of around 60 attendees the personalized service and attention that we ask of each participant when committing to engage in this networking opportunity. Developing an academic community across the country is an enjoyable and refreshing way to grow our professional capacity.

Our group consisted of faculty, administrators and recent graduates who had the opportunity to share a wide variety of perspectives on each discussion topic. Some topics persist as “wicked” challenges to our profession, such as, promoting credentials, faculty, improving the profession, and apathy. Other more “linear” challenges were tackled that include developing international programs, providing affiliate licensure support, developing faculty standards, curriculum standards, and supporting new BSRT/MSRT students. While the table topics provide structure, each individual help shape the conversations in organic ways that results in an experience that is unique.

We reflected on the dinner conversations and topics posed to us at each table. It became clear that the areas of inspiration came from a deeper understanding how connecting to individuals would be an important ingredient to the approaches we take. “We need to work more closely with department directors/managers” to emphasize the importance of both professional and academic credentials. Engaging in platforms where directors and managers are communicating, collaborating and networking may help us connect the need for more baccalaureate and graduate programs.

Leadership communities that share effective uses of clinical ladders, professional development, and management strategies can prove useful to mentors new leaders in our profession. States that have been successful at managing licensure requirements (i.e. California and Ohio) can share strategies, data and obstacles overcome. Relationships between the respiratory therapy profession and physicians could be enhanced by moving licensure under the board of medicine in each state. Support of physicians is essential to grow the profession in areas of advanced practice, creating greater financial incentives, and demonstration of standards that improve patient safety.
One strategy that may help foster deeper relationships includes having targeted conversations, platform, or meetings with new faculty to promote networking and mentorship within academia. The academic community could share resources in areas of research, program management, faculty development and international program development to grow the profession. We could demonstrate the importance of inter-professional education/training to garner greater respect and integration for our role within healthcare conversations. The growth of academic programs outside of the United States offers CoBGRTE an opportunity to increase the number of qualified faculty from our group.

The profession needs to demonstrate quality patient care correlates with increased academic and professional credentials. It is concerning that professionals are not “unified” in requiring the RRT for licensure and yet many agree that the CRT needs to be removed as a credentialing option. Industry is already making the hiring decisions in many areas that require the RRT for consideration and not yet the BSRT. Professional standards and expectations will be difficult to overcome but national leadership in recent years has provided a pathway to growing the profession and the momentum needs to be maintained. We need professional unity to move forward.

The overall dinner experience was well received. “It’s wonderful to sit with people from other parts of the U.S. and hear what they are facing.” Many educators met for the first time as some seasoned educators and frequent Round Table attendees were energized by the fresh perspectives. “I really enjoyed the opportunity to get to know a couple of new people.” Some of these valuable conversations are brought home for further inquiry and discussion impacting communities across the country. “As a new graduate, it was great to speak with others in the field.” One participant shared his experience with a delegate from Singapore, who is interested in creating respiratory care programs. Another discussed inquiry was from Nepalese physicians who asked the question, “Who manages your ventilators?” The idea that needs are growing across the globe, offering opportunity for seasoned educators to share our experiences, is remarkable. Ideas and solutions can come from these Round Table discussions if we continue to foster a growing network of leaders interested in the future. Please join us next time in San Antonio for the Summer Forum and Vegas at the International Congress, 2018.
Jones & Bartlett Learning is pleased to support CoBGRTE

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Neil R. Marklyne, MEd, FAARC
William F. Guirr, MEd, RRT, CFFT, AC-C, FAARC
Shelley C. Mishee, PhD, RRT, FAARC
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- Exploration of the technical and professional aspects of respiratory care
- Reviews respiratory assessment, pathophysiology, and core clinical science
- Cross-references the NBRC examination questions
- User-friendly content specifically for the anatomy and physiology of respiratory, cardiac, renal, and neural systems
- Expanded, revised, and enhanced resources for students and instructors
- Navigate 2 Advantage Access includes Case Studies, Image Bank, and Animations

Respiratory Care: Patient Assessment and Care Plan Development
David C. Sherlock, PhD, RRT, RRF, FAARC
Jay I. Peters, MD
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620 pages • © 2016
- Guides students through reviewing existing data in the medical record, conducting the patient interview, performing the physical assessment
- Students will learn how to implement appropriate respiratory care plans
- Covers content needed to pass the NBRC respiratory care examinations
- Clinical Focus: Clinical case studies offer opportunities for critical thinking and application of essential concepts
- RC Insights: These tips provide the clinician with useful information on patient assessment and management
- Navigate 2 Advantage Access includes Image Bank and Animations

Equipment for Respiratory Care
Teresa A. Vesico, MEd, RRT, FAARC
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Hardcover with Navigate 2 Advantage Access
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1. Award scholarships to baccalaureate and graduate respiratory therapy students.
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3. Collectively work towards the day when all respiratory therapists enter the profession with a baccalaureate or graduate degree in respiratory care.
4. Support a national association, representing the 63 colleges/universities awarding baccalaureate and graduate degrees in respiratory care, to move forward the recommendations of the third 2015 conference.
5. Help start new baccalaureate and graduate RT programs thus leading to a higher quality of respiratory therapist entering the workforce.
6. Work to change the image of the RT profession from technical-vocational-associate degree education to professional education at the baccalaureate and graduate degree level.
7. Join colleagues to collectively develop standards for baccalaureate and graduate respiratory therapist education.
8. Develop public relations programs to make potential students aware of baccalaureate and graduate respiratory therapist programs.
9. Help to publicize, among department directors/managers, the differences between respiratory therapists with associate, baccalaureate and graduate degrees.
10. Help to support maintaining a roster and web site for all baccalaureate and graduate respiratory therapist programs.

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